

Bournemouth Fostering and Placements Team

Inspection report for LA Fostering Agency

Unique reference number SC042327 Inspection date 31/10/2008

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Type of inspection Key

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Date of last inspection 30/05/2007



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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

Bournemouth Borough Council's Fostering and Placements Team is managed within the Borough's Childcare and Family Support Services structure. A children's services manager and a team manager are responsible for the management of the fostering team. The team has responsibility for the recruitment, assessment, training and support to all of the foster carers, shared carers (those that provide short term breaks for children with a disability), pathway carers, kinship carers and private foster carers. The team consists of eight qualified social workers, two part time senior practitioner, an accommodation social worker (young people leaving care), a family support worker, a social work assistant and a recruitment and placement development worker. There are also five administrators to provide support, including a panel administrator and two finance clerks. Linked to the fostering service is a clinical psychologist, a medical advisor and an education case worker. As of 31 March this year the fostering service had 74 looked after children placed with their foster carers, 24 young people placed with independent fostering agencies, and 69 approved foster carers (11 of these are specific short break carers). Bournemouth fostering and placements team has its own established fostering panel which recommends initial approval, continued approval after the first year of becoming a foster carer and any changes to a foster carer's approval status.

Summary

The overall quality rating is satisfactory.

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

At this announced full inspection, all key standards were inspected. This is a satisfactory service with some good features, but also areas that fall short of regulations and National Minimum Standards. Prospective foster carers are approved following a robust assessment that concludes that the carers will be able to provide a good quality placement for a child. The fostering panel effectively provides a quality assurance role, and offers children and young people further safeguards in ensuring that the foster placements are suitable. Children and young people are being cared for well, with foster carers actively addressing their health, social and educational needs. Foster carers are supervised regularly, and are encouraged and supported to increase their skills through workshops and training. Children and young people needing long term placements are being appropriately matched with carers who can meet their needs. Children and young people needing respite or an emergency placement however continue to be placed with limited recognition of their wishes and interests due to a significant shortage of 'in house' foster carers. Shortfalls are noted in the arrangement and management of immediate placements with family and friends, of reviews of carers, of information given to carers about the children placed with them and in safe recruitment processes of staff. Although the management has

begun to address a number of these areas, there remain some areas of practice that provide a limiting service to children and carers.

Improvements since the last inspection

The provider was asked to ensure that foster carers' approval is reviewed at least annually. This requirement has still not been met, although it has been identified as a breach in regulation annually since 2005. There has been some progress made, with the temporary appointment of an independent reviewing officer to undertake the annual reviews of foster carers. However, until all reviews are systematically reviewed annually there remains the possibility of children residing in unsuitable fostering households.

The provider was further asked to address nine good practice recommendations in order to meet the National Minimum Standards. Of these, four have been met appropriately and relate to training for carers, the recording of allegations and complaints against carers, appointment of panel members with specific knowledge and expertise, and staff having three yearly Criminal Record Bureau (CRB) checks. Five of the previous recommendations have not been fully met. Unannounced visits to carers continue not to be carried out annually, and the arrangements for supervision of carers lack structure to allow for monitoring how the carer is supporting positive outcomes for the child's health and education. Written documentation to evidence good matching has improved, although evidence was not seen for respite and emergency placements. Generally, foster carers' files are now better organised and effective but the list of placements made with carers and supervision notes are not kept updated promptly. Safe care plans continue to not be reviewed when a new child is placed with the carers, although the fostering team are now more proactive in ensuring children's risk assessments are completed at placement and kept up to date. Overall however, this lack of progress at meeting the National Minimum Standards relates to the lack of development, systems and management in place to ensure the service continues to be effective and efficient at providing good quality placements.

Helping children to be healthy

The provision is good.

