

# inspection report

Voluntary Adoption Agency

**Adoption NCH - Midlands**

141 Wood End Lane

Erdington

Birmingham

B24 8BD

29th June - 2nd July 2004

## **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.

## VOLUNTARY ADOPTION AGENCY INFORMATION

**Name of Voluntary Adoption Agency**

Adoption NCH - Midlands

**Address**

141 Wood End Lane, Erdington, Birmingham, B24 8BD

**Tel No**

0121 377 7999

**Fax No****Email Address****Certificate Number of Voluntary Adoption Agency**

F570002105

**Name of Registered Provider:**

NCH

**Name of Manager:**

Sally Heaven-Richards

**Is this service the principal office or a branch?****Is this a small principal office or branch?**

Seven or less full-time equivalent social work staff, excluding manager.

Principal Office

NO

Branch

Yes

Yes

**Date of registration:****Date of most recent certificate:**

31<sup>st</sup> March 2004

**Registration Conditions Apply?**

YES

**Date of last inspection:**

March  
2001

<b>Date of Inspection Visit</b>		29th June 2004	<b>ID Code</b>
<b>Time of Inspection Visit</b>		10:00 am	
<b>Name of Inspector</b>	<b>1</b>	Rosemary Chapman	075198
<b>Name of Inspector</b>	<b>2</b>	Sally Woodget	
<b>Name of Inspector</b>	<b>3</b>		
<b>Name of Inspector</b>	<b>4</b>		
<b>Name of Lay Assessor (if applicable)</b> 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.			
<b>Name of Specialist e.g. Interpreter/Signer (if applicable)</b>			
<b>Name of Establishment Representative at the time of the inspection</b>		Sally Heaven-Richards	

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## INTRODUCTION TO REPORT AND INSPECTION

Voluntary Adoption Agencies which fall within the jurisdiction of the Commission for Social Care Inspection (CSCI) are subject to inspection, to establish if the service is meeting the National Minimum Standards for Voluntary Adoption Agencies and the requirements of the Care Standards Act 2000, the Adoption Act 1976 as amended, the Adoption Agencies Regulations 1983 as amended, and the Voluntary Adoption Agencies and Adoption Agencies (Miscellaneous Amendments) Regulations 2003.

This document summarises the inspection findings of the CSCI in respect of Adoption NCH - Midlands. The inspection findings relate to the National Minimum Standards for Voluntary Adoption Agencies published by the Secretary of State under section 23 of the Care Standards Act 2000.

The Adoption Agencies Regulations 1983 and the Voluntary Adoption Agencies and Adoption Agencies (Miscellaneous Amendments) 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 in relation to Voluntary Adoption Agencies regarding registration, the imposition and variation of registration conditions and any enforcement action.

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
- Required actions on the part of the provider
- Recommended good practice
- Summary of the findings
- Report of the Lay Assessor (where relevant)
- Provider's 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.

### **National Description**

The Children's Home was founded in 1869 by the Reverend Thomas Stephenson Francis Horner and Alfred Mager, both committed Methodists who wished to provide a safe refuge, education, training and a home for orphans and destitute children whom they encountered on the streets of London. It was initially a London based charity, becoming known as the National Children's Homes in 1907. It is now a large nationally recognised charity providing a wide range of childcare services across the UK.

Established to provide residential care services for children, it has diversified its operations and currently provides a range of projects nationally, of which 6 offer adoption services. These are based in Bristol, Birmingham, Horsham, London Black Families, Leeds and Middlesbrough.

Each of the 6 adoption projects aim is to provide a range of adoption services in which the focus is to recruit, assess, prepare, train and support adoptive families. The Commission for Social Care Inspection has undertaken an inspection of each of the branches operating in England.

The Governance of the NCH is by a number of committees including the Senior Management Group which is made up of all regional directors; they raise policy issues for the council and its subsidiary committees to consider. It meets six times a year.

The Adoption Sub Committee provides the accountable link between the agency and the NCH trustees, reporting business to the Children's Services Committee on a quarterly basis.

