

Inspection Report on

Carmarthenshire County Council Fostering Agency

First Floor Ty Elwyn Town Hall Square Llanelli SA15 3AP

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

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About Carmarthenshire County Council Fostering Agency

Type of care provided	Local Authority Fostering Service
Registered Provider	Carmarthenshire County Council
Language of the service	Both
Previous Care Inspectorate Wales inspection	1 March 2016
Does this service promote Welsh language and culture?	This is a service that provides an 'Active Offer' of the Welsh language. It provides a service that anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Foster Wales Carmarthenshire comprises one team split into two sections. One has responsibility for recruitment and assessment and pre-approval training, and the other to provide support for approved carers. There is a registered manager who is supported by an assistant team manager for each section. Foster carers are assessed and approved to look after children providing emergency, respite, short and long- term care. Assessments of connected carers are carried out by social workers in the locality teams and these transfer to the fostering team post-approval. The service supports a number of parent and child and post eighteen 'When I'm Ready' arrangements.

Children receive care from foster carers who are supported by the local authority service provider to meet their well-being outcomes. Their education, physical and emotional health needs are promoted, and they are encouraged to have fun and enjoy a range of interests and activities.

Prior to inspection, the local authority provider had identified a number of areas of the service which require further development. An external consultant was commissioned to undertake a comprehensive review of the service, and this was nearing completion. This inspection has identified the need for improvements with regards to the recruitment and retention of sufficient numbers of foster carers, approval and matching processes, management capacity, the operation of the service in line with policies and procedures and quality assurance processes.

Well-being

Children supported by Foster Wales Carmarthenshire carers are listened to and have opportunities to express their views. They are formally consulted as part of foster carer annual reviews and in the main supervising social workers see them at least every three months in addition to statutory visits from their allocated social workers. Independent Reviewing officers speak to children before their Looked After Children reviews which they are encouraged to attend and participate in. Children know about advocacy services and how to access them. Although there is an intention to carry out a large-scale consultation event in the near future, there are currently no forums or methods for consulting children on a structured, regular or group basis in order that their feedback can inform service development and improvement.

Children are supported to be healthy. Foster carers promote healthy lifestyles and structured routines to encourage good personal hygiene practices. Children are registered with primary health care agencies. They attend regular appointments as necessary, and access more specialist services if needed. The Local Authority provider has established an Emotional Health Team (EHT) made up of a small team of education staff, psychologists and therapeutic practitioners who provide support, consultation and training to foster carers, supervising social workers and children's social workers. This service is a real asset to the department and has a significant and positive impact in terms of helping foster carers make sense of children's life experiences and providing advice, guidance and strategies to support relationships, placement stability and ultimately improve children's life chances.

Children are supported to attend education and reach their potential. Their foster carers value the importance of education, promote attendance and advocate on their behalf during education meetings. Foster carers and staff told us about some children who are not accessing suitable provisions or are on restricted timetables which impacts children's outcomes and is placing additional pressure on fostering households. Additional support is often provided by a support worker from the fostering team; sometimes in the classroom in an effort to maintain the provision. Supervising social workers and children's social workers can be involved in transporting children to and from school in order to support the provision. There is a relatively high use of taxis to provide school transport for sometimes very young children. This is partly cultural but is also due to a shortage of foster carers which does not allow for school transport to be considered as a crucial factor when matching children to foster carers.

Children do things that matter to them and have fun. Relationships with their families is promoted as long as this is consistent with their well-being and efforts are made to keep siblings together wherever possible. Files showed children go to clubs and extra curricula activities such as swimming lessons, sports clubs and dance classes. They enjoy trips to parks and beaches and go on holidays with their foster carers. Each fostering household is provided with free National Trust and Cadw passes. The fostering service has also organised activities for children and carers to coincide with school holidays. The annual

awards event had gone down particularly well with a number of children recognised for the progress they have made during the year and a range of activities had been organised so there was something for everyone to enjoy.

Care and Support

Multi-disciplinary accommodation panels consider planned referrals of children to the service. The matching of children's care and support needs with foster carers is undertaken by placement officers in consultation with supervising social workers. Vacancies are limited and exemptions to place children with foster carers outside of their approval are commonplace. There is no clear process or structure for approving and reviewing these arrangements. While foster carers in the main said they are not pressurised into looking after children in these circumstances, their willingness means children move into foster placements that are not suitable to meet their needs. There is no evidence of compatibility assessments, and the result is increased pressure on foster carers to meet the often complex needs of all the children placed with them. Once living in these foster homes, children can still be living there months later making placement disruption more likely and in the most serious case we saw, a court care plan was not being followed.

