

Aberdeenshire Council - Fostering Service

Fostering Service

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Type of inspection: Announced (short notice)
Inspection completed on: 23 March 2017

Service provided by:
Aberdeenshire Council

Service provider number:
SP2003000029

Care service number:
CS2004083982

About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service has been registered since 2005.

Aberdeenshire Council provides a high quality fostering service for children and young people up to the age of 18 years who have been assessed as being in need of this service. The service is based in Aberdeenshire and recruits and supports carer families to provide a range of high quality fostering placements.

Staff within the service are located throughout the Aberdeenshire Area, most are co-located with social work fieldwork teams, and this means that there are staff in most areas within the council boundary.

What people told us

We spoke with and corresponded with several foster carers over the course of the inspection. Foster carers were overwhelmingly supportive of the service, enthused and encouraged by the support they were receiving from the staff team at Aberdeenshire.

Self assessment

The service submitted a full and meaningful self-assessment.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	5 - Very Good
Quality of management and leadership	not assessed

What the service does well

Aberdeenshire Council provides a high quality fostering service for children and young people who have been assessed as being in need of this service. The service is delivered by a highly skilled and effective staff team based in Inverurie in Aberdeenshire. The service recruits and supports carer families to provide a range of high quality fostering placements.

Foster carers consistently informed us that they felt very well supported by the staff team to carry out their role. We found that carers were very well trained and had access to a comprehensive and responsive training programme. The service worked from an attachment perspective and, as such, carers were highly skilled in building relationships and understanding children and young people from this perspective. Safer caring training formed a central part of all programmes and was regularly reviewed within foster carer's supervision sessions and annual reviews. Review forums were timeous and structured well to ensure the quality of the service being provided. Safer caring was further considered within looked after children's processes and we found that the service was quick to challenge standards of care that were not felt to be of good enough quality for children and young people to thrive.

Assessments for potential foster carers were evaluative and well written with considered conclusions. Relevant checks were carried out to give assurance that applicants were suitable to foster children. On approval, foster carers worked towards evidence based practice through good quality training and regular monthly supervision. Robust fostering panel processes reviewed these inputs.

Cases we tracked evidenced some very good outcomes for children in terms of their attendance at school and some strong academic outcomes. One file that we tracked evidenced a very positive intention by the team to support the academic needs of one young person. We were able to track the young person's improvements in both academic attainment and attendance as a result. The service was looking at inclusive and innovative ways to continue to develop their links with local education services to further support looked after children and reported that relations between social work and education were progressing and developing.

Children and young people were very well linked into health services and foster carers reported that health services were very accessible. The looked after and accommodated nurse and health visiting service worked closely with the team and staff reported that this was incredibly beneficial for health advice and support. The files indicated that a strong multi-agency approach helped to ensure that foster carers were accessing all suitable healthcare provision for children, and also confirmed that children had attended important medical appointments.

Support meetings were in place for foster carers and they told us that the forums available to them were highly beneficial and a way of sourcing additional support and camaraderie. All of the foster carers that we spoke with told us of the exceptional skills of the staff team in supporting them. They told us that they felt very highly regarded within the service and respected within their role.

We found a highly motivated and well trained staff team who were confident about being able to provide the necessary practical and emotional support to foster carers, children and young people. Staff were all knowledgeable and experienced in all areas of fostering. Foster carers spoke positively of the team and we were told consistently about their high level of commitment to providing the best possible service. They were all registered with the Scottish Social Services Council (SSSC). Staff were supported to meet the training and development requirements of the SSSC, and they received regular and focused supervision from managers which they reported to be very beneficial. All staff members told us that they felt well supported and fully respected in their roles. We felt that this reflected the high level of motivation and commitment from the team.

Staff very were well supported to access training and were encouraged to undertake training alongside the foster carers they supported. This ensured that training was directly relatable to the foster carers situations and supervision could be used to further enhance the learning from the training. Foster carers told us that they gained a lot from this practice.

What the service could do better

We spoke with the team about ways they could consider continuing to develop foster carer profiles to better demonstrate their knowledge and skills as they learn and develop. We discussed ways that this could be developed to demonstrate more sophisticated matching.

Foster carers supervision was timeous and we could see that it was helpful. We suggested that the service may consider developing the structure or format further to take account of:

- Emotional risk and need

- Foster carer training and outcomes identified from the output of this
- SHANARRI
- Outcome focussed work
- Actions identified followed up at next session.

Due to the large geographical area foster carers reported that there can be low numbers at some of the focus groups. We spoke with the team about revisiting this issue when it arises and trying to be as creative as possible in addressing the challenges the geography presents.

The areas we have identified for improvement did not call into question the overall very good practice highlighted within this report.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Type	Gradings	
11 Feb 2015	Announced (short notice)	Care and support	4 - Good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
29 Jan 2014	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	4 - Good
1 Feb 2013	Announced (short notice)	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
18 Mar 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	Not assessed
19 Feb 2009	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good

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