

# Inspection report

## West Lothian Council - Fostering Service Fostering Service

Children and Families Resource Team  
Lomond House  
Beveridge Square  
Dedridge  
Livingston EH54 6QF

**Inspected by:** Suzanne Beard  
**(Care Commission Officer)**

**Type of inspection:** Announced

**Inspection completed on:** 21 January 2008

**Service Number**

CS2004083345

**Service name**

West Lothian Council - Fostering Service

**Service address**

Children and Families Resource Team  
Lomond House  
Beveridge Square  
Dedridge  
Livingston EH54 6QF

**Provider Number**

SP2003002601

**Provider Name**

West Lothian Council

**Inspected By**

Suzanne Beard  
Care Commission Officer

**Inspection Type**

Announced

**Inspection Completed**

21 January 2008

**Period since last inspection**

14 months

**Local Office Address**

Stuart House  
Eskmills  
Musselburgh  
EH21 7PB.

## **Introduction**

West Lothian Fostering Service provides a fostering service for children and young people aged 0-18 years and their families who are assessed as in need of the service and who live in or have connections with West Lothian. The agency recruits and supports carer families to provide a range of fostering services.

The service is delivered by the Resource Team and is based in Livingston, West Lothian. The Resource Team is managed by a Resource Team manager who has responsibility for one team manager, ten social workers and three administrative staff.

At the time of the inspection there were 84 foster carers looking after 154 children and young people. Fifteen children were on referral to the Resource Team for a foster care placement. Ten carer applications had been allocated within the Resource Team for assessment. There was one preparation underway and five carer assessments to be allocated from this group.

The service was registered in November 2005.

The aims and objectives of the service are to provide for the recruitment, assessment, approval and training and ongoing support of foster carers to meet the identified needs of looked after children.

The inspection was carried out by Suzanne Beard and Isobel Reilly, Care Commission Officers between 21 January 2008 and 8 February 2008.

## **Basis of Report**

Before the Inspection

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Evaluation Form

The service submitted a self-evaluation form as requested by the Care Commission.

Regulation Support Assessment

This service was inspected after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required as a result. The inspection was then based upon the relevant inspection focus area and follow up on any recommendations and requirements from previous inspections, complaints or other regulatory activity. All fostering agencies will be inspected against the relevant National Care Standards - Foster Care and Family Placement Services in 2007/2008 as these services are relatively new to regulation.

During the inspection process

Staff at inspection:

The Resource Team Manager,  
Team Manager

Two social workers were interviewed in person

Two social workers of children were interviewed by telephone

Looked after Children's (LAC) nurse was interviewed by telephone

LAC Educational Psychologist

Development Officer - "Having Your Say".

Evidence

A sample of three foster carers were interviewed in their homes in accordance with the Care Commission guidance for this size of service.

A total of three children were seen during the visits to their foster homes and two were interviewed with their foster carers present.

The records of three children pertinent to the National Care Standards noted below were inspected as were those of their respective foster carers. In addition, a further two foster carer files were seen. One private foster carer file was examined.

Care Commission Officers observed a "Having Your Say" group where four young people attended. Care Commission Officers were able to speak to the young people and discuss aspects of the service provided by West Lothian Council.

The following policies , procedures, guidance and records were examined:

Information pack for prospective foster carers

Foster carer's handbook

Allegations against foster carers

Child protection policy and procedures

Foster carer newsletters

Team Plan for 2007

Health Resource Pack

A range of leaflets available for children and young people

Foster carers' temporary amendment - procedure

Private fostering procedure

Education policy

Log book maintained by foster carers

West Lothian Council - Children and Families Resource Team website.

Inspection Focus Area, Child Protection and the following National Care Standards for 2007/08, Foster Care and Family Placement Services were inspected:

Standard 1: Informing and deciding

Standard 2: Promoting good quality care

Standard 3: Helping you as an individual

Standard 4: Expressing your views

Standard 13: Management and staffing of the agency.

The inspection also took into account the Regulation of Care (Scotland) Act 2001, Scottish Statutory Instrument 2002/114, the Fostering of Children (Scotland) Regulations 1996 and the Foster Children (Scotland) Act 1984.

## **Action taken on requirements in last Inspection Reports**

Information about complaints that have been upheld or partially upheld can be found on the Care Commission website.

