## Fostering Services Rotherham

**Inspection report for LA Fostering Agency**

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<tr>
<th><strong>Unique reference number</strong></th>
<th>SC047258</th>
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<tr>
<td><strong>Inspection date</strong></td>
<td>16/06/2008</td>
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<tr>
<td><strong>Inspector</strong></td>
<td>Helen Humphreys</td>
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<tr>
<td><strong>Type of inspection</strong></td>
<td>Key</td>
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### Setting address

Rotherham Metropolitan Borough Council, Crinoline House, Effingham Square, ROTHERHAM, South Yorkshire, S65 1AW

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<tr>
<th><strong>Telephone number</strong></th>
<th>01709 382121</th>
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<tr>
<td><strong>Email</strong></td>
<td><a href="mailto:mike.carter@rotherham.gov.uk">mike.carter@rotherham.gov.uk</a></td>
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<tr>
<td><strong>Registered person</strong></td>
<td>Rotherham Metropolitan Borough Council</td>
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<tr>
<td><strong>Registered manager</strong></td>
<td>Sue May</td>
</tr>
<tr>
<td><strong>Responsible individual</strong></td>
<td>Simon Perry</td>
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<tr>
<td><strong>Date of last inspection</strong></td>
<td>08/01/2007</td>
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About this inspection

The purpose of this inspection is to assure children and young people, parents, the public, local authorities and government of the quality and standard of the service provided. The inspection was carried out under the Care Standards Act 2000.

This report details the main strengths and any areas for improvement identified during the inspection. The judgements included in the report are made in relation to the outcomes for children set out in the Children Act 2004 and the relevant National Minimum Standards for the service.

The inspection judgements and what they mean

Outstanding: this aspect of the provision is of exceptionally high quality
Good: this aspect of the provision is strong
Satisfactory: this aspect of the provision is sound
Inadequate: this aspect of the provision is not good enough
Service information

Brief description of the service

Rotherham Borough Council currently provides a fostering service to looked after children. The service currently has carers providing short or emergency care, long term care, short breaks to children with disabilities and their families and carers providing care to family members or close friends. The service recruits, assesses and supports carers through a range of services.

The service is staffed by a manager, who is supported by an assistant director and head of service and a staff team of experienced social workers. The team works closely with the adoption team.

Summary

The overall quality rating is inadequate - notice of action to improve.

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

This inspection was announced and took place over four days. All of the key National Minimum Standards (NMS) were inspected. This service has many strengths including an excellent children's rights team, a leaving care project providing good support to care leavers, a newly developed support team headed up by a clinical psychologist and an education team providing individual support to children. Carers are well supported. The service enjoys good support from the lead elected member. Outcomes are generally good for young people who have been placed in long term placements which have not been unsettled or disrupted by additional placements. However, the fostering service has an insufficient number of carers to meet the needs of the service which has led to severe over crowding in some homes and many children are living in households where there are more than three children placed.

In addition to this individual safe caring policies are not used and although risk assessments are completed, they are not robust, do not address all the factors and are not always shared physically with carers. The arrangements for the use of exemptions to go over the normal fostering limit do not comply with Children Act Legislation, and foster carer agreements do not always reflect the number of children the carer is looking after. The panel membership does not meet the Regulations, although this is chaired competently.

There are relatively new management arrangements in place and there is a growing understanding of the needs of the service. Many of the staff have worked for Rotherham and in the fostering service for many years and although they have a wealth of experience in supporting carers, there is little evidence of introduction of new practice particularly in assessing carers. The family and friends carers are not supported by the fostering team until they have been fully approved at panel, which
may be many months after the children are placed and there is no expectation that they should complete initial training.

**Improvements since the last inspection**

There was one requirement made at the last inspection which was ensure that the recruitment files met the Regulations and on further inspection this has been complied with.

There was one recommendation made which was to provide carers with books so that they could make separate records about each child placed and this has also been completed.

**Helping children to be healthy**

The provision is satisfactory.

