

## **DUNDEE CITY COUNCIL**

**REPORT TO: SCRUTINY COMMITTEE - 10TH JUNE 2010**

**REPORT ON: ANNOUNCED INSPECTION OF DUNDEE CITY COUNCIL FOSTERING SERVICE BY THE SCOTTISH COMMISSION FOR THE REGULATION OF CARE (THE CARE COMMISSION)**

**REPORT BY: DIRECTOR OF SOCIAL WORK**

**REPORT NO: 258 - 2010**

### **1.0 PURPOSE OF REPORT**

1.1 The purpose of this report is to report on the findings of the recent inspection of Dundee City Council's Fostering Service.

### **2.0 RECOMMENDATIONS**

2.1 It is recommended that the Scrutiny Committee:

- i notes the contents of this report
- ii requests that the Director of Social Work monitor the continued progress towards improving this service.

### **3.0 FINANCIAL IMPLICATIONS**

3.1 None

### **4.0 MAIN TEXT**

4.1 The Fostering Service was inspected between 11th and 20th January 2010 by the Care Commission. This was an announced inspection. At the time of the inspection there were 65 families providing short term or emergency care, 17 foster care families providing long term (permanent) care, and 2 families providing respite care. There were 144 children who were fostered with the Service, with a further 15 children in pre-adoptive placements at the time.

4.2 The Care Commission's process for inspection gathers information from a range of sources of evidence, including policies and procedures, self-evaluation, questionnaire results and meeting with management, staff, foster carers, children and young people, and field social workers. This inspection's focus addressed the following Quality Themes.

- Quality of Care and Support
- Quality of Staffing

4.3 Concerning the quality of care and support, the Care Commission reported that the service supported the participation of service users and carers in a number of ways, which had helped the service to improve the quality of care and support. This was done through,

- a carer evaluation questionnaire and carer review forms, which had helped the service to respond to carers' views about a range of issues including the carer training programme and care and support issues
- a regular carer newsletter
- a consultative group whereby carers can meet with the Service and Team Managers
- support groups for groups of carers
- carer representation on the Fostering Panel

- a forum for Looked After and Accommodated Children which had helped address issues such as contact arrangements, and who had produced a DVD about their circumstances
- 4.4 The Care Commission also inspected the service in respect of the response to service users' care and support needs using person centred values. The report commented positively about the thoroughness of assessments of prospective foster carers, provision of information to foster carers, the matching process, additional supports from health, education and other agencies such as Barnardos, and the progress in making permanent care plans.
- 4.5 The Care Commission highlighted areas for improvement and made 4 recommendations about care and support, i.e.,
- that the service should ensure that people who use the service are aware of the Social Work Department's User Involvement Strategy and its purpose and why the local authority has a commitment to getting people involved, and,
  - the service should continue to develop ways in which people can become involved in the service and use this information to inform improvement.
  - the service should ensure that health and safety risk assessments are updated at the point of any changes in the home situation, and,
  - the service should ensure that all children receive information about foster care and that the information is appropriate to their age and stage of development
- 4.6 In respect of these recommendations the service has prepared an Action Plan and is addressing these within the service.
- 4.7 Concerning the quality of staffing, the inspection noted that the service provided a range of ways in which opportunities were provided for service users to participate in assessing and improving the quality of staffing in the service. These included questionnaires, keeping carers informed, participation in training, and children's participation in LAC review meetings. Efforts to continue to involve carers, children and birth parents in the process of service improvement were noted by inspectors and are ongoing.
- 4.8 In relation to safe recruitment, this inspection was done at Corporate level across Dundee City Council. Whilst it noted that the Council's safer recruitment procedures were satisfactory, there were areas for improvement identified and there is one recommendation, i.e.
- that the provider audits the procedures for the recording of staff skills and qualification records

This is being dealt with at Corporate level.

4.9 **Quality Indicators**

The Care Commission uses a six-point scale for reporting performance:

6	Excellent
5	Very good
4	Good
3	Adequate
2	Weak
1	Unsatisfactory

A grading of 5 was awarded for the quality of care and support and a grading of 4 for quality of staffing.

## **5.0 POLICY IMPLICATIONS**

5.1 This report has been screened for any implications in respect of Sustainability, Strategic Environment Assessment, Anti-Poverty and Equality Impact Assessment and Risk Management.

There are no major issues.