Children and young people's health needs are well met. Children and young people placed in foster care have a prompt initial health assessment. Comprehensive health reviews are carried out after approximately three months and then annually by the designated nurses for looked after children. Foster carers are fully involved in the medicals for young children. Older children and young people are appropriately provided with more confidential health assessments. There is close liaison between the designated nurses, the medical advisor, the clinical psychologists, the placing social workers and the fostering team to ensure the children's health needs are met. The Strengths and Difficulties Questionnaires (assessing the emotional and mental health needs of children and young people who are in care) have just started to be introduced for all of Bournemouth's looked after children. This aims to ensure that all

children and young people will receive the necessary emotional and mental health support and services as soon as possible.

There is a commitment to help and support foster carers in meeting not only the physical health needs of children and young people but also in promoting their emotional wellbeing. Reviews of foster carers include the views of the designated nurses on the foster carer's ability to promote the child's health. There is good work being undertaken with foster carers on increasing their skills and understanding of attachment disorders, through training and support groups. Clinical psychologists are also able to work directly with foster carers and the supervising social worker on specific issues regarding the care of a child, such as supporting a child with contact with their birth family. The clinical psychologists give direct guidance, support and supervision to the family support worker in the fostering team, on for example working with an anxious child, completing life story work, and anger management. Plans are for the family support worker to work directly with children in supporting them with these issues in order to improve their emotional wellbeing. Foster carers are provided with a range of training opportunities in relation to promoting the health of the children and young people they care for.

The fostering service itself has yet to develop systems for monitoring how foster carers are providing good healthy outcomes for children. Supervision meetings between supervising social workers and foster carers do not have set agenda items which cover 'Being Healthy'. Foster carers do not maintain a health record for children and young people, so there is no clear or effective record kept of all health appointments attended and the outcomes of these.

Protecting children from harm or neglect and helping them stay safe

The provision is satisfactory.

Overall children and young people are satisfactorily safeguarded from harm and abuse. Foster carers are approved following a thorough assessment, which includes visits to referees, criminal record bureau checks, health and safety assessments on the applicants' home and any pets, and a detailed analysis of the applicant's ability to safeguard and meet the needs of children and young people. All prospective applicants are presented to an effective fostering panel, which recommends to the authority whether they also consider the applicants would make good foster carers. The panel provides an appropriate quality assurance function, and challenge any identified shortfalls in the assessments. The panel members have a range of skills and include a person with experience in the education service, of being in care, of child protection work, and a foster carer.

There have not been effective procedures followed in relation to placing children with family and friends in an emergency and ensuring these placements are safe. There is often a considerable delay in assessing whether these family and friends carers are suitable, and written agreements are not completed by the carers confirming their responsibility in caring for the child. The authority has inappropriately followed private fostering arrangements in some cases, where the carers should have been

fully assessed, approved, supported and supervised as foster carers under the fostering regulations. No evidence was noted on the files examined that showed the children had suffered harm through these failings though, as social workers had continued to visit the children and young people regularly, held children in need reviews, and CRB were completed promptly.

All first reviews of foster carers are presented to panel, as are cases involving any complaints or allegations against foster carers. The panel makes a recommendation whether continued approval is appropriate, ensuring that children only remain in suitable fostering households. Since the last inspection there have been two unsubstantiated allegations against foster carers and one complaint about the quality of care provided by a carer which was upheld. Appropriate child protection procedures were followed where necessary, and the investigations were carried out by a person independent of the fostering service. The records of the investigations did not detail whether the young people who initially raised the concerns were happy with the outcome of the investigations.

