



DERBY CITY COUNCIL

## CABINET MEMBER FOR CHILDREN AND YOUNG PEOPLE MEETING 17 JULY 2007

Report of the Corporate Director for Children & Young People

### ADOPTION AND FOSTERING INSPECTION REPORT

#### RECOMMENDATION

- 1.1 That the positive progress made in these two service areas is noted and acknowledged.
- 1.2 That the report is referred to the next meeting of the Corporate Parenting sub-commission for their information and comment.

#### REASON FOR RECOMMENDATIONS

- 2.1 There is an expectation from CSCI (now Ofsted) that reports of formal inspections are reported to Councillors.
- 2.2 In addition to formally reporting to the Cabinet member for Children and Young people the two service areas covered are of particular relevance to the manner in which the Council fulfils its corporate parenting responsibilities.

#### SUPPORTING INFORMATION

##### 3.1 Background

In November 2006 the department had its first joint CSCI inspection of the Fostering and Adoption services. Prior to this there had been four annual Fostering inspections and one Adoption inspection in March 2004. In future, inspections will be undertaken by the newly formed Ofsted inspection service, though the format and timing is not yet clear. Full copies of both inspection reports are available at <http://www.ofsted.gov.uk/portal/site/Internet/menuitem.e741949183f04e23b218d71008c08a0c?authorityID=831>

- 3.2 The inspection regime has changed its requirements on each occasion. The joint inspection evaluated overall against the five outcomes in 'Every Child Matters' and each service against the National Minimum Standards created under the Care Standards Act 2000. The inspection findings are graded under the ECM headings as excellent, good and adequate or poor. Under the Care Standards Act umbrella the findings can be 'statutory requirements', which have legal implications and have to be put right within given timescales or 'good practice recommendations', which it would be prudent not to ignore, but have no legal consequences.

The National Minimum Standards are scored numerically

4	Standard exceeded	Commendable
3	Standard met	No Shortfalls
2	Standard almost met	Minor shortfalls
1	Standards not met	Major shortfalls

3.3 Although this was billed as a joint inspection in reality it was merely co-terminous. The effect was that we had 4 inspectors, 2 for fostering and 2 for adoption scrutinising the services in the same week. The pre inspection evidence and self assessment reports took the five managers approximately 3 – 4 weeks to collect and collate. The inspectors produced two separate reports, which were finally published on 15<sup>th</sup> January (adoption) and 6<sup>th</sup> February (Fostering).

### 3.4 **Inspection Outcomes – Adoption**

- Against the ECM standards the inspection found the service to be delivered to a 'good' standard in all areas
- Against the National Minimum Standards we were scored on 29 out of the 31 standards. Of these, 21 standards were scored as 3 (standards met) and 7 were scored as 2 (minor shortfalls)
- Under the Care Standards Act outcomes there were 3 statutory requirements and 15 good practice recommendations.
- Overall this was a very positive inspection outcome. The shortfalls identified were minor and due to process rather than deficiency in outcomes. In the summary it states 'this is a good service and provides suitable outcomes for children needing adoptive placements. At all levels of the service there was a strong commitment to and understanding of the needs of the child'.

### 3.5 **"What they could do better"**

- The inspectors identified:- the most obvious shortfall – which we were aware of as the lack of a written 'Children's Guide' as required under the Regulations. They acknowledged we have suitable material for use but it is not in the format required
- They identified a shortfall in the departmental practice in the recording in personnel files
- There was some work to be done to improve adoption panel practice, minute taking, and the decision maker process.
- The role of the medical adviser to Adoption Panel is in need of development
- Concern was expressed about the Disaster Recovery Plan and whether the file archiving and security was sufficiently robust. The office security at Perth St is of concern and the housing of unique and confidential material.

### 3.6 **Actions as a result of the inspection**

- Work is being co-ordinated by the Adoption Team Service Manager to produce a Children's Guide by 31<sup>st</sup> May 2007 – the date required by the inspectors.
- The Head of Service has had meetings with the Departmental Personnel Manager to feedback the concerns and action the requirements.
- The details required on recording panel members files were actioned immediately
- There is ongoing discussion by the Head of Service, Assistant Director etc regarding the Medical Advisors role with relevant members of the Primary Care Trust.
- The good practice recommendations have been noted and are being implemented in the day to day running of the service. The adoption team have had training on the implications

### 3.7 **Inspection Outcomes – Fostering**

- Against all the ECM standards the service was found to be 'good' in all areas.
- Against the National Minimum Standards we were scored on 19 out of 32 standards, of these 4 standards were scored 4 (commendable); 14 were scored 3 (standards met) and 4 were scored 2 (minor shortfalls).
- Under the Care Standards Act actions there were no statutory requirements and only 4 good practice recommendations
- Overall this was a very positive inspection, there was evidence of continuing improvement and the shortfalls identified had not been issues in the past. The inspectors' summary commented positively on the quality of the facilities for staff and carers; the positive working relationships with other parts of the service; the good carers training programme; the strong fostering panel and the good practical and financial support to placements for children with a disability.

### 3.8 **"What they could do better"**

- The inspectors wanted to see more recording of risk assessments on carer's files. They wanted carers themselves to make more structured records on children and particularly have individual Health records. In making placements they wanted more detailed recording of matching considerations and notifications.
- They also felt that we should put a greater obligation on carers to attend training courses.

- The inspectors were concerned by what they were told regarding the lack of specialist nurse time to support looked after children's health.

### 3.9 **Actions as a result of the inspection**

- We have created new forms or adapted existing ones to make the recording requirements identified e.g. risk assessment
- We have issued foster carers with new recording files giving clearer expectations of what should be included
- We have run 2 team training or development days to focus on the changes in practice
- When the PCT were notified of the concerns re health support to Children Looked After they confirmed the creation of a second LAC specialist nurse to expand the capacity in that service
- The Head of Service has notified our personnel department of the outstanding shortfalls in compliance in personnel files and has been assured that this will be put right
- Discussions have begun with the local Police and facilities management regarding building security. Back up, file scanning and archiving has been mentioned. Currently this requires a corporate response to the resource implications.

### 3.10 **Conclusion**

Both sets of inspectors were generally complimentary on the quality of the support given to looked after children, adopters and foster carers by the teams in the services. Any shortfalls within the service were minor and those identified as relating to external departments are being negotiated and actioned.

<b>OTHER OPTIONS CONSIDERED</b>
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- 4.1 No other options to be considered. This is fulfilling a reporting requirement.

<b>IMPLICATIONS</b>
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**Financial**

- 1.1 None directly arising. There will be some capital implications relating to the security issues identified for the Perth Street offices. These are being assessed and will be considered against5 other budget requirements.

**Legal**

- 2.1 Both of these services are inspected under statutory arrangements by the relevant inspection bodies under Care standards legislation.

**Personnel**

- 3.1 None directly arising.

**Equalities impact**

- 4.1 These services meet the needs of our most vulnerable children and young people from all backgrounds.

**Corporate objectives and priorities for change**

- 5.1
- Making us proud of our neighbourhoods
  - Creating a 21<sup>st</sup> century city centre
  - Leading Derby towards a better environment
  - Supporting everyone in learning and achieving
  - Helping us all to be healthy, active and independent
  - Giving you excellent service and value for money