

Report To: Health and Social Care Committee **Date:** 1st September 2015

Report By: Brian Moore
Chief Officer
Inverclyde Health and Social
Care Partnership (HSCP) **Report No:** SW/15/2015/SM

Contact Officer: Sharon McAlees
Head of Service **Contact No:** 01475 715282

Subject: CARE INSPECTORATE INSPECTION OF INVERCLYDE
FOSTERING AND ADOPTION SERVICES

1.0 PURPOSE

- 1.1 The purpose of this report is to advise the Health and Social Care Committee of the outcome of the Care Inspectorate short notice inspection of Inverclyde's Adoption and Fostering Services January 2015.

2.0 SUMMARY

- 2.1 Inverclyde Adoption and Fostering Services are subject to annual inspections by the Care Inspectorate. The Care Inspectorate is an independent scrutiny and improvement body which regulates care services across Scotland ensuring that service users receive a high level of care and support.
- 2.2 In conducting the inspection of the Adoption and Fostering Services the Care Inspectorate gathered a range of evidence provided by each of the services including policies, procedures and other documents along with conversations with a range of staff, stakeholders and carers and young people.
- 2.3 A full public report of the inspection and grades is published on the Care Inspectorate website
- 2.4 The summary of grades awarded are:-

Adoption Services

Quality of Care and Support	grade 5 very good
Quality of Staffing	grade 5 very good
Quality of Management and Leadership	grade 5 very good

Fostering Services

Quality of Care and Support	grade 5 very good
Quality of Staffing	grade 5 very good
Quality of Management and Leadership	grade 5 very good

- 2.5 The inspection concluded that Inverclyde Adoption and Fostering Services continue to provide a high quality service.
- 2.6 Two service recommendations were made in respect of Adoption Services and no requirements were issued.

2.7 One service recommendation was made in respect of Fostering Services and no requirements were issued.

3.0 RECOMMENDATIONS

3.1 The Health and Social Care Committee is asked to note the outcome of the inspection.

**Brian Moore
Chief Officer
Inverclyde HSCP**

4.0 BACKGROUND

4.1 A short notice inspection of Inverclyde's Adoption and Fostering Services took place in December 2014 and the finalised report was published on the Care Inspectorate website in January 2015.

4.2 During the inspection process evidence was gathered from a range of sources including, procedures, supervision, training records, and case files. The inspector consulted directly with adopters, foster carers, managers, and a range of staff.

4.3 The service was graded with how it performed against three quality themes and statements.

4.4 Adoption Services

Quality of Care and Support- Grade 5 Very Good.

The performance of the service was very good in this area. Adopters were consulted about the quality of training information and support given in order that service could continue to improve. The inspection noted that the involvement of birth parents in the permanency process was promoted; they were given the opportunity to give their views to the Adoption and Permanence Panel and children's views about being adopted were included when the child was of an age to express their view. Adopters underwent rigorous assessment which took account of the resources and support networks available to the applicants. It was recommended that Inverclyde managers should seek ways to ensure that in all instances when a child is placed within Inverclyde by another authority that the placing authority fully contributes to the post placement support. The Service has sought to address this by ensuring that clear transition and post adoption support plans are agreed by all relevant professionals.

4.5 Quality of Staffing- Grade 5 Very Good.

Adopters reported that staff were, supportive, professional, caring and knowledgeable. There were leadership and training opportunities for staff and access to a well-equipped resource library and online research materials. It was noted that staff challenged discriminatory attitudes and took a role in being educators in promoting diversity.

4.6 Quality of Management Grade 5 Very Good.

Inverclyde had a commitment to ensuring children who required adoption were placed in adoptive families without delay. Children's Services management closely monitored the progress of permanency planning and there were improved outcomes for children who could not return to their birth families. The chair of the Adoption and Permanence Panel and panel members had appraisals and opportunities to undertake training to enable them to keep abreast of changing legislation and research. It was noted that at the time of the inspection, there was a social worker vacancy within the team and this resulted in the Care Inspectorate making a recommendation that there is adequate staffing to continue to provide a quality service. The service has subsequently filled that particular vacancy.

4.7 Fostering Services

Quality of Care and Support Grade 5 Very Good.

The inspection found that the Fostering Service continued to involve people in assessing and improving the quality of care and support, staffing and quality of management. A range of opportunities existed to ensure that foster carers and young people can reflect views that inform service improvement. It was noted that care

plans were in place for children and a new detailed placement plan had been developed with included purpose of placement, expectation of the foster carer and desired outcome for the child. The service continued to provide foster carers with a good range of training opportunities. The inspection found that children benefited from living in a secure base and older children were remaining in placement with transition planning delivered at their pace linked to through care workers who worked with them towards independence. The inspection was told about some difficulties with arrangements with LAAC reviews and how this could impact on the carer's ability to prepare the child and contribute to care planning in a meaningful way. Whilst LAAC reviews met statutory timescales they were not always meeting Inverclyde's own timescales. It was recommended that the service manager and locality managers address review scheduling issues. This area of service improvement is being addressed by children's services quality assurance team monitoring and support along with recent training in relation to chairing LAAC reviews.

4.8 Quality of Staffing Grade 5 Very Good.

This section was graded in conjunction with Adoption Services as it refers to the same group of staff. The performance of the service was found to be very good.

4.9 Quality of Management and Leadership Grade 5 Very Good.

This section was graded in conjunction with Adoption Services as it refers to the same group of staff and managers. The performance of the service was found to be very good and included the same recommendation as Adoption Services that the service ensures there is adequate staffing to continue to provide a quality service.

