



Making Social Care
Better for People

inspection report

Local Authority Adoption Services

**Sefton Metropolitan Borough Council
Adoption Service**

Ellesmere House, Looked After Children Service
Crosby Road North
Waterloo
L22 0LG

10th January 2005

Commission for Social Care Inspection

Launched in April 2004, the Commission for Social Care Inspection (CSCI) is the single inspectorate for social care in England.

The Commission combines the work formerly done by the Social Services Inspectorate (SSI), the SSI/Audit Commission Joint Review Team and the National Care Standards Commission.

The role of CSCI is to:

- Promote improvement in social care
- Inspect all social care - for adults and children - in the public, private and voluntary sectors
- Publish annual reports to Parliament on the performance of social care and on the state of the social care market
- Inspect and assess 'Value for Money' of council social services
- Hold performance statistics on social care
- Publish the 'star ratings' for council social services
- Register and inspect services against national standards
- Host the Children's Rights Director role.

Inspection Methods & Findings

SECTION B of this report summarises key findings and evidence from this inspection. The following 4-point scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

The 4-point scale ranges from:

- 4 - Standard Exceeded (Commendable)
- 3 - Standard Met (No Shortfalls)
- 2 - Standard Almost Met (Minor Shortfalls)
- 1 - Standard Not Met (Major Shortfalls)

'O' or blank in the 'Standard met?' box denotes standard not assessed on this occasion.

'9' in the 'Standard met?' box denotes standard not applicable.

'X' is used where a percentage value or numerical value is not applicable.

ADOPTION SERVICE INFORMATION

Name of Local Authority

Sefton Metropolitan Borough Council Adoption Service

Headquarters Address

Ellesmere House, Looked After Children Service, Crosby
Road North, Waterloo, L22 0LG

Adoption Service Manager

Ms Linda Woodcock

Tel No:

0151 922 4040

Address

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Road North, Waterloo, L22 0LG

Fax No:

0151 285 5010

Email Address

Certificate number of this adoption service

Date of last inspection

31/12/1999

**Date, if any, of last SSI themed inspection of adoption
service**

July 2001

Date of Inspection Visit		10th January 2005	ID Code
Time of Inspection Visit		10:00 am	
Name of Inspector	1	Marian Denny	125215
Name of Inspector	2	Maureen Moore	125773
Name of Inspector	3	Not Applicable	
Name of Inspector	4	Not Applicable	
Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the CSCI. They accompany inspectors on some inspections and bring a different perspective to the inspection process.		Not Applicable	
Name of Specialist (e.g. Interpreter/Signer) (if applicable)		Not Applicable	
Name of Establishment Representative at the time of inspection		Linda Woodcock & Anne Harvey	

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INTRODUCTION TO REPORT AND INSPECTION

Local authority adoption services are subject to inspection by CSCI, to establish if the service is meeting the National Minimum Standards for Local Authority Adoption Services and the requirements of the Care Standards Act 2000, the Adoption Act 1976 as amended, the Adoption Agencies Regulations 1983 as amended and the Local Authority Adoption Service (England) Regulations 2003.

This document summarises the inspection findings of the CSCI in respect of Sefton Metropolitan Borough Council Adoption Service. The inspection findings relate to the National Minimum Standards for Local Authority Adoption Services published by the Secretary of State under sections 49 of the Care Standards Act 2000.

The Adoption Agencies Regulations 1983 and the Local Authority Adoption Service (England) Regulations 2003 are secondary legislation, with which a service provider must comply. Service providers are expected to comply fully with the National Minimum Standards. The National Minimum standards will form the basis for judgements by the CSCI regarding notices to the local authority and reports to the Secretary of State under section 47 of the Care Standards Act 2000.

The report follows the format of the National Minimum Standards and the numbering shown in the report corresponds to that of the standards.

The report will show the following:

- Inspection methods used
- Key findings and evidence
- Overall ratings in relation to the standards
- Compliance with the Regulations
- Notifications to the Local Authority and Reports to the Secretary of State
- Required actions on the part of the provider
- Recommended good practice
- Summary of the findings
- Report of the Lay Assessor (where relevant)
- Providers response and proposed action plan to address findings

This report is a public document.

INSPECTION VISITS

Inspections will be undertaken in line with the regulatory framework with additional visits as required. This is in accordance with the provisions of the Care Standards Act 2000. The inspection methods used in the production of this report are set out in Part B. Pre-inspection information, and the manager's written self-evaluation of the service, have also been taken into account. The report represents the inspector's findings from the evidence found at the specified inspection dates.

BRIEF DESCRIPTION OF THE SERVICES PROVIDED.

Sefton Metropolitan Borough Council is in the North West of England. The council's adoption agency falls within the remit of the Looked After Children's Service, which forms part of the borough's wider Children, Schools and Families' Service. The adoption agency is located at Ellesmere House, which is a large, detached property in Crosby, near Liverpool. The premises were suitable for their stated purpose.

In the past, the Council's adoption service had worked as a joint provision with their fostering service. However, at the time of the inspection, the adoption service stood alone and was effectively managed through the service manager, resource manager and acting adoption team manager. The resource manager had managerial responsibility for both the fostering and adoption services. She was assisted and supported in this task by the acting adoption team manager, who deputised for the adoption team in the absence of the resource manager. The Service Manager, in addition to other tasks, oversaw the work of the adoption and fostering teams. The adoption service was a member of the Mersey Adoption Consortium, which was made up of a number of local authority partner agencies.

The service's main purpose was to make arrangements for the adoption of children and in doing so provided a comprehensive, recruitment, training, assessment, approval and support service to prospective and approved adopters. It was also involved in matching adoptive parents and children. Sefton Metropolitan Borough Council's adoption service was linked with the Mersey Region Adoption Consortium in seeking and providing placements, as well as the Adoption Register. However at the time of the inspection, the service was also considering investing in a software package, in order to maximise the opportunities to link children and adopters from within the North West Region.

The agency also provided a counselling service to adults, who were seeking information about their birth family.

The service maintained a letterbox system that supported information exchange in adoption placements.

Sefton Metropolitan Borough Council does not provide an inter -country adoption service. However, the agency will ensure that those wishing to adopt from another country are provided with the necessary advice, information regarding inter - country adoption. They will also advise adopters of agencies, who specialise in providing home study reports for inter - country adopters.

The agency provided post adoption support services to adopters, children and adults who had been adopted, as well as independent support services to birth parents, through its service level agreement with After Adoption.

PART A SUMMARY OF INSPECTION FINDINGS

INSPECTOR'S SUMMARY

(This is an overview of the inspector's findings, which includes good practice, quality issues, areas to be addressed or developed and any other concerns.)

The inspection of Sefton Metropolitan Borough Council's adoption service took place over four and a half days in December 2004 and January 2005 and was carried out by the Commission for Social Care Inspection. This was the first time that the Council's adoption service had been inspected under the Care Standards Act 2000 and against the National Minimum Standards for Adoption, which had been introduced on 30th April 2003. This inspection therefore served as an audit of the Council's adoption service against the new requirements. It was intended that this inspection report would prove helpful to managers and staff as it identified some areas for service development, which were required and provided reasonable timescales for these to be completed. However, the inspectors identified three issues that required addressing more urgently and these matters were raised with the managers during the inspection. They are also highlighted in the report with a relatively short time scale for completion.

During the Inspection, the inspection team received five questionnaires from prospective and approved adopters, twenty-one from placing social workers and two from birth family members. Interviews also took place with several prospective and approved adopters. The responses received from these questionnaires and information obtained from interviews conducted during the inspection has been reflected in the main body of this report.

Overall the inspectors were of the view that Sefton Metropolitan Borough Council had made considerable efforts to meet the National Minimum Standards and had achieved an extremely good standard of practice. The evidence obtained indicated that Staff were committed to the service, had a sound knowledge base, were sensitive and skilled in their work and had extremely good standards of professional practice. A number of adopters described the service they had received from the agency as being "extremely good", whilst others stated it had been "excellent". Several indicated that they would have no hesitation in recommending the service to others and indeed a number had already done this. These views were substantiated in the findings of this inspection, for although some shortfalls were found, the inspectors were of the view that the adoption practice and service generally provided by this agency was of a high standard.

Statement of Purpose (standard1)

This standard was met.

Sefton Metropolitan Borough Council's adoption agency had recently reviewed and up-dated its statement of purpose, which was comprehensive, extremely detailed and contained all the information outlined, in Schedule 1 of the Adoption Services Regulations 2003.

The agency had produced three children's guides to meet the needs of three, different age groups of children. These guides were extremely colourful, attractively presented, well thought out and in an age appropriate, child friendly form. They were available in a variety of

different formats to meet children's special needs and contained all the necessary information prescribed in this standard.

Securing and promoting children's welfare (standard 2)

This standard was met

The adoption agency employed a recruitment and marketing officer to work within the adoption service. There was a written recruitment strategy and its effectiveness routinely monitored and evaluated. Over the past two years there had been a significant increase in the number of adoptions that had taken place, over the past two years.

The agency was a member of the Mersey Region Adoption Consortium and worked closely with members of this consortium to widen the placement choice for children. At the time of the inspection, further consideration was being given to link children with adopters in the Mersey and North West region through the purchase of a specific software package.

The agency had permanence, family finding and matching policy and procedures and took great care to ensure effective matching took place. The practice of the agency was extremely child focused, with the child's needs, wishes, welfare and safety, clearly at the heart of the adoption process. These views were also voiced in the adopters' and placing social workers' questionnaires returned to the commission.

Prospective and approved adopters (standards 3 – 6)

2 of the 4 assessed standards were met

The adoption agency recruited adoptive parents, without prejudice and they were treated fairly, openly and with respect through out the adoption process. Initial enquiries made to the agency were responded to in a prompt, friendly, helpful and informative manner. The agency's information pack was extremely, attractively presented, very informative and user friendly, indeed one adoptive family stated the pack was "non-threatening, unlike a lot of official information packs".

Prospective adopters were provided with clear details regarding the agency's eligibility criteria, information regarding the children in need of adoption, the preparation training and assessment process, as well as the interagency support services available to adopters. In the main adopters were of the view that the preparation training, which was regularly evaluated, was extremely informative and enabled them to explore a number and variety of issues in relation to becoming an adoptive parent. However, some shortfalls were identified by adopters in relation to these preparation groups and are addressed in the recommendation section of this report.

The assessment process used by the adoption service was based on the BAAF form F model and operated within an anti – discriminatory and equal opportunities framework. Adopters were made aware of the need to address and help children deal with issues of discrimination. They also learnt of the need for children to understand their history and develop a positive self – esteem through life story work.

During the course of the inspection, the inspectors examined a sample of adopters' files and found that the assessments were generally thorough, detailed, insightful and the quality of assessments of an extremely good standard. Similar views were also held and expressed in the questionnaires returned by the placing social workers and adopters. In examining adopters' files, some shortfalls were found and are detailed in the requirement and recommendation section of this report.

Prospective adopters were given information regarding the assessment, approval, matching, introduction, placement processes, as well as the support services provided by the agency. Written information about the use of the Adoption Register for England and Wales was also provided.

Adopters were generally well informed about the child placed with them, though the inspectors did identify some shortfalls in relation to the documentation. (Please see standards 5, 8 and 25, for details.) Overall though examination of a sample of adopters and children's files indicated that the agency gave very careful consideration to matching and ensured that good practice and outcomes were achieved, including where possible, enabling siblings to live together.

A clear multi - agency commitment had been given to adoption support services, which had resulted in responsive integrated multi –agency adoption support services. These support services was offered to adopters at all stages of the adoption process, to assist adoptive parents to provide a stable and permanent homes for their children. Those adopters interviewed indicated they had received good information regarding these services and were well supported by the agency.

Birth Parents and Birth families (standards 7 – 9)

2 of the 3 assessed standards were met

The agency had a clear strategy for working with and supporting birth parents and families, both before and after adoption. The important role that birth parents played in the adoption process was recognised and birth parents were encouraged to contribute to their child's planning process. Those parents unable or unwilling to attend such meetings were kept informed of the planning decisions made through minutes of meetings, court documentation etc. The agency had a clear expectation that the birth parents' views about adoption and contact were recorded.

The inspectors were advised that birth parents and their family were encouraged to provide information on the child's birth and early life through life story work. The service also maintained a letterbox system, which facilitated the exchange of information between the adopted and birth family. This enabled the child to receive up-dated information regarding their birth parents/ family and maintain their heritage.