The NCH are administered under a scheme by the Charities Commission.

The Registered Person is Nigel Harper, the North East Regional Director. He reports to the Adoption Sub Committee.

The current Registered Manager is Linda Plummer, whose designated role within the organisation is as a professional advisor on Family Placements. She has previously managed an adoption service for the NCH but in her present capacity as a professional advisor, does not line manage the managers of the individual branches.

The branches are currently line managed within their particular region and each branch manager is part of their regional management team. The Adoption Service Development Group brings together the branch managers, their line managers, the agency manager and the registered person.

The branch managers also meet quarterly as The Adoption Service Development Group to discuss practice issues.



In recognition of the need to strength the identity of the adoption services on a national basis the NCH are currently reorganising their adoption services. There have been a series of draft reports and consultations on the agency's proposals which have now been presented to the Children's Management Group and the agency are to appoint an Adoption Manager. This will be a specialist role to give direction and leadership to the developments in the field of adoption and have oversight of all the NCH adoption services. The person will also have line management responsibility for each of the branch managers.

The charitable aim of the NCH is to "improve the quality of life of the most vulnerable children and young people."

The NCH adoption agency aim to provide adoptive families for the most difficult to place children, older children and those as part of a sibling group and children with disabilities. How this policy is being delivered across the 6 adoption services projects will be judged by the branches individual inspections.

The charity works to a set of principles outlined in its Statement of Purpose.

### **Branch Description**

Adoption NCH is a voluntary adoption agency. NCH (Midlands) is one of 4 branches and is located in Birmingham. Its main function is to recruit, prepare, assess, approve and support adoptive parents living within a 50-mile radius of the office. These families provide adoptive homes for children looked after by a number of local authorities across the whole country who have adoption as their best interests plan.

The branch also provides birth records counselling and birth records initiated contact counselling, including advice, assistance, tracing and reunion for those people affected by adoption who have received a service from NCH. Although not related to adoption, the branch also provides an access to records service to former residents of NCH homes.

The branch has a post adoption support worker who is currently developing post adoption support. A letterbox scheme is also managed by the branch.

The branch will also undertake contract work on behalf of local authorities, which may include assessments, support, preparation of children, life story work, identity work, counselling and mediation work with birth parents, facilitation of contact and consultation.

## 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.)

#### **National Description**

Two inspectors from the CSCI National Adoption Team undertook the Inspection of the NCH Adoption Agency headquarters. The inspection and interviews with senior staff from the agency took place on the 7<sup>th</sup> May and the 14<sup>th</sup> July 2004.

Two inspectors from the CSCI National Adoption Team have inspected each of the NCH branches, which provide an adoption service.

There will be separate inspection reports for each of the branches but each branch report will incorporate the national perspective.

The national perspective will be taken into consideration when a formal judgement is made on how each of the branches involved in adoption activity meet the National Minimum Standards.

Overall this was a satisfactory inspection of the NCH headquarters

As a national agency, the NCH remains committed to the provision of a comprehensive range of adoption services.

The development of the post of Adoption Manager will offer a clear focus for the adoption service.

There is a range of policies and procedures for the work of the adoption agency and a degree of flexibility allows them to reflect local needs and realities.

The NCH must ensure its statement of purpose and is formally approved and distributed to all the agency's projects.

The NCH must be clear about its eligibility criteria. The branch staff must be clear about the agency's policies and procedures in particular the agencies response to gay and lesbian applications.

The manager of the adoption service must undertake a formal management qualification.

The registered person must have a current Criminal Record Bureau (CRB) check.

