

PERTH AND KINROSS COUNCIL**Executive Sub-Committee of Lifelong Learning Committee****26 November 2014****CARE INSPECTORATE INSPECTIONS OF CARE SERVICES FOR CHILDREN AND YOUNG PEOPLE****Report by Executive Director (Education and Children's Services)****PURPOSE OF REPORT**

This report sets out the key findings of independent inspections of the Council's Fostering Service and Adoption Service carried out concurrently by the Care Inspectorate. The report also sets out planned improvements for each service arising from the inspection reports.

1. BACKGROUND

- 1.1 The Care Inspectorate (also known as Social Care and Social Work Improvement Scotland - SCSWIS) was created by the [Public Services Reform \(Scotland\) Act 2010](#). The Act sets out general principles for the Care Inspectorate's inspection and improvement functions. These are:
- The safety and wellbeing of all persons who use, or are eligible to use, any social service are to be protected and enhanced;
 - The independence of those persons is to be promoted;
 - Diversity in the provision of social services is to be promoted with a view to those persons being afforded choice;
 - Good practice in the provision of social services is to be identified, promulgated and promoted.
- 1.2 The Act places duties on the Care Inspectorate to make arrangements which will secure continuous improvement, to ensure user focus, and to co-operate with other specified scrutiny bodies.
- 1.3 Since April 2008, regulated care services in Scotland have been inspected using a framework of quality themes and quality statements. Services have been given grades based on the findings at each inspection and the written reports and grades are made public via the Care Inspectorate's website.
- 1.4 Services are measured against the [National Care Standards](#) and quality themes:
- Quality of Care and Support;
 - Quality of Environment or Information;
 - Quality of Staffing; and
 - Quality of Management and Leadership.

- 1.5 Each quality theme is graded on a 6-point scale in which 1 = unsatisfactory, 2 = weak, 3 = adequate, 4 = good, 5 = very good and 6 = excellent.
- 1.6 In addition to a visit to each service inspectors consider evidence from a range of sources when judging a service's performance since it was last graded, including:
- Upheld complaints and whether identified issues have been resolved;
 - Notifiable incidents and how the service has dealt with them;
 - Feedback from people who use the service and carers;
 - Evidence that previous action plans have been implemented; and
 - Information in your annual return.
- 1.7 The Care Inspectorate conducts unannounced inspections for all regulated services as the main inspection method unless there are practical contraindications. There are longer intervals between inspections for better performing services and a greater focus on risk-based inspections for poorly performing and high-risk services such as those which provide 24 hour residential care.
- 1.8 Following an inspection, the Care Inspectorate may set out a series of:
- **Recommendations:** statements that set out actions the care service provider should take to improve or develop the quality of the service.
 - **Requirements:** statements which set out what is required of the care service provider to comply with relevant legislation.
- 1.9 Care service providers must submit an action plan to the Care Inspectorate addressing any requirements and recommendations identified. Progress against the action plan is monitored by the Care Inspectorate through annual return and self-assessment forms submitted by the care service provider and through subsequent inspection.

2 PROPOSALS: RECENTLY PUBLISHED REPORTS

- 2.1 This report presents the findings of inspections of the Fostering Service and the Adoption Service in July 2014 by the Care Inspectorate. A progress update is provided on planned improvements resulting from a number of recommendations highlighted in the inspection reports. There were no requirements arising from these inspections.

2.2 Fostering Service

- 2.2.1 The Care Inspectorate carried out an inspection of the Council's Fostering Services in July 2014. The inspection was announced and low intensity. This

level of inspection is carried out when the Care Inspectorate is satisfied that services are working hard to provide consistently high standards of care.

2.2.2 The Care Inspectorate identified the following important key strengths:

- The service provides very good support to foster carers with regular supervision and good opportunities for training.
- Foster carers are involved in the development of the service and feel their views are heard and their ideas are used to improve the service.

2.2.3 The inspection found both the Quality of Staffing and the Quality of Management and Leadership to be **very good**. The inspection found that the Quality of Care and Support is **good**.

2.2.4 The inspection was carried out at a time when the fostering service had experienced a number of staffing changes and a period of staff shortage. The inspectors recognised that these changes had not had an adverse impact on the quality of care and support offered to foster carers and children and young people.

2.2.5 The inspection report does not set out any requirements. It sets out 5 recommendations all of which relate to further enhancing the quality of performance and practice within the service. A summary of progress against the recommendations and areas for improvement is provided in Table 1 below.

Table 1: Summary of Progress against Key Areas for Improvement

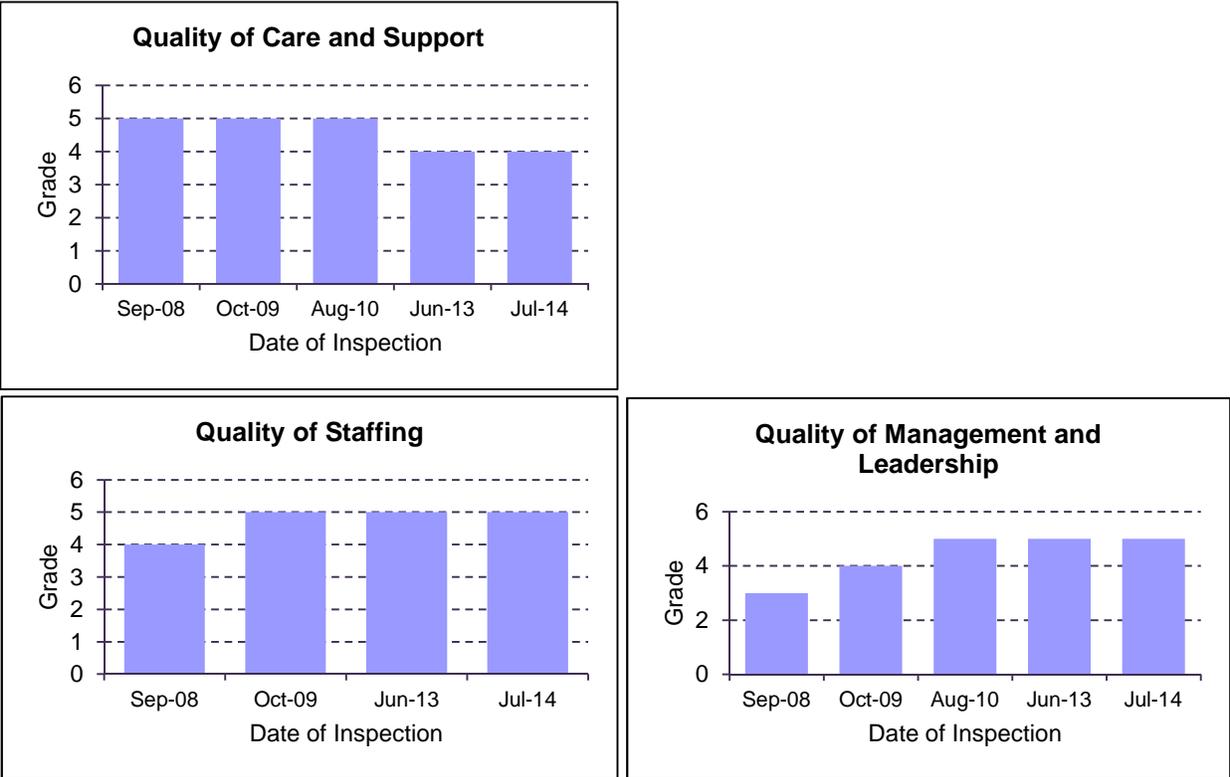
Areas for Improvement	Progress/Proposed Actions
Quality of Care and Support	
<p>Recommendation: The provider should ensure that each year the agency reviews your performance and the quality of care you provide and a review meeting is held with your supervising social worker.</p>	<p>In progress: All carer reviews have been carried out in line with statutory timescales (3 yearly) but our local good practice of annual reviews had slipped due to staffing changes. There is a timetable in place which should bring this up to date by the end of December 2014. There have been recent appointments of 3 new staff to the team.</p>
<p>Recommendation: The provider should ensure that staff use methods that reflect up-to-date knowledge and best-practice guidance, and that the management are continuously striving to improve practice.</p>	<p>On-going: A programme of ongoing training is in place for staff as well as an induction programme for the 5 new team members. The inspectors referred to the need to update administration of medication policy in line with recent guidance. Current practice reflects the recent guidance, and the Medication Policy will be updated by December 2014. All further operational policies will be reviewed and updated by the end of March 2015.</p>

Quality of Management and Leadership	
Recommendation: The provider should ensure that information (for example annual reports) is produced describing the performance of the agency.	In progress: An annual self-evaluation and report will be completed by March 2015 to reinstate the practice of annual reporting on performance.
Recommendation: The service should continue to ensure that panel membership is diverse, representing a mix of skills, a gender balance, independent members and people with direct experience of adoption.	In progress: There has been recent recruitment to bring new members into the fostering and permanence panel. A further advertisement to widen membership will be undertaken by December 2014. An annual self-evaluation and report will be completed by March 2015.
Recommendation: The provider should ensure that the recording of the review meeting and its outcomes is an accurate and full record covering the guidance contained in the Looked after Children (Scotland) Regulations 2009.	In progress: The recording of the annual review will be brought into line with statutory requirement which will further enhance our good practice in this area.

