



*Making Social Care
Better for People*

inspection report

ADOPTION SERVICE

The Adolescent and Childrens Trust

**The Courtyard
303 Hither Green Lane
Hither Green
London
SE13 6TJ**

Lead Inspector
Pat McKay

Announced Inspection
23rd February 2006 10:00

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Adoption*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

Every Child Matters, outlined the government's vision for children's services and formed the basis of the Children Act 2004. It provides a framework for inspection so that children's services should be judged on their contribution to the outcomes considered essential to wellbeing in childhood and later life. Those outcomes are:

- Being healthy
- Staying safe
- Enjoying and achieving
- Making a contribution; and
- Achieving economic wellbeing.

In response, the Commission for Social Care Inspection has re-ordered the national minimum standards for children's services under the five outcomes, for reporting purposes. A further section has been created under 'Management' to cover those issues that will potentially impact on all the outcomes above.

Copies of *Every Child Matters* and *The Children Act 2004* are available from The Stationery Office as above.

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SERVICE INFORMATION

Name of service The Adolescent and Childrens Trust

Address The Courtyard
303 Hither Green Lane
Hither Green
London
SE13 6TJ

Telephone number 020 8695 8111

Fax number

Email address

Provider Web address www.tactfostercare.org.uk

Name of registered provider(s)/company (if applicable) The Adolescent And Children's Trust

Name of registered manager (if applicable) Elizabeth Webb

Type of registration Voluntary Adoption Agency

Category(ies) of registration, with number of places

SERVICE INFORMATION

Conditions of registration:

1. The category of the registration is: Domestic Adoption Services only (DCA)
2. The agency must operate from the following branch: TACT CYMRU, Glyn Y Coed, 20 Victoria Gardens, Neath, SA11 3BH

Date of last inspection

This is the first inspection under The Voluntary Adoption Agencies and the Adoption Agencies (Miscellaneous Amendments) regulations 2003

Brief Description of the Service:

The Adolescent and Children's Trust is a charitable Independent Fostering Agency and a Voluntary Adoption Agency. The agency is known as TACT and is also a company limited by guarantee.

The agency was established in 1993, to provide fostering services. In October 2004 the agency was also registered as a Voluntary Adoption Agency.

The adoption service is located in the London office at Hither Green. The service aims to recruit, prepare, assess and support prospective and approved adopters and prepare children for adoption.

The adoption service is part of a wider permanence service offered by the agency. The service aims to meet the permanence needs of those children who are already in TACT short term fostering placements as well as those who may be referred for services in the future.

SUMMARY

This is an overview of what the inspector found during the inspection.

This was the first inspection of the adoption service provided by TACT. The manager had prepared well for the inspection.

The inspection was carried out over one day, by one inspector. The manager and the responsible individual were interviewed, as were the panel chair and the administrative workers. One service user was interviewed and a completed questionnaire was received from a professional adviser.

What the service does well:

The adoption work that has been carried out within the agency is thorough and clearly puts the child at the centre of the process.

The agency has thorough recruitment processes for all staff and panel members.

The managers are competent, experienced professionals with child care knowledge and expertise.

The agency policies and procedures are clear and up to date.

Information for applicants is clear and well presented.

What has improved since the last inspection?

This is the first inspection of the service.

What they could do better:

The agency needs to review child protection procedures to ensure they include children placed for adoption.

Awareness raising of adoption and permanence issues needs to continue to ensure staff in all parts of the service are aware of the implications

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office.

DETAILS OF INSPECTOR FINDINGS

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Making a Positive Contribution

Achieving Economic Wellbeing - There are no NMS that map to this outcome

Management

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Statutory Requirements identified during the inspection

Staying Safe

The intended outcomes for these standards are:

- The agency matches children with adopters (NMS 2)
- The agency assesses and prepares adopters (NMS 4)
- Adopters are given information about matching (NMS 5)
- The functions of the adoption panel are as specified (NMS 10)
- The constitution and membership of adoption panels are as specified (NMS 11)
- Adoption panels are timely (NMS 12)
- Adoption agency decision is made without delay and appropriately (NMS 13)
- The manager is suitable to carry on or manage an adoption agency (NMS 15)
- Staff are suitable to work with children (NMS 19)
- The agency has a robust complaints procedure (NMS 24 Voluntary Adoption Agency only)

JUDGEMENT – we looked at outcomes for the following standard(s):

2,4,5,10,11,12,13,15,19,24

This is a safe service that employs high standards in recruiting staff and panel members.

