



*Making Social Care
Better for People*

inspection report

FOSTERING SERVICE

Birmingham Social Care & Health Fostering Service

**1st Floor
31 Dollman Street
Nechells
Birmingham
B7 4RP**

Lead Inspector
Lynda Dale

Announced Inspection

14th November 2005 – 19th December 2005

09:30

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Reader Information	
Document Purpose	Inspection Report
Author	CSCI
Audience	General Public
Further copies from	0870 240 7535 (telephone order line)
Copyright	This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI
Internet address	www.csci.org.uk

This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Fostering Services*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

Every Child Matters, outlined the government's vision for children's services and formed the basis of the Children Act 2004. It provides a framework for inspection so that children's services should be judged on their contribution to the outcomes considered essential to wellbeing in childhood and later life. Those outcomes are:

- Being healthy
- Staying safe
- Enjoying and achieving
- Making a contribution; and
- Achieving economic wellbeing.

In response, the Commission for Social Care Inspection has re-ordered the national minimum standards for children's services under the five outcomes, for reporting purposes. A further section has been created under 'Management' to cover those issues that will potentially impact on all the outcomes above.

Copies of *Every Child Matters* and *The Children Act 2004* are available from The Stationery Office as above

This report is a public document. Extracts may not be used or reproduced without the prior permission of the Commission for Social Care Inspection.

SERVICE INFORMATION

Name of service	Birmingham Social Care & Health Fostering Service
Address	1st Floor 31 Dollman Street Nechells Birmingham B7 4RP
Telephone number	0121 464 2309
Fax number	0121 464 1098
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	Social Care and Health
Name of registered manager (if applicable)	
Type of registration	Local Authority Fostering Service
No. of places registered (if applicable)	NA
Category(ies) of registration, with number of places	

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 27TH October 2004

Brief Description of the Service:

The Principal Fostering Development Manager and 8 team managers are responsible for the day-to-day running of the fostering service. There are 81 staff social work staff and 13 manager and 14 deputy posts supported by 78 administrative staff. These figures include vacancies and part-time posts.

The 8 team managers hold separate responsibilities for managing the service, providing a variety of foster placements to meet the needs of Birmingham's multi-cultural families and children. The service broken down into specialisms which include, the Recruitment Team, Assessment Team, The Adoption and Fostering Panels Team, Family Finding Long Term, Short-term under 10's, Short-term over 10's and EDT carers, Long-term care and Shared Care (providing respite for children with disabilities) and Kinship (shortly to become the Friends and Family Team).

Three children's placement teams within the Social Care and Health Directorate provide a service to placing social workers and identify available placements for children within the fostering service and external placements.

At the time of inspection the service had 670 approved foster carers providing care for 898 looked after children and young people. This is an increase on the number of carers' from last year's inspection, although figures include 124 interim approvals, with an unspecified number of carers due for cessation or termination and 26 carer's either currently suspended, blocked or on hold. According to the register provided, the number of children accommodated has increased by 12.5% since last year's inspection.

The service operates from 7 different locations. The Recruitment Team operates from a central location, with a 'shop style' frontage, which is easily accessible to members of the public and intended to generate an increased public interest in fostering.

The service operates a competency-based assessment for foster carers, to facilitate matching children's needs to carer skills. Carers can progress from level 2 for newly approved carers to level 4, the highest, dependent on the level of training, skills, experience, and placement evaluation.

SUMMARY

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

This was an announced inspection. The lead inspector liaised with the Head of Services for Children North Division for the pre-inspection planning and attended 3 separate meetings. This process took a total of 30hrs.

The fieldwork inspection activity was carried out by four inspectors from the Commission, over a period of 3 working weeks. Sixteen foster placements were sampled for welfare tracking but due problems the service had producing its children's register, the fostering service self-selected 5 of the 16 carers. The remaining 11 carers were randomly chosen from the register provided.

The inspectors met with children in placement, interviewed foster carers and were given a guided tour of some carers' homes. The inspectors also interviewed fostering link workers and the manager of each of the separate teams in the fostering service. The lead inspector met with two Heads of Service for Children from the Social Health and Care Directorate (SCHD) and also had the opportunity to meet with representatives from Birmingham Foster Care Association (BFCA), who provide support and representation to carers, in several different forums.

The inspectors had access to the organisation's policies and procedures and other records. Two of the inspectors observed a fostering panel and the lead inspector interviewed a panel chair and attended a panel chairs' steering group meeting. In addition, the lead inspector observed some carers' pre-approval training with the Assessment Team and an enquiry information meeting for prospective carers at the Recruitment Shop.

The Commission sent 2694 questionnaires to all children currently in foster placements with Birmingham Fostering Service, their foster carers and placing social workers, based on the registers provided by the service. There were 36 children who did not have a named allocated social worker and these questionnaires were sent to the team manager for the relevant area. At the time of writing this report a total of 74 children's questionnaires were returned, 290 placing officers, 81 foster carers which represents an overall response of approximately 16.5%. The questionnaires were analysed over a period of 2 working days by the lead inspector, with administrative support.