2.2.6 A copy of the inspection report is provided in Appendix 1 together with a copy of the action plan submitted to the Care Inspectorate.

2.2.7 The last inspection of the Fostering Service was completed in June 2013 and reported to the Executive Sub-Committee of Lifelong Learning Committee on 13 November 2013 (Report No. [13/537](#)). Fostering Services were first inspected in September 2008 and Figure 1 below shows the inspection and grading history since then.

Figure 1: Grading History - Fostering Services



2.3 Adoption Services

2.3.1 The Care Inspectorate carried out an inspection of the Adoption Service in July 2014. The inspection was announced and low intensity. This level of inspection is carried out when the Care Inspectorate is satisfied that services are working hard to provide consistently high standards of care.

2.3.2 The Care Inspectorate identified the following key strengths:

- The service has developed a very effective system for planning for children in need of adoption.
- The direct work with children in relation to preparing them for adoption was of a particularly high standard.
- Adopters told us about the excellent quality of staff within the service.
- Staff told us about the good quality of supervision and training they received.

2.3.3 The inspection found the Quality of Staffing to be **very good** and the Quality of Care and Support as well as the Quality of Management and Leadership as **good**.

2.3.4 The inspection was carried out at a time when the adoption service had experienced a number of staffing changes and a period of staff shortage. The inspectors recognised that these changes had not had an adverse impact on the quality of care and support offered to adopters.

2.3.5 The inspection report does not set out any requirements. It sets out 2 recommendations all of which relate to further enhancing the quality of performance and practice within the service. A summary of progress against the recommendations and areas for improvement is provided in Table 2 below.

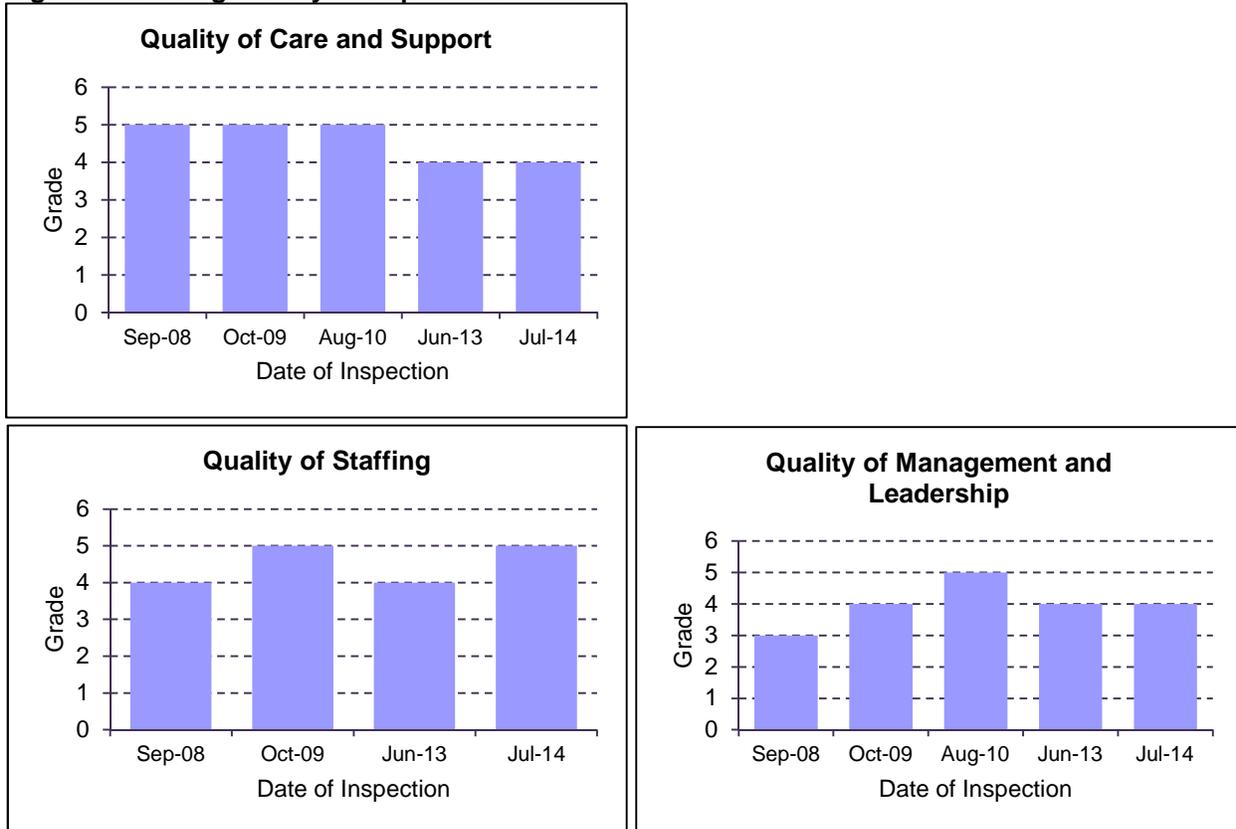
Table 2: Summary of Progress against Key Areas for Improvement

Areas for Improvement	Progress/Proposed Actions
Quality of Management and Leadership	
Recommendation: The service should produce an annual report to inform service users and stakeholder about the work of the agency and the priorities for further developing the agency.	In progress: An annual self-evaluation and report will be completed by March 2015 to reinstate the practice of annual reporting on performance.
Recommendation: The service should continue to ensure that panel membership is diverse, representing a mix of skills, a gender balance, independent members and people with direct experience of adoption.	In progress: The panel referred to is the Fostering and Permanence Panel and the actions taken forward for improvement are referred to above in Table 1.

2.3.6 A copy of the inspection report is provided in Appendix 2 together with a copy of the action plan submitted to the Care Inspectorate.

2.3.7 The last inspection of Adoption Services was completed in June 2013 and reported to the Executive Sub-Committee of Lifelong Learning Committee on 13 November 2013 (Report No. [13/537](#)). Adoption Services were first inspected in September 2008 and Figure 2 below shows the inspection and grading history since then.

Figure 2: Grading History - Adoption Services



3 CONCLUSION AND RECOMMENDATION

- 3.1 The reports by the Care Inspectorate provide further information on the standards and quality in our services and set out a clear agenda for continuous improvement.
- 3.2 It is recommended that the Executive Sub-Committee of Lifelong Learning Committee:
- (i) scrutinises and comments as appropriate on the contents of the report.

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Approved

Name	Designation	Date
John Fyffe	Executive Director	3 November 2014

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1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

Strategic Implications	
Community Plan / Single Outcome Agreement	Yes
Corporate Plan	Yes
Resource Implications	
Financial	None
Workforce	None
Asset Management (land, property, IST)	None
Assessments	
Equality Impact Assessment	None
Strategic Environmental Assessment	None
Sustainability (community, economic, environmental)	None
Legal and Governance	None
Risk	None
Consultation	
Internal	Yes
External	None
Communication	
Communications Plan	None

1. Strategic Implications

Community Plan / Single Outcome Agreement

1.1 This section should set out how the proposals relate to the delivery of the Perth and Kinross Community Plan / Single Outcome Agreement in terms of the following priorities:

- (i) Giving every child the best start in life
- (ii) Developing educated, responsible and informed citizens
- (iii) Promoting a prosperous, inclusive and sustainable economy
- (iv) Supporting people to lead independent, healthy and active lives
- (v) Creating a safe and sustainable place for future generations

This report relates to Objective No (i) Giving every child the best start in life.

Corporate Plan

1.2 This section should set out how the proposals relate to the achievement of the Council's Corporate Plan Objectives.

The Perth and Kinross Community Plan 2013-2023 and Perth and Kinross Council Corporate Plan 2013/2018 set out five strategic objectives:

- Giving every child the best start in life;
- Developing educated, responsible and informed citizens;
- Promoting a prosperous, inclusive and sustainable economy;
- Supporting people to lead independent, healthy and active lives; and
- Creating a safe and sustainable place for future generations.

This report relates to Objective No (i) Giving every child the best start in life.

- 1.3 The report also links to the Education & Children's Services Policy Framework in respect of the following key policy area: Change and Improvement

2. Resource Implications

Financial

- 2.1 Not applicable (n/a)

Workforce

- 2.2 Not applicable (n/a)

Asset Management (land, property, IT)

- 2.3 Not applicable (n/a)

3. Assessments

Equality Impact Assessment

- 3.1 Under the Equality Act 2010, the Council is required to eliminate discrimination, advance equality of opportunity, and foster good relations between equality groups. Carrying out Equality Impact Assessments for plans and policies allows the Council to demonstrate that it is meeting these duties.

The function, policy, procedure or strategy presented in this report was considered under the Corporate Equalities Impact Assessment process (Eq1A) with the following outcome: assessed as **not relevant** for the purposes of Eq1A.

However, it is anticipated that the work on the quality indicators will promote equality of access to care and support. Where appropriate, improvement policies, procedures or strategies will require equalities assessments to ensure compliance with our duty to ensure there is no adverse impact on any community group.

Strategic Environmental Assessment

- 3.2 The Environmental Assessment (Scotland) Act 2005 places a duty on the Council to identify and assess the environmental consequences of its proposals. No further action is required as it does not qualify as a PPS as defined by the Act and is therefore exempt.