There were four requirements made at the last inspection.

### **Requirement 1.**

The partnership agreement with the local authority must include the following matters: a statement with regard to the procedure for the review of approval of foster carers, the obligation to ensure the maintenance of confidentiality, and the obligation to allow the removal of a child by the local authority when the placement is terminated. This is in order to comply with: The Fostering of Children (Scotland) Regulations 1996, Regulation 12(2)(a), Schedule 2 - a requirement to enter into a written agreement with the local authority.  
Timescale for implementation: 16 weeks from the publication date of this report.

The partnership agreement had been amended to include the above. This requirement had been met.

### **Requirement 2.**

The organisation must employ a system to record in staff personnel files that the applicant's skills, experience and qualifications have been checked.  
This is in order to comply with: SSI 2002/114 Regulation 9 (2)(a) Records.  
SSSC Codes of Practice – Employer.  
Timescale for implementation: 3 Months from the publication date of this report.

This requirement had been met.

### **Requirement 3.**

The organisation must develop a recording system to record that the employer has checked professional registers.  
This is in order to comply with: SSI 2002/114 Regulation 9 (2)(c) Fitness of Employees & Regulation 19 (2)(d) Check criminal records & relevant registers.  
SSSC Codes of Practice - Employer.  
Timescale for implementation: 3 Months from the publication date of this report.

This requirement had not been met and remains and is referred to under Standard 13 of this report.

### **Requirement 4.**

The service must ensure that it has evidence that all social work students have a suitable Disclosure Scotland clearance and appropriate written references prior to the start of their placement.  
This is in order to comply with: SSI 2002/114: Regulation 9(2)(a) - a regulation to ensure the fitness of employees.  
Timescale for implementation: 3 Months from the publication date of this report.

This requirement had been met.

## **Comment on Self-Evaluation**

The service provided a self evaluation form which included information with regards to aspects of the National Care Standards being inspected. Strengths and areas for

development were identified.

### **View of Service Users**

All children seen were observed to be relaxed and confident in the foster carers' homes. Two children were interviewed as part of the inspection process aged 10 and 14 years of age. In general, foster carers were stated to be supportive in various aspects of the children and young people's lives and to provide well for them. Comments included:

"Yes, she (link worker) speaks to me and asks me how I am and if I am OK here".

"I go to the dentist and the optician. I am going there today".

"I get to see my mum. I would like to see my cousin".

### **View of Carers**

Three foster families were interviewed in person. Their feedback is incorporated in the relevant standard of this report.

Two families seen reported that they valued the training provided. One foster carer commented that the training was more relevant for new foster carers. The families all valued the support from their link worker and the Resource Team in general. This included administrative staff. Comments included:

"They are all helpful. If you don't get your link worker there is always someone who can help you".

One foster carer who had experienced some difficulties commented:

"I don't know how I would have got through it without \*\*\*. She came straight out when I phoned her".

In general, foster carers spoke positively about the child's social worker and the support provided for the children and young people.

## **Regulations / Principles**

### **Regulation :**

#### **Strengths**

#### **Areas for Development**

## **National Care Standards**

### **National Care Standard Number 1: Foster Care and Family Placement Services - Informing and Deciding**

#### **Strengths**

West Lothian Council had information leaflets for children and young people accessing the service published by a nationally recognised organisation. Foster carers interviewed confirmed that they were aware of the leaflets and some children seen confirmed they had seen them. The Resource Team website provided some information with regards to the fostering service it provided and recent Care Commission inspection reports and action plans.

The manager of the service and staff confirmed that the service recruited from a wide variety of sources, for example, in the local press, on buses, health centres, radio, advertising on local roundabouts and libraries. There was also a financial incentive for existing foster carers if they identified someone who was subsequently approved as a West Lothian foster carer. The responses to foster carer enquiries were monitored and followed up by initial visits within timescales.

The manager of the service advised that the agency would not use identifiable information on children for recruitment or advertising purposes. The manager of the service advised that any advertising for foster carers for specific children would follow the guidance of the British Agencies for Adoption and Fostering (BAAF).

