

# Fostering Service - Stornoway Fostering Service

Social Work Department  
Sandwick Road  
Stornoway  
HS1 2BW

Telephone: 01851 822 748

**Type of inspection:**  
Announced (short notice)

**Completed on:**  
5 March 2026

**Service provided by:**  
Comhairle nan Eilean Siar

**Service provider number:**  
SP2003002104

**Service no:**  
CS2005095790

## About the service

Fostering Service - Stornoway is a local authority fostering agency. The service recruits and supports foster carers to provide care to children and young people who cannot live with their birth family. The service is located in Stornoway, with fostering families located throughout the Western Isles.

The service has recently been restructured and now consists of a service manager and two supervising social workers, who work across the fostering, continuing care, and adoption services.

Inspections of the continuing care and adoption services were carried out at the same time, with separate reports available for each service.

## About the inspection

This was a short notice, announced inspection which took place between 23 February 2026 and 5 March 2026. The inspection was carried out by two inspectors from the Care Inspectorate.

This inspection was a follow up inspection to review progress on the requirements and areas for improvement made at the last inspection, completed on 16 May 2024.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service, and intelligence gathered since the last inspection.

To inform our evaluation we:

- \* spoke to nine caregivers
- \* spoke to three members of staff and management
- \* spoke to three external professionals including an Independent Reviewing Officer
- \* spoke to the panel chair and Agency Decision Maker.

## Key messages

- \* A number of requirements and areas for improvement from the last inspection have not been met.
- \* Progress on improvement work has been hindered by staffing challenges.
- \* Caregivers continued to not receive the support they required.
- \* There was a shortage of available foster placements for children and young people. The recruitment and retention of caregivers must be an area of priority for the service.
- \* There is further work to do to develop consistent approaches and clear expectations in key areas of practice including carer training, safer caring, risk assessment and matching.
- \* Increased senior management oversight in recent months provided assurance that there is now a coordinated approach to improvement planning.

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

By 31st July 2024, to ensure a consistent approach to supporting caregivers and ensure comprehensive oversight of needs and risks within fostering households, the Provider must at a minimum:

- a) Develop a policy for minimum frequency of visits to fostering households.
- b) Ensure caregivers have high-quality, regular, and recorded supervision.
- c) Ensure unannounced visits are completed to comply with relevant guidance.

This is to comply with Regulation 4(1)(a) (welfare of users) of the Social Care and Social Work improvement Scotland (Requirements for care services) regulations 2011 (SS1 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

**This requirement was made on 16 May 2024.**

## Action taken on previous requirement

The provider was in the process of developing policies and procedures to set out clear expectations around support for caregivers. When supervision visits were carried out these were well recorded, and caregivers valued the skills and knowledge of their supervising social worker. Unannounced visits were now taking place in line with regulation.

Unfortunately, staff absence had impacted on the continuity of support for caregivers, which meant that for significant periods of time support was reactive rather than proactive. Caregivers often had to ask for help rather than be able to expect this as part of a planned package of support. Caregivers were frustrated and there had been an impact on the retention of caregivers. We identified situations where a lack of support and oversight contributed to an escalation of risk within fostering households, and where caregivers had been placed under significant strain. The provider was in the process of building resilience into the staffing of the service (see also requirement 7) to ensure this area of practice is urgently addressed.

This requirement has not been met and has been extended to 1st May 2026.

## Not met

### Requirement 2

By 31st October 2024, to ensure the safety and wellbeing of children and young people, the Provider must carry out an assessment of caregivers' training needs and develop a training plan with timescales to ensure that caregivers' learning and development needs are met. At a minimum, the Provider must:

- a) Clarify the expectations of caregivers in relation to mandatory training.
- b) Provide training to all caregivers in relation to protection issues and safer caring.
- c) Provide training specific to individual caregivers' needs, as identified in the training needs assessment.
- d) Ensure tracking of caregivers' training and learning and development.
- e) Ensure supervision and review documentation records caregivers' learning and development needs.

This is to comply with Regulation 4 (1)(a) of Social Care and Social Work Improvement (Scotland) Regulations 2011 (SSI 2011/2010).

This is to ensure that the quality of care and support is consistent with the Health and Social Care Standards which state that: "I am protected from harm abuse, neglect, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20), and "I have confidence in people because they are trained, competent and skilled and are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.24).

**This requirement was made on 16 May 2024.**

## Action taken on previous requirement

Policies and procedures were being developed to encompass the expectations of caregivers training, including mandatory training. Some progress had been made in sourcing and delivering protection training and first aid training for caregivers, with support from external agencies. There was a plan to carry out a learning review with all caregivers, to help individualise the support and training they could access.