Sustainability

- 3.3 Not applicable (n/a)

Legal and Governance

- 3.4 Not applicable (n/a)

Risk

- 3.5 Not applicable (n/a)

4. Consultation

Internal

- 4.1 Relevant Heads of Service and Service Managers within Education and Children's Services have been consulted in the preparation of this report.

External

- 4.2 Not applicable (n/a)

5. Communication

- 5.1 Not applicable (n/a)

2. BACKGROUND PAPERS

No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information) were relied on to any material extent in preparing the above report.

3. APPENDICES

	<u>Fostering Services</u>
Appendix 1a:	Care Service Inspection Report
Appendix 1b:	Action plan

Appendix 2a: Adoption Service
Care Service Inspection Report
Appendix 2b: Action plan



Care service inspection report

Perth & Kinross Council - Fostering Services

Fostering Service

Colonsay Resource Centre
37-39 Colonsay Street
Perth
PH1 3TU
Telephone: 01738 476839

Type of inspection: Announced (Short Notice)

Inspection completed on: 2 July 2014

Contents

	Page No
Summary	3
1 About the service we inspected	5
2 How we inspected this service	7
3 The inspection	12
4 Other information	33
5 Summary of grades	34
6 Inspection and grading history	34

Service provided by:

Perth & Kinross Council

Service provider number:

SP2003003370

Care service number:

CS2004083801

If you wish to contact the Care Inspectorate about this inspection report, please call us on 0845 600 9527 or email us at enquiries@careinspectorate.com

Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	4	Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	5	Very Good

What the service does well

Perth and Kinross Fostering Service provides very good support to foster carers with regular supervision and good opportunities for training. Foster carers are involved in the development of the service and feel their views are heard and their ideas are used to improve the service.

What the service could do better

The service could continue to develop opportunities for young people (including sons and daughters of foster carers) to have a forum to share their views. At the time of the inspection there were plans for a champion board but this had not as yet taken place.

The service should further develop their systems around recording of reviews and supporting of short breaks placements.

What the service has done since the last inspection

Since the last inspection there have been a significant number of staffing changes with the team still having two vacancies to fill. This has had an impact on the team and on the support provided to foster carers. The service had made efforts to ensure good communication and the practice team social workers were working alongside social workers from the fostering team to support carers and young people in the interim until the team had a full complement of staff.

Conclusion

Despite a number of staffing changes which has had significant impact within Perth and Kinross Fostering Service, the team continues to provide a very good quality of care and support to their foster carers and their young people, and outcomes for young people remain very good. The team are committed to further improving their service.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information in relation to all care services is available on our website at www.scswis.com.

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and recommendations:

If we are concerned about some aspect of a service, or think it needs to do more to improve, we may make a recommendation or requirement.

A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service based on best practice or the National Care Standards.

A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 ("the Act") and secondary legislation made under the Act, or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement may be made. Requirements are legally enforceable to the discretion of the Care Inspectorate.

Perth and Kinross provide a fostering service for young people from birth to age 21.

The stated aims of the service are to provide:

- a child centred approach which promotes the development, learning and achievement of each individual
- quality and safe caring in family settings where confidentiality is respected
- stability at times of crisis and throughout childhood
- a diversity of foster carers to meet a range of needs
- positive mental and physical health
- support for foster carers and children throughout the teams and out of hours services seven days a week 24 hours a day.

At the time of the inspection Perth and Kinross had approximately 61 approved carers and 237 looked after and accommodated young people.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 4 - Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report following an announced inspection. This was carried out by inspectors, Pauline Cochrane and Lorna Black. The inspection took place between Tuesday 23 June 2014 and Wednesday 2 July 2014 when we gave feedback to the management team of the service. The adoption service was inspected at the same time and a separate report is available.

As part of the inspection we took account of the completed annual return and self assessment forms that we asked the provider to complete and submit to us.

During this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents including discussion with:

- two young people using the service
- four foster carers face to face
- one foster carer on the telephone
- the management team for the service
- the senior social worker for the service
- the SSCO for the service
- the 'Who Cares Scotland' worker
- two social workers of young people using the service
- one of the Looked After Children Review Officers
- with one Quality Improvement Officer.

Reviewing:

- evidence provided by the service in their self assessment
- foster carer files
- children's files

and looking at:

- questionnaires received from panel members that were issued by the Care Inspectorate.

We were also in attendance at a team meeting for the family placement team and had discussion with five staff members. We had email contact with the Agency Decision maker for the service.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

What the service has done to meet any recommendations we made at our last inspection

The service received three recommendations at the last inspection, two were met and one was continued at the time of this inspection. This was in relation to diversity in panel membership, the service had attempted to take action in respect of this however a positive outcome had not as yet been achieved.

We have made another recommendation in respect of this.

(See recommendation made under Quality Theme 4, Quality Statement 4).

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate. The Care Inspectorate received a fully completed self assessment document from the service provider.

We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each heading that we grade them under. The service provider identified what they thought they did well, some areas for development and any changes they had planned.

Taking the views of people using the care service into account

During the inspection we spoke with two young people using the service and their comments included:

- "I'm very happy staying here and the plan is I will stay here until I want to move, this is my family".
- "I want everyone to stop asking for my view and visiting me, I am happy I am safe and if that changes I know who to talk to".
- "This is my home and I am very happy here".
- "I don't want to have to go to my reviews, I tell them the same thing every time that is the only thing I would change".

Taking carers' views into account

During the inspection we spoke to five carers using the service.

Their comments included:

- "I think things have changed in fostering I used to feel I was supported now I am supervised but I think this is true of fostering everywhere now. I used to be able to vent and now everything is recorded, it impacts on your support".
- "Communication is really good and I feel very much part of the team and that my opinion is respected".
- "There is a lot of practical support available and I feel able to go back to ask for support at any time".
- "I haven't had an allocated worker for a while so that has impacted on my support but I do know who to call and I have used the duty system".
- "Training is really good and easy to access".
- "We get regular newsletters which keeps me up to date, they have been a bit ad hoc lately it would be good for them to go back to being very regular again".

- "The management is visible and accessible".
- "The individual we have had in the main have given us excellent support".
- "We don't currently have an identified worker and I know the team is under immense pressure, the placing social workers for the young people have been great and helped to fill the gap. We are kept up to date with the progress made to recruit".
- "I feel that they really listen to you and take on board suggestions or opinions given".
- "I think the annual reviews are really good, it helps you reflect on the year and see the importance of the work you do".
- "I feel very much valued by the team".
- "All of the workers I have spoken to have known their stuff I trust their judgement".
- " I would grade them a five for the quality of their care and support".

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

We looked at this statement at the time of the last inspection and assessed that there were very good opportunities for foster carers and young people to make comments about the quality of their care and support. At this inspection we confirmed that these opportunities continued and assessed the service to perform at a grade of very good.

Perth and Kinross Council had developed a participation strategy which communicated the council's commitment to listening to people who use services. However we did not feel that this was well published by the service and could be more visible and accessible. **(See areas for improvement).**

The service had strong working links with 'Who Cares Scotland' which is a national independent organisation for young people who are accommodated. There was an identified worker available to the young people to enable them to give their view and to assist them to complete paperwork for their review and advocate for them. The service told us and 'Who Cares' confirmed that they were providing quarterly reports to the service on their work with the young people.

At the last inspection we noted that not all of the young people and carers knew who the 'Who Cares' worker was. During this inspection we found that the 'Who Cares' worker had recently attended an information session to ensure carers were aware of her role and to assist in highlighting the experiences and views of young people who were care experienced. This had resulted in more referrals being made by foster carers to the worker on behalf of the young people they were caring for.

The service told us they were working with the 'Who Cares' worker in setting up a champions board - which would be a forum for young people to consult with the service, and a forum for young people to provide their views to the corporate parenting board. The plan was that there would be a variety of these forums running in different locality areas to ensure a diverse representation of young people was achieved. This was in the early stages of being set up.

The service also ran a drop in centre for young people where they could access a youth rights officer to discuss any aspect of their care and support. All of this should enable young people to feel respected, have their rights acknowledged and be included in developing their care and support.

Young people were being provided with a welcome pack which included the carer's profile, giving them information about where they were staying, and who with, contact details for 'Who Cares', and the children's rights service, information on how to complain and how to contact the Care Inspectorate. We felt all of this was in line with the National Care Standards to ensure young people were given a variety of opportunities to express their view. This should ensure young people feel valued, included and safeguard their rights.

We found that the fostering service had good information available to prospective carers on their website. This included a link to enable them to look at the inspection reports and information on how to complain if they were unhappy with the care and support they were receiving. We thought the information provided enabled foster carers to assess the quality of care and support they could expect.

Carers told us they were involved in the preparation training of prospective carers. Training was evaluated at the end and feedback was provided. Carers told us that this gave them the opportunity to shape the training and information that was provided. We reviewed evaluations received from prospective carers about this training, and found that they valued the input from the carers, and felt that they had a better understanding of the fostering role and what to expect.

The service was using a variety of methods to gather the views of carers. This included working groups which had been used to update a variety of different policies, discuss and agree a training strategy, and also to update the fostering handbook. The carers we spoke to told us this enabled them to feel that their views and experience were valued by the service. We found that a foster carers' consultative group was held regularly with carer representatives, and that the minutes from these meetings were shared widely within the service. Carers told us this was an important forum for them. They felt their views were listened to and that they were kept up to date with what was happening in the service.