## **Branch Findings**

This inspection took place over 4 days in June/July 2004, with 2 inspectors. It found that the branch had implemented the recommendations of the previous inspection. Questionnaires were received from 9 adopters, 6 placing social workers, 10 placing councils, 5 birth family members and 2 specialist advisers. Comments from adopters were mainly very positive and included: "I can't speak more highly of NCH". One questionnaire indicated that NCH could have done more, however, and the adopters felt they had done most of the work in obtaining a placement and sorting out problems. All the comments from placing social workers and agencies were positive. One Council commented "the agency and its workers provide an excellent service", another said they were "very impressed". They felt adopters had been well prepared and support from link workers was very good. One social worker was described as "a rock" and "an inspiration", administrative staff were said to be "helpful and friendly", form F's thorough and accurate and overall satisfaction with the service was expressed. The branch is providing a good service and the requirements and recommendations made will enhance and formalise the practice which is taking place.

### **Statement of Purpose (Standard 1)**

**This standard was not met.**

The Agency has a written statement of purpose, which has been developed centrally and has recently been before the Adoption Sub Committee, although not approved. Although it covers the requirements of schedule 2, it does not give detailed information about the services and facilities of the branch and some information in relation to the staff of the branch was in need of updating. To make this a useful document for those people to whom it should be made available, it needs to be more comprehensive and detailed about individual branches, rather than a somewhat basic and general document.

### **Securing and Promoting Children's Welfare (Standard 2)**

**This standard was met.**

The branch is aware of the types of children for whom the Local Authority will require a placement from a voluntary organisation and makes every effort to recruit suitable adopters and place referred children with families who meet their assessed needs. Five sibling groups were placed last year and all children were placed with families of the same ethnic origin. There is a specific project, which is aimed at encouraging people from the black community to come forward as prospective adopters.

### **Prospective and Approved Adopters (Standards 3-6)**

**2 of the 4 standards were met.**

There is written information for prospective adopters, which includes the eligibility criteria and details of the process but this needs to be extended to include information about the preliminary panel and the appeals process. Prospective adopters are made aware of the types of children needing families by a variety of methods but the written information from NCH could be improved to give a more accurate reflection of this, although the verbal information is good and accurate. The assessment process is thorough, all the necessary checks are undertaken and the preparation groups are said to be informative and helpful. Appropriate matching takes place but some improvements in the recording of evidence is recommended to confirm the good practice, which is carried out. Adopters receive good support from the social workers and they are readily available to provide advice and assistance at all times. The support and availability of one particular social worker was commented on by one set of the adopters interviewed.

### **Birth parents and birth families (Standards 7-9)**

**2 standards were not applicable to the branch and 1 was met.**

NCH (Midlands) has very little to do with birth parents, as this role is undertaken by the Local Authorities with whom they work to provide suitable adoptive families. They will ensure adopters are aware of the importance of keeping and sharing information about birth families

with the child and in some cases, they arrange and maintain letterbox and other contact arrangements, but again this is usually the role of the Local Authority.

**Adoption panels and Agency decisions (Standards 10-13)**

**2 of the 4 standards were met.**

The panel is properly constituted but it does not have all the appropriate written policies and procedures in place. Adopters can attend the panel and have done so for some time. Panel members have an induction, observe at least one panel and undertake training and they are kept informed and up to date through the panel adviser. Further work is needed to make the panel members' files compliant with the regulations however, and this is discussed further under Standard 28. The panel meets regularly and the minutes are good and reflect the decision-making process and reasons for the recommendations. The decision maker receives all the relevant information, including the minutes and makes his decision within 5 days working days of the panel, at a decision-making meeting. This is then conveyed in writing to the applicants.

**Fitness to provide or manage a Voluntary Adoption Agency (Standards 14-15)**

**The 2 standards were not met.**

The branch manager is suitably qualified and experienced in childcare and family placement work and is about to undertake a management qualification. Appropriate checks have been carried out in relation to her and evidence of this was available. There was evidence that the branch manager had good leadership skills and is prepared to tackle issues raised. The standards were not met in relation to Headquarters – see above.

**Provision and Management of the Voluntary Adoption Agency (Standards 16-18)**

**2 of the 3 standards were met.**

There are clear roles for staff and managers and arrangements are in place to cover when the manager is absent. The branch has monitoring procedures and the management committee of the Agency receives regular reports. The branch has access to specialist medical and legal advice but there is a need to provide for other specialist advice for staff and adopters.

