



*Making Social Care
Better for People*

inspection report

FOSTERING SERVICE

Stoke-on-Trent Social Services Fostering Service

**Heron Cross House
Grove Road
Stoke-on-Trent
Staffordshire
ST4 3AY**

Lead Inspector
Mr David Morgan

Announced Inspection
19 June 2006 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

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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

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SERVICE INFORMATION

Name of service	Stoke-on-Trent Social Services Fostering Service
Address	Heron Cross House Grove Road Stoke-on-Trent Staffordshire ST4 3AY
Telephone number	01782 234555
Fax number	01782 234556
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	Stoke on Trent City Council
Name of registered manager (if applicable)	
Type of registration	Local Authority Fostering Service

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 17th October 2005

Brief Description of the Service:

The authority is described as having a 'significant level of deprivation, with high levels of disability and limiting long-term illness, below average life expectancy, lower earning levels and higher unemployment than the average for the West Midlands and England'. In this context the authority provides a Fostering Service as part of its provision of social services for the communities it serves.

The family placement service provides substitute family care for children and young people between the ages of 0 - 17 years. The service recruits, trains, assesses and approves all foster carers. The service has developed to include family and friends as carers for specific children known to them. The service provides carers who offer a full range of care; emergency placements, respite, task-centred, long-term, Family Link Respite and Remand Care. The main fostering team is based at Heron Cross House, offering assessments, support and training to foster carers. A Central Placement Team is based at the Civic Centre.

SUMMARY

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

This inspection was specifically aimed to see whether or not the requirements of the last inspection of October 2005 had been implemented. The inspectors were fully assisted by the managers and staff of the service. Two inspectors were involved over four days. Evidence inspected included a pre-inspection report and self-assessment from the head of service, recent notifications, a sample of four foster households (chosen at random but including representatives of kinship care, family link and general fostering) and their foster children, relevant files and personnel files; interviews of key staff were also undertaken. A planning meeting had taken place and the inspectors had received an action plan from the head of service outlining how previous requirements were to be addressed. Preliminary, verbal feedback was provided to the foster service managers and the Director of children and young people's services.

It was acknowledged that the service had had less than a year to address the issues but an early visit was necessary because of the service's 'poor' rating. There has also been a Joint Area Review report that reviewed services for children and young people in Stoke on Trent and reported in February 2006. This concluded that social care provision was poor and has helped to focus attention on the fostering services resources shortfall. The Commissioning Strategy report, 2006-8, says that fostering capacity is falling while the number of requests for placements has risen.

It should be noted that the service operates in several areas of fostering, i.e. general, kinship, family link and remand fostering, and that the standard of service varies between these areas. This report highlights such differences where appropriate but the scoring (the extent to which each standard is met) is for the service as a whole. Most concerns remain with the largest area, general fostering. The CSCI were concerned as to how the service was operating and will continue to monitor progress and seek advice as to any further action that is required.

What the service does well:

There are various parts of the service that operate satisfactorily but most are affected by chronic resource problems.

Senior staff have maintained a positive attitude to the task and support other staff well.

What has improved since the last inspection?

Two social work staff have been recruited.

Ten more foster carers have been approved.

Foster carer agreements and safe caring policies have been improved.

Carer and staff training programmes are comprehensive.

There has been a commitment to further increases in resources.

Greater attention has been paid to consultation with children and young people and a support network is planned.

Systems are in place to ensure carers receive relevant information about children.

An improved system of staff recruitment is in place.

What they could do better:

The difficulties still faced by the authority are well known to it and have featured in previous inspection reports, one of which (2004) included a notification to the Secretary of State. Eleven of the 16 current requirements are carried forward from previous inspections. Shortfalls in the service include the following:

- The number of staff and managers, and range of carers, must be improved.
- Staff attendance at training and systematic attention to carer training post-approval must be addressed.
- Policies and procedures need to be reviewed.
- The payment system is inadequate and must be reviewed.
- Poor management decision making regarding placements.

These matters are significant to the structure of the operation of the service and meeting the welfare needs of the children. An example of particular concern was a shortage of suitable placements. This together with poor arrangements for granting exemptions resulted in regularly going over numbers which may be perceived as the Authority being complicit in operating an unregistered children's home.

