



Inspection Report on

Foster Swansea

**PO Box 677
Swansea
SA1 9NR**

Date of Publication

Tuesday, 9 October 2018

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Description of the service

Foster Swansea comprises of two teams that provide placements for children who are looked after by the local authority; A team that assesses and supports general foster carers which includes short/ long term placements and respite breaks. A team that assesses and provides support to family and friend carers in addition to supporting children who are placed with carers under a special guardianship arrangement. The team manager of the Foster Swansea Team is Sarah Thomas and the Family and Friends team Donna Lukes. On the 31st March 2018 the City and County of Swansea had 131 fostering households capable of looking after 191 children. Of these 114 were general carers, eight of which were also approved as parent and child placements and 17 were specific support care approved. On the same date the Family and Friends team were supporting 82 approved family and friends carers.

Summary of our findings

1. Overall assessment

Where children experience stable placements they have good experiences and are well supported to have opportunities to progress with foster carers committed to providing them with support to achieve positive outcomes. Some children did experience less stable placements and moves following an emergency or identification of a more suitable placement. The significant rise in children requiring placements had impacted upon the ability to match children with foster carers who could support children's needs effectively especially with larger sibling groups. However, the authority had identified the need to increase capacity and their three year plan clearly outlined their commitment to achieve this. Foster carers spoke positively about the support received from supervising social workers and the duty line, although frequency of supervision had been an issue at times of staff shortages. The fostering teams were enthusiastic and motivated to make a difference for children and had many committed foster carers who were strong advocates for the children in their care.

2. Improvements

The service continues to develop and expand to ensure they are able to manage the planned increase in assessments and early intervention.

3. Requirements and recommendations

Section four of this report sets out our recommendations to improve the service:

These relate to; supervision, training, annual reviews, support groups, foster carer's handbook, recordings and the guidance for Welsh language in social care..

1. Well-being

Summary

Children are in the main able to develop positive attachments to their foster carers who understand their needs. Foster carers aim to provide a caring and nurturing environment where children can reach their potential and take part in a range of social and educational activities. Children's primary health care needs are attended to; however, some improvement is required in meeting their therapeutic needs.

Our findings

Children placed within the City and County of Swansea can be confident that their safety and welfare are promoted and their voices heard. This is because of the level of support and supervision offered to both children and foster carers from the team was child centred, and promoted the emotional and physical well being of the children in placement. Young people were encouraged to attend their own looked after children (LAC) reviews and if they were not able or chose not to, then in some instances, the Independent Reviewing Officer (IRO) met with them privately to gain their views. The consultation document for reviews had been produced by the 'shout out group', made up of young people in care. All children were provided with a children's guide. The children and young people were able to access advocacy, available through Tros Gynnol. Examination of records and discussion with foster carers confirmed that they had acted as advocates on behalf of children placed with them. The service employed a participation officer who organised participation groups for different age groups and they had developed the children's guides in this group. The guide was under review with a plan to develop it into an online interactive tool as part of the participation strategy. Foster carers spoke very positively about the support this offered young people and gave an example of discussions about emotions, feelings and love and a child stating that : *"they didn't know what love was until they lived in foster care"*. All young people were provided with an age appropriate guide that detailed how to make a complaint, the role of advocacy and social work support.

The foster carers produced welcome packs for young people and there was evidence of panel following up on one prior to approval. The fostering team also ran support groups and the group for 'mates who care' who met during the school holidays. Discussion with foster carers confirmed that some felt frustration at the level of support that young people received from their own social workers. One child was having a care plan drawn up by a social worker who had not met them and the foster carer had been proactive in ensuring a meeting took place. The Family and Friends team took account of the relationships between the young people and their carers, which was observed and reflected in the assessments made. Young people were consulted prior to annual reviews and they were spoken to by social workers from the fostering teams during their regular visits to the home.

Children have the opportunity to have their voice heard with foster carers advocating on their behalf in addition to formal advocacy arrangements.

