Mosaic Foster Care

Solo therapeutic foster care for traumatised children

Statement of Purpose
Fostering Service - May 2016
This Statement of Purpose was developed to meet the requirements from the following documents:

The Care Standards Act 2000

The Children Act 1989 (including amendments made July 2013) and the Children and Young Persons Act 2008

The Fostering Services Regulations England 2011

The National Minimum Standards for Fostering Services.

Mosaic Foster Care is a Private Ltd Company (reg no 07133494) providing Placements for Children and young people to age 17.

Director - Roz Parsons CQSW
Director – Andre Palmer MA, BA, DipSW

The agency was established in 2010 and merged with Kites Childrens Services Fostering in 2015, which was owned by the same Directors. It is registered with Ofsted (Reg no. SC417598) and we are member of Fostering Network and the National Association of Independent Fostering Agencies.

This Statement of Purpose relates to:

Mosaic Foster Care Ltd
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Westcliff-on-Sea
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SS0 9HR
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We are a specialist fostering service providing therapeutic solo placements for children who have experienced trauma, and who have associated emotional, behavioural and attachment difficulties.

For these children, a permanent long-term placement coupled with therapeutic recovery is of paramount importance.

All of the children who enter our specialist service receive individual assessment and intervention by therapists who have expertise in working with traumatised children.

By working directly with children, therapists gain unique insight that helps influence both foster carers and the team supporting the child in placement. This work ensures that children have the chance to tell their unique story.

It’s a small but vital part of our work, which helps make the bigger picture...
Aims & Objectives

To provide therapeutic solo placements for children who have experienced trauma through abuse and/or neglect, and who have associated emotional, behavioural and attachment difficulties.

To ensure where possible that all our children are provided with a permanent long-term stable placement coupled with therapeutic recovery.

Ensure that all children who enter our specialist service receive individual assessment and intervention by therapists who have expertise in working with children who have experienced trauma.

Ensure our therapeutic work is undertaken in a collaborative way, ensuring that the child’s story helps influence the wider systemic context.

To comply with and exceed where possible regulatory and best practice frameworks in all aspects of our functioning as an agency.

To promote all aspects of children’s development within the five outcomes described in Every Child Matters.

Continue to develop an effective therapeutic model which aids therapeutic recovery for traumatised children whilst safeguarding and promoting their welfare.

To work in partnership with other stakeholders whilst maintaining focus on the needs of the children we care for.

A firm commitment to the training and development of our foster carers, and our people, to ensure they have the knowledge and skills to deliver excellence.

To provide first class out of hours support through the provision of a three tier support system of on call director, senior manager and on call respite foster carers.

To recruit foster carers from diverse backgrounds in terms of race, gender, marital status and skill base so that we can find the right placement for children and young people.
Our Business Structure

Director & responsible person

Fostering Manager

Education Consultant

Business Manager

Foster Care Recruitment Manager

Head of Therapy

Safeguarding Manager

Supervising Social Workers

Office Administrator

Support Workers

Fostering Advisor

Therapists

Foster Care Therapists
All managers are professionally qualified in line with the requirements of regulations and National Minimum Standards. The directors hold a range of social work and degree qualifications and previous social care employment suitable to their level of managerial responsibility.

All social workers and their managers are professionally qualified and registered individually with the Health and Care Professions Council. Many have post qualifying specialist awards and experience related to working with children and young people in foster care.

Our therapists hold appropriate qualifications, experience and membership of a training body that includes registration with a nationally recognised organisation. Our therapists have access to external clinical supervision as well as organisational line-management.

In addition to permanent staff, we have a pool of support workers who undertake work for the agency.

A number of people work for our organisation on an independent, self-employed basis across a variety of roles. All self-employed workers are required to provide verification of any formal qualifications in relation to the work undertaken. All staff regardless of their employment status are subject to a rigorous recruitment process to ensure that the welfare of children and young people is safeguarded. All those commissioned on a self employed basis hold the appropriate professional indemnity and public liability insurance that is checked and verified.

As of February 2015 Mosaic Foster Care had the following staff:

2 Directors
1 Registered manager
3 Supervising social workers
4 Therapists
1 Team administrator
1 Panel administrator
1 Business manager
All our fostering placements are subject to a thorough matching process, which carefully assesses the likelihood of a match between the skills, experiences and aptitudes of our carers with the needs of the child.