The service has a number of good health and emotional well being initiatives, but there are a number of outstanding training needs for carers and the therapeutic model of parenting which was introduced in January 2008 has not impacted as yet fully on all carers.

The service employs a competent Looked After Children's (LAC) Nurse who is well aware of the needs of the fostered children and works in conjunction with the school nurses and health visitors. The quality of the health care assessments vary and although the number has increased not all young people have had their health care assessments and not all foster carers have copies of them.

The LAC nurse has delivered training on sexual health in the last 12 months but no other training for example healthy lifestyles and there are outstanding training needs in particular for carers on first aid. The LAC nurse is also a member of the fostering panel.

The Children's Rights Service have developed a range of leaflets for children and young people providing good and appropriate information on health related matters and a well written record keeping booklet called 'My Journey' which allows children aged 0-12 to record information about their health care needs, appointments illnesses.

In January 2008 the service introduced a new service in conjunction with the Primary Health Care Trust called the LAC's Support Team which is led by a clinical psychologist and has delivered training and consultation and advice to foster carers. The team have introduced a therapeutic style of parenting based on the work of various specialist and concentrates on attachment issues. Early indications are that this work has been positively recognised and valued. One concern is that carers who are looking after more than three children will have additional challenges in implementing some of the ideas and practical applications.
Protecting children from harm or neglect and helping them stay safe

The provision is inadequate.

The arrangements for the recruitment and selection of the manager and staff are appropriate and staff are safely recruited.

Overall there are an insufficient number of carers employed by the service and this is leading to difficulties with placements and overall safeguarding of children when in placement. There is over crowding in a number of fostering households and many fostered children including those who have been abused are sharing bedrooms. Some fostered children aged over one are sharing with adults and some with birth children. In some households there is limited communal space and a limit to the amount of individual care each fostered child can receive. Risk assessments, although on file are not robust and carers do not have copies although they are included in the risk management. Individual safe caring policies for each household are not used at all, although there is an overall safe caring policy in place. Concerns were raised about the care of some individual children. The service produced an action plan during the inspection to address some of the issues.

The service places a small number of children in external placements and the arrangements for this, although not fully developed are appropriate.

The arrangements for placing children in long term placements varies but some good practice was observed and outcomes for some children are good. The arrangements for placing children with the short break service is good, although in all cases, the use of health and safety check lists, foster carer agreements and other paperwork varies.

There are a significant number of carers who are looking after more than the normal fostering limit of three children who are not siblings. The service manager agrees exemptions and then the panel is notified at the next available panel. A carer receives a letter from the service manager granting an exemption, however, the letter does not include information about any child on respite and the information given to the panel does not provide information about respite and any other children living in the household, such as birth children and those on residence orders. There is insufficient monitoring of children living in the large households as visits by social workers are not consistent and although concerns have been raised by other professionals the shortage of fostering households is leading the service to place an increasing number of children in large fostering households.

Child protection and safe caring training is available to carers although places are limited. Many carers have not undertaken training in these areas for some time. There has been a number of significant incidents over the last 12 months and the response to these has varied particular in relation to the timing of strategy meetings and completion of investigations. However, the service has responded appropriately to a number of them and recently the situation has improved. The policies and procedures for responding to allegations against carers are appropriate.
Young people are provided with appropriate information about bullying and no young person said that they were bullied. Incidents of children being missing from home are noted.

The panel membership does not meet the Regulations in that there is no foster carer from another agency or a fostering social worker from the team, although the fostering manager acts as panel advisor. The panel chair works for an independent fostering agency which raises questions over his independence. However, he is an experienced social work practitioner and chairs the panel well, encouraging contributions from members and carers are treated with courtesy and made to feel welcome. The panel has good representation from education, health and some one who has previously been in care.

The current venue of the council chamber, which has been used on occasion is unsuitable.

The panel are able to exercise a quality assurance role in that they will defer items or ask for additional information. However, the number of exemptions and children in place have raised concerns for the panel but this has not brought about a noticeable change in practice and the information presented to panel does not always accurately reflect the real number of children living in the household.