Caregivers were informed of national learning and development events taking place and were encouraged to attend. The provider had recently invested in external training and was in the process of developing an authority-wide relational model of care. We look forward to evaluating the impact of this on our next inspection.

Despite some progress, at the time of our inspection, there continued to be limited oversight of caregivers' training, and many we spoke to had not completed recent training, aside from protection training. The improvement work being carried out was still at a very early stage and had not yet impacted on caregivers' learning and development.

This requirement has not been met and will be extended to 1st July 2026.

## Not met

### Requirement 3

By 31st October 2024, to improve children and young people's permanent futures, the Provider must at a minimum:

- a) Ensure robust tracking arrangements are in place for children at all stages of their care journey and that drift and delay is addressed at each stage of the process.
- b) Ensure children and young people have SMART (Specific, Measurable, Achievable, Relevant, Timebound) plans in place which drive planning for their future care.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "As a child or young person needing permanent alternative care, I experience this without unnecessary delay" (HSCS 1.16).

**This requirement was made on 16 May 2024.**

#### Action taken on previous requirement

Service oversight and tracking of children's plans remained an area that is underdeveloped. At the last inspection, it was identified that permanence policies and procedures needed to be re-established. We found that this remained the case and there was a lack of understanding, across the provider, in relation to permanence planning, processes or timescales for children as they progressed through their care journey.

At the last inspection, there was significant drift and delay for children in need of permanent alternative care. We found that this legacy continued to impact caregivers' trust in the provider. The absence of collaborative working between the practice social work team and the service also contributed to a lack of timely interventions. This was recognised by the provider who have taken steps to improve collaborative working. However, progress has been hampered due to staffing challenges.

Development work on the quality of children's plans was still required. We were not provided with any recent evidence of children's plans to evaluate if improvements had been made to SMART planning.

The lack of robust systems to monitor and promote effective permanence planning for children meant there

was the strong likelihood that delays in children's planning would persist and lead to poorer outcomes.

This requirement has not been met and will be extended to 1st July 2026.

**Not met**

## Requirement 4

By 31st October 2024, to ensure a clear commitment to continuous improvement, the Provider must at a minimum:

- a) Set out its aims and objectives.
- b) Develop an improvement plan with clear actions and timescales.
- c) Use self-evaluation, including the views of caregivers, children, and young people using the service, to inform and guide these documents.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19), and "I use a service and organisation that are well led and managed" (HSCS 4.23).

**This requirement was made on 16 May 2024.**

### Action taken on previous requirement

The service has developed draft aims and objectives however further work was required to improve the quality of these and ensure alignment to current legal and policy frameworks.

An improvement plan has been developed with clear actions and timeframes. We found discrepancies with aspects of this with actions marked as complete, despite this not being our evaluation based on the evidence.

There was greater strategic oversight of the improvement plan and a collaborate effort was underway to make sustained improvements. We were reassured by the current senior leadership team and their commitment to the service.

Self-evaluation and incorporating the views of caregivers, children and young people, had not yet been fully developed to inform service development. We concluded that there is more work to do to engage caregivers in service development. Caregivers expressed a lack of confidence in the service, due to fragmented support over many years. In order to rebuild trust and confidence, senior leaders have a role to work directly with caregivers to build relationships and involve them in the improvement journey. This is particularly relevant prior to future recruitment of new caregivers to the service.

This requirement has not been met and will be extended to 1st July 2026.

**Not met**

## Requirement 5

By 31st July 2024, the Provider must develop quality assurance systems to ensure compliance with relevant guidance and legislation, and to promote best practice. This should include, but is not limited to:

- a) Developing tracking systems regarding key areas of work. This should include, but not be limited to: carer supervision; unannounced visits; background checks; health and safety checks.
- b) Ensuring caregiver reviews take place within statutory timeframes, including for caregivers dual approved as foster carers and adopters.

This is to comply with Regulation 4(1)(a) (welfare of users) of the Social Care and Social Work improvement Scotland (Requirements for care services) regulations 2011 (SS1 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19).

**This requirement was made on 16 May 2024.**

### Action taken on previous requirement

The provider considered that improvements to their recording system meant that there was greater oversight of key dates, including caregiver reviews and panels. We saw that caregiver panel reviews were taking place within statutory timeframes and internal reviews were generally taking place in line with the service's procedure.

However, the tracking systems we reviewed did not provide the necessary detail to enable the service manager to have the level of oversight required to ensure compliance with regulations and to promote best practice. The service manager recognised the importance of tracking key areas of practice and had plans to establish more robust oversight systems as they developed in their role.