The agency had a service level agreement with After Adoption; part of that contract was to provide a counselling service for birth parents.

During the course of the inspection, some shortfalls were identified in relation to the involvement of birth parents in the adoption process and life story work, which resulted in two recommendations being made. These matters were addressed in standards, 7, 8 and 25, as well as in the recommendations' section of this report. (Please see the relevant sections of this report, for further details.)

Adoption Panels and Agency decision (standards 10 – 13)

3 of the 4 assessed standards were met

The agency had clear, detailed policies and procedures relating to the Adoption and Permanence Panel, however this documentation did not contain all the information required to meet the National Minimum Standards.

The panel was properly constituted. The membership of the panel included people, who had

suitable qualities, as well as a wide range of differing adoption experience.

The inspectors were of the view that the Adoption and Permanence panel was well organised, operated in an efficient and effective manner and played a significant role in raising standards within the adoption service. The panel was also convened at an appropriate frequency to meet the needs of the prospective adopters and children. Similarly, the adoption agency's decisions were made without delay, promoted and safeguarded the welfare of the child.

The adoption agency invited prospective adopters to attend panel and provided them with a helpful leaflet regarding this. Those interviewed, as well as information obtained from returned questionnaires indicated that adopters were generally of the view that their attendance at panel had been a well - managed and positive experience.

Some shortfalls were identified in relation to these standards and are fully detailed in standard 28, as well as in the requirement and recommendations section of this report.

Fitness to provide or manage an adoption agency (standards 14-15)

2 of the 2 assessed standards were met

The people involved in the management of Sefton Metropolitan Borough Council's adoption agency had the appropriate management skills and financial expertise to manage the work efficiently and effectively. The managers were well respected and staff had a great deal of confidence in their ability to effectively manage the adoption service. The adoption agency had a written recruitment, selection policy and procedures for the appointment of a manager and staff, which had been had improved and strengthened. All the management files examined contained the necessary documentation.

Provision and management of the adoption agency (standards 16-18)

3 of the 3 assessed standards were met

The adoption agency was managed effectively and efficiently and operated in accordance with its statement of purpose. There were clear arrangements in place to identify the person in charge, when the service or team manager was absent. Similarly, the roles of the managers and staff were clear, with well-established lines of communication and accountability between the managers and staff.

The agency informed managers and staff of their responsibility to declare any possible conflicts of interests, which was clearly set out in Sefton Council's personnel procedures. The Council also had an equal opportunities policy and promoted anti-oppressive practice. The staff recruitment procedures reflected this policy and practice, which was reinforced throughout the recruitment, selection and retention of staff.

There were good procedures in place for monitoring and controlling activities of the agency and these are fully detailed in standard 17, of this report. All reports presented to the senior management team and executive side of the council relating to the operation of the adoption agency were closely scrutinised to ensure that the adoption agency was effective and achieved good outcomes for the children.

The adoption service had access to a variety of specialist advisors from both within and outside Sefton Council and had written protocols regarding their roles.

Employment and management of staff (standards 19 – 23)

4 of the 5 assessed standards were met.

During the inspection, a sample of personnel files and panel members' files were selected and examined. Some shortfalls were identified in these files and a requirement and recommendations were made, which are detailed in the appropriate section of this report.

All staff working within the adoption service, with case responsibility, were suitably qualified, had childcare experience. They also had experience in carrying out assessments, as well as appropriate experience in relation to adoption and were well regarded by their colleagues. At the time of the inspection there were several unqualified members of personnel, who assisted qualified workers in the adoption agency. However, these employees had no case responsibility and were always supervised by qualified staff, as were students on placement in the adoption team.

The adoption agency prioritised, allocated and monitored staffs' workload. It was recommended that the agency would benefit from a formalised workload management system.

The adoption service was committed to the training and development of staff, as shown by the in- house and external training provided. Training was regularly evaluated and an annual training programme formulated. Workers' individual and professional development was monitored through the supervision and appraisal system.

The agency also had a sound infrastructure and had the necessary administrative, financial, professional and personnel systems to support staff in the effective delivery of service.

Sefton Metropolitan Borough Council was seen as a fair and competent employer and had sound employment practices. A variety of initiatives to attract, recruit and retain staff had been introduced and these were fully detailed in standard 21 of this report.

Records (standards 25 – 28)

2 of the 4 assessed standards were met

A recording policy was in place, which provided clear guidelines and expectations regarding recording. Subsequent examination of a sample of prospective and approved adopters, as well as children's files, demonstrated some shortfalls in the case recording. (Please see standard 25 and the requirement, recommendation section of this report for further details.)

The adoption service had a policy and procedural instructions to cover arrangements for maintaining the confidentiality of adoption information, adoption case records and their indexes. The inspectors were able to confirm that staff, panel members and specialist advisors understood these instructions.

The agency had introduced a system whereby case decisions made in supervision were recorded and held on the case files. An examination of case files though indicated that this system was not being consistently applied.

The agency had an Access to Records policy and ensured that it was compliant with the National Minimum Standards and the Adoption Agency Regulations 1983.

The adoption agency's confidential records were stored securely, though not in a locked room, a recommendation was made with a view to enhancing their security. The service was of the view that all adoption files were securely stored to minimise the risk of damage from fire or water.

The adoption agency had a separate record system for complaints, allegations and child protection in relation to prospective, approved adopters and staff. These record systems were stored confidentially and securely.

Personnel files were held centrally. Some shortfalls were identified in the sample of files examined, as they did not contain all the information required, under Schedule 3 and 4 of the Adoption Services' Regulations 2003. (Please see standard 18,19 and 28, together with the requirement and recommendation of this report, for further details.)

Premises (standard 29)

This standard was assessed and not met

The adoption agency was located in a large, detached property in Crosby, Merseyside. These premises had disabled access to the lower ground floor. The recent increase in staff had resulted in accommodation becoming a little overcrowded, however, the service were aware of the issue and looking at ways to address this.

The inspectors were advised that the IT equipment had recently been increased in the adoption service. There was also a new computer programme being rolled out to ensure that all staff had access to a personal computer on an individual basis. The inspectors' were advised of the security in place to safeguard all information contained in the IT system. The service had a variety of other necessary equipment to support staff in the effective delivery of an adoption service, for example a fax, photocopying machine, a scanner etc.

The premises had lockable filing cabinets to secure confidential information, though there was a need to place the cabinets in a lockable room. In addition, the premises had appropriate security systems in place to prevent inappropriate access to the building.

Sefton Metropolitan Borough Council had adequate Premises and Contents Insurance to promptly replace any lost or damage caused to contents of the building or premises.

At the time of the inspection, the agency was reviewing its disaster and recovery plan, so that there was a more robust system to safeguard and back up the agency's records.

Reports and Notifications to the Local Authority and Secretary of State

The following statutory Reports or Notifications are to be made under the Care Standards Act as a result of the findings of this inspection:

Report to the Secretary of State under section 47(3) of the Care Standards Act 2000 that the Commission considers the Local Authority's adoption service satisfies the regulatory requirements:

NA

Notice to the Local Authority under section 47(5) of the Care Standards Act 2000 of failure(s) to satisfy regulatory requirements in their adoption service which are not substantial, and specifying the action the Commission considers the Authority should take to remedy the failure(s), informing the Secretary of State of that Notice:

NA

Report to the Secretary of State under section 47(4)(a) of the Care Standards Act 2000 of a failure by a Local Authority adoption service to satisfy regulatory requirements which is not considered substantial:

NA

Report to the Secretary of State under section 47(1) of the Care Standards Act 2000 of substantial failure to satisfy regulatory requirements by a Local Authority adoption service:

NA

The grounds for the above Report or Notice are:

Not Applicable

**Implementation of Statutory Requirements from Last Inspection
(Not relevant at first CSCI inspection)**

Requirements from last Inspection visit fully actioned?

NA

If No please list below

STATUTORY REQUIREMENTS				
Identified below are areas not addressed from the last inspection report which indicate a non-compliance with the Care Standards Act 2000, the Adoption Agencies Regulations 1983 and the Local Authority Adoption Service (England) Regulations 2003.				
No.	Regulation	Standard	Required actions	
			Not Applicable	

Action is being taken by the Commission for Social Care Inspection to monitor compliance with the above requirements.

STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

Action Plan: The appropriate officer of the Local Authority is requested to provide the Commission with an action plan, which indicates how requirements are to be addressed. This action plan is shown in Part D of this report.

STATUTORY REQUIREMENTS

Identified below are areas addressed in the main body of the report which indicate non-compliance with the Care Standards Act 2000, the Adoption Act 1976, the Adoption Agencies Regulations 1983, the Local Authority Adoption Service (England) Regulations 2003 or the National Minimum Standards for Local Authority Adoption Services. The Authority is required to comply within the given time scales in order to comply with the Regulatory Requirements for adoption services.

No.	Regulation	Standard *	Requirement	
1	Local Authority Adoption Service (England) Regs 2003 10(b)	LA18LA28	The agency must ensure that those working for the service are suitably qualified and competent. In view of this, the documentary evidence of the qualifications and registration with the appropriate professional body must be obtained in relation to panel members and specialist advisors'. This evidence must be held on their file.	30/06/05
2	Local Authority Adoption Service (England) Regs 2003 6(2)(c), 11(3)(d), 15(1) & Schedules 3 & 4	LA11LA18 LA19LA28	The manager of the service must ensure that information is held on all persons who work for the adoption service in accordance with Schedule 3 and 4. This applies to all staff, panel members and specialist advisors, who provide services to the agency.	31/05/05
3	The adoption agency regs.1983, 8(2)(a).	LA25	The manager of the adoption agency must ensure that when the agency considers that a person may be suitable to be an adoptive parent, it shall set up a case record and place on it, any information obtained by virtue of this regulation. The agency should therefore ensure contemporaneous records in relation to the home study visits are held on the adopters' files.	01/05/05

GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

Identified below are areas addressed in the main body of the report which relate to the National Minimum Standards and are seen as good practice issues which should be considered for implementation by the Authority or Registered Person(s).

No.	Refer to Standard *	Recommendation Action
1	LA4	The manager of the adoption agency should consider providing specific preparation training, solely for prospective adopters and second time adopters.
2	LA4	The agency should review the times and venues of future preparation training groups.
3	LA4	The manager of the adoption agency should ensure that any health and safety checklist and action plan is fully completed.
4	LA8LA25	The agency should ensure that clear and appropriate information is obtained for the child about themselves and life before adoption. This information should be provided in a timely manner and in accordance with their needs.
5	LA8LA25	The agency should ensure consistent practice is adopted in relation to later life letters
6	LA5 LA25	Consideration should be given to form E training being a standing item on the training programme or alternatively for the adoption team to provide mentorship to other child care staff in this area of work.
7	LA7	It is recommended that the agency should give further consideration as to how the birth family is engaged and supported in the adoptive planning processes and post adoption.
8	LA10	The agency should re-evaluate the waiting area provided to applicants attending panel, with attention given to providing a suitable and private waiting area.
9	LA10	The agency should re-consider its practice of arranging panel members to undertake a home visit to applicants, prior to the panel making a final recommendation to the agency-decision maker.
10	LA15LA19 LA28	The agency should ensure that any recording system used in relation to a criminal records bureau check indicated the status, disclosure number and date such a check was completed.
11	LA15LA19 LA28	The agency should introduce a system for telephone calls to be made to each referee to verify the provenance of the written references received by the agency.
12	LA17	The agency should review the effectiveness of its dissemination of information regarding adoption allowances to adopters.

13	LA20	The manager of the agency should consider the implementation of a formal, workload management scheme.
14	LA25	The manager of the agency should ensure that the file auditing system and case decision forms, which have been recently introduced, are consistently used and form part of the agency's internal auditing and quality assurance system.
15	LA25	To aid the legibility of records, consideration should be given to case records being typed. The agency should also ensure that all records are signed and dated, by both staff and managers.
16	LA25 LA28	It is recommended that all adoption filing cabinets be held in lockable rooms.
16	LA28	The agency must ensure they keep up-to-date with any guidance provided by the Commission for Social Care Inspection regarding criminal records bureau checks, including any guidance provided in relation to the portability of criminal records bureau checks.
17	LA28	The manager of the agency should re- evaluate the adoption team's accommodation, particularly in relation to the space provided and the provision of an interview room.

- Note: You may refer to the relevant standard in the remainder of the report by omitting the 2-letter prefix e.g. LA10 refers to Standard 10.