All of our placements are made in accordance with the Fostering Services Regulations. All our foster carers are approved and have a signed foster care agreement that is regularly reviewed.

We have contractual arrangements with a number of consortia and Local Authorities including Eastern Region Four (Essex, Suffolk, Thurrock, Cambridge), West London Alliance (6 West London Boroughs), Norfolk County Council, London Care Placements (Pan London) and Kent County Council. In addition we receive referrals from many other authorities on a spot purchase basis.

Placement plans are prepared for each placement between commissioners, carers and the agency to ensure that all essential information is gathered and there is clarity of delegation for the foster carers for each placement.

All our placements are planned and therefore a great deal of pre-placement planning is undertaken including introductory visits, file reading when possible and discussions with previous carers/schools.

We ensure the racial cultural and linguistic needs of children are attended to and consideration is given to their gender and sexuality when making placement decisions.

We ensure that our foster carers homes comply with health and safety requirements.

Safeguarding children in our placements is of paramount importance. To this end a safer care plan specific to the child in place is agreed and we have robust procedures to review and monitor the welfare and safeguarding of children in our care.
**Standard.**

These placements are offered to children and young people with few complex needs. Usually these children and young people come with their carers when the carers transfer to Mosaic Foster Care. In most cases they do not require therapy.

**Specialist Placements for Children and Young People with complex needs.**

This group of children and young people form the largest cohort of our service and are at the core of our service design and delivery. Typically this group will have experienced multiple traumas resulting in emotional and behavioural difficulties. They will often have experienced multiple placement breakdowns or be at risk of developing them.

These placements require multiple support services to support them and include, but are not limited to:

- Individual therapy for the child
- Clinical supervision for the foster carers
- Therapeutic support groups for foster carers
- Case discussion safeguarding meetings
- Integrated therapy planning meetings

We have particular expertise in responding to children and young people who have experienced sexual abuse and have behavioural difficulties stemming from this, for example children with reactive sexual behaviour, sexually harmful behaviour and vulnerability to sexual exploitation.
Our social workers are trained to ensure that the children and young people’s welfare is paramount. They work in partnership with the foster carers to ensure that the children and young people’s needs are met and that they are provided with a safe, nurturing placement where they are able to meet their potential and achieve therapeutic recovery.

The Secure Base Model is drawn from attachment theory, and adapted to include an additional element, that of family membership, for children who are separated from their birth families. The model proposes five dimensions of caregiving, each of which is associated with a corresponding developmental benefit for the child. The dimensions overlap and combine with each other to create a secure base for the child, as represented below.

The Secure Base Model:
The model provides a framework which can be of help with:

The assessment of prospective foster carers and adopters.

Assessing the capacities of caregivers (birth parents, residential workers, foster carers and adopters) to provide a secure base for children in their care.

The supervising social worker will visit the foster carers regularly to undertake supervision. These times are an opportunity to discuss the day-to-day care needs of the children and young people and how the foster carer is working to meet those needs and progress the placement care plan and integrated therapy plan.

Carers training needs are assessed and discussed through supervision meetings. The supervising social worker will undertake unannounced visit to foster carers annually.

Mosaic Foster Care also carries out health and safety inspections of each fostering household to ensure a high standard of accommodation. The supervising social worker will attend all meetings and reviews with the carer, prepare reports for foster carer reviews and keep a thorough and accurate record of all fostering activity.

Our social workers act as a hub for all information about the placement ensuring that communication is effective between all parts of the system that serve the child and placement.
Assessment Based Treatment (Trauma Assessment Pathways)

Assessment

All therapeutic interventions are led by comprehensive assessment by suitably qualified and experienced therapists, which begins before the placement commences. We always work directly with the child over 6-8 sessions, once in placement, as well as ensuring all information from multiple sources is synthesised into our assessment formulation meeting. This includes use of standardised measures. Utilising an assessment based Treatment model leads to the development of an integrated plan of prioritised interventions ensuring that childrens’ need for therapeutic recovery are carefully planned through a structured assessment model. In the vast majority of situations this will involve individual therapeutic interventions with the children. As we only use our own people, there is no waiting list and due to the diverse group of therapists we use, we are usually able to ensure appropriate gender and skills are provided to the child.