Following the inspection, verbal feedback was given to the Principal Fostering Development Manager, the Head of Services for Children, North Division and Area Directors for North and Heart of Birmingham Social Care and Health Directorate.

The Commission would like to take this opportunity to thank the children, carers, staff, management and BFCA for their warm welcome and kind assistance during the inspection.

What the service does well:

Overall, the specialist teams within the service tend to work well. The recruitment, pre-approval training and assessments of new carers are of a good standard and ensure that carers are appropriately vetted and prepared for the task of fostering. Despite there being some areas for development identified at this inspection, the Panel Team still has strengths in so far as how it supports the role of assessors and contributes to raising standards across the directorate through notices of appreciation and concern. In addition they have strong systems-based approach which, when applied 100% consistently, act as a good safety net. Overall there is a good standard of matching long-term placements identified through the Family Finding Team. Friends and family carers reported that they felt well supported by their link workers from the Kinship team.

What has improved since the last inspection?

There has been improvement in some parts of the service, which include increased consultation with carers regarding various issues such as allowances and expenses and a speedier and more structured approach to dealing with suspended carers. Staff personnel files had improved since the last visit.

However, given the outstanding issues highlighted below, on balance how the service as a whole has made no notable progress since the previous inspection, having failed to meet some key statutory requirements. It is noteworthy that, the post of Principal Fostering Development Manager, who has overall line management responsibility for the service, was vacant until 2 weeks before this inspection started.

What they could do better:

There are key problems with emergency placements. Under the current arrangements, a significant number of placements are being made by the placements teams, without the knowledge of the fostering service or its managers. This is potentially dangerous for children and also leaves foster carers vulnerable. The service approves a high number of exemptions with a concerning number of carers regularly accommodating 4 fostered children, in addition to any children of their own. There is no clear evidence to support these exemptions are being made in the interests of all children in placement.

The arrangements of Kinship assessments currently remain with the Social Care and Health Directorate area teams. These assessments are not consistently being done to a satisfactory standard and frequently lead to poor outcomes for children that include overcrowding, placements based on a lack of genuine kinship ties and consequential financial hardship for carers and children. The management team for the fostering service will need to address these inconsistencies with their area colleagues to ensure the outcomes for children improve. The Panel Team will also have an important gate-keeping

role for the fostering service in this process, which currently is not happening effectively.

There are significant shortfalls in all areas of practice within the two Short-term fostering teams but these must be seen in the context of them being severely understaffed prior to and at the time of this inspection.

It was disappointing to note there has also been some deterioration in other parts of the service. These include pockets of slippage with Panels, which had been operating to a very high standard at the previous inspection. Inappropriate matching of placements and staffing shortfalls remain an ongoing problem since the previous inspection.

There are a number of requirements that remain fully or partially outstanding from the previous inspection. For example, matters include safe care policy, health and safety, foster carer training, enabling complaints, service monitoring and staffing levels.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office.

DETAILS OF INSPECTOR FINDINGS

CONTENTS

Being Healthy

Staying Safe

Enjoying and Achieving

Making a Positive Contribution

Achieving Economic Wellbeing

Management

Scoring of Outcomes

Statutory Requirements Identified During the Inspection

Being Healthy

The intended outcomes these Standards are:

- The fostering service promotes the health and development of children.(NMS 12)

The Commission considers Standard 12 the key standard to be inspected at least once during a 12 month period.

JUDGEMENT – The intended outcomes for these Standards are

12

The health needs of the children and young people in placement are satisfactorily met with some minor improvements needed to recording systems to ensure they are routinely safeguarded.

EVIDENCE:

Overall children's health needs are being well met through the commitment of foster carers, with the support of fostering link workers. The majority of children and young people, who responded to the children's survey, indicated their carers' gave them advice on diet and healthy eating. Children are registered with the carer's local GP, where appropriate. Improvements to the statutory review process means that children's health needs are being regularly reviewed. Unfortunately, area teams are not always prompt in dealing with issues identified and some were found to remain outstanding at subsequent statutory reviews. However, this is outside of the remit of the fostering service. There was some variance across the service on the support given to carers regarding the recording of accidents to children and the monitoring of these. This is covered in the management section of this report.

There is currently no system in place for monitoring the administration of first aid and medication to all children in placement, as detailed later in the report.

Some shortfalls in matching leave carers with onerous travel arrangements for LAC medicals and other healthcare appointments i.e. carers without transport having to take children long distances to medical appointments. However, those carers interviewed were still committed to meeting these needs.

Staying Safe

The intended outcomes these Standards are:

- Any persons carrying on or managing the service are suitable. (NMS 3)
- The fostering service provides suitable foster carers.(NMS 6)
- The service matches children to carers appropriately.(NMS 8)
- The fostering service protects each child or young person from abuse and neglect.(NMS 9)
- The people who work in or for the fostering service are suitable to work with children and young people.(NMS 15)
- Fostering panels are organised efficiently and effectively.(NMS 30)

The Commission considers Standards 3, 6, 8, 9, and 15 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT – The intended outcomes for these Standards are

3, 6, 8, 9, 15, 30

Although the service has in place some good policies and procedures to protect children, overall shortfalls in service delivery fail to ensure all children and young people are routinely safeguarded, leaving them at risk of neglect and/or abuse.