There have been significant and beneficial changes to the annual reviews of foster carers, ensuring foster carers continue to be able to meet children's needs. Reviews are currently being conducted by an independent reviewing officer, and include feedback from the designated nurses, education case workers, social workers and from the children and young people that have been looked after by the foster carers. Questionnaires were sent to children and young people who are living with Bournemouth foster carers. All 10 that replied stated that they 'always' feel well cared for. One child stated 'they always make me feel like I am part of the family and feel like I am loved by all'. The fostering service is aware of the need to match children appropriately with carers that can meet their needs. Some very good matching examples were highlighted which involved interviewing a number of potential carers, and clinical psychologists being actively involved in deciding the most appropriate match. The service works closely with independent fostering agencies, and funding for an independent placement is approved promptly to ensure less disruption for the child or young person and allows for the best match to be found. Child friendly foster carer profiles are being shared with children and young people to ascertain their views on whether they are happy with any proposed placements. There continues to be a significant lack of foster placement vacancies in Bournemouth, and the number of carers has been falling over the past few years. This does limit the true ability for the team to offer children and young people choices in placements, and has meant that children have had unnecessary moves because they have been placed with carers in an emergency that can only care for them for a couple of days. Respite placements also lack planning from the fostering service, and this has resulted in some young children having respite care with carers they hadn't met before. Long term placements are now managed and planned well, with children and young people benefiting from the service establishing a permanency panel, which examines how the child's long term needs will best be met.

Variable evidence was found about whether foster carers received enough information about the children in order to keep the child, themselves, and other children safe. Files do not evidence that all foster carers receive a copy of a Foster

Placement Agreement, or that a placement planning meeting is held within 72 hours of the placement starting. The foster carers visited however, stated that appropriate information is given to them prior to the start of any placement. All but one of the 12 responses from the foster carer questionnaires stated that they received good or satisfactory information about the child.

The responsible individual and manager of the service have remained the same over the past three years. They are skilled and knowledgeable to run the service and have kept up to date with relevant training in management and safeguarding children. The manager and staff have up to date CRB checks. Safe recruitment procedures have been inconsistently applied. Permanent staff have been the subject to suitable checks and references. However the service has not ensured that agency staff have suitable CRB certificates or written references from previous employers. The manager has however sought verbal references from previous employers of the agency staff.

Helping children achieve well and enjoy what they do

The provision is good.

The fostering service is good at valuing and recognising diversity. Staff in the fostering service, including carers and panel members, attend equality and diversity training specific to their role. A talk on the Muslim faith, and a trip to the synagogue was organised. The team researched the local ethnic and cultural composition of carers and targeted some recruitment campaigns towards these groups. The fostering service's recruitment policies and practice respect diversity, treating all applicants equally regardless of their race, gender, sexuality, disability, age, religion or beliefs. There does however continue to be a lack of carers recruited from minority ethnic backgrounds. The service uses carers from independent agencies to provide more appropriate matches for children from ethnic minority backgrounds, and for those with specific religious beliefs. Necessary equipment and training is given to foster carers who provide care to children with disabilities, to ensure the children are able to be as independent as possible. The service is also proactive at engaging the family support worker in specific tasks with young people to increase their confidence, self esteem and identity. This has included supporting children in community social activities and undertaking life story work. Foster carers' training includes sessions on promoting resilience, confidence, managing behaviour and attachment difficulties in order to enhance a child's development.

The fostering service incorporates a short breaks scheme for children who have a disability. Feedback from short break carers is positive about the support they receive. There are good systems in place for introducing parents, the children and carers. The fostering service receives detailed information from the Children's Disability Team about the needs of the child.

Children and young people benefit considerably by the support given to their educational needs. Education case workers within the looked after children teams work closely with the fostering service to promote educational achievement. The

service provides extra tuition, revision guides, and the letterbox club (a parcel of books and educational games sent directly to specific children every six months). Each child and young person of school age has a personal educational plan, and foster carers attend school meetings and parent evenings. The looked after children education team provide training to foster carers on promoting the educational needs of children. Further training is planned specifically around early years education. A virtual school head has also been appointed to the Borough's looked after children's service, who is working with all professionals to help raise standards for looked after children. There does lack some systems that would assist the fostering service in supervising, supporting and monitoring foster carer's ability to meet the educational needs of the children placed with them. Supervision meetings between supervising social workers and foster carers do not include the set agenda item of evidencing and supporting the foster carer in promoting the child's educational attainment. Supervising social workers do not get a copy of the personal educational plan, which again limits how they monitor whether the foster carer is helping to achieve the goals.

Helping children make a positive contribution

The provision is good.

