TORBAY COUNCIL

Outline Action Plan

Torbay Fostering Service Review v1.5

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10/22/2012

A detailed review of Torbay's current policies, processes and procedures has taken place and its compliance has been matched to the National Minimum Standards and Regulations, Fostering Guidance, and previous inspection reports. A further review of Fostering practice in Torbay against nationally recognised standards is underway. This outline action plan has been drawn up and will be further developed as information and needs are identified.

Fostering Service Review

Outline Action Plan October 2012

No.	Issue of Concern	Action	% Task Complete	Review of action/outcome
1	a)There is no permanent or clear temporary Responsible individual or registered Manager identified with OFSTED for Torbay Fostering Service.	a)Identify individuals for responsible individual and registered manager positions.	completed	This has been completed and new information is evident on OFSTED's website
	b)Unclear if OFSTED have been notified of changes to structure with respect to the fostering service.	b)Notify OFSTED of interim arrangements and change of office.	completed	
	c)OFSTED currently have the incorrect address for the service registered.	c)Inform OFSTED of changes to structure of the team.	completed	
2	Recommendations from previous Fostering inspection August 2011 may not be fully addressed and adhered to.	a)Review each of the recommendations from previous Fostering inspection August 2011 in detail and indentify evidence to demonstrate. If recommendation is not met then add key issue to action plan and address fully.	0	Outstanding
		a) ensure that all carers are provided, prior to placement, with information and training on	completed	This is done at the matching meeting & placement planning meeting

			how to meet any specific medical needs (NMS 6.8)		
		b) ensure that all carers complete the Children's Workforce Development Council's Training programme (NMS 20.2)	90%	As of 19/10/12 we have only 2 carers outstanding for period 07/11 to 07/13
		c) ensure carers are provided with a comprehensive placement plan prior to the placement of any young person (NMS 15.2)	Started	
		d) implement an effective strategy to ensure there are sufficient foster carers to meet current and predicted demands and introduce a system that ensures that all exemptions have a clear rationale and are time limited (NMS 13.1)	70%	Exemptions are down from 13 in 09/10 to 4 in 09/12 and work regarding this is ongoing. There is a recruitment campaign planned for 11/12 to look at short falls in carer supply.
		e) ensure there are efficient and robust administrative systems and that information is recorded and stored within a system that avoids unnecessary duplication and provides ready access. (NMS 27.1)	completed	All files have been audited & new structure in place regarding effective maintenance of files. PARIS is used for recording.
	Children's guide of the fostering agency is not reflective of current legislation/addresses and contact details.	b)Set up a working group to develop a new set of guides for the adoption agency and adoption support. Young people should be involved in this		Working group is in place on this area working across adoption and fostering

		development.	75%	
	Only one children's guide to fostering is available and does not fully reflect differing ages and abilities of children.	c)Consider children's rights service involvement in the development of the guides.		Work in progress – aim for completion of guide by 26/11/12
	There is no children's guide to private fostering. Any completed should be reflective of the children's age and abilities who may need to use it.	d)Children's guides should be reflective of the services and the diversity of the young people using them.	75%	
	No evidence of children (where appropriate) being given a copy of the children's guide of the fostering agency.	e)Once completed evidence of distribution to children and young people should be available.	75%	
3	a)Statement of purpose is out of date and does not reflect fully the correct information in line with guidance	a)Set up a working group to develop a new statement of purpose which is reflective of the adoption service and meets the criteria and guidance set out in the standards.	90	This has commenced and is also focussing on a consistent document for both adoption and fostering
	b)Formal approval of the statement of purpose is required and should be evidenced accordingly.	b)Review similar agency documentation.	90	
	c)No evidence of Carers families and children (where appropriate) being given a copy of the statement of purpose of the adoption agency.	c)Formal approval of new statement of purpose to be made and evidenced	90	Statement of purpose completed in draft form, and with
		d)Once completed evidence of distribution to service users should be available.	0	
4	a)Fostering policies and	a)All current policies that are not	Starting	Obsolete policies are

