



Making Social Care
Better for People

inspection report

Fostering Services

Lewisham Social Services

Laurence House

1 Catford Road

Catford

London

SE6 4SW

26-30th January, and 3rd February 2004

Commission for Social Care Inspection

Launched in April 2004, the Commission for Social Care Inspection (CSCI) is the single inspectorate for social care in England.

The Commission combines the work formerly done by the Social Services Inspectorate (SSI), the SSI/Audit Commission Joint Review Team and the National Care Standards Commission.

The role of CSCI is to:

- Promote improvement in social care
- Inspect all social care - for adults and children - in the public, private and voluntary sectors
- Publish annual reports to Parliament on the performance of social care and on the state of the social care market
- Inspect and assess 'Value for Money' of council social services
- Hold performance statistics on social care
- Publish the 'star ratings' for council social services
- Register and inspect services against national standards
- Host the Children's Rights Director role.

Inspection Methods & Findings

SECTION B of this report summarises key findings and evidence from this inspection. The following 4-point scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

The 4-point scale ranges from:

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

'O' or blank in the 'Standard met?' box denotes standard not assessed on this occasion.

'9' in the 'Standard met?' box denotes standard not applicable.

'X' is used where a percentage value or numerical value is not applicable.

FOSTERING SERVICE INFORMATION

Local Authority Fostering Service?

YES

Name of Authority

Lewisham Social Services

Address

Laurence House, 1 Catford Road, Catford, London, SE6
4SW

Local Authority Manager

Cornelia Tierney

Tel No:

020 8314 9675

Address

Laurence House, 1 Catford Road, Catford, London, SE6
4SW

Fax No:

Email Address

Registered Fostering Agency (IFA)

NO

Name of Agency

Tel No

Address

Fax No

Email Address

Registered Number of IFA

Name of Registered Provider

Name of Registered Manager (if applicable)

Date of first registration

Date of latest registration certificate

Registration Conditions Apply?

NO

Date of last inspection

28/04/03

Date of Inspection Visit		26th January 2004	ID Code
Time of Inspection Visit		10:00 am	
Name of Inspector	1	Sue Nott	105781
Name of Inspector	2	Nefertiti Logan	14669
Name of Inspector	3	Roger Blades	113834
Name of Inspector	4		
Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the NCSC. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
Name of Specialist (e.g. Interpreter/Signer) (if applicable)			
Name of Establishment Representative at the time of inspection			

Introduction to Report and Inspection

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Reports and Notifications to the Local Authority and Secretary of State

Implementation of Statutory Requirements from last Inspection

Statutory Requirements from this Inspection

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Part B: Inspection Methods & Findings

(National Minimum Standards For Fostering Services)

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- 2. Fitness to carry on or manage a fostering service**
- 3. Management of the fostering service**
- 4. Securing and promoting welfare**
- 5. Recruiting, checking, managing, supporting and training staff and foster carers**
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- 8. Financial requirements**
- 9. Fostering panels**
- 10. Short-term breaks**
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INTRODUCTION TO REPORT AND INSPECTION

Independent and local authority fostering services which fall within the jurisdiction of the National Care Standards Commission (NCSC) are subject to inspection, to establish if the service is meeting the National Minimum Standards for Fostering Services and the requirements of the Care Standards Act 2000, the Fostering Services Regulations 2002 and the Children Act 1989 as amended.

This document summarises the inspection findings of the NCSC in respect of Lewisham Social Services. The inspection findings relate to the National Minimum Standards for Fostering Services published by the Secretary of State under sections 23 and 49 of the Care Standards Act 2000, for independent and local authority fostering services respectively.

The Fostering Services Regulations 2002 are secondary legislation, with which a service provider must comply. Service providers are expected to comply fully with the National Minimum Standards. The National Minimum standards will form the basis for judgements by the NCSC in relation to independent fostering agencies regarding registration, the imposition and variation of registration conditions and any enforcement action, and in relation to local authority fostering services regarding notices to the local authority and reports to the Secretary of State under section 47 of the Care Standards Act 2000. The report follows the format of the National Minimum Standards and the numbering shown in the report corresponds to that of the standards.

The report will show the following:

- Inspection methods used
- Key findings and evidence
- Overall ratings in relation to the standards
- Compliance with the Regulations
- Notifications to the Local Authority and Reports to the Secretary of State
- Required actions on the part of the provider
- Recommended good practice
- Summary of the findings
- Report of the Lay Assessor (where relevant)
- Providers response and proposed action plan to address findings

This report is a public document.

INSPECTION VISITS

Inspections will be undertaken in line with the agreed regulatory framework with additional visits as required. This is in accordance with the provisions of the Care Standards Act 2000. The following inspection methods have been used in the production of this report. The report represents the inspector's findings from the evidence found at the specified inspection dates.

BRIEF DESCRIPTION OF THE SERVICES PROVIDED.

A local authority fostering service in an inner city borough, with high levels of deprivation and need.

The service was in the process of restructuring. It had comprised of three teams based on separate sites. The fostering team dealt primarily with short term foster carers, the respite care team offered respite to families caring for children with disabilities and the kinship and permanency team worked with long term placements and family members and friends who had been approved as carers. Each team had its own management arrangements. The kinship and permanence team was part of a larger service unit and had an operational manager post. This manager deputised for the service unit manager. The fostering and respite teams depended on team managers to deputise when the service unit manager was absent.

The new structure consisted of five teams. Two carrying out recruitment and assessment, and three dealing with supervision and support. The placement team was to become part of the commissioning service. The fostering service worked in conjunction with the placement team, which took the initial referrals for children needing placement. At the time of inspection, there were 202 children and young people placed by the service, and 187 carers, including kinship carers.

PART A SUMMARY OF INSPECTION FINDINGS

Inspector's Summary

(This is an overview of the inspector's findings, which includes good practice, quality issues, areas to be addressed or developed and any other concerns.)

This inspection took place seven months after the previous inspection and although a number of the requirements had been met, some were still in the process of being implemented. However, inspectors were reassured by the commitment of management and staff to develop those areas of practice where improvement was needed, and to consolidate areas where they were doing well. Overall the findings of the inspection indicated that the service offered thorough assessments, good support and training, and a rigorous panel keen to maintain and strengthen its quality assurance role. The restructuring of the fostering service was taking longer to implement than first envisaged, mainly due to difficulties in locating suitable premises and this seemed to be affecting the general morale of staff in maintaining a positive outlook about the proposed changes. Management, however, endeavored to keep staff up to date with developments, and to seek and be responsive to their views wherever possible.

Statement of Purpose (Standard 1)

This standard was partially met. The agency had recently revised the statement of purpose, and the children's guide was in the process of being updated, to meet the needs of all the children and young people receiving a service.

Fitness to Provide or manage a fostering service (Standards 2-3)

These standards were met. The managers were all appropriately qualified and had relevant professional childcare experience to manage the fostering service. They demonstrated the ability to provide good and supportive leadership, and to respond to the challenges of their roles.

Management of the fostering service (Standards 4-5)

Both standards were partially met. The fostering service was on the whole managed effectively, but poor communication between the fostering service, Looked After Children teams and the placement team continued to impact on the service provided. Also difficulties in locating suitable accommodation to achieve the proposed move and restructuring of the fostering service had prolonged uncertainty and anxiety amongst staff over the past year. There was some positive feedback from the staff about the proposed changes, although inspectors noted that staff were less enthusiastic than previously and some indicated that they felt unsettled by the length of time it was taking.

Securing and promoting welfare (Standards 6-14)

Nine standards were assessed: six were met; three were partially met. The fostering service was thorough in its approval procedures, and aimed to ensure carers provided safe, healthy and caring environments for the foster children and young people. The agency was developing its policy around recruitment, and was planning to widen its carer base by targeting particular local communities to ensure families would be recruited that would best meet the needs of the range of children being referred to them. The agency put emphasis on valuing diversity, and maintaining contact for the children with birth families, as well as encouraging links with cultural, religious and community groups. Efforts were made to listen

to children and young people, and enable them to have a say in the service provided. Staff recognised the importance of the matching process for the foster child and carer. However, this process was impaired by the difficulties in obtaining all the necessary relevant information and documentation about a child or young person from the placing social worker. Poor communication between teams also at times impacted on these standards and affected the efficiency of the service in securing and promoting the welfare of the children placed.

