

# Blackburn with Darwen 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**

Blackburn with Darwen Fostering Service forms part of the Borough's services to children and families. Social workers in the family placement team recruit, assess and support people who are approved as foster carers. At the time of the inspection 115 fostering households provided long term, short term and respite care placements to 167 children and young people looked after by the borough council.

## **Summary**

The overall quality rating is satisfactory.

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

The family placement service supports carers to achieve good outcomes for children. A range of services has been developed to provide children and foster carers with accessible resources to maintain placements and meet children's needs. The service has developed good relationships with other agencies, such as health and education and the local community.

There are a number of areas, however, where systems are inconsistently implemented and where monitoring of work and the management of the service is not sufficiently robust. This has led to variable practice in assessing and supporting carers and meeting children's needs. The fostering service is aware of the areas where improvement is needed. It has plans for a comprehensive review of practice and intends to set out clear targets for change.

### Improvements since the last inspection

A number of areas were identified at the last inspection as being in need of improvement. These have been addressed as part of the continuing development of the fostering service. The main issue was the management of the service. There was a lack of effective systems to support carers and children and insufficient monitoring of practice to provide consistency of policies and procedures.

Checking the nature and timeliness of the information that is given to foster carers about children to be placed has become more robust. This has ensured that carers are given more comprehensive details about the children they are being asked to look after and that matches between children and carers are more suitable. Foster placement agreements have been revised and are produced for each child placed. Copies of the agreement are located on the child's file. These demonstrate how carers will provide care for specific children.

The fostering panel has had training. It now has access to medical advice. The quality assurance process has become more robust. The systems for checking the quality of information presented to panel have improved by the introduction of a "gate keeping" system. These changes have enabled the panel to improve its independent scrutiny of the fostering service.

Social workers are more systematic about ensuring carers have copies of all legal orders relevant to children placed with them. Carers thus have better information to keep children safe.

Foster carers' reviews are presented to a newly-created reviewing panel. This panel provides independent scrutiny of the practice of the fostering service.

Family placement social workers have had training on foster carer assessments and are becoming prepared to undertake more effective and evidence based assessments of prospective carers.

Foster carers have had training on recording and the practice of recording is monitored by the supervising social workers so that the service can monitor the care given to children.

Assessments of family and friends who wish to become foster carers have been improved by better joint working between children's social workers and the social workers of the family placement team.

#### Helping children to be healthy

The provision is satisfactory.

Children's health needs are identified and met. The Statement of Purpose and foster carers' handbook ensure that foster carers are aware of their responsibilities to children.

Children's health care needs are identified in the assessment and placement planning information provided to carers. Carers are offered training, supervision and support that ensures they have the skills to meet the needs of children for whom they care. The service is planning to encourage more family and friends carers to access the training provided.

The statutory review process monitors the child's overall care plan and ensures that targets in meeting health care needs are achieved.

The Looked After Children's nurse is employed by the health authority and works closely with the family placement team and other health professionals to provide assistance and support to social workers and children. This ensures that children are able to obtain the treatments they require as quickly as possible. The nurse is also a member of the fostering panel and so is better able to understand a range of issues to do with the family placement service.

Carers and children also receive assistance from multi-disciplinary services that provide advice and support on psychological matters that relate to the children they are looking after.

Children who are looked after have an annual health care assessment. Not all children currently have had this assessment, although the majority of the children are very recently looked after. Not all health care assessments are translated into agreed and formal health care plans and some carers are not aware of the need for such a plan. This increases the risk that the people involved in the care of the child may not be working in a coordinated fashion to achieve specific outcomes and the service may therefore be reliant on the foster carers' own initiatives to achieve good outcomes for children.

The recording of the administration of medication is being improved through the

issue of specific forms for carer's use. Consent to medical treatment is delegated to carers via the "Looking After Children" (LAC) documentation and an additional consent form created by the children's service. This does not provide information about the legal status of the child, identify the senior officer of the council who has signed the document, or provide any contact information for checking. The care of treatment is potentially compromised by this inconsistency in practice.

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

The provision is satisfactory.

Staff involved with the family placement service are employed within the procedures of the borough council and are therefore subject to all the necessary checks that ensure they are safe to work with children.

Foster carer's homes are assessed for compliance with health and safety standards, and these assessments are updated through regular supervision and foster carers' review procedure. Foster carers' homes are comfortable, warm and appropriately furnished and equipped. Children have their own rooms when they are old enough.

Children are matched with carers who have been assessed to meet their needs. The service recognises that it does not have sufficient foster carers to provide the ideal match for all children who need placement. In these cases carers are subject to variation of approval through the foster panel. The matching process and foster placement agreements cover any shortfalls in support. Children are supported by foster carers who are aware of their responsibilities to protect them from bullying, to provide safe care and to ensure risk assessments on children are reviewed and updated.

Foster carers are trained, supported and supervised so that they can care safely for children.

The service maintains a register of allegations, complaints and compliments. The information contained in this file is not accessible or easy to monitor. There is no standard format for recording incidents and no effective way of checking on the substantive issue, the actions of the team and the outcome of any investigation.

The fostering panel operates according to its written protocol and procedures. It does not have a

member who has been looked after or who has had a child who has been looked after. There are plans to recruit somebody to fill this position.

The fostering panel is not always provided with complete information, such as previous panel minutes. Information on similar items is presented in an inconsistent way. Some foster carer assessments are descriptive and contain little analysis. The role of "panel gatekeeper" is not implemented in a sufficiently robust fashion. Panel members may not therefore always have enough information on which to make their judgements. Although the panel operates a quality assurance function at the end of each item this is not yet collated over time to provide information on the overall quality of care provided by the family placement service.