Carers were involved in facilitating their own support groups and identifying and arranging speakers and training. This gave carers a sense of ownership of their service and enabled them to shape the training that they required on a day-to-day basis. One carer was also being assessed as an SVQ (Scottish Vocational Qualification) assessor for the service alongside a staff member in order to support other foster carers who wish to gain an SVQ award.

Foster carer reviews were taking place within statutory guidelines which invited carers and young people using the service to give their view on the quality of care and support they were receiving and suggest any improvements. **(See areas for improvement under Quality Theme 1 statement 2).** Young people were also invited to have their say with regards to the care they were receiving through their looked after away from home reviews which were happening very regularly.

The service had in place a newsletter which was emailed to them. This enabled carers to keep up to date with what was happening in the service. The carers we spoke to told us they found this very helpful and would like to see it distributed more regularly.

The service sent out a recent survey to all their carers to gather their view about all aspects of the service being provided. Carers we spoke to felt that this was used to develop an improvement plan and work with carers to improve the service. Carers told us they received feedback about this survey through their support groups.

Areas for improvement

The service should continue to develop the champions board which would provide a forum for young people to provide their views about all aspects of the fostering service. This would allow them to be more active and have some responsibility in assessing and improving the quality of the care and support they are receiving.

Foster carer profiles could be further developed to ensure they remain up to date and relevant. Young people could be consulted in order to develop these, which would ensure they felt included and respected.

The service could provide further opportunities for birth families to provide their view on the care and quality being provided to their children.

The sons and daughters group could be further developed to include an element of consultation in order gain the views of children who foster, and ensure the care and support being provided is of good quality.

The service should ensure the participation strategy remains up to date, and is visible and accessible.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Service strengths

We did not look at this statement at the last inspection. At this inspection we felt that the service was performing at a grade of good for the areas relevant to this statement.

We found that within the sample of young peoples' files we looked at, they all had a clear care plan in place covering all aspects of their development. These were being reviewed very regularly to ensure that the care plan continued to meet the needs of the young people and enable them to achieve their potential.

The service had in place a framework for permanence planning. We found that until a permanent care decision (whether this was a return home or permanent care away from home) had been taken young people were being reviewed on an average of six weekly - which should ensure that young people were supported to achieve stability and a sense of permanence as quickly as possible.

Young people who were reaching the age of 15 years, six months were being offered an allocated through care and after care worker and a pathways assessment was being undertaken to ensure care planning for the future was being considered. This meant that young people were being supported to develop the skills, ability and knowledge they will need to become an adult. We found that not all young people were happy with this arrangement. Where they planned to remain in placement until adulthood, and did not wish to change worker, and have a pathways assessment this was respected, and responded to which we felt was good practice.

We also found where young people did not want to be involved in their looked after reviews this was respected. Young people were being enabled to express their views about the type of support they were receiving and when. This ensured that young people were respected and included in their care plan. The young people we spoke to told us this type of approach enabled them to make choices.

We found a wide variety of examples of young people being supported by their foster carers to access play and leisure activities which developed their individual talents, interests and hobbies within their local communities. We also found examples of young people being supported to maintain family contacts and friendships which ensured young people felt nurtured and in receipt of good quality care. Young people told us this was important to them.

Day to-day placement agreements were in place which should support young people in being provided with consistent care, making choices and ensuring everyone is kept up to date with the care being provided.

We found that the service's corporate parenting strategy was working well and that joint working and communication between the fostering service and the other services supporting the young people was regular and of a good quality. In some care plans for young people we noted that they were allocated an identified corporate advocate to work with them to access all of the resources council wide that would support them in achieving their potential.

Social workers and carers we spoke to confirmed that they felt communication was very good between them. The joint visits between the social workers and the supervising workers to young people and carers was working well and contributing to good outcomes for young people. The service had in place network meetings and workers' meetings to ensure everyone remained up to date with the child's plan.

We found the service had an identified looked after nurse who had good links with the service. As well as ensuring that all health information was collated and all medicals were being undertaken timeously, the nurse also attended support groups, foster carers consultative group, the drop in centre for young people and reception into accommodation meetings. This ensured that young people and carers were aware of the role and knew how to make contact with the nurse.

Carers and young people were given information on a variety of health matters including sexual health and lifestyle choices. This enabled young people to be healthy and safe. Carers we spoke to felt that this was helpful in encouraging good health outcomes for the young people they cared for.

The service told us that CAMHS (Child and Adolescent Mental Health Services), provided a consultative role to carers and had been actively involved in presenting a training package called "we can and must do better" to carers and education. This should support carers and teachers to have the knowledge and skills to support young people to attain good mental health. The Family Change Project was also providing direct therapeutic support to young people, their families and consultation to foster carers to enable young people to achieve their potential.

The service told us that the educational attainment of looked after children was beginning to improve, and we found that there were a number of good supports around to enable young people to navigate their learning.

Each school had an educational psychologist attached to it and a designated teacher able to support the needs of children who were looked after. This teacher attended looked after away from home reviews, and worked closely with the foster carers in ensuring consistent care was being provided to these young people.

The improvement officer was strengthening links between teachers and social workers and ensuring teachers were able to access relevant training. There were good supports around for transitions and recording systems had improved to alert education to any children who had become looked after or had experienced a move of placement. This should enable the school to provide the right support at the right time to enable young people to achieve their potential.

Staff told us about a service called CU@Sports which enabled young people who are looked after and accommodated to access an activity based weekend 12 times a year. This supported the young people in an active lifestyle and provided carers with an opportunity to have short breaks. Carers and young people we spoke to told us this was important to them. Staff also told us that CU@ Sports also offered an activity weekend break to sons and daughters of foster carers twice per year.

Carers told us that they had access to a day time support group and an evening support group, which enabled them to build networks and obtain peer support. The service organised an annual information sharing day/evening and regularly updated their notice board on the website in order to ensure that carers had access to the latest information about the service. The carers also had a drop in group which they organised and facilitated themselves which provided very good opportunities for networking and obtaining peer support.

Staff told us about the training strategy which had been developed for carers, providing them with 21 hours training per year, per foster care household. This was split into core training, comprehensive training and specialist training enabling the carers at the different skill levels to continue developing and achieving their potential.

Carers were also supported to achieve nationally recognised qualifications such as Scottish Vocational qualifications (SVQ3), which the carers we spoke to felt was very important. Newly approved carers were provided with induction training, and all of this should support carers to gain skills and knowledge relevant to their role as foster carers, and to support young people to remain safe, healthy, active, nurtured, achieving, respected, included, and ensure their rights were protected.

Staff told us that all approved foster carers were subscribed to 'Fostering Network' which is a national organisation for foster care who:

- **"lobby, campaign and influence policy in order to develop, improve and champion fostering" (<http://www.fostering.net/contact-us>).**

Carers we spoke to told us they valued this subscription and that it gave them access to an independent organisation including their publications and training events.

Most of the carers we spoke to told us their supervising social worker visited regularly and that formal supervision was being carried out regularly. All of the carers we spoke with told us that they valued this support, and that support from placing social workers for the child was of a very high standard (see areas for improvement).

The service had in place a duty system and also an out of hours system to ensure that carers had access to support 24 hours a day. The carers we spoke to told us they valued this and it provided a level of reassurance.

We found Form F assessments were thorough and included all members of the household. The Form F assessments we sampled enabled the fostering panel to be confident in their recommendations based on the very detailed information being presented.

The service had a very comprehensive, up to date and informative handbook in place which had been developed alongside foster carers. Carers told us this supported them in their role as foster carers.

We found that the short breaks service being provided to young people with additional needs and their families was supporting young people in making choices and achieving their potential and providing families with a support network. This was very much valued by the birth parents using the service.

We found that the preparation and life story work being done with young people moving on to permanent fostering placements or adoption was of a very high quality. Foster carers told us this had a very positive outcome on minimising trauma for young people and on the success of their permanent placement. We felt that this work was supporting young people to achieve their potential.

During this inspection we found early intervention to be a key priority of Perth and Kinross council-wide including within the fostering service. High quality work was being done to ensure young people achieved stability in their care plans as early as possible which supports best practice and positive outcomes for young people.

Areas for improvement

At the time of the inspection there were a number of staff vacancies and other staff members who had been off for a significant period of time. Carers, social workers and the service told us that this had a significant impact on the support carers were receiving.

Some carers we spoke to did not have an allocated supervising worker at the time of the inspection, however, all of the carers we spoke to told us that in the interim period the social worker for the child was providing a good level of support. The service was aware of the impact on carers and was working towards appointing people to the vacant posts.

The level of staffing had also impacted upon recruitment and assessments of a wide variety of foster carers including short breaks carers, however, the service had plans to launch a recruitment campaign alongside neighbouring authorities in August 2014. The service should continue to progress this.

Carers we spoke to told us that they would benefit from a buddy system where more experienced carers mentored and supported carers who were less confident and less experienced. Carers we spoke to told us this would support them in the fostering role to achieve their potential.

Whilst we found statutory checks were up to date we did not find evidence of annual health and safety checks being carried out, or updated risk assessments being completed. We also did not find evidence of safer caring policies being in place. We thought the completion of these checks would better support high quality foster care placements.