#### **Areas for Development**

While the service made use of information leaflets they were of a general nature and not specific to the service in West Lothian. Not all placing social workers were aware of the leaflets and it was not clear how they were distributed to children and young people. (See Recommendation 1)

### **National Care Standard Number 2: Foster Care and Family Placement Services - Promoting Good Quality Care**

#### **Strengths**

Interviews with children and young people, foster carers, link workers and placing social workers confirmed that where possible children and young people had the opportunity to meet with foster carers and visit their home prior to the start of the placement. Where appropriate, parents of children and young people were also able to meet the foster carers and visit their home.

There was evidence in records examined and discussion with foster carers that placement agreement meetings were held as soon as possible after the placement started. A proforma had been developed for children and young people to complete detailing the placement arrangements, such as, contact arrangements, personal safety issues, homework routine, pocket money, baby sitting/respice arrangements and the safe use of computers and mobile phones.

Examination of foster carer files and interviews with foster carers confirmed that written risk assessments of the home environment were undertaken as part of the fostering assessment process. These risk assessments were updated on an annual basis. Each foster family completed a Family Policy which detailed the safer caring policy and procedures the family operated. This was reviewed when necessary. Foster carers interviewed confirmed this was the case. All foster carers were provided with a copy of "Safer Caring", a recognised publication providing information for foster carers.

The service had a wide ranging programme of training for foster carers. New applicants were expected to attend six sessions of preparation groups prior to their approval as foster carers. This included safe caring issues. Post approval training included mandatory training that foster carers were expected to attend and other training that they could opt in to. Mandatory training for foster carers included; dealing with health emergencies, record keeping, working with children who had been sexually abused, complaints and allegations, drugs and alcohol, HIV/Aids. Two link workers in the Resource Team had recently developed a training programme for foster carers in child protection awareness. This training was developed following discussion with foster carers at training on managing allegations against foster carers. The child protection awareness training included; types of abuse, child protection referrals, inter-agency referral discussions (IRD), actions/outcomes of the IRD, and joint interviews with social workers and police and case conferences. Most foster carers seen were keen to progress their own development, understanding of their role and the tasks they undertook. There was evidence of foster carers undertaking specific training on the administration of medication for children.

There was evidence from records examined and discussion with children and young people, foster carers and placing social workers that contact between children and young people and significant people in their lives was considered at the start of the placement and these were recorded in the care plans and considered at the LAC reviews. There was also evidence of foster carers promoting and facilitating contact arrangements. There was reference in a newsletter for foster carers to "Managing Contact" – a book available to foster carers to support them in their task of promoting contact. Contact arrangements were monitored at the Looked After Children's (LAC) reviews. Records examined confirmed that in most cases, where appropriate, children's views on contact were taken into account.

There was evidence from records examined and discussion with children and young people that children's health needs were considered at the start of the placement and these were recorded in the care plans and considered at LAC reviews. Children and young people seen confirmed that they had been registered with a G.P. and dentist and optician. Most foster carers seen were clear about their responsibility in encouraging children to lead healthy

lifestyles. All foster carers were provided with a Health Resource Pack produced in conjunction with the Residential Care Health Project to improve the health of children and young people who are looked after by the Local Authority. This pack provided an extensive reference manual for carers including, accident prevention, ADHD, Bereavement and Loss, bullying, depression, personal safety, immunisations, self esteem, healthy eating, sexual abuse and soiling.

There was positive feedback from foster carers and the Resource Team manager and staff with regards to the support and guidance provided by the nurse appointed to promote the health of looked after children (LAC nurse). The nurse had a wide ranging remit that included providing the main point of contact for health when children came into the care system. She had automatic contact with foster carers when children first moved into placement to check how the child was settling in and to discuss any health issues. The nurse would also submit a report for the LAC review pulling together all health information and was able to provide support to foster carers and/or children and young people on an individual basis. The nurse also had links with children and young people at the "Having Your Say" fora. The nurse was a member of the fostering panel. She advised that some discussion had taken place on the provision of training for foster carers specifically on health related issues and a regular input on health issues in the foster carers' newsletters. There was evidence of a foster carer initiating discussion with the LAC nurse regarding a continuous recording system for the administration of all medication to children, for example, where a child goes from home to school to the foster carers and back home. This had resulted in the piloting of a proforma recording system.

