

NATIONAL ASSEMBLY FOR WALES
CARE STANDARDS INSPECTORATE FOR WALES

Care Standards Act 2000

INSPECTION REPORT
FOSTERING SERVICES

Pathway Care

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Other regions contributing to this report:	No other regions contributed to the report.

GUIDELINES ON INSPECTION

INTRODUCTION

This report has been compiled following an inspection of the fostering service undertaken by the Care Standards Inspectorate for Wales (CSIW) under the provisions of the Care Standards Act 2000 and associated Regulations.

The purpose of the report is to comment on the quality of the service provided, including the organisation and management of the service and the quality of support delivered to carers and the children and young people who are the ultimate beneficiaries of it.

The report contains information on the process of inspection and records its outcomes. It is divided into twelve parts reflecting the broad areas of the National Minimum Standards. An overall conclusion of the services' compliance with the Fostering Services (Wales) Regulations is recorded.

CSIW's inspectors are authorised to enter and inspect fostering services at any time. During each inspection episode or period there are visit/s to the service, some unannounced, in addition to a range of other activities such as discussion groups, self- assessment and the use of questionnaires. CSIW tries to find the best way of capturing carer's, service users' and their relatives'/representatives' views and experiences of the service. At any other time throughout the year visits may also be made to the service in response to changes in the service or to investigate complaints for example.

Inspection enables CSIW to satisfy itself that the service should continue to operate. It ensures compliance with:

- Care Standards Act 2000 and associated Regulations, whilst taking into account the National Minimum Standards
- The services' own statement of purpose

Over a 12 month period inspectors will:

- Consult with service users, which in this context means foster carers as well as children and young people about their experience of the service
- Inspect the premises used by the fostering service
- Inspect core processes such as the operation of fostering panels or assessment of carers
- Talk to the manager and staff
- Satisfy themselves that appropriate policies and processes are in operation and that all records are being properly maintained

Readers must be aware that a report is intended to reflect the findings of the inspector during a specific inspection period. Readers should not conclude that the circumstances of the service will be the same at all times; sometimes services improve and sometimes they deteriorate. The Regulations and National Minimum

Standards are very technical and detailed in nature and CSIW does not closely examine all aspects of these standards on each visit.

If an aspect of the service falls short of that required to meet the regulations, CSIW will make requirements on the service to make improvements. The report clearly indicates any such requirements made by CSIW. This will include any made since the last inspection report which have now been met, any that remain outstanding and any new requirements arising from this recent inspection. Where requirements are made, the provider may develop an action plan to show how they plan to make the necessary changes and you may wish to discuss this with them.

The reader should note that requirements made in the previous report which are not listed as outstanding have been appropriately complied with. The report will also comment on aspects of service that are felt to be positive.

If you have concerns about anything arising from the inspector's findings, you may wish to discuss these with CSIW or with the registered person.

The Care Standards Inspectorate for Wales is required to make reports on registered facilities available to the public. Most reports are public documents and will be available on the CSIW web site: www.csiw.wales.gov.uk

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SUMMARY OF FINDINGS

Pathway Care (Cardiff) Ltd. has now been established as an independent fostering agency for 10 years. During this time the company has grown significantly and incorporated branch offices in 3 other regions.

The Cardiff office served a customer base for the whole of South East Wales and was also the company's headquarters that provided financial and administrative support for the whole of the Pathway group.

At the time of inspection for the South East Wales region there were 200 children placed and a total of 108 approved carers with 11 awaiting approval.

The previous inspection undertaken in October 2005 concluded that Pathway Care continued to operate as an efficient and well-organised fostering agency, which kept positive outcomes for children as their primary focus. As a result of that inspection only 1 requirement and 6 good practice recommendations were made.

This inspection therefore, was undertaken using a more proportionate approach and has not closely addressed all the regulations and standards applicable to the fostering service.

Two children's inspectors undertook the inspection of Pathway Care during November 2006. The majority of the inspection activity took place between the 20th and 24th of November and incorporated the following methodology:-

- Examination of the pre-inspection documentation provided by Pathway Care that included information related to the company's statement of purpose, business plan and all policies, procedures and guidance.
- Access to files for staff, carers, children and young people.
- Meetings and discussions with the responsible individual and manager.
- Discussions with the principal officer for quality assurance and the training and development co-ordinator.
- Interviews with 4 social work staff.
- Discussions with local authority social workers.
- Discussions with 4 foster carers.
- Questionnaires completed by 19 foster carers.
- Questionnaires completed by 17 children.
- Questionnaires completed by 8 staff.
- Questionnaires completed by 5 panel members.

During the course of this inspection episode, the inspectors gave a lot of consideration to evidence that was provided by those who worked for or used the service in line with the current expectations of the reform of regulations.

