

# **Care and Social Services Inspectorate Wales**

Care Standards Act 2000

**Inspection report  
Fostering services**

**Pathway Care (West Wales) Ltd**

Capel Dewi Hall  
Capel Dewi  
SA32 8AD

**Date of publication – 10 December 2009**

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Dates of other relevant contact since last report:	
Date of previous report publication:	18 February 2009
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## Introduction

This report has been compiled following an inspection of the fostering service undertaken by Care and Social Services Inspectorate Wales (CSSIW) under the provisions of the Care Standards Act 2000 and associated regulations.

The primary focus of the report is to comment on the quality of life and quality of care experienced by service users (foster carers and children in placement).

The report contains information on how we inspect and what we find. This inspection focuses specifically on the Fostering Services (Wales) Regulations 2003 but also takes into account the National Minimum Standards for Fostering Services. The report is divided into nine sections reflecting the broad areas covered by the inspection:

1. Summary of findings
2. Policies and procedures / information
3. Management and staffing of the service, (including premises and finance)
4. Provision of foster carers (including fostering panel)
5. Quality of care and safety for children placed
6. Placement of children, parts v & vi of the regulations
7. Records
8. Short term placements
9. Family and friends as carers

CSSIW inspectors are authorised to enter and inspect fostering services at any time. Inspection enables CSSIW to satisfy itself that the service should continue to operate, and for IFAs this will include satisfaction that continued registration is justified. It also ensures that all fostering services are compliant with:

- Care Standards Act 2000 and The Fostering Services (Wales) Regulations 2003, whilst taking into account the National Minimum Standards for Fostering Services.
- The service's own statement of purpose.

At each inspection episode there are visits to the service during which CSSIW may adopt a range of different methods in its attempt to capture service user's and their relatives'/representatives' experiences. Such methods may for example include self-assessment, discussion groups, case tracking, visits to carers' homes, observation, interviews, and the use of questionnaires. At any other time throughout the year visits may also be made to the service to investigate complaints and to respond to any changes in the service.

Readers must be aware that a report is intended to reflect the findings of the inspector at a specific period in time. Readers should not conclude that the circumstances of the service will be the same at all times.

The registered/responsible person/s is/are responsible for ensuring that the fostering service operates in a way which complies with the service specific regulations.

CSSIW will comment in the general text of the inspection report on their compliance.

For those regulations which CSSIW believes to be key in bringing about change in the particular service, they will be separately and clearly identified in the requirement section.

As well as listing these key requirements from the current inspection, requirements made by CSSIW since the last inspection, which have been met and those which remain outstanding are included in this report. The reader should note that requirements made in last year's report which are not listed as outstanding have been appropriately complied with.

Where key requirements have been identified, the provider is required under regulation 42B, (Compliance Notification), to advise, in writing, the appropriate regional office of the completion of any action required by CSSIW.

The regulated service is also responsible for having in place a clear, effective and fair complaints procedure which promotes local resolution between the parties in a swift and satisfactory manner, wherever possible. The annual inspection report will include a summary of the numbers of complaints dealt with locally and their outcome.

CSSIW may also be involved in the investigation of a complaint. Where this is the case CSSIW makes publicly available a summary of that complaint. CSSIW will also include within the annual inspection report a summary of any matters it has been involved in together with any action taken by CSSIW.

Should you have concerns about anything arising from the Inspector's findings, you may discuss these with CSSIW or with the registered person.

Care and Social Services Inspectorate Wales is required to make reports on regulated services available to the public. The report is a public document and will be available on the CSSIW web site, [www.cssiw.org.uk](http://www.cssiw.org.uk)

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## Section one: Summary of findings

At the time of inspection, Pathway Care (West Wales) fostering agency was situated in the village of Capel Dewi approximately four miles from the town of Carmarthen. Pathway Care Ltd had three other regional offices: two located in England, inspected by Ofsted and one other in Wales, based in Cardiff, which was subject to a separate inspection by the Care and Social Services Inspectorate for Wales (CSSIW).

Pathway Care in Capel Dewi, Carmarthenshire, was registered by CSSIW in July 2004. The inspection took place over a number of days in October 2009. Evidence was gathered from the following sources:

- Written information made available to CSSIW prior to and during the inspection including documentation and procedures;
- Discussions with foster carers;
- Discussion with the registered manager and staff members;
- Questionnaires received from representatives of the social work team;
- Direct checking of a sample of records required to be maintained by the Agency;
- Questionnaires completed by foster carers and young people in placement;
- Comments received from placing authorities.