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

The provision is satisfactory.

The approach to equality and diversity within the service is not fully developed, although there are a number of initiatives in hand and carers and staff have access to a number of services, for example, 'language line'. The service is asked to place a small number of children who have specific needs arising from their heritage and have recruited a small number of carers from diverse communities. Carers have access to training on identity and equality and diversity, although places are limited. There is insufficient attention paid to equality and diversity issues within some assessments of potential carers.

The education of LAC is supported through the 'Get Real Team' which is a well resourced team who have completed some good individual work with young people. Overall many children are doing well at school and specific initiatives are enriching their educational experiences. However, the overall strategy is under developed and a number of relevant documents are out of date, for example, role of the designated teacher, the Personal Education Plans (PEP). A significant number of PEPs are not up to date and had not been reviewed. The team provide training to social workers and carers on the initial training but no ongoing training is provided.

The short break service is located within the fostering service and carers are treated the same as main stream carers. Many are providing a good service to children with disabilities and their families. However, there are a number of outstanding trainings
needs and some health and safety checklists do not take into account the specific caring responsibilities.

**Helping children make a positive contribution**

The provision is good.

Carers and staff try hard to promote contact and most young people reported that they are happy with their arrangements for contact. Carer's views regarding contact are discussed in the initial assessment and also covered in the assessment. However, contact is arranged by the placing social workers and some of these have been cancelled or re-arranged at short notice due to staffing problems. Both carers, staff and young people raised this as a concern and some young people have made formal complaints.

Rotherham has an excellent Children's Right's Service, which has created a range of documents and an easily found and navigated website to support young people in care. The quality and quantity of the information provided is of a very good standard. Staff from the team also support young people at strategy meetings, statutory reviews and as acting as advocates.

The service enjoys good support from the lead elected member for children's services and provides opportunities for consultation and participation by fostered children.

Young people have a real opportunity to participate in their statutory reviews and this can be done by completing an on line survey or by talking with the IRO prior to the meeting. The minutes of the reviews are clear and well documented and fully take into account the young people's views. The IROs can organise multi-agency meetings if they have concerns about a placement.

The arrangements for complaints are in place and young people can make a complaint through the Children's Right's Service or through the formal complaint's procedure. The leaflets and information are appropriate. In general young people know how they can make a complaint and their complaints are addressed, although not all within appropriate timescales, due to time taken for some of the investigations to take place.

**Achieving economic wellbeing**

The provision is good.

All young people over the age of 15 are referred to the NCH Bridges team, formerly known as National Children's Home, who manage the leaving care team for Rotherham. This is a well resourced team who provide a good service to care leavers and work with them into young adult hood, providing a range of service. Carers, staff and young people spoke highly of the service and outcomes for young people who
have been in the care service for a long time have improved as a result of this service.

**Organisation**

The organisation is inadequate.

The Statement of Purpose and children's guide both need updating to ensure that they meet the Regulations and NMS. However, young people do have access to good information through the promise pack.

The manager of the service has been in post less than 12 months and although he is an experienced social work practitioner, he has not worked in or managed a fostering team and has limited experience of fostering and adoption work. A mentoring system has been in place to provide additional support. He is supported by a service manager. The manager has developed some new systems to improve practice. There are a sufficient number of staff employed in the service to meet current need, however, there are plans in hand to extend the staffing to create a separate team to concentrate on recruitment. The staff team have access to supervision, and other training and developmental opportunities and most have worked in the team for a long time and combined with the limited experience of the manager in fostering this is restricting the growth of new and changing practice.

The service has an insufficient number of carers to meet the current need, which is leading to pressures on placements and serious over crowding. The service lost more carers, through retirement, resignation and de-registration than they gained in the last 12 months. There is a recruitment strategy in place, which was written in 2007 and an action plan and it will take a while for the impact of the strategy to take effect.