PART B**INSPECTION METHODS & FINDINGS**

The following inspection methods have been used in the production of this report

Placing authority survey	YES
Placing social worker survey	YES
Prospective adopter survey	YES
Approved adopter survey	YES
Birth parent / birth family member survey	YES
Checks with other organisations and Individuals	
• Directors of Social services	YES
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	YES
• Interview with children	YES
• Interview with adopters and prospective adopters	YES
• Interview with birth parents	YES
• Interview with birth family members	NO
• Contact with supervising social workers	YES
• Examination of files	YES
Individual interview with manager	YES
Information from provider	YES
Individual interviews with key staff	YES
Group discussion with staff	YES
Interview with panel chair	YES
Observation of adoption panel	YES
Inspection of policy/practice documents	YES
Inspection of records (personnel, adopter, child, complaints, allegations)	YES
Date of Inspection	10/01/05
Time of Inspection	12.00
Duration Of Inspection (hrs)	115
Number of Inspector days	8.00
Additional Inspection Questions:	
Certificate of Registration was displayed at time of inspection	NA
The certificate of registration accurately reflected the situation in the service at the time of inspection	NA
Total Number of staff employed (excluding managers)	5

The following pages summarise the key findings and evidence from this inspection, together with the CSCI assessment of the extent to which the National Minimum Standards have been met. The following scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

The scale ranges from:

- | | |
|-------------------------|--------------------|
| 4 - Standard Exceeded | (Commendable) |
| 3 - Standard Met | (No Shortfalls) |
| 2 - Standard Almost Met | (Minor Shortfalls) |
| 1 - Standard Not Met | (Major Shortfalls) |

"0" in the "Standard met?" box denotes standard not assessed on this occasion.

"9" in the "Standard met?" box denotes standard not applicable on this occasion.

"X" is used where a percentage value or numerical value is not applicable.

Statement of Purpose

The intended outcome for the following standard is:

- **There is clear written statement of the aims and objectives of the adoption agency and the adoption agency ensures that it meets those aims and objectives.**

Standard 1 (1.1 - 1.2, 1.3 (partial) and 1.4 – 1.7)

There is a clear written statement of the aims and objectives of the adoption agency which describes accurately what facilities and services they provide.

Key Findings and Evidence	Standard met?	4
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At the time of the Inspection, Sefton Metropolitan Borough Council's Adoption Service had reviewed and up-dated their statement of purpose. The inspectors were advised that the Executive side of the Council had formally approved this statement of purpose on 8th October 2004. It was intended that this document would be reviewed on an annual basis, in accordance with the National Minimum Standards. The manager of the service was aware that if the statement of purpose were to be revised, the Commission for Social Care Inspection would need to be advised of any such revision within 28 days.

This statement of purpose was an attractively presented, user friendly document, which was comprehensive, extremely detailed and covered all the areas required under Schedule 1 of the Adoption Regulations 2003. The statement clearly outlined the principles, aims and objectives of the Council's adoption service; it's organisational structure, the management arrangements for the adoption service and also included photographs of the managers and staff of the adoption agency. There was also a brief section on the policies and procedures that were in place in relation to the adoption agency, as well as information regarding the Adoption panel, which included photographs of panel members. This statement of purpose provided information regarding the purpose and range of the services provided by the agency, as well as detailing the systems in place to monitor and evaluate the quality and effectiveness of the service. In addition, there was a section in the statement of purpose, which outlined planned future developments for the agency. A summary of the representation and complaints procedure was provided, which included contact details for the Commission for Social Care Inspection.

Sefton Council's adoption service had produced three children's guides, which had been specifically designed to meet the needs of three, different age groups of children. These guides were extremely colourful and attractively presented. They had been well thought out and provided information about the nature of adoption, as well as details about the adoption process and procedures, in an age appropriate, child friendly form. The guide also contained a complaints' leaflet, entitled "How to make a complaint" which outlined the service's complaints procedure and was again in a child friendly format. In addition, this leaflet provided information about independent advocates, as well as organisations that can assist a child or young person in contacting an independent advocate. It also included details regarding the Commission for Social Care Inspection, the Children's Rights Director and provided up-to-date contact details.

The inspectors were advised that all three children's guides could be produced in large print, Braille, in audio form, other languages and if required, arrangements could be made for an interpreter to be obtained for the child or for the guide to be read to the child.

The manager of the service stated that the adoption service took account, in both written and oral communication of any physical, sensory or learning disability of members of the public, birth families, prospective and approved adopters and any professionals involved in the adoption process. The inspectors were able to subsequently evidence that such practice was being carried out by the agency.

There was also evidence that the revised statement of purpose had been issued to all childcare staff, panel members and prospective, as well as approved adopters.

At the time of the inspection, Sefton Metropolitan Borough Council's adoption service's policies and procedures had been reviewed and where necessary revised to ensure that they accurately reflected the statement of purpose.

**Has the Statement of Purpose been reviewed annually?
(Record N/A if the information is not available)**

YES

Has the Statement been formally approved by the executive side of the council?

YES

Is there a children's guide to adoption?

YES

Does the children's guide contain all of the information required by Standard 1.4?

YES

Securing and promoting children's welfare

The intended outcome for the following set of standards is:

- The needs and wishes, welfare and safety of the child are at the centre of the adoption process.

Standard 2 (2.1 - 2.3)

The adoption agency has written plans for the implementation and evaluation of effective strategies to recruit sufficient adopters to meet the needs of the range of children waiting for adoption locally.

Key Findings and Evidence	Standard met?	3
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Sefton Borough Council employed a recruitment and marketing officer to work within the adoption and fostering service. There was a written recruitment strategy, which clearly detailed the needs of the service and the means by which sufficient adopters would be recruited to meet the needs of those children identified for adoption. The agency had also developed links with a variety of multi-cultural centres with a view to recruiting adopters from various ethnic minority groups. At the time of the inspection, the agency was recruiting adopters for specific groups of children, such as school age children over five years, sibling groups, children who had complex needs, as well as black and other ethnic minority children.

The inspectors were advised that children waiting to be adopted were discussed on a bi-monthly basis, priorities were determined, children's profiles were prepared in conjunction with them and if they agreed, used in both external publications, as well as within the information packs. The effectiveness of the adoption agency's recruitment strategies was routinely monitored and evaluated with comprehensive information kept on all aspects of recruitment. This information was then incorporated in the agency's information systems and regularly analysed. Every six months the recruitment and marketing officer compiled a report regarding the progress made in recruitment and generally reviewed the agency's recruitment strategy, which was presented to the Senior management team. The last summary report presented was in November 2004.

The inspectors' discussions with senior managers indicated that the appointment of a recruitment and marketing officer had significantly increased the number of enquiries concerning adoption. This, together with the strenuous efforts made by the management, adoption and administrative teams had resulted in a significant increase in adoptions over the past two years and was clearly evidenced by the relevant performance indicators.

In addition to the agency's recruitment strategy, Sefton Borough Council was also a member of the Mersey Region Adoption Consortium and worked closely with members of this consortium to widen the placement choice for children needing local adoptive placements. In addition, the inspectors were advised that the adoption agency ensured that all children waiting for adoption were referred to the Adoption Register. At the time of the inspection, consideration was also being given to investing in a specific software package, which would be used in the North West Region and the Mersey Region Adoption Consortium and maximise the opportunities to link children with adopters.

The agency had permanence, family finding and a matching policy and procedures, which provided clear guidance to staff in undertaking this work. The matching policy and procedure clearly emphasised the importance of children being matched with adopters, who best met their needs. It also emphasised that children, wherever possible, should be placed with a family, which reflected their ethnic origin, cultural background, religion and language.

However, the documentation recognised that it was not always possible to achieve this ideal match. In these circumstances and within a realistic timescale, the policy indicated that children should be matched to a family, who as closely as possible met their needs, rather than being left waiting indefinitely within the care system and the child's need for adoption compromised. The inspectors were advised that in these situations, the agency would ensure that support was given to the adoptive family to bridge any gaps regarding the children's background and needs, so ensuring the children developed a positive self-image. The reasons why a child was not ideally matched and the support that the service proposed to provide the adoptive family would be fully recorded in the child's case record. This documentation also stressed the importance of sibling groups remaining together, unless this would prevent the individually assessed needs of children being met.

The agency had also developed a matching tool, "Child in your family", which provided up-to-date, in depth information regarding the child and further enhanced the effectiveness of the matching process.

During the course of the inspection, interviews took place with managers, staff, and prospective and approved adopters in the service. The Inspectors also examined a sample of records. Evidence was obtained that in matching a child with approved adopters, the service takes the views and feelings of the child into account, as is appropriate to their age and understanding. The participation of children in this matching process was also clearly monitored by the independent reviewing officers, as evidenced by the monitoring form found on several of the children's files, which were examined. The child's care plan, recent written assessments of the child, the birth family, potential adoptive parents and their children were also taken into account.

The inspectors were informed that Sefton's adoption agency had identified sibling placements as a priority area. Consequently, they had developed and made available packages of support to facilitate siblings being placed together. During the course of the inspection, the inspectors were able to evidence that the adoption agency was successful in achieving this, as illustrated by the fact that it had not been uncommon for the agency to place sibling groups of three and currently a sibling group of four have been placed in one adoptive home.

During the course of the inspection, the inspectors were able to evidence excellent use of both twin tracking and concurrency planning in relation to several children looked after by Sefton Council. This had resulted in effective planning for these children, with minimal delays and as a consequence, the children were matched and placed with a family in a timely manner. The childcare practice in these cases was of a good standard, totally child focussed and ensured that a good outcome was achieved for the children concerned.

The Commission received five questionnaires from prospective and approved adopters. Examination of these questionnaires, together with a sample of records, as well as interviews with approved adopters provided further evidence that the agency was extremely child focused, with the child's needs, wishes, welfare and safety clearly at the heart of the adoption process. (Please see standard 4, for further details.) The information obtained in the questionnaires also indicated that the agency took great care to ensure effective matching took place. This was also corroborated in the evidence obtained by the inspectors during the course of this inspection. (For further details relating to effective matching, please refer to standard 5.)

Similar views were also expressed in the twenty-one returned placing social workers'

questionnaires and subsequent interviews with a number of placing social workers. In addition, information obtained from these questionnaires indicated that adopters received good information and were well prepared regarding the matching process. Information from these questionnaires also indicated that placing social workers greatly valued the experience and skill of the staff in the adoption service and believed staff were of real assistance in securing and promoting the welfare of the child through effective adoption matching.

In the last 12 months:

How many children were identified as needing adoptive families?	17	
How many children were matched with adopters?	27	
How many children were placed with the service's own adopters?	27	
How many children were placed with other services' adopters?	0	
How many children were referred to the Adoption Register?	6	
In the last 12 months, how many children were matched with families which reflected their ethnic origin, cultural background, religion and language?	26	
What percentage of children matched with the adoption service's adopters does this represent?	96	%
How many sibling groups were matched in the last 12 months?	2	
How many allegations of abuse or neglect were made about adopters approved by this adoption service?	0	
On the date this form was completed, how many children were waiting for a match to be identified?	5	

Prospective and approved adopters

The intended outcome for the following set of standards is:

- The adoption agency recruits and supports sufficient adopters from diverse backgrounds, who can offer children a stable and permanent home to achieve a successful and lasting placement.

Standard 3. (3.1 – 3.3 and 3.5 - 3.6)

Plans for recruitment will specify that people who are interested in becoming adoptive parents will be welcomed without prejudice, will be given clear written information about the preparation, assessment and approval procedure and that they will be treated fairly, openly and with respect throughout the adoption process.

Key Findings and Evidence

Standard met?

4

The adoption agency's recruitment plan, together with the arrangements which had been made to handle enquiries and the information provided prospective adopters, clearly indicated that prospective adopters were valued, treated with respect and in a fair and open manner. The information regarding the initial enquiries, preparation, the assessment and approval of prospective adopters contained in the looked after children's procedure manual also reinforced the adoption service's commitment to ensuring prospective adopters would be welcomed without prejudice. The inspectors' examination of a sample of adoption records, interviews with approved adopters, as well as observation of the adoption panel confirmed that the adoption agency was practising in accordance with this documentation.

During the course of the inspection, the inspectors interviewed four approved adopters, who informed the inspectors that the initial enquiries made to the adoption service were responded to in a prompt, friendly, helpful and informative manner.

Following their initial enquiries the inspectors were advised that written information, in the form of an information pack, had been sent to them in a speedy manner, several adopters indicated that they had received this information pack within a couple of days.