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 outcome for this Standard is:

- 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 – we looked at the outcome for Standard:

12

Quality in this outcome area is adequate.

The health care needs of children are met but all children must have an allocated social worker and some medical consent forms should be reviewed.

EVIDENCE:

Health. Inspectors learnt from staff and files that placement agreements are now being compiled with greater input from the supervising social worker. Their increased involvement (e.g. at foster placement agreement meetings) has helped to ensure that carers obtain the necessary information on, or shortly after, admission; this was confirmed by carers. Staff had compiled a specific form to record and provide prompts during the placement agreement meetings. It was also confirmed that additional, specialist services are also obtained as required, e.g. mental health services.

The head of service reported that there is a working party looking at ways of ensuring the health needs of looked after children are promoted; this is good practice. Health care issues are also reviewed by supervising and placing social workers during review meetings. This was satisfactory except in those cases (2 in the sample) that did not have a placing social worker. This must be addressed and the director intended to investigate as soon as possible. It must also be noted that inspectors sampled only 12 children's files and it is therefore probable that other children also have no allocated social worker. This should be checked.

It was recommended that those medical consent forms that have a *named* officer be updated. Inspectors are aware that difficulties have arisen in the past when such documents are not accepted by doctors because, during an emergency, the named person is not available or currently employed.

Staying Safe

The intended outcomes for 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, 15 and 30 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT – we looked at outcomes for the following Standard(s):

3; 6; 8; 9; 15; 30

The quality in this outcome area is poor.

The recruitment of staff includes adequate protection procedures.

There are insufficient carers and matching is still unsatisfactory in general fostering.

EVIDENCE:

Suitability of the manager and staff. The inspectors have received details of the new head of service indicating that she has sufficient experience to manage the service. A CRB clearance has also been obtained. Registration is not required of the head of a local authority fostering service. Inspectors were concerned to hear that the post remains an interim position but they were informed that the structure of the service would be confirmed imminently (i.e. within days).

A sample of more than six staff files was inspected, including agency staff. These were in a clear format and contained all the necessary information. The head of service reported that work had been undertaken with the new corporate human resources team (known as Shared Services) to ensure that pre-employment checks were completed.

Providing suitable carers. The inspectors visited four households and saw nine of the 12 children placed in them. These placements were inspected in relation to the requirements of the previous report. Children and carers made positive comments, were well presented and no concerns arose about the direct care that was provided. The houses were clean and comfortable. Bedrooms were not inspected.

The service had introduced a new safe caring policy and document. The majority of carers were using this routinely and adapting it to individual children's needs. This is good practice and shows effective application by the service social workers. The new document also contributes to risk assessments of the children and their new homes.

In one case the sharing of a bedroom did not appear from the file to have been sufficiently addressed and sufficient further information was not available. This must be investigated (see Standard 6.5). On the basis of the available information, this placement was not appropriate. This matter was fully discussed at the inspection and is currently being followed up by the Authority.

The service is aware that its ability to provide suitable foster carers is compromised by a shortage of foster carers (see Matching, below).

Matching. The authority has acknowledged that it has a shortage of foster carers and that this affects the quality of matching between carers and children. This was particularly a problem in general fostering (specifically, emergency or temporary placements) as distinct from family link, kinship or remand fostering. Some of the implications of this shortfall are that children may be placed further away from their schools and family than is desirable. Inspectors were informed that the remand foster placements were used for general fostering at present. This area was not inspected. Recruitment is ongoing via a new, large-scale advertising campaign that was evident throughout the city. (See also previous reports).

Foster placement agreements have been improved and distributed. Responsibility for completion has been moved from the placing social worker to the supervising social worker (whether pre- or post placement). Carers in the sample reported that they had received sufficient information. However, some agreements had not been revised to take into account an increase in occupancy resulting from exemptions to carers' terms of approval. This was particularly pertinent as two of the general foster carers visited were over their approved numbers and had been for some time.

It is recommended foster placement agreements reflect any changes to the carers' terms of approval.

The Central Placement Team was not included in this particular inspection. Inspectors understand that they are now provided with information about

carers (kept electronically) in order to assist in matching decisions. A format has been produced which allows carers to describe themselves to new children prior to placement.