EVIDENCE:

The appropriate checks and references were in place for the managers of the fostering service. The service renews CRB checks every three years for managers, staff and carers. All but one of the manager's CRB checks had been renewed on time and the check that had elapsed had been submitted for renewal before the inspection started.

The majority of foster homes visited were warm, comfortable and well maintained. One hundred percent of placing social workers who responded to the survey indicated that foster placements were safe and with over 80% indicating that mainstream foster carers are looking after the children to a high standard. This figure was slightly lower for kinship carers, at 72%.

Foster carers' preparation and training includes health and safety components. Health and safety assessments of carers' homes are updated as part of the annual review process. The health and safety assessment would benefit from review, to cover a broader range of areas and there were a number of staff

and managers who acknowledged this during the course of the inspection. There was variance across the service regarding checking the MOT and insurance documentation for carers' vehicles. Some link workers were only asking carers if they had insurance, whilst others were recording policy details on the carer's files. Although the service is undertaking regular carer reviews, these are frequently outside of the 12-month timescales determined by the regulations.

The service has a significant problem with overcrowding, in particular with friends and family placements, although there was also evidence of this with some mainstream carers. It was positive to note the service works hard at keeping families together, through the use of kinship placements and is willing to support adaptations and extensions to properties where necessary. The Head of Services for Children confirmed there is a dedicated budget for this purpose. However, the budget allocation is not realistic to meet the demand and there are lengthy delays in providing grants for agreed adaptations to carers' properties. Some adaptations were outstanding from the previous inspection.

Records sampled with the Family Finding and Long-term Fostering teams revealed examples of good matching work being undertaken with some well-planned placements being arranged. In direct contrast, there were serious shortfalls in the matching of emergency and short-term placements. Under the current arrangements, emergency placements are routinely agreed by staff from the three SCHD Placements Teams, without access to full matching information. This regularly occurs without the knowledge of the fostering service staff or its managers. This is potentially dangerous for children and also leaves foster carers vulnerable. An immediate statutory requirement was left in this respect, as detailed in the requirements section at the end of the report. At the time of writing this report the Service had provided a written response to the requirement and introduced interim measures to improve matching. The Principal Fostering Development Manager should consider implementing a long-term strategy that ensures all matching decisions are made within the service, given it is the Fostering Service which has the responsibility for meeting the national minimum standards.

The service also approves a high number of exemptions, with a concerning number of carers regularly accommodating 4 fostered children, from 2 or more separate sibling groups, in addition to any children of their own. At the time of inspection, 36 carers had a higher number of children in placement than agreed in their terms of approval. This represents 5.4% of the total 670 approved carers. However, as the number of approved carers includes kinship carers and any carers currently on hold or suspension, in real terms the percentage of mainstream carers accommodating children over numbers is notably higher.

The responsibility for agreeing exemptions lies with the individual team managers of the two Short Term and the Long Term Fostering Teams. This gives rise to a potential conflict of interest when placement demand outweighs availability. There are no arrangements to take exemptions back to Panel. Sampled records found no evidence to support the above exemptions are being made in the interests of all children in placement, as the service is not conducting compatibility risk-assessments. Information provided by staff, carers and BFCA would suggest that these decisions are frequently being taken based on a lack of placements/resources. The service must introduce a system of compatibility risk assessments for foster placements accommodating separate sibling groups and ensure that all exemptions are based on the needs of all children in placement.

The SCHD has in place child protection policy and procedures intended to safeguard and promote the welfare of children at all times. The Fostering Service staff and carers met were aware of their role in protecting children from abuse, bullying and other forms of harm. The service demonstrates a clear commitment to taking allegations of abuse seriously by suspending carers, without prejudice and continuing to pay retainer fees during the period of investigation. The service has failed to implement safe care guidelines for each foster carer's home, in line with previous inspection findings. A draft format has been developed but this has yet to be implemented. Compatibility risk-assessments are not being carried out for multiple placements. This is particularly concerning in context of the high number of exemptions as outlined above.

Senior managers within the SCHD are aware of these and other shortfalls within the Fostering Service and are re-evaluating the commissioning process for children's placements. These will be covered in the business plan for restructuring of children's services in April 2006,

All carers who responded by questionnaire were fully aware of and endorsed the service's policy of no corporal punishment, which is contained in the foster carer's agreement. Carers met were aware of the procedures in the event a child goes missing from home.

Staff personnel files inspected were found to be in good order. All files for staff employed since the previous inspection complied fully with regulations with up-to-date references, CRB checks, photo identification and qualifications. Kinship Form F assessments are completed on a sessional basis. Very few staff in the service are unqualified and those who are have extensive experience of working with children and/or in foster carer and were supervised by qualified staff.