5.0 IMPLICATIONS

FINANCE

5.1 There are no financial implications in respect of this report.

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments

LEGAL

5.2 There are no legal issues within this report.

HUMAN RESOURCES

5.3 There are no human resources issues within this report.

EQUALITIES

5.4 There are no equality issues within this report.

YES (see attached appendix)

NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

REPOPULATION

5.5 There are no repopulation issues within this report.

6.0 CONSULTATION

6.1 This report has been prepared by the Chief Officer, Inverclyde Health and Social Care Partnership (HSCP) after due consultation with Fostering and Adoption Services.

7.0 BACKGROUND PAPERS

7.1 None.

Care service inspection report

Inverclyde Council Adoption Service

Adoption Service

Inverclyde CHCP

Kirn House

Ravenscraig Hospital

Inverkip Road

Greenock

PA16 9HA

Telephone: 01475 714 038

Type of inspection: Announced (Short Notice)

Inspection completed on: 8 January 2015



HAPPY TO TRANSLATE

Contents

	Page No
Summary	3
1 About the service we inspected	4
2 How we inspected this service	6
3 The inspection	10
4 Other information	22
5 Summary of grades	23
6 Inspection and grading history	23

Service provided by:

Inverclyde Council

Service provider number:

SP2003000212

Care service number:

CS2005087048

If you wish to contact the Care Inspectorate about this inspection report, please call us on 0345 600 9527 or email us at enquiries@careinspectorate.com

Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	5	Very Good

What the service does well

The service continues to provide very good support to adopters and children, both prior to and following adoption. Introductions are very well-managed. Inverclyde adoption service continue in their commitment in engaging birth parents during the permanency process. This is strengthened by the approach and practice of permanency panel members.

What the service could do better

The service management should ensure that placed social workers from outwith the Local Authority carry out their responsibilities to the child, post placement. The provider should consider any impact to service performance when making any staffing changes.

What the service has done since the last inspection

The service continues to strengthen post adoption support, permanency planning and the involvement of adopters, in the service improvement agenda. New procedures are in place for letterbox contact.

Conclusion

Inverclyde Council Adoption Service continue to provide a high quality service to adoptive families.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and Recommendations

If we are concerned about some aspect of a service, or think it could do more to improve, we may make a recommendation or requirement.

- **A recommendation** is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

- **A requirement** is a statement which sets out what is required of a care service to comply with the Public Services Reforms (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Inverclyde Council Adoption Agency provides a service for children and young people, aged from birth to 18 years, and their families. The agency recruits and supports adoptive parents to provide families for those children who cannot live with their birth parents or extended family members and whose needs have been assessed.

Following the last inspection Inverclyde council had placed five children for adoption. One adoptive family had been approved and had a child placed. There were no adopters waiting for child to be placed. There were five potential adopters being assessed and no potential adopters awaiting assessment. At the time of the inspection had 11 children with approved permanence plans and POA awaiting adoption.

The service is part of Inverclyde's CHCP8 Clyde Square, Greenock.

Inverclyde Council Fostering Service was inspected at the same time and has been reported on separately.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0345 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

This short notice announced inspection commenced on 8 December 2014. During the inspection we spoke with the following:

- Two adoptive couples during home visits
- A group of three adopters
- Four supervising social workers
- The resource worker
- The kinship care social worker
- Two team leads- adoption and permanence
- The service manager

We examined relevant documentation during the inspection some of which included:

- Two Adopters case files
- Two children files
- Staff training and supervision records
- Staff meeting minutes
- Adoption support plans
- Panel business meeting minutes
- Letter box protocol
- The finding of the audit conducted on 14 May 2014.

We provided verbal feedback to the manager and external manager on 8 January 2015.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

What the service has done to meet any recommendations we made at our last inspection

1. With the recent appointment of a new adoption manager, the service should involve staff in discussions about service planning, including approaches to recruitment and training. Plans should outline clear and measurable aims which can be reviewed. National Care Standards, Adoption Agencies, Standard 32: Providing a Good Quality Service.

The recommendation is met: Please see Quality Theme 3, Statement 3, for details.

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The manager provided a self assessment which included strengths and some areas for development.

Taking the views of people using the care service into account

During the inspection we visited two adoptive couples in their homes and met with a small focus group of three adopters. All spoke highly of the staff, who were described as being very supportive, helpful and extremely reliable. All felt that the assessment process was made easier due to the professionalism of the supervising workers. The preparatory groups were described as being very useful and helpful in understanding the needs of the children they may one day parent and of the commitment this required. Most adopters felt well prepared for their child.

Foster carers were described as being "a fantastic support" and several of the adopters remained in contact with foster carers. All expressed complete confidence that any request of support would be provided. The only criticism was of the support from placing social workers which was specifically relating to children placed from outwith Inverclyde.

Taking carers' views into account

We did not meet with any birth parent or birth relatives at this inspection.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

We found the performance of the service to be very good for this statement. The service continues to involve adopters and adopted children in a variety of ways. We reached this conclusion after speaking with adopters, consulting documents and speaking with staff.

Participants in the preparation groups were asked their views about the quality of the information provided and of the training and presentations during the preparation groups. We found that these views were overall positive but also changes were made as a result of suggestions made. Adopters valued the input from an experienced adopter who contributed to the preparation group sessions.

The adoption panel members sought the views of adopters when attending the panel, which included their experience of the process with responses recorded in the minute of the adoption panel.