EVIDENCE:

The agency had gradually begun to develop the adoption service. At the time of the inspection there were no completed adoption assessments. There was one piece of assessment work that had been undertaken at the request of the court. This work was, within the remit of the statement of purpose, with existing foster carers and a child in placement. The assessment explored permanence options for the child. The outcome was to pursue an adoption plan with the existing carers. Work was underway to complete the work and in due course present the prospective adopters to the adoption panel.

The prospective adopters were “full of praise”, for the agency. They said the work had been done in a thorough way and that they had been kept informed and supported throughout the process. They also complimented the agency on the work they had done in communicating with the local authority with responsibility for the child.

This work was looked at during the inspection. The work that had been done was thorough and detailed. It was clear that the needs of the child were at the centre of the process.

There were up to date policies and procedures in place. They had been rewritten since registration to reflect the recent changes in legislation. The policies and procedures were clear, however because of the limited amount of adoption activity they were largely untested at the time of the inspection.

There was a written plan for the recruitment of prospective adopters. There was a system in place to track the source of enquiries and regularly review the recruitment activity within the agency.

Information meetings had been held and the agency was about to present the first group preparation course for prospective adopters. Information meetings had been held on weekday daytime, weekday evening and Saturday morning to ensure prospective adopters were given every opportunity to attend at a convenient time.

A programme for the first group preparation course was in place. There were plans to involve a birth parent, experienced adopter and an adopted adult in the delivery of the programme.

TACT was a member of the South London Adoption Consortium. There was the capacity to send prospective adopters on preparation courses in partnership agencies, to avoid delays for applicants. There was a system to monitor timescales and use this facility if necessary.

An evaluation system had been devised but was not yet tested.

The information that was sent to enquirers was clear and well presented. The information was inclusive and anti-discriminatory in content and style.

The adoption and permanence panel had met three times since registration. The panel had undertaken training, considered the statement of purpose for the adoption agency, the policies and procedures and considered some permanent fostering cases. The panel had not yet been asked to consider recommending approval of a prospective adopter. This was likely to happen within the next three months. There was a leaflet containing profiles of panel members for applicants attending panel.

The panel constitution and membership met the regulatory requirements. There was one panel member vacancy. The adoption manager was in the process of recruiting to fill that vacancy. The panel chair was an independent childcare professional with experience of chairing adoption panels in other settings.

The operation of the panel in line with the agency policies and procedures had not been tested for adoption but had been demonstrated through the permanence work undertaken. There were clear panel minutes in place. The minute taker had attended training.

The agency decision maker was the Chief Executive. He had not yet been called upon to make an agency decision. He was preparing for that role. The policies and procedures were in place, as well as a format for recording the agency decision.

The adoption and permanence manager was a qualified and experienced childcare professional and manager. The agency had a thorough recruitment process and a system in place to renew enhanced criminal records bureau disclosures every three years. The manager had been appointed before the agency was registered for adoption work. She had been responsible for developing the systems and the policies and procedures in relation to adoption and permanence work.

The adoption and permanence manager and one part time administrator were the only permanent employees fully engaged in adoption work. There was a pool of four sessional staff that was available as and when required. The recruitment process was no less thorough for the sessional employees, including telephone enquiries made to referees to verify the written reference. All relevant checks were in place. The sessional workers had a range of expertise and experience in adoption work.

The agency had employed a part time social worker, in the adoption service. The worker left and has not been replaced. There were no plans to recruit to this post at the time of the inspection. The plan was to use sessional staff as required and keep the situation under review.

The adoption manager had attended training in TACT recruitment policy and managing absence and discipline.

There was a complaints procedure in place. The complaints leaflet was included in the information pack sent to prospective adopters. A prospective adopter confirmed that they would know what to do in the event of wanting to make a complaint. The procedure was untested for adoption, at the time of the inspection.

Staff within the agency had received complaints training in 2005. This will need to be repeated at regular intervals to inform new staff members. It was the view of the inspector that the sessional staff should have access to complaints training in some form, to ensure they are familiar with the procedures in this agency.

There was a system in place to monitor complaints activity. This was the responsibility of the head of social work for all aspects of work in the agency.