	procedures are generally out of date and are not fit for purpose or adhere to the Fostering guidance Feb 11 in terms of content or process development or review. b)There are missing policies not available to the fostering service. c)Fostering panel policy and procedure documents do not fully reflect the recent changes and are not detailed enough to ensure clear understanding of responsibilities and roles.	compliant with current standards and regulations and guidance should be removed b)New policies should be drawn up to reflect all areas of fostering practice and should be compliant with guidance and standards c)Panel policies and guidance should be drawn up once changes to panels and its membership have been agreed.	 Starting completed	being removed will be completed by Nov 2012. Meetings booked for 6,7,8/11/12 to begin process Some policy development has occurred but is hindered by lack of clarity on format and process Panel policy draft policy has been drawn up
5	Address recommendations from the last inspection Central list for the current fostering panel. Produce policies or procedures on the recruitment to and maintenance of the central list. Establish evidence of Quality Assurance feedback from the panel to the agency Put in place vice chair.	a)Review of adoption panel roles and functions, membership and full compliance with current regulations to be undertaken within 1 week. b)Specific action plan to be drawn up to address all areas of need to meet requirements. c)Prioritorise and implement progress of outstanding work. d)Quality assurance feedback to be drawn up from panel business over the	completed 0 0	Panel work being undertaken by G Puckering Panel chairs contract ended and interim chair identified Some policy development has taken place

		last 6 months.	0	
	Put in place induction, training of panel members.	e)Consider the formation of fostering and permanence panels.		
	Annual joint training with panel members and the fostering service.		0	
	Annual review and associated processes.			
	The timing and completion of minutes and decision making are not within the guidance.			
	Clarify the line management responsibilities for the panel.			
	Establish panel advisor with appropriate skills and no conflicts identified.			
	Establish policy or procedural guidance in relation to complaints regarding the fostering panel			
	Clarify fostering panel membership and roles.			
	Address link between agency decision maker decisions and panel. Minutes and decisions are separate.			

6	Management information is part of guidance has not been produced in recent months.	Provide a report to the executive of the Local Authority of up to date management information.	20	This has not fully occurred (– *Ofsted returns sent back recently*)
		Consider whether this should be done retrospectively.	0	
8	Recording and information management is not consistent across the service with some elements of recording being completed electronically and others not.	Review current recording mechanisms and identify those which can be changed or developed. Be mindful of current corporate policies and systems regarding recording.	completed	Monthly supervision of carers is recorded on new carer supervision form and held on file. Date and who visited recorded on PARIS. Other matters in relation to placements are recorded on PARIS. Electronic daily log for fostering duty recording has been developed – currently in test for start on 29/10/12
9	Fostering assessment process for new applicants has potential significant delays built in. There is not always a level of consistency in approach.	a)Review current practice and process. Ensure that the process is in keeping with fostering assessment timeframes set out in the guidance.	50	This is being informally addressed by the locum manager and delay in allocation has reduced. Formal processes still need to be agreed
		b)Develop a policy and procedure which reflects more fully the issue of timeliness in assessment	0	
10	No identified liaison officer for the IRM	a)Identify a liaison officer and clarify roles and responsibility.	completed	*An identified liaison officer now in place*

		b)Complete appropriate documentation for liaison and associated policy documents	completed	
11	The existing fostering service and recruitment strategy is out of date and does not fully reflect the needs of the service currently. The 2010 is not a strategy in itself	a)Monitor and evaluate the appropriateness of the current strategy and then identify a new strategy that meets with the guidance and needs of the service.	25	*(link into commissioned services)*
	There is no clear corporate parenting strategy.	b)Identify and set up a monitoring and evaluation of the recruitment strategy on an ongoing basis.	0	
	There is no sufficiency strategy. Without these it will be difficult to develop a clear strategy	c)Develop of fostering strategy to identify aims and objectives	0	
12	Sharing agency decision makers decision with foster carers and applicants not within identified timescale	a)Identify how this information is communicated and then how it is recorded.	90	*(go through panel meeting minutes etc)*
		b)If necessary create policy and/or procedure and documentation to ensure this is meeting the standard.	Starting	Meetings booked for 6,7,8/11/12 to begin process
13	Staff employment and recruitment issues need to be carefully reviewed to ensure compliance with all area's.	a)Liaise with HR and undertake audit of staff recruitment records and processes.	0	This is being addressed via adoption CPIP project
		b)Ensure checks processes are clear within recruitment policy and guidance.	0	
	Compliance with telephone checks on references and recording of these to be clarified	c)Ensure system and recording process for telephone checks on references.	0	
14	No clear policy or procedural guidance in relation to complaints regarding the Fostering agency.	a)Develop a clear complements and complaints policy and guidance specific for fostering.	0	*(feedback from panels and where it goes!)*