At the time of the inspection the Carmarthenshire branch of Pathway Care had a total of 79 approved carers, all located within West Wales, with a total of 164 approved placements.

Foster carers spoke positively about all aspects of this agency. All parties questioned indicated that positive outcomes for young people and support to the foster carers were the main focus of this agency. Pathway Care Ltd (West Wales) had maintained a stable workforce with a core of experienced staff members. There had been a small increase in the number of foster cares since the last inspection. Staff commented that they worked in a positive and supportive environment. The agency had established policies and procedures and many of these had been reviewed and updated since the agency was first registered. Evidence provided during the inspection indicated that Pathway Care Ltd (West Wales) continued to operate efficiently and was well organised. This agency continued to function to, and on occasion, above National Minimum Standards for Fostering Services.

A detailed report about the findings of this inspection can be found below and would include any requirements and recommendations. It was not practically possible for every aspect of the operation of an establishment to be observed on each visit. The absence of reference to a particular fault or issue does not mean that such a fault did not exist. It is the responsibility of the registered persons to ensure that in all respects the fostering agency operates in accordance with the relevant Laws, Regulations and National Minimum Standards.

## Section two: Policies and procedures / information

### Inspector's findings:

The self-assessment documentation provided to the Care and Social Services Inspectorate Wales (CSSIW) at the initial stage of this inspection episode stated that Pathway Care (West Wales) Ltd reviewed and updated its Statement of Purpose in 2009. The inspector viewed the updated copy of this document prior to the inspection and found it to be of a good quality which provided the reader with clear information on the agency and the services provided.

Page 10 of the Statement of Purpose included a declaration that the agency was 'able to provide family placements for a wide range of children, including those who are deemed difficult to place due to behavioural, disability or language needs through a range of specialist care services.'

Through the issuing of questionnaires and face to face discussions, staff and foster carers stated that they were aware of the agency's statement of purpose and that they worked within its remits. Twelve questionnaires were sent to social workers who worked with young people placed with Pathway Care foster carers, however none were returned, so their opinions on whether the statement of purpose accurately reflected the service provided was not acquired.

The children's guide produced by the agency was found to be child-friendly and provided young people with clear, concise information on the organisation and the people working within it. There was space within the booklet for the young person's social worker to provide relevant contact details for the numerous people and organisations including the Children's Commissioner for Wales and the Care and Social Services Inspectorate for Wales. There were information sheets included within the booklet that allow the young person to add personal information e.g. likes/dislikes important dates and information. Pathway Care have a complaints leaflet specifically designed for young people in placement and this lists all the relevant contact numbers including details of an appropriate advocate service. The Children Guide was not dated so the inspector could not evidence that it had been reviewed since the last inspection.

Pathway care had developed a safe care/child protection training pack and it was evidenced that foster carers received core training in child protection. The manager stated that all foster carers were expected to update this training on a three yearly basis. Annual sessions on child protection were provided by the organisation to ensure that foster carers were able to meet that training expectation. The agency had developed appropriate policies and procedures to help protect young people from all forms of abuse and neglect. Foster carers and staff's awareness of these issues was addressed through induction and on-going development training sessions. Discussions and questionnaires completed indicated that foster carers had received training in child protection, safe caring and internet awareness which was on-going. They also confirmed that foster carers were aware of acceptable forms of sanctions. Foster Carer handbooks were updated as required.

Pathway Care Ltd (West Wales) was pro-active in informing the CSSIW of any child

protection issues. Evidence has been observed that all allegations were immediately referred to the local authority child protection team and the CSSIW had been kept informed of outcomes. Staff and foster carers stated that they were aware of the agency's written procedure regarding a young person missing from home.

Two child protection issues were raised since the last inspection of the service and it was evidenced that they had been dealt with appropriately. Both had been concluded and neither had resulted in enforcement action being taken by the Assembly.

It was observed during the inspection that there was a procedure in place to review the registration of foster carers on an annual basis. On a sample of foster carer files viewed during the inspection, all reviews were observed to be up to date or in the process of being completed.

