



Inspection Report on

Vale of Glamorgan Fostering Service

Placements and Permanency Team

Docks Office

Subway Road

Barry

CF63 4RT

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Description of the service

The Vale of Glamorgan local authority fostering service is based in the Docks Office in Barry and provides a range of placements including long term, short term, respite and placements with friends and family (kinship care). The fostering service recruits, assesses, trains, approves and supports foster carers. At this inspection, the team was being managed on a temporary basis by an agency manager. A permanent team manager had recently been appointed, and arrangements had been made for them to be in post by June 2018. A nominated individual is in place to represent the authority.

Information provided by the local authority informed that at the time of the inspection there were, 74 children were living with 54 local authority foster carers and 61 children were living with 54 connected / kinship foster carers.

Summary of our findings

1. Overall assessment

Most children experience nurturing, stable placements with foster carers who understand their needs and support them to achieve positive outcomes. Children are able to express their views and exercise choice, though would benefit from increased opportunities to express their views about the fostering service and to participate in formal decision-making about their care.

The implementation of the revised Public Law Outline has placed an expectation upon the local authority to conclude care applications with the 26 week timescale. There has also been an increase in the number of looked after children and an increasing demand for placements, particularly for children with complex needs. Consequently, the fostering service has been placed under pressure, with a greater focus on connected persons assessments. This has impacted on recruitment activity, and some children have been inappropriately placed with foster carers who are unable to fully meet their needs. Quality assurance and governance measures are not consistently effective in ensuring service quality and improvement. However, the service is taking action to address these issues, with regional recruitment initiatives underway, additional resources to be made available to strengthen service capacity and wider local authority action being undertaken in respect of risk management and quality assurance. The authority needs to focus on these improvements to ensure that children's outcomes are improved through better matching at point of placement to avoid placement breakdowns and ensuring that carers have the skills and expertise to meet the needs of the children they are caring for.

2. Improvements

- The service is working with its neighbouring local authority to improve service delivery through regional collaboration.
- The appointment of a permanent team manager and recent decision-making to increase staffing resources will strengthen the operation of the service.
- Developments are in place to provide improved therapeutic support within the fostering service.

3. Requirements and recommendations

Section four of this report sets out our recommendations to improve the service and the areas where the registered provider is not meeting legal requirements:

These areas relate to

- Improving outcomes for children through the development of a placement strategy to meet the wide range and needs of children requiring placements.
- Foster carers' training.
- Ensure that all statutory checks are completed as required.
- Improve the quality assurance and governance arrangements.
- The annual review of approval for foster carers.
- Risk assessments.
- Management arrangements.
- Documentation and record-keeping.
- Foster carer supervision, their support and on going training.
- Children's participation in their care decisions.
- The foster carer handbook.
- Fostering panel.
- The Welsh language.

1. Well-being

Summary

In the main, children experience positive relationships with foster carers who understand their needs and aim to provide a nurturing, secure and stable home environment. Children's overall well-being is promoted in partnership with education and health services. However, the service needs to ensure that relevant information is always provided promptly to foster carers to enable them to keep children safe.

Children are encouraged to express their views and exercise choice in their day to day lives, though would benefit from greater opportunities to participate in formal care planning processes and consultations regarding service delivery and development.

Our findings

Most children experience secure placements with foster carers who provide them with a nurturing, stable home environment, within which they are able to achieve positive outcomes. The service was seen to benefit from a committed cohort of experienced foster carers, who spoke to us with warmth and affection about the children in their care and were evidently proud of their progress. Foster carers recognised that, for some children, a small step forward could be a significant achievement, to be celebrated. Delegated authority arrangements were in place which helped to promote children's sense of belonging within their foster placement. We saw evidence of foster carers caring for and nurturing the children they were looking after. Within sampled documents, we saw the following comments:

From foster carers

"YY (child) needs someone to love and care for (them) and to be there for (them)"

From children's social workers

"XX provides a warm and caring environment"

"YY (child) is made to feel part of the family"

"XX provides YY (child) with a well balanced diet and physical activities. YY has lost weight and is happier, more confident"

"XX has empathy and understands what YY (child) has been through"

"XX attends LAC reviews and supports appropriate family contact"

From looked after children

"happy, safe, listened to"

"XX makes me feel safe and wanted"

"disagreements are talked about, can talk to XX"

"easy to talk to about any problems"

From annual review documentation we also saw the following comments:

“XX has worked tirelessly to ensure that YY (child) continues to have their educational needs met”

“Evidence of health and educational needs promoted; good use of strategies to manage behaviours; evidence of advocating for children and liaising with relevant professionals”

“XX has dealt with difficult and complex behaviours with empathy and an excellent understanding of trauma”

We therefore consider children to be experiencing warm, nurturing environments which provide them with the opportunity to develop attachments and create a sense of belonging.