**Employment and management of staff (Standards 19-24)**

**4 of the 6 standards were met.**

The staff employed by the branch are qualified and experienced and the Agency has appropriate recruitment and selection procedures, which include all the relevant checks. Staff receive appropriate training for the tasks they undertake. Updated and relevant child protection training has been recommended however, as this training was undertaken some years ago by many of the staff. Staff are supervised regularly and their workload is monitored by the manager, although more formalised systems are recommended for this. The level of administrative support has been highlighted as an area which needs some addition and further funding has been made available for this. The branch has sufficient social work staff to carry out their role and NCH is seen as a fair employer, with reasonable policies and procedures. Staff are kept informed of any changes and lines of communication are good. The complaints procedure does not make reference to the Commission, however, and this must be added.

**Records (Standards 25-28)**

**1 standard was met and 3 were not met.**

Record keeping is generally good and information is stored securely. Verification is needed however, that the cabinets are fire and waterproof. Case records are typed and legible and contain factual information but they should be signed and dated by the author.

Appropriate checks are in place for staff but proof of identity, qualifications and photographs are required on some of the staff files where these are missing and the records of panel members need more information to comply with Schedule 2.

**Fitness of premises (Standard 29)**

**This standard was not met.**

The branch has its own premises, which are suitable and accessible. The administrative procedures are good and records are stored securely. The premises have suitable security and insurance cover is in place. There is no written disaster recovery plan, however, and this should be developed.

**Financial requirements (Standards 30-31)**

**These 2 standards were met.**

Appropriate financial procedures are in place and the Agency is financially viable.

## Implementation of Statutory Requirements from Last Inspection

Requirements from last Inspection visit fully actioned?

YES

**If No please list below the findings of this inspection on any Requirements that have not been actioned**

### 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 Voluntary Adoption Agencies and Adoption Agencies (Miscellaneous Amendments) Regulations 2003.

No.	Regulation	Standard	Required actions	

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

## COMPLIANCE WITH CONDITIONS OF REGISTRATION (IF APPLICABLE)

Providers and managers of Voluntary Adoption Agencies must comply with statutory conditions of their registration. The conditions applying to this registration are listed below, with the inspector's assessment of compliance from the evidence at the time of this inspection.

Condition	Compliance	YES
The Agency provides domestic and inter-country adoption services.		
<b>Comments</b> Although this branch does not provide inter country services at present, it wishes to retain the facility to do so.		

Condition	Compliance	YES
The branch operates from Wood Lane, Erdington.		
<b>Comments</b> The branch address remains the same.		

Condition	Compliance	
<b>Comments</b>		

Condition	Compliance	
<b>Comments</b>		

<b>Lead Inspector</b>	<b>Ros Chapman</b>	<b>Signature</b>	
<b>Second Inspector</b>	<b>Sally Woodget</b>	<b>Signature</b>	
<b>Adoption Manager</b>	<b>Karen Dolton</b>	<b>Signature</b>	
<b>Date</b>			

## STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

**Action Plan: The Registered provider and manager are 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 Voluntary Adoption Agencies and the Adoption Agencies (Miscellaneous Amendments) Regulations 2003 or the National Minimum Standards for Voluntary Adoption Agencies. The Registered Persons are required to comply within the given time scales in order to comply with the Regulatory Requirements for Voluntary Adoption Agencies.

No.	Regulation	Standard *	Requirement	
1	The Voluntary Adoption Agencies and the Adoption Agencies (Miscellaneous Amendments) Regulations 2003 Reg 3	VA1	The Statement of Purpose must be formally approved and distributed to the branches.	31/10/04
2	The Adoption Agencies Regulations 1983 Reg 8	VA3	The NCH must be clear about its eligibility criteria.  The agency's policies must be reflected in the practice of the organisation.  Branch staff must be clear about the agency's policies and procedures	31/10/04
3	The Adoption Agencies Regulations 1983 Reg 5	VA10	The agency's policies and procedures for the panel must be developed to include those listed in the National Minimum Standards (standard 10.2)	31/10/04