## **6.0 CONSULTATION**

6.1 The Chief Executive, Depute Chief Executive (Support Services), Depute Chief Executive (Finance) and Head of Finance have been consulted in preparation of this report.

## **7.0 BACKGROUND PAPERS**

7.1 The following Background Papers were relied upon in preparation of this Report:

- Care Commission Inspection Report - Dundee City Council Fostering Service, January 2010

Alan Baird  
Director of Social Work

30th April 2010



# Inspection report

## Dundee City Council - Fostering Service Fostering Service

Social Work Offices  
Jack Martin Way  
Claverhouse East  
Dundee  
DD4 9FF  
01382 436006

<b>Inspected by:</b> <b>(Care Commission officer)</b>	Lorna Black
<b>Type of inspection:</b>	Announced
<b>Inspection completed on:</b>	20 January 2010

	<b>Page Number</b>
<b>Summary of this inspection report</b>	3
<b>Section 1: Introduction</b>	
About the Care Commission	6
About the National Care Standards	7
What is inspection?	8
How we decided what to inspect	10
What is grading?	11
About the service we inspected?	12
How we inspected this service	14
<b>Section 2: The inspection</b>	17
<b>Section 3: Other information</b>	
Other Information	28
Summary of Grades	29
Terms we use in our reports and what they mean	30
How you can use this report	32
People who use care services, their relatives and carers	32

**Service provided by:**

Dundee City Council

**Service provider number:**

SP2003004034

**Care service number:**

CS2005097782

**Contact details for the Care Commission officer who inspected this service:**

Lorna Black

Telephone 01382 207200 Lo-Call: 0845 6008331

Email [enquiries@carecommission.com](mailto:enquiries@carecommission.com)

## Easy read summary of this inspection report

---

We grade all the Quality Statements for a service at each inspection. Each grade describes how well we think the service is doing based on what we inspected.

We can choose from six grades:

 **6**       **5**       **4**       **3**       **2**       **1**  
excellent      very good      good      adequate      weak      unsatisfactory

### We gave the service these grades

Quality of Care and Support  **5** Very Good

Quality of Staffing  **4** Good

Quality of Management and Leadership      N/A

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

### What the service does well

The service are good at supporting their foster carers and keeping them informed about the service for example, support arrangements if workers are on holiday.

Foster carers, who were interviewed as part of the inspection, thought staff who worked in the service were knowledgeable and skilled in their jobs.

The service is also good at linking with other agencies to discuss wider

---

national issues such as implementing the new Adoption and Children (Scotland) Act 2007.

### **What the service could do better**

The service need to continue to share the corporate strategy about participation and ensure that foster carers, children and their parents are clear about how to express their views and why their views are important.

The service need to make sure that all children and young people have information about the fostering service and about other relevant contacts.

### **What the service has done since the last inspection**

The service has begun to plan how best to engage with service users in a meaningful way. They are in the process of developing systems to make sure that the views of foster carers, children/young people and their families are recorded in a way that they can be collated, analysed and used to improve the service.

### **Conclusion**

Dundee City Council Fostering service has continued to progress since the last inspection in a thoughtful way looking to establish systems that are meaningful to service users. This process takes time and cannot be established too quickly.

### **Who did this inspection**

#### **Lead Care Commission Officer**

Lorna Black

#### **Other Care Commission Officers**

Linda Horsburgh

#### **Lay Assessor**

Not applicable



**Please read all of this report so that you can understand the full findings of this inspection.**

## About the Care Commission

---

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: [www.carecommission.com](http://www.carecommission.com). Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

## About the National Care Standards

---

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: [www.scotland.gov.uk](http://www.scotland.gov.uk)

You can get printed copies free from:

Blackwells Bookshop  
53-62 South Bridge Edinburgh  
EH1 1YS  
Telephone: 0131 662 8283  
Email: [Edinburgh@blackwells.co.uk](mailto:Edinburgh@blackwells.co.uk)

## What is inspection?

---

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

## **Recommendations, requirements and complaints**

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

- 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.
- A requirement is a statement which sets out what is required of a care service to comply with the Act 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 Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

# How we decided what to inspect

---

## **Why we have different levels of inspection**

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

## **How we decide the level of inspection**

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

# What is grading?

---

We grade each service under Quality Themes which for most services are:

- **Quality of Care and support:** how the service meets the needs of each individual in its care
- **Quality of environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of staffing:** the quality of the care staff, including their qualifications and training
- **Quality of management and leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:

<b>6</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
excellent	very good	good	adequate	weak	unsatisfactory

We do not give one overall grade.