Recruiting, checking, managing, supporting and training staff and foster carers (Standards 15-23)

Nine standards were assessed; five were met; four were partially met. There were appropriate recruitment and selection procedures in place to ensure the employment of appropriately qualified and experienced staff. However, the process of updating CRB checks had not been completed on all staff. Staff were generally positive of the support provided by managers, but the quality of supervision varied. Supervising social worker support to carers was good, and training was very well established. Although there had been some improvement in staffing since last year, there was still a high turn over of staff throughout the department, which was affecting continuity of service for the carers and children. Administrative support was insufficient to meet the needs of the service.

Records (Standards 24-25)

Two standards were met; one was partially met. Records were of a reasonable standard, although there was a lack of background information on the children and young people from placing social workers on some files. Efforts were, however, being made to address this, and a system of auditing was in place. Files were secured and stored appropriately.

Fitness of premises (Standard 26)

This standard was met. The present three offices were appropriately laid out for the space available, and were suitable for carrying out the work of the agency, although additional space was used for training purposes. Managers were exploring alternative accommodation to achieve their restructuring plan. There was a satisfactory level of security provided. However, the buildings were accessible to service users and staff who are wheelchair users. The premises were fully insured.

Financial requirements (Standard 27-29)

Two standards were met; one was partially met. There was evidence of clear financial systems for the control and supervision of the agency's financial affairs. There were still some difficulties in ensuring that payments to carers were made on time.

Fostering panel (Standard 30)

This standard was met. The panel was a joint panel with Kusadiki, and was operating within the regulations. Roles and responsibilities of the managers in relation to panel were clear. The panel chair was suitably experienced and qualified, and the panel was effective and thorough in its discussions. Meetings were held regularly. Panel members received papers sufficiently in advance. Annual training for panel was planned. Prospective carers attended panel, and this was handled appropriately. The fostering panel was operating well, and it was clear that there was a range of expertise among the members. The panel was considered by both the chair and the fostering staff to be rigorous in its deliberations.

Short-term breaks (Standard 31)

This standard was met. The respite care scheme provided short breaks for children with disabilities, and the necessary policies and procedures were in place. The respite care team will become part of the fostering service in April 2004.

Family and friends as carers (Standard 32)

This standard was met. The increased number of kinship assessments had had a significant impact on the workload of the fostering service. However, there was evidence of an improving service now being provided to carers, who were family and friends of the children placed. All approved kinship carers were allocated, and support was now provided.

Reports and Notifications to the Local Authority and Secretary of State

(Local Authority Fostering Services Only)

The following statutory Reports or Notifications are to be made under the Care Standards Act as a result of the findings of this inspection:

Report to the Secretary of State under section 47(3) of the Care Standards Act 2000 that the Commission considers the Local Authority's fostering service satisfies the regulatory requirements:

NO

Notice to the Local Authority under section 47(5) of the Care Standards Act 2000 of failure(s) to satisfy regulatory requirements in their fostering service which are not substantial, and specifying the action the Commission considers the Authority should take to remedy the failure(s), informing the Secretary of State of that Notice:

YES

Report to the Secretary of State under section 47(4)(a) of the Care Standards Act of a failure by a Local Authority fostering service to satisfy regulatory requirements which is not considered substantial:

NO

Report to the Secretary of State under section 47(1) of the Care Standards Act 2000 of substantial failure to satisfy regulatory requirements by a Local Authority fostering service:

NO

The grounds for the above Report or Notice are:

The legislation has changed, and a notice will be issued under section 81(5) of the Health and Social Care Act 2003 that the council has failed to discharge its fostering functions to an acceptable standard, as a number of standards have not been fully met. However, this failure is not considered substantial.

The areas where the council has only partially met, or failed to meet the required standards specifically relate to poor communication between workers in different teams in Children's Services; issues in securing and promoting the welfare of children; recruiting, and checking staff; maintaining satisfactory records and the efficiency of the payment system for carers.

Implementation of Statutory Requirements from Last Inspection

Requirements from last Inspection visit fully actioned?

NO

If No please list below

STATUTORY REQUIREMENTS				
Identified below are areas not addressed from the last inspection report which indicate a non-compliance with the Care Standards Act 2000 and Fostering Services Regulations 2002.				
No.	Regulation	Standard	Required actions	
1	FSR2002.3	FS1	The children's guide must be suitable for all children fostered through the service. Council members must also approve the Statement of Purpose and children's guide, once finalised.	01.04.04 now 31.08.04
2	FSR2002.8	FS4	The provider must ensure that there are clearly established lines of communication between staff in the fostering services and also between the different departments concerned with the welfare of children placed with foster carers.	01.04.04 now 31.08.04
3	FSR2002.11 and 12	FS8FS9F S24	The provider must ensure that in each case appropriate and sufficient information is available to the fostering service and to the individual carer about the child or young person placed.	Immediate
4	FSR2002.20	FS15	The provider must ensure that all appropriate statutory checks, to assess suitability of staff to work with children, are conducted on existing staff as well as on new appointments.	01.12.03 now 30.06.04
5	FSR2002.19	FS17	The provider must achieve a stable staff team in all parts of its fostering service.	01.04.04 now 31.08.04
6	FSR2002.35	FS22	Unannounced visits must be conducted at least annually.	01.12.03 now 31.08.04
7	FSR2002.44	FS29	The provider must ensure that timely payments are made to foster carers.	01.12.03 now 30.06.04

Action is being taken by the National Care Standards Commission to monitor compliance with the above requirements.

COMPLIANCE WITH CONDITIONS OF REGISTRATION (IF APPLICABLE)

(Registered Independent Fostering Agencies only)

Providers and managers of registered independent fostering agencies must comply with statutory conditions of their registration. The conditions applying to this registration are listed below, with the inspector's assessment of compliance from the evidence at the time of this inspection.

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Lead Inspector **Sue Nott** **Signature** _____
Second Inspector _____ **Signature** _____
Locality Manager **Peter Nunn** **Signature** _____
Date _____

STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

Action Plan: The appropriate Officer of the Local Authority or the Registered Person (as applicable) is requested to provide the Commission with an Action Plan, which indicates how requirements and recommendations are to be addressed. This action plan will be made available on request to the Area Office.

STATUTORY REQUIREMENTS

Identified below are areas addressed in the main body of the report which indicate non-compliance with the Care Standards Act 2000, the Children Act 1989, the Fostering Services Regulations 2002, or the National Minimum Standards for Fostering Services. The Authority or Registered Person(s) is/are required to comply within the given time scales in order to comply with the Regulatory Requirements for fostering services.

