

Aberlour Fostering Fostering Service

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Type of inspection:
Announced (short notice)

Completed on:
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Service provided by:
Aberlour Child Care Trust

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Service no:
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About the service

Aberlour Fostering is provided by Aberlour, a large Scottish charitable organisation. The service recruits and supports foster carers to provide foster placements to children and young people from birth to 18 years who cannot reside within their birth family.

The service is delivered by a team that includes supervising social workers, a family worker, and management. The service has a base in Kirkcaldy, Fife, however staff work remotely and caregiver households are spread throughout Scotland. The service are in the process of changing their registered address.

There is also a separate adult placement service to provide continuing care to young people beyond the age of 18. Both services are interlinked and were inspected at the same time. A separate report is available for the adult placement service.

At the time of our inspection, 26 children and young people were using the fostering service and seven young people were using the continuing care service.

About the inspection

This was an announced (short notice) inspection which took place between 9 January 2024 and 13 February 2024. One inspector carried out the inspection. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year. To inform our evaluation we:

- Met with eight caregivers working with the service
- Met with four children and young people
- Spoke to seven members of staff and management
- Spoke to the panel chair, agency decision maker, and attended a panel
- Spoke to three external professionals
- Reviewed questionnaire responses from caregivers, staff, and external professionals.

Key messages

- Children and young people experienced enduring and loving relationships within fostering families.
- Fostering families benefitted from responsive support from a highly skilled, stable and experienced team of staff.
- Short breaks were well planned and had a positive contribution to people's experiences.
- Life story work, combined with compassionate and trauma-informed case recording, provided important narratives for children and young people.
- The wellbeing of caregivers, children, and young people was prioritised and specialist services were provided when required to support positive outcomes.
- Improvements are required to ensure good practice around matching and unplanned endings.
- Staff and caregivers were powerful advocates and helped ensure permanent stability within fostering families.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How well is our care and support planned?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We made an evaluation of good for this key question. While some improvements were needed, the strengths identified had a significant positive impact on children and young people's experiences.

Children and young people consistently benefitted from fun, loving and enduring relationships within fostering families. Caregivers were committed and compassionate which helped to build trusting relationships. Most children and young people using the service had lived within their fostering families for several years, helping them to feel safe and secure. Children and young people were included in family life and were valued and respected as individuals.

Caregivers were well supported by a stable, experienced and highly skilled team of staff, who knew them well. One caregiver told us, "They are a team, so if you need to contact them at any point everyone in the team is aware of you and your child's current situation which is supportive and personal". Carer support meetings, training opportunities and regular activity days helped caregivers feel part of a community. There were however geographical barriers for some caregivers in being able to physically access available support, which the service was working to address. Caregivers valued the visibility of management and being consulted on service development. We concluded that strong relationships helped caregivers confidently meet the needs of children and young people.

The service was very good at using short breaks to contribute positively to children and young people's care experience. We found many examples where considerable thought, time and creativity had gone into ensuring positive matches with short break carers. Children and young people also had loving and meaningful relationships with members of their caregivers' extended family. These relationships strengthened care placements and helped children and young people feel they were loved within a wide family network.

Children and young people were supported to maintain relationships with family and friends where this was part of their plan. Caregivers were skilled at developing relationships with birth family, and we saw examples where significant effort had been made to ensure family relationships were prioritised. The service was skilled in supporting brothers and sisters to be cared for together, ensuring individualised support to meet each child's needs. Children and young people using the service had a strong sense of family identity.

Children and young people had active lives within their communities. Attendance at clubs and activities was considered a normal part of childhood. The service also arranged regular activity days for fostering households, helping build relationships across the service and include caregivers' birth children. Children and young people were able to develop a sense of belonging.

The service championed children and young people's right to a high quality education. The service worked collaboratively with education services to ensure tailored support, and commissioned specialist services where required to promote positive outcomes. The service held high aspirations for those receiving care and routinely celebrated their successes, marking important events in young people's lives. All of this helped to enrich people's experience of feeling valued and cared about.

The service takes a robust approach to child protection matters, with clear policies, procedures, quality assurance, and training in place to support this. The service was responsive to risk, and both individual and group work had been carried out with children and young people in response to specific risks, including internet safety. Children and young people were kept safe, but improvements to the recording and notifying of incidents, accidents and protection matters would strengthen practice in the service and ensure all necessary actions have been taken (**see area for improvement 1**).

Life story work was having a positive impact on children and young people's wellbeing. In addition to specific life story books, letters, and memory boxes created by caregivers, the service had started writing to children and young people each year, documenting their key successes during that period. Case notes and caregivers' monthly summaries on children and young people's progress were written in a narrative style to the child, and these records held rich and meaningful memories for young people to look back on in the future. Children and young people were helped to feel emotionally secure within their fostering family.

Mental and physical health was prioritised by the service. Caregivers advocated strongly to ensure children and young people had access to the healthcare they needed, and this had been transformative for some. The service sought specialist services for children and young people to overcome trauma, and to ensure the wellbeing and resilience of caregivers. Avoiding systematic delays ensured the right support at the right time for fostering families. Specialist training was also sought to ensure caregivers could meet the individual needs of children and young people. Children and young people were thriving due to the support they received.