Children and foster carers receive additional support, if needed, through the provision of a specialist therapeutic service. It was recognised by managers and staff within the fostering service that some children required additional support to maintain placement stability and to achieve positive outcomes. We were advised that arrangements had therefore been made for children and foster carers to access support from a clinical psychologist and two support workers. Sampled records showed that direct work had been undertaken with children and that foster carers had benefitted from consultation sessions. Foster carers who had accessed this service welcomed the guidance provided and spoke very positively about its effectiveness, as did fostering team staff who described the service as *“amazing”* and *“invaluable”*. We were advised that the local authority had sought to build on the success of the existing provision, by working in collaboration with the local health board, to seek additional resources to extend the psychological resources already in place. Although not yet operational, the new service would be aiming to undertake further direct work with children and offer a consultation service to foster carers and professionals working with the child in order to promote placement stability and positive outcomes for children. Children’s emotional wellbeing is enhanced through the provision of a specialist therapeutic service.

Children are encouraged and supported to achieve their educational potential, taking into account their progress and attainment from the beginning of their placement. We saw examples, in documentation viewed, of foster carers supporting children on a day to day basis, by transporting children to school, encouraging them to complete homework tasks, attending parents’ evenings and school events, and strongly advocating on their behalf when necessary. Post placement improvements in children’s educational achievements were reported by school staff regarding attendance levels, and learning and developmental progress e.g. *“XX has made a significant improvement in learning to listen.”*

Children and foster carers were seen to be active contributors to personal education plans (PEPs), and documents included a one page “jargon-free” profile which included children’s strengths, what mattered to them and how they could best be supported to achieve their educational goals. The local authority’s Looked After Children Education team (LACE) had provided training for foster carers during 2017, to help them to understand how children could meet their Personal Education Plan objectives and educational targets. Comments from foster carers’ evaluations were positive, with foster carers expressing increased levels

of knowledge and confidence in relation to their contact with school staff and their ability to support children's education.

Performance data provided at inspection showed that the majority of children living with foster carers were making good educational progress within school. In January 2018, approximately 75% of children were seen to be "on target" (or exceeding targets) regarding their educational attainment, though variations within these figures showed that attainment declined overall for older children, especially those not attending mainstream schools. We were advised by the LAC Education Co-ordinator that, at the time of the inspection, four children living with foster carers were receiving less than 25 hours education per week though work was being undertaken to develop "bespoke" arrangements. Within sampled documentation, foster carers were seen to be actively supporting children who were not attending fulltime education e.g. by encouraging them to complete any school work sent home and by arranging alternative activities to engage their interest on days they were not attending school. Children experience a sense of achievement in fulfilling their educational potential and their attainment and progress is encouraged and supported.

Foster carers generally have the information they require, in order to keep children safe, though on occasion, there are delays in providing relevant information. Records showed that, individual placement agreements had been completed, which provided foster carers with details of the children being cared for and included their needs, placement objectives and delegated authority arrangements. Whilst we were informed by carers that information could be "patchy" when children were placed on an emergency basis, these documents were generally seen to have been completed in a timely manner. We also saw evidence within sampled records of risk assessments and safe care agreements for individual children having been completed. However, we noted some delays in the completion of risk assessments, and could not be assured therefore that risks were always being effectively considered and managed by the service. Overall, foster carers have the information required to understand and meet the needs of children; however, further improvement is required to ensure that identified risks are communicated to foster carers with a minimum of delay.