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

The provision is good.

The fostering service sets out its commitment to anti-discriminatory practice in a number of ways so that foster carers and other professionals are aware of their responsibilities. For example, there is an Asian representative on the fostering panel and the service has close links with the Muslim community. A number of carers are from ethnic, particularly Asian backgrounds. Children are placed with carers who can meet their needs in relation to ethnicity, religion and culture. The initial assessments and training of foster carers cover issues to do with anti discriminatory practice. The competence of carers is monitored through the supervision and review process. Training and support is provided so carers can continue to be able to meet children's needs. The progress in meeting children's needs is monitored through the statutory review process. Interpreters are available for use in all family work, especially in supervision and contact. Children are supported to do well and achieve their potential. The service uses available resources to encourage the educational achievement of children and provides guidance to carers on supporting educational progress. Good educational outcomes are achieved and the service can demonstrate how its resources and the

Although every child had a Personal Education Plan not every carer had a copy. Carers said they had not been involved in drawing up the plan. Supervising social workers are not routinely checking the plan with carers.

support of other relevant services increases the achievements of children.

#### Helping children make a positive contribution

The provision is good.

The practices of the fostering service ensure that maintaining and developing family contacts and friendships of children placed with carers are integral to the service provided. This is emphasised through training and support given to carers. Children's views and wishes are sought with regard to contact with those people significant to them and are carried out wherever these are in the best interests of the child. Contact issues are covered in core group meetings, foster carers' supervision and the statutory "LAC" reviews. Children confirm that they are supported to have contacts with people who are important to them.

Children are asked for their views in a number of ways, both formal and informal. Children are confident and comfortable with the carers with whom they are placed. The service continues to develop and review its participation strategy to ensure the participation of children at every level.

#### **Achieving economic wellbeing**

The provision is good.

Foster carers are given clear information about the rates and allowances to which they are entitled. They are paid in full and on time. The rates and allowances enable carers to support children in routine daily activities and leisure pursuits in accordance with their identified needs. Problems with payments are quickly resolved and carers feel confident about the support that they receive from the family placement service. The service has developed flexible finance schemes to support young people in taking more financial responsibility for themselves.

There are clear expectations about carers' responsibilities in supporting young people into adulthood and independence. The system for developing "Pathway plans" ensures there are detailed guidelines to which all people involved in the care of children operate. Young people are involved in the creation and implementation of the plans. Foster carers are supported by the fostering service to meet the identified needs of young people and support them as effectively as possible.

#### **Organisation**

The organisation is satisfactory.

The fostering service has a clear statement of purpose that was reviewed in August 2007 and a children's guide to the service. These provide children and carers with thorough and comprehensive information about the fostering service and its values, aims and objectives. When fully staffed the team has sufficient resources to meet the needs of the children for whom it provides a service. The recent shortfall in staffing has been partially covered by the employment of an agency worker.

The management arrangements of the team are complicated and have led to some inconsistency of practice and lack of clarity about responsibility. Existing systems are not implemented or monitored as effectively as they may be. Senior managers confirm that the management practices of the team are in need of improvement to ensure greater consistency in supporting carers to meet children's needs. For example the practice of social workers in supervising foster carers varies. Supervising social workers do not operate consistently in implementing their responsibilities to ensure the service maintains a child-centred focus. Some carers do not receive an unannounced visit and the quality of foster carers' case recording is variable and foster carers are unclear about their responsibilities in recording children's progress. The quality of foster carer assessments and reports for foster carer reviews is also variable.

It is intended that the monitoring and quality control of work will improve with the anticipated change in management structure and responsibilities. A comprehensive review of the implementation of the systems and processes under which the team operates is planned.

Staff receive training, regular supervision and attend team meetings and team

briefings. Managers are accessible and social workers are supported through both informal and informal systems. The practice of staff is monitored. Staff feel they are able to contribute to the development of the service.

Foster carers are well supported by the supervising social workers. Regular visits, supervision and training are provided. Foster carers' reviews are scrutinised by a newly created independently chaired review panel. This process identifies issues arising from the review and ensures that reviews are carried out effectively. For example, it has identified that current practice does not enable children's views to be routinely obtained as part of the annual review of foster carers.

The service supports an increasing number of foster carers who are "family and friends". It is recognised that the existing structure and organisation of the team does not provide sufficient support to this increasing area of work. The working protocol describing the relationship between the placing social work teams and the family placement team is inconsistently implemented. Plans are in place for a specialist worker to be recruited in order for this area of work to be undertaken more effectively.

# 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):

- ensure that all carers are provided with a health care plan for each child in placement (NMS 12)
- ensure that all carers have effective delegated consent to medical treatment for children placed with them (NMS 12)
- ensure that there is an effective management system to collate and evaluate the number of allegations, concerns and complaints about foster carers (NMS 9)
- ensure that the fostering panel always has sufficient and complete information on which to base its recommendations (NMS 30)
- ensure that the fostering panel provides a quality assurance function on the operations of the family placement service (NMS 30)
- ensure every carer has a copy of the child's Personal Education Plan and that the carer is involved in the compilation of the plan (NMS 13)
- ensure that supervising social workers have clear guidelines about their responsibilties and that their practice is effectively monitored (NMS 21)
- ensure that there are clear practice guidelines for foster carer recording and that carers' practice is monitored (NMS 24)
- ensure that every carer receives at least one unannounced visit a year (NMS 22)
- ensure that the views of children in placement are routinely established as part of the annual review of foster carers (NMS 11)
- review the procedures for the initial assessment of family and friends carers.