The outcome of this inspection demonstrated that Pathway Care Ltd. is an imaginative and forward thinking organisation, that considers the welfare of the children and young people it cares for as paramount. The organisation continued to be run efficiently, effectively and was well organised.

The inspectors were particularly impressed with the comments that were received from

staff, carers and the children and young people. The views of all those involved with the organisation will be incorporated throughout the body of this report, together with references to the requirement and good practice recommendations made at the previous inspection and current areas of good practice.

SECTION ONE – STATEMENT OF PURPOSE and CHILDREN’S GUIDE

Inspector’s findings:

The Statement of Purpose for Pathway Care Ltd. was recently updated in October 2006. This document was very comprehensive and contained all the relevant information as required by Regulations and Standards.

The Statement of Purpose stipulated that Pathway Care prided itself in being able to provide family placements for children and young people with complex needs. However, this criteria was not defined by the organisation but assessed by the placing authorities.

Pathway Care has concluded that the main categories of children and young people that it cares for are those who cannot be looked after within their local authority due to geographical reasons or, where there were no appropriate placements that could meet challenging behaviours and/or specific needs.

Pathway Care stated that it believes one of its strengths was the provision of diverse family placements which could meet the needs of sibling groups, mother and baby assessments, planned and emergency placements together with short and long term placements.

The Statement of Purpose referred to the primary objective of offering a period of stability and security to children in an attempt to provide positive relationships and experiences. Pathway Care hoped that by assisting children in this way that it would increase the chances of successful outcomes for children and young people as they entered adulthood.

All discussions and questionnaires with staff and carers evidenced that they were aware of the company’s Statement of Purpose. Comments were favourable in that statements were made that the document was comprehensive and clear and was under continuous review in order to accurately reflect Pathway’s focus and functions.

The inspectors also noted that the agency was pro-active in ensuring that the parents of the looked after children were provided with their Statement of Purpose. This was felt to be an area of good practice.

The Children’s Guide was stated as being under review with the two current versions still in use. Those guides were age appropriate and aimed at younger children and those who were adolescent. However, those children’s guides were not felt to be very informative or user friendly and there were a number of comments particularly from staff that the quality of those guides needed to be improved upon.

Although the inspectors were aware that Pathway Care had set up a working group ‘Consulting with looked after children and young people’ which had a remit to review the Children’s Guides, at the time of inspection this had not happened. The inspectors also noted that reference had been made in the previous inspection undertaken in 2005 of the organisation’s intent to review these guides.

As this issue still remains outstanding a requirement is made from this inspection that the organisation must now undertake a review of the Children's Guides in line with Regulation 4(a)(b)(c).

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number
A review of the Children's Guide needs to be undertaken.	Six months	4(a)(b)(c)

Good practice recommendations:	NMS or other source

SECTION TWO – FITNESS TO PROVIDE OR MANAGE A FOSTERING SERVICE

Inspector's findings:

Since the last inspection there has been significant change to the management of the fostering service. The two Founding Directors have now retired from day to day management of the organisation and a Chief Executive Officer was appointed in July 2006.

Ms. Wendy Keidan remains as Director for the South East Wales Region and continues to be the registered manager for the Cardiff office. The role of responsible individual now lies with Mr. David McBride who also holds the post of Director for Quality Assurance.

Both the registered manager and the responsible individual have the necessary knowledge, skills and experience to undertake the management of the fostering service in an efficient and professional manner.

Ms. Wendy Keidan the registered manager has worked for Pathway Care since June 2002 and was promoted to director in April 2005. Ms. Keidan has 20 years social work experience in a variety of settings including posts as a fostering officer and team manager for local authorities.

Mr. David McBride commenced his employment with Pathway Care in September 2002 and took up his post as director for quality assurance and responsible individual in October 2005. Prior to this Mr. McBride worked for a local authority family placement team for a number of years.

Discussions with the registered manager evidenced her commitment to her own professional development including any training with regards to changes in practices and legislation.

There were no issues brought to the attention of the inspectors in relation to the management of the service as all discussions and questionnaires with professionals and carers' etc. evidenced that there was clarity with regards to leadership and accountability. Comments from staff in particular were positive with regards to effective lines of communication and there was reference to staff receiving direct communication via e-mails from the Chief Executive Officer.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source

SECTION THREE - MANAGEMENT OF THE FOSTERING SERVICE

Inspector's findings:

Pathway Care Ltd. has evidenced that it has given careful consideration to the procedures for monitoring and evaluating the effectiveness of the services that it provides.

The agency has undertaken its business plan for 2007 which sets out its future key performance objectives and business developments. The inspectors noted that within the business plan there were specific references made to the development of the relationships between Pathway Care and local authorities.