Whilst the service was completing reviews in line with statutory requirements best practice would support annual reviews. This was discussed with the service and a recommendation was made. **(See recommendation 1).**

We found that where medication was being administered to young people using the short breaks service, the method used was not in line with best-practice guidance and up to date knowledge. This was discussed with the service and a recommendation was made. **(See recommendation 2).**

We found variable practice with regards to the provision of the short breaks service with regards to the completion of placement agreements, identification of respite dates and agreed visiting patterns of young people on short breaks. The service should further develop their systems and guidance around supporting short breaks placements to ensure consistent practice and positive outcomes for young people and their families in realising their potential.

The service self-identified that they will continue to develop their training strategy in line with the National foster care review, which we felt was good practice.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 2

Recommendations

1. The provider should ensure that each year the agency reviews your performance and the quality of care you provide and a review meeting is held with your supervising social worker.

National Care Standards for Foster care and Family Placement services Reviews Standard 10:1.

2. The provider should ensure that staff use methods that reflect up-to-date-knowledge and best-practice guidance, and that the management are continuously striving to improve practice.

National Care Standards for Foster care and Family Placement Services Management and Staffing Standard 13:3.

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths

The strengths highlighted in 1.1 are also relevant to this statement. In addition we found that foster carers had been actively involved in the recent recruitment of supervising social workers. Carers told us that they valued this experience and had put a lot of thought into the questions that they felt would be appropriate and relevant at the interviews.

Areas for improvement

The service should further develop the opportunities for young people to be involved in assessing and improving the quality of staffing.

The areas for improvement highlighted in 1.1 are also relevant to this statement.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

At the time of the last inspection we awarded a grade of very good. At the time of this inspection we found that the practice of the service continued to meet a grade of very good despite the continued staff shortages.

The service told us of the impact of the continued staff shortages and some of the challenges this had brought. The service had for a significant length of time been without a fully staffed team. **(See areas for improvement).**

At the time of the inspection we found the staff team to be enthusiastic, motivated and knowledgeable about fostering work. New members of staff and agency workers told us they were well supported by the experienced members of staff - they were provided with a good induction enabling them to have a good awareness of what was expected of them and what resources were around in the local area to support young people and carers. Foster carers we spoke to told us they felt well supported by the staff team although not all carers had an allocated worker at the time of the inspection. **(See areas for improvement).**

The service told us all qualified staff members were registered with the Scottish Social Services Council, which is the regulatory body for social service workers in Scotland (www.sssc.com). We found all staff members we spoke with had a good awareness of the codes of conduct and the National Care Standards.

The staff team told us and we confirmed that there were regular staff team meetings which ensured staff members were kept up to date with what was happening in the service and supported good communication about the needs of the people being supported by the service. The staff team meetings and staff team away days also allowed an opportunity for practice discussion which supports development and the use of best practice. The staff team told us how the away days allowed the identification of areas for improvement and we found that the team plan and action timescales were developed out of them. Some of the actions had been constrained due to staff shortages.

The staff team told us they had good access to external and internal training opportunities and protected time for self-study days and to complete their post registration training and learning (PRTL). This should support them to do their job with an awareness of up to date guidance, legislation and best practice. This should ensure positive outcomes for people using the service.

All of the staff we spoke to told us they were provided with an employee review and development appraisals with identified goals. We found evidence that these goals were being actioned.

The staff team had good opportunities for leadership roles and we found that training was available to enable the staff team to develop their leadership skills. We found that the service was committed to encouraging leadership at all levels.

Achievements were celebrated within the service with an annual social work achievement ceremony being in place. This should enable staff members to feel respected and their contributions valued.

Staff members told us that a good supervision structure was in place with protected time being identified to allow regular supervision to take place including for sessional and agency workers. Outwith this the staff members we spoke to told us they had access to advice and guidance as required. The staff team worked well together and were keen to protect their opportunities for reflective discussion within the team, recognising the value of this in supporting them to carry out the complex work of a fostering service. All of this contributed to the staff team feeling well supported despite the high workload they were carrying.

Placing social workers told us the communication with the wider social work team was of a very good quality and they felt up to date with what was happening in the service. We found that the workers from the wider social work team were supporting the work of the fostering service more fully in the interim due to the staff shortages and we found that there was high team morale.

Foster carers told us that the service they were receiving from placing social workers was of a very high quality and they felt well supported. Identified workers were allocated to wider locality areas which we felt should support good communication once the team was fully staffed. We found that the staff team had good links with neighbouring authorities allowing benchmarking and sharing of best practice.

Areas for improvement

At the time of the inspection the staff team were working with high workloads, impacting on some of the developmental aspects of their team plan. The foster carers we spoke to told us of the impact of not having an allocated worker for lengthy periods due to the long-term staffing challenges which have affected the team. However, they continued to feel that they had support and spoke positively of the support being provided from placing social workers.

Some of the work of the fostering service was being delayed due to the need to prioritise other pieces of work to ensure all of the people using the service continued to experience a safe, supportive, fostering environment. The service would be more able to continue to grow and improve if fully staffed. The service self identified this as a priority area and were in the process of resolving the staff vacancies.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

The strengths highlighted in 1.1 and 3.1 are also relevant to this statement. In addition we found that the management and leadership was visible and accessible, carers knew who they were and how to contact them if they were unhappy with any aspect of the service they were being provided.

Annual information sessions are held between carers and management which kept everyone up to date with what was happening in the service. Staff members told us they felt that the dialogue between management, staffing and people using the service was of a very good quality allowing areas for improvement to be more easily identified.

Areas for improvement

The areas for improvement highlighted in 1.1 and 3.1 are also relevant to this statement.

At the time of the inspection the annual report for the service had not been completed. Carers told us that whilst they felt their view was always asked for they were less clear on what happened with this information and welcomed feedback on what the service had done following their suggestions. This was discussed with the service and was self identified as an area for improvement which had not been actioned due to staffing shortages and a need to prioritise other areas of work.

A recommendation was made. **(See recommendation 1).**

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The provider should ensure that information (for example annual reports) is produced describing the performance of the agency.

**National Care Standards for Foster Care and Family Placement services
Standard 13:7 Management and Staffing.**

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

We looked at this statement at the time of the last inspection and assessed that the Agency had very good systems in place to support the quality of work they did. During this inspection we assessed that quality assurance continued to be of a high quality.

Staff confirmed that policies and procedures governing their work remained relevant and supported consistent practice across the local authority.

During this inspection we attended a fostering panel and found it continued to provide an important quality assurance measure for the service. We also received some individual feedback from panel members. The panel was chaired independently. Since the last inspection, the Agency had made good efforts to recruit a male panel member and at our observation of the panel a prospective male panel member was also observing.

Panel members were well prepared for discussion and had highlighted issues they wished to explore further. Regular meetings with the Agency Decision Maker and Service Manager who managed the Fostering and Adoption Services ensured that any issues in relation to practice, quality of reports or the quality of planning could be shared with the service.

Since the last inspection, some panel members had attended training which was seen as relevant to their role.

The Agency had an effective system in place for tracking children in need of alternative permanent care. The permanence monitoring group met monthly and identified where action was needed to progress planning for children. All staff we spoke to told us they were aware of the overview of their work and stated that support was offered to progress plans where necessary.

The service had produced a team plan which detailed the priorities of the team for 2014/2015. The team plan aligned with the overall service plan. All staff we spoke to were aware of the priorities for the service.

Regular attendance at BAAF, the North East Consortium and ADSW (the professional association for local authority social work managers) and membership of national organisations such as fostering network provides opportunities to share practice and benchmark the service.

We found that the service had in place a structure to self evaluate the service which included surveys to gather views and also a drop in day to focus on gathering views and evaluating the work of the service. Both of these opportunities were provided to foster carers and other stakeholders and carers we spoke to advised that they valued these opportunities.

In order to quality assure practice the service had in place foster carer diaries to encourage reflection, and to ensure accurate recording of information. Regular recorded supervision for both staff members and carers with a developed consistent pro forma and individualised foster carer written agreements were signed and up to date. All of this ensured that the fostering service had in place robust quality assurance systems aimed at safeguarding people using the service.

On occasion the service required to use independent fostering agencies to provide suitable placements for young people. We found the service had a good understanding of the positive outcomes associated with maintaining young people in their local area. We saw robust service agreements were in place for any young people placed with an independent fostering agency with regular communication taking place to ensure the placement continued to meet the young person's needs.

In situations where it was necessary for carers to go out with their approval, there was a robust system in place to safeguard all of the people using the service and ensure that senior managers had an overview of these situations, and they were regularly reviewed.

The service had in place an established pattern of regular liaison meetings where quarterly reports were provided by the 'Who Cares Scotland' worker which ensured children's rights remained a priority area and key themes were identified. This also enabled good communication and developmental work to support the rights of young people and gather their views which was being progressed at the time of the inspection.

The service had in place quality improvement officers, who had responsibility (alongside other responsibilities), for benchmarking, maintaining up to date practice and continuous improvement based on the latest research and evidence based practice, which we thought was good practice.