A support group comprising of adopters and children meets regularly. This gives adopters the opportunity to exchange views, experiences and provide mutual support. Guest speakers are also invited to give presentations to the group on matters relevant to adoption. This gives adopters additional sources of advice in parenting children, who may have some trouble behaviour as a result of early trauma and neglect.

Adopted and birth children also attend the group attending the crèche provided. This offered the children the opportunity to make friends with other children who have been adopted or who have adopted siblings.

Support group members were consulted about the group and how they wish it to develop. The support group was also used as a forum to collect views of how to improve and develop the service. This had included giving views on post adoption support and in compiling the procedures for letter box contact.

An adoptive parent is a member of the Adoption and Permanence Panel, which gives an adopter's perspective to the panel discussion.

We found that the involvement of birth parents during the permanency planning process was promoted. This included some adopters meeting birth parents. Adopters we spoke with were appreciative of the opportunity to meet with birth parents. They were of the view that it would benefit their child when older, when asking about their identity and they would also be able to describe the birth parents physical characteristics.

Members of the permanence panel met with birth parents to discuss the permanency plan. This was extremely sensitively managed and meant that birth parents views were taken account of, when the panel came to making a recommendation. Birth parents were also offered the opportunity to write their views which were also shared at the permanency panel.

Birth parents views were included in the child's BAAF (British adoption and fostering) Form E. This included the type of adoptive family for their child. We found that where possible and appropriate these views were respected. This had included seeking parents of the same faith of birth parents and adopters of the same ethnicity.

We found children's views about being adopted were included on the BAAF form E when the child was of age to express their views.

Areas for improvement

The service was continuing to refine the adoption support plans to ensure that help and support provided was of the type and level wished for by adopters.

The service was exploring the potential for using of email letterbox contact.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Service strengths

We found the performance of the service to be 5 - Very Good for this statement. We found adopters underwent a rigorous assessment, to ensure they were suitable. This included making sure they were of good character, healthy, had appropriate values and attitudes to adopt children. A full assessment also took account of resources available to applicants such as, support network, finances and the home environment.

The assessment of applicants included full consideration of their strengths and this enabled them to make informed decisions about their ability to meet the child's needs at the point of adoption and in the future. We found that this included meeting with the medical advisor to fully discuss health history and areas of developmental uncertainty. Adopters told us that the match between themselves and children had been excellent and attribute this to staff getting to know them and their strengths.

Inverclyde identify vulnerable babies' pre-informed about their children's needs and history.

Prospective adopters and the child's foster parents meet before the child and adopters are matched at Panel. This ensures the prospective adopters are as fully informed as possible about the child. Prospective adopters told us they are also given access to educational reports, or meet key figures, in the child's nursery or school.

Resources including financial assistance were made available to adopters, in order to ensure the child was placed in the family most equipped to meet their needs and provide a loving family. Where possible, children were placed in adoptive families along with their birth siblings. This was in recognition of bonds and identity. For children who were separated from siblings we found adopters supported and facilitated post adoption contact.

Pre introduction planning meetings were well organised and there was evidence of excellent communication between adopters and foster carers. Foster carers were actively involved in the families finding process and adopters told us the contact from foster carers was invaluable in the early stages of the adoption. Introductions were well planned and transitions sensitively managed taking account of the child's daily routine and preferences. Toys and photographs of the child from the previous foster home were used to give the child a sense of self and record of the past.

Contact with foster carers also strengthened the adopters support network when seeking any additional information and advice about the child. This was seen as

particularly important during the formative stages of the adoption.

Post placement meetings were routine practice. Adopters spoke positively about the usefulness of these meetings and felt extremely well supported by the service. There was robust, coordinated planning for the child's needs, in terms of education, health and emotional support. This had included phased introductions to nursery and planning meetings with the school, prior to the school placement commencing.

Adopters advised that the preparatory training was good quality training and had given them a fuller understanding of their child's behaviour and how to help their child. The service encouraged adopters to borrow from their extensive library of books on child development and adoption.

There was evidence that children benefited from being adopted, growing and developing within a secure family base. We observed children had developed attachments with adopters, were making great progress in meeting developmental milestones, forming relationships and bonding with their family.

At any time, adopters could seek support from the service and this would be provided. Post adoption support plans were in use. Adopters who met with the inspector stated that post adoption support provided was excellent. We found that adopters returned for and received help as needed. This had included play therapy for children, access to child psychology and counselling and access to secure base training for adoptive parents. Many adopters chose to remain in regular contact with the service by attending the adopters support group.

The service pursued all avenues to ensure children were placed for adoption without unnecessary delay. Joint authority approach through the new partnership arrangement with two neighbouring Local Authorities had increased the choice of families available to children, within their cultural area. Eight placements between the three Authorities had been made. The service also participated in Adoption Exchange Days, use of the adoption register and linking with voluntary adoption agencies.

Areas for improvement

Some adopters stated the support from placing social workers following their child being placed could improve. This was specifically in relation to children placed from outwith Inverclyde. This included passing on photographs, later life letters and visiting the child in placement.

(Refer to recommendation 1)

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The management of the service should seek ways to ensure that in all instances the child's social worker from placing Local Authorities contributes to the post placement support.

National Care Standards, Adoption Agencies, Standard 29: At the point of placement.

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths

Based on our findings in relation to Quality Theme 1, Statement 1, we accept that a very good standard had been achieved in relation to this Quality Statement.

Areas for improvement

No additional areas for improvement were identified under this statement .