No.	Regulation	Standard *	Requirement	
1	FSR2002.4	FS1	Lewisham fostering service must ensure that the Statement of Purpose and Children's guide are kept under review and revised appropriately with any ongoing developments. Council members must approve both documents when finalised. This is a requirement from the previous inspection, which has not been fully addressed.	31.08.04
2	FSR2002.3	FS1	The children's guide must include additional information about Lewisham's own service, and the address and telephone number of the local Commission office. This is a requirement from the previous inspection, which has not been fully addressed.	31.08.04
3	FSR2002.8	FS4	The provider must ensure that there are clearly established lines of communication between carers, staff in the fostering services, placements service, LAC teams, as well as the Leaving Care team. This is a requirement from the previous inspection, which has not been fully addressed.	31.08.04
4	FSR2002.8	FS5	Managers must set firm timescales for achieving the restructuring process to lessen uncertainty and anxiety amongst staff.	03.02.04

5	FSR2002.12	FS6	Evidence must be provided of written risk assessments being carried out in relation to children who are not related sharing bedrooms. Assessments should also be carried out in all situations where a child is known to have experienced sexual abuse, or where little is known of a child's background.	30.06.04
6	FSR2002.11	FS7	The service must ensure that steps are taken to achieve foster placements which provide a suitable racial, ethnic and cultural match within six weeks, unless there are other overriding reasons, why a particular placement should be maintained.	31.08.04
7	FSR2002.11	FS8	The provider must ensure that in each case appropriate and sufficient information is available to the fostering service, and to the individual carer about the child or young person placed. This is a requirement from the previous inspection, which has not been fully addressed.	Immediate
8	FSR2002.17	FS9	The agency must ensure that all carers attend ongoing training on safe caring and managing difficult behaviour.	31.08.04
9	FSR2002.20	FS15	Criminal Record Bureau (CRB) checks must be carried out on all current staff. This standard was subject to a previous requirement on this issue.	30.06.04
10	FSR2002.20	FS15	Telephone enquiries must be made, in addition to obtaining written references on new staff.	30.06.04
11	FSR2002.19	FS17	The provider must achieve a stable staff team in all parts of its fostering service. The make up of the teams in relation to ethnicity should be kept under review in the light of overseas recruitment of mainly white staff. This is a requirement from the previous inspection, which has not been fully addressed.	31.08.04
12	FSR2002.21	FS20	Managers must ensure that regular supervision and appraisal are available to all staff.	30.06.04

13	FSR2002.35	FS22	Systems, and sufficient staffing, must be provided to ensure unannounced visits and regular visiting of all carers is carried out. This is a requirement from the previous inspection, which has not been fully addressed.	31.08.04
14	FSR2002.11 & 12	FS24	Managers must ensure that case files for each young person in foster care provide an up to date, comprehensive record, including copies of all relevant LAC forms. This is a requirement from the previous inspection, which has not been fully addressed.	Immediate
15	FSR2002.44	FS29	The provider must ensure that timely payments are made to foster carers. This is a requirement from the previous inspection, which has not been fully addressed.	30.06.04

GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

Identified below are areas addressed in the main body of the report which relate to the National Minimum Standards and are seen as good practice issues which should be considered for implementation by the Authority or Registered Person(s).

No.	Refer to Standard *	Recommendation Action
1	FS1	It is recommended that the agency consider making the children's guide available in different languages to meet the needs of children and young people placed.
2	FS6	The inspector would recommend that a copy of the foster carer's insurers' written confirmation be kept on the carer's file.
3	FS14	The provider should ensure that action is taken to develop better coordination between the Leaving Care services and Adult Services for young people over 16.
4	FS15	Any gaps in staff, panel members, or carer's CV's should be followed up and recorded.
5	FS17	A rigorous and consistent analysis of placement need and target recruitment should be carried out on a regular basis.
6	FS17	The review of business support services should be completed as soon as possible.
7	FS18	Lewisham's "Whistle blowing" policy should be brought to the attention of all staff, irrespective of their employment status.

8	FS19	The induction programme for new staff should be reviewed to ensure consistency in standard and quality. Managers should ensure that staff recruited from overseas, should be given relevant training in U.K. childcare legislation.
9	FS25	It is recommended that carer's files routinely record details of visits during the assessment process.
10	FS28	It is recommended that further support and training is made available to managers dealing with financial control and supervision.
11	FS32	It is recommended that further work is carried out on improving services to kinship carers, that resources to achieve a better service are kept under review, and that the special needs of kinship carers are recognised and included in future training programmes.

* Note: You may refer to the relevant standard in the remainder of the report by omitting the 2-letter prefix e.g. FS10 refers to Standard 10.

PART B**INSPECTION METHODS & FINDINGS**

The following inspection methods have been used in the production of this report

Number of Inspector days spent	10
Survey of placing authorities	NA
Foster carer survey	YES
Foster children survey	YES
Checks with other organisations and Individuals	
• Directors of Social services	NO
• Child protection officer	YES
• Specialist advisor (s)	NO
• Local Foster Care Association	NO
Tracking Individual welfare arrangements	YES
• Interview with children	YES
• Interview with foster carers	YES
• Interview with agency staff	YES
• Contact with parents	NO
• Contact with supervising social workers	YES
• Examination of files	YES
Individual interview with manager	YES
Information from provider	YES
Individual interviews with key staff	YES
Group discussion with staff	YES
Interview with panel chair	YES
Observation of foster carer training	YES
Observation of foster panel	YES
Inspection of policy/practice documents	YES
Inspection of records	YES
Interview with individual child	YES
Date of Inspection	26/01/04
Time of Inspection	10.00AM
Duration Of Inspection (hrs)	38

The following pages summarise the key findings and evidence from this inspection, together with the NCSC assessment of the extent to which the National Minimum Standards have been met. The following scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

The scale ranges from:

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

"0" in the "Standard met?" box denotes standard not assessed on this occasion.

"9" in the "Standard met?" box denotes standard not applicable.

"X" is used where a percentage value or numerical value is not applicable.

Statement of Purpose

The intended outcome for the following standard is:

- **There is clear statement of the aims and objectives of the fostering service and the fostering service ensures that they meet those aims and objectives.**

Standard 1 (1.1 - 1.6)

There is a clear statement of the aims and objectives of the fostering service and of what facilities and services they provide.

Key Findings and Evidence	Standard met?
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Lewisham had recently expanded and revised its Statement of Purpose to cover all the areas required. It gave clear aims and objectives for the service, and explained that a restructuring of the service was about to take place. This would unite the different fostering teams on one site to create a unified fostering service, which was reflected in this common Statement of Purpose. Copies had been shown to staff, and it would become available on the Lewisham intranet, when it was re-approved by council members.

The Children's Guide, which was distributed to all looked after children (LAC) at their second review, was produced by the Area Child Protection Committee. It was clear and informative, but not specifically related to foster care. This guide was also being updated to make it more relevant. It was also planned to distribute the British Agencies for Adoption and Fostering children's guide to fostering, until the service produced their own guide. The BAAF guide provided helpful information, but additional information about Lewisham's own service, and the address and telephone number of the local Commission office must still be included.

This was the subject of a requirement last year, and continues to be so.

Staff were sensitive to the need for using different formats in ensuring communication with all the children placed, and interpreters are used when necessary. This is an area for further development, and it is recommended that the agency consider making the guide available in different languages to meet the needs of all the children and young people placed.

The fostering service had the range of required policies, which were being updated. This process was near completion.

Lewisham fostering service must ensure that the Statement of Purpose and Children's guide are kept under review and revised appropriately with any ongoing developments.

Fitness to Carry On or Manage a Fostering Service

The intended outcomes for the following set of standards are:

- The fostering service is provided and managed by those with the appropriate skills and experience to do so efficiently and effectively and by those who are suitable to work with children.

Standard 2 (2.1 - 2.4)

The people involved in carrying on and managing the fostering service possess the necessary business and management skills and financial expertise to manage the work efficiently and effectively and have the necessary knowledge and experience of childcare and fostering to do so in a professional manner.

Key Findings and Evidence

Standard met?

3

The competence of the management was evidenced during interviews, discussions with staff, and examination of personnel files, written systems and documentation. The service unit manager held a relevant social work qualification, and had previously held a variety of social work and managerial positions in childcare services. Interviews with the respective team managers provided evidence of satisfactory management skills. All had appropriate professional qualifications and relevant childcare experience. The authority was aware of the requirement for management training to be achieved by 2005. The service unit manager had been offered a place on a Certificate in Management Studies, which she was considering. Discussion with staff showed that they were positive about the quality of the leadership and support received from management.

There was evidence of capable leadership from the service unit manager, and a commitment to the development of a consistent management approach within the new management team.

Standard 3 (3.1 - 3.4)

Any persons carrying on or managing the fostering service are suitable people to run a business concerned with safeguarding and promoting the welfare of children.

Key Findings and Evidence

Standard met?

3

CRB checks, references and interviews with managers confirmed that they were suitable people to be involved in an agency concerned with safeguarding the welfare of children. The agency had appropriate recruitment and selection policies, which were available on the council's intranet. Copies of qualifications achieved, CV's, other identification documents and photographs of staff should be requested. Any gaps in CV's should be explained, and noted during interview.