Children are encouraged to speak out and are listened to. They have access to an advocate with an active offer being made. However, their participation in care planning and consultation processes is variable. We were provided with a copy of the children's guide to the fostering service. This provided information about the service, the roles of different professionals including a brief account of the local authority's advocacy arrangement and the complaints process. The guide also sign posted children to different services that may be of use to them. It would however, benefit from being produced in additional formats, to take account of different age groups, range of needs including disability and language. It was unclear from our discussions with children and foster carers whether children were routinely being provided with the guide. The local authority's self-assessment stated that children received an "active offer" of advocacy support. The national youth advocacy service (NYAS) had been commissioned regionally to provide an advocacy service and we

were informed by a representative of the service that the service was generally provided in response to particular issues needing to be resolved. There was seen to be some disparity between social work teams regarding the number of referrals made and it had therefore been agreed that training would be provided to all new staff and that a monthly drop in session would be offered. It was also planned to introduce a system whereby an initial referral to NYAS would be made for all children becoming looked after, after which children could then choose to opt out. We were advised that Welsh speaking advocates were available to work with children; also that the service had expertise in relation to disability matters. In our discussions with children, they appeared a little confused about the role of an advocate and how to access this service. How this information is provided, may therefore benefit from review.

We saw that children were able to express their views and to exercise choice on a day to day basis within their foster placements, supported by the delegated authority arrangements in place. Within sampled records we saw comments made by children about their carers being “*easy to talk to*”, about feeling comfortable to share their worries and about disagreements being “*talked through*”. We also saw that children had opportunities to speak to their social workers and to supervising social workers during placement visits. More formally, they were able to share their views about being looked after within the foster carers’ annual review process.

Children’s care and support plans were seen to be regularly reviewed within their LAC review meetings though children’s attendance was seen to be variable. (We were told by one child that they had not wanted to attend as the meeting was being held during the school day). The extent to which children living in foster placements contributed to their care and support plans and decisions about their care was not clear from documentation viewed. It was, however, recognised by managers of the service that the participation of children within care planning and in relation to the broader aspects of service development was a work in progress. Overall, children are able to express their views, with support if necessary, and are listened to. However, their participation in care planning and consultation processes would benefit from being strengthened.

2. Care and Support

Summary

The recruitment and assessment of foster carers is generally robust, and most children placed with foster carers subsequently experience care and support within stable placements. However, matching documentation does not always evidence sound decision-making and some children are inappropriately placed with foster carers who are unable to fully meet their needs. Foster carers are often experienced, and are motivated to make a positive difference to children's lives; however, they require consistent, timely supervision, support and review. They also need to be able to maximise their learning and development to further improve outcomes for children.

Our findings

The recruitment and assessment process for both mainstream and kinship carers is generally thorough. We saw that the service had experienced challenges over the previous two years in relation to the recruitment of mainstream carers. The service had seen a sharp increase in the number of court directed assessments of connected persons which had placed significant pressure on service capacity. Alongside these assessments, the service was also seeing an increase in the numbers of looked after children needing to be placed with mainstream carers. Foster carer recruitment had been recognised as a priority for the service and we saw that the local authority had taken steps to collaborate with its neighbouring authority (Cardiff) to develop a regional service development plan, to include the production of a joint fostering strategy and the implementation of a regional recruitment strategy.

We saw that prospective mainstream foster carers were invited to attend "choosing to foster" training prior to making an application to foster. The training was delivered by the staff team, with the involvement of an experienced foster carer and aimed to provide a realistic portrayal of fostering. The assessment process for both prospective mainstream and kinship foster carers was seen to be generally robust, with the required checks undertaken and assessment reports well-presented and providing a good level of detail and evidence based analysis. We did see that on occasion, to accommodate court timescales, reports had been sent to the fostering panel prior to all checks being returned, with approval being agreed by fostering panel pending the satisfactory return of statutory checks. This documentation was, however, seen to have been received prior to approval being agreed by the agency decision maker. We also noted that in several foster carer households, only one partner within a relationship had been approved to foster, with the other partner therefore only subject to the same disclosure and barring checks, as any another adult household member. This practice was seen to relate to both mainstream and kinship foster carers. However, we found that in general, children's well-being is promoted by foster carers who have undergone a robust recruitment and assessment process. However, where only one partner is approved, the rationale for this decision should be clearly evidenced.