## How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

## About the service we inspected

---

Dundee City Council Fostering Service provides a family placement service for children and young people aged 0-18 years, who are assessed as in need of this care. The service recruits and supports carers and their families to provide a fostering service to a range of children throughout the area.

The service was registered with the Care Commission on 21 October 2005.

The service aims to provide a "unified fostering service that provides children and young people with a safe, stable and nurturing environment" such that children can "reach their potential" and have a "positive family life".

At the time of the inspection the service supported 17 foster care families providing long term (permanent) care, 2 providing respite care, and 65 providing temporary short term care. Six new carers had been approved from 1 January to 31 December 2008 and there were 13 new foster carer applicants currently undergoing assessment to become carers providing short and long term care.

Eighty seven children were in short term (temporary) foster care, 57 children were in long term (permanent) care and 15 children were in Pre adoptive placements. Ninety one new placements were made between 1 January and 31 December 2008 and 31 children were awaiting placements in the fostering service.

The annual return noted one private fostering arrangement but at the time of the inspection, the manager noted there were none. The council were aware of the government continuing to raise public awareness about private fostering arrangements and supported this by using government literature and posters. Their system of checking kinship care applications, helped them to identify where private fostering arrangements may exist.

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

<b>Quality of Care and Support</b>	<b>5 - Very Good</b>
<b>Quality of Staffing</b>	<b>4 - Good</b>
<b>Quality of Management and Leadership</b>	<b>N/A</b>

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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



You can use the "Care services" area of our website ([www.carecommission.com](http://www.carecommission.com)) to find the most up-to-date grades for this service.

## How we inspected this service

---

### **What level of inspection did we make this service**

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 activities did we undertake during the inspection**

This report was written following an announced inspection that took place between 11 January 2010 and 20 January 2010. The inspection was carried out by two Care Commission Officers.

As requested by us, the care service sent us an annual return. The service also sent us a self assessment form.

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

- Evidence from the service's most recent self evaluation
- Personal plans of people who use the service
- Results of service led questionnaires for foster carers (both temporary and permanent).
- Permanence Team Annual Report
- Discussions with various people including:
  - Manager of the service, the Fostering Team Manager and the Improvement officer
  - Family Placement Workers
  - The people who use the service (Foster carers and young people)
  - Field Social Workers

### **Inspection Focus Areas (IFAs)**

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2009/10 we will focus on:

- Meaningful activity for all adult services
- How care services assess the health of people with learning disabilities
- Involving parents for children's services
- Medication for looked after children for residential accommodation for children
- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

You can find out more about these from our website [www.carecommission.com](http://www.carecommission.com).

### **Fire safety issues**

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw)

### **Actions Taken on Recommendations Outstanding**

Five recommendations were made at the time of the last inspection. Progress made with three of these has been reported within the main body of the report. In relation to the two remaining, progress is as follows:

1. Regarding developing staff appraisals. The service had developed team and individual worker development plans. In addition all staff confirmed that they had regular supervision. The Agency planned to implement an appraisal system for staff during the year 2010/11.
2. Regarding the production of an annual report, the service was in the process of collating an annual report which would contain feedback from service users.

### **The annual return**

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care Act (Scotland) 2001, Section 25(1). These forms must be returned to us between 6 January and 28 February 2009.

### **Annual Return Received**

Yes - electronic

### **Comments on Self Assessment**

The self assessment was completed to a satisfactory standard and contained useful information for the inspection process.

### **Taking the views of people using the care service into account**

The views of three foster carers and two young people were considered as part of the inspection.

Foster carers had been given the opportunity to complete the service questionnaires, and the views expressed therein, were considered. The collated results and the analysis of the questionnaires were examined and contributed to the inspection findings.

Two young people whose files were tracked during the inspection spoke with the Care Commission Officer. Some of their comments included:

"It's all good here, I got pictures of the (foster carers) before I decided to move here and I get help to stay in touch with my family."

### **Taking carers' views into account**

The Care Commission Officers did not speak with birth parents as part of the inspection, due to individual circumstances. However their views were well recorded within the case files.

