St. Andrew's Children's Society Fostering Service
Fostering Service

7 John's Place
Leith
Edinburgh
EH6 7EL

Telephone: 01314 543 370

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Announced (short notice)

Completed on:
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Service provided by:
St. Andrew's Children's Society

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About the service

St. Andrew's Children's Society Fostering service provides a family placement service to children and young people who are assessed as in need of alternative family care. The service recruits, provides training to and supports foster carers to care for children aged between 0 and 18 years old. There are two office locations; one in Edinburgh and one in Aberdeen. The service is managed by a Chief Executive Officer and a team of managers. The service is a charitable organisation that is run by a board of trustees.

There is a separately registered adoption service which was inspected in conjunction with the fostering service. A separate report has been published for this service.

As the findings of this inspection are based on a sample of children and young people, inspectors cannot assure the quality of experience for every service user.

About the inspection

This was a short notice announced inspection which took place between 7 January 2025 and 30 January 2025. The inspection was carried out by two inspectors from the Care Inspectorate.

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.

In making our evaluations of the service we:

- spoke with eight caregiving families, and met with two children
- spoke with 10 members of staff and management
- spoke with four external professionals
- spoke to the independent panel chair, agency decision maker, and board members
- attended a support group and a panel
- reviewed documentation
- reviewed survey responses from 39 caregivers, 10 external professionals, 10 members of staff and one young person.

During our inspection year 2024-2025 we are inspecting against a focus area which looks at how regulated services use legislation and guidance to promote children's right to continuing care and how children and young people are being helped to understand what their right to continuing care means for them. Any requirements or areas for improvement will be highlighted in this report.

Key messages

Children and young people experienced warm and nurturing care from trauma informed foster carers.

The service offered concurrency placements to provide stability and reduce moves for children between caregivers.

Lifestory was strongly promoted within the service which provided children and young people with a strong sense of self and their life journey.

Foster carers experienced a high level of support from well trained and knowledgeable staff.

The service should strengthen their review process for foster carers, including introducing annual reviews and effective tracking of timescales.

The service should be consistent in their approach to the use of safercaring plans and increase their oversight into the management of risk.

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?	4 - 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

This key question has been awarded a grade of good, while some areas of development have been identified, these were outweighed by the positive outcomes for children, young people and their families.

Children and young people developed meaningful and affectionate relationships within their fostering families. Relationships were based on love and offered lifelong security. Children had a strong sense of family identity which was supported by consistent and stable care from their caregivers. The service offers a concurrency journey to children which significantly reduced the number of moves between caregivers and promotes continuity of care.

Children and young people were loved as part of a wider family network, and where appropriate, breaks with extended family were promoted. Foster carers played a pivotal role in supporting children and young people's time with birth family. Birth parents were highly respected by the service, and foster carers were well prepared to value and express empathy towards them. Lifestory work was strongly promoted with staff

trained in therapeutic lifestory work. This knowledge was shared with families and other professionals, and used to help children and young people to develop a strong sense of identity.

Foster carers were well supported and had strong relationships with staff from the service. They were respected and listened to within the service, and many carers told us that people were there to help them when they needed it. One caregiver told us "All members of the team have been very helpful and our social worker has been beyond amazing with all her support and knowledge". Many members of staff had worked in the service for a number of years which offered consistency and continuity to families. This familiarity gave families confidence in their support.

There was a strong sense of children's rights from staff and foster carers which was also supported by the use of formal advocacy services. This resulted in children and young people experiencing strong advocacy and to improved outcomes for children and young people. Children and young people had a high degree of choice in their day to day lives. Care was very much planned around individual needs, strengths and preferences.

Children and young people were well connected to the communities they lived in, through attending various clubs and activities. These helped children to develop friendships and feel a sense of belonging. Foster carers provided children and young people with many exciting opportunities and made positive memories together.

Children and young people were supported to engage with education which resulted in positive outcomes. There was mindful consideration at supporting transitions between school settings. The service supported carers to navigate challenges that arose within education settings.

There was a good level of engagement in learning and development activities from foster carers, evidenced with the groups, events and training sessions. There was a good range of topics offered for training which was enhanced with the new online training system. All training was available to both foster carers and adoptive parents which was a positive approach. However the training plan lacked some foster carer specific training, which should be considered to best support foster carers in their role.