In examining this information pack, the inspectors found that it was attractively presented, in a user-friendly form, well written and provided extremely useful information regarding the adoption process for prospective adopters. It also contained a step-by-step guide from the initial enquiry stage to the preparation, assessment and approval process. In addition, the pack provided information regarding the role of the adoption panel, the matching and placement process, the making of an adoption order and post adoption support, including the timescales for each stage of the process. The pack also contained a question and answer sheet, which addressed the most commonly asked questions in relation to adoption, a leaflet on the letterbox exchange, as well as information regarding adopting a child from overseas. Some profiles of children waiting to be adopted were also included in the pack.

Since developing this information pack the agency had routinely evaluated its usefulness to prospective adopters. In the returned questionnaires all commented on its attractive presentation and stated that they had found the pack extremely informative and helpful. To provide a flavour of the views of prospective adopters, a quote from one of the questionnaires has been included in this report, which read as follows:

"The Artwork is beautiful and the whole pack is non-threatening – unlike a lot of official information packs."

On receipt of this information pack, prospective adopters, who indicated to the agency that they wished to proceed with adoption, received an initial visit from an adoption worker. During this visit, prospective adopters were able to gain additional information and to clarify any issues that they might have relating to adoption. Preparation training was also discussed with them and the dates of the next preparation training programme provided.

Following this visit, prospective adopters who wished to proceed with an adoption application were invited and expected to attend an information day. In this information session, additional information was provided regarding the adoption process, including the support services available to adopters, the agency's priority system, and further profiles of children waiting to be adopted. However, in accordance with the Council's views regarding children's rights and individual respect, no child's profile, subject of course to their age and understanding, was presented either in the information packs or at the information sessions unless the child was in agreement.

During the inspectors' interviews with the four adopters, it was confirmed that they had received a written copy of the agency's eligibility criteria. The inspectors were advised that the agency had been very clear and open regarding the eligibility criteria and had ensured that the adopters had a good understanding of this, before proceeding with their adoption application. The approved adopters also indicated that the information they had received following their initial enquiries to the agency had been clear, informative, extremely useful in enabling them to understand the adoption process and had fully met their immediate needs.

The inspectors were advised that the subsequent information session had also proved helpful in providing additional information, as well as affording them an opportunity to seek further clarification regarding the nature and process of adoption. There was very clear evidence from interviews with adopters and the case records that the service had welcomed them without prejudice. These findings were also substantiated in the five prospective and approved adopters' questionnaires returned to the Commission.

In the interviews with adopters, the inspectors were advised that the preparation groups were extremely informative and enabled the prospective adopters to explore a number and variety of issues in relation to becoming an adoptive parent. They also spoke about the opportunity afforded them in the preparation groups to talk to others who had adopted children and stated how much they had valued hearing about the experiences of other adopters. (Please see standard 4, for further details regarding the preparation training and assessment of prospective adopters.)

The adoption service did not take account in its preparation training of prospective adopters the particular needs of those intending to adopt from another country, as it referred such prospective adopters to adoption agencies that specialise in inter-country adoption.

During the inspection, the inspectors were able to evidence that the adoption agency was clear about the number and the needs of children waiting to be adopted. Moreover, they had systems in place to prioritise the assessment of prospective adopters, who were most likely to meet the needs of children waiting to be adopted.

Standard 4. (4.1 – 4.9)

Prospective adopters are involved in a formal, thorough and comprehensive assessment, preparation and approval process.

Key Findings and Evidence	Standard met?	2
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The inspectors were informed that prospective adopters undergo a thorough comprehensive assessment, preparation and approval process.

The agency's preparation training was in-house and the core training was provided jointly to adopters and foster carers and took place over two days. Further preparation training was provided for half a day, in order to meet the specific needs of foster carers and adopters and was therefore arranged separately for both groups. The inspectors were advised that the materials and exercises used in this preparation training were continually evaluated and updated in response to participants' comments and practice changes. They were also informed that these preparation courses took place on a regular basis and met adopters' needs within the timescale of the adoption standards.

In interviewing adopters, together with information obtained from the returned questionnaires, the inspectors were able to confirm that the adoption agency had a clear, well-structured and effective preparation programme. They were also advised that the service encouraged and facilitated their attendance in the preparation groups by ensuring prospective adopters' introduction to the group was warm and friendly, the materials, as well as the discussions in the group, extremely interesting and stimulating. However some adopters indicated that preparation training provided solely to adopters would be beneficial. Another couple suggested that a preparation group for second time adopters would be valuable. In the view of these comments, the inspectors would recommend that the agency should consider reviewing the preparation groups and training currently being provided.

During the preparation groups, prospective adopters were given the opportunity to talk to others who had adopted children. A number of adopters commented on this, stating that they had found this experience highly beneficial in the preparation process.

Several prospective and approved adopters stated that the preparation groups had been held at convenient times and venues. However, one adopter was of a different view indicating that the times of the groups required to be reviewed, particularly for single parents. Two adopters stated that given the geographical nature and size of Sefton Metropolitan Borough Council, the current venue used for the preparation groups should be reviewed. In the light of these comments, a recommendation was made regarding these matters.

In the main though, collation of the information obtained from the inspectors' interviews with adopters, as well as from the returned questionnaires indicated that adopters' generally thought the preparation training provided by the agency was of a good standard.

The assessment process used by the adoption agency was based on the British Association for Adoption and Fostering (BAAF) form F model and operated within an anti – discriminatory and equal opportunities framework. This model ensured that adopters were considered in terms of their capacity to care safely and meet the developmental needs of children. In addition, the agency used a health and safety checklist and action plan. Whilst this documentation provided an excellent means to assess adopters' ability to provide a safe environment in some of the case records examined by the inspectors, this documentation had not been fully completed. This was discussed with the manager at the time of the inspection and is to be addressed. A recommendation was made regarding this. During the assessment process and in certain circumstances, prospective adopters attended relevant training sessions, for example safe caring, life story work or support groups.

During the course of the inspection, a sample of files were examined. The inspectors were able to evidence that the agency carried out the necessary enquiries, health checks and

obtained personal references, as well as enhanced Criminal Record Bureau checks in relation to prospective adopters and on all members of their household, who were aged eighteen years or over. Those adopters interviewed confirmed that they had been informed both verbally and in writing that checks would be undertaken in relation to their application and fully understood the reasons for such checks. Qualified and experienced workers completed all assessments. Whilst the adoption agency did not use a competency-based approach to their assessment of prospective adopters, there was an expectation that evidence of the applicants' capacity to be adoptive parents was sought and thoroughly analysed. This was clearly demonstrated in the sample of prospective adopters' assessments that were examined.

Overall the inspectors were of the view that the agency's practice was extremely child focused and assessments seen were generally thorough, detailed and of a good standard. This was further corroborated through information obtained in the placing authorities' questionnaires received by the Commission.

During the inspection the inspectors were advised and able to evidence that the adoption agency had a commitment to ensure that when foster carers adopted a child, whom they had fostered, they received the same information and preparation as other prospective adopters.

The inspectors interviewed several adopters, who expressed the view that the preparation, assessment and approval process had been comprehensive, extremely thorough and that the completed form F's had portrayed them accurately. This was further corroborated through information obtained in the returned placing authorities' questionnaires.

Several of those interviewed spoke extremely highly of the professionalism, knowledge, skills and sensitivity of their adoption worker. They also indicated that the home study had been an extremely positive and valuable part of the preparation and assessment process; as a consequence, they had been able to address a variety of personal and pertinent issues relating to adoption. This was evidenced in some of the prospective and adopters' files examined by the inspectors. Indeed, one adopter had been so impressed with the service they had received that they had recommended others to the adoption agency. The inspectors were also advised that applicants had been kept fully informed of their progress throughout the assessment process and had been well supported by the adoption agency.

During the course of the inspection, the inspectors were able to evidence that assessments were generally carried out within timescale of the National Adoption Standards for England. Assessments that fell outside the timescale were usually outside the agency's control and related to the adopters, rather than the agency.

Standard 5 (5.1 – 5.4)

Approved adopters are given clear written information about the matching, introduction and placement process, as well as any support to facilitate this they may need. This will include the role of the Adoption Register for England and Wales.

Key Findings and Evidence	Standard met?	2
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Prospective adopters were given information regarding the assessment, approval, matching, introduction, placement processes, as well as the support services provided by the agency. (Please see standard 6, for further details re support services.) In addition, written information about the use of the Adoption Register for England and Wales was also given prospective adopters. Adopters subsequently confirmed this, during their interviews with the inspectors and in the questionnaires returned to the Commission.

The inspectors were advised that prior to a match being agreed the agency ensured accurate, up-to-date and full written information was provided to prospective adopters by way of the BAAF form E, medical, educational and where applicable, other specialist reports were also made available. To ensure adopters received information which was of a high quality, the agency had arranged training for all staff who completed form E's. A written guidance had also been completed, which was included in the looked after children's procedure manual. In addition, the agency had arranged, as part of their quality assurance system, for all form E's to be monitored by the team manager and one of the resource managers in the looked after children's team. Despite these efforts though the quality of form E's seen during this inspection were variable. In interviews with a number of childcare staff, the inspectors were informed that childcare staff only completed a small number of form E's and could only gain limited experience in this area of work. Similar views were also expressed in some of the placing social workers' questionnaires, which were returned to the Commission. A recommendation was made in the report regarding this matter. (Please see standard 25)

Prospective adopters also had an opportunity to meet with the foster carers, to discuss the information received with the child's social worker and to meet with the panel's medical advisor. This enabled the adopters to have accurate up-to-date information about the child and consider the implications of this information for themselves and their family, prior to agreeing to match between the child and their family.

During the course of the inspection, one adopter interviewed stated that they had met with the medical adviser to obtain further information regarding the medical condition of a child, who was to be matched with them. Information obtained from four of the five returned questionnaires from adopters indicated that they were well informed about the child placed with them a view, which was commonly expressed during this inspection.

Several adopters spoke positively about the support provided by the agency with one adopter stating that the agency's support services had developed quite considerably during the past few years (please see standard 6 of this report, for further details.)

The adoption agency had a system in place to address the death of an adopted child and this was dealt with at various points of the adoption process. A form had been developed to record the adoptive parents' decision and this was placed on the adopters' file. Similarly, the adoption agency ensured that the birth family's wishes regarding this matter were also fully recorded and held on file. This information was also incorporated into the letterbox scheme.

The inspectors were advised that the adoption agency recognised the need for all children placed for adoption to be given appropriate information about their prospective adopters, prior to placement. Adopters therefore prepared a detailed book of information about their immediate, extended family and if applicable their pets, which also included photographs. This book was made available to the child's social worker and could be used as an effective tool in the preparation of a child before placement.

Subsequent examination of a sample of Adoption records evidenced that the agency gave very careful consideration to matching and to ensure that good practice and outcomes were achieved, including where possible, enabling siblings to live together.

The commission received twenty-one questionnaires from placing authorities. All confirmed that the agency provided thorough, accurate and extremely, useful assessments of adopters, which effectively facilitated the matching between the adoptive family and child/children.

Does the local authority have written procedures for the use of the Adoption Register?

YES

Standard 6 (6.1 – 6.7)**Adoptive parents are helped and supported to provide stable and permanent homes for the children placed with them.****Key findings and evidence****Standard met?**

3

The agency initially provided advice, information and support through the link worker, the child's social worker and placement support worker. The type of support services provided was very much dependent on need and ranged from financial, educational, counselling and therapeutic services.

Financial support was provided by way of adoption allowances. At the time of the inspection, adoption allowances had been made available to a significant number of adopters, with one off payments being made to cover home extensions, larger vehicles or household equipment to facilitate the placement of siblings groups.

The inspectors were advised that Sefton Council's educational strategy clearly accepted that adopted children were a priority group, should they required additional educational support. Some adopted children had been provided with additional tuition, whilst others had received the services of an educational psychologist.

The adoption agency had developed a protocol with the child and adolescent mental health service (CAHMS). This protocol afforded adopted children with the same priority and services, as Sefton Council's other looked after children. In the interviews with staff, the inspectors were informed that the protocol with the CAHMS team was working well. Indeed in one case cited by the worker, the quick response from the CAHMS team prevented the potential disruption of an adoptive placement.

The agency had also made a service level agreement with Barnardo's, which included accessing specialist advice, training, support and therapeutic services in relation to complex cases of physical, sexual abuse, neglect, race, sexuality, identity issues and severe attachment disorders.