**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 and staffing of the services, (including premises and finance)**

#### **Inspector's findings:**

At the time of the inspection the fostering team of Pathway Care (West Wales) Ltd consisted of the registered manager, who was also the director of business development; one regional manager; one principal officer – quality assurance; seven family placement supporting social workers (FPSSW); one outreach worker and two administrators. Staffing levels were deemed adequate for the size of the agency. Seventy nine (79) foster carers, offering one hundred and sixty four (164) approved places within Wales, were being supported on an 12:1 ratio (each FPSSW managing a maximum of 12 pieces of work – foster carers and form F applications). Evidence was observed that temporary absences of staff (e.g. maternity or long-term sickness) were covered wherever possible by replacement staff. The training, quality assurance, H.R, finance and marketing departments located in Cardiff compliment the service being provided in West Wales.

Since the last inspection of the service, a new manager had been registered by CSSIW. The person appointed had the necessary knowledge, skills and experience to undertake the management of the fostering service in an efficient and professional manner. She was also the director of business development for Pathway Care in Wales. Discussions evidenced commitment to professional development including training with regards to changes in practices and legislation. There were clear lines of accountability and levels of delegation within the organisation.

The agency had procedures in place to monitor that the service was being managed efficiently and effectively. The manager was familiar with and applied the requirements of Schedule 7 of the Fostering Services (Wales) Regulations 2003, which details matters to be monitored by the registered person. A Regulation 42 report, dated September 2009 was included within the Self Assessment documentation.

The role of responsible individual had also changed since the last inspection. The person approved by CSSIW (Cardiff) was observed to be a suitably qualified and experienced individual. Although the responsible individual was based in the Cardiff office of Pathway care, discussions with the manager confirmed that they have regular contact and were able to discuss any issues that arose in a timely manner.

The agency was observed to operate within Pathway Care corporate policies and procedures in relation to the recruitment and selection of staff and carers. These procedures adhered to The Fostering Services (Wales) Regulations 2003. Staff personnel files were not viewed during this inspection, however the self assessment documentation stated that all staff had been recruited according to set policies and all had a current CRB check. It was again noted that the FPSSW were experienced individuals who had appropriate qualifications to work with children. Since the last inspection evidence was observed that workers have been provided with opportunities to undertake training in a variety of areas. No issues were highlighted by individuals relating to staff training availability or content.

It was verified during the inspection that the registered manager undertook supervision of the regional manager who then undertook the supervision of the FPSSW. Supervision

records were not viewed during this inspection.

Evidence was observed that staff meetings were scheduled on a regular basis with all staff attending. One of these meetings was observed as part of the inspection episode. Minutes of these meeting were recorded and kept appropriately.

Pathway Care (West Wales) fostering agency was situated in the village of Capel Dewi approximately four miles from the town of Carmarthen. Capel Dewi Hall was a large building set in its own grounds with ample parking spaces for staff and carers. The area designated for car parking is gravelled and may cause difficulty for wheelchair users, however access to the ground floor area's of the building would not be restricted for a person with a disability.

Internally the ground floor comprised reception, meeting and contact rooms. The contact room was equipped with play equipment and toys to which young people had access. All rooms could be used by foster carers and young people for meetings or for supervised contact with birth parents. The administration staff were also located on the ground floor. The upper floor was utilised as office space for staff and had restricted access to non-staff members. The storage of files was located in individual offices. All staff had their own desk space and the manager had a separate office. Staff also had access to a kitchen area on the ground floor. Insurance cover included employer and public liability, professional indemnity and covered the premises and contents. The premises was protected by a security system.

The agency was observed to have effective administrative systems that included staff having easy access to computers. A new computer system (CASSI) was going live at the time of inspection and the manager stated that it was hoped that this system would improve the monitoring of placements and vacancies and ensure that all documentation was accessible to all staff members. It was stated that appropriate measures were in place to safeguard IT systems.

Pathway Care Ltd had a dedicated finance department that managed the payment systems. Financial records were not requested as part of this inspection process and the inspector did not evidence any issues that would suggest that the fostering agency was not financially viable. Foster carers did not raise any issues with regards to payments. Foster carers spoken to were clear about payments and funding for equipment required for looking after children. Updated information on such matters was 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:**

<b>Action required</b>	<b>Timescale for completion</b>	<b>Regulation number</b>

<b>Good practice recommendations:</b>	<b>NMS or other source</b>

## **Section four: Provision of foster carers (including panel)**

### **Inspector`s findings:**

Evidence provided with the self assessment documentation indicated that Pathway Care (West Wales) Ltd were providing a fostering service with 79 approved carers, all located within West Wales , with a total of 164 approved placements.