The fostering agency had also within the business plan stated its commitment to entering into dialogue with those responsible for the commissioning of placements with a view to the monitoring of existing placements whilst proactively planning for new referrals.

Key performance objectives of the business plan also focused on ensuring a high quality child centred service and to optimising carer retention with the support of a skilled and stable staff team.

The staffing structure for Pathway Care Ltd. Was organised in order to provide centralised services across the whole of the organisation and included personnel with specific responsibilities for quality assurance, finance and accounts, marketing, training and human resources etc. Three of the quality assurance posts were at principal officer level and held responsibility for inspection, reviewing and dealing with complaints across the whole organisation.

Pathway Care were aware of the review of regulations planned for 2007 and discussions took place regarding the requirements of the new complaints procedures. Although the agency had recently undertaken the final draft of their complaints procedure this will require amendments in line with those new requirements particularly in relation to time-scales for dealing with complaints.

The designated staff workforce for the South East regional team was headed by the Director/Manager and comprised of 3 principal officers, supervising social workers, outreach workers, social worker/ therapist and administrative support. The responsibility for the management and supervision of the social work team was undertaken by the principal officers. One supervising social worker had specific responsibility for the recruitment of foster carers.

The inspectors evidenced during the course of the inspection episode that staff were clear about their roles and responsibilities and whom they were accountable to.

The manager and responsible individual were clear with regards to the requirements of Schedule 7 that detailed matters to be monitored by the agency and again, there was evidence that policies and procedures were in place that covered all these areas.

Quality assurance was evidenced during the inspection as being given high priority within all aspects of the management of the agency. Policies and procedures were seen to be in place for all staff, carers and children. These policies were kept under review and it

was anticipated that new handbooks would be developed in the future for both foster carers and supervising social workers.

A Regulation 42 report dated October 2006 had been undertaken by the director for quality assurance, and provided information on the monitoring systems employed by the agency relating to Schedule 7. This report set out the policies that had been introduced during the past year and listed those that were in draft and being consulted upon.

The report further detailed the agency's intentions to further develop their quality assurance role, in that they intend to introduce Schedule 7 review meetings between the social work teams and the quality assurance principal officers. The focus of these meetings was to ensure that the fostering agency is delivering a service that was constantly under review and that all significant events were appropriately recorded and monitored.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source

SECTION FOUR – SECURING AND PROMOTING WELFARE

Inspector's findings:

The fostering agency has a duty to promote and safeguard the physical, mental and emotional welfare of all the children and young people who are placed within its service.

There is also a duty therefore to ensure that foster carers are well supported in providing safe and nurturing environments for the children they care for.

The process and procedures for the recruitment, assessment and approval of carers will be dealt with under Section 5 of this report.

Before any child or young person is placed with a foster carer extensive checks are undertaken to ensure standards of accommodation and safety. A suitable environment checklist was made available as part of the inspection documents which covered all internal and external areas of the property and is reviewed annually as part of the foster carer's reviews. This checklist covered such matters as safety equipment, storage of medication and any issues relating to the transporting of children in foster carers' cars.

A good practice recommendation from the last inspection requested that as part of any health and safety checks evidence should be sought of any pet's vaccinations, worming and flea treatment etc. Although the agency do not request vaccinations certificates to be provided they do ensure that any pets do not pose any health and safety threat to children and are considered in any assessment process.

A risk assessment policy and procedure for presenting behaviours within placement has been produced and is very comprehensive in that all assessment of risk starts at the referral stage. This system allows for early identification of risk and plays an important part in any matching and placement decisions and ensures clarity with regards the management of any recognised risks. Those risk assessments were regularly reviewed and copies provided to all parties and retained on files. Scrutiny of files by the inspectors evidenced that the assessments were in place and current.

The fostering agency also ensured that children and young people together with their families are provided with foster care services which valued diversity and promoted equality.

Although the majority of children and young people looked after by the agency were mainly of white Welsh origin, the agency ensured that it addressed and regularly reviewed any issues related to a child's culture, race or disability. Information related to such matters including the agency's statement on equal opportunities were provided in both the handbooks for staff and foster carers.

A good practice recommendation from the previous inspection that all staff and carers should undertake core training in valuing diversity has now been implemented by the agency.

The monitoring of individual's attitudes and practice is assessed and identified during the initial assessment process and considered during foster carers' reviews.

The inspectors were pleased to note that the fostering panel had recently given approval to a same gender couple, and that the agency also had mixed race carers including a sikh family.

Discussions with a supervising social worker and foster carer who cared for a very young child with disabilities evidenced the agency's commitment to working with children who had complex and/or unique needs.