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

We found the performance of the service to be 5 - Very Good for this statement.

Adopters told us that the staff were, supportive, professional, caring and knowledgeable. We were told that the assessment process was insightful and that staff were extremely sensitive and skilled in carrying out the assessment.

Staff members told us they are a close-knit team who support one another and value each other's skills, knowledge and experience.

We found the quality of assessment reports of applicants were completed to a high standard with reference made to research. When applicant assessments were not completed within six months, the reasons were stated clearly.

Family placement workers were qualified social workers and registered with the Scottish Social Service Council. Most staff had completed post qualification certificated training such as 'Securing children's futures' and 'Child protection'. A member of the team was a Mental Health Officer and shared knowledge with the team. Staff members were regular contributors to national consultations relating to fostering and adoption and also gave a presentation on 'Achieving permanence for disabled children' in recognition of recent success in placing two children with disabilities with permanent foster carers.

Regular team meetings were held with discussions on practice, progress of assessments and children needing adoption. Practice issues were discussed on a routine basis, with topic specific meetings set up as required to consider specific matters; for example, letterbox contact, the assessment process and support planning. Staff were involved in determining the agenda and contributed to the action plan following meetings and development days.

The manager of the fostering service, until recently, was is the chair of the BAAF practice development forum and the Scottish representative of the UK social work practice advisory committee which is a national BAAF committee. As the adoption team and fostering team work jointly this meant that share had access to the most recent research and ensured that practice within the team reflected best practice.

There were leadership opportunities for staff within the team; for example, leading training on life story, facilitating the support group and maximising the participation of children and young people.

Staff had access to a well-equipped resource library and access to online research. Staff regularly loaned resources to adopters and those going through the assessment process to enhance their knowledge. Staff also received a periodical from BAAF (British Adoption and Fostering).

Formal supervision and appraisals were in place for the team. Policy and procedures were kept up-to date and in line with new legislation and best practice. Updating of the adoption procedures, the fostering procedures and the foster carers' manual was in progress. We were told that training requests were met, when relevant to professional development and the service delivery.

We found staff challenged discriminatory language and attitudes. Staff also took on the role of being educators in promoting diversity.

An assistant service manager and one member of staff had attended a course on "Assessing gay and lesbian carers" where valuing diversity was the main focus. This learning enhanced workers' ability in the conducting homes studies of same sex couples.

A two day training on The Adoption and Children (Scotland) Act 2007 was developed and delivered to the fostering and adoption team, locality social workers and senior social workers.

Areas for improvement

Staff members who spoke with us reported low morale within the team. Staff stated they received outstanding support from the assistant manager and that dissatisfaction related to matters outwith their managers sphere of responsibility. This included the uncertainty of future staffing, in light of proposals for council budget savings and lack of team identity as a result of moving to the new premises. This was discussed at the feedback to the inspection.

Management were aware of the current morale of the staff and of the need to keep staff updated as and when future staffing decisions were made. The manager intended to invite a member of the team to be part of the group which considers issues relating to the new accommodation.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

Based on our findings in relation to Quality Theme 1, Statement 1, we accept that a very good standard had been achieved in relation to this Quality Statement.

Areas for improvement

No additional areas for improvement were identified under this statement.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

We found the performance of the service to be 5 - Very Good for this statement.

We found assessments were robust. Second opinion visits were conducted and reports fully quality assured by the manager prior to being presented to permanence and adoption panel. This meant that, in most cases, the panel had sufficient information which allowed them to proceed to make a recommendation without delay.

Team members carried out post placement visits to ensure that the child and adopters support successful transitions. We found that if a child or adopters were not bonding or coping, then full discussions would take place to identify what supports were required.

The managers of the fostering and adoption team met routinely with Locality staff, to be informed of children who would be requiring adoption or permanence. This meant that assessments of the prospective adopters would be prioritised, to prevent delay in children being placed.

Inverclyde had a commitment to preventing 'drift' and ensure children were placed in adoptive families without delay. The team continued to support area team colleagues in permanency planning processes, including how to compile BAAF Form E reports and Section 17 reports. Management for children services within the Care and Health partnership closely monitored the progress of permanency planning and there was improved outcomes for children who could not return to birth families. The legal department provides legal advice to ensure that adoption can be secured without unnecessary delay and unforeseen legal challenges.

The permanence and adoption panel was independently chaired with the chairperson having a breadth of knowledge and experience of fostering and adoption services and of children requiring adoption. Panel members also had knowledge of the needs of looked after children and the qualities required to be a good adoptive parent.

We found that the panel members met with birth parents prior to and outwith the panel when decisions were being made to pursue permanency. This commitment to hearing the views of parents was evident the time and effort taken to secure the necessary arrangements. The permanence and adoption panel members scrutinised reports, fed back to management on the quality and when appropriate recalled the panel to allow time for matters to be further clarified.

The panel chair and panel members had appraisals and the opportunities to undertake training. This meant that they were able to develop in their role and keep abreast of changing legislation and recent research.

Staff received regular supervision and group supervision had been introduced. The manager discussed practice and monitored performance within this process.

The quality assurance team from Inverclyde Care and Health Partnership had completed a small scale file audit of 10 children who were looked after and accommodated. We found similar findings to those identified within the audit; for example, the need to improve administrative birth planning of the most vulnerable children had positive outcomes in placing children quicker with adoptive families, that social background reports were being used instead of the Integrated assessment framework and the need to make care plans more outcome focused. The findings have to be used to improve care planning for children.