There was evidence from records examined and discussion with foster carers and children and young people that the children and young people's education needs were considered at the start of the placement and these were recorded in the care plan and considered at the LAC review. Foster carers completed a Family Education policy detailing how they would promote the education of children in their home, including providing a quiet area for children to do homework. Foster carers seen confirmed that they attended meetings at the children's school and kept in regular contact with the school. Most foster carers were very strong advocates for promoting children's education.

The agency had the services of an Educational Psychologist who promoted the educational needs and educational attainment of children who were looked after by West Lothian Council and supported foster carers. The Education Psychologist had provided training for foster carers and teachers outlining the range of behaviours children were likely to display when they were being looked after away from their birth family.

The manager of the service, staff in the Resource Team and foster carers confirmed that foster carers had access to necessary equipment. There was evidence of the agency's flexibility in providing support to foster carers, for example providing bedding, furniture, paying for carpets to be cleaned and modifications to the carers' home.

There was some evidence from records examined and discussion with children and young people and foster carers that in most cases play and other leisure activities were considered and these were recorded in the care plan. Most foster carers seen were proactive in ensuring that children and young people took part in a range of activities promoting healthy lifestyles.

There was evidence of children and young people accessing therapeutic services such as speech therapy, physiotherapy and occupational therapy.

Where placements were made at short notice, foster carers stated that although it was not

always clear how long the placements were to be for, they were kept well informed by the Resource Team staff.

There was evidence of regular visits made by Resource Team workers to foster carers and unannounced visits were clearly highlighted in files.

### **Areas for Development**

While West Lothian Council had a mandatory training programme in place, it was evident that some foster carers had not undertaken any training within the last year. In some instances the partners of foster carers had not attended training in working with children who had been sexually abused. One foster carer commented that training was only for new foster carers. The Resource Team manager advised that all foster carers and their partners were encouraged to attend training. The progress of foster carers attending training will be monitored at the next inspection.

While most foster carers confirmed that where children's placements started at short notice they received information, there was evidence that in some cases the information received was out of date and not complete.

(See Recommendation 2)

The Resource Team manager and staff spoken with advised that as well as reviewing how the placement was progressing, staff discussed a range of issues when they visited the carer's home. For example, foster carer's training needs, training opportunities, promoting play and leisure activities for the children and young people, health and education and contact issues. However, it was not always evident in case files that these discussions had taken place.

(See Recommendation 3)

### **National Care Standard Number 3: Foster Care and Family Placement Services - Helping You as an Individual**

#### **Strengths**

There was some evidence that the Resource Team considered the needs of the children on referral for placements and the skills and situations of the foster carers available. The service had an appropriate matching procedure for the placement of children and young people on a longer term basis. A multi-disciplinary meeting was held on a weekly basis to discuss all children who may be in need of a service or had been placed in a care setting on an emergency basis. Placing social workers were expected to prepare a report and present it to the meeting outlining the needs of the children and why they were recommending the child was accommodated by the agency.

There was some evidence that foster carers encouraged and supported children and young people in developing interests, hobbies and individual talents. There was evidence that the agency had provided financial support for a young person to continue with a hobby.

At the time of the inspection, eight foster carers were operating out with their approval. The service had an appropriate system in place to monitor these.

The service had recently introduced training in diversity and anti discriminatory practice for foster carers which focussed on the right to individuality and respect for diversity and lifestyle choices.

There was evidence of foster carers appropriately supporting children in managing intimate care needs. The nurse with responsibility for children looked after by the agency was able to support foster carers in such tasks.

### **Areas for Development**

While some foster carers seen promoted the interests, hobbies and individual talents of children and young people, this was not evident in all cases.  
(See Recommendation 4)

The service should give consideration to all foster carers undertaking the recently introduced training in anti discriminatory practice

### **National Care Standard Number 4: Foster Care and Family Placement Services - Expressing Your Views**

#### **Strengths**

Foster carers were clear that they had an advocacy role for the children and young people in their care when appropriate. There was evidence of such advocacy having taken place.

Information about how to complain to the agency was provided to foster carers in the foster carer handbook.

The manager of the service advised that written information provided to foster carers, children and young people and their families could be provided in other languages than English and in Braille if necessary. There was evidence that the feedback form for parents to complete for the foster carers' annual review had been provided for a parent in her own language.