4	<p>The Voluntary Adoption Agencies and the Adoption Agencies</p> <p>(Miscellaneous Amendments) Regulations 2003</p> <p>Reg 17</p>	VA11	Each panel member must have an up to date enhanced Criminal Records Bureau check and written references on their files.	31/10/04
5	<p>The Voluntary Adoption Agencies and the Adoption Agencies</p> <p>(Miscellaneous Amendments) Regulations 2003</p> <p>Reg 8</p>	VA14	The manager of the adoption service must undertake a formal management qualification.	1/4/05

6	<p>The Voluntary Adoption Agencies and the Adoption Agencies</p> <p>(Miscellaneous Amendments) Regulations 2003</p> <p>Reg 5 (3) (c)</p> <p>Schedule 2.</p>	VA15	The Registered Person must have a current Criminal Record Bureau check.	31/8/04
7	<p>The Voluntary Adoption Agencies and the Adoption Agencies</p> <p>(Miscellaneous Amendments) Regulations 2003</p> <p>Reg 11</p>	VA24	The name and address of the Registering Authority must be added to the complaints procedure.	1/12/04

8	The Voluntary Adoption Agencies and the Adoption Agencies  (Miscellaneous Amendments) Regulations 2003  Reg 17	VA28	All staff files and panel member files must have the information in Schedule 2 in place. This includes proof of identity, a photograph, proof of qualifications, written references and a Criminal Records Bureau check.	31/10/04
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#### 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 Registered Persons.

No.	Refer to Standard *	Recommendation Action
1	VA1	The statement of purpose should be extended to give more details about the facilities and services provided by the branch.
2	VA3	The recruitment literature should give a more accurate reflection of the types of children likely to be placed by NCH.
3	VA3	The written information about the process of adoption should also include details of the preliminary panel and the appeals process.
4	VA4	The branch manager should ensure the form F assessments follow a more consistent pattern in terms of evidence and competency base.
5	VA5	The branch manager should ensure that written evidence is available of discussions with prospective adopters in relation to the implications of a child placed with the family and matching considerations.
6	VA5	The branch manager should implement the system for recording the decision of adopters to inform the Agency if a child dies during their childhood or shortly afterwards.
7	VA10	The branch manager should develop a set of policies and procedures for panel members which cover all the issues in 10.2.

8	VA18	The branch should provide access to specialist advice in addition to that provided by the medical and legal advisers. See also comments in Standard 20.
9	VA19	All staff should receive updated and relevant child protection training.
10	VA20	The branch manager should formalise the workload management monitoring system.
11	VA24	The NCH should consider reviewing some of the timescales for investigating and responding to complaints
12	VA25	The branch manager should seek verification that the cabinets are fire and waterproof.
13	VA27	All case records should be signed and dated by the author.
14	VA29	NCH and the branch should develop a disaster recovery plan.

\* Note: You may refer to the relevant standard in the remainder of the report by omitting the 2-letter prefix e.g. VA10 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	NO
Checks with other organisations and Individuals	
• Directors of Social Services	NO
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	YES
• Interview with children	NO
• Interview with adopters and prospective adopters	YES
• Interview with birth parents	NO
• 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
Additional Inspection Questions	
Certificate of registration was displayed at the time of the inspection	YES
Certificate of registration accurately reflected the situation in the service at the time of inspection	YES
Total No. of staff employed (excluding managers)	10
Date of Inspection	29/06/04
Time of Inspection	09.30
Duration Of Inspection (hrs)	83
Number of inspector days	11

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 - 1.3(partial) and 1.5 – 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?	1
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### National Findings

The NCH has a statement of purpose which was presented to the Adoption Sub Committee in June 2004. Some amendments to the documents were requested by the sub committee and a resolution is currently being achieved. Once the statement of purpose has been formally approved by the Adoption Sub Committee, it will be circulated to all the projects and incorporated into the Adoption Practice Standards.

