

# **Care and Social Services Inspectorate Wales**

Care Standards Act 2000

**Inspection report  
Fostering services**

**NewFocas Ltd**

13-17 Brunswick Court  
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Buckley  
CH7 2ED

**Date of publication – 15 February 2011**

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**Care and Social Services Inspectorate Wales**

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Dates of this inspection episode:	September 2010 – January 2011
Dates of other relevant contact since last report:	Nil
Date of previous report publication:	30 <sup>th</sup> December 2009
Inspected by:	Shirley Cox
Other regions contributing to this report:	None

## Introduction

This report has been compiled following an inspection of the fostering service undertaken by Care and Social Services Inspectorate Wales (CSSIW) under the provisions of the Care Standards Act 2000 and associated regulations.

The primary focus of the report is to comment on the quality of life and quality of care experienced by service users (foster carers and children in placement).

The report contains information on how we inspect and what we find. This inspection focuses specifically on the Fostering Services (Wales) Regulations 2003 but also takes into account the National Minimum Standards for Fostering Services.

The report is divided into nine sections reflecting the broad areas covered by the inspection:

1. Summary of findings
2. Policies and procedures / information
3. Management and staffing of the service, (including premises and finance)
4. Provision of foster carers (including fostering panel)
5. Quality of care and safety for children placed
6. Placement of children, parts v & vi of the regulations
7. Records
8. Short term placements
9. Family and friends as carers

CSSIW inspectors are authorised to enter and inspect fostering services at any time. Inspection enables CSSIW to satisfy itself that the service should continue to operate, and for IFAs this will include satisfaction that continued registration is justified. It also ensures that all fostering services are compliant with:

Care Standards Act 2000 and The Fostering Services (Wales) Regulations 2003, whilst taking into account the National Minimum Standards for Fostering Services. The service's own statement of purpose.

At each inspection episode there are visits to the service during which CSSIW may adopt a range of different methods in its attempt to capture service user's and their relatives'/representatives' experiences. Such methods may for example include self-assessment, discussion groups, case tracking, visits to carers' homes, observation, interviews, and the use of questionnaires. At any other time throughout the year visits may also be made to the service to investigate complaints and to respond to any changes in the service.

Readers must be aware that a report is intended to reflect the findings of the inspector at a specific period in time. Readers should not conclude that the circumstances of the service will be the same at all times.

The registered/responsible person/s is/are responsible for ensuring that the fostering service operates in a way which complies with the service specific regulations. CSSIW will comment in the general text of the inspection report on their compliance. For those regulations which CSSIW believes to be key in bringing about change in the particular service, they will be separately and clearly identified in the requirement section.

As well as listing these key requirements from the current inspection, requirements made by CSSIW since the last inspection, which have been met and those which remain outstanding are included in this report. The reader should note that requirements made in last year's report which are not listed as outstanding have been appropriately complied with.

Where key requirements have been identified, the provider is required under regulation 42B, (Compliance Notification), to advise, in writing, the appropriate regional office of the completion of any action required by CSSIW.

The regulated service is also responsible for having in place a clear, effective and fair complaints procedure which promotes local resolution between the parties in a swift and satisfactory manner, wherever possible. The annual inspection report will include a summary of the numbers of complaints dealt with locally and their outcome.

CSSIW may also be involved in the investigation of a complaint. Where this is the case CSSIW makes publicly available a summary of that complaint. CSSIW will also include within the annual inspection report a summary of any matters it has been involved in together with any action taken by CSSIW.

Should you have concerns about anything arising from the Inspector's findings, you may discuss these with CSSIW or with the registered person.

Care and Social Services Inspectorate Wales is required to make reports on regulated services available to the public. The report is a public document and will be available on the CSSIW web site, [www.cssiw.org.uk](http://www.cssiw.org.uk)

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## **Section one: Summary of findings**

NewFocas Ltd is registered with the CSSIW as an independent fostering agency. The agency offers therapeutic placements for children and young people from 0 – 18 years and parent and baby placements, where the child is deemed to be at risk. At the time of submission of the self assessment form the agency had 14 fostering households approved for full-time care, 6 approved for respite carers and 1 peripatetic carer. A total of 15 children were in placement, including 5 parent and baby placements.

The inspection was announced and took place during November/ December 2010. Comprehensive self-assessment documentation was received by the CSSIW prior to the inspection, which, together with the findings of the 2009/2010 inspection, informed a focus for the inspection. The methodology used to gather evidence for the inspection, included the use of questionnaires to staff within the agency, to foster carers, children in placement, placing social workers and members of the fostering panel. The inspector examined the case files of children and foster carers, and the personnel and supervision files of members of staff. Discussions took place with members of staff, with the Manager, the Responsible Individual, and the Panel Chair. The inspector attended a team meeting and a Panel meeting.

This report identifies the continued commitment of the agency to the training of foster carer's and members of staff to improve the service provided to children. There is a dynamic planning structure around each child, to ensure they and the carers receive the support they require. This support is provided around the clock with an out of hour's social work service and through the provision of sessional staff. During the past year a property has been obtained on Ynys Mon which has significantly improved the opportunities for support and training to foster carers who live on the island, this resource received positive comments from carers. New appointments have been made, and the deputy manager appointment has been well received by members of staff. There remain some divisions of opinion expressed by the panel chair after particular events last year. The inspector would encourage the agency decision maker and the chair to consider meeting regularly to resolve any outstanding issues. It was disappointing to note that the views of service users had not been gathered to contribute to the quality of care review. The providers of the service are committed to including the views of all stakeholders in the current review.

There are recommendations made in relation to elements discuss in sections two, three and four of this report, but the reader should be aware that the provider may have already addressed issues identified and that these changes may not be reflected in this report. You may therefore find it helpful to contact the provider for advice on any action taken following this inspection.

The inspector would want to thank everyone who contributed in any way to this inspection for their help and assistance, and particularly to the staff team for their hospitality during the inspection.

**Section two: Policies and procedures / information**

**Inspector`s findings:**

The required policies and procedures are in place to guide the operation of this service. Previous assessments of these documents recorded that the policies and procedures bring together all aspects of the service and are linked to the National Minimum Standards for Fostering Services (NMS). The self assessment document (SAF) identified a number of procedures that have been or are being updated. Of the thirteen documents/policies/procedures required to be submitted to the CSSIW, seven had either been reviewed, or were being updated. For example, submitted were a draft procedure for the annual review of foster carers, administrative procedures to support the reviews, the foster care agreement and the statement of purpose. The foster carer handbook remains under review, as was the position during the 2009/10 inspection, the delay caused by the amount of revision required. As the document will be distributed in a lever arch file, the inspector has advised that sections that have been completed should be sent to foster carers to ensure they have access to current thinking on policies and procedures.

The pre-inspection information contained evidence that a systematic review of staff related policies is underway followed the commissioning of an employment law advisory company. It is stated that all staff contracts have been reviewed and pre-inspection information included several of the updated personnel procedures.

The statement of purpose has been updated, providing a more streamlined model, however the document does need to contain more detail on the pre-approval training provided to prospective foster carers. The statement of purpose is compliant with the National Minimum Standards and Regulation 3 of the Fostering Service (Wales) Regulations 2003. The document contains information on the aims and objectives of the service, on the staffing structure, the recruitment and management of foster carers, the financial support provided to them and the representation and complaint process.

There are two established children`s guides available that during the 2009/10 inspection were considered as too wordy, assuming a degree of literacy and motivation by the child reader. Although the inspector was informed that the guides had been revised during the year, they would benefit from further attention to ensure they are documents that would be more understandable and therefore accessible to the child. The need to attend to these booklets was discussed with the managers and a further recommendation is made.

The web site for the agency has been significantly developed over the past year, now providing an accessible and informative forum.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

<b>Good practice recommendations:</b>	<b>NMS or other source</b>
1) It is recommended that sections of the foster carer handbook that have been reviewed should be sent to foster carers to ensure they have access to current thinking on policies and procedures. 2) It is recommended that more detail on the pre-approval training provided to prospective foster carers, is included in the statement of purpose. 3) It is recommended that attention is paid to the children's guide so that they would be in formats that would be more understandable to the child reader.	NMS 22.5  NMS 1.4  NMS 1.5

### **Section three: Management and staffing of the services, (including premises and finance)**

#### **Inspector's findings:**

The current staffing establishment of this service are qualified to the required standard. All social work staff are qualified social workers with, in the majority of cases, most staff planning to achieve further recognised qualifications. The administrative staff have extensive experience and qualifications relevant to their particular roles. The business manager has achieved an HND Business Studies and the NVQ IV award in Management and Administration. Other administrative staff have achieved a variety of qualifications which includes, the NVQ III in Business and Administration.

The record of training attended by the team over the past year is extensive and includes, health and safety, first aid, child protection, supervision training, Incredible Years, appropriate adult, what works therapeutically with looked after children, skills to foster and adult style attachment training.

The agency employs social workers who are identified as supervising social workers and therapeutic social workers, these staff work closely together as teams around the family and the child. The therapeutic social worker has a focus on the child, getting to know them and then developing a plan of work with the child that is carried through by the carers and sessional staff. This work is reviewed every few months when further plans are developed. The inspector learnt that this level of work has attracted plaudits from local authority social workers.

There are three social workers who provide support to foster carers 'out of hours'. In a discussion with them the inspector learnt of their extensive and varied backgrounds within related children's fields. These social workers discussed the training they had attended and how they have attended group development days. They receive email updates on placements on a Friday afternoon, which were described as 'very useful'. They have an information bag for when they are on duty which contains contact sheets and details of available respite carers. The out of hours staff attend the weekly team meetings where out of hours issues are discussed together with caseloads and case allocations. They confirmed they receive individual and group supervision.

There had been six new appointments since the last inspection, one with specialist experience, who has been brought in to develop the staff and organisation in working with traumatised children. It was reported that disciplinary action had been taken against one member of staff; the process that was followed was guided by the advice received from an employment law advisory service.

The personnel files of recent recruits were assessed and were seen to be compliant with Schedule 1 of the Fostering Services (Wales) Regulations 2003. Information provided in the SAF confirmed that all staff who have direct contact with children have received enhanced CRB clearance, and that these are repeated every 3 years. A more robust CRB structure is being introduced to consider those CRB that are returned with disclosures. The social work staff are registered with the Care Council for Wales. In discussion with staff and through returned questionnaires and through the assessment of supervision files the inspector learnt that staff receive regular and detailed supervision, and all annual appraisals due had been carried out.

The manager of the service is also the managing director and founder of the company. The manager has extensive experience of working and managing in local authority children's services departments and prior to founding this company managed a child placement team. The manager has a social work qualification and the NVQ IV in management. The manager is seen by members of staff as a person who 'gets things done', and has the enthusiasm to continually develop the service. A deputy social work manager was appointed during the past year who was successfully recruited from the social work team. The deputy has achieved the DIPSW and the NVQ IV in management. The deputy manager is responsible for supervising the social work team and staff see her as a positive appointment. It was said by a member of staff that 'she notices things that need to be changed and changes them'. The deputy and manager meet on a weekly basis to discuss operational matters, and monthly for supervision.

The quality of care review that was provided pre inspection to the CSSIW is structured on Schedule 7 of the Fostering Services [Wales] Regulations 2003 and reviewed the period April 2009-March 2010. The quality of care report was identified as draft. This information is collated on an annual basis, with the outcome report presented to the Board of Directors. The inspector would have anticipated that at the time of the inspection, the end of November, the report should have moved from a draft report stage. The report as a quality of care review does not include input from foster carers or children/young people who use the service. The regulations (42.3) do require that the review includes the views of those who use the service, so that services can be influenced by their opinions. As part of this process, the agency should also seek feedback on the quality of care it provides from placing authorities both during and at the end of the placement. This had been included in previous reports and should be re-instated. In discussion with the manager and RI it was clear they intended to incorporate service users views in the current year's review, hence no action is taken at this inspection. The inspector learnt of the meeting structures that are in place to help ensure this service is managed effectively, but felt that information sharing could be improved by providing more frequent information to the Board and to management meeting on those elements identified in Schedule 7. This would ensure that monitoring of the quality of the service is a dynamic process.

The case files and personnel files that were seen contained evidence that they had been audited. The agency continues to have effective administrative systems in place for promptly notifying the relevant authorities of the events listed in Schedule 8 of the Regulations.

There have been three complaints about the service since the last inspection, all resolved internally by the agency. Two complaints were received from foster carers and one from a mother in placement. The summary of each complaint identified the issues that had been brought to the attention of the agency and the action taken by the agency as a result of the complaints. Each of the complainants requested that their complaints were investigated through the informal process.

The managers informed the inspector that the financial position of the agency is continually monitored, and particular emphasis is in place at the moment because of a reduction in placements. There remains a high referral rate to the agency, but these are more likely to be for single placements or parent and baby placements, in response to this

trend the agency is recruiting for more of these placements. The management team are also conscious of the current financial constraints on local authorities, which they believe will impact on referrals for placements. Rigorous financial oversight by the business manager and the Board aims to ensure that the company is financially viable at all times and has sufficient financial resources to fulfil its obligations. The agency follows the Fostering Network recommendations for subsistence rates for carers. This year Fostering Network has recommended no increase in acknowledgement of the Government spending review

The agency is situated on the first floor in a modern suite of offices. The internal lay-out of the building is a spacious open plan area, which is shared by social work and administrative staff. There are individual offices for the managers and for the storage of case files; a large meeting room is also available. Alternative accommodation has been identified for panel meetings and premises have been obtained in Ynys Mon to provide a more accessible training and meeting venue for foster carers who live in this area.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source
1) It is recommended that the quality of care review includes the view of those who use the service, particularly of children who are in placement, their foster carers and social workers. 2) It is recommended that information gathered when monitoring the service is shared with the Board and management team on a more regular basis than once a year.	Reg 42.3  NMS 4.1

## **Section four: Provision of foster carers (including panel)**

### **Inspector`s findings:**

At the time of submission of the SAF, the fostering agency recorded it had a total of 21 approved carers, 14 full time carers, 6 respite carers and 1 peripatetic carer. These provide a total of 31 permanent placements, 14 respite placements and 4 peripatetic placements. There were 10 applicants subject of assessment awaiting approval. There is an acknowledgement that the service does not have the number of single placements and placements for parent and baby to meet all demands, and recognition that foster carer recruitment is an area for continued attention.

The process of recruiting, assessing and approving foster carers was not assessed for this inspection. Previous inspections of this service have identified the level of training, enquiry and analysis that is applied to the assessment of prospective carers. The inspector was provided with a written record of the first visit of the assessment process. This visit explored the applicant's motivation to foster, the views of their own children and extended family, their parenting styles and understanding of child development. The foster carer training programme identified monthly, day time or evening training opportunities. The programme identified, amongst others, managing stress, safe holding, the child attachments-loss and its effect, Incredible Years and Theraplay.

The agency continues to provide excellent levels of support to their foster carers. For example; on-going regular training and support group meetings are supplemented by formal supervision sessions, with weekly visits to new foster carers and sometimes daily contact if it is needed. The supervision format is very comprehensive and includes a formal discussion on the progress of each child in placement, as measured against their therapeutic placement plan. The case records viewed and questionnaires returned by foster carers provided evidence of good quality supervision in all cases. It was also noted through panel papers and through case files that foster carer's annual reviews are taking place within the twelve month timeframe. The foster carers who responded from Ynys Mon commented on the difference, in relation to accessibility, the house in this area had made.

The inspector read the annual reviews in foster carer case files and those that were submitted to panel. The review is a substantial piece of work and included very detailed information on the foster carer from their previous year's experience. It was learnt that the review is used as a marketing tool when responding to placement requests from social workers, and it was the inspectors' view that this has made the review report a rather unwieldy document, obscuring the views of children and placing social workers, whose experiences should be prominent. The inspector discussed these observations with the managers who agreed the format of annual reviews will be reconsidered.

All of the foster carer case files that were read contained written confirmation of approval status and foster care agreements. The foster carer agreements were of the standard required by Schedule 5 of the Fostering Services (Wales) Regulations 2003. Foster placement agreements were not in evidence in the case files seen. This is a difficult situation for the agency as Regulation 34 identifies the written foster placement

agreement as the responsibility of the placing authority. It was acknowledged that the agreement had been included in the LAC information but with different systems now in place in different authorities foster placement agreements are not routinely received. The agency does construct very detailed plans from the information received from placing authorities and the inspector received two examples of draft agreements the agency had prepared in an attempt to address this deficit. Although very good attempts they do not fully meet the matters and obligations in foster placement agreements, identified in Schedule 6 of the regulations. The inspector would recommend that the agency pursues this requirement with the placing authority but where this is not achieved, an in-house agreement, that follows the Schedule should be put in place with agreement from the placing social worker.

The agency has its own panel with an independent panel chair. The inspector attended a panel meeting, obtained minutes of three previous meetings, received completed CSSIW questionnaires from panel members and met with the panel chair. Panel members recorded that they are provided with training appropriate to their role, have access to relevant policies, procedures and guidance and receive panel papers in sufficient time to read them. They also recorded that they considered assessments were completed in sufficient detail to inform their decisions. In a meeting with the chair she reflected on some of the difficulties that had been present last year and the need to build trust again in the organisations governance. It was learnt that the panel chair and the agency decision maker do not meet, which is not conducive to building trust between the panel chair and the agency. This needs to be rectified and the RI was informed of the need to arrange a schedule of meetings with the chair. The chair discussed the agency decision makers' refusal to support panel's recommendation to de-register a set of foster carers. The inspector had received a written report of an independent review that had been commissioned in relation to this decision. The reviewer assessed that both panel and the RI had reached appropriate decisions, and supported this decision with a range of recommendations for the organisation to consider. One significant recommendation, agreed for implementation by the management team, was that non compliant foster carers should not be supervised by student social workers. It was therefore very disappointing to note that the very case referred to was being supervised by a student social worker, albeit one in the third year of her degree course.

The panel chair runs the panel on lines recommended by the British Association of Fostering and Adoption guidance 'effective panels'. Such a structure has ensured this panel operates in an effective and efficient manner. The inspector was impressed by the quality of the discussion and it was evident that the chair has created an environment where all panel members feel confident to express their views. There was just one area where the inspector thought the process appeared cumbersome, which was when considering questions to ask of new applicants. There was quite a delay for the applicants who were waiting outside for the questions to be delivered. It was evident from the general discussion amongst panel members that they felt this process could be improved. It was also observed that panel has a feedback process for panel members on the quality of the reports they receive.

Panel minutes for the period from June 2010 – August 2010 were reviewed for this inspection and one issue is brought to the attention of the agency. It was noted that a written record is made of panel proceedings and of the recommendation and reason of each panel member. Panel does have to agree a joint reason for the recommendation made. Because in the text the overall reasons of each panel member are recorded, no

requirement is made for this element, but it is necessary to coordinate the reason for agreeing a recommendation.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

<b>Good practice recommendations:</b>	<b>NMS or other source</b>
1) It is recommended that the agency reconsiders the content of annual reviews.	Reg 29
2) The inspector would recommend that the agency pursues obtaining foster placement agreements from placing authorities. Where this is not achieved, an in-house agreement, which follows the Schedule, should be put in place with agreement from the placing social worker.	Reg 34.3 Schedule 6 NMS 16.7
3) It is recommended that the agency decision maker and panel chair meet to discuss panel business, including the quality of assessments.	NMS 9 and Reg 26.2
4) It is important that when the management team have agreed a course of action that this is implemented in practice.	Reg. 8.1(b).
5) It is necessary to coordinate the reason for agreeing a recommendation at panel and for the reason to be recorded as required by regulation.	Reg 25.2

## Section five: Quality of care and safety for children placed

### Inspector`s findings:

'I know that they are friendly and they will help you with anything, every thing is good'. This is a comment made by one of the young people who completed the CSSIW questionnaire. Yet another said that the information provided in the children's guide was 'very useful and great for people that want to make a complaint'. All of the young people who responded said they were asked by their social worker or/and foster carer what they think about living in their placement. In response to is the placement right for you? One young person answered 'yes, like it, it's great'. The children also recorded the various activities they have enjoyed whilst living with their foster family. Such activities include; football, cricket, skateboarding, watching Sarah Jane adventures and other stuff, swimming and dancing and singing. Unfortunately the views of young people had not been sought for the current quality of care review, a missed opportunity by the agency to promote the views of children and young people.

Through discussion with social workers and through reading of children's case files, it was evident that the agency is committed to promoting and safeguarding the welfare of the children and young people in its care. Case records showed clear evidence that the agency is proactive in promoting the children's health and education and in facilitating and supporting contact between the children and their families. The details of each child's education are recorded in the SAF, which demonstrated that there had been minimal exclusions and every child in placement at the time of preparing the SAF was in full time education. Several children have been entered for GCSE and one young person was in a college placement. Young people are supported in their placements by sessional staff who are managed by the therapeutic social workers. Support or activity plans are identified for the children by the therapeutic social worker, the foster carer and the child's social worker and these can be facilitated by the sessional staff. The agency is commended for achieving such educational activity for the children in placement.

Foster carers recorded in their returned questionnaires, that they were provided with enough information prior to the placement of a child, and that their views had been sought on the appropriateness of the placement. They also recorded that they were provided with support in relation to reviews, child health and behaviour management. One respondent had recorded that poor provision was available if a child was not attending school, and an issue in relation to contact arrangements.

There were 18 child protection concerns raised in relation to children placed with the fostering agency since the last inspection. A review of the carer's suitability had occurred in 1 case. Many of the incidents relate to the inappropriate and vulnerable behaviour of young people, or allegations against family members. There were no notifications to the Secretary of State under the Protection of Children Act 1999.

There were 66 notifications made to the CSSIW under Regulation 43. 18 related to child protection, 6 related to accident/injury or illness and 42 related to contact with the police.

There had been no complaints received from children or young people over the past year.

**Requirements made since the last inspection report which have been met:**

<b>Action required</b>	<b>When completed</b>	<b>Regulation number</b>

**Requirements which remain outstanding:**

<b>Action required (previous outstanding requirements)</b>	<b>Original timescale for completion</b>	<b>Regulation number</b>

**New requirements from this inspection:**

<b>Action required</b>	<b>Timescale for completion</b>	<b>Regulation number</b>

<b>Good practice recommendations:</b>	<b>NMS or other source</b>

**Section six: Placement of children parts v & vi of the regulations**

**N.B.** Use of this section of the report will apply primarily to inspections of local authority fostering services and the duties and responsibilities covered in Parts 5 and 6 of the Fostering Services (Wales) Regulations 2003 only. It may need to be used for inspections of independent agencies where a local authority delegates certain duties to them under Regulation 40.

<b>Inspector`s findings:</b>
The contractual arrangements for the placement of children by local authorities were observed in the written and signed contracts agreed between the agency and local authority. The case files that were assessed contained these agreements.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source

**Section seven: Records**

**Inspector`s findings:**

A selection of the staff personnel files, the case records of children accommodated and their foster carers were reviewed at this inspection. There was evidence of good standards in recordings, in file content and of file audits.

Children`s files contained care plans, evidence of plans being reviewed within the legal timescales and of statutory visits taking place. The case files contained good running records of all the contacts made with the child and the foster carers. There was evidence that the children`s medical histories were collated and known, and that they were registered with a medical practice. Case records were up to date, and were well structured and orderly.

In foster carer`s files there was application and assessment information, health and safety checklists and safe caring agreements. Chronologies of placements were on file as were up to date records of visits made by supervising social workers to foster carers. Minutes of the relevant extracts of panel meetings were on file, as were letters confirming the decision of their approval. The files also contained foster carer agreements, foster placement agreements are discussed in section four of this report. Annual reviews were seen where these had been completed. Audits were seen to have taken place on the case files that were viewed, confirming continued attention to this element of monitoring.

The personnel files of members of staff contained the information required to ensure fitness of worker as defined by the regulations.

All of the case files of children and foster carers are held in a secure cabinets in a lockable room within the fostering agency`s office accommodation. It was confirmed in the SAF that foster carers are provided with lockable cabinets to store all information relevant to the child in placement

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source

**Section eight: Short term placements**

<b>Inspector`s findings:</b>
Respite care arrangements were not assessed at this inspection.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source

**Section nine: Family and friends as carers****Inspector`s findings:**

Not applicable to this service.

**Requirements made since the last inspection report which have been met:**

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

**New requirements from this inspection:**

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source