Staff were well trained and utilised their knowledge to best support foster carers and the children they cared for. There was a strong sense of relational and trauma informed practice within interactions, training and culture.

Children and young people were kept emotionally and physically safe within their foster families, by carers who acted in their best interests and were alert to signs of distress. The service recognised the need to review their protection procedures including reporting expectations to ensure a higher level of oversight on the protection of children and young people.

The staff team were very experienced and had a high level of expertise to deliver evidence-based interventions. Placing social workers and panel members praised the knowledge and skills of the staff team. The agency has a strong commitment to delivering therapeutic care. High-quality interventions helped families develop resilience and emotional regulation. Support was responsive to people's distress and also acted in a preventative way to build stability within households.

Physical and mental health was strongly promoted and prioritised in the service, which resulted in children and young people having their health needs met.

Foster carers were comprehensively assessed to ensure they had the capacity to meet the needs of children

and young people in their care. Children's views and voices were central to assessments. Reviews at panel were thorough for foster carers however some improvements were needed in the review process for dual approved families. The tracking of reviews also needed to improve to ensure higher oversight on the processes and ensure all timescales were met. The service did not offer annual reviews for foster carers. This is recommended as best practice to ensure there is an updated assessment, allowing for a high level of oversight within fostering households. **See area for improvement.**

The service should review terminology used in their policies and procedures to ensure it reflects messages from The Promise.

The service advocated strongly for children in relation to permanence planning which was positively promoted within the concurrency project. The service worked collaboratively with others in relation to matching decisions and was child centred in their approach. The service should develop their own internal processes to mitigate against potential poor practice from placing local authorities in relation to disruptions and transitions. This will ensure accountability for the service.

The service is in the process of registering a continuing care service to ensure a continuum of support for both young people and their foster carers. It is very positive that the service has undertaken this task to support the continuity of care for their young people.

Areas for improvement

1. For children, young people and their foster carers to be best supported, the service should undertake annual reviews with clear recommendations for foster carer registration and ensure all reviews at the fostering panel meet statutory timescales.

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

How well is our care and support planned? 4 - Good

We have awarded an evaluation of good to this key question as there were a number of strengths identified that outweighed any areas for development.

The service worked collaboratively with other professionals to contribute towards the planning for children and young people. The supervising social workers and foster carers were strong advocates for children and young people to ensure their voices were represented in their care planning.

There was not a clear expectation as to the use of safercaring plans within the service, which resulted in an inconsistent use of the plans. Some families had a clear and individualised plan which was updated to reflect their current situation, some families had plans completed at assessment which were not reviewed and others had no plan.

While risk was being managed and responded to in an individual basis, there was no holistic assessment of the risk being managed. Recordings were kept of incidents, however these were not collated or updated. The service would benefit from the development of a holistic risk assessment process which clearly detailed the use of strategies to minimise the risk, and to review the appropriateness of these.

We have concluded that the agency needs to focus on making improvements to their approach to safercaring and management of risk. For all families to have an individualised safercaring plan and where appropriate a risk assessment. An area for improvement has been made, as although poor outcomes were not identified from the current practice, improvements should be made to increase the oversight on the process. See area for improvement.

Areas for improvement

1. To promote children and young people's safety and well-being with support from confident foster carers, the service should embed the use of individualised safercaring plans for all caregiving families which accurately records specific needs of the children. Where specific risk is identified, a holistic assessment should be undertaken to analyse risk, detail interventions and review effectiveness of strategies.

This is in order to ensure care and support is consistent with the Health and Social Care Standards which state that "My care and support is provided and planned in a safe way, including if there is an emergency or unexpected event" (HSCS 4.14).

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

The service should formalise foster carer supervision processes and ensure that there is a supervision agreement in place to support this.

This is in accordance with: The National Care Standards, Foster care and family placement services - Standard 7: Information and advice.

This area for improvement was made on 7 February 2020.

Action taken since then

All families receive regular supervision visits from their allocated worker. A supervision template had been devised and was being used with fostering families. Further work was required to ensure the appropriate use and to fully embed its use into practice, however we have assessed that the level of work undertaken has been sufficient to meet this area for improvement.

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?	4 - Good
5.1 Assessment and care planning reflects the outcomes and wishes of children, young people and adults	4 - Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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