Management of the Fostering Service

The intended outcomes for the following set of standards are:

- **The fostering service is managed ethically and efficiently, delivering a good quality foster care service and avoiding confusion and conflicts of role.**

Standard 4 (4.1 – 4.5)

There are clear procedures for monitoring and controlling the activities of the fostering service and ensuring quality performance.

Key Findings and Evidence

Standard met?

2

At the last inspection, the diffusion of fostering functions across teams and sites, with different management lines of responsibility, created difficulties at times in maintaining clear channels of communication between the teams. Both carers and staff had commented on the need to improve communication between the fostering and Looked After Children teams. There was evidence that this was still an issue during this inspection. Unnecessary disputes had arisen in a number of cases due to poor communication between staff working in the different services, mainly concerning individual roles and responsibilities. These differences should have been picked up in supervision, and dealt with quickly at team manager level. Lack of permanent staff, and ongoing changes of allocated workers in the LAC teams continued to impact on the service provided and the development of initiatives to improve communication. Some of the carers visited and those responding to questionnaires found this frustrating and concerns were expressed at the delays that sometimes occurred in planning for children in their care. It was also evident that communication between the placement team and supervising social workers over proposed placements was at times fraught.

The previous requirement that the provider ensure that there are clearly established lines of communication between carers, staff in the fostering services, and staff in the LAC teams, as well as others concerned with the welfare of children placed with foster carers remained unmet at this inspection. Joint training and practice discussion forums between the teams should be encouraged to improve communication.

The service used a clear format for auditing files and there was evidence that audits were carried out. Form F reports were checked by two managers prior to panel to ensure a good standard of assessments was maintained. All carer's files seen contained the foster carers agreement form, which outlined the tasks and responsibilities of the carer's role.

The agency provided written information regarding the charges for its fostering services and statements of the amounts paid to carers.

The fostering service informed carers and staff of their responsibility to declare any possible "conflict of interest".

Lines of accountability were clear, and all staff were subject to a performance evaluation scheme.

Number of statutory notifications made to NCSC in last 12 months:

0

Death of a child placed with foster parents.

0

Referral to Secretary of State of a person working for the service as unsuitable to work with children.

0

Serious illness or accident of a child.

0

Outbreak of serious infectious disease at a foster home.

0

Actual or suspected involvement of a child in prostitution.

0

Serious incident relating to a foster child involving calling the police to a

X

foster home.

Serious complaint about a foster parent.

Initiation of child protection enquiry involving a child.

X
X

Number of complaints made to NCSC about the agency in the past 12 months:

0

Number of the above complaints which were substantiated:

0

Standard 5 (5.1 - 5.4)

The fostering service is managed effectively and efficiently.

Key Findings and Evidence

Standard met?

2

Managers had job descriptions that clearly set out the responsibilities involved. These will be reviewed as part of the restructuring process. Lines of accountability were defined and arrangements were in place to cover management absence. The managers met formally on a regular basis. There were ongoing initiatives to improve recruitment and retention of social workers in the department.

Management had tried hard to keep staff informed about the proposed restructuring, and to retain the optimism and support of their staff, but the lack of a firm date on moving offices and achieving all the changes was causing frustration for some staff. Others remained anxious about losing their specialist skills and experience with the planned changes. Staff had recently been involved in a Development Day to discuss different models of working in the new structure, but at the time of inspection, the teams were still on different sites, and this situation continued to have implications for achieving consistent working practice. Managers must set clear timescales for achieving the proposed move and restructuring process to lessen uncertainty and anxiety amongst staff.

Securing and Promoting Welfare

The intended outcome for the following set of standards is:

- The fostering service promotes and safeguards the child/young person's physical, mental and emotional welfare.

Standard 6 (6.1 - 6.9)

The fostering service makes available foster carers who provide a safe, healthy and nurturing environment.

Key Findings and Evidence	Standard met?	2
<p>Files inspected showed that assessments, using BAAF Form F, were competency based. They were thorough and included health and safety checks. The swift system incorporated home visit forms that addressed health, safety and standards of care. Accommodation seen during visits to carers was of a good standard. In certain circumstances, the inspectors were told that children placed might share a double room. There was no written record of risk assessments being carried out in relation to children, who are not related, sharing bedrooms, although managers were confident that this was verbally done in practice. This is subject to a new requirement. There was evidence from carers visited, questionnaires received, and examination of files that carers generally provided safe, healthy and nurturing environments. The foster carer agreement states that foster carers are expected to notify their household insurance company of their fostering activity, and receive written confirmation from the insurance company that the fostered child or children will be considered members of their household. The inspector would recommend that a copy of the insurers' written confirmation be kept on the carer's file. A course on First Aid for child carers was planned in March, as well as health and safety being covered in the initial Choosing to Foster course.</p>		

Standard 7 (7.1 - 7.7)

The fostering service ensures that children and young people, and their families, are provided with foster care services which value diversity and promote equality.

Key Findings and Evidence	Standard met?	2
<p>From discussion with the managers of the service and staff, it was clear that there was a commitment to ensure that children were provided with a service that valued diversity and that it was an issue the agency took seriously. It was seen as integral to the recruitment and training of an ethnically and culturally diverse group of carers and social work service. Lewisham had a clear equal opportunities policy and a section in their Child Care Manual was devoted to anti-discrimination practice. Carer Agreements reflected this. Advertising encouraged a diverse range of applicants to apply. However, the service itself identified a need to continue to develop the policy to more consistently meet the racial, cultural and ethnic needs of the children placed. The agency encouraged carers to provide information about community and leisure activities for the children, and will assist with financial support to allow children to pursue interests and talents, where appropriate. There was no evidence of a policy operating concerning foster placements made in an emergency, when a suitable ethnic and cultural match was not available. The service must ensure that steps are taken to achieve this within six weeks, unless there are other overriding reasons for why a particular placement should be maintained.</p>		

Standard 8 (8.1 - 8.7)

Local authority fostering services, and voluntary agencies placing children in their own right, ensure that each child or young person placed in foster care is carefully matched with a carer capable of meeting her/his assessed needs. For agencies providing foster carers to local authorities, those agencies ensure that they offer carers only if they represent appropriate matches for a child for whom a local authority is seeking a carer.

Key Findings and Evidence**Standard met?****2**

The fostering service worked closely with the placements service to ensure the best possible match for each child. A fostering manager would read all carers' assessments (Form F's) received from independent agencies. Referrals received by the placements service exceeded in-house capacity and, in spite of efforts to reduce the numbers of children and young people placed in Independent Fostering Agencies and residential establishments, this had not been achieved. The placements service used a form to gather information about the child to be shared with potential carers, both in-house and agency. Essential information records were provided to carers and reviewed at placement agreement meetings. From interviews with carers, examination of files, and questionnaires received, there was evidence that the agency tried to appropriately match the children to the carers. However, their ability to do so continued to be restricted in some cases by a lack of information provided by district social workers and this continued to impinge on the ability of the service to ensure proper matching. This was the subject of a previous requirement, and is restated in this report. There was evidence on files examined of a verbal sharing of information concerning the child between the relevant professionals and potential carers. Consideration was also given to the child's racial, ethnic, religious, cultural and linguistic needs, but there was recognition that these needs could not always be met. The inspector was informed that where carers were unable to reflect some of these needs, additional training and support would be given and this would be identified in the written foster placement agreement at the time of placement and at future reviews. The inspector was informed that, with the exception of emergency placements, there was a period of introduction between child and carer.

Standard 9 (9.1 - 9.8)

The fostering service protects each child or young person from all forms of abuse, neglect, exploitation and deprivation.