Children are placed with foster carers with the skills and experience to meet their needs. We heard from staff, manager and foster carers that children were as far as possible placed with carers who could meet their needs. However, the matching of children and foster carers had been constrained by the increase in the number of children requiring placements and the limit on the number of placements available. We saw evidence that the authority had gone outside of their in-house provision, to provide a suitable match with foster carers in an independent fostering agency (IFA) in preference to placing in house which would have provided a less appropriate match. On other occasions the placement offers were limited and resulted in some carers receiving placements within days of their approval. There was also evidence of exemptions being made although we were assured that a matched IFA placement would be used before an exemption. It was also noted that on one occasion a respite arrangement was described as contact which avoided the need for an exemption. Experienced foster carers spoken to were clear that they would be able to say 'no' if they felt that the placement was not appropriate and were not placed under pressure to take placements. Clearly when placements had been planned and matching completed appropriately very stable placements had been made following phased introductions. We saw from records viewed that a number of successful placements had been made with children remaining with foster carers throughout their childhood. There were also some children who experienced multiple moves. The team had reviewed the placement breakdowns for the previous financial year which amounted to 47 in house; the main areas accounting for the moves were foster carers giving notice (13), more appropriate placements identified (12) and planned moves from emergency placements (11). It was also noted that on three occasions it was the child's choice to move. The team had introduced a new system for looking at placements where disruption was possible. The placement stability meetings were called by the fostering team and chaired by a team member; they involved the child's social worker and foster carers. Whilst the system was in early stages of development, they had already proven positive in providing early support to prevent breakdowns and provided stability for the children placed. Carers also spoke positively about children who remained in contact with them into adulthood. We conclude that the authority is committed to placing children with suitable foster carers but do require more foster carers to maintain this commitment in order to ensure that children are supported to achieve their overall outcomes

Children and young people are provided with opportunities to support their learning and development. We saw documentary evidence of children achieving well academically and of good school attendance. We learnt of a child who had secured a university placement and the arrangements to pay foster carers under the 'when I am ready' scheme as the young person was home with them every weekend. It was evident that foster carers encourage attendance and engagement with education supporting any homework. Foster carers spoke of how they managed and encouraged attendance when children had been reluctant attenders at school. There was also evidence of how they ensured children were

fully able to participate in school trips. Children were supported by their foster carers being in regular contact with schools and they attended parents' evenings. Some foster carers had also sought support through additional tutoring to ensure children reached their potential. Children are encouraged to reach their educational potential through support from their foster carers.

Children experience well-being and a sense of achievement because they are able to access opportunities, follow interests and develop skills. We saw through records a multitude of examples of children taking part in activities weekly, as part of their normal routine in both sport and the arts. These included attending local youth groups, individual hobbies and also they had access to the Passport to Leisure which allowed free access to swimming for children, their foster carers and their families. This "passport" also gave reduced cost entrance to the local leisure centres and Grand Theatre. There was also a MAX card which provided discounts to foster families at activities across the UK. Foster carers told us about the holidays they had been on with children in their care both in the UK and abroad. There was evidence that foster carers and social workers had needed to go to London to obtain a birth certificate for a young person to apply for a passport as they had not been born in the UK. Foster carers talked about contacting each other by text when planning a visit to the beach or park in order that they could go together and support each other. Foster carers were seen to have been proactive in ensuring that children have their own bank accounts to learn to save. Children's well-being and self-esteem is promoted through participation in activities.

Children are protected from abuse. There was a safeguarding policy in place and we saw that where safeguarding issues had been raised, these were referred appropriately. Where it had been necessary to review a foster carer's approval arising from an incident, this had been presented to the foster panel for consideration. Examination of minutes confirmed that the panel members were thorough and balanced in their decision making to ensure the safety of children. The service ensures that foster carers attend training in safeguarding although not all connected carers had attended the training. Where it was deemed necessary a foster carer would be asked to move out of the family home or the children would be moved to ensure safety. This was seen as a neutral act until an investigation was completed. Support to foster carers was provided through the fostering network in the event of a suspension. Supervising social workers ensured an unannounced visit was undertaken every year to check on the conditions of the home and they regularly spoke to children in placement. The service monitored the use of control, restraint or discipline identified from recordings and supervision. Children are safeguarded whilst living in foster care through the effective implementation of policies and procedures.

Children are able to remain healthy and have their primary and additional health care needs attended to. We saw that children were registered locally for their primary health care and foster carers documented any visits and check ups. Discussion with foster carers confirmed that they were committed to ensuring the children in their care were healthy and they ensured appointments were attended. Foster carers gave examples of when they had

stayed overnight in hospital to support children or had calmed them about dental treatment. There were copies of delegated powers on file; however, a foster carer expressed frustration that they had permission to allow an anaesthetic but not an eye test. Therapeutic support was accessed through the community although a new multi-agency placement support service (MAPPS) team was being set up with a psychologist and other therapists. This team was to be called upon to support children when they had experienced two or more placement break downs. This service was to be shared with a neighbouring local authority and it was too early in it's formation to comment upon effectiveness. It was unfortunate that in forming this team the fostering team had lost the services of the clinical psychologist. Some foster carers commented that services for children could be improved to support those who had experienced trauma and neglect. They gave examples of when they had paid for counselling services themselves for the children in their care as they felt the individuals could not wait. This again confirms the commitment shown by some of the foster carers in ensuring the well-being of children in their care. Children do have support from the Theraplay service of which foster carers spoke very positively. Training was provided to main stream carers in attachment, trauma, separation and grief and life story work was also provided. Children are able to have their health care needs attended to.