Most children experience care and support within stable placements. However, some children are not appropriately placed and matching documentation does not always evidence sound decision-making. We saw that a number of successful placements had been made by the service, with children remaining with their foster carers throughout their childhood and occasionally beyond, under “when I’m ready” arrangements. In discussion with foster carers, it was evident that a number of them had maintained contact with children they had previously fostered, and that they continued to be regarded as part of the family. We were advised by one foster carer that they regularly received visits from one of their previously looked after children who now brought their children “to see *their nana*” and that “*once they come, they stay part of the family*”. However, the increasingly complex needs of children together with increasing placement demands and low recruitment activity regarding mainstream carers, was seen to have impacted significantly on the availability of appropriate placements. Consequently, the needs of some children were not being fully met. We saw that a small number of children had been placed with foster carers on a temporary basis whilst waiting for alternative residential settings more suited to their needs. It was acknowledged by senior management that these children were inappropriately placed and placement and permanency panel minutes recorded the action being taken to source more appropriate placements. Nevertheless, some children had experienced several foster placement breakdowns during this period, resulting in further instability and exacerbating difficulties in developing positive attachments.

Written records of matching meetings did not fully evidence a robust matching process. Although placement referral information regarding the child’s needs was available for the matching meeting, matching documents did not record foster carers’ skills, experience and training, whether any additional support or training might be required, and if so, how this would be provided. We found no evidence that the meeting considered the impact of the new placement on children already living in the home and vice versa. Records did not evidence the appropriateness of the match nor the decision-making process. It was difficult to ascertain in records to what extent the actual matches made were not appropriate and to what extent matching information was just not well recorded.

We saw that some children had been placed with foster carers outside their terms of approval, and were advised that decisions to vary the terms of approval or to agree exemptions were made by the operations manager, pending the decision of fostering panel. However, we did not find this decision making process to be consistently evidenced within foster carer records. Overall, children are provided with care, support and stability when placed with foster carers who are able to fully meet their needs; however, children are, on occasion placed with foster carers who are unable to meet their needs. Matching documentation needs to clearly evidence matching and where shortfalls are identified, should provide details of the action taken to address these shortfalls.

Foster carers receive support and supervision; however, as the frequency of supervision is variable it is unclear whether foster carers are consistently provided with the level of guidance required to enable them to fully meet the needs of children being looked after. The service's statement of purpose stated that foster carers would be supervised "on a monthly basis at least, unless agreed with the carer". However, this was not evidenced in sampled records and foster carers advised us that the frequency of supervision varied, usually between four to eight weeks. We did not see evidence of alternative arrangements being made to ensure that foster carers received supervision when their supervising social workers were absent from work and, on one file we noted a six month gap between supervision sessions. We also noted that, the frequency was not always clear as some supervision records were undated. We saw examples within supervision records of good quality supervision being provided, with discussions about the progress being made by children, guidance offered and attention given to the welfare and learning needs of foster carers. However, where couples had been jointly approved, there did not appear to be any expectation that both carers would attend supervision sessions.

Foster carers spoke very positively about the support they received from the fostering team, particularly in times of crisis. Support was described as "*exceptional*", with examples provided of supervising social workers going the extra mile during weekends and evenings to ensure that foster carers were provided with the guidance and support they required in order to manage extremely difficult situations.

Additional support was provided to foster carers via monthly support group meetings. These were facilitated by an experienced foster carer whose advice was highly valued by foster carers, who told us that they were available "at the end of the phone" for both mainstream and kinship carers, as needed. We questioned this reliance on one foster carer in discussion with the team manager, as there appeared to be no clear boundaries around their role. It was evident from our discussions with foster carers that the majority of mainstream carers had a substantial number of years experience. In general, they had confidence in their ability and judgement, they felt they could seek advice from their support group facilitator and would not hesitate to make contact with their supervising social worker or the staff team, if they needed to do so. The effectiveness of support arrangements for kinship carers was less clear; the service recognised that their needs were sometimes different but efforts to establish a separate support group for kinship carers had not been wholly successful.

We saw that foster carers were supported by a knowledgeable and experienced staff team. Records confirmed that staff within the fostering team had been appropriately recruited and had a broad range of experience within children's services. Staff received regular supervision, and we saw evidence of case management discussions. We were advised by staff that they considered their caseloads to be manageable, and that they were well-supported by management. Supervision and support arrangements help foster carers to meet the needs of children and promote their overall well-being. However, we cannot be assured that the frequency of supervision and the additional support arrangements in place

provide all foster carers with the level of guidance and support required to enable them to fully meet the needs of children being looked after.