The ongoing use of certain carers in particular in excess of their approved number of children clearly indicates the shortage of suitable placements. It was reported to inspectors that such placements were the best match in the circumstances. The authority presented substantial additional evidence including information about the separation of sibling groups. In some cases it means that the authority is complicit in carers possibly operating illegal children's homes. The director is aware of this problem and reported that he has recently taken a more active role in the administration of exemptions and extensions. There is no evidence yet that the situation has improved in practice and it has been outstanding for several years. This must be addressed and a letter has been sent to the director.

Inspectors found that the small number of children in general fostering spoken to about this specific point considered that they were consulted about the placements. However, this was often shortly after the event rather than as part of the decision-making process. Managers acknowledged there was a problem in the area of consulting children but that the weight that it can be given is limited by placement availability.

Protecting children. Recruitment checks are in place (see above). A new safe caring policy and document are in place and are being used. The service is making additional efforts to ensure that key information is available to carers.

The files for children and carers were not always up-to-date and the inspectors identified two child protection issues that had not been clearly resolved. The head of service has been asked for clarification.

The training needs of carers are reviewed at supervision meetings and a comprehensive training programme has been implemented (see below). There were some gaps in the training programme. For example, although supervising social workers were said to emphasise the importance of carers adopting a positive behaviour management approach with young people there was no clear written guidance for them in managing difficult behaviours other than that physical restraint should not be used. The management team accepted that training in de-escalation and defusion techniques may be beneficial to carers. This matter was said to be under consideration for inclusion in the programme.

All carers are expected to complete level 1, child protection training during their first year of approval. There was evidence in the four carers files that all had completed the training. A new addition to the training programme was the subject of 'safe caring'. The subject was one of three workshops which carers were advised they had to attend prior to being approved at Fostering Panel.

Action had also been taken to update existing carers about the new 'safe caring' guidance and policy. Records of attendance at training sessions showed over ninety carers had attended either a safe caring course or workshop since the beginning of the year.

Child protection policies are in place but are being reviewed by an outside agency.

Panel. The operation of the panel was not inspected in detail on this occasion. The temporary Chair of the panel was interviewed and minutes of meetings were seen. An independent person is being interviewed by the department to take over as chair of the panel. Minutes indicated that satisfactory operation of the panel and that panel members were operating independently. Further training is planned and the role of panel in quality assurance will increase.

It was recommended that the chairperson ensure that the tenure of members was within the legal parameters.

Enjoying and Achieving

The intended outcomes for 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 – we looked at outcomes for the following standard(s):

7

The quality of this outcome area is poor.

There has been no practical improvement in the provision of a diverse range of carers since the last inspection although it is hoped that the current recruitment campaign will help.

EVIDENCE:

Valuing diversity. The previous requirement in this standard has not yet been addressed. Work is in progress to identify the cultural needs of looked after children and to make suitable foster carers available. A kinship carer from a different ethnic background reported that the department had been careful to consider their cultural needs. The supervising social worker felt that additional training would have been useful but, in any case, she had insufficient time to attend courses. Training in this area was available in the programme for 2006/07. Twenty carers were recorded as having attended 'valuing diversity' training since the beginning of the year though these did not include all carers who currently had transracial placements. There remained a need to ensure all carers with young people from differing racial and cultural backgrounds received appropriate training to enable them to promote a positive understanding of the child's heritage and beliefs.

It is recommended all carers looking after young people from different backgrounds, whether ethnic, religious, cultural or linguistic, receive diversity training.

Education. Education was not inspected in detail. No concerns arose at the last inspection. Carers and children reported routine school attendance. Education plans were found on files.

Short-term breaks. Short-term breaks were not inspected in detail. No concerns arose at the last inspection. Carers were positive about the support they receive and were clear about the supportive role they play to parents. The carers raised some important points, supported by the service, about their specific training and support needs. For example, they considered there should be specific link carer meetings at suitable times because their concerns were often different to those of general foster carers.

Making a Positive Contribution

The intended outcomes for 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 – we looked at outcomes for the following standard(s):

Not inspected on this occasion. To be addressed at the next inspection.

EVIDENCE:

Achieving Economic Wellbeing

The intended outcomes for 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)

JUDGEMENT – we looked at outcomes for the following standard(s):

14; 29

The quality of this outcome area is adequate.

Young people are assisted to develop skills for adult living.

Fostering allowances have not been altered since the last inspection and are not satisfactory.

