

# Thurrock Fostering Agency

Inspection report for LA Fostering Agency

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<b>Inspector</b>	Janet Manders / Sue Michowicz
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<b>Date of last inspection</b>	20/11/2006

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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 fostering service is funded and managed by Thurrock Council. The service is a significant aspect of the provision offered for looked after children.

The service has 109 foster carers who provide placements for 179 young people. In addition the service has developed a specialist therapeutic foster care scheme, which assists in providing placements for young people with more challenging behaviour. This service currently has nine foster carers who provide placements for 18 young people.

The office is based in The Civic Centre in Grays. There is parking nearby and rail and bus links. The office space is shared with adoption and shared care staff.

## **Summary**

The overall quality rating is satisfactory.

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

This is an announced key inspection. It focuses on the 17 key Standards relevant to this fostering service. These include National Minimum Standards (NMS) relating to health, staying safe, enjoying and achieving, making a positive contribution and organisation. The inspection also included consideration of NMS 2, 5 and 22, relating to the management of the agency and its premises and the support to foster carers. The inspection considered the progress made by the fostering service in meeting the requirements and recommendations made at the last inspection.

The inspection found that the fostering service is providing a satisfactory level of care to young people placed with foster carers. The service has been affected in making further progress by the re-configuration of the fostering and adoption service, which has resulted in the disruption of the teams. However, the appointment of a manager specifically for the fostering service should provide the necessary guidance for continued improvement in the service.

### **Improvements since the last inspection**

Only one requirement was made at the last inspection, this related to the need for two written references to be sought for new employees of the service. This shortfall has now been addressed and at least two written references were seen on files examined.

Three recommendations were made at the last inspection regarding ensuring that foster carers consistently meet all the needs of young people and for the fostering service to recruit more foster carers to meet the needs of young people requiring a

placement. Since this time the service had re-designed supervision records, using the Every Child Matters outcomes, to ensure that foster carers are meeting young people needs. Further attempts have been made to recruit more foster carers; in addition work with surrounding authorities has resulted in the development of positive relationships with local independent fostering agencies, which can provide specialised placements when required.

## **Helping children to be healthy**

The provision is satisfactory.

Young people's health needs are generally well met by the fostering service and its foster carers; however, a lack of clear guidance regarding the arrangements for giving consent for treatment could potential delay treatment and risks the health of the young person.

Foster carers ensure that young people are registered with relevant health care professionals and make sure that young people's health is monitored regularly. A Looked After Children's (LAC) nurse, provides additional support to foster carers to enable them to meet the needs of young people. 69% of young people receive an annual medical assessment; there is a range of resources available to undertake these assessments. However, not all staff are aware of the arrangements and this could influence the lower than expected take up of young people who receive an annual assessment. The LAC nurse assists in undertaking annual health assessments, in the foster carer's home if this is more suitable for the young person. In light of the findings of these assessments detailed health plans are sometimes developed to ensure that young people, with the assistance of their foster carers, continue to strive for a healthy lifestyle. Health plans are not developed on a consistent basis. Foster carers are encouraged and supported by the LAC Nurse and by their supervising social worker to provide healthy, nutritious food.

Foster carers confirmed that they usually received information regarding the health needs of the young person; however, they did not consistently receive appropriate guidance regarding consent for the young person to receive medical treatment, this was especially the case where a young person is placed with foster carers in an emergency. Lack of clarity regarding medical consent could potentially delay a young person from receiving medical treatment.

Foster carers maintain detailed records of young people's health; these are discussed during regular supervision visits and are used to inform young people's statutory reviews. Foster carers are supported in meeting young people's health needs by training events arranged by the fostering service; however, the annual programme does not include first aid training. Foster carers who provide care for young people with disabilities stated that they would benefit from training in respect of administering medication.

## **Protecting children from harm or neglect and helping them stay safe**

The provision is satisfactory.