Intervention

Following assessment, a range of treatment pathways are available to address the particular needs of the child. Typically the children referred to Mosaic have experienced multiple traumas though a range of abusive experiences including sexual, physical, emotional and neglect. Our approach couples secure base foster care with therapeutic interventions through a whole system approach. This approach avoids the ‘splits’ that can often occur in therapeutic work, ensuring that the foster placement is as much the agent of change, as the individual therapeutic relationship.

We have developed the use of the Trauma Wheel (Chadwick Center for Children and Families. (2009). Assessment-Based Treatment for Traumatized Children: A Trauma Assessment Pathway (TAP). San Diego, CA: Author.) to help guide our interventions.
The foundation of the Trauma Wheel requires the application and awareness of developmental, relational, and cultural dynamics. The therapeutic relationship and understanding of relevant cultural issues are the tyre and the rim that hold the wheel together and keep treatment moving forward. The spokes of the wheel, and required areas of treatment, include: psychoeducation and skill building, addressing maladaptive cognitions, affect regulation, trauma integration, and systemic dynamics. The child’s developmental functioning is the driving force of the wheel and will determine how the client moves through the treatment spoke.

Coupled with the Trauma Wheel we have developed a systemic process for supporting our placements which is summarised below is the Mosaic Compass of Support.
Recruitment & Assessment

We follow a clear procedure for recruiting our carers and our recruitment process is often much quicker than the 8 months from application to approval required by legalisation.

Marketing

We have our own dedicated recruitment team comprising of our recruitment manager and fostering advisor. Our recruitment activity is marketed through the i-want-to-foster.com brand. The team organise all marketing activity and are involved in various direct marketing activities in the communities we serve. They also co-ordinate all activity from initial enquiry, home visits though to our preparation training.

Home visits

Our fostering advisor or social worker undertakes initial home visits to gather information from potential applicants and provide an insight into the work undertaken by Mosaic Foster Care. A qualified social worker makes an assessment of the information which is gathered and a decision is then made as to whether they should proceed.

Preparation training

We hold regular preparation courses for those carers who have applied to foster with us, as well as for those people who are interested in finding out further information about fostering.

All prospective foster carer’s must attend preparation training.

Assessment and Panel

Potential foster carers who choose to apply complete an application form giving detailed information about themselves and their family and consent to enquiries to ascertain their suitability to foster.

Applicants are required to have medical examinations completed by their GP to ensure that there are no underlying issues that may affect their ability to foster. Reports are made available to our agency medical advisor for his/her comments.
Mosaic Foster Carers

Applicants are asked to identify at least two personal referees who will provide written references and be interviewed as part of the assessment process. If an applicant has previously fostered a reference will be sought from the agency. References from external agencies and personal references, which are provided in confidence, cannot be accessed without the consent of both the subject and relevant referees.

A qualified social worker will carry out an assessment (Stage 2), which requires full participation by the applicants. She/he will visit them at their home, generally on 6-8 occasions, to collect information about all members of the household and the applicants’ experience and skills in relation to fostering. This forms the basis of an assessment report.

During the assessment process, applicants are asked to compile a portfolio of written material giving examples of relevant experience, skills and competence.

The assessment report takes into account the assessment of confidential references. This is shared with the applicants and then presented to our Fostering Panel, to assist the decision making process. Applicants are expected to attend the Panel meeting with their assessor.

Our fostering manager has an overview of the pre-panel process to ensure regulatory compliance and quality control of the assessment.

The Panel makes recommendations about the suitability of applicants to be approved as foster carers with Mosaic Foster Care. It is the role of the Agency Decision Maker to make the final decision.
Both directors of the fostering agency are designated as Agency Decision Makers. One of the Agency Decision Makers is allocated to those applications being heard at each panel and they read and consider all the assessment information and take into account the Panel recommendation and make the decision to approve applicants or not, taking into account the Hoffsetter guidelines.

Applicants are informed verbally (within 2 days) and in writing (within 5 working days) about the decision. All information obtained about prospective foster carers is held on file and some sections are available to view on request.