The service issued questionnaires to adopters about the effectiveness of the service response to enquiries and quality of information provided. This confirmed that information was helpful and had been provided within seven days.

We found complaints were rigorously investigated. Full reports were compiled and included detail on the findings and the rationale for the outcome and action plans.

Areas for improvement

The service had a fulltime post of Supervising Social Worker vacant. We found that tracker sheets indicated that two applicant assessments were delayed although this was prior to the staff vacancy. However the provider should keep this situation under review to ensure that there is adequate staffing for the work of the service. (Refer to recommendation)

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The provider should ensure that there is adequate staffing to continue to provide a quality service.

National Care Standards, Adoption Agencies, Standard 32: Providing a good quality service.

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

N/A.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 5 - Very Good	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

6 Inspection and grading history

Date	Type	Gradings
14 Mar 2014	Announced (Short Notice)	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 4 - Good
14 Feb 2013	Announced (Short Notice)	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
24 Mar 2010	Announced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership Not Assessed
31 Mar 2009	Announced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

To find out more about our inspections and inspection reports

Read our leaflet 'How we inspect'. You can download it from our website or ask us to send you a copy by telephoning us on 0345 600 9527.

This inspection report is published by the Care Inspectorate. You can get more copies of this report and others by downloading it from our website: www.careinspectorate.com or by telephoning 0345 600 9527.

Translations and alternative formats

This inspection report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ہے بایتسرد می م وونابز رگی دی روا ولکش رگی دی رپ شرازگ تعاشا ہی

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

ی.رخأ تاغل بو تا قیسن تب بل طلا دن ع رفاو تم روشنم الا اذه

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

Telephone: 0345 600 9527

Email: enquiries@careinspectorate.com

Web: www.careinspectorate.com

Care service inspection report

Inverclyde Council Fostering Service

Fostering Service

Inverclyde CHCP
Kirn House
Ravenscraig Hospital
Inverkip Road
Greenock
PA16 9HA
Telephone: 01475 714060

Type of inspection: Announced (Short Notice)

Inspection completed on: 8 January 2015



Contents

	Page No
Summary	3
1 About the service we inspected	5
2 How we inspected this service	7
3 The inspection	11
4 Other information	24
5 Summary of grades	25
6 Inspection and grading history	25

Service provided by:

Inverclyde Council

Service provider number:

SP2003000212

Care service number:

CS2005087054

If you wish to contact the Care Inspectorate about this inspection report, please call us on 0345 600 9527 or email us at enquiries@careinspectorate.com

Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	5	Very Good

What the service does well

The staff team continue to be central to the very good performance of the service. The support and guidance to foster carers continues to be of a high standard. The manager continues to provide excellent leadership. The care provided by dedicated, caring foster carers continues to provide nurture and safety to vulnerable children and young people.

What the service could do better

The service should seek to work in partnership with locality staff to improve the planning of Looked after child reviews.

The service should explore how to improve the educational support to children who require this.

The provider should monitor the impact on staffing changes and take action to prevent any detriment to the service performance.

What the service has done since the last inspection

The service has an appointed and additional team lead who acts as the independent chair to foster home reviews.

The service continues to update documentation, policy and procedure to meet changing legislation, research and best practice. This has included the process and

procedures for the re-assessment of short term carers as permanent carers, the foster home review documentation and the allegations against carers protocol.

Conclusion

Inverclyde Council Fostering service continues to provide a high quality service.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and Recommendations

If we are concerned about some aspect of a service, or think it could do more to improve, we may make a recommendation or requirement.

- **A recommendation** is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

- **A requirement** is a statement which sets out what is required of a care service to comply with the Public Services Reforms (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Inverclyde Council's Fostering Service provides a fostering and family placement service for children and young people aged from birth to 18 years who are assessed as needing the service. The service recruits and supports carer families to provide a range of fostering services including temporary and permanent foster care and respite care.

At the time of the inspection 38 children from Inverclyde Council placed within Inverclyde's 38 approved foster care households. There were no children waiting for a fostering placement. One child was waiting for a permanent foster care placement. Five children were placed with foster carers provided by another registered fostering service. There were three assessments of potential foster carers going and there were no applicants waiting to be allocated a supervising social worker. Eight carer households had been approved in the last year.

Inverclyde Council Adoption Service was inspected at the same time and has been reported on separately.

The service is part of Inverclyde's CHCP8 Clyde Square, Greenock.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0345 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

This short notice announced inspection commenced on 8 December 2014. During the inspection we spoke with the following:

- A foster carer during a visit
- A group of foster carer attending the support group
- Five permanent foster carers
- Four supervising social workers
- The resource worker
- The kinship care social worker
- The registered manager of the service
- The service manager.

We examined relevant documentation during the inspection some of which included:

- Three foster carer's files
- Three children's files
- Staff training and supervision records
- Staff meeting minutes
- Foster carer training records
- Support group minutes
- Newsletters
- Complaints documentation
- Panel business meeting minutes
- Deregistration reports
- A placement disruption report
- The finding of the audit conducted on 14 May 2014.

We provided verbal feedback to the manager and external manager on the 8 January 2015.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

What the service has done to meet any recommendations we made at our last inspection

The service should ensure that focused discussion takes place following any disruption of a young person's placement. This should be recorded and should examine any factors affecting the outcome of the placement and any action to be taken. National Care Standards, Foster Care and Family Placement Services, Standard 13: Management and Staffing.

The recommendation is met: Please see Quality Theme 4, Statement 4, for details.