Evidence was observed within individual case files that potential carers applying to the agency were contacted by a supervising social worker. As with previous inspections of the service, several foster carers indicated that the decision to work for Pathway Care was due to the way in which the agency responded quickly and efficiently to their application. At the time of inspection there were ten (10) prospective carers undertaking the assessment process and awaiting approval.

Pathway Care were observed to have a very thorough recruitment process from initial enquiry through to approval at foster panel. A BAAF Form F competency based fostering assessment was undertaken by the supervising social workers. These were found to be very detailed and involved interviews, references, medical and CRB checks being undertaken. Potential carers were expected to undertake the mandatory 3-day preparation to foster training pre-approval. Foster cares stated that the programme provided a sound foundation for them and was an integral part of the assessment process. Discussions with and information received from foster carers emphasised the importance of this training as it highlighted the realities of the fostering task for potential carers.

Documentation on individual files evidenced that training for foster carers was considered throughout the assessment process with continued evaluation of training needs via supervision and annual reviews. A wide ranging training programme was provided to foster carers incorporating child protection, safe care, attachment disorder, first aid and record keeping to name but a few. Training to meet any individual needs was considered and provided as and when identified.

The inspector attended a child protection training session that was provided to foster carers as part of the inspection episode. Thirteen foster carers attended the training that was provided by the training department of Pathway Care. The trainer was a very experienced social worker who was able to relate the training to her own practice and experience. The inspector found the training to very clear and informative, child protection processes were clearly explained to the foster carers and the training encouraged the foster carer involvement by asking for personal experiences to be shared. Following the training evaluation forms were used for feedback. Foster carers were also asked to provide written evidence of their understanding of the training, which would be used within the child workforce development portfolio which it was stated that Pathway carers will be expected to complete.

Other support provided for foster carers included regular telephone contact and fortnightly supervision visits by their FPSSW, access to a well-documented handbook and regular support groups. Specialist support groups were also provided, such as the 'Men who

foster' & the 'Children who foster'. Foster carers stated that they were aware of the out of hours on call system that was available to them and that when they had needed to use it they had found to be easily accessible.

The case files of four foster carers and the young people in placement with them were inspected as part of the inspection process. Additional information was provided via questionnaires completed by foster carers and young people. Information contained on the files was once more found to be comprehensive, well structured and in keeping with the information specified in Schedule 3. Panel recommendations and approval status was evidenced on files alongside foster carers' agreements; health and safety checklists and safe care assessments. On several files it was again noted that the LAC documentation was not always complete, some LAC documentation was observed to be several years old and appeared not to reflect the current plans of care for the young people. This was discussed with the manager who stated that some authorities were better than others at completing the LAC forms. It was noted that Statutory Reviews were being undertaken within appropriate timescales; however it appears that care plans were not being reconsidered during these reviews. It was also noted that the agency were not always provided with minutes of review meetings within a timely fashion. There was evidence on files that the agency were pro-active in requesting LAC & review documentation and that they were prepared to chase up when it was not forthcoming. However the inspector made a recommendation that the timescales for processing the requests for documentation were made quicker as evidence was observed on one file that six months had passed before second request for LAC documentation was made.

Questionnaires and discussions with foster carers evidenced that they felt they received appropriate support from the agency. They confirmed that they met with their supervising social worker at least fortnightly and received regular telephone contacts. Foster carers felt that this was a strength of the agency. They also felt they were kept well informed by the agency. One foster carer stated that support groups arranged by the agency did not meet their needs. This was discussed with the manager who stated that they were aware of this issue and were looking at different ways of arranging support groups. One staff member had undertaken a survey of foster carers to try to determine what they want from support services/groups. The results were being collated at the time of the inspection. No other significant issues with regards to training or the placement of young people was raised with the inspector. The inspector concluded that the way in which the fostering agency supported its carers was one of its strengths and an area of good practice.