These include:
Verification of identity and personal history
Disclosure and Barring Service checks on all adult members of the household
Enquiries to Children’s Social Care Authorities and their Child Protection Registers
Enquiries to other agencies as necessary.
Each fostering household will have a review at least annually, unless there are significant changes to their circumstances in which case we will conduct a review at that time.

These circumstances include –
After the final strategy meeting of an s.47 investigation involving a carer(s)
Where allegations have been made regarding a carer(s) child care practice and no s.47 investigation is pursued.
Where there has been a breakdown in the approved carer’s relationship resulting in one carer moving out of the household. In this instance both carer’s will be subject to review except where one/or both carer’s has given notice of an intention to resign.
Where there have been significant changes to the carers’ lifestyle.
Where there has been the death of a carer.
Where a carer has been diagnosed with a serious illness.
When a carer has stopped or started living with a partner.
Where a carer is not working in partnership with the agency including a lack of willingness to attend training.

The foster carer review will address the carers’ training and development needs for the next year and suggest, if required, alterations to their approval status. The ECM (Every Child Matters) outcomes and Secure Base domains are covered to provide a picture of how the carer works with the children and young people in their care. Reports will be requested from the Local Authorities social worker, school, supervising social worker, carer, the child/young person in placement, the birth family (if appropriate) and any other interested party.

Carers’ will be invited and encouraged to attend all Panel reviews.
We are committed to ensuring that all our carers receive high quality and relevant training to ensure they are able to meet the needs and safeguard the children and young people in their care.

All our foster carers are required to complete a minimum amount of training on relevant subjects as agreed by their supervising social worker and included in their Professional Development Plan, including:

- Child protection and safeguarding
- Working with children who have been abused
- Safer caring
- Managing difficult behaviour
- Managing and promoting contact
- Identity and self-esteem
- Valuing diversity and promoting equality
- Recording
- First aid
- Health and safety
- Health care of fostered children and young people
- Education of fostered children and young people
- Empowering children and young people
- Preparing children and young people for adulthood
Supporting Foster Carers

All our carers complete our Skills to Foster preparation training as part of their preparation to foster. Following approval all carers receive a comprehensive package of support and development opportunities including:

A comprehensive 10 week induction program delivered by a supervising social worker to help fully equip carers for the demands and rewards of fostering.

Assistance with completing carers training support and development standards within the first 12 months of approval.

Regular supervisory home visits by their fostering social worker.

Low caseload of supervisory social workers to foster carers meaning support is available when needed.

Regular clinical supervision from their allocated therapist who also works directly with the child in placement.

Attendance at case discussion safeguarding forum that includes all professionals working with the placement and chaired by a dedicated safeguarding manager.

Attendance at integrated treatment planning meetings, to ensure that the foster carer and therapy team are working in concert to address the therapeutic goals.

A three tier on-call system comparing of director on call, senior manager on call and respite on call foster carer who can respond by working directly with the child during out of hours or in exceptional circumstance provide emergency respite care (with consent from placing authority).

Use of Mosaic Foster Care IT infrastructure to ensure compliance under the Data Protection Act (includes iPad, Mosaic email address, secure login to database).

Regular consultation between the agency and carers on important matters which effect carers, for example agreements, CLA reviews, Statement of Purpose revisions etc.

A generous reward element to ensure we recruit carers who can dedicate the time required to care for the child placed.

Regular events which bring together carers and children for social events such as our regular ‘party in the park’ and Christmas parties.
Education is an area in which many children and young people who are looked after often fail to achieve their full potential. This can be for many reasons, such as frequent placement moves and subsequently disrupted education, and a lack of consistent support.

Education is an important part of the placement plans for our children and it is an area in which we have ensured we have the available expertise to assist when necessary. We have appointed an education consultant who is the headteacher and SENCO in our sister agency’s school (Kites Children Services). In addition we have the retained services of an educational psychologist. By utilising these two consultants we are able to ensure appropriate liaison with education departments, schools and Local Authorities whenever concerns regarding a child’s education is identified.
Outcome Measures

Overview

Mosaic gathers and assesses information related to its core task on two levels:

1. Macro

Key Performance Indicators: This is the gathering of detailed information regarding the cohort of young people referred to and cared for by Mosaic Foster Care. This includes global information such as age range, gender, and ethnicity. It also includes the gathering of information relevant to therapeutic provision including emotional and behavioural profile, abuse history, presenting difficulties and information regarding unique incidents that may be relevant to the improvement of our therapeutic care provision.