The statement of purpose covers the main aims and objectives of the adoption agency. It lists the branches providing adoption services and gives some information on how the agency is structured.

The statement of purpose will be an annual agenda item for the Adoption Sub Committee to consider.

NCH has a policy manual (Adoption Practice Standards), which sets out the organisation's constitution, statement of purpose, management structure, recruitment practice, and the management of a branch/agency. The NCH recognises that individual branches will vary in the scope of their work but the overall purpose of all the work in the NCH as an adoption agency is encompassed in the general statement of purpose and their Adoption Practice Standards.

### Branch Findings

The Agency has developed a written statement of purpose, which relates to all the branches. It was thought to have been recently been approved by the Adoption Sub Committee, but as the National findings above indicate, that is not the case. Although the statement of purpose gives the information required by schedule 1, it does not give an accurate reflection of the facilities and services which NCH (Midlands) provides and is somewhat basic. It needs updating in relation to information about the staff at the branch to reflect the fact that all staff now have Criminal Records Bureau checks, and there is no date given ("correct as at") for the information provided for this branch. As it is a document which must be made available to anyone with an interest in the service, including prospective adopters, the information it gives should be more detailed to ensure it is meaningful and informative. It is therefore recommended that the statement of purpose be extended to give fuller information about the facilities and services provided by this branch.

Staff interviewed confirmed they had seen the statement of purpose, copies were available to them but they had not had any input into it.

The branch manager said that any written information could be translated into different languages as the Agency subscribes to Language Line. Information could also be imparted verbally to anyone who needed this.

**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 trustees or management committee?**

YES

**Is there a children's guide to adoption?**

NA

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

NA



## 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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#### National Findings

The Adoption Practice Standards contain policies and procedures governing the recruitment practices of the NCH and their partnerships with other agencies. These are the principles the branches will follow when recruiting, assessing and preparing prospective adopters.

The policy on "Publicity and Information" (Adoption Practice Standards, standard 15) sets out the work of the agency in line with the agency's marketing strategy.

Each branch is expected to have its own local marketing strategy to meet with local needs and circumstances.

The policy further states that all publicity material must reflect the linguistic and cultural needs of minority ethnic groups and that projects must maintain a high profile within the area it covers to ensure there is a sustained recruitment process. The NCH are committed to placing children with families who match a child's ethnicity and culture and to keeping siblings together where that is the childcare plan.

The policy on "Work with Enquirers" (Adoption Practice Standards, standard 16) states the projects must respond efficiently and sensitively to enquirers and that the branches are clear about the profile of adopters they wish to recruit which reflects the needs of children waiting for placements.

#### Branch Findings

The branch manager has addressed the recruitment of adopters within the annual business plan and is aware of the types of children needing placement through interagency working.

Although the responsibility for matching ultimately lies with the Local Authority of the child, adopters are approved by the branch to take children with a specified ethnic origin. There is a specific project to encourage people from the black community to come forward as prospective adopters and no transracial placements were made in the preceding year.

Prospective adopters are assessed in relation to their abilities to care for more than one child if this is appropriate, in order to keep siblings together and five sibling groups of 2 children were placed in the preceding year.

There is an acknowledgment that Local Authorities will be looking to NCH to provide them with families who can meet the more difficult to place children, given consortium arrangements and the improvement in adoption services within some of the Local Authorities and this will continue to be a challenge for NCH to address.

**In the last 12 months, how many children were matched with families which reflected their ethnic origin, cultural background, religion and language?**

19

**What percentage of children matched with the agency's adopters does this represent?**

100

%

**How many sibling groups were matched in the last 12 months?**

5

**How many allegations of abuse or neglect were made, in the last 12 months, about adopters approved by the agency?**

0

## **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 – 3.6)**

**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?**

**1**

**National Findings**

The NCH self-assessment form indicates the agency operates an open recruitment policy. The policy on “Equality and Diversity” (Adoption Practice Standards, standard 6) states the project does not discriminate against service users on the grounds of gender, ethnicity, religion, marital status, sexuality or disability. Appendix D gives a policy statement on the adoption of children by adopters who are lesbian or gay and it is an approved policy statement by the Adoption Sub Committee in February 2000.