The inspectors also evidenced the agency's ability to work with the families of children placed with their foster carers. This was evidenced through discussions with one particular foster carer who was caring for a child where there was a rehabilitation plan in progress for the child to return to family. The inspectors felt that this was an area of further good practice.

Pathway Care have been able to demonstrate that they have a clear procedure with regards the matching of children and young people with carers. A referral and matching process informed staff, carers and local authorities of how that process was implemented from initial enquiry through to placement.

Many of the children referred to the agency were emergency placements. The agency was therefore clear with regards to obtaining as much information as possible before making any decisions with regards to matching a placement. Decisions with regards to offering a placement can only be made by the director or principal officers following discussions with supervising social workers and foster carers. One Principle Officer has a designated role for the reception and handling of referrals to provide consistency in matching and placement decisions.

Discussions with foster carers, supervising social workers and local authorities confirmed that no placement would occur until a full decision making process had occurred. Carers further stated that they were not put under any pressure to take a child or young person whose needs they did not feel able to meet.

The fostering agency also had a duty to ensure that every child was protected from all forms of abuse by ensuring that all staff and carers have access to all the necessary training, policies, procedures and relevant guidance materials.

Information contained in the carers' handbook and foster carers' agreement made it clear to foster carers that any corporal punishments that included any humiliating forms of treatment or punishment were not acceptable.

Children's questionnaires revealed that generally punishments were acceptable as children stated that they tended to be grounded, sent to bed early or privileges withdrawn if they misbehaved. One child stated that she was told off if she broke the house rules, but that she and her carer would then make up. Another child informed that she was never punished because she never broke the rules.

Safe caring guidance was provided to carers and again included in the foster carers' agreement, these guidelines were explained to all those involved in the child's placement and included the child and everyone in the carers' household.

Regular training was provided to staff and foster carers around all issues relating to child protection including managing behaviour and recognising signs of abuse. Training and information was also provided which informed foster carers of ways in which to deal with issues such as bullying and internet awareness together with maintaining childrens' self-esteem.

The agencies' play therapist/social worker continued to play an active role in the support of foster carers dealing with all aspects of a child's or young person's behaviour. Foster carers were given dates of when the therapist was available so that they could book individual time to discuss any concerns they had with regards the children placed with them.

Pathway Care have also recently drafted policies on the assessment of foster carers who have either declared offences or those who have convictions shown on their Criminal Record Bureau Checks (CRB). Another policy provided clarification on the undertaking of interviews/checks with previous partners of prospective foster carers undergoing assessment.

It was also identified in the previous inspection that in order to maintain the accuracy of the database that collated any information related to child protection issues, a dedicated administrative officer should be allocated to maintain these records. This good practice recommendation has now been met as, during the course of this inspection evidence was provided that confirmed the accuracy of those records. The inspectors were also able to cross-reference information received by the Inspectorate from the agency in relation to Schedule 7 and 8 notifications.

Where it is in a child's or young person's best interest to maintain and develop family contacts as set out in the child's care plan or foster placement agreement, foster carers where appropriate would be expected to assist in those contact plans. Guidance that had been recently revised and produced by Pathway Care was included in the foster carer's handbook. Contact issues would be regularly reviewed, monitored and assessed at the child's statutory review.

Pathway Care were in the process of establishing a working party to implement consultation groups for children and young people who are looked after. Consideration was also being given to a consultation group for children of the foster carers so that their interests were represented.

The agency has recently increased its support worker team by employing a third worker. This was also viewed by the inspectors as an area of good practice as it was evident during discussions with the support workers and foster carers that they played an invaluable role in engaging and supporting children and foster families.

The support workers took responsibility for the organisation of leisure activities and trips which was budgeted for by the agency and also involved the supervising social workers and foster carers.

Activities included a Christmas party at the local leisure centre and art and craft pursuits such as making toffee apples and pumpkins at Halloween. The inspectors were impressed with the level of enthusiasm and commitment shown by the support workers who appeared very adept at engaging and communicating with children.

Pathway Care had recently leased a small flat close to their office premises near Cardiff that they referred to as Studio 31. This facility was used to undertake direct work and activities with children and to also support contact where appropriate. This also provided children with the opportunity to spend good quality time with significant adults.

The promoting of childrens' and young peoples' health and educational achievements were also actively monitored and supported by the fostering agency. Although this monitoring should be achieved by the gathering of information from the childs' placing authority and should accurately record all details of the childs' care plan including all matters such as medical consents there were in some cases a lack of the Looked After Children documentation on files.

The inspectors had discussions with the manager and responsible individual with regards to the completion and provision of these key documents that should be provided to the agency and foster carers during the early stages of placement.