Enjoying and Achieving

The intended outcomes for these standards are:

- The adoption agency provides support for adoptive parents (NMS 6)
- The agency has access to specialist advisers as appropriate (NMS 18)

JUDGEMENT – we looked at outcomes for the following standard(s):

6,18

This area is largely untested, however, existing services could deliver good support to adopters, if they have the additional adoption knowledge and awareness.

EVIDENCE:

The policies and procedures for supporting adoptive placements were in place but not yet tested by adopters.

The agency had a number of services already in place that were used by short term and permanent foster carers. These services included a training programme, outreach support, respite, and an emergency response service.

As a member of the South London Consortium the agency had access to the “piece of cake” training for adopters. The consortium also runs support groups for adopters.

It was the view of the inspector that the existing services would be likely to meet the needs of adopters, however it was not possible to gather evidence of this. The agency needed to consider the additional dimensions that adoption and adopters would need and begin the process of training the staff and carers involved in delivering these support services.

The adoption preparation course programme was planned to address issues of dealing with racism and the development of a positive self-identity for the child. This needed to be delivered and evaluated to ensure it was effective. An evaluation system was in place.

The agency had access to a number of specialist advisors. These were, a medical advisor, legal advisor, education advisor and psychological consultants.

There was a recruitment checklist in place and references within the adoption agency policies and procedures. However, there was no written protocol governing the role of specialist advisors and this needed to be developed.

Making a Positive Contribution

The intended outcomes for these standards are:

- Birth parents and birth families are involved in adoption plans (NMS 7)
- Birth parents and birth families are involved in maintaining the child's heritage (NMS 8)
- The Adoption agency supports birth parents and families (NMS 9)

JUDGEMENT – we looked at outcomes for the following standard(s):

7,8,9

This area was largely untested, however the agency had demonstrated a commitment to birth parents and birth families that could be developed in adoption work.

EVIDENCE:

The agency had policies and procedures in place with regard to services to birth parent and birth families in adoption placements. These were untested at the time of the inspection.

The agency recognised that the local authority was the central agency in the delivery and commissioning of services for birth parents and birth families.

TACT was committed to delivering services in partnership with the local authorities. TACT was providing a number of services at the time of the inspection for birth parents and birth families. These were within the framework of children placed in short term and permanent fostering placements.

TACT had the facilities to host contact sessions between children and birth families, if the local authority commissioned this service. This could be extended to adoption placements, if required as part of an adoption support plan.

The agency was securing the services of a birth parent for the preparation course for adopters. The membership of the adoption panel included a birth parent.

Management

The intended outcomes for these standards are:

- There is a clear written statement of the aims and objectives of the adoption agency and the adoption agency ensures that it meets those aims and objectives (NMS 1)
- The agency provides clear written information for prospective adopters (NMS 3)
- The manager has skills to carry on or manage the adoption agency (NMS 14)
- The adoption agency is managed effectively and efficiently (NMS 16)
- The agency is monitored and controlled as specified (NMS 17)
- The staff are organised and managed effectively (NMS 20)
- The agency has sufficient staff with the right skills / experience (NMS 21)
- The agency is a fair and competent employer (NMS 22)
- The agency provides training for staff (NMS 23)
- Case records for children and prospective / approved adopters are comprehensive and accurate (NMS 25)
- The agency provides access to records as appropriate (NMS 26)
- The agency's administrative records processes are appropriate (NMS 27)
- The agency maintains personnel files for members of staff and members of adoption panels (NMS 28)
- The premises used by the adoption agency are suitable for purpose (NMS 29)
- The adoption agency is financially viable (NMS 30, Voluntary Adoption Agency only)
- The adoption agency has robust financial processes (NMS 31)

JUDGEMENT – we looked at outcomes for the following standard(s):

1,3,14,16,17,20,21,22,23,25,26,27,28,29,30,31

This service is well managed. However the system for recording decisions by supervisors on files, and the adoption detail in the child protection procedures needs some amendments.

EVIDENCE:

There was a statement of purpose in place. This included all of the required elements and had been approved by the Board of Trustees.

There was an information sheet for enquirers that gave clear information about the process of preparation, assessment and approval and the kind of children that the agency was recruiting families for. The agency provided a domestic adoption service and those interested in adopting from another country were given information about other agencies that offer that service.

At the time of the inspection referrals to the service were responded to promptly and efficiently. Information packs were sent out on the same day. A monitoring system was in place to record and track enquiries. This was about to result in the first preparation group for prospective adopters.