Educational progress: Data is gathered for children placed is logged and checked against expected key stage benchmarking.

Well Being Measure: This is the gathering of information regarding the emotional and psychological progression of the cohort of young people residing in Mosaic Foster Care through the completion of The Well Being Measure (Finch, Hargrave, Nicholls & Van Vliet, 2014). This measure is re-scored annually to provide information regarding the young person’s view of their well being under key headings and the progress being achieved to improve outcomes.
2. Micro

This is the gathering of information related to the emotional and psychological progression of individual young people through the rescoring of the Trauma Symptom Checklist (Briere, 1989) and the Strengths and Difficulties Questionnaire (Goodman, 1997) on a six-monthly basis in line with the LAC review process. Information gathered informs the areas of primary need which are targeted within the Mosaic Integrative Treatment Plan (ITP) which is reviewed every six months as part of the Mosaic re-assessment structure.

Analysis and action

All information is collated annually and presented to the Mosaic Steering Group. The Mosaic Steering Group is made up of the Mosaic Directors, Mosaic Fostering Manager, Mosaic Safeguarding Manager and Mosaic Head of Therapy. Trends within the gathered information are analysed, including areas of progress and aspects of therapeutic care that require improvement, and from this the Mosaic Steering Group develops an action plan which is implemented through the oversight of the monthly Mosaic Steering Group Meetings.
Foster Carers

As of March 16 we have 28 carers, 5 carers are approved as respite carers only.

We currently have 23 children in placement, utilising 22 of our Fostering Households with a vacancy rate of 4%.

Recruitment Activity

We continue to invest heavily in recruitment of new carers, both respite and full time.

We hold regular Skills to Foster sessions every two months ensuring applicants do not have long to wait between enquiry, initial home visit and Skills to Foster.

Children

10 have been in placement for 12 months or more.

14 Boys and 9 Girls.

4 Children are under 10 and 19 children are 10 or over.

2 Children are accommodated, 1 child is on an Interim Care Order and 20 Children are on full care orders.
Service improvement

We promote a culture of continuous improvement, giving careful attention to feedback about services offered by any individuals or organisations with whom we come into contact. We hold regular steering groups to ensure our strategic plans are implemented.

Representation and complaints procedure

All children/young people placed with our foster carers are informed of the Representation and Complaints Procedure on commencement of placement by their supervising social worker. They are provided with a children’s guide so they are able to contact the Directors and Fostering Manager directly if they wish. All Foster Carers, staff and placing local authorities/health and social care trusts are provided with information about our Representation and Complaints Procedure.

Complaints and compliments

A summary of complaint outcomes and their impact upon service design and delivery are collated and are fed into our developmental meetings when required.

External inspection

As registered care services, our service is subject to regular external and are proud of the outcomes. These are publicly available via the websites of the inspectorates concerned, via our website or from our office.

Service improvement

We promote a culture of continuous improvement, giving careful attention to feedback about its services offered by any individuals or organisations with whom we come into contact. Operational staff are supported by managers (and other specialists) who focus on quality assurance throughout the company. Regular development meetings are held to ensure our strategic plans are implemented and reviewed.
Further information regarding and policies practice and procedures can be found in the following handbooks. These are reviewed and updated each April.

Company Handbook – outlines our employment practices.

Fostering Handbook – policies and procedures for carers and staff.

Assessment and Treatment Handbook – outlines our assessment methodology and therapeutic interventions.

Fostering Panel Handbook – provides information on the work of the fostering panel including membership and procedures.

**Professional Memberships**

We are committed to the ongoing development of our staff and carers. We are currently active members of the following organisations:

**Fostering Network**

**British Association Adoption and Fostering**

**Institute of Recovery from Childhood Trauma**

**National Centre for Therapeutic Residential and Foster Care.**

**Complaints**

MosaicFosterCare has a comprehensive Complaint Procedure which is available by emailing, calling or writing to us.
Solo therapeutic foster care for traumatised children

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