The service has a dedicated panels team for Fostering and Adoption. There are currently 2 fostering panel advisors and a Manager who also undertakes panel advisory duties. There is joint administrative support. The service has three separate Fostering Panels, each with a separate chair, deputy and independent members from health, education, and foster carers or young people previously fostered. Panel chairs are operational managers from the wider Social Care and Health Directorate but with no direct line management responsibility for the fostering service, to avoid any potential conflict of interests.

As identified at the previous inspection, the Panels are well structured with sound systems in place to monitor the assessments of foster carers. The Panel Team offers good support to workers presenting assessments and Panel Advisers attend all panels to offer guidance on policy, practice and some legislation to the members and chair, to assist them in reaching their conclusions.

There is an excellent system for the Panel to provide feedback on areas of good and poor practice, through Notices of Appreciation and Concern to assessing social workers. These act as good quality assurance tool and play a crucial role in raising standards across the fostering service and wider social care and health directorate.

Notwithstanding the above there had been some slippage since the previous inspection. Inspectors were advised that Panels had occasionally been making recommendations without an appropriate CRB check, or equivalent check in place and found evidence to substantiate this, where the decision maker had then gone on to approve the Panel's recommendation.

There were some questionable recommendations from Panel relating to unsatisfactory initial Kinship placements made by the area teams, which are referred to later in the report.

Enjoying and Achieving

The intended outcomes these Standards are:

- The fostering service values diversity.(NMS 7)
- The fostering service promotes educational achievement.(NMS 13)
- When foster care is provided as a short-term break for a child, the arrangements recognise that the parents remain the main carers for the child.(NMS 31)

The Commission considers Standards 7, 13, and 31 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT – The intended outcomes for these Standards are

7, 13

Overall Children and young people are provided with adequate opportunities to enjoy and achieve their personal goals.

EVIDENCE:

The fostering service ensures that carers are recruited from a range of backgrounds, reflecting the demographic population of Birmingham. Diversity issues and anti-oppressive practice are incorporated throughout all elements of carer's pre-approval training. The service endeavours to make same race placements. However, some carers reported that the service tends to rely on broader racial groupings when placing some black children. For example, children of various Asian backgrounds are placed with carers from different religious or ethnic groups, with the placement having limitations on meeting the child's language and identify needs. However, carers were clear on their role in meeting this child's dietary and religious needs and committed to delivering on these and other areas in so far as they were able.

Given the weaknesses identified in the shared care arrangements, outlined below, the picture is less clear as to how well the needs of children with disabilities are served.

It was positive to note that the majority of children met at this inspection were in full-time education placements. In light of this, it was difficult to assess the full extent of support provided by the fostering service in relation to those children not in full-time education. The service ensures that carers' pre-approval training encourages them to prioritise children's educational needs. Those carers met were seen to deliver well on this aspect, by assisting with finding school and college placements for children and young people, attending parent's evenings where appropriate and working in partnership with schools where there were particular problems. At the previous inspection permissions for participation in school trips were not consistently in place. This issue was not fully resolved at this inspection with other factors also preventing young people from participating in school trips.

The educational achievement of children and young people is monitored through the Looked After Children Education Service (LACES). Interviews with carers and BFCA revealed inconsistencies across the service with allowances for school uniforms, trips, equipment and support for leisure activities, particularly with short-term placements.

Until recently shared care placements were being managed through the SCHD Area Teams. This responsibility transferred to the Long-Term Fostering Team approximately one month before the fieldwork inspection activity started. There were a number of problems noted which included adequate supervision of carers and the absence of any clear management strategies to deal with children's behaviour. However, given the recent transfer of responsibility, it would be unfair to score this standard at this inspection. Verbal feedback was provided at the inspection and the Commission is hopeful that these issues will improve under the new management arrangements.

Making a Positive Contribution

The intended outcomes these Standards are:

- The fostering service promotes contact arrangements for the child or young person. (NMS 10)
- The fostering service promotes consultation.(NMS 11)

The Commission considers Standards 10 and 11 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT – The intended outcomes for these Standards are

10, 11

Children and young people are supported to make positive contributions to their care planning but improvements are needed in enabling children to make complaints to ensure their needs and well-being are routinely safeguarded.

EVIDENCE:

Carers and children met reported no concerning issues regarding contact. Carer's pre-approval training includes the importance of children and young people maintaining contact with birth families where appropriate. Placing officers questionnaires indicated that overall carers contributed well to contact arrangements and where this did not happen it was usually due to an overriding court order. The majority of children's files were found to have contact plans in place and there were some good examples of contact risk assessments but these were not routinely carried out across the board. The service has yet to implement a comprehensive post-approval training plan for carers and accordingly training for carers supervising contact identified at the previous inspection remains outstanding.

Children are encouraged by their carers and social workers to attend their reviews where appropriate, or alternatively make a contribution by other means. Over 65% of all children and young people who responded to the questionnaires said that their carers 'often' asked their opinions about their day to day care, with a further 29% indicating 'sometimes'.