The services' assessments of foster carers were of a consistently high standard and ensured caregivers had the skills and capacity to meet the needs of children and young people. Annual reviews at panel ensured regular scrutiny. We identified that practice to inform assessment could be improved. Unannounced visits

were not always carried out in a way to ensure they contributed meaningfully to assessment, which was addressed during the inspection. The number of visits to fostering households was limited in some cases due to a preference for online support. The service should ensure assessments are informed by regular quality observations within fostering family homes **(see area for improvement 2)**.

The very strong matching of children and young people into long term and permanent placements created stability and contributed to their success. However, children and young people moving into interim placements were not matched with caregivers using a clear matching process. In few instances this had led to not all necessary considerations being made. Improved matching will help ensure children and young people's needs are fully met within their fostering family **(see area for improvement 3)**.

Responsive and individualised support, including direct support to children and young people, strengthened care placements during challenging times. The service should ensure procedure is followed in respect of unplanned endings to support learning and development across the service **(see area for improvement 4)**. The service was committed to maintaining long-standing relationships with young people who left the service, and this had helped young people to feel valued.

Areas for improvement

1. To safeguard and promote children and young people's welfare, the service should ensure oversight and monitoring of incidents, accidents and protection issues. The reporting of incidents should meet the Care Inspectorate's Notification Guidance.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support is provided in a planned a safe way, including if there is an emergency or unexpected event' (HSCS 4.14), and 'I am protected from harm, neglect and abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

2. To ensure quality assessments, provide important safeguarding reassurances, and ensure consistency, the service should implement a minimum requirement on the frequency of physical visits to fostering households by staff.

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), and 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

3. To ensure that there is clear identification that the fostering family has the capacity to meet the needs of the child or young person, the service should develop a clear referral and matching process. To do this, the service should at a minimum:

- a) Ensure there is a clear referral process which outlines the needs of children requiring care.
- b) Record the strengths and vulnerabilities of caregivers in relation to meeting the needs of individual children and young people.
- c) Any caregivers going over approval are returned to panel for discussion within a short period of time.

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

4. To ensure learning from the unplanned ending of foster placements, the service should adhere to its' policy and hold a meeting to review the learning and development needs of those involved.

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 'If I have a carer, their needs are assessed and support provided' (HSCS 4.26).

How well is our care and support planned?

5 - Very Good

We found significant strengths in the services' contribution to assessment and planning, which supported positive outcomes for children and young people. We therefore evaluated this key question as very good.

Children and young people benefitted from individualised personal planning. All children and young people had plans in place which were SMART (Specific, Measurable, Achievable, Relevant and Time-bound), and reflective of their needs. These plans were regularly reviewed and the significant role of caregivers and staff in planning was well documented. In addition to local authority plans, the service had their own goals and assessment reviews. Planning ensured that care and support was focused on improving outcomes for children and young people.

Positive outcomes were supported by high quality and collaborative multi-agency work. Caregivers and staff communicated effectively with other professionals to ensure regular review of children and young people's needs, and we received very positive feedback from external professionals about the service's contribution to planning and assessment.

The service was passionate in helping children and young people achieve permanence and advocated to help avoid drift and delay. This had included commissioning an independent assessment to help progress plans for a child. The services' commitment to permanence planning ensured a sense of belonging for children and young people.

Children and young people's views and wishes contributed to assessment and planning. The family worker routinely sought all children and young people's views, including caregivers' own children, in advance of reviews and this was done in a personalised way. Independent advocacy was also promoted for children and young people when they entered the service, and we saw this being used to positive effect to help ensure children's emotional safety. Children and young people felt valued and respected by being listened to.

Some children and young people had chosen to not be part of formal planning, since they considered themselves to be part of secure and settled fostering families. In these instances, we found caregivers advocated passionately to ensure children's voices remained central to assessment and planning. One caregiver told us, "Our service always seeks and prioritises the views of the child about their own care and support as do we as carers".

Safer caring plans were robust and individualised for each child and young person. Personalised risk assessments were also in place for every child and young person and were updated regularly. Promoting children and young people's participation within these documents would help to further prioritise people's voices within care planning (**see area for improvement 1**).

Areas for improvement

1. To promote children and young people's participation within planning, the service should ensure that children and young people's views and wishes are represented within documentation about them.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am as involved as I can be in agreeing and reviewing any restrictions to my independence, control and choice' (HSCS 2.6), and 'I receive and understand information and advice in a format or language that is right for me' (HSCS 2.9).

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 Children, young people, adults and their caregiver families experience compassion, dignity and respect	5 - Very Good
1.2 Children, young people and adults get the most out of life	5 - Very Good
1.3 Children, young people and adults' health and wellbeing benefits from the care and support they experience	5 - Very Good
1.4 Children, young people, adults and their caregiver families get the service that is right for them	4 - Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and care planning reflects the outcomes and wishes of children, young people and adults	5 - Very Good

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