This requirement has not been met and will be continued to 1st June 2026.

**Not met**

## Requirement 6

By 31st October 2024, to ensure the Panel is sufficiently able to provide timely and robust recommendations, which are based upon best practice, the Provider must at a minimum:

- a) Ensure there is a suitably skilled and trained panel to support the assessment and review of caregivers of young people receiving continuing care.
- b) Demonstrate efforts to recruit new panel members.
- c) Provide support and appraisals to panel members.
- d) Provide learning and development opportunities to all panel members.

This is to comply with Regulation 4(1)(a) (welfare of users) of the Social Care and Social Work improvement Scotland (Requirements for care services) regulations 2011 (SS1 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19), and "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisation codes" (HSCS 3.14).

**This requirement was made on 16 May 2024.**

### Action taken on previous requirement

The panel continued to provide a robust assessment and review of caregivers' roles. We were encouraged to find that two new panel members had been recruited to strengthen and build resilience into the panel. Panel member appraisals had taken place since the last inspection. There was confidence in the skills, knowledge and experience of panel members. Panel members had access to training through their main employment and had also been invited to future training sessions within the service. We considered that the panel were able to make robust recommendations and functioned very well.

Panel development remained an area that requires further attention. There had been no panel development days since the last inspection. The panel would benefit from greater awareness of the strategic direction and the very specific context and challenges of the provider that are relevant to panel business. Arrangements for future panel development and ongoing panel member appraisals were unclear, and we identified the need for increased communication and collaboration between the panel and provider. The provider accepted this and provided reassurance that this would be addressed.

Despite the need for further improvement, we were satisfied that this requirement had been met.

**Met - within timescales**

## Requirement 7

By 31st October 2024, the Provider must ensure there are adequate numbers of skilled staff equipped to carry out all tasks, responsibilities, and improvement work associated with the service. Staff should be adequately supervised to ensure any gaps in service delivery are identified and actioned. To do this, the provider must, as a minimum:

- a) Ensure there are sufficient numbers of suitably skilled and qualified staff working in the service through undertaking a staffing needs assessment.
- b) Ensure that formal and recorded supervision of all staff takes place in a timely manner and occurs in line with the provider's policy, for all staff, including leaders.

This is to comply with Regulation 7 of The Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "People have time to support and care for me and to speak with me" (HSCS 3.15), and "I have confidence in people because they are trained, competent and skilled and are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.24).

**This requirement was made on 16 May 2024.**

**Action taken on previous requirement**

Following our last inspection, a review and restructure took place which both increased the remit of the service (now also encompasses kinship care support), and the number of staff working in the service. A new manager had been appointed and started in their role eight weeks prior to our inspection. A relief social worker had recently been appointed to add resilience to staffing arrangements, which is important given the small size of the service. The provider had confidence going forward that the service was now equipped with the necessary staffing arrangements to carry out all tasks, responsibilities and improvement work required. Staff were now receiving regular, recorded supervision, with a supervision contract in place setting out the expectations.

Despite the work undertaken, at the time of our inspection there were no staff available to provide consistent support to caregivers due to long term staff absence and lack of resilience in the service. This had impacted on people's experiences and outcomes (see also requirement 1). We had confidence that there was now improved senior management oversight of the service.

However, at time of our inspection this requirement had not been met and will be continued to 1st May 2026.

**Not met****Requirement 8**

By 31st July 2024 to ensure children, young people and caregivers' health, safety and wellbeing is robustly prioritised and responded to, the Provider must ensure individual safer caring plans and risk assessments are in place for all children and young people. These should be regularly reviewed and updated.

This is to comply with Regulation 4(1)(a) (welfare of users) of the Social Care and Social Work Improvement Scotland (Requirements for care services) regulations 2011 (SS1 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm" (HSCS 3.21).

**This requirement was made on 16 May 2024.**

**Action taken on previous requirement**

Some children and young people now had both safer caring plans and risk assessments. Policies and procedures were being developed to set out the need for safer caring plans and risk assessments, and the expectations around reviews. The need for caregivers to have training in safer caring has been recognised and plans were underway to ensure regular review and updating of staff and caregivers' knowledge in this area.

However, there was not yet a clear approach to safer caring plans and risk assessments across the service. Policies and procedures had not yet been implemented, training expectations were not yet clear, and inconsistencies in practice were evident. Some children and young people did not have a safer caring plan or risk assessment, despite the clear and pressing need for these.

This requirement has not been met and will be extended to 1st May 2026.