2. Care and Support

Summary

Children are cared for by foster carers who are appropriately recruited and supported through supervision and training. Connected carers do not attend training. Foster carers are aware of the needs of the children in their care.

Our findings

The recruitment and assessment of foster carers is thorough. The increase in court directed connected carer assessments had not impacted upon the main foster Swansea team as these were managed by the family and friends team. This had allowed the foster Swansea team to continue with their recruitment and assessment of foster carers. A detailed recruitment and retention strategy had been developed which reviewed past performance and planned for the period 2018 – 2020. Whilst planning to increase numbers the team were aware of the inevitable loss of some carers and also that a number of young people would be moving to the ‘when I am ready’ scheme which would result in a loss of the foster placement. Foster Swansea also completed an analysis of their success from enquiry to approval and identified that having a vacant business support post had impacted upon a decrease in the ratio. The post is now filled and the figure is rising again. The team strives to complete assessments within their target date of 4 – 6 months and 70% had been achieved in the previous year with some complex assessments taking longer. The staff team was again up to full compliment which enabled assessments to be allocated across the workers to reduce pressure. Approved foster carers were encouraged to take part in recruitment campaigns.

We saw that prospective foster carers were sent an applicant’s pack within 24 hours of their initial enquiry if this was possible. Home visits were completed within a further seven days to discuss an application. Prospective foster carers were then invited to attend the “skills to foster” preparatory training and all who attended spoke highly of this opportunity. Connected persons were not required to attend any preparatory training, however, they were encouraged to but with limited take up. The team manager read all assessment reports for connected carers. There was a clear process in place with viability assessments undertaken by the fostering team social workers and a fostering placement agreement put in place. A unified assessment was undertaken using the 2008 Form F competency framework. The process was timely and whilst some documents were not in place when submitted for the quality assurance stage they were in place by panel. The team had completed 161 viability assessments and approved 30 carers in the previous financial year. The assessments for the foster Swansea team were also seen to be comprehensive and they had approved 13 new fostering households in the previous financial year. The team

used the BAAF Fostering assessments. The fostering assessments were held on the individual case files of carers as the electronic system had not been extended to include this at the time of inspection. We found that children's well-being is promoted through safe recruitment and assessment processes.

Foster carers are supervised and supported by the service. Foster carers were provided with a handbook and post approval pack following their approval. Foster carers fed back that these were a little dated and in need of review with input from foster carers. Foster carer agreements were completed once approval had been gained and these were found on files examined. Automatic membership of the Fostering Network was provided for all approved foster carers with access to their support line. Foster carers were allocated a supervising social worker and initially supervision was every two weeks moving to four weekly or six weekly depending upon experience and the stability of placement. It was noted that some recently approved foster carers moved very quickly to four weekly supervision quite soon into their first placement. It was recommended that the reasons for making the reduction in frequency are documented. Foster carers spoke very positively about the support they received from their supervising social workers. For connected carers, efforts were made to carry out a visit every six weeks. However, the staff team were unable to achieve this although where there were difficulties with a placement additional visits were prioritised and undertaken. Records were maintained of supervision, however, with some more in depth than others. Several months of records had been uploaded onto the electronic system on the same date and it is important that these documents are uploaded without delay. The family and friends team had records of supervision in place which again varied in quality; some considered health and education and others did not. The quality of recordings from foster carers was varied and in some cases could be improved. It was difficult to assess the nutrition value of diets when records said little. The staff shortages in the team had a significant impact upon the frequency of supervision they had been able to offer coupled with the number of assessments required which should be addressed given that the team had filled vacancies.

The teams ran support groups but again due to staff shortages they had not been as regular in the past year, and none had been convened for the connected carers, however, the teams were going to address this. It was also noted that whilst the Foster Swansea team had a budget for support groups the family and friends team did not and this should be addressed. Foster carers spoke positively that the focus of the groups had moved more to the well-being of carers although guest speakers still attended some meetings. Foster carers told us that they had formed a support group of their own and had invited connected carers to attend. There was no formal buddy system in place but supervising social workers did organise some informal buddy arrangements themselves. The teams operated duty systems and foster carers spoke very highly of the support they received through this. It operated from 6 – 11 pm on weekdays and 1 – 11 pm on the weekend. This allowed social workers to be proactive in contacting foster carers where there had been a recent placement or there were concerns about placement stability. They were also available for advice to foster carers and if a home visit was required they would contact the emergency duty team. Foster carers were able to access confidential counselling services should they require for themselves. Respite care was available to foster carers and whilst some took this opportunity others did not. Some carers felt that the respite service could be more flexible and whilst there were examples of flexibility in day care arrangements perhaps a

review of respite was required. Children are cared for by foster carers who are themselves supported but this could be strengthened.