However, discussions and questionnaires with staff and carers together with information obtained from the files evidenced that not only were these documents missing in some cases but they were not always fully completed. One staff member described the completion of the Looked After Childrens' paperwork as 'patchy' and varied depending on individual social workers/local authorities. The absence of such information required the need to 'chase up' missing documentation and could cause tensions between the agency and social workers. Another staff member referred to the frustrations of not having accurate information provided by some local authorities.

The inspectors acknowledged that comprehensive placement plans were undertaken by the agency when children were accommodated. It was also acknowledged that Pathway Care had actively pursued the local authorities in order to obtain those documents and again this was evidenced in files.

Similarly, information from questionnaires completed by the supervising social workers evidenced that the preparation for independence for young people was also subject to the quality of the Pathway Plan that was the responsibility of the local authorities to provide. The inspector who undertook the previous inspection also evidenced that young people who were 16 years and above had not been provided with a Pathway Plan.

The manager stated during the course of our discussions that she intended to have further dialogue with local authorities around the provision and completion of the Looked After Children documents. This Inspectorate would support the agency in this course of action.

The inspectors during the course of the inspection make contact with some of the local authorities who had children placed with the agency. Very favourable comments were made with regards to the service provided by Pathway Care. One team manager commented that he was 'highly delighted' with the quality of the placements and was complimentary with regards to what he deemed to be a very pro-active company that communicated effectively and supported their foster carers well.

Comments were also made with regards to able and confident carers who would challenge decisions which they felt were not in the best interest of the children they were caring for. References were also made to good matching processes.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source

SECTION FIVE – RECRUITING, CHECKING, MANAGING, SUPPORTING AND TRAINING STAFF AND CARERS

Inspector's findings:

This section of the report asks for the fostering agency to demonstrate that it is able to recruit, manage and train suitable staff and foster carers to work with children and young people in such a way, as to ensure the best possible outcomes for children in foster care. The number of staff and carers together with their range of experience and qualifications are sufficient to achieve the purposes and functions of the agency.

Pathway Care Ltd. have made a statement in their business plan that its aim is to continue to be the leading independent fostering provision for the South East Wales region. The agency further states its intention to maintain a stable, highly skilled and motivated staff team. The regional recruitment plan for social work staff focuses on the continued support for staff undertaking post qualifying awards. The Principle Officer, West Wales was being supported by Pathway Care to undertake an MSc (Econ) in early years.

Pathway Care have been able to evidence that the retention of staff remains high and there has been few staff changes in the past year.

Since the last inspection there have been no changes to the staff recruitment process.

All details of the agencies' policies on working practices, grievances, equal opportunities, complaints and health and safety etc were contained in the relevant handbooks for staff and foster carers. Some of these policies and procedures were currently being reviewed and updated.

Supervising social workers were all social work qualified and had a variety of experiences in working for childrens' services mainly with local authorities. All 3 of the family outreach workers had experience of working with children in a variety of settings, one support worker had been a foster carer for both the agency and a local authority.

For the purpose of this inspection 4 members of the social work team were interviewed and their files examined, together with an analysis of the questionnaires completed by staff. The inspectors also had the opportunity for discussion with the training and development co-ordinator for the agency.

The staff files inspected were well organised and contained all the information and checks as required by Schedule 1 of the fostering regulations such as CRB, references and a full employment history together with recent photographic evidence. The inspectors noted that on the medical declaration forms for staff that information on the health of family members was requested. This was raised with the manager with regards to relevance and issues relating to confidentiality. The manager has agreed to give further consideration as to the necessity to request this information.

The files also evidenced that regular supervision was taking place together with training development plans and appraisals. The only issue that arose for the inspectors was the fact that the supervision notes and other reports were often hand written and did not always prove to be legible. The manager of the agency has given an undertaking that

further consideration will be given to the recording of information stored on files.

The principal officers who have successfully completed a 6 day introduction to management and supervision training provide supervision.

Information from staff confirmed the value of supervision in that it was an opportunity to discuss all issues related to both professional and personal issues. Supervision was provided formally and on an ad hoc basis when requested.

Supervising social workers and family outreach workers were complimentary with regards the support they received and that they felt valued by the agency. Only 1 social worker stated that they were unsure as to where the agency was going, and that there was lack of communication around this that had caused them to feel unsettled.

Another area of good practice identified by the inspectors was the manageable caseloads held by the supervising social workers. From information provided by the agency it was noted that social workers did not have more than 11 foster carers to support which included any assessments of potential carers. Social workers and the foster families acknowledged the benefit of this themselves.

Discussion with the training and development co-ordinator provided the inspectors with information on how the agency developed, implemented and monitored its training programmes for all staff and carers.