The standard of assessment of carers varied with different styles and some good practice observed. However, some of the assessments are largely descriptive and contain little analysis or a demonstration of what qualities the carers had to undertake the role of being a foster carer.

All carers who contributed to the inspection were satisfied with the levels of support they received from the fostering staff. Most carers spoke highly of the fostering social workers. The arrangements for annual reviews of carers has recently changed and improved and are undertaken by independent reviewing officers. However, the views of placing social workers and young people are not consistently recorded.

The standard of record keeping varied in both carer's files, young people files and administrative records and some good practice was noted. However, some documents were misfiled, were missing, not signed and dated or signed by a manager many months after a visit had been made. Although there was some evidence of monitoring and audit this was not consistent.

The arrangements for the support to family and friends carers after they have been given initial approval does not meet the NMS, in that until they have been fully
approved their cases are not transferred to the fostering team. Once transferred they are offered training opportunities and have regular visits and are paid as level one carers. Friends and family carers do not normally attend the initial training prior to approval although they can access this, it is not mandatory.

**What must be done to secure future improvement?**

**Statutory Requirements**

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Fostering Services Regulations 2002 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

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<th>Std.</th>
<th>Action</th>
<th>Due date</th>
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<tr>
<td>8</td>
<td>ensure that all exemptions to go over the normal fostering limit comply with legislation (Children Act 1989 Schedule 6)</td>
<td>01/08/2008</td>
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<td>8</td>
<td>ensure that foster carer agreements reflect the approval of the carer and are signed (Regulation 34 (1) (b),(c ))</td>
<td>01/08/2008</td>
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<tr>
<td>30</td>
<td>appoint a foster carer from another agency or local authority to the panel (Regulation 24 (5) (ii))</td>
<td>31/08/2008</td>
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<td>30</td>
<td>ensure that at least one of the social workers appointed to the panel has expertise in the provision of a fostering service (Regulation 24 (3) (a))</td>
<td>01/08/2008</td>
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<tr>
<td>1</td>
<td>revise the Statement of Purpose to ensure that it meets the Regulations and NMS (Regulation 3)</td>
<td>01/08/2008</td>
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<td>1</td>
<td>revise the children's Guide so that it includes information on how young people can contact Ofsted should they wish to (Regulation 4)</td>
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<td>21</td>
<td>ensure that all annual reviews undertaken on foster carers include the views of the children in place and the placing social worker (Regulation 29 (3) (b))</td>
<td>01/08/2008</td>
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<td>12</td>
<td>ensure that carers are given sufficient health care information about young people placed and in particular copies of the health care assessments (Regulation 17 (3) (a)).</td>
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**Recommendations**

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

- ensure that all carers have undertaken first aid training within appropriate timescales (NMS 12.5)
- ensure that all carers who are caring for children with disabilities have received training on manual handling within appropriate timescales (NMS 12.1)
• ensure that where carers are administering complex medication or undertaking specialist tasks that they have received appropriate training (NMS 12.1)
• ensure that fostered children who have been abused do not share a bedroom until a written assessment has been undertaken (NMS 6.5)
• ensure that every foster home can comfortably accommodate all who live there including birth, fostered and any other child or adult who lives there (NMS 6.2)
• ensure that each fostering household has in place a written safeguarding policy (NMS 9.3)
• ensure that risk assessments are robust and that carers are given copies and made aware of their responsibilities in respect of risk management (NMS 9.7)
• ensure that all health and safety checklists are appropriate, signed and in place (NMS 6.7)
• ensure that all carers have undertaken up to date training on safeguarding and safe care (NMS 9.2)
• ensure that all young people have an up to date Personal Education Plan which has been reviewed (NMS 13.3)
• ensure that all assessments of foster carers meet the NMS and demonstrate clearly the qualities of the foster carer and how this establishes their suitability (NMS 17.6)
• establish and implement an effective monitoring process for the fostering service (4.1)
• ensure that family and friends carers are treated the same as other carers (NMS 32.3)
• ensure that friends and family carers undertaken initial training (NMS 23.2).