The fostering service has in place acceptable policies and procedures to ensure that young people are kept safe; however, gaps in some areas could potentially put young people at risk.

The manager and staff are suitable to work with young people and appropriate checks have been undertaken in respect of them. The recruitment of staff is overseen by an independent company who do not have clear policies or procedures, which are known to all staff, regarding the appointment of staff from overseas. Whilst check in the country of origin were on file, these had not been appropriately translated to confirm that the person was suitable, qualifications were not always on file, although in respect of the manager these had been requested. The service does not have a policy regarding the retention of Criminal Record Bureau (CRB) checks until seen by the inspectorate, consequently most CRBs had been destroyed prior to the inspection.

The fostering service ensures that foster homes are suitable for the young people placed in them. It achieves this through annual health and safety checks, unannounced visits and relevant training for foster carers. Nonetheless, in some circumstances the health and safety assessments had not been reviewed within the required timescale, this was due to recent slippage in the timing of foster carers' annual reviews, which are undertaken at the same time as the health and safety checks.

The fostering service has systems in place to ensure that children are well matched to foster carers. A detailed risk assessment is completed at the time of referral so that the service can appropriately match young people's needs to carers' skills. Those young people visited as part of the inspection were well matched with their foster carers; in addition foster carers stated that they felt that young people were usually well matched with their skills. Where it becomes evident that a foster carer cannot meet the needs of the young person a planned move is arranged. The appointment of a full time duty work has greatly improved the service's ability to successfully match young people to appropriate foster carers.

The fostering service has also developed a therapeutic fostering scheme; this enables those young people with complex needs who require therapeutic input to receive therapeutic care with experienced foster carers. These foster carers receive additional support and assistance from qualified social workers and a psychologist. Young people placed with foster carers from this scheme are very carefully matched.

The fostering service endeavours to keep young people safe by ensuring that foster carers are clear regarding the risks involved in caring for young people. Risk assessments are completed at the beginning of placements and are reviewed regularly by core groups. However, foster carers commented that they frequently did not receive all necessary information regarding a young person when they were

placed and some foster carers had not received the risk assessments which had been undertaken. This could result in the appropriate care not being offered to the young person.

The fostering service does not have a policy in relation to safer caring and carers have not developed safe care policies for their own homes and the children placed, although safe caring is discussed during pre-approval training. Discussion with foster carers indicated that there is a lack of clarity regarding the use of restraint with young people although the service does provide training in respect of managing challenging behaviour. In addition the foster care agreement does not require foster carers to comply with the service's child protection, young people missing from home and measures of control policies. The fostering service does not record and monitor incidents where restraint has been used. This lack of consistency, monitoring and guidance could potentially result in young people being harmed.

The fostering panel was not observed as part of this inspection. Previous inspections and minutes from the last three panels indicate that there is a high level of scrutiny by panel members of all reports presented to the panel. This ensures that good quality decisions are made about the approval of foster carers. However, the procedures governing the operation of the panel do not include the procedures as to the action to be taken when not all members are in agreement. Additionally the notices of approval issued do not contain the foster carers' terms of approval, age range and numbers of young people who can be cared for and refers to previous legislation rather than the Fostering Services Regulations 2002.

## **Helping children achieve well and enjoy what they do**

The provision is good.

Young people placed with foster carers are encouraged to enjoy and achieve as staff and carers are aware of the importance of promoting individual needs within the foster placement.

The fostering service demonstrates a high priority in meeting the demands of diversity through relevant policies, appropriate recruitment of carers and staff, which endeavour to reflect the local community. However, due to the high level of unaccompanied asylum seekers who have required placement by the service, there are a number of trans-racial placements. The service has used local independent agencies in some cases to meet the needs of these young people. Training on valuing diversity is provided for both staff and foster carers to assist them to support young people in building self-confidence and a clear sense of identity.