On – going training was provided adopters both prior to and post placement, there were also adopters' support groups, which were held on a regular basis, together with a variety of social events. This provided adopters with a range of opportunities to develop informal networks with other adopters. All adopters were included in the mailing lists regarding these events, unless they choose otherwise.

The inspectors were also made aware that post adoption support was provided to some adoptive families in relation to complex contact arrangements. In addition, the agency had a service level agreement with After Adoption, which is an independent adoption support organisation. This organisation provided a post adoption service with access to support groups, as well as a helpline and counselling. Post placement work could also be commissioned if necessary, on a spot purchase basis, from After Adoption. The agency ensured that all their adopters were given information about After Adoption's services.

The adoption agency had made arrangements for appropriate information, advice and support to be provided to prospective adopters who receive a proposed match with a child from an overseas authority via an adoption agency, which specialised in such work. At the time of the inspection, discussions were in place to facilitate a referral to local authority for additional support services and inclusion on the agency's adopters' mailing list.

The inspectors were advised that during the preparation and training groups, prospective adopters were informed of the importance of addressing issues of discrimination and helping children deal with racism or other experiences of discrimination. Form F's recorded discussions, which had taken place, with adopters and any additional training offered to them regarding this. Staff had received equality and diversity training and this training had also been made available to adopters, when required.

In the information day, the preparation training, prospective adopters learnt of the need for children to understand their history and develop positive self – esteem. The importance of ensuring that items of memorabilia and life story work were kept safe was further reinforced through the assessment process, the linking and placing processes, as well as after placement, through the adoption agency's post approval training, support groups, services and letterbox exchange. Prospective adopters were also given specific material, such as publications and booklists regarding this matter. The agency had also written a leaflet regarding the importance of keeping safe any information provided by birth families and had circulated this to staff, prospective and approved adopters. In addition, the agency had made a specific budget available to purchase specific storage equipment for adoptive parents, if required.

At the time of the inspection, the agency made sure that clear arrangements were made with adopters regarding any information or photographs, which were to be provided to parents or other family members. Agreement was also reached on how information provided by birth families, via the agency, would be managed.

The agency provided a variety of supports, when a placement was in difficulty including services from CAHMS and Barnardo's (for details regarding these services, please see the comments made earlier in this section). The Council also had a service level agreement with After Adoption, which provided adoption support to the agency's adopters. In a situation, where a placement broke down, disruption meetings were held as a matter of course in order that all parties were able to make sense of and understand the nature of the placement breakdown.

The adopters, who were interviewed as part of the inspection, stated that post placement they were visited regularly by both the adoption and childcare workers and received excellent advice from them. All indicated that they were fully aware of the adoption services available to them and expressed a high level of satisfaction with the support they had received, one adoptive couple describing the post placement support services that they had received from the agency as being "brilliant". Similar views were also expressed in the information obtained from the four prospective/-approved adopters' questionnaires received by the Commission, though two adopters indicated that they were not provided information about adoption allowances.

Number of adopter applications started in the last 12 months	22	
Number of adopters approved in the last 12 months	20	
Number of children matched with the local authority's adopters in the last 12 months	27	
Number of adopters approved but not matched	6	
Number of adopters referred to the Adoption Register	6	
How many placements disrupted, between placement and adoption, in the last 12 months?	0	

Birth Parents and Birth Families

The intended outcomes for the following set of standards are:

- **Birth parents are entitled to services that recognise the lifelong implications of adoption. They will be treated fairly, openly and with respect throughout the adoption process.**

Standard 7 (7.1 – 7.5)

The service to birth parents recognises the lifelong implications of adoption.

Key Findings and Evidence

Standard met?

2

Sefton Metropolitan Borough Council recognised the important role that birth parents play in the Adoption process, which was addressed in the looked after children’s procedures. The Council also had a service level agreement with After Adoption (see Standard 6); part of that contract was to provide a counselling service for birth parents. This service had been highlighted to childcare staff with After Adoption staff attending team meetings to enhance staffs’ understanding of the scheme.

The adoption agency had an expectation that birth parents were involved in their child’s Planning process. The inspectors were advised that prior to the second, “looked after children” review, parents are advised that the plan for the child might be adoption (along with other multi - track plans) and parents were provided with written information regarding this process. Whilst all birth parents were encouraged to attend the child’s planning meetings and reviews, some parents were unable or unwilling to attend such meetings. In these situations, birth parents were kept informed of the planning decisions made regarding their children by minutes of meetings, court documentation etc. In one of the files examined, the inspector was able to evidence the adherence of this practice.

The adoption agency’s policies and procedures assert that the birth parents’ views about adoption and contact should be clearly recorded. The inspectors were able to evidence that this practise was adhered to with birth parents’ views about adoption and contact, clearly recorded in looked after children’s review minutes, the form “E” and other court documentation.

At the time of the inspection, birth parents were actively encouraged to contribute to the form E, the life storybook and to take part in letterbox contact as a minimum. Whilst inspectors did not have the opportunity to meet with birth parents, examination of a sample of files, panel papers, the letterbox scheme and discussions with staff, confirmed adherence to this practice.

In the two questionnaires received from birth family members, one indicated that they were treated with respect, whilst the second indicated that this was variable. Both questionnaires stated that they believed they were not fully listened too and were not really aware of the services available to them. In one questionnaire the respondent indicated that they believed their gender had resulted in them receiving an inequitable service. The limited number of questionnaires received from birth family members, together with the fact that the inspectors were unable to interview a birth parent, prevented these matters being explored more fully. However, a recommendation was made in the report regarding this.

Standard 8 (8,1 – 8.2)

Birth parents and birth families are enabled to contribute to the maintenance of their child’s heritage.

Key Findings and Evidence	Standard met?	3
<p>The inspectors were advised that birth parents and the birth family were encouraged to provide information on the child’s birth and early life. Improvements in this information sharing were also being effected through the training provided childcare staff on the significance and completion of a form E, together with regular file auditing by managerial staff. Similarly, the practice of birth parents being shown the form E and being able to suggest amendments further enhances this information sharing. Birth parents receive a full copy of this form E from the agency. Birth parents views regarding the adoptive plans for the child were obtained. The agency also aimed where possible to arrange a meeting between the birth and adoptive parents.</p>		
<p>The inspectors were informed that birth parents and families were asked to contribute to life story work, as well as later life letters. Whilst the inspectors were able to evidence that life story work had been completed for some children, this had not been provided for all children and the quality of life story work appeared variable. Similarly, in one of the files examined there was no later life letter on file. These matters are referred to in standard 25 of this report and two recommendations have been made.</p>		
<p>The letterbox system also facilitated the exchange of information between the adopted and birth family. This enabled the child to receive up-dated information regarding their birth parents and family and maintain their heritage.</p>		

Standard 9 (9.1)

The adoption agency has a clear strategy for working with and supporting birth parents and birth families (including siblings) both before and after adoption. This includes providing information about local and national support groups and services and helping birth parents to fulfil agreed plans for contact.

Key Findings and Evidence**Standard met?**

3

The adoption agency's policy on involving birth families in adoptions provided a clear strategy for working with and supporting birth parents and families, both before and after adoption.

The Council also had a service level agreement with After Adoption, who provided support to birth parents and families, prior to, during and after adoption. (Please see standard 6, for further details). The inspectors were informed that this service had been highlighted to childcare staff and as discussed in standard 7, After Adoption staff had attended team meetings to enhance staffs' understanding of the scheme.

Adoption Panels and Agency decisions

The intended outcomes for the following set of standards are:

- Each adoption agency has an adoption panel which is organised efficiently and is effective in making quality and appropriate recommendations about children suitable for adoption, the suitability of prospective adopters and the matching of children and approved adopters.
- The adoption agency's decisions are made to promote and safeguard the welfare of children.

Standard 10 (10.1 – 10.3)

Adoption panels have clear written policies and procedures about the handling of their functions and ensure that they are implemented.

Key Findings and Evidence	Standard met?	
<p>The adoption agency had clearly written procedures in relation to the adoption and permanence panel, which had been recently updated and had been circulated to panel members and staff. The policy and procedures outlined the role of the panel, including its duties, functions and responsibilities. The documentation also covered the constitution and membership of the panel, as well as the appointment of the chair and vice-chair person and their role. This adoption panel guidance covered the performance management and tenure of office of panel members, as well as the induction and training of panel members. It also dealt with the conduct of the panel, which included such issues as confidentiality, conflict of interests etc. In addition, the policy addressed issues of unanimity, quoracy, documentation provided to panel, panel minutes, the role of the adoption agency decision maker, including the adoption agency's decision-making process.</p> <p>However, this documentation did not address the role of the medical advisor, panel members' conduct and attitudes, the process for dealing with ineffective or disruptive behaviour, the promotion of good practice, consistency of approach and fairness by the panel members in assessing cases, nor the method of providing feedback to the agency on the quality of cases being presented to the panel. In addition, the documentation did not address complaints, appeals/ representations to the agency and the independent reviewing mechanism.</p> <p>The inspectors were advised that there were plans for this documentation to be amended, so that it included all the above matters. However, despite these omissions, the inspectors were able to evidence that in practice the adoption and permanence panel had a consistent and fair approach in assessing cases, promoted good practice and ensured that information was fed back to the agency on the quality of cases being presented to the panel.</p> <p>The adoption agency provided an opportunity and indeed encouraged prospective adopters to attend the adoption and permanence panel. Prospective adopters were provided with an information leaflet regarding the purpose, nature, responsibilities and tasks of the panel, including whom they would meet at panel. Their attendance at panel was also discussed during the preparation training and the assessment process. In addition to adopters' attendance at panel, the agency had a facility for children to attend and on one occasion, a birth family members' attendance was facilitated.</p>	<p>2</p>	

The inspectors noted that the agency used the staff room, as a waiting area for prospective adopters prior to their attendance at panel. However, this room did not really afford prospective adopters with the privacy and comfortable setting required. A recommendation was made regarding this.

During interviews with adopters, several talked about their attendance at panel. They stated that the chair and all panel members had been extremely welcoming, had put them at their ease and throughout the process they had been treated with the utmost courtesy and respect. They were generally of the view that their panel attendance had been a well – managed and positive experience. They also indicated that they felt that they had been fully supported to participate in the proceedings.

At the time of the inspection, the adoption and permanence panel had a procedure, whereby they made a provisional recommendation to approve a prospective adopter/adopters, following this, a panel member undertook a visit to the prospective adopter/adopters and reported their findings to the next adoption and permanence panel. The panel then made a final recommendation to the agency decision maker. In discussing this panel practice with the chair of the panel, the agency - decision maker, the manager of the agency and other staff there appeared to be a lack of clarity regarding its purpose. The inspectors were concerned about the appropriateness and validity of such practice and raised this with the manager at the time of the inspection. In considering these issues the manager of the service decided that in future, such panel practice should cease. A recommendation was made in the report regarding this matter.

Standard 11 (11.1 – 11.4)

The adoption agency shall ensure that each adoption panel is properly constituted, that panel members have suitable qualities and experience to be a panel member and have regular training to allow them to keep up to date with changes in legislation, guidance and practice. Where the adoption agency is involved in inter-country adoption, each member of the panel understands the implications of being adopted from overseas and seeks advice, when necessary, on the laws and eligibility criteria for the overseas country.

Key Findings and Evidence	Standard met?	3
<p>The adoption agency had a properly constituted adoption and permanence panel. The membership of the panel included people who had suitable qualities, as well as a wide range of differing adoption experience.</p> <p>The inspectors were advised that panel members had access to appropriate training and skill development. Panel members were also kept up-to-date about internal policies and procedures, as well as changes in regulation and guidance through the circulation of appropriate documents, briefing at panels and training events. Individual panel members' training needs were identified and addressed through panel members' annual training programme.</p> <p>During the past year, panel members had attended training events organised by BAAF, the Mersey Region Adoption and Fostering Consortium, as well as in –house and other external training. The topics covered included form E and form F training, various health matters, adoption planning for babies, adoption support, the independent review mechanism etc. The inspectors were informed that panel members had received joint training with the adoption agency's staff, though the last one was in November 2003. However, the inspectors were</p>		

informed that a further joint training event was to be held in February 2005, which was to provide an overview of current adoption legislation and consider the impact of the Adoption and Children Act 2002.

The adoption agency did not provide an inter – country adoption service, as a consequence, it was not intended to provide training to Panel members in the basic principles of the law and eligibility criteria for overseas adoption.