Information on how to make a complaint is not included in the Children's guide. Notwithstanding this over 70% of children and young people who responded said they knew how to make a complaint but less than half knew how to make a complaint to the commission. In light of this, the service will

need to take steps to ensure that all fostered children and young people are clear on how they can make a complaint to the Commission.

More concerning was the fact that inspectors found no in-house records of any children's complaints since the previous inspection. It is highly unlikely that a service of this size would not have received any children's complaints in over 12 months and the Head of Service for Children, North Division confirmed having dealt with a number of children's complaints since the previous inspection. This supports the likelihood of an absence of records in the fostering teams, as opposed to there having been no children's complaints. There were some records of carers' complaints, although these were few in numbers. The team managers reported that the service encourages children to use the SCHED corporate system for complaints with the Birmingham City Council SCHED Customer Relations Team. The formal nature of this system may be acting as a barrier for children to making complaints, as it tends towards written complaints through the use of a complaints leaflet. However, given the absence of records within the fostering teams, there would also seem to be a breakdown of communication between the Customer Relations Team and the fostering service. So, the individual team managers and/or principal development manager are not able to monitor children's complaints effectively in the context of trends and patterns and use these to improve the service. The service may wish to consider introducing a system for recording informal complaints and grumbles for this purpose.

Achieving Economic Wellbeing

The intended outcomes these Standards are:

- The fostering service prepares young people for adulthood.(NMS 14)
- The fostering service pays carers an allowance and agreed expenses as specified.(NMS 29)

The Commission considers Standards 29 the key standard to be inspected at least once during a 12 month period.

JUDGEMENT – The intended outcomes for these Standards are

29

The economic wellbeing of children and young people is adequately promoted and their needs are generally met.

EVIDENCE:

Standard 14 was not assessed at this inspection, as the majority of children met were not in the process of moving on from placement. Some carers were observed to be teaching young people independence skills consistent with their age and development. There continue to be delays in accessing aftercare services although this situation is improving.

Carers interviewed reported that payments are generally on time. There can be some problems, which is understandable for an organisation of this size but on the whole carers reported these are usually dealt with promptly. Those that aren't, usually receive support from BFCA who work with the Department to resolve the matter as soon as possible.

It is positive to note that the service continues to pay any carers who are suspended without prejudice, whilst there are ongoing enquiries. In addition, the service also pays sick pay. The service has provision to pay enhanced allowances for Kinship placements, based on assessed need, to avoid financial hardship for the families concerned.

There are inconsistencies across the service regarding the payment of expenses and other allowances to support children's placements. There are particular problems with short-term placements, where some expenses are being paid on an ad hoc basis as opposed to pro-rata. The service is aware of these problems and has set up a working group to iron out these issues and

agree a set of consistent guidelines which can be applied across the whole service. It was positive to note that BFCA have been included in this working group to represent the carers' views. Apart from concerns raised by BFCA wishing to avoid drift and delays in concluding these negotiations, the outlook is promising to resolve these issues to the satisfaction of all parties involved.

Management

The intended outcomes these Standards are:

- There is a clear statement of the aims and objectives of the fostering service and the fostering service ensures that they meet those aims and objectives.(NMS 1)
- The fostering service is managed by those with the appropriate skills and experience. (NMS 2)
- The fostering service is monitored and controlled as specified. (NMS 4)
- The fostering service is managed effectively and efficiently.(NMS 5)
- Staff are organised and managed effectively.(NMS 16)
- The fostering service has an adequate number of sufficiently experienced and qualified staff.(NMS 17)
- The fostering service is a fair and competent employer.(NMS 18)
- There is a good quality training programme. (NMS 19)
- All staff are properly accountable and supported.(NMS 20)
- The fostering service has a clear strategy for working with and supporting carers.(NMS 21)
- Foster carers are provided with supervision and support.(NMS 22)
- Foster carers are appropriately trained.(NMS 23)
- Case records for children are comprehensive.(NMS 24)
- The administrative records are maintained as required.(NMS 25)
- The premises used as offices by the fostering service are suitable for the purpose.(NMS 26)
- The fostering service is financially viable. (NMS 27)
- The fostering service has robust financial processes. (NMS 28)
- Local Authority fostering services recognise the contribution made by family and friends as carers.(NMS 32)

The Commission considers Standards 17, 21, and 24 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT – The intended outcomes for these Standards are

1, 2, 4, 16, 17, 18, 21, 22, 23, 24, 25, 27, 28, 32

Overall the management of the service is variable and lacks a coherent overview, resulting in shortfalls to service delivery in some parts of the service. This has led to poor outcomes for some children who are placed by the service.

EVIDENCE:

The service has a comprehensive and well-presented statement of purpose which gives a good overview of the service and details all necessary information required by the regulations. However this document is still in draft format. The copy provided to inspectors dated 2005 contained details of complaints relating to the year 2003-2004. This information should be updated regularly in order to give an up-to-date picture to the reader. The accompanying Children's Guide to Fostering updated September 2005 does not include a summary of the statement of purpose. In addition, the Children's Guide lacks details on how children can make complaints or contact details for the Commission, as required by the regulations.