Preparation for children's transitions to and between foster carers is inconsistent. Foster carer feedback about communication prior to moves was mixed, with some saying key information such as GP details isn't always available, particularly when children come to live with them in emergency situations. Sometimes children can have respite breaks with their new foster carers beforehand. Carers provide a 'welcome to my family' booklet (although these are not always up to date) and every effort is made to ensure children feel welcome and part of the family. Placement support meetings are held which are particularly useful when it seems as if a placement is becoming unstable; these can take place as often as weekly if necessary. We noted that children having respite with other carers is routine within the service. These arrangements are not always suitable, and the amount of respite care children experience should be considered as part of the service's quality assurance data.

Foster carers are motivated, dedicated and committed to ensuring children achieve good outcomes and thrive in their care. They have access to training opportunities via face to face or online learning but because there is no training/development policy there are no set expectations in terms of what is considered a suitable amount per year and what is mandatory. Foster carers told us they were happy with the amount and nature of training, but records showed great variation in the amount of training they had undertaken with some apparently having completed very little for a number of years. The system to record foster carer's learning and development needs to be strengthened to include all forms of learning the service provider considers acceptable evidence of foster carers' continued development.

Foster carers were very complimentary of the support provided by their supervising social workers and the emotional health team. They are mostly visited monthly for supervision and to discuss children's progress. They find the out of hours duty system is effective. Supervising social workers have developed strong relationships with foster carers with a number of examples of much appreciated support when needed due to carers' personal circumstances as well as when a child's placement is at risk of disruption. Foster carers are linked to foster carer mentors who are experienced foster carers offering informal support through regularly contacting their mentees and organising support groups.

Children are safeguarded from harm and abuse. They have individual safer care plans and safety plans for specific issues which may present particular risks. Appropriate actions are taken in response to actual or potential safeguarding issues and matters referred to social workers and safeguarding agencies as required. It is difficult to establish what safeguarding training foster carers and staff have undertaken and the frequency this should be refreshed because there is no policy or guidance, and training records may not be accurate. We noted there is safeguarding training on the current year's training schedule as well as supplementary training on specific issues such as 'Caring for Children and Young People who have Experienced Sexual Abuse in Family Contexts' and child sexual abuse awareness.

Environment

The fostering team's office environment is suitable for its purpose. There are adequate kitchen and toilet facilities. It is clean and free of obstructions and there are appropriate health and safety systems in place as regards electrical equipment and fire safety. The fire alarm is tested weekly and there are sufficient fire marshals. A first aid box is available and was fully stocked at inspection. There are a number of staff members in the building who are first aid trained and this will soon be increased.

The office has six desks designated for fostering team staff and this is considered enough space due to a hybrid working approach and staff having their own work mobile phones and laptops. The manager and assistant managers are office based.

The building is secure and is not accessed by members of the public or foster carers. There is a visitor logbook in the reception area and staff at reception ensure visitors provide identification. Visitors are also given lanyards with temporary badges to access the building where necessary. Records are kept securely and are mostly electronic. Any paper copies of documents are kept in locked cabinets.

Foster carers' homes are assessed when they are recruited to determine their suitability in meeting children's needs. Supervising social workers visit fostering homes during announced and unannounced visits, which provide opportunities to monitor the environment. Childrens bedrooms are routinely seen as part of visits. Standards of health and safety in foster carers' homes are considered as part of the formal annual review process, together with pet assessments which consider risks. Children have a say in how they want their bedrooms to be decorated and personalise these, to their taste. The suitability of the environment children live in, is further monitored during reviews of their care and support plan.

Leadership and Management

Information about the service is available but needs to be developed and updated. There is a booklet for children which provides some useful information but is not specifically related to fostering, requires updating and consideration should be given to the format to ensure it is accessible to younger children who use the service. The service's Statement of Purpose provides information about the service's aims and objectives, roles and responsibilities and standards of care. This requires updating to ensure information is in line with regulations and reflects changes to the service provision. The service does not have the required policies and procedures in place to support managers and staff to achieve the aims of the service and support children to achieve their personal outcomes.

The service provider has systems in place regarding the recruitment and approval of foster carers, but these were not always effectively implemented to ensure children's well-being needs can be met. The quality of assessments varied, with the mainstream foster carer assessments we reviewed being of good quality and containing all the required information, analysis and checks to ensure their suitability to care for children. Connected carer assessments were not adequately quality assured before being presented to the fostering panel leading to 'provisional approvals' pending receipt of further information and satisfactory checks. This results in delays in terms of permanency planning for children and additional demands placed on panel members. We identified this as an area for improvement at our last inspection. We also highlighted that assessments for connected carers should be completed to the same standard as mainstream carers, but this has also not been progressed. Foster carer assessments or updates such as for significant changes to approvals were not always on their electronic records.