We found thorough and well attended meetings took place where a placement ended in an unplanned way which allowed for reflection and learning for the future to be gained. We found that these meetings allowed all of the significant people to put forward their view and focused on recommendations for future practice. This learning should support more positive outcomes for young people.

As highlighted in Quality Theme 1 Statement 1 the service had in place a regular, well established consultative forum for carers. We found that the membership for this was diverse including staff members from different parts of the organisation, including education, health, and external organisations. The carer representatives from this forum also met with senior managers quarterly for a direct communication about the service. This supported consultation with carers multi agency wide and supported the corporate parenting agenda.

In this inspection we found that there had been one new private fostering arrangement in which the service had ensured all checks and assessments were thoroughly completed.

We found exit interviews were being offered to young people leaving foster care and one of the examples we looked at highlighted a very positive outcome for a young person who felt listened to, respected, and included in discussions about their care plan and care experience. Action had been taken to make improvements based on the young person's experience and we felt that this was an effective quality assurance system.

Senior managers had an overview of multiple moves for young people, and where there had been more than three since the young person was accommodated a quarterly report was generated which allowed senior managers to look at this further. Evidence based practice indicates that multiple moves for young people are associated with poorer outcomes.

Educational attainment reports were also being generated for monitoring purposes. This allowed senior managers to know at a glance whether young people who were looked after, and accommodated, or who had been in the last year required further support to ensure positive outcomes educationally. We felt that this was good practice.

Areas for improvement

Panel membership could be more diverse. At the panel we observed although the chair was independent all other members were employees of Perth and Kinross Council.

The service should continue to try to recruit more panel members including people who have had direct experience of fostering either as a carer or as a care experienced adult. **(See recommendation 1 made under quality Theme 4, Quality Statement 4).**

At the time of the last inspection, we made a recommendation in relation to panel supervision and appraisal. The manager of the fostering service and the independent chair of the panel agreed that group supervision of panel members would take place four times each year at panel development days. We will continue to monitor this at the next inspection.

We spoke with foster carers in relation to attending the panel and they told us that more information about the panel members would be helpful. We saw that panel profiles had not been developed which may enable foster carers to feel more included in the panel process.

We found that where reviews were taken place internally outwith the panel process, these were not being accurately and fully recorded. This was discussed with the service and a recommendation was made. **(See recommendation 2 under Quality Theme 4 Statement 4).**

The service self identified a wish to make use of chronologies in the assessment and supervision of foster carer, we felt that this would be in line with best practice and supports safeguarding of young people and carers.

In conclusion we noted a strong management presence within the agency with an effective overview of the work of the service. Where there were issues, these were identified and addressed in a systematic manner. This has informed the grade of very good for this statement.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 2

Recommendations

1. The service should continue to ensure that panel membership is diverse, representing a mix of skills, a gender balance, independent members and people with direct experience of adoption.

National Care Standards, for Foster Care and Family Placement Services, Standard 13: Management and staffing.

2. The provider should ensure that the recording of the review meeting and its outcomes is an accurate and full record covering the guidance contained in the Looked after Children (Scotland) Regulations 2009.

National Care Standards, For Foster Care and Family Placement Services Standard 11.9 Reviews.

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 4 - Good	
Statement 1	5 - Very Good
Statement 2	4 - Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 5 - Very Good	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

6 Inspection and grading history

Date	Type	Gradings
6 Jun 2013	Announced	Care and support 4 - Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
11 Aug 2010	Announced	Care and support 5 - Very Good Staffing Not Assessed Management and Leadership 5 - Very Good
2 Oct 2009	Announced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 4 - Good
11 Sep 2008	Announced	Care and support 5 - Very Good Staffing 4 - Good Management and Leadership 3 - Adequate

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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eForms Document

SCSWIS Action Plan Adoption, Fostering and Childcare Agencies

Perth & Kinross Council - Fostering Services

CS2004083801

General Information

General Information about the Inspection

Inspected by:	Pauline Cochrane
Type of Inspection:	Announced (Short Notice)
Inspection Completed on (date):	Wednesday 2nd July 2014

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Requirements

Recommendations

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Requirements

Recommendations

1

The provider should ensure that each year the agency reviews your performance and the quality of care you provide and a review meeting is held with your supervising social worker.

National Care Standards for Foster care and Family Placement services Reviews Standard 10:1.

Action Planned:

Although the reviews were within statutory timescales they did not meet the usual good practice as a result of decreased staffing within the team. There is a plan in place for this to be rectified by the end of the year 2014.

Timescale:

DEC 2014

Responsible Person:

Debbie Gillespie

2

The provider should ensure that staff use methods that reflect up-to-date-knowledge and best-practice guidance, and that the management are continuously striving to improve practice.

National Care Standards for Foster care and Family Placement Services
Management and Staffing Standard 13:3.

Action Planned:

There is an ongoing period of induction for the 5 new team members which will look at their training needs and identify these as part of their ongoing development. The team will continue to use their CPD time to look at best practice.

Timescale:

March 2015

Responsible Person:

Debbie Gillespie

We ensure that service user's health and wellbeing needs are met.

Requirements

Recommendations

We use a range of communication methods to ensure we meet the needs of service users.

Requirements

Recommendations

We respond to service users' care and support needs using person centered values.

Requirements

Recommendations

People who use, or would like to use the service, and those who are ceasing the service, are fully informed as to what the service provides.

Requirements

Recommendations

Quality Statement 3.1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Requirements

Recommendations

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Requirements

Recommendations

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Requirements

Recommendations

We ensure that everyone working in the service has an ethos of respect towards service users and each other.

Requirements

Recommendations

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Requirements

Recommendations

1

The provider should ensure that information (for example annual reports) is produced describing the performance of the agency. National Care Standards for Foster Care and Family Placement services Standard 13:7 Management and Staffing.

Action Planned:

Due to staffing shortages the annual report was not completed this year. This will be in place next year with a self-evaluation planned for November and then an annual report and improvement plan produced by March 2015.

These reports will be shared with the service users who will also be involved with the self-evaluation.

Timescale:

March 2015

Responsible Person:

Linda Richards

We involve our workforce in determining the direction and future objectives of the service.

Requirements

Recommendations

To encourage good quality care, we promote leadership values throughout the workforce.

Requirements

Recommendations

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Requirements

Recommendations

1

The service should continue to ensure that panel membership is diverse, representing a mix of skills, a gender balance, independent members and people with direct experience of adoption. National Care Standards, for Foster Care and Family Placement Services, Standard 13: Management and staffing.

Action Planned:

Panel membership has recently increased with ongoing developments planned

Timescale:

March 2015

Responsible Person:

Linda Richards

2

The provider should ensure that the recording of the review meeting and its outcomes is an accurate and full record covering the guidance contained in the Looked after Children (Scotland) Regulations 2009.

National Care Standards, For Foster Care and Family Placement Services
Standard 11.9 Reviews.

Action Planned:

The format on which the review is recorded is to be revised with a training session planned for those who chair the reviews.

Timescale:

Dec2014

Responsible Person:

Linda Richards

Submission Declaration

Declaration I confirm that by submitting this action plan I have the authority of the service provider to complete the action plan.

Name:

Linda Richards

I am: (Select an option)

The manager of the service / The owner of the service



Care service inspection report

Perth & Kinross Council - Adoption Service

Adoption Service

Colonsay Resource Centre
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Type of inspection: Announced (Short Notice)

Inspection completed on: 2 July 2014

Contents

	Page No
Summary	3
1 About the service we inspected	5
2 How we inspected this service	7
3 The inspection	11
4 Other information	23
5 Summary of grades	24
6 Inspection and grading history	24

Service provided by:

Perth & Kinross Council

Service provider number:

SP2003003370

Care service number:

CS2004080884

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	4	Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	4	Good

What the service does well

We assessed that the agency had developed a very effective system for planning for children in need of adoption. Direct work with Children in relation to preparing them for adoption was of a particularly high standard.

Adopters told us about the excellent quality of staff within the service even where there had been staff turnover and new link workers had been introduced.

Staff told us about the good quality of supervision and training they received.

What the service could do better

The agency could better communicate their participation strategy and tell adoptive families when their views would be sought and how any actions taken as a result of their feedback would be communicated.

Post adoption support planning could be developed further.

The handbook and information pack should be updated.

An adoption service report should be produced annually to detail the work of the agency and the panel.

What the service has done since the last inspection

There has been a number of staff changes within the last year. It is to the credit of the agency that the high quality of their work has continued and outcomes for children have remained positive.

Conclusion

Perth and Kinross council continued to provide a valuable resource for children in need of adoption in the local area. The staff team and the team leader were knowledgeable, skilled and motivated to achieve positive outcomes for all service users. The service was committed to continued improvement and developing as a team.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information in relation to all care services is available on our website at www.scswis.com.

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve, we may make a recommendation or requirement.

A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Perth and Kinross council provides an adoption service for children, young people and their families who are assessed in need of this service. The functions of an adoption service are detailed in the Adoption and Children (Scotland) Act 2007.

These functions are:

- to assess children who may be adopted
- to assess prospective adopters
- to place children for adoption
- to provide information about adoption and
- to provide adoption support services.

The permanence team has the main responsibility for fulfilling the duties of the adoption agency although some assessment of children's needs for adoption remains within the locality teams. The registered manager of the service has responsibility for overseeing permanence planning within the council and as such oversees all functions of the adoption agency.