Foster carers told us that generally they received sufficient information to make decisions prior to accepting a placement and even with emergency placements some basic information was shared. Discussions with the staff and acting manager confirmed that they knew their foster carers well and were familiar with their strengths and acknowledged areas for improvement in caring for children. We saw that delegated authority agreements were in place on the files we viewed although some needed to include further detail. However, the safe care agreements were not always dated and some were in need of review. Foster placement agreements were in place for both teams but some were in need of updating. Health and safety checks were undertaken and the examination of a random selection of records confirmed that foster carers were vigilant in adhering to safe care agreements. Children are cared for by foster carers and connected carers who understand their individual needs.

The service's statement of purpose outlined the training available to foster carers. This year was the first that the foster team had organised for training to be shared with Neath Port Talbot County Borough Council. This had proved to be very positive as they also organised courses in the evenings and at weekends. The feedback from foster carers was that the training opportunities had improved greatly as the previous year they had been limited. The only concern expressed was that the venue for training constantly changed and some were not easily accessible. The training unit for the authority had undergone some changes and some data had been lost, as a consequence some foster carers had been asked about their lack of training at annual review when in fact they had attended more than listed. We were assured that this had been addressed and there would be no further gaps. The training provided for prospective carers was described as '*amazing*' by those who had completed the course. There was a lack of take up of the training on offer by connected carers and all training was recorded on the annual reviews of carers. Where connected carers had taken up the opportunity of training there had been very positive outcomes for children e.g. training in Autism had been specifically sourced to support one carer. In discussion with staff we were told that the training for foster carers was organised by the training department. Social workers told us that they were able to put forward a name as a priority especially if a course was over subscribed. A central training matrix might be beneficial to identify where training is not being accessed. Foster carers who had babies placed spoke positively about the insight provided by attending courses designed specifically for placing children for adoption and life story work. There was also feedback from a supervising social worker in supervision records: *during this discussion x naturally reflected on the knowledge she got from the training she has attended and the skill that X's play therapist has been teaching her to use when their behaviour gets difficult*". There was also evidence that some carers had attended limited training either due to work commitments or considering themselves to be the secondary carer. Some foster carers and connected carers would benefit from increased opportunities to maximise their learning and development, in order to further improve outcomes for children in their care.

3. Leadership and Management

Summary

Overall we found the service was well managed. The fostering service had two motivated and enthusiastic teams with a mix of experience in fostering and working in child care teams. Information about the service was generally accurate although further information about the promotion of the Welsh language was required. There was a strong foster panel arrangement in place, however, some of the processes did require speeding up as on occasion there had been drift from annual reviews being completed to being signed off.

Our findings

Children, families and foster carers experience a service which generally operates in accordance with its statement of purpose. The two services had separate statements of purpose and were dated April 2018. The documents outlined the ethos of the service, with management structure, aims and objectives, principals and standards of care. It also outlined the procedure for recruitment, approval, supervision and training and the support services available. It did not, however, make reference to the service's position regarding the active offer of the Welsh language. It has previously been mentioned that foster carers had considered their handbooks were outdated and a review in terms of content and format was recommended. Children generally receive the service described in the statement of purpose, which promotes their well-being. However, information regarding the Welsh language active offer should be included in the statement of purpose and the foster carer handbook needs to be updated. .

Quality assurance mechanisms are in place for the service and the quality of care review for the period April 2017 to March 2018 was provided to inspectors. The review process included seeking children's views in relation to respite arrangements and through consultation and participation events. However, the voice of the child was not reflected in the review report. Whilst the report considered the training of the staff team it did not evaluate the training received by the foster carers in both teams. Whilst some feedback is included from annual reviews there is no measure of the quality of recording from both foster carers and supervising social workers. The report did reflect consultation with foster carers but this was specific to the change to the finance policy which affected the allowances for children placed. The quality of care review does not make any detailed assessment of the educational and health care outcomes for young people and would benefit from further analysis. Whilst we have made positive comments in the body of the report for the experiences of children we have scrutinised there is no detail to confirm that this is the experience of other children. It would be positive for the fostering service to establish itself a procedure for monitoring educational attainment, progress and school

attendance of children placed with foster carers. Whilst quality assurance systems are in place, some areas such as the annual review process require improvement.