EVIDENCE:

Preparing for adulthood. Files showed that the Leaving Care Team (LCT) was effectively involved with young people via both social workers and personal advisers. There are also regular meetings between the two teams. The manager was made aware that relevant information from his team was not always copied to the fostering team.

Carers were providing suitable independence training opportunities to young people. Young people were found to be consulted before and during review meetings.

A new programme of training for carers is in place. It is planned to introduce a competency-based approach to training and to review how carers show they have maintained their competence. One of the managers is overseeing training. The manager of the LCT reported that his team were providing training for carers and that this was being kept under review, especially since attendances had tailed-off.

Payments to carers. This standard was not reinspected in detail because the issues raised last time are still present. The head of service acknowledged that, although carers receive their payments regularly, the system is not equitable or transparent. The director reported on plans for substantial revision and clarification of payments.

Management

The intended outcomes for 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, 24 and 32 the key standards to be inspected at least once during a 12 month period.

JUDGEMENT – we looked at outcomes for the following standard(s):

1; 3; 4; 5; 16; 17; 19-23; 32

The quality of this outcome area is poor.

There is evidence that the management structure and the Statement of Purpose have been reviewed and action taken. The managers are competent and kinship care is satisfactory. Staff support is satisfactory.

There are insufficient carers, staff and management hours to make the service either efficient or effective. Monitoring is inadequate. Training opportunities for staff and carers have improved but take-up is inconsistent.

EVIDENCE:

Statement of Purpose/suitability to manage. The Statement of Purpose was revised in May 2006 and covers all the required matters. It had been approved by the senior management team but not the elected members as recommended in the standards. The service has been unable to review all its policies in the timescale and has decided to allocate this work to an external agency. A small number have been updated and circulated. It is understood this should be completed by autumn 2006.

Since the last inspection, a new head of service has been appointed and both she and the two, joint managers have relevant qualifications and experience.

It was reported that there is insufficient managerial time available (currently there are a head of service and two part time managers) and this is partly confirmed by the number of issues that have not been addressed since previous inspections.

Monitoring. The last inspection found that an effective system of monitoring had been introduced. The head of service reported that systems are in place to collate and analyse activity and that regular liaison occurs with other teams.

Notifications have continued to be made to inspectors and this is a helpful way of maintaining contact. However, one of the managers reported that systems for analysis of the service were not being used as extensively as necessary and no evidence of auditing was provided. This should be reviewed. Further evidence was provided by the lack of analysis of the complaints record. Effective monitoring systems are highly recommended and guidance is available in the regulations applying to fostering agencies (Regulation 42).

Effective management. Inspectors found that various issues and parts of the service were adequately managed. However, the overall efficiency and effectiveness of the service is seriously compromised by the lack of resources (e.g. workloads too high) and also the fact that various key factors are not under its control, e.g. placement of children with foster carers, delayed information about placements.

Managerial responsibilities for tasks have been split between the two managers. One oversees recruitment, training and kinship care and the other oversees the supervision and support of carers, the reviewing officer and is also the panel adviser. This has enabled progress to be achieved in some areas where previous reports have indicated a shortfall. However, there remained a need to ensure appropriate resources are made available to the fostering service to address outstanding items and consolidate improvements in the service.

Management of staff. Supervising social workers reported attending regular supervision meetings and staff meetings. Lines of accountability are clear and competent staff are in place.

A staff training programme is in place but staff reported not having time to attend due to having high caseloads and needing to prioritise the support of carers. There was a need for managers to implement a review of the training needs of the staff team and thereafter, routinely evaluate the effectiveness of training to ensure staff remain up to date with professional and legal developments.

It is necessary for sufficient staff to be deployed in the team to support their individual training needs.

Sufficient staff and carers. Since the last inspection, two additional social workers have been employed and ten more foster placements have been obtained.

Out of city placements, supervising social worker caseloads, frequency of visits to carers, staff vacancies, carer exemptions and other indicators show there are insufficient carers and staff. This has been acknowledged for some years now and the director reported that additional funds are now being made available. The authority plans to invest heavily in fostering between 2006 and 7.

It is also the case that the service has not assessed how many carers or staff it needs either now or in the future. Targets have been set for caseloads and frequency of visits to carers so the current gap could be readily assessed. This analysis is necessary, as part of quality assurance, so that the service knows what its targets are.