The inspectors were advised and able to evidence that the service had developed an induction programme for new panel members, which was completed in the timescale laid down in standard 11.4. This induction programme provided new panel members with the opportunity to observe one adoption and permanence panel and they were encouraged to observe others until they felt comfortable about contributing to the panel.

A sample of panel members' files were seen. It was confirmed that with the exception of one file, a criminal records bureau enhanced check, had been obtained in relation to all panel members and a confidentiality agreement signed by them. (This matter is also referred to in standard 28 of this report.) In relation to this one file, the inspectors were able to confirm that the panel member had been appointed prior to the Adoption National Minimum Standards and Regulations coming into force. The inspectors were aware that the agency was in the process of addressing the matter, as an application had been made for an enhanced Criminal Records Bureau check on this panel member. The panel member had also been asked to complete a confidentiality agreement. Interviews with panel members, managers and staff confirmed that good practice had been exercised in identifying panel members with relevant experience of adoption and childcare.

Is the panel a joint panel with other local authorities?	NO
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Does the adoption panel membership meet all of the statutory requirements?	YES
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Standard 12 (12.1 – 12.3)

Adoption panels are efficiently organised and conducted and are convened regularly to avoid delays in the consideration of prospective adopters and matching children and adopters.

Key Findings and Evidence	Standard met?	3
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The agency's adoption and permanence panel was convened on a fortnightly basis and the programme arranged on an annual basis. However, the inspectors were advised that there was flexibility to cancel a panel, if there was no business or indeed convene additional panels, if there were urgent issues that required to be addressed. This flexibility ensured that the system operated in an efficient manner and ensured that there were no delays in the consideration of adopters and in matching children and adopters.

During the inspection, one of the inspectors interviewed the panel administrator and was advised that the panel agenda and papers were sent out one week, prior to the panel date. Interviews with a selection of panel members confirmed that they usually had sufficient time to read the papers. The inspector was therefore of the view that the arrangements for sending out the panel papers was operating efficiently.

In directly observing the panel, it was noted that the panel chairperson was well organised

and chaired the panel in an extremely sensitive, effective and efficient manner. Panel members had read the panel papers carefully and were observed to give thoughtful and insightful consideration to the matters presented to them.

One of the inspectors examined a sample of adoption panel minutes and found that the minutes were comprehensive and informative. They clearly indicated the reasons for the conclusions that had been reached by the panel. The minutes also recorded the adoption panel's recommendation to the agency decision - maker.

Interviews with staff, together with an examination of a selection of panel papers, case records and observation of a panel led the inspectors to conclude that the panel carried out its quality assurance tasks in an effective manner and played a significant role in raising standards within the adoption service.

Standard 13 (13.1 – 13.3)

The adoption agency's decision is made without delay after taking into account the recommendation of the adoption panel and promotes and safeguards the welfare of the child.

Key Findings and Evidence	Standard met?	4
<p>File records, discussions with relevant staff and interviews with a several adopters indicated that the agency decision - maker showed diligence in making his decision, which was made in a timely and considered manner.</p>		
<p>Once this agency decision has been made, the agency - decision maker completed a comprehensive chief officer's report, which provided a synopsis of the case, the panel's recommendation and the agency's decision, which was then presented to the Executive side of the Council. The inspectors were of the view that this reporting system was excellent practice, as it served to:</p> <ul style="list-style-type: none"> • Highlight the Council's corporate parenting role and responsibilities • Reinforce the crucial significance of such a decision in a child's life • Formed part of and strengthened one of the monitoring systems in relation to the adoption agency's activities. 		
<p>The Inspectors were also able to confirm that there were satisfactory arrangements in place for conveying the agency's decision to the child, prospective adopters and parents, which operated in an effective manner.</p>		

Fitness to provide or manage an adoption agency

The intended outcomes for the following set of standards are:

- The adoption agency is provided and managed by those with the appropriate skills and experience to do so efficiently and effectively and by those who are suitable to work with children.

Standard 14 (14.1 – 14.3 and 14.5 – 14.6)

The people involved in carrying on and managing the adoption agency:

- possess the necessary knowledge and experience of child care and adoption law and practice and
- have management skills and financial expertise to manage the work efficiently and effectively and
- ensure that it is run on a sound financial basis and in a professional manner.

Key Findings and Evidence

Standard met?

4

The service, resource and acting team manager had a wealth of experience in the childcare and adoption field and held professionally recognised social work qualifications. At the time of the inspection, the resource manager was completing a National Vocational Qualification, level 4 in management. It was anticipated that the resource manager would obtain this qualification in April 2005.

There were clear job descriptions for the service, resource and acting team manager of the adoption agency, which outlined the duties, responsibilities, the level of delegation of the manager in managing the adoption agency and to whom the manager was accountable.

The service and resource manager adopted an open, participative leadership style. Staff reported that they were supportive and encouraged autonomy of practice, though when the occasion demanded were able to be appropriately directive. The inspectors were also informed that these managers encouraged staff to be extremely child focused in their work; the inspectors were of the view that the adoption agency excelled in this.

During the course of the inspection, the inspectors interviewed a large number of managers and staff. In these interviews, the senior and middle managers were spoken of with high regard and described as enthusiastic, knowledgeable, skilled and committed members of staff, who invested and led the service well. From the information obtained, the inspectors were of the view that all the managers were well respected and there was a great deal of confidence in their capacity to effectively manage the adoption service.

The inspectors therefore concluded that the people involved in the management and operation of the adoption agency were suitable, well qualified staff, who had a wealth of experience in childcare, as well as adoption law and practice. Moreover, it was evident all the managers had good management and financial skills, as well as the professionalism to manage the agency's work in an efficient and effective manner.

Does the manager have Management NVQ4 or equivalent?

NO

Does the manager have at least 2 years experience of working in a childcare setting in last 5 years?

YES

Standard 15 (15.1 – 15.4)

Any person carrying on or managing the adoption agency are suitable people to run a voluntary organisation or business concerned with safeguarding and promoting the welfare of children.

Key Findings and Evidence

Standard met?

3

Sefton Metropolitan Borough Council had written recruitment and selection procedures for the appointment of staff. An examination of a sample of management' personnel files confirmed that the adoption agency had obtained a Criminal Records Bureau, enhanced check, in relation to the managers of the adoption service. Two written references had also been obtained.

The inspectors were advised that the Council had recently introduced a procedure for telephone enquiries to be made in order to verify the legitimacy of written references.

The inspectors were also advised that the council had introduced a procedure to ensure that Criminal Records Bureau enhanced checks are renewed on a three yearly basis for all staff working in the adoption agency.

Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

- The adoption agency is organised and managed efficiently, delivering a good quality service and avoiding confusion and conflicts of role.

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

Key Findings and Evidence

Standard met?

3

Interviews with a variety of managers and staff, together with a careful examination of the agency's documentation including the statement of purpose, confirmed that the adoption agency was working to the ethos and principles of its statement of purpose.

The inspectors identified that there were clear arrangements in place to identify the person in charge, when the resource manager or team manager was absent. The roles of the managers and staff were clear. There were also well-established lines of communication and accountability between the managers and staff.

The agency informed managers, staff and panel members of their responsibility to declare any possible conflicts of interests, which was clearly set out in the Council's personnel procedures and The agency's adoption panel procedures.

Sefton Metropolitan Borough Council had an equal opportunities policy and promoted a framework of anti – discriminatory practice, which was reinforced throughout the recruitment, retention and selection of staff and was also included in the procedures for staff recruitment. This policy and practice was reinforced in all aspects of staff's work in the adoption service, including the adopter recruitment information, response to enquiries, the preparation training and assessment, attendance at the Adoption and Permanence Panel and in the information given to children and birth parents. The inspectors were also able to confirm this through the returned questionnaires and their interviews with adopters.

At the time of the inspection, the agency had written procedures the covering the arrangements for the use of services provided by the Adoption register for England and Wales. These procedures were clearly written and comprehensive. The inspectors were advised that the agency referred prospective adopters and children to the National Adoption Register and in some cases to the Mersey Region Adoption Consortium. This was subsequently confirmed through an examination of a sample of adopters' files.

In the view of the above evidence, the inspectors were of the view that the adoption agency was organised and managed in an efficient manner.

Number of complaints received by the adoption service in the last 12 months

0

Number of the above complaints which were substantiated

0

Standard 17 (17.1 – 17.3)

There are clear written procedures for monitoring and controlling the activities of the

adoption agency and ensuring quality performance.

Key Findings and Evidence

Standard met?

3

The adoption agency had a developed a number of quality assurance and monitoring systems in place, which included the following: -

- The effectiveness of the adoption agency's recruitment strategies was routinely monitored and evaluated with comprehensive information kept on all aspects of recruitment. In addition, the recruitment strategy was formally reviewed on a six monthly basis and a report presented to the senior management team.
- The manager of the adoption agency regularly tracked the progress of cases. This information was incorporated into an adoption tracking system, which monitored the outcomes for children and adopters and was considered every month by the group manager and children's team managers.
- The agency's supervision and appraisal systems monitored the adoption workers' performance.
- Senior and middle managers had established a file auditing system to monitor the agency's case records and to ensure they met the required standard
- The independent reviewing unit had a monitoring and quality assurance role in respect of the adoption service through the chairing of children's reviews.
- The Adoption and Permanence Panel received regular progress reports.
- The Panel carried out a quality assurance role in relation to the cases presented to the panel with a view to promoting good practice.
- Arrangements had been made for the panel chairperson to regularly meet and liaise with the agency—decision maker regarding the work of the adoption agency.
- A six monthly Adoption and Permanence Panel report was presented to the Cabinet Member for the Children, Schools and Families' Service.
- An annual adoption report was completed and presented to Committee Members.
- The adoption agency had key performance indicators, which were monitored on a monthly basis by the department's senior management team and used as a tool for judging the agency's achievements. This information was provided to the Cabinet Member for the Children, Schools and Families' Service, on a monthly basis. In addition this information was presented to the Chief Executive of the Council on a regular basis.
- Additional reports were also presented to this Cabinet Member in relation to any new developments within the adoption service, for example, the independent review mechanism.
- There was a review and monitoring group to plan the introduction of the Adoption and Children Act 2002.
- There were effective links from the Children and Young People's Thematic Group, where strategic and executive decisions were made on the development of children's services to the Borough Partnership.
- Chief Officer Reports in relation to the adoption agency's decisions were presented to the Chief Executive of the Council on a regular basis.
- Quarterly monitoring reports were made available to the Scrutiny Group.
- The Cabinet Member and Executive side of the Council reviewed the adoption agency's statement of purpose on an annual basis.

- In addition, there was the adoption agency's three yearly review, which was due to take place in 2005.

There was written information for adopters about adoption allowances, which was clear and

well presented. The inspectors were able to confirm in interviews with adopters that they were aware and understood the criteria for the payment of adoption allowances. However, in two of the five adopters' questionnaires returned to the Commission, the adopters indicated that they had not been given any information about adoption allowances. In view of these comments, the agency might consider whether such information could be more effectively disseminated. A recommendation was made regarding this.

Interviews with senior management and the Cabinet Member for the Children, Schools and Families' Service, as well as an examination of a variety other agency reports confirmed that the adoption agency had robust monitoring and evaluation procedures in place. In addition, the inspectors also concluded that Sefton Council took its responsibility as a corporate parent seriously and closely scrutinised the adoption agency's work, to ensure it was effective and achieved good outcomes for the children.

How frequently does the executive side of the council receive written reports on the work of the adoption service?

Monthly?	
Quarterly?	YES
Less than Quarterly?	

Standard 18 (18.1 – 18.5)

The adoption agency has access to specialist advisers and services appropriate to its needs.

Key Findings and Evidence	Standard met?	3
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The adoption agency had access to a variety of specialist advisors from both within and outside, Sefton Metropolitan Borough Council. Within the council, the agency was able to access specialist advice and receive priority services from Sefton's education service. They had also developed a protocol with the child and adolescent mental health service (CAHMS). (Please see standard six for further details.)

At the time of the inspection, the agency had made a service level agreement with Barnardo's, which enabled specialist advice, training, support and therapeutic services to be provided in relation to a variety of complex issues. (Please see standard six of this report, for further details.)

The agency also had a service level agreement with After Adoption, which provided a pre and post adoption service to birth parents/family members, adopters and adopted children. (Please see standard six of this report, for further details)

These service level agreements clearly governed the specialist services that were provided by the agencies. The inspectors were also made aware that systems had been established to regularly monitor and review the services provided by After Adoption and Barnardo's.