The manager as previously stated was an experienced and competent childcare professional. She had the relevant management and professional qualifications. Clear job descriptions were in place.

There were procedures for monitoring and controlling the agency activity, these included supervision, gathering statistics, complaints monitoring and reporting schedules. The adoption manager produced twice yearly reports of adoption activity for the Board of Trustees.

In some respects the agency had not met the targets set in the business plan. The target number of children to be placed for adoption/adopted had been met. Ten children had been adopted or placed for adoption since registration. These children had not been placed for adoption or adopted by adopters approved by TACT. The result of this was that TACT had lost the income from their fostering placements without gaining income from the assessment of the adopters. The agency was very clear that this was a child centred success and that income came second to achieving the right plans for children. Recruitment of adopters had been slow to develop and had just begun to achieve results. The agency managers were fully aware of this and were making adjustments, such as reviewing the permanent social work post and employing a more flexible pool of competent sessional workers. The agency evidenced sound management skills and expertise. The agency remained committed to continuing to provide a broad spectrum of placements for children and promoting permanence irrespective of financial gain.

The adoption service had dedicated half time administrative support. The administrator was a fairly recent appointment and was working closely with the adoption manager. The administrator demonstrated competence, enthusiasm and interest in the work.

The agency was a fair and competent employer that demonstrated sound employment practices and good support for staff.

There was a staff appraisal system in place and this was in use. The adoption manager had attended Adoption and Children Act training provided by DFES along with the panel chair. There was good access to training opportunities.

A number of records were examined as part of this inspection process. This included personnel records, panel member's records, and a prospective adopters file. There was evidence of recording of decisions by supervisors, however this was woven into the fabric of case recording and as such was not signed and dated by the supervisor. It was the view of the inspector that this should be recorded on the agency format and separately filed.

There was a policy with regard to providing relevant information from case files to other adoption agencies, this was untested in adoption work but was established practice for fostering records.

Adoption records were stored securely in a locked filing cabinet in a locked room. All adoption records were kept in this secure environment including files in the early stages of the adoption process and files for panel members.

The premises used by the agency were appropriate for the purpose and maintained to a reasonable standard with secure access and a burglar alarm. The adoption manager had her own office and there was a large room for panel. There was a separate waiting area for applicants attending panel. This was about to be refurbished at the time of the inspection.

The I.T. system was backed up by a specialist support service. All I.T. systems were password protected.

The appropriate insurance arrangements were in place as was a disaster recovery plan.

The agency had robust financial management systems. The Business Manager, Chief Executive and Head of Social Work received regular reports from the Finance Director. The agency accounts were maintained and reviewed by external auditors.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Adoption have been met and uses the following scale.

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

"X" in the standard met box denotes standard not assessed on this occasion

"N/A" in the standard met box denotes standard not applicable

BEING HEALTHY	
<i>Standard No</i>	<i>Score</i>
No NMS are mapped to this outcome	

MAKING A POSITIVE CONTRIBUTION	
<i>Standard No</i>	<i>Score</i>
7	3
8	3
9	3

STAYING SAFE	
<i>Standard No</i>	<i>Score</i>
2	3
4	3
5	3
10	3
11	3
12	3
13	3
15	3
19	3
24	3

ACHIEVING ECONOMIC WELLBEING	
<i>Standard No</i>	<i>Score</i>
No NMS are mapped to this outcome	

ENJOYING AND ACHIEVING	
<i>Standard No</i>	<i>Score</i>
6	2
18	2

MANAGEMENT	
<i>Standard No</i>	<i>Score</i>
1	3
3	3
14	3
16	3
17	2
20	3
21	3
22	3
23	3
25	2
26	3
27	3
28	4
29	3
30	3
31	3

N/A

Are there any outstanding requirements from the last inspection?

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Voluntary Adoption and the Adoption Agencies Regulations 2003 or Local Authority Adoption Service Regulations 2003 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action
1	AD17	VAA 10(1)(a)	The agency must prepare a written policy and procedure intended to safeguard from abuse or neglect children placed for adoption.	31/03/06

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1	AD6	The agency should review support services to ensure all those involved are familiar with the additional dimensions of an adoption placement.
2	AD18	The agency should develop a written protocol governing the role of specialist advisors.
3	AD25	The agency should ensure that decisions by supervisors are recorded on case files and are signed and dated.
4	AD24	The agency should ensure that sessional staff are familiar with the agency complaints policies and procedures.

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