**Not met**

## What the service has done to meet any areas for improvement we made at or since the last inspection

### Areas for improvement

#### Previous area for improvement 1

To ensure the dignity and respect of children and young people, the service should ensure language is respectful and reflective of a rights-based approach to care and support. The service should review and adapt all relevant documentation, ensuring it is reflective of the promise and the Health and Social Care Standards.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I am accepted and valued whatever my needs, ability, gender, age, faith, mental health status, race, background or sexual orientation" (HSCS 1.1), and "I experience high-quality care and support based on relevant evidence, guidance and best practice"(HSCS 4.11).

**This area for improvement was made on 16 May 2024.**

#### Action taken since then

Work was being undertaken to update policies and procedures within the service. Within the documents we reviewed, it was clear that leaders knew the expectations and were committed to modernising language to ensure it was reflective of both the promise and the Health and Social Care Standards. We suggested the service collaborates with the local authority's promise-lead to ensure documents are 'promise-proofed' prior to going to committee later this year.

There is further work to do, but enough progress had been made for us to consider this area for improvement to be met.

#### Previous area for improvement 2

To ensure children and young people have a clear understanding of their past and are supported to develop a strong sense of identity, the service should improve its approach to life story work. This should include, but not be limited to:

- a) Providing life story work to children and young people where this has been assessed as being in their best interests.
- b) Provide training to staff and caregivers on supporting life story work.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I am supported to be emotionally resilient, have a strong sense of my own identity and wellbeing, and address any experiences of trauma or neglect" (HSCS 1.29).

**This area for improvement was made on 16 May 2024.**

#### Action taken since then

Some progress had been made, with life story training being delivered to some staff, and some caregivers. However, we did not have confidence that the provider was equipped (due to current staff absence and lack

of progress for young people) to meet this need for all children and young people who required it. The provider should ensure a coordinated approach to ensuring all children and young people can access support with their life story when they require it.

This area for improvement has not been met.

### Previous area for improvement 3

To ensure that decisions are strongly informed by the matching of the needs of the caregiver with the needs of the child or young person, the service should improve its approach to matching. To do this, the service should at a minimum:

- a) Develop a referral and matching process for children and young people requiring care from the service. This should include a record of caregivers' strengths and vulnerabilities, and any additional support or training required to meet the child or young person's needs.
- b) Any caregiver going over approval should have this highlighted within matching documentation, and have the arrangement reviewed at panel in line with relevant guidance.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I am supported and cared for sensitively by people who anticipate issues and are aware of any known vulnerability or frailty" (HSCS 3.18).

**This area for improvement was made on 16 May 2024.**

### Action taken since then

The provider advised that a new referral and matching process had been introduced but we were not provided with any completed examples to confirm this. Despite evidence of complexities in some matches between children and their caregiver(s), there was no assessment or plan to address potential vulnerabilities. We were concerned that the provider viewed the limited fostering resources available as part of the reason why matching assessments were not always undertaken. We considered that the approach to matching had not improved since the previous inspection.

There was not a clear or established procedure to ensure the Agency Decision Maker had oversight of those caregivers going over their approval, or the timeframes which would necessitate a return to panel.

This area for improvement has not been met.

### Previous area for improvement 4

To ensure children, young people and caregivers' voices are central to assessment and planning, the service should at a minimum:

- a) Ensure children and young people are aware of their plans and are supported to be part of reviews, as determined appropriate.
- b) Ensure children and young people's views and preferences are sought and contained meaningfully within assessments and reviews of their own needs.
- c) Ensure children and young people's views and preferences are sought and represented in assessments and reviews of their caregivers.

d) Ensure caregivers are supported to provide their views and information on children and young people's needs to multi-agency reviews.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I am recognised as an expert in my own experiences, needs and wishes" (HSCS 1.9) and, "I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve" (HSCS 4.8).

**This area for improvement was made on 16 May 2024.**

### Action taken since then

Work was being progressed across the authority to improve children and young people's participation. Children and young people were aware of their plans and were invited to attend their reviews. Children and young people's views were generally well represented within documentation for both their own reviews, and reviews of their caregivers. There was improved access to, and use of, independent advocacy to strengthen children and young people's voices. Caregivers were generally included as part of a team around children and young people.

Further work is required to strengthen this area of practice. The provider was aware of the areas requiring attention and most of this work was already underway, including a review of documentation, and improved surveys being developed.

Enough progress has been made for us to consider this area for improvement to be met.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at [www.careinspectorate.com](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

Find us on Facebook

Twitter: @careinspect

## Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.