		b)Ensure this is centrally recorded.	0	
		c)Identify where possible how complaints and allegations regarding the adoption agency are currently recorded.	0	
		d)Policy which reflects how children are consulted and given information about how to complain.	0	
15	No clear policy or system in place for notification of significant events to appropriate authorities	a)Consider whether all events that require notification have been notified.	0	This has not been progressed
		b)Any outstanding notifications to be sent	0	
		c)Identify process and procedure for recording both on individual files and centrally.	0	
16	No evidence of a business continuity plan	a)Draw up a business continuity plan to include both provision of premises and safeguarding/backup of records	0	Require corporate engagement from CP
		b)Ensure plan is available to all staff to access	0	
17	a)No clear policy on the format and content of agency files foster carers	a)Create a written policy that clarifies the purpose format and content of information to be kept on the agency's files	completed	File audit complete – new guidance placed on each file, file content changed to match guidance.
	b)Data protection, confidentiality and process of managing information and files has no	b)Develop a system for monitoring the quality and adequacy of record keeping	completed	Monthly file audit to be introduced as part of staff supervision – this

	policy.			will include PARIS check
18	a)Unclear how children are given information about advocacy services and access to the children's Rights Director	a)Develop information and recording opportunities to demonstrate this occurs.	0	Work in progress – aim for completion of children's guide by 26/11/12
	b)Unclear how children's wishes and feelings are gathered recorded and addressed within the process of fostering.	b)Identify resources which will meet this standard and the needs of children placed. Identify mechanisms for children to gain feedback on concerns or complaints.	completed	Current system of looked after children feedback at point of carers annual review remains in place Views are discussed at carers annual review and child's wishes (if any) recorded as a part of the pre-placement matching meeting process
	c)Unclear how the agency records children's wishes feelings and views and how these are taken account of for the purposes of agency monitoring and service development, including	c)Demonstrate how children's views are taken into account in monitoring and developing the service.	completed	
20	Policy with regard to financial support in all areas of permanence support needs to be clarified	Review all financial policies and processes and develop a coherent policy and process that is reflective of guidance.	25	This has not commenced
21	To develop process maps to illustrate the processes within fostering and use as a guide for the development of policy and procedure.	a)To create accurate process maps and link to standards and regulations. b)Develop links through process maps to IT systems and policy development		This has not commenced
22	Consider statistical neighbours, strengths and challenges and identify key messages to inform development of the fostering service.	a)To gain an understanding of services and processes that are going well. b)Use the information gained to inform the development of the service in Torbay.	50 0	*(visits to Bournemouth ,Swindon, etc)*

23	a)Concern about the number and appropriateness of exemptions made within Torbay	a)Review exemptions currently in place	completed	
	b)Exemptions are not routinely presented to panel.	b)Establish current process policy and delegation for agreeing exemptions	20	
	c)Concerns around exemptions were noted within the last fostering inspection	c)introduce a system that ensures that all exemptions have a clear rationale and are time limited (NMS 13.1)	completed	Complete – centrally recorded and produced monthly to the fostering panel
24	Significant concerns have been identified with the volume of private fostering work currently being undertaken in Torbay	a)Review volume of work currently being undertaken	0	The resource implication has been addressed within the structure review and more widely
	There are no designated qualified social work in put into the work	b)Develop a process policy and protocols for private fostering	50	A draft policy has been drawn up – ready for
	Outstanding recommendation for OFSTED inspection of private fostering has not been completed	c)Review resource implication as part of the structure review	0	
25	Work around connected people assessment and support is not clear within the service and is likely to be an underrepresentation of the volume of work.	a)Review decisions and processes around connected people. Ensure assessments are completed on carers where children have been placed with family or friends.	20	Outline policy has been drawn up *Work on-going. Understanding where placement s are being made… Sect 17 payments…*
	b)There are no clear policy or procedures relating to connected people	b)Develop a clear policy and process for connected people assessments and support.	70	
	c)The assessment of connected	c)Agree appropriate assessment	completed	Complete – note still issues with getting

	people is not within timescale or following an appropriate assessment processes	frameworks and ensure timescales are adhered to.		viability studies completed.
26	Special Guardianship Order assessments and support are not routinely undertaken within the service. There is no clear policy and there appears to be a blanket common practice approach on support plans and allocation of cases.	A review of the process and practice of special guardianships. Additionally assessment framework support and financial policy needs to identified	0 0	