Children and young people benefit from foster carers who promote and support their contact arrangements. Foster carers receive training around contact issues, and they are aware of their role in encouraging the child to have positive relationships with family and friends where this is appropriate. Foster carers are informed (verbally rather than through a written agreement) of what the contact arrangements are. Foster carers and supervising social workers will refer children to the advocacy service if there is a conflict with contact arrangements or care planning.

The fostering service leads in the continued development and support of Bournemouth Borough Council's total respect group. This group (of young people who are or have been looked after by Bournemouth) have recently given training to foster carers and staff, raising the need to consult, listen and respect children and young people. The Borough has recently appointed a participation worker, who will help develop leaflets for young people about the services they can expect, is working with some young people in designing a newsletter, and helped to secure funding for weekly drama workshops for young people looked after. Young people are further consulted through representations on the corporate parenting panel and the setting up of a children in care council. The responses from young people's questionnaires further confirmed that they feel listened to and know who to speak to if they have any concerns.

Achieving economic wellbeing

The provision is good.

Children and young people receive good support from the fostering service to prepare them for adulthood. The fostering service has developed a Pathway Carers

Scheme, recruiting and assessing supported lodgings carers for looked after young people aged 16 and over. These carers are presented to panel as an added safeguard of their suitability to provide accommodation and support to young people. Foster carers are supported and encouraged to maintain placements for older teenagers, and there is a commitment to support young people in foster placements after their 18th birthday where this is appropriate. The Borough was successful in their bid to receive funding under the Right2BCared4 pilot (a project to ensure the care leaving process is genuinely responsive to the needs of the young people concerned, so that they only leave care when they are ready and after they have been properly prepared). Part of the funding is used for an 'independence training flat' where young people can spend a short time to see whether they would like, or are ready, to live more independently.

Organisation

The organisation is satisfactory.

The fostering service is appropriately managed, although there remains a number of National Minimum Standards that are not met. The service manager regularly audits case files, highlighting shortfalls in records and in practice where necessary. Staff are regularly supervised, and weekly team meetings are held which provide further support and monitoring of the service. The fostering service is now located with the looked after children's field work teams, designated nurses, education case workers, behaviour support team and clinical psychologists. This has improved communication between the teams although there does continue to be a lack of communication in and out of the team on occasions. Examples include placing social workers not being aware they can access the foster carers' profiles to share with children, and the fostering service not being informed of a young person's complaint about a foster carer. There have been considerable changes to the staff team of the fostering service, with four members of staff leaving the team in the last year. Some carers have not received appropriate support or supervision during this time. However, the service has now addressed staff shortages by using experienced agency staff, while waiting for permanent posts to be filled. As stated previously, systems and structures continue to not be in place to ensure that all foster carers are closely supervised, monitored and supported. Some foster carers are monitored well, with supervising social workers ensuring all monitoring and supervision work is undertaken to a good standard. However consistent good practice strategies in working with carers (annual reviews, yearly unannounced visits, structured supervision visits, renewing CRB checks, updating foster carer medicals, updating safe care plans and keeping foster carer's records accurate) is not routinely happening.

Overall, support to foster carers is satisfactory with some foster carers experiencing very good support from the fostering service while others feel the support is lacking. 'Our social worker is excellent and involves us all the way', 'I receive excellent support from my worker', 'we feel that there has not been enough support'. Out of the 15 foster carer responses to the question 'how well does the fostering service support you in caring for the children you look after', one stated the service is outstanding, 10 said it is good, one satisfactory and three said it is inadequate.

Particular difficulties were experienced by some carers with a lack of support with placement endings, support when a child was seriously ill, and over transport arrangements. The service has struggled to maintain a foster carer support group in Bournemouth due to only a small number of foster carers attending. The service's statement of purpose is detailed and informative, with clear descriptions of the aims and objectives of the service. An updated foster carer handbook is also near completion and will ensure carers and other professionals have access to the necessary policies, procedures and good practice information. Children and young people however, do not have accessible information about what they can expect from the fostering services. The service has not developed a Welcome Guide for young people.