The management team for the fostering service are all suitably qualified and experienced. Given the lengthy vacancy for the service manager's post, prior to inspection the service had not been monitored and controlled to a satisfactory standard. Some local monitoring was being undertaken by individual team managers but this did not cover all areas outlined in Schedule 7, including accidents, first-aid and medication administered to children. No monitoring for the overall service is currently being undertaken. This should hopefully be resolved with the appointment of the new Principal Development Manager.

The Long-term and Kinship, Family Finding, Panel and Recruitment teams had sufficient staffing at the time of inspection. This was not the case for the Assessments and Short-term teams. The position in the short-term teams was the most concerning because there were insufficient staff to provide adequate supervision and support to carers. Administrative workers were undertaking some social work tasks in an effort to meet shortfalls. The lines of delegation and accountability were severely frustrated, with no clear deputising arrangements. Professional supervision was also understandably affected. This situation had been allowed to continue for a lengthy period and the impact of this was felt by carers. Over 70% of carers who responded to the survey felt there were insufficient staff in the fostering service. However, the situation now looks promising in light of a recent recruitment drive, when the service appointed a number of workers and was awaiting the receipt of CRB checks to confirm start dates.

There are currently insufficient suitable carers to meet the demands of the service. In particular there is shortage of white carers to provide an appropriate match for the number of white children awaiting foster placements. It was positive to note that the service is aware of this and are in the process of taking steps to address this through a new recruitment campaign.

The service follows the SCHED recruitment and selection for staffing which is fair and competent and ensures equality of opportunity. Sampled records revealed sound employment practices. There is out-of-hours support available to carers.

The service endeavours to provide support to carers. The majority of carers who responded to the survey indicated that they felt very well supported by the Kinship and Long-term Teams and overall were satisfied with the level of support provided by the service.

Examination of the registers provided indicated that across the whole service there were 122 foster carers who did not have an allocated fostering link worker. As a consequence this and other pressures, the supervision of foster carers falls well below the frequency stated in the foster care agreement. Not surprisingly, this problem was more acute in those areas of the service which were understaffed. Timescales were generally met within the Long-Term and Kinship Teams, with only a small minority not meeting the frequency. The service has in place a system for foster carer annual reviews. Sampled records confirmed that, despite some delays, on the whole reviews were being completed.

Foster carers pre-approval training is delivered to a high standard. The inspectors had the opportunity to observe some pre-approval training and speak with prospective carers attending the course. Those carers spoken to report they were very impressed with the quality and content of the training given.

In sharp contrast, the service has no comprehensive post-approval training programme in place for foster carers. The inspectors were advised that the service started to develop a training programme approximately 18 months ago but this fell by the way side when the Operations Manager's post became vacant. Training is currently offered on an ad-hoc basis to carers, who self select the training they wish to attend. There is no clear system of assessing carers' training needs or ensuring attendance at relevant training.

Currently the Fostering Service has 'read only' access to the Carefirst database, used by the SCHD directorate as their electronic recording system. This prevents fostering link workers making relevant contributions to the child's file where necessary. This creates a situation where sensitive information about the child is often recorded on the carers files in the absence of any alternative. Carers met reported that they were not given clear guidance regarding what information should be included in daily logs, significant events and accidents records. Very few were recording the administration of medication and even fewer the use of homely remedies. There was a variable standard of recording for children in long-term care and these did not always contribute adequately to the child's understanding of their life events. Some carers were using their own computer's to prepare and store children's records. It was unclear as to whether these computers were data-protection compliant and Managers spoken to were unable to provide verification on this point.

The service provided a children's register for the pre-inspection planning. This was produced from the Carefirst Database used by the SCHD. There were a large number of inaccuracies and the register had to be reproduced on two further occasions. This added significantly to the pre-inspection planning time. The final draft of the register still contained omissions and errors and this led to the service having to self-select 5 of the welfare tracking cases. It is not possible to determine to what extent the final register can be relied on for the accurate number of total children accommodated. The information being retained by the SCHD is not consistent with the information fostering services are required to keep under Schedule 2. If the service is unable to produce a reliable register of all children accommodated, it cannot reliably ensure that it safeguards and promotes the welfare of all children placed.

The fitness of premises used by the fostering service was not fully assessed at this inspection. As the Kinship and Long Term Fostering Teams were due to relocate immediately following the inspection it would not be appropriate to score this standard. The premises used by the two Short Term Teams, the Assessments Team, The Panel Team and Family Finding Team were all judged to be appropriate for the purpose. Office space at the Recruitment Team was limited, with the use of 'hot-desking' for some staff. In addition, access for carers with mobility difficulties was limited, as the carers' meeting area is located on the first floor, without lift access. However, the service arranges meetings at other venues with disability access to address this.