The service offers a broad range of training. However, foster carers' attendance is variable. The service's expectations of foster carers, regarding attendance at training lacks clarity. We saw that the training programme offered to foster carers provided a good range of training opportunities for both newly approved and experienced foster carers. Foster carers also spoke very positively about training which they had attended. However, analysis of training information showed significant variations between individual foster carers in relation to levels of training attended, with some foster carers having attended no training within the previous twelve months, and longer for some foster carers.

Neither the service's statement of purpose nor the foster carer's handbook was seen to provide specific guidance to foster carers with regard to attendance at training there appeared to be a lack of clarity, therefore, regarding the services expectations of foster carers. This was acknowledged by the team manager who advised that a common understanding was needed within the service regarding training requirements.

Clearly attendance at training was difficult to achieve for some foster carers; the majority of courses were held on weekdays so not convenient for some foster carers. We also saw that courses had been cancelled due to low booking numbers. We did see that online courses were on offer and we were advised that 1:1 training had also occasionally been undertaken with foster carers as an "add-on" to supervision sessions. It was felt by staff that the online training needed to be promoted further, however, and we were advised by the team manager that access to this training would benefit from being simplified to encourage take-up of courses.

The learning and development needs of foster carers were considered within their annual reviews. However, planned training was not seen to have been consistently attended, particularly, in situations where couples had been jointly approved. Foster carers would benefit from greater clarity regarding the service's expectations of their attendance at training, as well as increased training opportunities. Outcomes for children could be further improved by foster carers maximising their learning and development through accessing training.

3. Leadership and Management

Summary

The service generally operates in accordance with its statement of purpose, which enables most children to experience stable placements and positive outcomes. However, we cannot be fully assured that children are always adequately safeguarded by the service's procedures and working practices. Quality assurance and governance measures are not consistently effective in ensuring service quality and improvement.

Foster carers understand their role and responsibilities regarding the service though foster carer agreements should be promptly updated following changes in approval status.

Our findings

Children, families and foster carers experience a service which generally operates in accordance with its statement of purpose. However, additional service documentation needs to be updated and made available. The service's statement of purpose was updated in January 2018. The document outlined the remit, aim and objectives of the service, together with information about the management and staff team and the service provided. Neither the statement of purpose nor the children's guide, however, referred to the service's position regarding the active offer of the Welsh language. In general, we found that the statement of purpose provided an accurate account of the day to day operation of the service, though we saw areas where day to day practice did not consistently reflect service objectives (as outlined in this report). However, the foster carers' handbook did not provide up to date information and guidance. Policy information within the handbook was dated 2012 and did not reflect subsequent changes in legislation and statutory guidance. In general, children's experience of the fostering service is as described in the statement of purpose, and their well-being is promoted. However, information about the Welsh language offer should be made available, together with up to date guidance in the form of a foster carers' handbook.

Foster carers generally have an understanding of their commitments in respect of the fostering service. We saw that foster carer agreements had been completed following approval, with evidence of some foster carer agreements being subsequently updated. However, we could not be certain from records seen, whether foster carer agreements were consistently and promptly updated following changes in foster carers' terms of approval. Foster carers understand their commitments to the fostering service. However, action should be taken to ensure that foster care agreements consistently reflect the current terms of approval of all foster carers.

Some foster carers do not have up to date disclosure and barring service (DBS) certificates. We were advised by the operations manager that, at the time of the inspection, there were

eight foster carers whose certificates had expired. Action had been taken to undertake these checks, and as an interim measure, risk assessments and safe care agreements had been completed in respect of children living with those carers. However, we could not fully confirm that the action had been fully implemented as we did see an example of foster carers signing a written agreement which stated that no children should be placed with them until new DBS certificates had been returned. However, we saw that a child had been placed with the foster carers the following day. Children are not always appropriately safeguarded as checks to determine whether foster carers remain suitable to care for children are not being undertaken within required timescales.

Records relating to safeguarding matters do not always fully evidence that they have been appropriately managed to demonstrate children's safety. We did not find records relating to one safeguarding matter to sufficiently evidence robust decision-making in respect of the assessment and management of risk. The rationale for senior management's initial decision-making was not recorded within the foster carer record, risk assessments had not been promptly completed and evidence of the implementation of the risk management plan was not evident on the records reviewed. We considered the involvement of the fostering panel advisor in the decision-making process regarding this matter to present a potential conflict of interest. Whilst this matter was discussed at the fostering panel, however, records informed that the panel was not properly constituted to accord with legislative requirements. On the basis of evidence reviewed, we do not consider the service to be meeting legal requirements regarding this matter.