Staff training. An extensive staff training programme is in place and staff are encouraged to attend. New staff are now routinely inducted; these are improvements since last time. Staff also contribute to carer training. However, staff reported not having time to attend the training they needed even though it is routinely monitored in supervision meetings. (See also monitoring, above).

Staff support. Staff were positive about the support they receive. Supervision meetings were reported to be up-to-date and to occur regularly. Appraisals were not inspected.

Support and supervision of carers. Carers reported receiving supervision twice a year plus other visits and at least monthly phone contact. Annual reviews are undertaken by a separate worker (reviewing officer) and this allows the supervising social workers additional time for support. A duty system is in

place. All carers have been given a computer; a quarterly newsletter is distributed, and meetings occur. Additional support is provided by advisory foster carers.

One carer reported that an unannounced visit had been made but inspectors understand this does not occur routinely. Improvements have been made in the liaison between supervising social workers and placing social workers that has helped to ensure carers get the correct information at the beginning of placements. It was reported that supervision visits (in addition to any other visits) will increase to every eight weeks in due course.

Carers reported on the support offered via carers meetings. Inspectors received details of a substantial amount of work that had been undertaken voluntarily to make social opportunities available to carers. One carer recommended that there be greater focus on the type of care they offered because this impacted greatly on the training and support they required, e.g. offending behaviour by children was an issue for general carers but not for respite carers.

A new foster carer agreement is now in place and addresses most of the issues in the standard. However, it is considered that some areas should be strengthened to provide clearer information about expectations of carers in relation to mandatory and on-going training, the procedure for the placement of children and legal liabilities arising by reason of a placement.

It is recommended the agreement is reviewed to ensure it supports the development of the service.

It was found that there was a significant delay in information being passed to the fostering team from EDT in particular. Files also indicated that paperwork was not automatically received and some documents had had to be obtained for the inspection. In addition, the fostering team does not yet have easy access to information about the current placement of children in all its foster placements. This means that supervising social workers could not be confident, in some cases, about which children were actually placed with carers. This is not satisfactory.

Some policies have been updated and circulated to carers (e.g. safe caring) but the majority are awaiting review (see above). This includes the policy regarding allegations against carers and their possible removal from the register which the head of service thought would be finalised by February this year and was carried forward from July 2005.

Training of carers. A new carer training programme is in place and is available to all carers. The training programme for 2006/07 covered a wide range of subjects including the new 'safe caring' guidance and policy and 'valuing diversity'. A small number of carers were noted to have attended training on

'keeping memories safe' and 'life journey work'. This was seen to have resulted in carers establishing memory boxes for the young people in their care. The young people spoke positively about their boxes and it was evident the contents were treasured items. Good practice was demonstrated in this area, albeit for a small number of carers.

Records showed that carers are attending training although numbers are disappointingly low at times. This is despite training being offered at various times during weekdays and Saturdays. The manager responsible for this part of the service is aware that a new system is needed.

Supervising social workers said the training needs of carers were discussed during supervision sessions. A competencies based assessment process was being implemented to also assist in identifying the training needs of carers. Whilst there was evidence the training needs of carers were being identified, there remained wide variation between carers in the training completed – even between those with the same terms of approval.

It is required that systems are implemented to ensure that a) every individual carer attends a certain amount of post-approval training per year, b) competencies are maintained, c) the differences between types of carers is acknowledged and their varying training needs are met.

Family and friends as carers. The sample of carers included a kinship care household. The carers were positive about the support they received and discussed the two training events they had attended since their recent approval.

The key difference from the point of view of the service is that kinship carers do not receive pre-approval training and this makes the process of approval quicker.