Key Findings and Evidence**Standard met?****2**

The fostering service had a clear policy that corporal punishment was unacceptable, and carers visited understood this. Each carer's household was required to develop a family policy, which was subject to annual review. Lewisham had clear Missing Children procedures, as part of the Missing From Care project. A statement on bullying was included in the handbook. Again carer's interviewed showed an understanding of the procedures involved. Complaints and allegation data were regularly collated. From discussion with the chair of the panel and observation of panel operation, there was evidence that the panel would act as an additional quality monitoring tool for the protection of children placed by the agency. Responses from placing social worker questionnaires considered children to be safe in the placements offered. File reading showed regular contact and visits from supervising social workers. There was an ongoing programme of training provided to carers and this included courses on the protection of children from abuse, safe caring and managing difficult behaviour. The agency must ensure that all carers attend ongoing training on these issues. As discussed in Standard 6, written evidence of individualised risk assessments being carried out when a child was being considered for placement was not always available.

Percentage of foster children placed who report never or hardly ever being bullied:	X	%
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Standard 10 (10.1 - 10.9)

The fostering service makes sure that each child or young person in foster care is encouraged to maintain and develop family contacts and friendships as set out in her/his care plan and/or foster placement agreement.

Key Findings and Evidence	Standard met?	3
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There was evidence on files that contact was addressed and recorded during the care planning process, including the development of the care plan at “looked after children” reviews, and during the matching process. Efforts were made to ascertain the views and wishes of the child or young person in relation to contact with their family. Contact was discussed with carers in pre-approval training and the need to encourage contact was specified in carer’s agreements. The supervising social worker visits were expected to monitor contact on a regular basis and record the details on file. Ongoing training was provided within the annual training programme and reviews assessed the carer’s ability to facilitate and promote contact.

Discussion with the carers, children and young people visited supported this view. Links with cultural centres, churches and community groups were also encouraged. Returned questionnaires from placing officers also gave positive feedback on this issue.

Standard 11 (11.1 - 11.5)

The fostering service ensures that children's opinions, and those of their families and others significant to the child, are sought over all issues that are likely to affect their daily life and their future.

Key Findings and Evidence	Standard met?	3
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There was evidence, from discussion with staff, of a commitment to listen to children and involve them in decisions affecting their lives. Carers’ training included a Listening To Children module. Carers’ agreements emphasised partnership between all parties. Children and families were included in care planning and both were given LAC consultation forms at the time of their child’s review. End of placement feedback forms had been updated. The manager was aware that the fostering service needed to consider how this information might best be used in shaping service delivery. The Rights and Participation project offered an advocacy service to children and young people. There was access to advocacy and counselling services for children with special communication needs.

The young person’s guide showed how to make complaints, although the Commission was still not listed as a useful contact. This was in the process of being updated. The children and young people seen during the inspection indicated that they understood how to make a complaint, and were confident in doing so if necessary.

The inspector was informed that carer’s children were also consulted and offered support where appropriate.

Standard 12 (12.1 - 12.8)

The fostering service ensures that it provides foster care services which help each child or young person in foster care to receive health care which meets her/his needs for physical, emotional and social development, together with information and training appropriate to her/his age and understanding to enable informed participation in decisions about her/his health needs.

Key Findings and Evidence**Standard met?**

3

A designated nurse for LAC had been appointed since the last inspection. She was available to offer advice to carers and children and young people. Drop in sessions were to be offered at the Leaving Care service to encourage young people's health awareness and give them the opportunity to discuss issues of concern. Information given to young people about health issues was in the process of being updated. Inspection of files showed that information regarding young peoples health needs was sought at the time of referral, although not always received. Health issues were regularly monitored through the review process. Carers' agreements reflected expectations of carers to meet placement health needs. Carers' training, in the last year, had included health, hygiene and HIV awareness. Specific training around disability issues was available for respite carers. Management said that all children placed were registered with a GP. There was evidence on file of medical assessments being carried out and the use of specialist services.

Carers were expected to make sure that the child or young person had regular dental and optician check ups, access to a balanced diet and opportunities for leisure activities. The agency also supported carers in advocating for resources to access any health services the children in their care required. Foster carers were expected to attend the child or young person's LAC review to provide information regarding the child or young person's health needs, and to contribute to the planning and reviewing process.

Standard 13 (13.1 - 13.8)

The fostering service gives a high priority to meeting the educational needs of each child or young person in foster care and ensures that she/he is encouraged to attain her/his full potential.

Key Findings and Evidence**Standard met?**

3

The agency had an educational policy, and the importance of meeting the educational needs of each child or young person in foster care was stressed and was consistent with the information gathered from the interviews with carers. The training programme for carers had a module specifically on education. Agreements, reviews and supervising social work visits emphasised the educational needs of the Looked After Child. All carers with young people doing GCSEs had been supplied with a computer. The fostering service had a performance indicator to reduce out of borough placements, where obtaining educational provision could be problematic for the placing authority. The service plan also specified performance indicators for educational attainment.

The local Foster Care Association had worked with the education department and Social Services, to achieve priority for LAC on the waiting list for school places in Lewisham. There was a specialist-funded post to offer support to children without a school place.

It was an expectation that foster carers should support their foster child or young person educationally, and contribute to the assessment of the children's educational needs and progress in the planning and review process, and through attending PEP meetings. There was evidence from files seen, and carers and children visited that this was happening.

Standard 14 (14.1 - 14.5)

The fostering service ensures that their foster care services help to develop skills, competence and knowledge necessary for adult living.

Key Findings and Evidence**Standard met?**

3

Lewisham had a Leaving & After Care service for young people aged 16+, and offered a preparation group for looked after children. A copy of the Leaving Care policy was in the Childcare manual. This service was managed separately from the fostering service. The carer's annual review looks at preparation for independence as part of the competencies of caring. Specific training was included in training programmes for carers on helping young people prepare for independence. Carers seen who had teenagers placed were aware of the expectations on them, and understood that they need to provide the young people with age and developmentally appropriate opportunities for learning independence skills. The young people spoken to felt they were consulted and involved in the decision making about their future. However, the provider should continue to develop better coordination between the Leaving Care services and Adult Services for young people over 16.

Recruiting, Checking, Managing, Supporting and Training Staff and Foster Carers

The intended outcome for the following set of standards is:

- The people who work in or for the fostering service are suitable to work with children and young people and they are managed, trained and supported in such a way as to ensure the best possible outcomes for children in foster care. The number of staff and carers and their range of qualifications and experience are sufficient to achieve the purposes and functions of the organisation.

Standard 15 (15.1 - 15.8)

Any people working in or for the fostering service are suitable people to work with children and young people and to safeguard and promote their welfare.

Key Findings and Evidence

Standard met?

2

Lewisham's staff recruitment and selection procedures were extensive. Inspection of personnel files showed that staff were appropriately experienced, qualified and that relevant checks were carried out on new staff. Criminal Record Bureau (CRB) checks were carried out on all new staff, but the council had not yet ensured that all current staff had up to date CRB checks, although this process had started across the division. This standard was subject to a previous requirement on this issue. The provider must also ensure that telephone enquiries are made, in addition to obtaining written references on new staff. Also CRB checks had not been done on all panel members. Panel member files must be kept, and include personal profiles or CV's. All carers, adult household members, and frequent visitors had enhanced CRB checks on the files examined. The service unit manager had become a CRB counter signatory, and the service was now able to process all checks on carers. The agency must also ensure that all additional identification documentation is listed, and copies kept. Any gaps in staff, panel members, or carer's CV's should be followed up, and recorded.

Total number of staff of the agency:

32

Number of staff who have left the agency in the past 12 months:

X

Standard 16 (16.1 - 16.16)

Staff are organised and managed in a way that delivers an efficient and effective foster care service.

Key Findings and Evidence**Standard met?****3**

Prior to June 2001, the fostering service was part of a range of family placement services. However, re-organisation divided the service into different functions and the teams moved to separate office sites. It had proved difficult to deliver a consistent service from separate sites, and the service was in the process of being restructured again. The three teams were to be divided into five teams, which included two recruitment teams and three teams providing support and supervision to carers, all operating from the same office base. This would ensure more opportunities for staff to meet together to discuss practice and policy issues, and improve communication between workers. Team meetings took place regularly, and some joint team meetings had recently taken place. All staff will need to be clear who their line manager is in transition stage.