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The manager provided a self assessment which included strengths and some areas for development.

Taking the views of people using the care service into account

We visited one foster carer in her home and met with a group of foster carers at the support group and in a separate group with permanent foster carers. Foster carers told us they had good relationships with supervising social workers and valued their support and professionalism. Support groups were described as being a good opportunity to give views, share experiences, give and receive support. We were told training opportunities were good and that staff sought their views about training needed and the quality of training provided. Carers felt training helped equip them with skills in working with children and enhanced their understanding of the impact of childhood trauma and neglect.

The majority of carers felt they were given an opportunity to contribute with the service development and some felt this could be expanded.

Contact with children's social workers was described as variable dependent on the worker. All carers felt that the staff in the team would pursue issues they were unhappy with. Some carers felt that more support was needed for children who either needed additional educational support, or, were achieving but needed extra tuition to fully reach their potential.

Taking carers' views into account

We did not meet with any birth parents during this inspection.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

We found the performance of the service to be very good for this statement.

We found at this inspection that the fostering service continued to involve people in assessing and improving the quality of care and support, quality of staffing and quality of management. We came to this conclusion after we looked at various documents, policies and procedures, speaking to foster carers and staff who worked in the fostering service.

The support group for foster carers was well attended and foster carers we spoke with told us that they found these groups to be very useful. They told us that this was an opportunity to meet with other foster carers and provide and receive advice and support. We were told that they were encouraged to give their views to develop the service. This had included agreeing training needs, planning social events and new developments in foster care. Focus groups comprising of staff and foster carers had been established; which included, planning a recruit strategy to recruit new foster carers and taking part in the recruitment events, compiled new guidance and procedures to be used in the event of allegations about carers. Foster carers had been involved in the creation of the new foster home review materials which had recently been implemented.

The service had also established a permanent carers group in recognition of their growing numbers and the difference in their role. This was valued by the permanent carers group.

When applicants attended the preparation groups they were encouraged to put their views on a comments wall. This gave the group facilitators and opportunity to review the content of the sessions. Experienced foster carers attended the preparation groups to share their experiences, the rewards and challenges of being a foster carer. This was valued by new applicants.

Foster carers were provided with feedback forms following training events or when they attended the fostering panel. We looked at a selection of these during this inspection. We found that most responses were favourable. We found the service took action when improvements were suggested. Examples included amending the therapeutic play training to being more focused on practical intervention as opposed to theoretical. We found that access to water jugs was now available for those attending the fostering panel.

Foster carers completed their own report to the foster home review and were asked their views about the quality of support and training provided at the fostering panel. We found foster carers felt very well supported and valued the training opportunities.

The participation of children and young people had been strengthened with the involvement of the resource worker to the team. This included support to children in completing a questionnaire six weeks after their placement commenced. This allowed the children to reflect and discuss views with someone who had a degree of objectivity. We found children were very positive about their living in foster care and stated they were feeling safe, well supported and cared for. A focus group of young people are currently working with the resource worker to refresh the questionnaires used with young people to ensure more child friendly language is used.

Children and young people were also able to contribute their views to formal Looked After reviews electronically using 'viewpoint' or completing a written having your say report. Young people were also encouraged to attend reviews to give their views. Children and Young people also contribute to the formal foster home review meeting and when they attended the fostering panel.

A newsletter was issued and carers and children contributed to some. The newsletter updated carers on service developments, the achievements of foster carers and children and introduced new carers and staff. Articles relevant to fostering were included, such as; "Ten top tips for moving children on" which was distributed via the Newsletter following foster carers expressing this could be a difficult time. The newsletter was also used to invite foster carers to volunteer their service to working groups and events.

Information leaflets were issued to the friends and relatives of those applying to foster. This included information about the process of assessment, some of the difficulties children may have who come to live in foster care and the challenges this can present for their foster carers. Relatives and friends are also told of the need to report any disclosure a child makes to them. This information leaflet helped give friends and relatives an insight into fostering and the needs of children in foster care.

The manager has asked each foster carer to list the three most helpful and unhelpful issues in their role as foster carer. The need for better communication and better understanding of their role with children's social workers was identified as a recurring theme. As a result, a paper describing the roles and responsibilities of foster carers, social workers and family placement workers had been written. The manager met regularly with area team management to discuss and resolve issues arising and plans were in place for a joint training day.

We found that birth parents views were sought and, when provided, contribute to the foster home review.

Sons and daughters completed end of placement reports. One young person stated, "I feel really good about being part of a foster family" and another, "It's just like normal life, I enjoyed having them around, it was nice having a younger sibling to play with".

Areas for improvement

We suggested the method of evaluating the preparation groups could be more structured.

Foster carers told us that communication with some children's social workers was still problematic. The manager was hope that a future joint event would help resolve this.

The service is continuing to look at ways to gather the views of birth parents as it was found the use of questionnaires met with little response.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Service strengths

We found the performance of the service to be very good for this statement.

We found that care plans were in place for children and reviews were taking place within statutory timescales. A new placement plan had been introduced a contain a good level of detail which meant that foster carers were well informed of the children's needs; including, immediate health needs, contact arrangements, preferences and educational arrangements. The plans also included the initial plan, purpose of placement and specific expectations of foster carers.

Children's health needs were identified at medicals with foster carers accompanying children to routine and specialist health appointments. This had included children attending dental appointments, opticians and attending the doctor when unwell. The LAAC nurse was available to give support and advice on matters other than primary health care needs; such as, counselling and sexual health advice.