In general, the fostering panel promotes safe, secure placements through robust decision making and quality assurance. However, increasing numbers of connected persons' assessments has impacted on panel capacity to fully complete the agenda. We met with the chair of the panel, two panel members and received four completed panel members questionnaires. The chair of the panel told us that overall they were satisfied with the rigour and scrutiny employed by panel members and that their contribution was valued by the local authority. We were told that the quality of the assessments' *"vary and depend on whether an independent assessor has completed them and, or whether they are connected person assessments or mainstream foster carer"*. Panel members told us that they felt *"the panel is a key strength of the Vale"*. They felt that they had appropriate support and direction from the chair and that they had an opportunity to attend training to enhance their roles.

We looked at four panel meeting minutes during inspection; however, these evidenced that the constitution of panel on one occasion did not meet legal requirements. We attended a panel meeting and observed one connected person assessment and one foster carer review. We observed good discussion with all members contributing their views, presenting social workers were asked to clarify some of the information presented and we saw the panel reach a consensus. The assessments presented had the full agreement of the panel, however, no formal recommendations were made due to the absence of full medical

information and Disclosure and Barring checks (DBS); those assessments were due to be returned to next panel following the completion of statutory checks.

The chair of panel acknowledged the impact of increased connected persons' assessments on the fostering team and subsequent panel timescales. This had resulted in a number of reports being submitted to panel prior to all the necessary checks being completed. The volume of assessments was also seen to be impacting on panel capacity. The chair told us "*we are only skimming the surface*"; as during the last panel two reviews had to be deferred to the next meeting because there was insufficient time to complete the agenda.

Foster carers who had been approved for over a year were subject to an annual review, though these had not always been completed within the required timescale. However, arrangements were in place to address this issue, with the expectation that outstanding reviews would be completed by the end of June 2018. In general, the fostering panel promotes safe, secure placements through robust decision making and quality assurance. However, the constitution of the panel must consistently meet legal requirements.

A structure is in place for management oversight of the service. Quality assurance and governance mechanisms are in place but are not consistently effective in ensuring quality. However, action is being taken by the service to improve quality assurance arrangements and service delivery. Formal arrangements were in place throughout children's services to ensure management oversight and to quality assure the services being provided. The fostering service was seen to have access to a range of information which could be used to measure the quality of the service. This information included looked after children review minutes, foster carer reviews, foster carer forum minutes, placement and permanency panel minutes, placement moves, annual audits and bi annual consultations undertaken by the policy and quality assurance officer, data relating to educational attainment, feedback from fostering panel and the service's annual quality of care review. It was evident from our discussions with the team manager and operations manager that both individuals had a good understanding of the needs of those children who were living with foster carers, that they knew their foster carers well and had day to day oversight of the service. However, in a number of areas the quality of the service being delivered did not appear to be effectively monitored. At inspection, therefore, we found service shortfalls in relation to the completion of matching documents, outstanding DBS checks, documents within records undated and/or unsigned, gaps in formal supervision arrangements and variations in training attendance. We would expect these issues to have been routinely identified and addressed in a timely manner, through a robust quality assurance and governance mechanism.

It was evident at inspection, however, that the fostering service had experienced challenges over the previous twelve months, with increasing demands on the service and issues relating to staffing capacity. The service had to manage staff absences and vacancies during this period (though agency staff had been employed) and had been without a permanent team manager for a year, though the post had been covered on a temporary part-time basis by an agency manager since October 2017, with additional oversight

provided by the service's operations manager. It was positive to see, therefore, that a permanent team manager had recently been appointed, due to start in June 2018. The management arrangements had also been strengthened by the recent appointment of a new practitioner manager. It was also positive to hear, from senior managers, that planned changes to service delivery for looked after children included additional staffing capacity within the fostering team, the targeted recruitment of foster carers and additional capacity to develop its therapeutic service. Also, the quality assurance arrangements for the fostering service would sit within the newly revised quality assurance framework. Further improvement is required to ensure that the service is able to demonstrate that managers have a clear line of sight on service delivery and that quality assurance and governance arrangements are robust.