Since the last inspection, the team manager for the permanence team has retired and a new team manager has recently taken up the post. There has also been significant staff turnover with some staff being seconded into the team. It is our opinion that staff changes have had some impact on participatory opportunities for adoptive families using the service.

A new Head of Service who will be the Agency Decision Maker has just been appointed.

At the time of the most recent annual return (January 2014), the agency had six approved adopters, four of whom had been approved within the year. Nine children had been registered as in need of adoption and five children had been placed with an adoptive family within the year.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 4 - Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - Grade 4 - Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report after an announced inspection which took place between Tuesday 23 June 2014 and Wednesday 2 July 2014. The inspection was undertaken by an Inspector. An inspection of the fostering service took place at the same time.

As requested by us, the Adoption service sent us an annual return. They also completed a self-assessment of their service prior to the inspection starting.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents including:

- evidence from the services most recent self-evaluation
- evaluations of the service collected by the service
- surveys completed by panel members and panel chairpersons for the Care Inspectorate
- adopter's files
- children's files.

We had discussion with:

- the manager of the adoption agency, the improvement officer and the team manager of the permanence team
- staff within the family placement team
- children's social workers
- adopters.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

What the service has done to meet any recommendations we made at our last inspection

Two recommendations were made at the time of the last inspection both in relation to the Adoption panel.

We noted that the service had taken action in respect of both recommendations.

In relation to supervision of panel members, the service has arranged future development days where as a group, panel members can reflect on their operation as a panel.

We will continue to monitor this at the next inspection.

In relation to diversity in panel membership, the service had attempted to take action in respect of this however a positive outcome had not as yet been achieved.

We have made another recommendation in respect of this.

(See recommendation made under Quality Theme 4, Quality Statement 4).

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The self assessment had been completed on a satisfactory standard and identified what the service did well and some areas for improvements.

Taking the views of people using the care service into account

We spoke with three adoptive families as part of this inspection. There was a high level of satisfaction with the service and some adopter views are contained within the body of the report.

Taking carers' views into account

We did not speak with relatives or carers as part of this inspection.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

We looked at this statement at the time of the last inspection and assessed that there were good opportunities for adopters to make comments about the quality of support within the service. During this inspection, we confirmed that many of these opportunities continued.

We looked at the website which could be accessed for people who wished to adopt in the Perth and Kinross Council area. We thought that this provided basic information about the Adoption Agency and welcomed further enquiries. Most adopters told us they found the website easy to navigate particularly since it had been updated.

The council had developed a participation strategy which communicated the council's commitment to listening to people who use services. As part of the participation agenda, the service had updated questionnaires for use by adopters. These asked for views from adopters about their preparation and we could see how their views could influence future training events.

New questionnaires had been developed in relation to the recruitment process and again for their reflections on the period from recruitment through to the conclusion of the adoption service. However, this was still at a very early stage.

Adoption support groups had recently been re-established. These offered adopters and prospective adopters the opportunity to raise any issues which were important to them for discussion and for further learning. The support group held in December 2013 had supported adoptive families to raise issues they might want more information on or to discuss further.

A range of information was sent to people who used the adoption agency. Information packs were sent to prospective adopters, adoption handbooks were available once approved as adopters and the agency were in the process (near conclusion) of developing information leaflets in relation to attending the adoption panel for children, adopters and birth parents. We noted that adopters had been involved in developing the adoption handbook.

All the adopters we spoke with confirmed that they had been actively involved in their assessment. Many Form F reports contained direct comments by the adopters. The Form F is a proforma developed by the British Association of Adoption and Fostering and is used to assess the capacity of prospective adopters to provide good quality homes for children. This ensured that the final report being considered by the panel formed an accurate account of the adoptive family including any specific areas in relation to meeting children's needs.

Adopters told us about the skilled staff carrying out these assessments, and one stated:

- "(Our worker) was really good - it was like having a conversation - it was seamless."

Adopters had time to reflect on the finished assessment and make any changes. Adopters also told us they were aware that they could contact the agency at any time for support.

Children's views were recorded within assessment reports. Where children were too young to express their views, observations on their relationships, behaviour and play were well documented. This gave an indication of their attachments and could influence planning.

Older children could express their views through the 'Looked After Child Review' system (LAC). We confirmed that children's views and those of their parents were carefully recorded within review minutes.

We saw that birth parents were routinely invited to meetings considering their children's future and were given appropriate assistance such as the use of advocacy service to make sure that they could express their views.

The service presented evidence of their complaints procedure which detailed the role the Care Inspectorate had in investigating complaints.

Areas for improvement

The adoption agency told us of their plans to continue to develop their practice. This included their practice around supports to birth parents and their practice around post adoption support planning. They also planned to seek the views of service users, colleagues and stakeholders to inform a wider self-evaluation of the agency.

The participation strategy was not well publicised within the service and was in need of updating. It would be useful for the participation strategy to detail at which points in the process and how service user views would be sought. This should also detail how conclusions of any surveys and the action planned by the service. The service told us that over the next year they planned to further develop the participation strategy and share this with people who used the service.

We noted that the adoption handbook and initial information sent to prospective adopters was in need of some updating to reflect current legislation. The service told us that there was a plan to discuss updating the initial information within the next few weeks. The service acknowledged the need to review the information in the Adoption handbook.

In conclusion we assessed that in relation to care and support issues, adopters had opportunities to raise issues individually and the Agency was likely to take action in respect of these. We noted a motivation by the agency to improve participatory opportunities which perhaps had been delayed due to a high staff turnover. However, we noted that the agency continued to be operating at a good level in relation participation.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 2

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Service strengths

We assessed that Perth and Kinross Council was committed to finding families for children in need of adoption. Good links had been made with neighbouring Local Authorities, the North East Consortium and the Adoption Register which meant that children could access a range of adoptive families. Staff had attended adoption exchange days throughout Scotland seeking appropriate families for their children.

Form F assessments were well written and contained relevant information about the capacity of the family to meet children's needs. The Form F is a proforma produced by the British Association of Adoption and Fostering (BAAF) which is widely used by Adoption Agencies when assessing the suitability of adoptive families. Adopters told us that the quality of preparatory training they received supported them to meet the needs of the children they were adopting.

Form E Assessments were generally well written and provided clear information about the child's history and an analysis of why adoption was needed. The Form E is a proforma produced by the British Association of Adoption and Fostering (BAAF) which is widely used by Local Authorities when assessing a child's needs for permanence.

Staff were supported to complete assessments and all the children tracked as part of this inspection had their Form Es completed within 12 weeks which is considered best practice. In general we saw very effective procedures within the agency in relation to planning for children. Timely assessments, parallel planning and regular reviews of plans ensured that planning was dynamic and aimed at reducing drift and delay.

Matching and linking of children with families was thorough, transparent and informative. Evidence was presented where information days had been hosted. The detail of information given to adopters from the Agency Medical Advisor, foster carers and other staff was viewed by adopters as extremely helpful. Good levels of information support adopters to make informed decisions about being able to provide good quality care for children.

Arrangements for children to move to their adopters was handled sensitively and regularly reviewed to ensure that all was going well. Adopters spoke about the very good care foster carers had given to children and the excellent relationships they had built with them.

One adopter told us where the child lived at a distance that the agency had rented self catering accommodation to support them during what can be a very stressful and emotionally tiring time. This helped them to relax at the end of a day and provide a more "natural" play environment for their child during introductions.

All the adopters we spoke with were aware of the agreed level of contact with birth families. Most contact took place indirectly. Life story work was undertaken with children as part of the process of adoption and was of an extremely good quality. Life story work supports the child to make sense of their journey into adoption. Such work also supports the adopters to have a coherent sense of the child's journey so they can answer questions and support the child in developing a sense of identity.

Generally we saw that children being adopted were supported to achieve positive outcomes. We were told about work being undertaken with children and adopters at various stages of their lives post adoption to promote stable placements.

Areas for improvement

The service told us of their intention to continue to recruit a range of adopters to meet the needs of their children in need of adoption.

Policies were in place in relation to post adoption support plans but we did not see any plans in evidence. Although we did not see poor outcomes as a result of plans not being in place, the agency should follow their own policy statements in this regard.

In conclusion we thought that some areas of practice in this quality statement were exemplary particularly in relation to planning for children in need of adoption and in preparing children to move to their new families. As a result, outcomes experienced by children in Perth & Kinross were of a very high quality. Post adoption planning could be developed further and this has informed the grade of very good.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths

We considered this statement at the time of the last inspection and assessed that there were good opportunities for adopters to make comments about the quality of staffing within the service. Since that time we noted that the service had improved participation in this area and now directly involved adopters in the recruitment of staff. One adopter who had been involved in staff recruitment told us they had felt a full member of the team and that their views had been appropriately considered. This helped them to feel a valued contributor to the team.

Strengths highlighted in Quality Theme 1, Quality Statement 1 are also relevant to this statement.

Some adopters had been involved in sharing their experiences of adoption with other adopters during preparation training.

Second opinion visits offered prospective adopters an opportunity to speak directly with the manager of the permanence team and to make comments about the quality of work undertaken by their supervising social worker

Areas for improvement

The service told us of their plans to introduce 360 degree appraisal processes where staff are to be involved in appraising their colleagues. We thought the service might consider how adoptive families could be involved in this process.