Young people are supported to learn and achieve. Staff and carers promote the educational needs of young people by having appropriate contact with schools and educational professionals, with access to private tutors for young people who require this to achieve their potential. This has resulted in a high number of young people achieving five GCSEs at A\* - C. There are systems in place to monitor the educational attainment and achievement of young people to ensure they attain their

full potential. Young people reported that they are supported by their foster carers and the fostering service to pursue personal interests, including drama, music, sports and some young people have been financially supported to learn to drive.

The fostering service provides shared care placements for young people with disabilities. This is an effective service for families of young people with disabilities in which the role of the parents remains central. The service is well supported by both the disabled children's team and the fostering team. Parents, young people and foster carers spoke highly of the support they received.

There are clear policies and procedures for the service, which recognise that the parent remains the main carer for the young person.

### **Helping children make a positive contribution**

The provision is good.

Young people are encouraged and supported to maintain contact with family and friends where this is appropriate. Young people stated that they were happy with arrangements for their contact with their families and that they were consulted in respect of this contact. Arrangements for contact are clearly established and recorded at the outset of placement; arrangements are reviewed in the course of the placement and records revised.

Foster carers were seen to support often very complex contact arrangements, providing transport and where appropriate supporting contact in their own homes. Where contact has to be supervised, this can be undertaken at the Oak Tree resource centre. Foster carers are supported in the task of facilitating contact by the supervising social worker during regular supervision sessions, when each young person's contact arrangements are discussed. Foster carers receive training on the importance of contact and how they can facilitate it in their preparation training.

Young people reported that they were listened to by their foster carers regarding their day-to-day care and that their views are listened to at their statutory reviews. However, the service does not seek the views of young people as part of their foster carer's annual review, relying only on indirect information ascertained by the young people's social worker.

The fostering service provides a number of different activities and recreation days, which affords the opportunity to engage with young people. Young people's views were sought in relation to the training, recruitment and retention of social care workers as part of the Workforce Development Strategy and the development of a drop-in centre for young people who have moved into independent accommodation. Young people have also been involved in joint training with foster carers, and have co-lead pre-approval training which enables young people to share their views with foster carers. This is excellent practice.

Young people are provided with clear information as to how to make a complaint and



are able to access an independent advocacy service (URSAY) run by a local voluntary sector provider. The service meets regularly with managers to ensure that complaints and concerns voiced by young people are acted upon. The same provider has also developed and implemented an Independent Visitor Scheme and Mentor Scheme.

All complaints, including informal complaints are dealt with by the complaints manager. Evidence provided to inspectors indicates that all complaints are dealt with thoroughly and that lessons are learnt and changes put into practice as a result of complaints.

## **Achieving economic wellbeing**

The provision is not judged.

## **Organisation**

The organisation is satisfactory.

The fostering service has a clear Statement of Purpose which was updated in February 2008 and reflects its ethos and practices. It covers all the matters required by regulations. The service has produced an excellent Children's Guide which provides useful information for young people as to what to expect when in foster care. However, this guide is not a useful document for younger and less able young people.

In light of recent changes in the service, a new manager has been appointed to be responsible specifically for the fostering service. He is an experienced manager and has already commenced the process of introducing robust systems for monitoring the service. Whilst it is acknowledged by senior managers that he does have gaps in his fostering knowledge, he is well supported in this area by an experienced practice manager. The practice manager deputises for the manager in his absence. There are clear schemes of delegation and accountability within the fostering service.

The manager and practice manager provide positive guidance and support for staff within the service, with monthly supervision, regular team meetings and annual appraisals. All staff commented that they have good access to training courses to ensure that their practice remains up-to-date but accept that there is a need for the team to re-form and settle after the recent changes to the organisation of the service. The service has an adequate number of appropriately qualified social work staff. Administrative support is provided by an independent agency, which has not always provided a stable staff team, this has impacted negatively on the support available to staff and foster carers. Inspectors were informed that it is now hoped that the appointment of permanent administrative staff will help ensure that support will be more effective.