Training is provided both internally and externally with the expectation that some training is provided jointly for both supervising social workers and foster carers. Partnerships have also been formed with some local authorities and shared training occurs.

The training co-ordinator attends staff meetings and carer support groups that enabled her to identify and monitor the training needs. The monitoring of the quality of the training provided by external providers was also undertaken by the co-ordinator who would attend and evaluate with feedback from other attendees.

Pathway Care provided an analysis of the training undertaken for the period October 2005 and September 2006. This analysis evidenced the range of training available to staff and foster carers. Statistics showed that 49 days training was provided for 507 attendees and resulted in an attendance of 75%.

The recruitment of foster carers was also linked to the agency's regional marketing and business plans. These plans monitored trends with regards to targeting key geographical areas and considered the needs of the local authorities that the agency provided placements for. Decisions could then be made by the agency as to the most beneficial process of recruitment for the right calibre prospective foster parents.

One of the foster carers interviewed stated that one of the reasons for deciding to work for Pathway Care was due to the way in which the agency responded quickly and efficiently to their application.

All potential new carers applying to the agency were contacted by the supervising social worker with direct responsibility for dealing with initial enquiries.

Pathway Care had a very thorough recruitment process from initial enquiry through to approval at foster panel. At the time of inspection there were 11 prospective carers undertaking the assessment process.

A very thorough competency based fostering assessment was expected to be undertaken by the supervising social workers that were detailed and involved interviews, references, medical and CRB checks to be undertaken.

Although foster carers files were examined during this inspection the actual foster carers' assessments were not scrutinised. However, the inspectors were mindful of the findings of the previous inspection that assessments could be repetitive and further analysis on disability and sexual orientation issues should be undertaken. These issues had been addressed by the training co-ordinator who had undertaken some workshops and provided the findings to panel for consideration.

All potential carers were expected to undertake the mandatory 3-day preparation to foster training pre-approval. The programme provides a sound foundation for the foster carer and is an integral part of the assessment process. Discussions with a new foster carer emphasised the importance of this training as it highlighted for potential carers the realities of the fostering task. The carer felt that if any prospective carer had any doubts about whether fostering was the right profession for them they would generally make that decision during this initial training.

Discussions with the training and development co-ordinator also confirmed the significance of the 3 day mandatory training, in that any initial concerns regarding a potential foster carers suitability could be identified and addressed in this early part of the assessment process. Information from the training co-ordinator also confirmed that the preparation to foster training was to be increased from 3 to 4 days with a larger emphasis on child protection issues.

Training for foster carers was considered throughout the assessment process with continued evaluation of training needs via supervision and annual reviews. Training incorporated a wide range of issues from refresher training in child protection to safe care, attachment disorder, first aid and record keeping. Training to meet any individual needs were considered and provided as and when identified. A number of foster carers had already completed or were undertaking their NVQ level 3 training in health and social care.

Foster carers were supported in attending training that was organised at such times that enabled them to take and collect children from school. For carers who had very young children who were not in school alternative arrangements would have to be made for childcare. One foster carer did state that the expectation for providing the childcare was left to carers to arrange which was not always possible.

Other supports for foster carers included regular contact and supervision with their supervising social workers, access to a well-documented handbook and regular support groups. More specialist support groups have also been set up such as the Men Who Foster group and further consideration being given to the needs of the children of foster carers.

Foster carers were also aware of the out of hours on call system that was available to them and found to be easily accessible.

Information contained on the files was again comprehensive, well structured and in keeping with the information specified in Schedule 3. Panel recommendations and approval status was evidenced on files alongside carers' agreements, health and safety checklists and safe care assessments.

Inspectors also evidenced copies of supervision visits that confirmed that unannounced visits were being undertaken.

As previously stated 4 foster carers were interviewed and their files were examined, together with information received from 19 questionnaires completed by carers.

Information received from foster carers was consistent with regards to the support that they received. All carers stated that they saw their supervising social worker at least fortnightly and received regular telephone contacts. Carers generally felt that this was a specific strength of the agency particularly as some carers identified that support was not always readily available from local authorities.

Carers also felt well informed by the agency and no significant issues with regards to training or the placement of children was raised with the inspectors. One foster carer did raise an issue with regards to additional clothing and holiday allowances for teenagers. However, most foster carers stated how valued they felt and one carer gave an example of how, during a very difficult episode when one of her foster children was hospitalised due to ill health, that not only did she receive appropriate support but was given flowers and she and her family treated to a meal by the company.

The inspectors concluded that the way in which the fostering agency supported its carers was one of its strengths and again an area of good practice.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source

SECTION SIX – RECORDS

Inspector's findings:

Since the previous inspection there had been few changes to Pathway Cares' policies and guidance on such matters as access to case files and data protection. The policy and guidance on recording of information had been previously provided.