In conclusion we assessed that adopters were routinely involved to some degree in assessing and improving staffing within the agency. We recognised a high standard of performance in this area which has informed a grade of very good.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

We looked at this statement at the time of the last inspection and at that time we assessed that the staff group were operating at a very good level. During this inspection we noted that many of the strengths of the staff team continued to be in evidence.

Following some quite significant changes within the staff group, at the time of the inspection, we saw a team who were professional, motivated and confident in their work. All staff who required to be registered with the Scottish Social Services Council (SSSC) were registered. The SSSC is the regulatory body for workers working in social care settings (www.sssc.com).

Staff told us they regularly received supervision of a good quality and this supported them to discuss case management issues and reflect on their practice. All staff who had been employed for more than a year had a Professional Development Plan (PDP) in place and this identified development goals for the year. Supervision and appraisal processes were well established within the Agency. Staff were particularly pleased with the focussed approach of the new team manager to supervision.

All staff told us that they had very good access to training both internally and externally through bodies such as the North East Consortium and BAAF. We noted staff had taken part in training in relation to practice teaching, attachment as well as other relevant training courses.

There was a well established and well used resource library which supported staff in their work and assisted to keep up to date with emerging research and good practice. This was added to regularly with the team having a budget to buy in materials. Materials were actively shared with colleagues in fieldwork teams. We saw a culture of learning within the organisation with regular forums covering areas of adult attachment and life story among others. All teams within the children's services had regular development days throughout the year.

Team meetings were held regularly and ensured that staff were able to share their views and practice in relation to key areas of their work. Staff could contribute to team meeting agendas and there was a clear expectation that staff would attend meetings. Staff were particular pleased that time was protected for staff discussion rather than information sharing which was disseminated by email.

Good links had been established with a number of agencies such as BAAF, Adoption UK and other neighbouring authorities. This allowed for the sharing of good practice.

All the adopters we spoke with told us that they thought their supervising social workers were knowledgeable and skilled in their work and as a result they felt well supported.

Areas for improvement

As part of the inspection we sampled some records of staff supervision. We noted that records had not been kept in all instances of supervision meetings. Keeping a full record of supervision supports information about discussions, agreed courses of action and reflection on decision making. We noted that the service has now entered into supervision agreements with staff which confirm that all supervision meetings would be recorded.

In conclusion we assessed that despite significant staff changes, staff had continued to be professional, motivated and committed in their work and continued to actively promote positive outcomes for children. This has informed the grade of very good for this statement.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

We considered this statement at the time of the last inspection and assessed that there were good opportunities for adopters to make comments about the quality of staffing within the service.

Strengths highlighted in Quality Theme 1, Quality Statement 1 and Quality Theme 3, quality Statement 1 are also relevant to this statement.

We evidenced adopter involvement in wider service development such as producing the adoption handbook but this had happened some time ago.

Managers within the service were visible and accessible. Adopters we spoke with knew how to make a complaint if they were unhappy with any aspect of the service.

Areas for improvement

The service told us they planned to continue to seek the views of adoptees as to the quality of the service provided.

The adoption handbook was out of date and we noted that adoption support groups and outcome focussed questionnaires detailing a user view of the service were only recently introduced. Although we noted a clear motivation of the service to include adoptive families in developing the service this was not as developed as perhaps the service would have liked.

Although the service normally produced an Annual Plan they had not been able to do so this year due to changes in staff.

The Annual Plan is an opportunity to tie together many strands of quality assurance, report on feedback about the quality of the service and to inform the service development plan (or team plan). **(See recommendation made under Quality Theme 4, Quality Statement 4).**

In conclusion, although many of the previous participatory opportunities had been put on hold, we noted that these were in the process of being restarted. We noted that the agency continued to be operating at a good level in relation participation.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service should produce an annual report to inform service users and stakeholder about the work of the agency and the priorities for further developing the agency.

National Care Standards: Adoption Agencies, Standard 32: Providing a Good Quality Service.

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

We looked at this statement at the time of the last inspection and assessed that the Agency had very good systems in place to support the quality of work they did. During this inspection we assessed that quality assurance continued to be of a high quality.

Staff confirmed that policies and procedures governing their work remained relevant and supported consistent practice across the local authority.

The adoption panel continued to provide an important quality assurance measure for the service. Although we did not attend an adoption panel during this inspection, we did attend a fostering panel. We also received some individual feedback from panel members. The panel was chaired independently. Since the last inspection, the Agency had made good efforts to recruit a male panel member and at our observation of the panel a prospective male panel member was also observing.

Panel members were well prepared for discussion and had highlighted issues they wished to explore further. Regular meetings with the Agency Decision Maker and Service Manager who managed the Fostering and Adoption Services ensured that any issues in relation to practice, quality of reports or the quality of planning could be shared with the service.

Since the last inspection, some panel members had attended training which was seen as relevant to their role.

The Agency had an effective system in place for tracking children in need of alternative permanent care. The permanence monitoring group met monthly and identified where action was needed to progress planning for children. All staff were aware of the overview of their work and stated that support was offered to progress plans where necessary.

The service had produced a team plan which detailed the priorities of the team for 2014/2015. The team plan aligned with the overall service plan. All staff were aware of the priorities for the service.

Regular attendance at BAAF, the North East Consortium and ADSW (the professional association for local authority social work managers) provides opportunities to share practice and benchmark the service.

Areas for improvement

Panel membership could be more diverse. At the panel we observed although the chair was independent all other members were employees of Perth and Kinross Council. The service should continue to try to recruit more panel members including people who have had direct experience of adoption. **(See recommendation made under quality Theme 4, Quality Statement 4).**

At the time of the last inspection, we made a recommendation in relation to panel supervision and appraisal. The manager of the adoption service and the independent chair of the panel agreed that group supervision of panel members would take place four times each year at panel development days. We will continue to monitor this at the next inspection.

We spoke with adopters in relation attending the panel and they told us that although the panel were seen as welcoming, more information about the panel would have been helpful. We saw that panel profiles had not been developed and that leaflets for adopters were currently being printed.

In conclusion we noted a strong management presence within the agency with an effective overview of the work of the service. Where there were issues, these were identified and addressed in a systematic manner. This has informed the grade of very good for this statement.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service should continue to ensure that panel membership is diverse, representing a mix of skills, a gender balance, independent members and people with direct experience of adoption.

National Care Standards, Adoption Agencies, Standard 24: The Adoption Panel - How it works.

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 4 - Good	
Statement 1	4 - Good
Statement 2	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 4 - Good	
Statement 1	4 - Good
Statement 4	5 - Very Good

6 Inspection and grading history

Date	Type	Gradings
6 Jun 2013	Announced	Care and support 4 - Good Staffing 4 - Good Management and Leadership 4 - Good
11 Aug 2010	Announced	Care and support 5 - Very Good Staffing Not Assessed Management and Leadership 5 - Very Good
2 Oct 2009	Announced	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 4 - Good
11 Sep 2008	Announced	Care and support 5 - Very Good Staffing 4 - Good Management and Leadership 3 - Adequate

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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eForms Document

SCSWIS Action Plan Adoption, Fostering and Childcare Agencies

Perth & Kinross Council - Adoption Service

CS2004080884

General Information

General Information about the Inspection

Inspected by:	Lorna Black
Type of Inspection:	Announced (Short Notice)
Inspection Completed on (date):	Wednesday 2nd July 2014

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Requirements

Recommendations

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Requirements

Recommendations

We ensure that service user's health and wellbeing needs are met.

Requirements

Recommendations

We use a range of communication methods to ensure we meet the needs of service users.

Requirements

Recommendations

We respond to service users' care and support needs using person centered values.

Requirements

Recommendations

People who use, or would like to use the service, and those who are ceasing the service, are fully informed as to what the service provides.

Requirements

Recommendations

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Requirements

Recommendations

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Requirements

Recommendations

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Requirements

Recommendations

We ensure that everyone working in the service has an ethos of respect towards service users and each other.

Requirements

Recommendations

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Requirements

Recommendations

1

The service should produce an annual report to inform service users and stakeholder about the work of the agency and the priorities for further developing the agency.

National Care Standards: Adoption Agencies, Standard 32: Providing a Good Quality Service.

Action Planned:

The Annual Report will be completed by end of March 2015 and will identify within the Team Plan areas for improvement. This will be uploaded on to our Website for access by service users and interested parties.

Timescale:

March 2015

Responsible Person:

Claire Murrie

We involve our workforce in determining the direction and future objectives of the service.

Requirements

Recommendations

To encourage good quality care, we promote leadership values throughout the workforce.

Requirements

Recommendations

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Requirements

Recommendations

1

The service should continue to ensure that panel membership is diverse, representing a mix of skills, a gender balance, independent members and people with direct experience of adoption.

National Care Standards, Adoption Agencies, Standard 24: The Adoption Panel - How it works.

Action Planned:

Recent recruitment of panel members will address this to some extent with further recruitment being planned on an ongoing basis.

Timescale:

March 2015

Responsible Person:

Linda Richards

Submission Declaration

Declaration I confirm that by submitting this action plan I have the authority of the service provider to complete the action plan.

Name:

Linda Richards

I am: (Select an option)

The manager of the service / The owner of the service