# Quality Theme 1: Quality of Care and Support

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 care and support provided by the service.

### Service Strengths

A range of evidence was sampled and the performance of the service was found to be very good. Service users generally experienced a service which supported participation in a number of different ways.

Corporately Dundee City Council had developed a User Involvement Strategy to promote involvement in the service by people who used the service. Staff were aware of their responsibilities in relation to supporting participation and as a result foster carers could become involved in the service in a range of ways:

- \* Annual service wide evaluation questionnaires through which foster carers could express their views about a range of areas. One outcome of the this was a more responsive carer training initiative.
- \* Further questionnaires allowed foster carers to comment on the quality of their assessment process including their attendance at the fostering panel.
- \* Carer reviews afforded carers, children and workers opportunities to comment on the quality of care provided for both children and foster carers. Following a recommendation at the previous inspection to promote more parental involvement, the service had developed questionnaires to be given to birth parents although these were not yet in use. The service were also in the process of developing the Foster Carer proforma in a format that could elicit views in a way which were more easily collated. Foster carers had been involved in this process.
- \* Service wide newsletters kept foster carers informed about what was happening in the service and invited them to become involved in service initiatives such as reviewing the foster care handbook.
- \* A consultative group had been formed, chaired by the service manager and considered wide ranging issues in relation to the service such as finance for foster carers and the out of hours service.
- \* Each link worker supported a group of foster carers who had determined the frequency and format of their own support groups.

\* Ex foster carers were represented on the Fostering panel and as such could make comment on a range of care and support issues.

Some comments from foster carers included:

"I am treated as a colleague - (the linkworker) is interested in what we have to say."

"My link worker is really good and makes me feel more confident as a carer."

Children had opportunities to comment on the quality of care and support within the service through various mediums:

\* The LAAC (Looked After and Accommodated Children) review provided a formal platform for young people and/or their family to express their views about various aspect of their care and support. Documented evidence supported that such things as contact arrangements had been changed as a direct result of the discussion at the LAAC review.

\* Corporately Dundee City Council had supported young people to produce a DVD highlighting what it was like to be looked after. This DVD will be extended to support training within the council.

### **Areas for Improvement**

The User Involvement policy was not well known by staff although all staff had an understanding of service user participation and the need for this to be promoted. On foster carer had commented that they would like to be involved more but were not sure how they could put this into action. The service should continue to publicise and promote how people can be involved in developing the service as a whole. (See recommendation 1 made under Quality Theme 1, Statement 1)

The service have identified the need to develop ways of collecting, collating and analysing the views of birth parents and children to better inform service development. This formed part of the recommendation at the previous inspection and the Care Commission would support the need to improve this area of the service as not everyone wants to participate in such things as questionnaires. (See recommendation 2 made under Quality Theme 1, Statement 1)

### **Grade awarded for this statement**

5 - Very Good

### **Number of Requirements**

0

### **Number of Recommendations**

2

## Recommendations

1.  
The service should ensure that people who use the service are aware of the User Involvement Strategy and its purpose and why the local authority has a commitment to getting people involved.  
National Care Standards, Foster Care and Family Placement Services, Standard : 13: Management and Staffing.
  
2.  
2. The service should continue to develop ways in which people can become involved in the service and use this information to inform improvement.  
National Care Standards, Foster Care and Family Placement Services, Standard : 13: Management and Staffing.

## **Statement 5**

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

### **Service Strengths**

A range of evidence was sampled and the performance of the service was found to be very good.

As a local authority, Dundee City Council had developed policies and strategies aimed at promoting a child centred focus.

Case files indicated that thorough assessments had been undertaken in respect of prospective foster carers. These included all relevant checks and used recognised assessment procedures. All foster carers in the sample had a health and safety risk assessment carried out on their home which had been reviewed annually at the carer review.

Information in respect of children was made available to foster carers at the start of the placement and young people were involved in planning the day to day arrangements for their care. The likely difficulties which may arise in the placement were detailed in risk assessments which were completed for each child.

Some degree of matching had taken place in respect of all three cases examined. In one case the young person had stayed with the foster carer previously and had asked to return there. In another the young person was moving from residential care and the transition process was managed very sensitively and at a pace set by the young person. This young person had been able to look at photographs of the prospective foster carers before moving which was considered to be an example of very good practice.