Some of the issues related to files, record keeping and monitoring and recording systems have also been addressed in other sections of this inspection report.

The fostering agency ensured that up-to-date and comprehensive case records were maintained for each child and young person accommodated, all relevant information was made available to the child and to anyone involved with their care.

Several childrens' files were examined during the course of the inspection that evidenced placement agreements between the agency and the foster carer together with matching forms, risk assessments and safe care plans.

However, as previously stated there were in some cases a lack of documentation received from the placing authorities such as essential information, placement plans and care plans. However, in order to comply with Schedule 6 of the Fostering Regulations thorough documentation is undertaken by the agency. The agency was also able to demonstrate their attempts at obtaining all the necessary Looked After Children documentation from the local authorities and, as previously reported the manager has stated her intentions to have further discussions with local authorities over these issues.

There was also evidence on files of carers' monthly reports being undertaken for each child in placement. Foster carers also contributed to the statutory reviews of young people by providing written information on all aspects of the child's placement.

Discussions with foster carers confirmed the relevance and importance of undertaking such recordings. Factual and significant information was kept that could help children and young people make sense of their time in care. This area of work was also supported by the social worker/therapist who assisted with life story work for the children. The agency also provided the children and young people with such items as memory books and photograph albums in order to store and record memorabilia.

The foster carers interviewed by the inspectors also confirmed that all the information they had been given on the children was safely and securely stored.

Pathway Care has developed good internal databases which recorded all significant information related to the running of the foster care service and included such matters as childrens' achievements, accidents, complaints, concerns and allegations.

The inspectors examined the records related to the Schedule 8 logs and found them to be well-recorded and contained all relevant information such as dates, events and outcomes of any incidences. The information was also colour coded and any outstanding occurrences were clearly identifiable.

The manager had also undertaken a Regulation 42 review of allegations, complaints and

outcomes for Pathway Care during the period October 2005 to September 2006. During this period there had been 9 complaints and 4 allegations made against foster carers, with 1 complaint against the agency.

All complaints and allegations had been fully investigated and where appropriate child protection procedures had been implemented as governed by the All Wales Child Protection Procedures. All complaints and allegations apart from 2 had been concluded satisfactorily by the responsible local authorities. The 2 that remained outstanding were at the time of inspection still undergoing further investigation. On completion of a multi-agency investigation Pathway Care if necessary could also make decisions to undertake their own review of foster carers that would be presented to the fostering panel for recommendations.

The November 2006 draft for the amended complaints procedure for Pathway Care was provided during the inspection. This procedure sets out to all users of their service how problems will be sorted out and differentiates between formal complaints and concerns and how they would be dealt with. All matters related to complaints and concerns were recorded, addressed and followed through to final outcome.

The good practice recommendation from the previous inspection which highlighted the need for a dedicated administrator to support the work of collating all information relating to complaints, concerns and allegations etc. had been implemented.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source

SECTION SEVEN – FITNESS OF PREMISES FOR USE AS A FOSTERING SERVICE

Inspector’s findings:

The South East Region shares its office space with the centralised staff for the whole of the Pathway Care organisation. Although there was reference to the agency having outgrown the building and suggestions in the 2005 business plan of a move to alternative premises this had not occurred.

Pre-inspection documents referred to the premises as still being fit for purpose although getting close towards capacity. The lease of the flat at Danescourt Cardiff (Studio 31) had provided additional facilities for child based activities.

The office was very modern and purpose built and was easily accessible to the South East Region being close to Cardiff and the M4. Parking was provided under and behind the building.

The inspectors felt that the current building provided adequate office space for the agency and was able to be accessed by a wheelchair user.

Open plan office space was provided on two floors and there was a large ground floor room which was used for meetings and training purposes. Kitchen and toilet facilities were also available on both floors.

A number of smaller rooms provided accommodation for interviews and use by the agencies’ therapist together with office space for the more senior staff.

Some of the reception/administrative staff occupied an office close to the entrance of the building and all visitors were admitted via. a buzzer system. All visitors were expected to sign in and out of the office.

Questionnaires completed by staff did not indicate any dissatisfaction with the building, some stated that they felt the quality of the accommodation to be good and that they had all the necessary equipment to do their job.

One supervising social worker did state that she valued the opportunity to work from home when completing assessment reports.

There appeared to be adequate facilities for ensuring safety and confidentiality of information.

A certificate relating to insurances was also provided as part of the pre-inspection documents and was dated up to 30th September 2007.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source

SECTION EIGHT – FINANCIAL REQUIREMENTS

Inspector's findings:

The accounts for the year ended the 31st March 2006 were at the time of inspection still in draft stage and were with auditors in preparation for filing with Companies House by January 2007.