As part of the inspection process the inspector attended a meeting of the joint fostering panel used by the Cardiff and West Wales branches of Pathway Care. The panel meetings were held in the offices of the Cardiff branch of the organization and on the day of inspection the meeting was observed to be quorate, with representations from social work staff of both agencies and independent members. The inspector observed the process of prospective carers being brought before the panel for approval to foster with the agency. Although it was apparent on one Form F application that the social worker who had completed the assessment had not explored one particular issue with the prospective carers, the inspector was able to observe that panel members had scrutinized the application thoroughly. It was clear that panel members had the necessary knowledge and experience to challenge the assessment process and make appropriate judgments. Therefore the inspector was able to clearly evidence that they were operating in-line with Regulation 26 of the Fostering Agency (Wales) Regulations 2003. Through discussion with panel members and the scrutiny of documentation provided, the inspector

noted that some members of the panel were near to completing their second three year term of office with Pathway fostering panel. The panel chair and manager of the service were aware of the requirements of Regulation 24 (6) which states a fostering panel member must not hold office for a term exceeding three years, and may not hold office for the panel of the same fostering service provider for more than two consecutive terms. Being mindful of this, it was recommended that new members were to be recruited in a timely fashion to ensure that meetings remain quorate.

**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
Timescales prescribed by Pathway Care for requesting LAC documentation from local authorities must be adhered to Family Placement Supporting Social Workers.	

## Section five: Quality of care and safety for children placed

### Inspector`s findings:

Discussion with staff and foster carers and the examination of information provided, enabled the inspector to establish that the promotion of the welfare of young people placed with foster carers by this agency was a high priority. Written documentation observed during the inspection process evidenced that appropriate checks and clearances, as required by the Fostering Services (Wales) Regulations 2003 and the National Minimum Standards, were conducted on all foster carers prior to any matching processes starting. There were clear procedures for the placement of children and part of the assessment process focused on the provision of suitable accommodation that was adequately furnished and well maintained. A comprehensive health and safety check was observed to have been undertaken during the Form F assessment to ensure the home and immediate environment were free of any potential risk of injury or harm and contained safety equipment where appropriate. The manager stated that these checklists were re-examined during the foster carers annual review process.

A number of foster carers were consulted with during the course of this inspection. Carers appeared to be knowledgeable of the health and safety assessments and they stated that they had participated in health and safety training during their preparation training. Information provided stated health and safety training was also routinely provided on a yearly basis, as required. Evidence of household risk assessments having been undertaken was seen on the files of family link carers selected for inspection. Carers also stated that any safety equipment required had been provided by the agency. Risk assessment documentation was discussed with the outreach worker who often worked on a lone basis with fostered children. It was stated that no formal assessment of risk was undertaken prior to a young person being taken on an activity by this worker. It was therefore recommended that the agency devise a risk assessment document which could be utilised by the outreach worker to assess the young person's mood and other presenting factors before she did any lone working with them.

Information observed during the inspection (via. files, policies and procedures) verified that Pathway Care fostering agency valued the diversity and promoted the equality of young people by ensuring that carers and support workers were aware of their needs. Evidence supported that this was achieved through training programmes and their own equal opportunities statement. Staff stated that the matching processes used by the agency ensured that young people felt comfortable within their new environments. Staff indicated that they never felt under pressure to provide a placement to young people and that no placement would be made without the full consent of all parties involved. Evidence was found that prior to any placement being agreed there were opportunities for young people to meet with the carers and a period of introduction was commenced. This period of introduction would not occur if a young person was placed with foster carers in an emergency, however it was stated that all emergency placements would be on a trial period and would be closely monitored.

Evidence was observed within individual files that the opinions of young people, their families and others significant to the young person were sought over issues, which were likely to affect their lives.

Foster carers confirmed that they were provided with written information on all aspects of the young person's life including medical and educational matters. This information was observed to be provided in documentation produced by the agency and also in the Looked After Children documentation (LAC) provided by the local authority. As stated previously in this report, it was noted that some LAC documentation had not been provided by the child's social worker, prior to the placement commencing. This was discussed with the management of the agency who stated that some Local Authorities were better than others at providing the expected information up front. There was evidence to support that the agency have systems in place to monitor where LAC documentation was missing and the inspector recommended that the staff within the agency continued to use them to prompt the authorities in question. The manager was to monitor this situation.

It was stated by the manager and foster carers that reviews of the placement with foster carers were being undertaken annually by an officer appointed by the local authority although care plans were not being reviewed/ updated at these meetings. Evidence to support this was observed on individual files.

**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
It was recommended that the agency devise a risk assessment document which could be utilised by the outreach worker to assess the young person's mood and other presenting factors before she did any lone working with them.	