Foster carers are provided with good training. The service has started to implement the children's workforce development council training, support and development standards for foster carers. Courses provided this year have included safer caring, working with child sexual abuse, mental health awareness, Webster Stratton training, diversity and first aid. Foster carers are supported and encouraged to undertake NVQ 3 training, as well as the on line Akamas training. Staff are also provided with sufficient training opportunities, including post qualifying training and workshops from national providers such as British Association of Adoption and Fostering and Fostering Network.

The promotion of equality and diversity is good. The agency has a clear philosophy of promoting equality, through its practice, systems and recruitment of carers. An equality needs impact assessment has been undertaken in respect of the service. Staff, carers and managers have all undertaken training in equality and diversity. Supervising social workers assess applicants' ability to promote equality and respect diversity through the Form F assessments. Anti discriminatory practice in working with gay foster carers (following the Wakefield Enquiry) has been covered in a workshop with staff.

The fostering service does not have a sufficient number of fostering households. As stated earlier in this report, this results in a lack of choice for children and young people, and good matching is often compromised. The service is working hard to recruit more carers, employing agency staff to undertake assessments, and working with a marketing company to help develop recruitment information and branding.

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 |
|------|---|------------|
| 8 | ensure that a child is only placed with a foster parent if it is satisfied that the placement with the particular foster parent is the most suitable placement having regard to all the circumstances. In particular this relates to the need to ensure that respite placements are organised, planned and matched appropriately (Regulation 33) | 26/01/2009 |
| 8 | ensure that before making a placement the responsible authority must enter into a written foster placement agreement with the foster parent relating to the child which covers the matters specified in Schedule 6 (Regulation 34.3) | 23/02/2009 |
| 9 | give such information to foster parents, which is kept up to date, as to enable them to provide appropriate care for the child, including the arrangements for giving consent to the child's medical or dental examination or treatment (Regulation 17.3) | 23/02/2009 |
| 15 | ensure that a person employed to work for the fostering service is fit to work for the purposes of a fostering service. A person is not fit unless full and satisfactory information is available in respect to him of the matters specified in Schedule 1 (Regulation 20) | 26/01/2009 |
| 1 | produce a written children's guide to the fostering service which shall include a summary of the Statement of Purpose, a summary of the complaints procedure and the address and telephone number of Ofsted, and provide a copy of the guide to each child placed by it (Regulation 3) | 23/03/2009 |
| 6 | ensure that when an immediate placement of a child is necessary, the child may be placed with a person who is not a foster parent after interviewing him, inspecting the accommodation and obtaining information about other persons living in the household, for a period not exceeding 6 weeks. The person must enter into a written agreement with the authority (Regulation 38) | 26/01/2009 |
| 21 | review the approval of each foster parent not more than a year after approval and thereafter whenever the service considers it necessary, but at intervals of not more than a year (Regulation 29). | 23/02/2009 |

Recommendations

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

- ensure foster carers are given appropriate support through supervision, support groups, information and advice, assistance in dealing with other services, out of hours support and respite care (NMS 21)
- provide foster carers with a written health record for each child placed in their

- care, which is updated during the placement and moves with the child (NMS 12.4)
- ensure that foster carers have a renewed criminal record bureau and medical check every three years (NMS 6.1)
- provide safe care guidelines for each foster home, which are specific to the child in placement (NMS 9)
- develop the structure of supervision visits to carers to ensure they have a clear purpose and provide the opportunity to supervise the foster carer's work, including monitoring how they support the Every Child Matters outcomes for children (NMS 22.6)
- carry out unannounced visits to foster carers at least once a year (NMS 22.6)
- ensure that investigations of young people's complaints against carers include the young people's views on whether they are happy with the outcome of the investigation, or whether they would like to pursue the complaint further (NMS 22)
- ensure accurate and up to date information is recorded on carers' files of children and young people placed with them (NMS 25).