4. Improvements required and recommended following this inspection

4.1 Areas of non compliance from previous inspections

Regulation 10(1) – Local authority fostering service manager. This is because a new manager had been appointed to manage the fostering service but CIW had not been notified. - We were advised, at inspection, that the manager had ceased to manage the service in April 2017, and that the team was being managed on a temporary basis by an agency manager. However, CIW had not been notified as required.

4.2 Recommendations for improvement

During this inspection, we advised the registered person that improvements are needed in order to fully meet the legal requirements in relation to:

- Regulation 8 (1) ((b) the need to safeguard and promote the welfare of the children placed by the fostering agency; the service must ensure that documentation supports robust decision-making regarding safeguarding matters and systems are in place for the management of DBS checks to ensure that children's safety is maintained.
- Regulation 42 (1) the establishment and maintenance of a system to monitor and improve the quality of the service; improve the quality assurance and governance of the service.
- Regulation 25 (1) Meetings of fostering panel; panel should fully constituted at all times in order to conduct its business appropriately.
- Regulation 17 (1) Training for foster carers; attendance by all foster carers at training, which meets their needs and improves outcomes for children in their care. Where two household members are approved as foster carers, both should complete training
- Regulation 29 (2) Annual reviews of approval; an annual review of foster carers approval should be completed.

Further recommendations:

- Review risk assessment to be completed within a timely timeframe to ensure that foster carers have the documentation necessary to enable them to provide safe care.
- The record of matching meetings should provide sufficient detail to evidence sound decision-making. To include the potential impact of the placement on any existing children. Also where gaps are identified in terms of matching, the fostering service should record how it intends to address these, for example, by way of training.

- Arrangements for children's participation in care planning and consultation processes to be strengthened.
- The service needs to build on recruitment activity to improve the choice of placements for children and to ensure that they are well-matched with foster carers who are able to meet their needs.
- Documentation relating to any exemption or variation to a foster carer's approval status pending a decision by fostering panel should be consistently evidenced within foster carer records.
- Review the supervision, support, and training arrangements for foster carers to ensure that their needs, and those of the children being cared for, are appropriately met.
- Where two adults in a household are approved as joint carers, both should successfully complete training
- The service should ensure that all documentation held by the service is signed and dated by all parties.
- Measures in place to provide payments to foster carers should be reviewed to ensure that payments are made promptly.
- Foster carer agreements should be promptly updated following any change of approval status.
- Panel capacity to be reviewed to ensure that delays in completing panel business are avoided.
- Review the foster carer handbook to ensure that foster carers have up to date information regarding legislation, statutory guidance, policies and procedures.
- The fostering service should consider Welsh Government's More Than Just Words' follow on strategic guidance for Welsh language in social care. All social care providers should include information on their level of Welsh language service provision in the statement of purpose and young person's guide and reflected in the annual review of the quality of care.

5. How we undertook this inspection

This was a full announced inspection and all three quality areas were considered. The inspection was carried out by two inspectors and took place over five days in February 2018. This inspection was undertaken concurrently with an inspection undertaken by Care Inspectorate Wales of the Vale of Glamorgan Children's Services.

The information used for this inspection was obtained by the following methods:

- We spoke with foster carers in focus groups and also three foster carers individually
- We spoke with a group of children who were looked after
- We spoke with the fostering service manager
- We spoke with the service's operations manager
- We spoke with members of the fostering staff team
- We attended a presentation by the Head of Children's Services
- We attended an interview with the advocacy service
- We attended an interview with the local authority's Head of Achievement for All and the Looked After Children Education Co-Ordinator
- We attended placement and permanency panel
- We sampled the files of four children.
- We sampled the files of ten foster carer households.
- We read the records of the last four fostering panel meetings
- We attended fostering panel
- We viewed a sample of the fostering service's paperwork including the statement of purpose, children's guide, the last quality of care review report, monitoring data and the draft quality assurance document, foster carer assessment and annual review reports, a sample of staff files and supervision records, team meeting minutes and foster carer forum minutes.

Further information about what we do can be found on our website:

www.careinspectorate.wales

About the service

Type of care provided	LA Fostering Service
Date of previous Care Inspectorate Wales inspection	02/03/2016; 03/03/2016
Dates of this Inspection visit(s)	08/05/2018; 09/05/2018; 22/05/2018; 23/05/2018; 25/05/2018
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service. We recommend that the service provider considers Welsh Government's <i>'More Than Just Words'</i> follow on strategic guidance for Welsh language in social care'.
Additional Information:	