Previously the respite team had organised their own training for their carers, and these carers had not been routinely invited to general foster carers' training and vice versa. Although some initial preparation and training was still provided separately for respite carers, all carers now received the training brochure, and were able to access the full range of subjects available. There was evidence of sharing resources in the recruitment process between teams, and this joint approach was being developed to fit into the new structure. Staff had clearly defined job descriptions, but there was evidence from examination of files, and interviews with staff and carers that there was not always a clear understanding of the different roles and responsibilities, and although staff had an understanding of the importance of working effectively together, to ensure that the child's welfare and best interests were maintained, this did not always happen in practice. This issue is also discussed in standard 4, and is subject of a requirement.

The management and supervision systems in place determined staff workloads and helped to ensure that work was prioritised, monitored and tasks delegated appropriately. The agency had appropriate administrative procedures to deal with enquiries from prospective foster carers.

The business support staff were supervised by the senior business support manager. Supervision was not regular for these workers, and appraisal meetings had not occurred. There was a general recognition among staff and managers interviewed that business support was inadequate to meet the needs of the service. Business support staff did not feature in the restructuring diagram seen by the inspectors. The service was under going a review. Job descriptions were vague and staff were unclear about their future management arrangements.

Managers confirmed that staff, carers and children had access to specialist professional advice.

A comprehensive programme of training was provided, and in addition, carers were able to access courses run by Southwark and Greenwich local authority fostering services. Carers were encouraged to keep a record of training attended in preparation for their reviews, and in preparing a portfolio for achieving their NVQ qualifications.

Staff had access to a copy of the staff handbook, which set out the terms and conditions of employment, and the agency's staffing procedures.

Standard 17 (17.1 - 17.7)

The fostering service has an adequate number of sufficiently experienced and qualified staff and recruits a range of carers to meet the needs of children and young people for whom it aims to provide a service.

Key Findings and Evidence**Standard met?****2**

The fostering service had experienced difficulty in recruiting suitably qualified staff to establishment vacancies for both social workers and managers, although staff turnover had stabilised a little since the last inspection. A large number of staff worked part time hours. Freelance assessors were also used. There had been a number of workers off on long term sick leave and measures could have been taken earlier to deal with the staffing difficulties this created. The department had recruited a number of social workers from North America on short-term contracts. The make up of the fostering teams in relation to ethnicity must be kept under review in the light of this overseas recruitment of mainly white staff, which is a requirement from a previous inspection that remains unmet. Also both management and staff reported that the business support team were under pressure with the amount of tasks allocated to them, and found it difficult to maintain the imputing of the SWIFT system to keep it up to date. A review of business support was underway, and it is recommended that this be completed as soon as possible.

There was evidence that the agency was taking appropriate steps to improve the range and skills of carers. There was a formal strategy for the recruitment of carers, which was attracting prospective applicants. The numbers approved were averaging approximately one a month, but this was lower than needed to meet demand. The manager recognised that a more rigorous and consistent analysis of placement need and target recruitment should be carried out. And this is the subject of a new recommendation.

The service had access to a specialist consultant to plan their advertising campaign, advice on media issues and design publicity materials. Other targets for the year included recruiting more respite and remand carers, and two carers via Kusadiki, a fostering service run by Barnardo's and with whom the department had a service agreement. There was also an agreement with Supportive Fostering Service, a local IFA, to recruit carers specifically for use by Lewisham.

There was a clear assessment process that defined the fostering task, and the skills and competencies required from prospective applicants. The stages, content and timescales of the selection process were made clear, and the carers interviewed indicated that they had understood what was entailed in the selection process. The inspector examined a number of assessments of foster carers, which were of a reasonable standard.

Standard 18 (18.1 - 18.7)

The fostering service is a fair and competent employer, with sound employment practices and good support for its staff and carers.

Key Findings and Evidence**Standard met?****3**

Overall there was evidence that this standard was met. There were job descriptions for all staff in post, and appropriate employment policies, which were clear and informative. Equal opportunities employment practices in relation to the agency's recruitment and interview process were evident. The service had a satisfactory health and safety policy for carers, children and staff. There was an appropriate whistle blowing policy, although some staff reported that they were not aware of it. It was available on the council's intranet, but it is recommended that this should be brought to the attention of all staff.

The department's emergency duty team offered out of hours support to carers. Carers visited and questionnaires received gave positive feedback, and indicated that training and support from supervising social workers was generally good. The agency has management

systems in place in respect of carer supervision, appraisal and support. This was evidenced through examination of carers' files.

Standard 19 (19.1 - 19.7)

There is a good quality training programme to enhance individual skills and to keep staff up-to-date with professional and legal developments.

Key Findings and Evidence

Standard met?

3

Most staff were positive about training and the staff appraisal scheme. Comments varied about the quality of supervision received, although the majority were also positive. The performance evaluation scheme was introduced as part of the people management strategy. The social care and health division produced a Learning and Development training plan. It was aimed that the training needs of staff would be identified via supervision, and that this information would be used to develop the annual overall training plan. It was not clear to the inspectors if this included a programme for staff to achieve their Post Qualification awards within relevant timescales. However, there was evidence that professional development was actively encouraged, with a number of staff already doing PQ and Practice Teacher Awards. An appropriate training programme for carers had been developed and joint training for staff and carers was established within this programme. In house training opportunities were provided for staff, and said to be good. Members of staff reported that they had attended courses appropriate to their training needs, but said that access to external training events was more limited.

There was an induction programme for new staff, which took place within an agreed timescale. The manager confirmed that new staff had undertaken this, although it was reported by staff that the standard of the induction was variable. Some carers commented that it was noticeable that staff, recruited from overseas, were unfamiliar with the English childcare system. The induction programme for new staff should be reviewed to ensure consistency in standard and quality. It is recommended that managers should ensure that staff recruited from overseas should be given relevant training in UK Child care legislation. Supervision was provided to staff, appropriate to levels of experience and hours worked. It was also provided on a more informal basis, as and when the need arose. No evidence of probationary reports, and regular appraisals were found on personnel files, but inspectors understood that details were held in supervision files.

Standard 20 (20.1 - 20.5)**All staff are properly accountable and supported.****Key Findings and Evidence****Standard met?****2**

The staff interviewed informed the inspector that they had contracts of employment, and clearly defined job descriptions. Employees were provided with written procedures and details of their individual responsibilities. Management and the majority of staff confirmed that supervision occurred regularly, and staff interviewed reported that they felt supported in their roles. Some staff reported a very positive experience. Others felt supervision was mainly seen as a monitoring tool, and that managers were less concerned with their personal development. The performance evaluation scheme provided three opportunities a year for appraisal and objective setting. Staff were also able to attend regular team meetings, and valued peer group support and the sharing of skills and knowledge. There were clear lines of responsibility and separation of roles between the members of the management group, and these roles were to be reviewed under the restructuring. The business support staff were supervised by the senior business support manager. Supervision was not regular for these workers, and appraisal meetings had not occurred. Managers must ensure that regular supervision and appraisal were available to all staff.

Standard 21 (21.1 - 21.6)**The fostering service has a clear strategy for working with and supporting carers.****Key Findings and Evidence****Standard met?****3**

The fostering procedures manual was in the process of being updated. The new procedures were yet to be endorsed by committee, but the copy of the draft manual seen by the inspectors looked thorough and comprehensive.

Discussion with management, inspection of documents and carers comments confirmed that there was an appropriate and effective strategy for working with and supporting carers. Carers reported that they received good support and supervision, and were clear about the role of the supervising social worker. Comments from placing social workers were positive. The agency had support groups for carers, although these needed to be developed. There was no support group specifically for permanent or respite carers operating at the time of the inspection. Weekend and holiday respite was provided to carers where appropriate. Carers have access to a 24-hour telephone support service. Annual reviews had been brought up to date, although the service had not been able to consistently meet timescales for these, or completing assessments. Most carers were allocated. Although it was not sure that this could be maintained with some staff due to leave shortly. The service should develop an action plan to deal with this situation. Unannounced visits were not happening in the permanent fostering team, and carers at a distance were not regularly visited. A preparation group session, and a Safe Caring training course, were observed by inspectors. These were reasonably well attended, and trainers facilitated the sessions to encourage discussion and questions. Carers receive regular telephone contact and visits from their supervising social worker. Carers are supported in their attendance at placement agreement meetings, LAC reviews, health and educational meetings, and any other meetings as required.