Like all local authorities Thurrock does not have sufficient foster carers to meet the

need for placements, consequently they have worked with other authorities to develop a positive working relationship with the independent sector, which will enable more flexibility in placements. As indicated in other parts of the report the service struggles to find appropriate matches for young people from different ethnic backgrounds, due to the high level of unaccompanied asylum seekers. The service has renewed its efforts to recruit more foster carers from a wide range of backgrounds to meet this need.

The assessment of new foster carers is undertaken by either members of the fostering team or appropriately selected, interviewed and supported independent assessors. Assessments are based on British Association for Adoption and Fostering (BAAF) guidance and explore all required areas during the assessment. Assessments measure the skills and abilities of potential foster carers.

The fostering service has a clear strategy for supporting foster carers and carers generally commented positively about the support they received from the service, although they felt the service deteriorates when staff are away from work due to illness, as they can be left without any direct support for a number of months. Foster carers are clear about the agency's expectation of them and of the support they will receive from the agency, but there is a need for the Foster Care Agreement to be updated so that it contains all required areas.

Foster carers receive regular supervision; most foster carers have had their approval reviewed annually by an independent member of the team. Changes in the service has resulted in some slippage in undertaking reviews; however the manager is clear that reviews are now up to date. Occasional unannounced visits are undertaken; but these have not always been consistently recorded and it is therefore difficult to ascertain whether they have been undertaken for all foster carers.

The fostering service ensures that an up to date, comprehensive record is maintained for each foster carer and young person in foster care. The authority has developed a robust system of independent quality assurance regarding the content and quality of recording. Foster carers are expected to keep detailed records of children and young people they look after which are returned at the end of placement; foster carers store all information securely.

The service supports only 10 family and friends foster carers, who provide 30 young people with a placement. They are supported and supervised in the same way as other foster carers and have access to the foster carers training programme.

## **What must be done to secure future improvement?**

### **Statutory Requirements**

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Fostering Services Regulations 2002

and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

Std.	Action	Due date
12	ensure that foster carers' training includes health, hygiene, first aid and safety Regulation 17 (1)	18/07/2008
12	provide foster carers with information regarding the arrangements for giving consent for a young person's medical or dental examination or treatment Regulation 17 (3)	18/05/2008
15	develop clear procedures for the recruitment and selection of staff, which are known and followed by staff, to ensure children are protected, especially in relation to the recruitment of staff from overseas Regulation 20	18/06/2008
9	give foster carers such information to enable them to provide appropriate care for the child placed Regulation 17 (3)	18/05/2008
9	ensure that safe caring guidelines are in place for each foster home, based on written guidance Regulation 12	18/06/2008
30	give each approved foster carer a notice in writing specifying the terms of the approval, for example the number and age range of young people to be placed, which should refer to current legislation Regulation 28 (5)	18/05/2008
22	ensure that all foster carers have an up to date foster care agreement which includes all the matters as set out in Regulation 28(5)(b) Schedule 5.	18/06/2008

## Recommendations

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

- develop a written health record for each child placed with foster carers, so that it is clear what action is required to maintain the young person's health (NMS 12.4)
- inform all staff about health services, including specialist services, available in the area it covers, so that it is clear how and by whom young people's annual medical assessments are undertaken (NMS 12.2)
- provide training on health issues, with particular attention to administration of medication for those foster carers who provide care to young people with complex medication regimes (NMS 12.5)
- develop a policy regarding the retention of CRB checks, so that they are available for inspection (NMS 15.2)
- inspect foster homes annually to make sure that they meet the needs of foster children (NMS 6.2)
- provide a Children's Guide which is suitable for all young people, including younger children and those less able (NMS 1.5)
- continue the development of procedures for monitoring and controlling the activities of the fostering service and ensuring quality performance (NMS 4.1)
- undertake occasional unannounced visits, at least one each year to all foster

carers and ensure that these visits are accurately recorded. (NMS 22.6)