Foster carers had very good contact with schools to ensure that children were receiving the help they required to overcome past adversity. Resources were identified for some children to support their learning and development. This had included some children attending nurture groups within school and school timetables tailored to the child's needs. We found foster carers were ambitious for the children in their care with many older children being supported to achieve formal qualifications and some going onto further education. Inverclyde benefitted from free children's books from the Dolly Parton foundation. Foster carers promoted early learning and had taken part in the paired reading scheme to develop reading skills. We also found foster carers encouraged young people to seek and gain employment and supported this important step to independence.

We found foster carers gave children the opportunity to achieve and develop hobbies and interests. We found children were supported to join clubs to meet other children and establish links in the community, such as, football teams, toddler groups, dancing classes, the brownies and scouts. Children were encouraged to learn musical instruments. Young people benefitted from going on holiday with carers and attending special family events.

Inverclyde continued to provide foster carers with good training opportunities. Training continued to focus on helping children overcome trauma and neglect. It was evident when speaking with foster carers they had a sound understanding of how this impacted on development and behaviour. The carers non-judgemental attitudes and values was a testimony to their professionalism and caring. We found children were

benefiting from living in a secure family base and were forming good attachments with their foster carers. Some children were now placed on a permanent basis and regarded their foster home as their family. Older children were remaining in foster care placements with their transition to eventual independence at a pace which met their needs and preferences. Older children were linked to through care workers who worked with them in the transition to living independence. This meant young people could still benefit from support when living in the community.

We found foster carers supported children contact by facilitating contact with siblings and sharing good communication with birth parents.

The children's rights worker visited all children over 12 years within a week of being received into care. The children rights book was issued and a complaints leaflet. This meant children and foster carers were aware of whom to contact in the event of a child feeling their rights were not being taken into account.

Areas for improvement

Inverclyde have foster carers with Akamas training and SVQ awards, however are waiting the detail of the new learning career pathway to be clarified by the Scottish Social Services Council before introducing new certificated training for foster carers.

Foster carers told us that support in education could be better in terms to tuition for children at examine times and to help them 'catch up' with peers. We found that some of the children's written care plans did not make good use of the GIRFEC being indicators and the actions planned were not sufficiently clear. We appreciate this is not the responsibility of the fostering service; however, it impacts on children receiving a fostering service. We also acknowledge that issues of inconsistency regarding the quality of written care plans were identified at a recent audit conducted by locality management. This was discussed fully at the inspection feedback meeting. The external service manager stated that the provision for tutors lay with the education department and she would raise this matter with them.

We were told that there had been difficulties with the arrangements for LAAC reviews. Examples we were told about included; reviews held at short notice, short notice cancellations and not being informed about reviews (family placement workers and foster carers). We were told this impacted on carers ability to prepare the child and contribute to care planning in a meaningful way. We found that LAAC reviews, whilst meeting statutory timescales were not always meeting Inverclyde councils own timescales. (Refer to recommendation)

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The manager should seek to resolve the issues with LAAC review scheduling with locality team management.

National Care Standards, Foster Care and Family Placement Services, Standard 13.3: Management and Staffing.

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths

Based on our findings in relation to Quality Theme 1, Statement 1, we accept that a very good standard had been achieved in relation to this Quality Statement.

Areas for improvement

No additional areas for improvement were identified under this statement .

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

We found the performance of the service to be very good for this statement.

Foster carers told us that the staff were, supportive, professional, caring and knowledgeable about the fostering task and the needs of children who were fostered.

Staff members told us they are a close-knit team who support one another and value each other's skills, knowledge and experience.

We found the quality of assessment reports of applicants were completed to a high standard with reference made to research. When applicant assessments were not completed within six months the reasons were stated clearly.

Family placement workers were qualified social workers and registered with the Scottish Social service council. Most staff had completed post qualification certificated training such as 'Securing children's futures' and 'Child protection'. A member of the team was a Mental health Officer and shared knowledge with team. Staff members were regular contributors to national consultations relating to fostering and adoption and also gave a presentation on 'Achieving permanence for disabled children' in recognition of recent success in placing two children with disabilities with permanent foster carers.

The manager of the service, until recently, was is the chair of the BAAF practice development forum and the Scottish representative of the UK social work practice advisory committee which is a national BAAF committee. This meant that share had access to the most recent research and ensured that practice within the team reflected best practice.

Regular team meetings discussion on practice, progress and support needs of carers. Carers told us all workers are known and accessible to them and this is extremely reassuring and helpful particularly at times of crisis.

Practice issues were discussed on a routine basis with topic specific meetings set up as required to consider specific matters; for example, letterbox contact, the assessment process and support planning. Staff were involved in determining the agenda and contributed to the action plan following meetings and development days. There were leadership opportunities for staff within the team; for example, leading training on life story, facilitating the support group and maximising the participation of children and young people.

equipped resource library and access to online research. Staff regularly loaned resource to foster carers and those going through the assessment process to enhance their knowledge. Staff also received a periodical from BAAF (British Adoption and Fostering).

Formal supervision and appraisals were in place for the team. The staff we spoke with told us that the manager was always available to give guidance and provided support.

Policy and procedures were kept up-to date and in line with new legislation and best practice. Updating of the adoption procedures, the fostering procedures and the foster carers' manual was in progress.

We found staff challenged discriminatory language and attitudes. Staff also took on the role of being educators in promoting diversity.

The manager and one member of staff had attended a course on "Assessing gay and lesbian carers" where valuing diversity was the main focus. This learning was shared in training with foster carers. Foster carer evaluations of the training stated that they felt more informed about the value of diversity in our communities.