The fostering panel ensures assessments are scrutinised by panel members to confirm foster carers are safe, suitably fit, and competent to undertake the role. Prospective foster carers attend panel and receive confirmation of their approval status. However, panel records are not sufficiently detailed to evidence careful consideration of issues and explain the rationale for decisions. There were a number of examples of inaccuracies, particularly as regards approval statuses, and in one case, foster carers had been operating outside their approval status for a number of years. In general, there was little evidence of robust independent scrutiny of panel decisions. The relatively new panel chair is diligent and keen to develop the panel to be more open, diverse and evidence based in its approach. There are vacancies in the panel membership and the absence of a panel advisor is in the process of being addressed. Although panel has remained quorate this is putting pressure on existing members. Opportunities for panel members to attend training needs to be progressed.

There is a well-established core team of staff who are experienced, competent, knowledgeable and support the overall function of the fostering team in relation to their specific role and responsibilities. However, the responsibilities of the manager and the remit of the team which also includes supporting the carers of children subject to Special Guardianship Orders, are too broad for them to manage, particularly in the long-term absence of an assistant team manager.

Staff recruitment files show there are robust processes in place to ensure the suitability of staff. Staff in the main receive regular supervision, and annual appraisals have been completed. Team meetings take place regularly and provide a forum to share information and consider current issues. Staff said they are part of a committed, tight team who worked well together. They told us they feel well supported by their managers and the senior management team who are accessible and responsive.

The arrangements for the oversight of the quality of the service and its compliance with regulations has been lacking. There are very limited processes and structures for reviewing, developing and improving the service. Quality of care reports have not been completed as required for a number of years. There has been a recent restructure of the senior management team within the Children's Services department and a new senior manager with responsibility for the fostering service has been appointed who will shortly take up post. In the absence of a responsible senior manager, the fostering service has been directly overseen by the Head of Service who has a thorough understanding of the issues, strengths and weaknesses of the service and has developed a plan to address shortfalls. The local authority provider has also committed substantial additional future finances to the fostering service as part of a Transformation programme.

TSummary of Non-Compliance		
Status What each means		
New	This non-compliance was identified at this inspection.	
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.	
Not Achieved	Compliance was tested at this inspection and was not achieved.	
Achieved	Compliance was tested at this inspection and was achieved.	

We expect those responsible in the local authority to take immediate steps to address and rectify any areas identified for improvement. These will be followed up at the next inspection.

Area(s) for Improvement		
Regulation	Summary	Status
3	The Local Authority service provider must have clear arrangements for the oversight and governance of the service in order to establish, develop and embed a culture which ensures that the best possible outcomes are achieved for children using the service and to meet the requirements of the Regulations.	New
5 (2)	The service statement of purpose must be kept up to date and reviewed at least annually. The information in the statement of purpose must be accurate and reflect the requirement of the Regulation.	New
6 (1) and (2)	Arrangements to monitor, review and improve the quality of service must be effective and include systems for internal audits to ensure compliance with service standards and Regulations.	New

	The arrangements must include seeking the views of those set out in the Regulations	
10 (1) and (2)	The service provider must put in place the policies and procedures required in the Regulations	New
10 (3)	Policies and procedures must reflect current guidance, be reviewed and kept up to date.	
12(2)	The guide to the fostering service must be dated and reviewed annually. It must be in a style, language and format accessible to all children and provided to them to support their understanding of the service provided.	New
37(1)	The service provider must maintain accurate records required for the protection of children and the effective running of the service.	New
39(1)	The service provider must prepare a complaints policy in an easy read format which is well publicised, readily available and accessible to children, foster carers, their families and staff.	New
46 (1) and (2)	The registered manager must make quarterly reports to the local authority provider on the adequacy of the resources available to provide the service in accordance with the requirements of Regulations	New
52(1) and (2)	A review of the quality of care provided must be undertaken as often as required but at least every six months.	New

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We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement		
Regulation	Summary	Status

5	the SoP is not up to date and accurate	New
6	The service provider has not implemented and maintained appropriate arrangements to monitor and review the quality of the service	New
10	The service provider has not put the required policies and procedures in place	New
12	the service provider has not put in place a guide to the service which is current and accessible	New
39	The service provider has not put a complaints policy in place	New
37	The service provider has not maintained accurate records	New
46	The service provider has not established and maintained adequate quality assurance arrangements	New
52	The service provider has not established and maintained adequate quality assurance arrangements	New

Where we find the provider is not meeting the National Minimum Standards for Regulated Child Care but there is no immediate or significant risk for people using the service, we highlight these as Recommendations to Meet National Minimum Standards.

We expect the provider to take action to address these and we will follow these up at the next inspection.

National Minimum Standards		
Standard	Recommendation(s)	
	No NMS Recommendations were identified at this inspection	

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