West Lothian Council ran "Having Your Say" groups for children and young people who are looked after by the Local Authority. Five groups operated on an age related basis. The groups met on a monthly basis with the stated aim:

"With the common goal of consulting young people about their care experience. It provides a group voice for the young people to let policy makers aware of the issues that young people want tackled".

During this inspection, Care Commission Officers were able to attend one of the "Having Your Say" groups and have some discussion with the children and young people present. They gave examples of how they influenced developments within West Lothian Council, of speaking to the Scottish Parliament about their experiences in the care system and, of speaking to a group of student social workers. The views the young people expressed about the groups were very positive. "I don't know where I would be without this group". "When I speak, I know people will listen". "This group has given me real confidence".

The service had six support groups in place. As well as giving foster carers the opportunity to

Speak about their experiences as carers and obtain peer support, these groups provided foster carers with the opportunity to express their views of how the service should be run.

The service had recently held a number of pilot sessions with foster carers' own children of primary school age to hear their views on the impact fostering had on them. A decision had been made to introduce a similar group for older children and young people and consideration was being given to providing support for the adult children of foster carers.

### **Areas for Development**

While the agency could provide an interpretation service, written information in other languages and in Braille if necessary, this was not made explicit to foster carers, children and young people and their families.

The service should make foster carers, children and young people aware of this.

The "Having Your Say" groups were clearly very positive for the children and young people who attended. Resource Team staff were involved in some of the groups and staff of the group the Care Commission Officers attended reported that they had direct links with the Resource Team to discuss any issues and concerns the children and young people had. The Resource Team should give consideration to how they could involve children and young people further in the ongoing improvement of the work of the Resource Team.

Written information for children and young people should include reference to the United Nations Convention on the Rights of the Child.

### **National Care Standard Number 13: Foster Care and Family Placement Services - Management and Staffing**

#### **Strengths**

Only the elements of this standard which apply to requirements and recommendations made at the last inspection and to the parts of the standard in relation to child protection policies, procedures and general training as well as to quality assurance systems have been inspected.

Staff interviewed confirmed that they received regular supervision. Further that supervision time was protected and was relevant and appropriate to the work they undertook. Staff also commented positively on the opportunities for informal supervision with an "open door" policy of senior managers. All staff had individual Personal Development Plans which were reviewed on an annual basis. The staff team had regular team development sessions and an annual team plan was produced.

The service had an appropriate child protection policy and procedures in place and staff were aware of these. The service had copies of the Area Child Protection Committee child protection guidelines.

All foster carers had copies of the children's charter and framework standards for child protection. A working group took place to review practice, policies and procedures in light of these.

One child protection case tracked was found to have been managed appropriately.

Foster carer preparation included an input on child protection. Post approval training in child protection issues and working with children who had been sexually abused was provided by a recognised national organisation.

The service had procedures in place for the management of allegations and there was training available for foster carers in complaints and allegations. This training was provided by a recognised national organisation.

There was evidence that files were checked and signed off by senior staff on a regular basis

### **Areas for Development**

The service had two requirements and one recommendation from the Care Commission's safer recruitment audit of the inspection year 2006/2007.

A follow up safer recruitment audit was completed on 20 March 2008.

One requirement relating to the checking and recording of skills, experience and qualifications of applicants, and the recommendation, relating to the need to undertake all necessary checks on employees who transfer from a temporary to a permanent post within the organisation, have been satisfied.

One requirement relating to the need to record that professional registers have been checked has not been satisfied and is carried forward.

(See Requirement 1)

One new requirement has been made regarding the need to obtain two satisfactory references

(see Requirement 2)

## **Enforcement**

There has been no enforcement action against this service since the last inspection.

## **Other Information**

There were six recommendations made at the last inspection.

### Recommendation 1.

The agency should clarify responsibility for ensuring the follow up of any health and safety issues. National Care Standards for foster care and family placement services, Standard 7,3, Information and advice.

Staff were clear that they should record when they have followed up on health and safety issues. There was evidence that managers inspect files and monitor this. This recommendation had been met.

### Recommendation 2.

The agency should seek to ensure that all foster carers are clear with regard to the withdrawal of pocket money as a sanction and the use of the clothing allowance. National Care Standards for foster care and family placement services, Standard 7,3, Information and advice.