Individual training records were in place for staff and we were told that training requests were met when relevant to professional development and the service delivery.

A two day training on The Adoption and Children (Scotland) Act 2007 was developed and delivered to the fostering and adoption team, locality social workers and senior social workers.

Areas for improvement

Staff members who spoke with us reported low morale within the team. Staff stated they received outstanding support from the assistant manager and that dissatisfaction related to matters outwith their managers sphere of responsibility. This included the uncertainty of future staffing in light of proposals for council budget savings and lack of team identity as a result of moving to the new premises. This was discussed at the feedback to the inspection. Management were aware of the current morale of the staff and of the need to keep staff updated as and when future staffing decisions were made. The manager intended to invite a member of the team to be part of the group which considers issues relating to the new accommodation.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

Based on our findings in relation to Quality Theme 1, Statement 1, we accept that a very good standard had been achieved in relation to this Quality Statement.

Areas for improvement

No additional areas for improvement were identified under this statement .

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

We found the performance of the service to be very good for this statement.

We found assessments were robust. Second opinion visits were conducted and reports fully quality assured by the manager prior to being presented to panel. This meant that in most cases the panel had sufficient information which allowed them to proceed to make a recommendation on the day of the panel.

The newly introduced foster care review paperwork ensured the views of foster carers, placing social workers, children and birth parents were included. We found that placing social workers, children and birth parents were complimentary about the care provided by foster carers. Foster carers were happy with the support and training provided. We found that matters of dissatisfaction raised by any party were fully investigated and managed appropriately.

The Foster home reviews were chaired by team lead, who although part of the team, did not have direct line management of the supervising worker or a supervising role to the foster carers. This brought a level of objectivity to the process. We found that reviews of foster carers were well organised and took account of the ongoing fitness of carers, training needs, support provided and the quality of carer provide to children in the placement. Unannounced visits took place and an account of the observations from visits recorded in case files.

The panel was independently chaired and knowledgeable about fostering and adoption and children who are looked after and accommodated. Panel members also had knowledge of the needs of looked after children and the qualities required to be a good foster carer and adoptive parent. We found that the panel members met with birth parents prior to and outwith the panel when decisions were being made to pursue permanency. This commitment to hearing the views of parents was evident the time and effort taken to secure the necessary arrangements. The fostering panel scrutinised reports, feedback to management on the quality and when appropriate recalled panel to allow time for matters to be further clarified.

The panel chair and panel members had appraisals and the opportunities to undertake training. This meant that they were able to develop in their role and keep abreast of changing legislation and recent research.

Staff received regular supervision and group supervision had been introduced. The manager discussed practice and monitored performance within this process.

The quality assurance team from Inverclyde Care and Health Partnership had completed a small scale file audit of 10 children who were looked after and accommodated. We found similar findings to those identified within the audit, for example; The need to improve administrative systems in the planning of Looked after reviews, that good pre-birth planning of the most vulnerable children had positive outcomes in placing children quicker with adoptive families, that social background reports were being used instead of the Integrated assessment framework and the need to make care plans more outcome focused. The findings have to be used to improve care planning for children.

The service issued questionnaires to those who had expressed an interest in becoming foster carers to assess the effectiveness of the service response to enquiries and quality of information provided. This confirmed that information was helpful and had been provided within seven days.

We found complaints were rigorously investigated. Full reports compiled with included a detail on the findings and the rationale for the outcome and action plans. We found staff conducted this work sensitively appreciating the difficulty and challenge allegations presented to foster carers. The service has further strengthened their helpful approach by setting up a consultation group with carers to look at compiling a protocol for allegations. The Fostering network were also provided training on managing allegations to carers.

We found the service look reflectively at any fostering breakdown and adopted a lessons learned approach for the future. The reasons for the recommendation to deregister foster carers were clearly documented in a report which was presented to the fostering panel.

Areas for improvement

The service manager was collating information for the completion of the annual report.

The service had a fulltime post of Supervising Social Worker vacant. We found that two applicant assessments were delayed although this was prior to the staff vacancy. However, the provider should keep this situation under review to ensure that there is adequate staffing for the work of the service. (Refer to recommendation)

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The provider should ensure that there is adequate staffing to continue to provide a quality service. National Care Standards, Foster Care and Family Placement Services, Standard 13: Management and Staffing.

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 5 - Very Good	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

6 Inspection and grading history

Date	Type	Gradings
28 Feb 2014	Announced (Short Notice)	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
14 Feb 2013	Announced (Short Notice)	Care and support 6 - Excellent Staffing 5 - Very Good Management and Leadership 5 - Very Good
24 Mar 2010	Announced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership Not Assessed
31 Mar 2009	Announced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

To find out more about our inspections and inspection reports

Read our leaflet 'How we inspect'. You can download it from our website or ask us to send you a copy by telephoning us on 0345 600 9527.

This inspection report is published by the Care Inspectorate. You can get more copies of this report and others by downloading it from our website: www.careinspectorate.com or by telephoning 0345 600 9527.

Translations and alternative formats

This inspection report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ہے بایتسرد می م وونابز رگی دی روا ولکش رگی دی رپ شرازگ تعاشا ہی

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

ی.رخأ تاغل بو تا قیسن تب بل طلا دن ع رفاو تم روشنم الا اذه

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

Telephone: 0345 600 9527

Email: enquiries@careinspectorate.com

Web: www.careinspectorate.com