Information provided by the SCHD Finance Department confirms the service is financially viable. At the time of inspection there was a small projected underspend. The service's financial arrangements are handled by the SCHD Finance Department, which maintains sound accounting standards and practice.

Friends and family support is delivered by the Kinship team, which is due to change name following relocation. Long-term friends and family assessments for the Kinship team are undertaken by sessional Form F assessors, who are all social work qualified. There is a designated co-ordinator overseeing all these assessments to maintain consistency. Those sampled were judged to be of a high standard.

Support to friends and family carers is delivered by a well-motivated staff team with suitable skills and experience. Carers met and those who responded to the survey indicated they felt well supported by their (kinship) fostering link workers. Shortfalls in this area of service delivery generally relate to the wider social care and health directorate. Carers reported that there could be lengthy periods of time when children did not have an allocated social worker.

The most concerning problems are located in the initial assessment stage. These assessments are carried out by the area social work teams. The suitability of placements is not being adequately assessed. Overcrowding is a key problem, with area workers failing to ensure there is sufficient space to

promote the welfare and dignity of all children and occupants of the household. An immediate requirement for a risk assessment in relation to this issue was left during the inspection.

There was also clear evidence indicating that a significant number of initial placements are based on a lack of established relationships or kinship ties. Some of these placements may have the potential to succeed but would be more appropriately considered for long term fostering with the additional social work and financial support that mainstream placements receive. This would avoid potential placement breakdown due to financial hardship or lack of support.

There are some lengthy delays submitting initial assessments to Panel. These delays allow some questionable placements to continue unchecked for lengthy periods of time. Examples seen were between 4-8 months, in contrast to the 6 weeks specified in the regulations. It is possible these delays are contributing to Panels endorsing poor initial placement decisions. These decisions may be attributable to a pragmatic approach being taken by the Panel Chairs, in the context of their wider duties as Operational Managers for the area teams. It is important for Panels to send a clear message regarding the standard of placements required. There is an important gate-keeping role for Panels to ensure poor placement decisions and initial assessments made by area teams, are not compounded by being allowed to continue.

In the long-term the Principal Development Manager may wish to consider bringing all friends and family assessments in-house, to ensure there is consistency across the service and the relevant standards are met.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Fostering Services have been met and uses the following scale.

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

"X" in the standard met box denotes standard not assessed on this occasion
 "N/A" in the standard met box denotes standard not applicable

BEING HEALTHY	
<i>Standard No</i>	<i>Score</i>
12	3

STAYING SAFE	
<i>Standard No</i>	<i>Score</i>
3	3
6	1
8	1
9	1
15	3
30	2

ENJOYING AND ACHIEVING	
<i>Standard No</i>	<i>Score</i>
7	3
13	2
31	X

MAKING A POSITIVE CONTRIBUTION	
<i>Standard No</i>	<i>Score</i>
10	2
11	1

ACHIEVING ECONOMIC WELLBEING	
<i>Standard No</i>	<i>Score</i>
14	X
29	3

MANAGEMENT	
<i>Standard No</i>	<i>Score</i>
1	2
2	3
4	2
5	X
16	1
17	1
18	3
19	X
20	X
21	3
22	1
23	2
24	1
25	1
26	X
27	3
28	3
32	1

Are there any outstanding requirements from the last inspection? Yes

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.

No.	Standard	Regulation	Requirement	Timescale for action
1	FS8FS6	27(2a)Sch3 CA 89 S22(3a)	<p>The Manager must ensure health and safety issues are addressed by carers and that reviews are strengthened to address privacy and space to meet the ongoing needs of all members of the foster home.</p> <p>This requirement remains partially outstanding since 27.10.04</p> <p>Specifically, the service must ensure that agreed necessary adaptations are carried out in timely fashion, so as to safeguard and promote the welfare and dignity of all children in the household.</p> <p>The service must ensure matching processes gives proper consideration to whether there is sufficient space for all children in the household, reflecting their need for privacy.</p>	31/03/06
2	FS6	CA 89 S22(3a)	Fostering link workers should ensure that MOT and Insurance documentation, for all vehicles	31/03/06

			in the foster carer's household used for transporting foster children, is inspected annually and that a record is maintained on file.	
3	FS6	29(2)	Foster carers' annual reviews should be completed every 12 months.	31/03/06
4	FS8	CA 89 S22(3a)	All short-term and emergency placements must be carefully matched, with a carer capable of meeting the child's needs. The service must identify any gaps in the match (between the carers and child) and how these will be met. Matching must be agreed by staff with a social work qualification, NVQ level 4 or equivalent qualification. The service must provide written feedback to the Commission on the new matching process to be implemented by 16.12.05. This was an immediate requirement.	16/12/05
5	FS8FS9	CA 89 S22(3a)	The service must undertake compatibility risk assessments for foster placements accommodating separate sibling groups.	31/03/06
6	FS8	33(a)(b) CA 89 S22(3a)	The Principal Development Manager must ensure that all exemptions to foster carer's terms of approval promote the welfare of all children in placement.	28/02/06
7	FS9	CA 89 S22	The service must ensure there is a written safe care policy for each foster home (along with the carers' agreement). This requirement remains partially outstanding since 21.07.03	30/04/06
8	FS9	CA 89 S22	A risk assessment should be completed in relation to specific behavioural issues identified in	23/11/05