One foster carer noted the good level of support offered by a combination of the link worker and specialist nurse when looking after a young child with specific needs.

The service had formed a Permanence Planning group which met monthly to monitor the progress of all children identified as requiring a permanent placement. This endeavoured to ensure that any plans for children to move to permanent care were actioned as quickly as possible.

Children within the service had access to a range of additional and specialist supports such as additional supports from education, health other agencies such as Barnardos. One foster carer commented:

"I raised my concerns about (the child's) ability to do maths - the next day the educational support worker contacted me and then discussed the situation with the school."



Children's files indicated that contact arrangements and preferences about hobbies were well documented and supported within the foster care placement.

### **Areas for Improvement**

Health and Safety risk assessments were not always updated at the point of any changes. These documents should be dynamic reflecting any change in the home situation. (See recommendation 1 made under Quality Theme 1, Statement 5)

Some workers felt that although the Permanence Planning Group was a positive step to preventing delays in finding permanent families, there were some concerns raised in relation to maximising choices for children and parental preferences. The service could ensure that social workers are fully aware of the process and the families who are available.

The last inspection recommended that the information given to children should be developed further to ensure it remains relevant to them. Two of the children were over the age of 8 yet neither of the children interviewed were aware of receiving any information about foster care. They did not know about support organisations or how to contact them (See recommendation 2 made under Quality Theme 1, Statement 5)

**Grade awarded for this statement**

5 - Very Good

**Number of Requirements**

0

**Number of Recommendations**

2

**Recommendations**

1.

The service should ensure that health and safety risk assessments are updated at the point of any change within the home situation.

National Care Standards, Foster Care and Family Placement Services, Standard 2: Promoting Good Quality Care.

2.

The Service should ensure that all children receive information about foster care and that the information:

\* remains relevant to older children in a format they find useful and

\* is accessible to younger children and children with additional support needs either in pictorial format or using social stories.

Children and young people should participate in the development of information.

National Care Standards, Foster Care and Family Placement Services, Standard 1: Informing and Deciding

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

### Statement 1

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

#### Service Strengths

Information recorded under Quality Theme 1, Statement 1 has also been taken into account here.

Foster carers were asked their views about the quality of staffing within the service through a service wide questionnaire which had been distributed. This evidenced and foster carers confirmed that service users generally viewed the quality of staff as very good.

Foster carers who were members of the fostering panel had opportunities to make comment about the quality of work undertaken by staff within the service.

Case files evidenced examples of consultation with foster carers about changes to Link Worker hours and were kept informed about support when Link Workers were on holiday.

Foster carers were also involved in delivering a range of training within the service which staff and other foster carers attended.

Foster carers who formed part of the NAAG (New Adoption Act Group) were able to express their views about how best to inform staff about the new legislation.

Children could comment on the quality of staff through their LAAC reviews and the carer reviews. The DVD to be used in Staff training was a good opportunity to contribute to improving the quality of staff.

Having considered all of the evidence provided, the service was found to be providing good opportunities for service users to participate.

#### Areas for Improvement

The User Involvement policy was not well known by staff although all staff had an understanding of service user participation and the need for this to be promoted. One foster carer had commented that they would like to be involved more but were not sure how they could put this into action. The service should continue to publicise and promote how people can be involved in developing the service as a whole. (See recommendation 1 made under Quality Theme 1, Statement 1)

The service have identified the need to develop ways of collecting, collating and analysing the views of birth parents and children to better inform service development. This formed part of the recommendation at the previous inspection and the Care Commission would support the need to improve this area of the service as not everyone wants to participate in such things as questionnaires. (See recommendation 2 made under Quality Theme 1, Statement 1)

The provider planned to support more involvement from service users in directly improving the quality of staffing through recruitment activities.

**Grade awarded for this statement**

4 - Good

**Number of Requirements**

0

**Number of Recommendations**

0

## **Statement 2**

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

### **Service Strengths**

An audit of the service's safer recruitment policies and procedures has been carried out by the Care Commission and found to be satisfactory.

Generally the provider had taken time to prepare for the visit and files were well organised and presented.

The staff selection procedure was comprehensive and covered a range of issues such as application procedures, checking of fitness and the interview selection process.

There were good systems in place to manage situations where Disclosure Scotland Checks raised issues.

The audit of 100 files indicated that practice within the service ensured that an application form was completed, appropriate references and checks were requested and the aims and values of the service were explained.