The teams have experienced a challenging period with some changes of personnel over the previous year. Both teams had seen movement of staff with the foster Swansea team having a new manager and deputy manager. Both teams had enthusiastic and motivated staff with a mix of experience in child care and fostering in both local authorities and independent fostering agencies. Some of the fostering staff who had left were also in the child care teams and this movement both ways had enhanced the working relationships between both areas of work. There had been an adverse impact with the delay in replacement of staff but new staff had been recruited by the time of inspection. The impact for foster carers had been that some supervision had been less frequent and the completion of processes such as reviews and signing of the records were seen to have been delayed in some instances. There had also been an impact upon the frequency of support groups especially for the Family and Friends team as support groups and the newsletter had stopped. It was very positive that both teams had seen growth in the size of the teams in a difficult climate. The authority recognised that earlier intervention was key and planned to grow the family and friends team with the addition of a senior post, two social workers and three support workers. This was to implement a Family Finding model and to support children in special guardianship placements. This also linked with the signs of safety approach adopted by the authority. The staff in both teams undertook assessments and supervision of foster carers. The exception was a job share as it was considered that a person working two days a week was not available to provide the required support for supervision and they concentrated on assessment. Both teams were enthusiastic and motivated and at almost full capacity were looking forward to development in the year ahead.

The fostering panel ensures safe, secure placements through robust decision making and quality assurance. Examination of panel minutes, panel papers and observation at a panel meeting generally evidenced robust scrutiny of agenda items, the active participation of panel members and sound decision making. There were two panels formed, one for each team and whilst the chair remained the same for both there were different members for each. There was evidence of panel members preparing questions in advance and panel discussion made comment about the quality of reports provided to them. Panel also looked at competencies and training and agreed any further information that was needed. Social workers fed back that the chair of panel made people feel at ease on arrival allowing prospective foster carers and current carers attending reviews to be relaxed and this brought the best out of them. Annual reviews were undertaken by the team and a senior practitioner in the Foster Swansea team had oversight of when reviews were due to ensure they were completed within timescales. The records examined showed that annual reviews were within timescale. The Family and Friends team had not managed to achieve as timely a process. Whilst annual reviews had been held there were examples of the process being too long; there was an example of the time from review to agency decision maker letter taking nearly six months. This might in part have been due to staff shortages at the time but

a review of timescales should be undertaken as such a delay is not acceptable. Panels ensure that children are cared for and their well-being promoted through scrutiny of assessments and sound decision making.

4. Improvements required and recommended following this inspection

4.1 Areas of non compliance from previous inspections

None

4.2 Recommendations for improvement

- 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 children's guide and be reflected in their annual review of the quality of care.
- The service should be able to clearly evidence that the level of supervision and support matches the needs of individual foster carers and the record of visits need to reflect matters discussed.
- The foster carers' handbook should be updated in content and format to ensure it is user friendly.
- Review the training arrangements for connected carers to ensure that their needs are appropriately met to promote the well-being of the children in their care.
- A budget should be available for the family and friends team to run support groups
- The timescales for annual reviews should be monitored in the Family and Friends team to avoid delay.
- Improvement in the quality of some foster carers recording.
- Some improvement is required in the area of quality assurance across the service.
- Foster carers need to maintain a separate record for each child.
- The language used needs to reflect regulation i.e. foster carers are approved not registered.

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 six days on the 2/07/18, 3/07/18, 4/07/18, 17/7/18, 18/7/18 & 19/7/18. The inspection was undertaken concurrently with an inspection undertaken by Care Inspectorate Wales of the City and County of Swansea Children's Services.

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

- We spoke with two groups of foster carers
- We spoke to the manager of the Family and Friends Team and the Deputy/Acting manager of the Foster Swansea Team
- We spoke to social workers in groups from both teams
- We spoke to the Principal Officer for Residential Services
- We sampled the files of six children
- We sampled the files of seven foster carers and five connected carers
- We read two foster carers' form F assessments
- We read the records of the last three foster panel meetings
- We attended the approval panel for foster carers
- We met with the panel chair and panel members
- We viewed a sample of the agency's paperwork including the statement of purpose, quality review reports, foster carer assessments and review reports

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About the service

Type of care provided	LA Fostering Service
Date of previous Care Inspectorate Wales inspection	08/02/16, 09/02/16 & 10/02/16
Dates of this Inspection visits	02/07/2018, 03/07/18, 04/07/18, 17/07/18, 18/07/18 & 19/07/18
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No
Additional Information:	