Standard 22 (22.1 - 22.10)

The fostering service is a managed one that provides supervision for foster carers and helps them to develop their skills.

Key Findings and Evidence**Standard met?****2**

Most carers were allocated a supervising social worker, and carers seen confirmed that they have received good support from the service, and their individual workers. The format of supervisory visits ensured a consistent and clear approach by staff.

The authority expected each carer's household to receive a monthly visit, by a supervising social worker, but this had not always been done, particularly in the permanence team. Managers were open about the inadequate service provided to a number of carers living at a distance from London, who had often not received regular visits. This issue was also highlighted in carers' questionnaires. Both the long-term fostering and respite team had difficulties with the practicalities of carrying out unannounced visits and this had still not been satisfactorily addressed and therefore the previous requirement remains unmet. Systems, and sufficient staffing, must be provided to ensure unannounced visits and regular visiting of all carers is carried out.

The agency provided information regarding the complaints' procedure to carers, and those carers interviewed were aware of how to make a complaint. The agency had a system in place to keep a record of any complaints. There was evidence from an examination of the child protection policy and procedures and interviews with staff and carers, that all personnel involved were aware of their role and responsibilities in relation to investigations into allegations of abuse.

The Foster Carer Agreement was in line with Schedule 5 of the Fostering Services Regulations 2001, and carers are given a handbook of policies, procedures and relevant information.

Managers were very aware of the areas where the service needed to improve and showed continued commitment to addressing concerns, within their budgetary constraints.

Standard 23 (23.1 - 23.9)

The fostering service ensures that foster carers are trained in the skills required to provide high quality care and meet the needs of each child/young person placed in their care.

Key Findings and Evidence**Standard met?****3**

A programme of NVQ training was in operation, and the service was well on target in achieving their proposed number for the year. There was a wide range of other training available, under an explicit anti-discrimination policy.

A range of core training courses for new carers was provided, including Managing Challenging Behaviour, Contact and Partnership, Attachment, Loss and Separation and Child Development. The pre-approval course for applicants was being developed and involved existing carers, enabling new carers to benefit from their experience and knowledge. Carers also had the opportunity to join with social workers during training.

The agency tried to ensure that training took place at times convenient for the carers.

Each carer's annual review must include an appraisal of the carers' training and development needs. The effectiveness of this programme of training and the development of future training was evaluated and reviewed annually.

Records

The intended outcome for the following set of standards is:

- All appropriate records are kept and are accessible in relation to the fostering services and the individual foster carers and foster children.

Standard 24 (24.1 - 24.8)

The fostering service ensures that an up-to-date, comprehensive case record is maintained for each child or young person in foster care which details the nature and quality of care provided and contributes to an understanding of her/his life events. Relevant information from the case records is made available to the child and to anyone involved in her/his care.

Key Findings and Evidence

Standard met?

2

There were appropriate policies on recording and files examined were reasonably structured. However, from inspection of a selection of children's files there was evidence that this standard was not consistently met. In particular, Looked After Children forms, such as the essential information record, were missing. There were a number of examples of misfiling, and documents were not always dated or signed. Managers must ensure that case files for each young person in foster care provide an up to date, comprehensive record, including copies of all relevant LAC forms. This was the subject of a previous immediate requirement that remains unmet. It was positive that a system of auditing of files was in place, but it was not evident on some of those examined. Not all carers felt they were given good enough background information on the children they cared for. Carers were encouraged to keep detailed records, and had been offered training to improve their skills. Interviews with carers confirmed they were aware of the need to ensure that all information relating to the child or young person was treated confidentially and stored in a secure manner.

Standard 25 (25.1 - 25.13)

The fostering service's administrative records contain all significant information relevant to the running of the foster care service and as required by regulations.

Key Findings and Evidence

Standard met?

3

Lewisham use the swift IT system. Managers were able to provide up to date information from both the children's and carers register, as well as a list of complaints and child protection allegations. It was reported by managers and staff that there were insufficient business support staff to maintain efficient imputing of data. Business support was undergoing a review, but this had been lengthy, and as yet there was no outcome, as discussed in standard 16.

Confidential records were securely stored and an appropriate written policy and operating system for administrative record keeping was in place. The administrative records inspected provided a satisfactory record of information required to run the service. The computerised system had appropriate back up and security safeguards.

The audit form listed information to be included in case records, and action to be carried out to achieve improvement within set timescales. It is recommended that carer's files routinely record details of visits during the assessment process. Lewisham has an "Access to Records" Policy, which provides guidance to staff and carers. Service users are able to see their records in compliance with legal safeguards.

Number of current foster placements supported by the agency:			212
Number of placements made by the agency in the last 12 months:			X
Number of placements made by the agency which ended in the past 12 months:			X
Number of new foster carers approved during the last 12 months:			8
Number of foster carers who left the agency during the last 12 months:			33
Current weekly payments to foster parents: Minimum £	252.43	Maximum £	405.16

Fitness of Premises for use as Fostering Service

The intended outcome for the following standard is:

- The premises used as offices by the fostering service are suitable for the purpose.

Standard 26 (26.1 - 26.5)

Premises used as offices by the fostering service are appropriate for the purpose.

Key Findings and Evidence

Standard met?

3

The same issues remained for staff, as reported during the last inspection. Lawrence House was said to be an uncomfortable place to work, with high noise level and a shortage of rooms for meetings and supervision. The office itself is of a reasonable standard, with adequate lighting, ventilation and office furniture. Both the offices at St. Paul's and Hollydale were older buildings converted to office use. Hollydale had space for training. A proposed move to a building which would house all of the fostering teams was being considered. The agency had satisfactory administrative systems, IT and communication systems. Safeguards are in place in relation to the security of these systems. The SWIFT system was constantly being improved to better meet the needs of the agency. The premises had a lockable filing system for secure confidential record keeping. There was an appropriate security system in place to prevent illegal access to the building, including security personnel on reception.

Financial Requirements

The intended outcome for the following set of standards is:

- The agency fostering services are financially viable and appropriate and timely payments are made to foster carers.

Standard 27 (27.1 - 27.3)

The agency ensures it is financially viable at all times and has sufficient financial resources to fulfil its obligations.

Key Findings and Evidence

Standard met?

3

Although there was a history of budget overspending in children's services, there was a commitment to fund the budget pressures corporately. There was also a commitment to increase the children's services budget and provide better funding for the fostering service. Improved budget forecasting had been introduced and a commissioning unit was being created. The Best Value Review had identified the need for increasing the range of local foster care placements and work had become in developing contracts with other providers. The Financial Business Improvement project was useful in projecting and monitoring placement costs for individual children.

Standard 28 (28.1 - 28.7)

The financial processes/systems of the agency are properly operated and maintained in accordance with sound and appropriate accounting standards and practice.

Key Findings and Evidence

Standard met?

3

Information from managers indicated that the financial processes were regularly monitored by management and by the authority's financial department. The director and council members regularly received information on the financial state of the department. There were a written set of principles and standards governing its financial management. From an examination of documentation and interviews with the managers there was evidence of appropriate financial systems for the control and supervision of the agency's financial affairs. A financial management panel had been established, and the service unit manager needed to seek agreement from this panel for any substantial spending. From discussion with managers, it was clear that they would welcome additional support in managing budgets. It is recommended that further support and training is made available to managers dealing with financial control and supervision.

Standard 29 (29.1 - 29.2)

Each foster carer receives an allowance and agreed expenses, which cover the full cost of caring for each child or young person placed with him or her. Payments are made promptly and at the agreed time. Allowances and fees are reviewed annually.