The agency had access to two adoption agencies that specialised in inter-country adoption from whom they could obtain specialist inter-country advice and services. The agency was a member of BAAF, as well as the Mersey Region Adoption Consortium and able to access advice and guidance from them.

The adoption agency had a medical advisor, who was a member of the adoption panel. She was well –qualified, highly experienced in child health and clearly committed to her work, as

medical panel advisor. She had attended the medical panel advisors' training course provided by BAAF, regularly liaised and met with other panel medical advisors in the area. She was available to staff for general consultation regarding health issues in relation to children identified for adoption and where appropriate, adopters. She was also able to access further medical specialist advice on behalf of the adoption agency, if required, for example, in relation to Hepatitis C, HIV etc.

The Adoption Panel also had a representative from the Council's legal department and this advisor was available to panel members and staff for consultation regarding adoption issues.

The adoption service does not provide an inter – country adoption service. Instead those wishing to adopt a child from another country are referred to the appropriate adoption agencies, who specialise in this area of work.

The adoption agency had procedures in place to access other specialisms, according to their needs. The adoption agency also had written protocols governing the role of specialist advisers. The inspectors advised that the agency must obtain documentary evidence of specialist advisers' qualifications and their registration with the appropriate professional body, when using their services. (Please see standard twenty-eight of this report, for further details.)

Employment and management of staff

The intended outcome for the following set of standards is:

- The people who work in the adoption agency are suitable to work with children and young people and they are managed, trained and supported in such a way as to ensure the best possible outcomes for children waiting to be adopted or who have been adopted. The number of staff and their range of qualifications and experience are sufficient to achieve the purposes and functions of the adoption agency.

Standard 19 (19.1 – 19.14)

Anyone working in or for the adoption agency are suitable to work with children and young people and to safeguard and promote their welfare.

Key Findings and Evidence

Standard met?

3

Sefton Metropolitan Borough Council had written recruitment and selection procedures for the appointment of staff, which followed good practice guidelines. The inspectors were advised that the procedures had recently been amended to ensure managers now make telephone enquiries to follow up each written reference to verify their legitimacy. The inspectors were advised that an enhanced Criminal Records Bureau check was undertaken in respect of all staff appointed to the service. The inspectors were advised that the Council's recruitment and selection procedures were strictly adhered to in relation to all staff, including those on a temporary contract.

During the inspection, a sample of personnel files of staff working within the adoption service were selected and examined. From the files seen the inspectors were able to evidence that individuals working in or for the adoption service were interviewed as part of the selection process and had the required written references. All files contained enhanced Criminal Records Bureau checks, though a recommendation was made regarding the recording of such checks. There was also an issue in relation to the portability of one staff members Criminal Records Bureau check. (Please see standard 28 of this report, for details.) The inspectors were advised that a system had recently been put into place to ensure all staffs' Criminal records Bureau check was renewed every three years.

A sample of panel members files were seen and some shortfalls were seen in relation to these files. (Please see standards 11, 18, 26 and 28 of this report.) The inspectors were made aware that the service was addressing these issues.

The inspectors were advised that all new staff, who commenced work in the adoption agency, were provided with an induction programme, which had been tailored to meet their specific needs. Staff were supported to develop their knowledge base and skills through a variety of training opportunities and were supervised by experienced managers. Staff were able to gain knowledge of the roles of other agencies, for example health and education, through the close co-operation and multi-agency working that existed.

At the time of the inspection there were several support workers, who did not have a social work qualification, though were working for the agency, for example in undertaking life-story work, supervising contact etc. The inspectors were advised though that these employees had no case responsibility and were always closely supervised by qualified staff, as were students on placement in the adoption team.

The inspectors were able to confirm that all staff working within the adoption service, who had case responsibility, were suitably qualified and had childcare experience. They also had experience in carrying out assessments, as well as appropriate experience in relation to family placement work and adoption.

From the inspectors' interviews with a number of child care managers and staff, as well as an examination of a variety of documentation, the inspectors were of the opinion that the staff working within the adoption service were well informed and their specialist knowledge and skills were valued by their colleagues in the other teams.

The inspectors were able to evidence that the agency was committed to ensuring staff had the necessary training for their professional development, affording them a variety of training opportunities, including to obtain the post qualifying award. At the time of the inspection, one worker had commenced the post qualification training and the adoption agency already had 20% of its workers with the post qualifying childcare award. The adoption agency had therefore met its target of trained staff, within the specified timescale.

Birth record counselling, under section 51 of the Adoption Act 1976 was only provided by workers who were trained and experienced in this type of counselling and had a thorough understanding of the legislation surrounding access to birth records and the impact of reunification.

The specialist advisors who were on the Adoption and Permanence Panel had received training and had a good understanding of adoption, as did other specialist advisors used by the adoption agency.

Do all of the adoption service's social workers have DipSW or equivalent?	YES	
What % of the adoption service's social workers have a PQ award?	20	%

Standard 20 (20.1 – 20.12)

Staff are organised and managed in a way which delivers an efficient and effective service.

Key Findings and Evidence	Standard met?	2
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The resource manager of the fostering and adoption service managed the adoption agency and was supported in this task by the acting manager. The inspectors were advised that in the future it was planned that the resource and acting team manager would share in the task and responsibility of supervising the staff team. Both the resource and acting team manager were experienced, qualified and skilled managerial staff. From the inspection of the service the inspectors concluded that the service was organised and managed in a way that ensured the service was delivered in an efficient and effective manner.

The level of management delegation and responsibility was clearly defined and commensurate with the experience, skills and qualifications of the relevant members of staff. Staff interviewed had a good understanding of the levels of management delegation, responsibility and decision making within the service.

In interviews with adoption social workers and staff from the children and families teams, the inspectors' were able to confirm that these teams clearly understood the importance of working effectively together, to ensure that the child's best interests were served.

During the course of the inspection, the inspectors were able to confirm that the manager of the agency determined staffs' workloads and assigned tasks to appropriate staff, however, the agency had no formal, management workload system in place to assist in this process. The inspectors were of the view that the agency would benefit from the implementation of such a workload management system and a recommendation was made in the report regarding this.

The Council had a supervision policy and an examination of a sample of staff files confirmed that supervision was usually being provided in accordance with this policy. All supervision meetings were fully recorded with a copy given to the member of staff. Supervision was also provided to staff on a more informal basis as and when the need arose. The service also had an appraisal system, known as the professional development review system. Each member of staff was appraised on an annual basis and six monthly meetings took place in the interim. All professional development reviews were fully recorded. The Inspectors were able to confirm that the supervision and appraisal systems were adhered to and ensured that staffs' performance was effectively monitored and that the adoption service was delivered to a good standard.

Training and appropriate professional and skills development was identified through supervision, which was formally reviewed through the appraisal system. The inspectors were able to confirm that all staff were supported to undertake training, as part of their professional development. (Please see standard 23, for further details)

The adoption service had regular team meetings, where work was allocated and practice issues discussed. Staff informed the inspectors that there was clear, open and effective communication in team meetings and their views were elicited regarding the operation of the service.

The service had clear and well - defined assessments and approval processes, which were monitored and quality assured by the resource and acting team manager. However, examination of a sample of case records indicated that such monitoring was not always consistently evidenced. (Please see standard 25, for further details.) The adoption panel also undertook a quality assurance role in relation to assessments and information was fed back to the agency on the quality of cases presented to panel.

The inspectors were able to evidence that the additional and high standard of clerical/ administrative support provided the adoption agency, had significantly impacted on the overall efficiency of the adoption, for example with the development of the electronic tracking system used to identify and monitor the progress of children with permanence plans.

In undertaking a tour of the agency's premises, the inspectors were able to ascertain that there was adequate office equipment and an infrastructure to enable staff to carry out their duties. However, some issues were raised in relation to the agency's premises. (Please see standard 29, for further details.)

At the time of the inspection, there was also an on-going programme to improve and facilitate the use of IT equipment, as well as data collection programmes. The inspectors were of the opinion that providing this programme was implemented successfully, such developments would support staff in carrying out their duties in an efficient and effective manner, thereby further enhancing the service provided by the adoption agency.

During the course of the inspection, the inspectors were able to evidence that the enquiries

made to the agency were being dealt with promptly and in a polite, courteous and helpful manner. Indeed several prospective and approved adopters commented most favourably on the response they had received from the agency, in comparison with that received from other local adoption agencies.

The agency provided prospective and approved adopters, as well as children and young people, who are subject to an adoption plan, written information and literature exploring the process of adoption and they were clearly advised of the range of multi-agency support services provided (please see standards 1,6 & 18, for further details.)

Examination of a sample of personnel files and interviews with staff confirmed that all employees were provided with appropriate written contracts, job descriptions, and conditions of service, which complied with the General Social Care Council's code of practice.

The Council had an equal opportunities policy, complaints, grievance, disciplinary, as well as various health and safety policies and procedures. These were available to staff on the Council's intranet. Adoption staff confirmed that they had seen these policies and procedures, including the adoption agency's statement of purpose. Indeed with regard to this later document, adoption staff stated that they had been involved in its formulation during their team day. The Inspectors were advised that individual copies of the General Social Care Council's code of practice were circulated to staff.

Standard 21 (21.1 – 21.4)

There is an adequate number of sufficiently experienced and qualified staff to meet the needs of the adoption agency and they are appropriately supported and assisted in providing a service.

Key Findings and Evidence	Standard met?	3
<p>The inspectors were advised that there had been an increase in the number of staff working within the adoption service in order to meet the demands of the service. This included an increase in social work staff, support workers and administrative staff. Thus, excluding the managers, the adoption team consisted of five social work staff, four family support staff and a number of clerical and administrative staff.</p> <p>At the time of the inspection, the inspectors were advised there was one vacant post in the team, however an appointment had been made and the person was shortly to commence employment. The inspectors were advised that to ensure the agency was able to function and the service be effectively delivered, the adoption agency had contingency plans in place to address any shortfall in staffing levels.</p> <p>All the staff with case responsibility were qualified and had considerable experience in this area of work. The agency's personnel policies and procedures provided for regular supervision, training through in-house and short external courses, study leave and post qualification study. At the time of the inspection, the Council was considering a range of initiatives to encourage the recruitment and retention of staff. The inspectors were pleased to learn of these initiatives and would fully endorse their implementation. The inspectors were advised that the Children, Schools and Families' service had applied for accreditation, in the Investors in People Scheme. The inspectors were able to confirm that the Council worked to the requirements set out in the General Social Care Council's code of practice.</p> <p>From the information obtained the inspectors concluded that the staffing complement was in accordance with the agency's statement of purpose. Moreover, there was an adequate number of qualified, experienced staff, who were appropriately supported to meet the needs</p>		

of the agency in an effective manner.

Total number of social work staff of the adoption service	5	Number of staff who have left the adoption service in the past 12 months	X
Number of social work posts vacant In the adoption service.	1		

Standard 22 (22.1 and 22.3)

The adoption agency is a fair and competent employer, with sound employment practices and good support for its staff.

Key Findings and Evidence	Standard met?	3
<p>Sefton Metropolitan Borough Council was considered to be a fair and competent employer by its managers and staff. There were clear, comprehensive and sound employment practices in relation to staff, which included a recruitment and selection policy, an equal opportunities policy, grievance and disciplinary procedures. The Council also had a code of conduct in relation to its staff and panel members. There was also a whistle blowing policy in place and available to all staff. Sefton Council's social services had been awarded the investors in people award in 2002; the inspectors were advised that the Children's, Schools and Families' services within Sefton Council had recently applied to be accredited in the Investors in people scheme.</p> <p>The adoption agency had Public Liability and Professional indemnity insurance for all staff.</p>		

Standard 23 (23.1 – 23.6)

There is a good quality training programme to enhance individual skills and to keep staff up-to-date with professional and legal developments.

Key Findings and Evidence

Standard met?

3

The agency had a divisional and corporate training programme, which was designed to provide appropriate professional and skill development for its staff. The training was provided via a rolling programme of courses, which ensured a full range of training was provided for all staff. This training not only reflected the social care aspects of the work, but also the wider organisation's policies, procedures and guidance.