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	2

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

ENJOYING AND ACHIEVING	
<i>Standard No</i>	<i>Score</i>
7	1
13	X
31	X

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

ACHIEVING ECONOMIC WELLBEING	
<i>Standard No</i>	<i>Score</i>
14	3
29	2

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

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.	*RQN	35	The authority must ensure that a field social worker is responsible for supervising each child.	17/08/06
2.	FS6	27	In one case the sharing of a bedroom had not been sufficiently addressed; this must be investigated.	17/08/06
3.	FS8 FS7 FS17	34(1)b; 33(a)	The local authority must ensure there are sufficient carers to adequately match children to carers. TIMESCALES SINCE 1.8.05 NOT MET	17/10/06
4..	FS8	11	Due consideration is given to the child's wishes and feelings when matching with a carer. TIMESCALE OF 12.05 NOT MET	17/08/06
5.	FS9	13(1)	The Fostering Service must prepare and implement a written policy on acceptable measures of control, restraint and discipline of young people placed with foster carers. TIMESCALES SINCE 01.07.05 NOT MET	17/08/06

6.	FS7	33(a)	<p>The Fostering Service must ensure that it has sufficient diversity of foster carers to enable each young person placed to have access to foster care services that recognize and address her/his needs in terms of gender, religion, ethnic origin, language, culture, disability and sexuality.</p> <p>TIMESCALES SINCE 01.08.05 NOT MET</p>	17/10/06
7.	FS29	19	<p>The Fostering Service must review the payment structure for all its foster carers and analyse the effect this will have on recruitment. The Fostering Service should provide the Commission with a programme of implementation.</p> <p>TIMESCALES SINCE 01.07.05 NOT MET</p>	17/10/06
8.	FS1	3 (5)	<p>The Fostering Service must ensure it has a comprehensive set of Policies & Procedures.</p> <p>TIMESCALES SINCE 01.07.05 NOT MET</p>	17/10/06
9.	FS5	10 (1) (2) (3)	<p>The structure of the Fostering Service must be reviewed to ensure it is managed effectively and efficiently.</p> <p>TIMESCALES SINCE 30.07.04 NOT MET</p>	17/10/06
10.	FS17	19	<p>The Fostering Service must ensure that there is a sufficient number of suitably qualified, competent and experienced staff (including managers).</p> <p>TIMESCALE OF 01.08.05 NOT</p>	17/10/06

			MET	
11.	FS19	21(4) (a)	The Fostering Service must ensure staff attend appropriate and relevant training. TIMESCALES SINCE 01.08.05 NOT MET	17/10/06
12.	FS22	29 (3)	The Fostering Service must ensure that it has a clear policy framework that outlines the circumstances in which a carer should be removed from the foster carer register. TIMESCALE OF 01.07.05 NOT MET	17/08/06
13.	FS22	17(1)	The Fostering Service must ensure that all foster carers receive information regarding the Service's policies and procedures. TIMESCALES SINCE 01.08.05 NOT MET	17/11/06
14.	FS23	17(1)	The carer-training programme must ensure that a) individuals attend a minimum amount of post-approval training per year, b) competencies are maintained, and c) the differences between types of carers are accommodated.	17/10/06
15.	FS32	CA 1989,s8	The Authority must ensure that staff and foster carers are fully aware of the implications of making a Residence Order. TIMESCALE OF 01.02.06 NOT MET	17/08/06
16.	FS21	22	Arrangements must be made to ensure that paper and electronic systems allow supervising social workers to access relevant	17/08/06

			information about placements promptly.	
17	FS12	11	Medical consent forms with a named officer must be updated.	01/08/06
18	FS4	42	A record of complaints should be implemented as outlined in Reg 42 for monitoring purposes.	31/08/06
19.	FS8	34	To put in place effective systems to ensure that the authorised number of placements are adhered to. This requirement is immediate and ongoing.	19/06/06

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.	FS30	It was recommended that the chairperson ensure that the tenure of panel members was within the legal parameters.
2.	FS31	The specific needs of link carers should be allowed for in training and support meetings.
3.	FS1	The Statement of Purpose should be adopted by the elected members.
4.	FS4	An effective monitoring system should be put in place that includes annual unannounced visits to carers.
5.	FS17	The service should assess how many carers or staff it needs to meet demands now and in the future.
6.	FS22	Fostering Service should ensure that unannounced visits take place at least annually and that written records are kept of these visits.
7.	FS21	Carers support meetings should take into account the differing needs of carers.
8.	FS22	The foster carer agreement is reviewed to ensure it reflects any changes to the carers' terms of approval and supports the development of the service.
9.	FS23	All carers looking after young people from different backgrounds, albeit ethnic, religious, cultural or linguistic, receive diversity training. Other carers are encouraged to undertake the training.
10.	FS29	Foster carer allowances should be made equitable and transparent.

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