Key Findings and Evidence

Standard met?

2

There was a clear policy on carers' allowances and expenses. This was reviewed on an annual basis. Allowances were banded by the age of the child in placement. Managers recognised that the level of allowances needed to be able to compete realistically with the private sector.

Inspectors found that the complaints about late payments were less than during the previous inspection, but it was still an issue for some. The system for initiating payments was confusing, and the communication between the teams had not always facilitated a prompt response. Managers thought that the IT swift system would eventually help to improve these delays, but this change had not yet been developed. The provider must ensure that timely payments are made to foster carers. This is a requirement from a previous inspection that remains unmet.

Although kinship carers were paid a lesser rate, there was evidence that the service had agreed financial help to carers to assist in a loft extension to meet the needs of a child placed with family members.

Fostering Panels

The intended outcome for the following set of standards is:

- **Fostering panels are organised efficiently and effectively so as to ensure that good quality decisions are made about the approval of foster carers, in line with the overriding objective to promote and safeguard the welfare of children in foster care.**

Standard 30 (30.1 - 30.9)

Fostering panels have clear written policies and procedures, which are implemented in practice, about the handling of their functions.

Key Findings and Evidence

Standard met?

3

Lewisham had joined with Kusadiki, a local Barnardo's IFA to form a joint panel. The agencies had written policies and procedures for the function and joint constitution of the panel, including the process followed when all members of the panel are not in agreement. From observation of this panel, and discussion with the panel chair, it was concluded that the panel was rigorous and thorough, and took its quality assurance function seriously. Carers were invited to attend panel, and the panel was operating within the regulations. The chair had relevant background and expertise at a senior level in childcare services. The panel had access to legal and medical advice, and the advisers were available for consultation. Lewisham's assistant director was identified as the decision maker for recommendations concerning Lewisham carers made by the panel, and the assistant director at Barnardo's was the decision maker for Kusadiki carers. Joint training with social workers was planned for later in the year. The panel is held fortnightly. Papers are sent out a week in advance. The administration, prior to panel, is dealt with by a business support worker, and the panel minutes are produced by the chair's personal assistant. Efforts were made to ensure the recommendations of the panel, were considered by the decision maker within appropriate timescales.

Short-Term Breaks

The intended outcome for the following set of standards is:

- When foster care is provided as a short-term break for a child, the arrangement recognises that the parents remain the main carers for the child.

Standard 31 (31.1 - 31.2)

Where a fostering service provides short-term breaks for children in foster care, they have policies and procedures, implemented in practice, to meet the particular needs of children receiving short-term breaks.

Key Findings and Evidence	Standard met?	3
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There was evidence from examination of appropriate policies and procedures, staff and carers interviewed and files seen that the needs of children receiving short-term breaks were met. The respite care scheme provided short breaks for children with disabilities who were on the disability register. The service aimed to provide children with a maximum of 30 days / overnight stays a year. The respite care team will become part of the fostering service in April 2004.

Family and Friends as Carers

The intended outcome for the following set of standards is:

- Local authority fostering services' policies and procedures for assessing, approving, supporting and training foster carers recognise the particular contribution that can be made by and the particular needs of family and friends as carers.

Standard 32 (32.1 - 32.4)

These standards are all relevant to carers who are family and friends of the child, but there is recognition of the particular relationship and position of family and friend carers.

Key Findings and Evidence	Standard met?	3
<p>There was evidence of an improving service now being provided to carers, who were family and friends of the children placed. Kinship carers were assessed using a format similar to BAAF F Form 1, but were not expected to attend the three day pre approval training. References were taken up, and reports presented to the fostering panel for approval. All approved kinship carers were allocated, and a number of assessments had been outsourced to independent workers. Some support was available for these carers, and they were now included in the mailing of fostering training events.</p> <p>The increased number of kinship assessments had had a significant impact on the workload of the fostering service. The service was also involved in completing assessments for court as well as panel, but had found it hard to do this within appropriate timescales. It is recommended that further work is carried out on improving services to kinship carers, that resources to achieve a better service are kept under review, and that the special needs of kinship carers are recognised and included in future training programmes.</p>		

PART C

LAY ASSESSOR'S SUMMARY

(where applicable)

Lay Assessor _____ **Signature** _____
Date _____

D.1 Registered Person's or Responsible Local Authority Manager's comments/confirmation relating to the content and accuracy of the report for the above inspection.

We would welcome comments on the content of this report relating to the Inspection conducted on 26-30th January and 3rd February 2004, and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

Lewisham believe that the report, which has been produced following the inspection carried out in January 2004 under the Care Standards Act 2000, is fair and accurate.

We agree with the areas identified for further development and are in the process of taking the actions set out in our action plan.

Following the success of our campaign in 2003, we have made progress in the recruitment of social workers across the division, and the increased stability has benefited both foster carers and the children in their care. The retention of social workers has been addressed by an improved package of remuneration, which is currently being extended to managers. Gaps in our recruitment procedures have been addressed, and systems to ensure that all staff are routinely checked are now in place.

The importance of improving communication between foster carers and staff across the division has been acknowledged, and we accept the views of the inspectors that team managers will play a key role. We plan to facilitate this process by providing managers with a regular forum to meet and discuss practice issues.

We are working closely with the Placements Service to introduce systems to ensure that safe and appropriate matches are made with foster carers, and that carers are provided with the information they need in order to provide high quality care to those children. We aim to improve the accuracy of information that is recorded both in files and electronically

The restructuring of the fostering service has now been completed, and we will move to new accommodation in the autumn. The new structure will benefit both children and carers by allowing us to dedicate resources to key areas of the service, recruitment and the support of carers.

Our aim remains to increase the number of children placed in, or close to, Lewisham and to increase the proportion of children placed with Lewisham foster carers. The creation of a dedicated recruitment team, along with our partnership with Supported Fostering Services, will mean that we should see better performance in this area over the next year.

The creation of dedicated support teams will allow us to build on the strengths of the service and to further develop our training programme, mentoring scheme and support groups. New initiatives are planned to address the needs of specific groups of carers, e.g. kinship carers, so that all carers will be able to provide safe and appropriate care to the children they foster.

Action taken by the NCSC in response to the provider's comments:

Amendments to the report were necessary	<input type="checkbox"/>
Comments were received from the provider	<input type="checkbox"/>
Provider comments/factual amendments were incorporated into the final inspection report	<input type="checkbox"/>
Provider comments are available on file at the Area Office but have not been incorporated into the final inspection report. The inspector believes the report to be factually accurate	<input type="checkbox"/>

Note:

In instances where there is a major difference of view between the Inspector and the Registered Provider responsible Local Authority fostering service Manager both views will be made available on request to the Area Office.

D.2 Please provide the Commission with a written Action Plan by which indicates how statutory requirements and recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.

Status of the Provider's Action Plan at time of publication of the final inspection report:

Action plan was required	<input type="checkbox"/>
Action plan was received at the point of publication	<input type="checkbox"/>
Action plan covers all the statutory requirements in a timely fashion	<input type="checkbox"/>
Action plan did not cover all the statutory requirements and required further discussion	<input type="checkbox"/>
Provider has declined to provide an action plan	<input type="checkbox"/>
Other: <enter details here>	<input type="checkbox"/>

Public reports

It should be noted that all NCSC inspection reports are public documents. Reports on children's homes are only obtainable on personal application to NCSC offices.

D.3 PROVIDER'S AGREEMENT

Registered Person's or responsible Local Authority Manager's statement of agreement/comments: Please complete the relevant section that applies.

D.3.1 I _____ of _____ confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the statutory requirements made and will seek to comply with these.

Print Name Cornelia Tierney
Signature _____
Designation Service Unit Manager
Date 06.07.04

Or

D.3.2 I _____ of _____ am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:

Print Name _____
Signature _____
Designation _____
Date _____

Note: In instance where there is a profound difference of view between the Inspector and the Registered Provider both views will be reported. Please attach any extra pages, as applicable.