All staff, including agency staff received induction in accordance with the induction policy and procedure. The inspectors were advised that the supervision system, team meetings and the professional development reviews identified staffs' training and development needs, which were regularly appraised. Managers' training and developmental needs were similarly addressed through this system. The inspectors were able to evidence that National Vocational Qualification training and post qualifying training were available to staff. There was also evidence that individual training programmes were commissioned, with the outcomes monitored and evaluated through the supervision system

The inspectors were able to confirm that the adoption agency keeps abreast of any changes in legislation, guidance and case law relevant to adoption, for example, through staff briefing sessions and team meetings. Changes in Case Law were also circulated to the adoption team via the legal section, within the Council.

The effectiveness of training was routinely evaluated, with the training programmes reviewed and up-dated on an annual basis. The inspectors were able to confirm that the annual training programme reflected the current policies and legal obligations of the adoption agency.

Subsequent interviews with childcare staff indicated that the quality of the in- house training provided them was variable and several indicated that due to pressure of work and time constraints, they found real difficulty accessing the training. Adoption staff though confirmed that they received good training and developmental opportunities and that this training, together with information provided at team meetings enabled staff to keep up-to-date with the professional and legal developments in adoption.

Records

The intended outcome for the following set of standards is:

- All appropriate records are maintained securely, kept and are accessible when required.

Standard 25 (25.1 – 25.5)

The adoption agency ensures comprehensive and accurate case records are maintained for each child, prospective and approved adopter with whom the agency has worked.

Key Findings and Evidence

Standard met?

2

The adoption agency had a recording policy, which provided clear guidelines and expectations regarding the recording and organisation of case files. Thus there was an expectation that clear, concise individual records would be maintained for all children, prospective and approved adopters.

Subsequent examination of a sample of adopters and children's files confirmed that they were generally well structured and organised, although in two of the files seen the prescribed file format had not been completely followed. The inspectors noted that the case records were detailed, up-to-date and generally of a good standard, though in a couple of files the inspectors noticed some inaccuracies in the records, for example the date of birth of an adopter, the spelling of a name. Whilst the inspectors recognised these are simple errors that can easily arise when working under pressure, they have been raised given the serious consequences that can arise from such mistakes. The inspectors also found that the contemporaneous records of the home study records were not on file, though the files did contain brief details regarding these visits, which were expanded upon in the form F. A recommendation was made in the report regarding this.

The inspectors also found some inconsistency of practice in some of the children's files, for example in one file there was no later life letter, though such a letter was present in other files. In another child's file there was no chronology, though detailed chronologies were found on other files. The inspectors also found the quality of the form E's on the children's files variable, as to was the life story work, which had been undertaken. These matters were discussed with the manager of the service at the time of the inspection, who was aware of them and had begun to address them. Two recommendations were made regarding these issues, which are referred to in standards 5 and 8 of this report.

In the sample of adopters' files seen, the inspectors were pleased to see case decisions, which had been made in supervision, were recorded and held on file. However, there was some inconsistency in the practice of recording of such decisions. Similarly, there was an inconsistency in records being signed and dated by both the worker and manager. The Inspectors also found that not all the written records were legible and were of the view that typed case records would improve their legibility. These matters were raised with the manager at the time of the inspection and some recommendations have been made in this report.

Examination of adopters' files confirmed that the service carried out the necessary enquiries, health checks and obtained personal references, as well as enhanced Criminal Record Bureau checks in relation to prospective adopters and on all members of their household, who were aged eighteen years or over.

The adoption service had a policy and procedural instructions to cover arrangements for maintaining the confidentiality of adoption information, adoption case records and their indexes. The inspectors were able to confirm that staff, panel members and specialist advisors understood these instructions and that the service monitored their compliance.

The inspectors were able to evidence that information in respect of adoption is held in a confidential manner and current paper records are kept in lockable filing cabinets, though not all these cabinets were kept within a lockable room. However all archived files kept at the adoption agency's premises were kept in a lockable room and securely stored to minimise the risk of damage to these files from fire or water. The inspector was advised that some archived files were held in another building in Crosby. In visiting these premises, it was found that these archived files were kept in lockable filing cabinets, though they were not held in a lockable room. The records though had been securely stored to minimise the risk of damage to these files from fire or water. Both these premises had appropriate security systems in place to prevent inappropriate access to the building.

The inspector was advised that the agency had established a working party to consider the archiving of historical adoption records and also the various options available to the agency in ensuring all adoption records were backed up. At the time of the inspection, the various options available to the agency were being presented to Senior Managers with a view to these issues being addressed, as soon as possible. The inspectors endorsed the need to urgently address these matters and have made two recommendations regarding this.

Adoption records were kept in accordance with the looked after children's system. At the time of the inspection, there was a working group, which was looking at the implementation of the integrated children's system, the inspectors were informed that a representative from the agency was part of this working group, thereby ensuring the agency's requirements were taken into account in the system's development and implementation.

Standard 26 (26.1 – 26.2)

The adoption agency provides all relevant information from its case files, in a timely way, to other adoption agencies and local authorities with whom it is working to effect the placement of a child.

Key Findings and Evidence**Standard met?**

3

The Inspectors were advised that the adoption service provided information to partner agencies within the consortium and to other adoption agencies in as short a time as possible to effect the placement of a child. During the course of the inspection, the inspectors were able to confirm that the information provided was comprehensive, detailed and provided in a timely way, enabling the child/children's placement to take place in an effective manner and with minimal delay.

The adoption agency had an Access to Records policy, which was compliant with the National Minimum Standards and the Adoption Agency Regulations 1983.

The inspectors were able to confirm that adoption panel members had been asked to sign an undertaking of confidentiality. Copies of this confidentiality agreement were seen on all, but one of the panel members' files. (This matter was raised in standard 11 and 28 of this report)

Standard 27 (27.1 – 27.6)

There is a written policy on case recording which establishes the purpose, format, confidentiality and contents of files, including secure storage and access to case files in line with regulations.

Key Findings and Evidence

Standard met?

3

The adoption agency's written access to records and recording policy, together with their procedures for the storage of agency records covered all the matters referred to in 27.1.

There were separate personnel files on all members of staff, which were maintained by the Human Resources section of the council. The team manager of the service also kept separate supervision records. Separate records were kept of all complaints, allegations and child protection matters. These records were held in a confidential and secure manner. Records were monitored through the supervisory system and the agency had also recently introduced a system where a sample of files were audited by the Service, resource and acting team manager. At the time of the inspection this file auditing system was not fully operational. This was discussed in standard 25 of this report and a recommendation was made regarding this matter.

The Adoption Panel also carried out a quality assurance function; in monitoring the quality of prospective adopters assessments and feeding this information back to the agency.

In examining a sample of records, the Inspectors found that not all the written records were legible and several were not signed and dated, by the person making the entry, nor on occasions, by the Team Manager. A recommendation was made regarding this. (Please see standard 25.)

The inspectors were advised that all complaints were investigated promptly and the findings evaluated. Any learning derived from such investigations, informed service development and was actioned by management. In perusing the complaint files, the inspectors found evidence of good, clear recording.

The adoption agency's confidential records were stored securely and there was a policy on access.

Standard 28 (28.1 – 28.2)

Up-to-date, comprehensive personnel files are maintained for each member of staff and member of the adoption panel.

Key Findings and Evidence

Standard met?

1

The Council's human resource section maintained all the adoption agency's staff records. In the personnel files examined they were comprehensive and up-to-date. However, in several of the files there was no proof of identity, including a recent photograph. In others there was no documentary evidence of their qualifications. In the files of recently appointed staff there was no evidence of any telephone calls having been made to verify the legitimacy of the written references. In another file, an internal appointment had been made, however, the file did not contain two recent written references. One file contained a criminal records bureau check obtained by their previous employer, which had been used for appointment purposes, whilst the council obtained a new check. However, the guidance provided by the Commission for Social Care Inspection concerning the portability of Criminal Records Bureau checks had not been followed.

The adoption agency had files on all panel members. However, in several files there was no proof of identity and in others whilst having such documentation, there was no recent photograph of the panel member. In some files there was no written references, no record of employment, documentary evidence of qualifications or in some cases the individual's registration with the appropriate professional body. In one file there was no confidentiality agreement and in another there was no criminal records bureau check, though the inspectors were aware that these matters were in the process of being addressed. (Please see standard 11.) One file also contained a criminal records bureau check, which had been obtained for other employment and again the guidance provided by the Commission for Social Care Inspection concerning the portability of Criminal Records Bureau checks had not been followed. The system used to record the criminal records bureau check also required to be developed, so that it included the status, the disclosure number and the date the check was carried out.

The agency must ensure that all files relating to staff employed by the agency and all panel members contain the information required under Schedule 3 and 4 of the Adoption Services Regulations 2003, if the agency is to meet this standard. **Two requirements and one recommendation were made in the report regarding these matters.**

Fitness of Premises

The intended outcome for the following standard is:

- The premises used by the adoption agency are suitable for the purpose.

Standard 29 (29.1 – 29.5)

Premises used by the adoption agency are appropriate for the purpose.

Key Findings and Evidence

Standard met?

2

The adoption agency was located in a large, detached building in Crosby, Merseyside. These premises had disabled access to the lower ground floor. The building was able to accommodate all of the adoption team, though the recent increase in staff had resulted in the area used by the team becoming a little overcrowded. The premises had a pleasant reception area, kitchen facilities for staff and a conference room, which was used by the adoption and permanence panel. The premises did not have a specific interview room, the inspectors were advised that the conference room was sometimes used for this purpose; however, its size meant that it did not provide a conducive setting for interviewing a small number of people. The rather overcrowded area used by the adoption team and the lack of an interview room was raised with the manager of the service during the inspection. A recommendation was made in the report regarding these matters.

The inspectors were advised that the IT equipment had recently been increased in the adoption service. There was also a new computer programme being rolled out to ensure that all staff had access to a personal computer on an individual basis. The inspectors' were advised of the security in place to safeguard all information contained in the IT system. The service had a variety of other necessary equipment to support staff in the effective delivery of an adoption service, for example a fax, photocopying machine, a scanner etc.

The premises had lockable filing cabinets to secure confidential information, however not all these cabinets were kept within a lockable room. This was raised with the manager of the service at the time of the inspection and is to be addressed. A recommendation was made regarding this. The inspector was able to confirm that all archived files kept in this building were kept in a lockable room and securely stored to minimise the risk of damage to these files from fire or water. In addition, the premises had appropriate security systems in place to prevent inappropriate access to the building.

Sefton Metropolitan Borough Council had adequate Premises and Contents Insurance to promptly replace any lost or damage caused to contents of the building or premises.

The adoption agency had a disaster recovery plan, which had been devised as part of their risk assessment programme. At the time of the inspection, this plan was being reviewed to ensure the agency had a more robust system to safeguard and back up the agency's records.

PART C

LAY ASSESSOR'S SUMMARY

(where applicable)

Not Applicable

Lay Assessor _____ **Signature** _____

Date _____

D.1 Local authority manager's comments/confirmation relating to the content and accuracy of the report for the above inspection.

We would welcome comments on the content of this report relating to the Inspection conducted on 10th January 2005:

Please limit your comments to one side of A4 if possible

We are working on the best way to include provider responses in the published report. In the meantime responses received are available on request.

Action taken by the CSCI in response to the provider's comments:

Amendments to the report were necessary

YES

Comments were received from the provider

YES

Provider comments/factual amendments were incorporated into the final inspection report

YES

Provider comments are available on file at the Area Office but have not been incorporated into the final inspection report. The inspector believes the report to be factually accurate

Note:

In instances where there is a major difference of view between the Inspector and the local authority adoption manager, both views will be made available on request to the Area Office.

D.2 Please provide the Commission with a written Action Plan by 12th May 2005, which indicates how statutory requirements and recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.

Status of the Provider's Action Plan at time of publication of the final inspection report:

Action plan was required

YES

Action plan was received at the point of publication

YES

Action plan covers all the statutory requirements in a timely fashion

YES

Action plan did not cover all the statutory requirements and required further discussion

Provider has declined to provide an action plan

Other: <enter details here>

Public reports

It should be noted that all CSCI inspection reports are public documents.

D.3 PROVIDER’S AGREEMENT

Local authority manager’s statement of agreement/comments: Please complete the relevant section that applies.

D.3.1 I _____ of Sefton MBC Adoption Service confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the statutory requirements made and will seek to comply with these.

Print Name _____
Signature _____
Designation _____
Date _____

Or

D.3.2 I _____ of _____ am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:

Print Name _____
Signature _____
Designation _____
Date _____

Note: In instance where there is a profound difference of view between the Inspector and the Registered Provider both views will be reported. Please attach any extra pages, as applicable.

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