**Section six: Placement of children parts v & vi of the regulations**

**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:**

It was observed that Pathway Care fostering agency worked with several Local Authorities throughout Wales and England. The self-assessment document provided prior to the inspection of this service and discussions with the manger indicated that agreements in line with Regulation 40 of the Fostering Services (Wales) Regulations 2003 had been produced between the agency and all Welsh placing authorities. However discussions with the manager indicated that although they had a contract with authorities in England, they did not meet the requirements of the Welsh Regulations. Evidence verified that the fostering agency were continuing to be pro-active with these authorities to find a way to rectify this situation.

The Regulation 40 agreements that were in place outlined the specific duties that were to be discharged to Pathway Care in relation to Regulations 34 (making placements), 35 (supervising placements) and 36 (1) (not allowing unsuitable placements to continue). No functions in relation to statutory visits or supervision of placements were delegated to the agency. Therefore the placing authority maintained responsibility for all regulation 35 visits.

Through the recruitment of a diverse range of foster carers, the agency continued to offer a variety of locations, family composition and experience of carers to enable a child's individual needs to be met. The examination of documentation on the files of foster carers and young people, and information provided by the staff and manager of Pathway Care Ltd (West Wales), enabled the inspector to establish that a careful matching process was conducted on all referrals received. The agency had clear procedures for the placement of children. All referrals for placements with this agency were made through a Local Authority.

Discussion and documentation indicated that written child specific agreements had been completed and these included information as prescribed by Regulation 40 (5). Evidence to support this was not sought during this inspection. No issues were reported to the CSSIW in relation to concerns about this independent fostering agency in this inspection year.

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

Action required	When completed	Regulation number

**Requirements which remain outstanding:**

<b>Action required (previous outstanding requirements)</b>	<b>Original timescale for completion</b>	<b>Regulation number</b>

**New requirements from this inspection:**

<b>Action required</b>	<b>Timescale for completion</b>	<b>Regulation number</b>

<b>Good practice recommendations:</b>	<b>NMS or other source</b>

**Section seven: Records**

**Inspector`s findings:**

Pathway Care Ltd (West Wales) had written policies relating to case recording, access to information and the Data Protection Act. Foster carers had access to copies of this documentation within the foster carer handbook. These documents provided a rigid guide for workers to adhere to.

Separate files were observed to be held within the offices at Capel Dewi for each foster carer and young person in placement. These files were found to be well organised with divides and were indexed to allow easy retrieval of information. As recorded previously in this report, the inspection of a sample of files indicated that the agency were pro-active in obtaining relevant documentation in relation to young people placed through the agency: however some files continued to have incomplete LAC documentation available. Letters sent to the placing authorities from Pathway Care to request missing documentation were observed. The manager stated that there was an expectation that files were audited on an annual basis.

Life story work for young people was addressed within the foster carer`s handbook. It was stated that foster carers working for this agency were aware of the importance of keeping appropriate memorabilia in relation to the young person in their care. The agency issued `life story packs` to each young person, to help facilitate this process.

It was an expectation by the agency that all foster carers keep a daily diary in relation to the children placed and it was indicated that foster carers then complete a monthly placement report in respect of every child in placement.

All information in relation to foster carers and young people was securely stored in locked cabinets on the premises of the agency. All foster carers consulted stated that they had secure, locked storage facilities for confidential information.

The manager stated that systems were in place to ensure that relevant documentation was returned to the responsible authority at the end of a placement. The agency was aware of the need for copies to be retained for up to 15 years in line with the requirements of Regulation 22 (2); Schedule 2 and archiving systems were in place.

**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:**

<b>Action required</b>	<b>Timescale for completion</b>	<b>Regulation number</b>

<b>Good practice recommendations:</b>	<b>NMS or other source</b>

**Section eight: Short term placements**

**Inspector`s findings:**

Pathway Care's registration indicated that they were also approved to provide short break and respite placements, however this area of registration was not specifically inspected during this inspection episode. Previous discussions with the manager had confirmed that the staff within the agency were aware of the requirements of Regulation 37 (1) a & b in relation to short breaks, in that no single placement was to last more than 4 weeks and the total duration of the placement would not exceed 120 days in any 12 month period.

Placements were available to provide foster carers with respite, however these were with other approved foster carers or with specific family members who had undertaken a Form F assessment. Discussions with the manager evidenced that monitoring arrangements for any short break or respite placement would be the same as offered to other placements. It was also recognized that throughout any short break or respite placement that the parent or long term foster carer would remain the main carer for the young person and this was where parental responsibility would lie.

**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: Family and friends as carers**

<b>Inspector`s findings:</b>
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