There was evidence of very good processes in relation to assessing the medical fitness of prospective employees and the checking of references, particularly from the last employer.

There was a detailed induction process in place. Staff who had been recruited since the last inspection were positive about this process noting that it was helpful and appropriately geared to the individual.

### **Areas for Improvement**

The provider does not currently undertake three yearly Disclosure Checks for all employees but is planning to systematically introduce this over a period of time.

In some of the files examined, although it was recorded that a Disclosure Scotland check had been completed, it was unclear whether the Disclosure Scotland check required further action. The provider advised in these circumstances the information was considered by a recruitment panel and a decision was made in relation to the suitability of the applicant.

In some of the files examined there were no Disclosure checks for ancillary staff. The provider advised they had sought guidance from Disclosure Scotland who indicated these were not necessary. However, the decision to obtain Disclosure and at what level rests with the employing authority who should consider this in relation to the protection of vulnerable adults and children. There was also no evidence of risk assessments for those employees who had not had a Disclosure check.

There were some examples where staff had not completed additional application(s) forms when moving to other posts within the organisation notably from permanent contracts to supply posts. (See recommendation 1 made under Quality Theme 3, Quality Statement 1).

The organisation could improve consistency in their practice in relation to evidencing staff skills. For example some files contained photocopies of qualifications whilst others did not.

In some of the files examined identification information such as utility bills and passport information had been unnecessarily retained.

There was some evidence that staff skills had been identified for those who had transferred to the organisation. However, the information held was not consistent and in some cases there was no information. (See recommendation 2 made under Quality Theme 3, Quality Statement 1)

#### **Grade awarded for this statement**

4 - Good

#### **Number of Requirements**

0

#### **Number of Recommendations**

2

#### **Safer Recruitment - Inspection Focus Area (IFA) outcome**

The requirements and/or recommendations below reflect our view of the providers performance in meeting its legal responsibilities when recruiting staff and its compliance with best practice. This is as a result of an audit of the providers recruitment files.

#### **Recommendation**

1.

It is recommended that the provider ensure that a formal application process is followed for each period of employment.

Scottish Social Services Council Code of Practice - Employer 'Make sure people are suitable to enter the workplace - 1.1  
National Care Standards Foster Care and Family Placement Services, Standard 13: Management and Staffing

### **Recommendation**

1.

It is recommended that the provider audits the procedures for the recording of staff skills and qualification records.

Scottish Social Services Council Code of Practice - Employer 'Make sure people are suitable to enter the workplace. 1.1

National Care Standards Foster Care and Family Placement Services, Standard 13: Management and Staffing

## 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**

None.

### **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 Commission re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).



## Summary of Grades

---

<b>Quality of Care and Support - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 5	5 - Very Good
<b>Quality of Staffing - 4 - Good</b>	
Statement 1	4 - Good
Statement 2	4 - Good
<b>Quality of Management and Leadership - Not Assessed</b>	

## Inspection and Grading History

---

<b>Date</b>	<b>Type</b>	<b>Gradings</b>
28 Jan 2009	Announced	Care and support      5 - Very Good Staffing                      4 - Good Management and Leadership      4 - Good

## Terms we use in our report and what they mean

---

**Action Plan** - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

**Best practice statements/guidelines** - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

**Care Service** - A service that provides care and is registered with us.

**Complaints** - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

**Enforcement** - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

**Disclosure Scotland**- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

**Participation** - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

**Personal Plan** - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

## How you can use this report

---

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

## People who use care services, their relatives and carers

---

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

## The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

## Reader Information

This inspection report is published by the Care Commission. It is for use by the general public. You can get more copies of this report and others by downloading it from our website [www.carecommission.com](http://www.carecommission.com) or by telephoning 0845 603 0890.

## Translations and alternative formats

This publication is available in other formats and other languages on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

هه بايتسد سيم وونابز رگيد روا دولکش رگيد رپ شرازگ تعاشا هي

ਬੈਨੜੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

یرخأ تاغل بو تاقيسينت تب بلطلا دن ع رفاوتم روشنملا اذه.

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

**Telephone: 0845 603 0890**

**Email: [enquiries@carecommission.com](mailto:enquiries@carecommission.com)**

**Web: [www.carecommission.com](http://www.carecommission.com)**

Improving care in Scotland