Pathway Care did provide financial statements for 31 March 2005 undertaken by Carston & Co (Cardiff) Ltd.

The pre-inspection documents provided for inspection stated that a finance director had been appointed in order to undertake the responsibility for the financial management of the company. The pre-inspection documents also stated that a full financial contingency plan was in place with the support of the bank.

The inspectors during the course of the inspection did not evidence any issues that would suggest that the fostering agency was not financially viable.

Pathway Care employed a dedicated finance department that managed the payment systems.

Foster carers did not raise any issues with regards to payments apart from 1 carer who as previously recorded stated their opinion that teenagers would benefit from additional clothing and holiday allowances.

Foster carers appeared to be clear about payments and funding for equipment required for looking after children. Updated information on such matters is contained in the foster carer's handbook.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source

SECTION NINE – FOSTERING PANELS

Inspector's findings:

The inspectors did not attend panel during this inspection episode. Evidence for this section was obtained from information provided by the pre-inspection documents and, an evaluation of the questionnaires completed by social workers, foster carers and panel members.

Access to the agencies' policy and procedures documentation for fostering panels dated July 2006 informed that the fostering panel which was located in Cardiff provided for Pathway Care South East Wales and Pathway Care West Wales. This document outlined the procedures and terms of reference for the fostering panel and incorporated all matters as required by Standard 31 and the relevant regulations.

Those requirements ensured that the fostering panel was organised efficiently and effectively in that good quality decisions were made with regards to foster cares that promoted and safeguarded the welfare of children in foster care. The document was evidenced as thorough and pertinent to the tasks of the panel members.

The inspectors were provided with a copy of the panel managers' report last completed in September 2006. This report reflected the work of the panel and detailed panel membership and training together with panel applications considered during the past 12 months. The report detailed the changes in membership during the last year but considered that the changes had been well managed. It remained the agencies' view that the panel had retained its ability to be an effective recommending body for Pathway Care.

The monitoring and quality assurance of social workers' assessments for carers is a prime focus of the panels' function. Panel member feedback forms are used to collect the views of members on the quality of those assessments.

Panel members also undertake an annual evaluation of their work with particular emphasis to their training needs and personal development on the panel. Examples of these evaluations were provided with the panel manager's report together with the panel chair's evaluation 2005-2006.

The comments provided by the panel members' evaluations evidenced that a lot of thought was given to the roles they held. There were several suggestions for improvement such as receiving more training on the business planning of the agency, attending some foster carer training and the benefits of dealing with any contentious issues which may arise from same sex applications and/or completely unacceptable applicants. Other comments focused on the changes that had occurred in the panel membership and the need to build up trust and confidence with new members particularly when dealing with emotive issues. Another panel member reported that they felt that the changes had resulted in the panel becoming more independent and autonomous.

Generally the comments from these evaluations were extremely positive and this was reflected in the questionnaires that had been completed during the course of the inspection.

A copy of the minutes for the Pathway Care fostering panel meeting dated the 19

September 2006 were also provided and examined by the inspectors. Again there was evidence of all matters being well documented and that careful consideration had been given to all matters such as approvals, reviews, variations and resignations.

The minutes of this panel meeting particularly evidenced the consultation process with regards to the approval of new carers. The inexperience of caring for children had been highlighted and discussed during 1 prospective foster carers' application. There was good evidence to suggest that panel members had thoroughly considered all aspects of the supervising social workers' assessment, and that sensitive and pertinent questions had been asked. The panel pending further work and assessment had deferred the outcome of that application.

The inspectors concluded that the role of the fostering panel was effectively delivered by an appropriate and skilled membership that operated within the regulatory requirements.

The good practice recommendation from the previous inspection that a commitment by the managing directors to attend panel had been implemented.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:	NMS or other source

SECTION TEN – SHORT – TERM BREAKS**Inspector's findings:**

Not applicable to this fostering agency.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:**NMS or other source**

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SECTION ELEVEN – FAMILY AND FRIENDS AS CARERS

Inspector's findings:

Not applicable to this fostering agency.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

Good practice recommendations:	NMS or other source

SECTION TWELVE – PLACEMENT OF CHILDREN

N.B. Use of this section of the report will apply primarily to inspections of local authority fostering services and the duties and responsibilities covered in Parts 5 and 6 of the Fostering Services (Wales) Regulations 2003 only. It may need to be used for inspections of independent agencies where a local authority delegates certain duties to them under Regulation 40.

Inspector's findings:

Not considered during this inspection episode.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

NMS or other source