The manager advised that this issue had been discussed with foster carers by their link workers. There was evidence in the foster carers' newsletter of a reminder to foster carers of the agency's Care and Control policy which includes reference to using the withdrawal of pocket money and clothing allowance as a sanction. This recommendation had been met.

### Recommendation 3.

The service should continue in its efforts to obtain feedback from all parties to a fostering placement to inform the foster carer reviews. Consideration should be given to obtaining more direct feedback from birth parents and to ensuring documentation for young people is appropriate to their age. National Care Standards for foster care and family placement services, Standard 11,5, Reviews.

There was evidence that the service had developed feedback forms for children and young people and birth parents to complete for foster carer reviews. These had been developed following consultation with practice team social workers and young people. The manager of the service advised that this effectiveness of these forms will be monitored. This recommendation had been met.

### Recommendation 4.

The service should continue in its efforts to recruit male members to the fostering panels as well as representation from foster carers and people with experience of being in foster care or using family placements carers National Care Standards: foster care and family placement services. Standard 12,1, The fostering panel.

The service had recruited two male panel members. This recommendation had been met.

### Recommendation 5.

The service should ensure a robust procedure for the consideration of the use of foster carers being asked to care for children and young people outwith their approval. National Care Standards: foster care and family placement services. Standard 12.5 and 8, The fostering panel.

The service had developed a robust procedure for the use of foster carers outwith their approval. This procedure had been agreed by panel chairs and the Agency Decision Maker. This recommendation had been met.

#### Recommendation 6.

The organisation, should, in line with their policies and procedures, consistently carry out all relevant checks on employees who transfer from a temporary to permanent post within the organisation. National Care Standards, foster care and family placement services, Standard 13,1, Management and staffing.

This recommendation had been met.

The Care Commission has a duty to inspect how the Local Authority responds to private fostering in its area under the Regulation of Care (Scotland) Act 2001 section 2 (14) (c). Private fostering referrals enable the Local Authority to carry out its responsibilities in ensuring the well-being of privately fostered children under the Foster Children (Scotland) Act 1984.

At the time of this inspection, the service reported that they had only one child subject to the private fostering arrangements. The records relating to this case were inspected as was the policy and procedure for the investigation and supervision of such situations. These were found to be satisfactory.

#### Requirements

1. The organisation must develop a recording system to record that the employer has checked professional registers.

This is in order to comply with: SSI 2002/114 Regulation 9 (2) (c) Fitness of Employees & Regulation 19 (2) (d) Check criminal records and relevant registers.  
SSSC Codes of Practice - Employer.

2. The recruitment records should evidence that two satisfactory references were sought for each person employed.

This is in order to comply with: SSI 2002/114 Regulation 9 (1) Fitness of Employees  
SSSC Codes of Practice - Employer.

In making these requirements, the following National Care Standards were taken into account:

National Care Standards - Foster Care and Family Placement Services. Standard 13:1 Management and Staffing.

Timescales for implementation: 3 months from the publication of this report.

#### Recommendations

1. The service provider should ensure that it develops written information for children and young people accessing the service. This information should be appropriate to the ages and stages of children and young people. The leaflets should include information on the aims of the service, what is available in this service (e.g. "Having your Say" fora) specific details of how to complain, reference to risk assessments and recording and reporting accidents and incidents and how to access the most recent Care Commission report.

National Care Standards – Foster Care and Family Placement Services. Standard 1:1 Informing and Deciding.

2. The service provider should ensure that information regarding children provided to foster

carers is up to date and complete.

National Care Standards – Foster Care and Family Placement Services. Standard 2:11  
Promoting Good Quality Care.

3. The service provider should ensure that there is written evidence that the service monitors how foster carers promote the health, education, play and leisure activities and contact for the children and young people and foster carers' training needs.

National Care Standards – Foster Care and Family Placement Services. Standard 2:  
Promoting Good Quality Care.

4. The service provider needed to ensure that all foster carers encouraged children to develop interests, hobbies and individual talents.

National Care Standards – Foster Care and Family Placement Services. Standard 3:2  
Helping You as an Individual.

**Suzanne Beard**  
**Care Commission Officer**