			<p>the context of the current space available within the placement. (This relates to a specific case made known manager of the relevant fostering team)</p> <p>This was an immediate requirement.</p>	
9	FS30	27(4)(a) Sch 3(13)	<p>The Panels team must ensure that all assessments for prospective carers include all information and documentation outlined in Schedule 3, (specifically CRB checks or equivalent for overseas applicants) before making a final recommendation for approval.</p>	31/01/06
10	FS13	CA 89 22(3)(a)	<p>A passport application must be finalised for a named child made known to the relevant team manager.</p> <p>This was an immediate requirement</p>	09/12/05
11	FS13	16(2)(c) & (4)	<p>The service must ensure that allowances for school uniforms, trips, equipment and support for leisure activities are consistently applied across the service.</p>	31/03/06
12	FS10	14	<p>The Manager of the fostering service must ensure foster carers are provided with sufficient training to support and supervise contact arrangements for children placed, and contact does not occur without appropriate information and risk assessment.</p> <p>This requirement remains outstanding from 21.07.03</p>	30/09/06
13	FS11	S26(3) CA 1989	<p>The Service must ensure that children are consulted and supported to represent their views and receive a response, and that they are provided with information and support to</p>	30/06/06

			<p>make complaints appropriately.</p> <p>This requirement remains partially outstanding from 27.10.04</p> <p>In addition, the service must take steps to ensure that children are aware of the role of the Commission in dealing with complaints.</p>	
14	FS11	42(1)(a) Sch 7	The Principal Development manager must ensure there is a system for recording and monitoring all children's complaints.	03/06/06
15	FS1FS11	3(1b)4 CA 89 S23, 26(3a)	<p>Details of the number of children's complaints and their outcomes should be updated in the statement of purpose at least annually.</p> <p>The accompanying children's guide should include a summary of the statement of purpose, details on how children and young people can make complaints and the address and telephone number of the Commission.</p>	30/06/06
16	FS4	42(1)(a) Sch 7	<p>The <i>Operations Manager</i> must ensure the monitoring of the fostering service covers all areas identified and Service Team Managers can evidence supervision of practice.</p> <p>This requirement remains outstanding since 21.07.03 and would now refer to the Principal Development Manager.</p> <p>Specifically this should include all matters detailed in Schedule 7 of the fostering regulations and periodically provide a report to the Commission.</p>	31/03/06

17	FS16	19	The Principal Development Manager must ensure there are clear lines of accountability/arrangements for deputising in the event of any team manager's absence.	31/05/06
18	FS17	17(1) & 19	The Directorate and the management team must ensure there are sufficient staff and carers to provide a service, which meets the needs of the children and young people placed. This requirement remains outstanding since 21.07.03	30/06/06
19	FS22	17 & 35(1)(c)	The management team must ensure that the supervision of foster carers is delivered to the timescales determined in the foster care agreements.	31/04/06
20	FS23	17 & 42(1)(a)	The Principal Development Manager must implement a co-ordinated post-approval training plan for all foster carers.	30/06/06
21	FS24	DPA 1998 & SI 1991/890	The Principal Development Manager must ensure that fostering link workers have access to make entries to children's case records held on the Carefirst database to avoid sensitive information concerning children being permanently retained on carers' files.	30/06/06
22	FS25	22 Schedule 2	The service must take steps to ensure that the children's register contains all matters outlined in Schedule 2 and supply copies to the Commission on a quarterly basis.	31/03/06
23	FS32	38(2)(a)	The Principal Development Manager must develop closer links with the area childcare teams to ensure all initial friends and family assessments are completed to the same standards as those completed within the fostering service and	30/04/06

			are consistent with the fostering regulations.	
24	FS30FS32	CA 89 S22(3)	The Panel Team must not recommend for approval any friends and family assessments which are not based on well established relationships or genuine kinship ties, at the start of the placement. Those placements not based on long-standing relationships should be considered for mainstream assessments where appropriate.	30/06/06

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1	6	The health and safety assessment used for carer's home would benefit from review, to cover guidance on a broader range of areas.
2	8	The Principal Fostering Development Manager should consider implementing a long-term strategy that ensures all matching decisions are made within the service, given it is the Fostering Service which has the responsibility for meeting the national minimum standards.
3	32	The Principal Development Manager should consider expanding the role of the fostering service to undertake all initial friends and family assessments or work joint with the area teams.
4	11	The Principal Development Manager should consider developing a localised system for dealing with children's complaints.

Commission for Social Care Inspection

Birmingham Office

1st Floor

Ladywood House

45-46 Stephenson Street

Birmingham

B2 4UZ

National Enquiry Line: 0845 015 0120

Email: enquiries@csci.gsi.gov.uk

Web: www.csci.org.uk

© This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI