

Highland Council Fostering Service Fostering Service

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Service provided by:
Highland Council

Service provider number:
SP2003001693

Care service number:
CS2004082042

About the service

Highland Council Fostering Service has been registered with the Care Inspectorate since the Care Inspectorate was formed in 2011.

Highland Council (Health and Social Care, Children's Service) provides a fostering and family placement service for children and young people from birth to 18 years and their families, who are assessed as in need of this. The agency recruits and supports carer families throughout the Highland area to provide a range of fostering placements to children including, permanent, long-term, interim and short break.

During 2016, the service recruited 21 new fostering families, this number includes adopters who were dual registered as foster carers to facilitate children moving to stay with them. 16 fostering families stopped fostering for various reasons including that the adoption had been granted, meaning there was a net increase in fostering capacity. Demand for the service remains high and as at 31 December 2016 a total of 144 foster carers were looking after 163 children and young people.

What people told us

We met with three foster carers in their homes, spoke with four foster carers on the telephone and had email communication with 16 fostering families. We attended a training event for foster carers with a further seven foster carers. We spoke with one care experienced young person and a birth parent.

Generally people were positive about the quality of the service they received. Foster carers told us that the quality of the preparation training was good and they felt prepared for the fostering task. Information about children's needs was usually available in advance supporting the foster carer to make decisions about their capacity to meet those needs. Ongoing training and support was reported to be of a reasonably good quality although some carers reported that training could be repetitive, difficult to access and not progressive.

Foster carers told us the geography of Highland meant that at times it was difficult for children and young people to access services and had an impact on children getting a service from their social workers leading to delays in making long term decisions about children's futures.

Changes and reductions in staffing have had an impact and foster carers told us that staff worked extremely well in often very difficult economic climates.

Foster carers told us:

"We are well supported...our children are well assessed and placed according to their needs as far as is possible."

"We have an amazing relationship with our social worker.....We have been affected by the workload of our foster children's team, which has sometimes led to delays in responses and inadequate support for the child"

We spoke with one birth parent who was happy with the quality of care her child received.

We spoke with one care experienced young person who told us how Highland was listening to young people at all levels within the council.

Self assessment

The service had not been asked to complete a self assessment in advance of the inspection. We looked at the annual report and spoke with the management team about the agency. This demonstrated their priorities for development and how they were monitoring the quality of the provision within the agency.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

What the service does well

The agency took steps through assessment and training to ensure people who used the service enjoyed safe and supportive care. There was a plan to introduce safer caring policies individualised for each child and young person which would formalise how each fostering situation supported safe and nurturing care.

We saw that children's health needs were met through effective initial assessment, access to primary health care services and ongoing foster carer training in a range of health matters including sexual health. A system to access Child and Adolescent Mental Health services for looked after children meant that children and/or their carers could be seen timeously and signposted to receive appropriate support.

Foster carers told us about their children's achievements and we saw foster carers advocating appropriately for children within the education system. Generally we saw good examples of positive outcomes for children being looked after in foster care including weight management, increased physical activity and improved self-esteem. We discussed different ways the agency might consider mapping outcomes for children and young people to indicate how the service was improving their lives.

Foster carers felt supported by the agency individually through the good relationships they experienced with their social worker. They mostly received good quality information about the children they were being asked to look after and were supported to make decisions about their capacity to meet children's needs. We discussed different approaches the agency could take to capture richer information about how foster carers were learning and developing their skills.

Some children enjoyed positive relationships with their social worker and looked to their social worker and foster carer to advocate on their behalf.

Newsletters kept foster carers and children and young people up to date about what was happening in the service and opportunities to contribute to wider debates. Likewise the establishment of a Champions Board supported young people to have a voice at all levels of the local authority.

The service made good use of management systems to monitor the quality of work within the service, for example in terms of tracking carer reviews. Team meetings provided a very good opportunity to focus on what was going well and to identify key issues. In addition, the fostering panel with a limited independent focus and a well defined agency decision maker role, monitored the work of the service and provided appropriate challenge.

Staff generally felt well supported and were able to contribute to the overall improvement of the service.

What the service could do better

The system for risk assessing placements could be improved. We discussed the need to ensure that the vulnerabilities as well as the strengths of each placement should be well recorded with an appropriate plan in place. Risk assessments in relation to animals should be updated regularly to reflect the changing needs and circumstances of pets and any implications for children living in the household. **(See recommendation 1)**

The large geographical area covered by the fostering agency, meant that children were often placed at some distance to their school at the point of being accommodated. For many children and young people this meant a change of school taking them out of their local communities and away from family and friends. The agency need to assess and target recruitment of foster carers in the areas with the highest demand and advocate strongly for children to ensure timely planning to reduce the pressure on fostering placements.

Foster carers did not have access to up to date policies and procedures governing fostering in Highland. The fostering handbook which would contain this information had not yet been updated or circulated to foster carers. Some foster carers did not know the procedure for making complaints, the role of the Care Inspectorate in investigating complaints or how to access advocacy services for children and young people. **(See recommendation 2)**

There had been significant staff turnover in 2016 and although the agency stated that there had been more stability in 2017, we noted that the reduction in staff and staff changes had meant that some foster care reviews were outwith statutory timescales. The agency did have an overview of this and plan to address the deficits.

The agency should review how the panel operate in relation to opportunities for foster carers to attend if they wish to do so, the timing of review reports being considered by the fostering panel and the use of wide age ranges which are contrary to best practice. **(See Recommendation 3)**

The opportunities for foster carers to discuss issues as a group and have matters taken forward were limited. We were also unclear about how issues raised as part of reviews were taken forward. Some foster carers told us they would welcome more support from foster carers and had suggested the service develop a more formal 'buddy' system to support new and existing carers.

The depletion of the management team (from 4 team managers to 2) had resulted in a need for further clarity in roles in terms of managing the day-to-day work of the service and considering the strategic development of the agency overall.

The service could produce a discrete service development plan detailing their priorities, how these would be addressed, by whom and by when. This should fit in with the overall priorities of the Children Services Plan for Highland Council.

In conclusion, although some areas of practice were of a very good standard, there were key areas where outcomes for children, young people and foster carers were compromised to some extent and the service needed to take action to improve these.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. 1. The service should review their process of risk management to ensure that plans are formalised and well recorded.

National Care Standards, Foster care and family placement services, Standard 2: Promoting Good Quality Care

2. The service should ensure that foster carers have access to up to date information about the policies and procedures governing the fostering agency.

National Care Standards, Foster care and family placement services, Standard 13 Management and Staffing

3. The service should review panel arrangements to ensure the following:

- foster carers are aware of their right to attend, review reports being considered by the panel have been completed and signed off timeously.

- The use of age ranges should be based on best practice guidance. Namely that the practice of using wide age ranges routinely with or without stated preferences should be discontinued.

National Care Standards, Foster care and family placement services, Standard 13 Management and Staffing

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Type	Gradings
4 Mar 2016	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 6 - Excellent
2 Mar 2015	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
7 Mar 2014	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
11 Jan 2013	Announced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
14 Oct 2010	Announced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership Not assessed
16 Dec 2009	Announced	Care and support 6 - Excellent Environment Not assessed Staffing 6 - Excellent Management and leadership 6 - Excellent
2 Oct 2008	Announced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good

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