The Adoption Information Pack gives a clear picture of the adoption process to enquirers and states the NCH intention to welcome people from all sectors of the community. The eligibility criteria are listed in the information pack “Criteria for Selection”. The NCH will consider applications from married couples, people who are living together but not married whether they are in heterosexual, lesbian or gay partnerships and single applicants.

Whilst the NCH has an open recruitment policy and Eligibility Criteria which include gay and lesbian applicants and a policy on “Equality and Diversity”, the minutes of meetings and the representations made by branch managers suggest there is a lack of clarity to the organisation’s policy of recruiting gay and lesbian applicants.

The minutes of the Adoption Sub Committee show there has been a verbal report presented to the committee (December 2003) on working with Gay and Lesbian applicants. It was a verbal report to the committee. There are no minutes of the discussion which took place, or the reason why the matter was brought before the adoption sub committee or how the matter was resolved.

The sub committee are advised to record all conversations in the meetings to ensure the work of the NCH remains transparent.

The NCH has a project specifically dedicated to the recruitment of black adopters. The agency has had an injection of funding from a corporate sponsor (Scottish Power), which has enabled the agency to deploy extra resources, staff, materials and advertising campaigns. The donation has a specific staffing component used to employ African – Caribbean and Asian staff in addition to existing black staff. The agency does not undertake Inter-Country adoption assessments; enquirers are directed to the Local Authority and to the overseas adoption helpline.

### **Branch Findings**

The literature which is sent to prospective adopters makes it clear that people are welcomed without prejudice and information about the process is clear and accurate. However, NCH (Midlands) has a system whereby prospective adopters may be taken to a preliminary panel if there is some issue about which the social worker needs clarification of panel's views and this part of the process is not detailed in the information pack. There is no information about what happens if the panel does not recommend approval either and details of the appeals mechanism should also be there. Adopters interviewed confirmed that they had received written information and that this reflected the process they had undertaken. They also felt they had been treated with respect throughout. The information pack is sent to anyone who makes an enquiry about adoption. The Adoption helpline number is given to anyone making an enquiry about inter country adoption as this is not an area which NCH (Midlands) deals with.

The manager is clear that prospective adopters who wish to adopt younger, white children are directed to the Local Authority unless they are able to consider other needs as well, as Local Authorities will not purchase such a resource from them. There are no specific eligibility criteria, however.

The information pack covers the preparation and support services available to adopters and this is also covered in some detail during the initial interview and preparation groups. The initial interview also covers the types of children who need families. It was noted in some of the recruitment literature which addresses the issue of types of children needing placements, that of the 3 children cited, 2 were babies and the other one was 4 years old. This does not seem to reflect the types of children for whom NCH provides placements and it is suggested that this be considered by the Agency when developing their recruitment literature in the future.

Adopters interviewed commented that they were offered an initial interview at their homes within a few days of making an enquiry and this interview was lengthy, thorough and informative.

The preparation groups offer prospective adopters the opportunity to meet adoptive parents and adopters commented on how helpful they found this opportunity. The preparation group also has a session on "Who are the children" which covers children who need families. As NCH (Midlands) makes placements nationally, adopters are also given access to "Be my Parent" during the assessment process.

**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?**

3

**National Findings**

The NCH has a policy statement on “Work with Applicants ” (Adoption Practice Standards, standard 17); it covers the allocation of a social worker within two weeks of the receipt of an application, the assessment and suitability of an application, and the presentation to panel. There is a supporting procedure to the policy on Work with Applicants, which covers statutory enquiries, medicals, personal referees, the home study, the preparation training, inspection of the accommodation and legal documents.

The Adoption Information Pack gives a clear picture of the adoption process to enquirers, the preparation and assessment procedure and the role of the adoption panel.

**Branch Findings**

There is a formal and thorough assessment, preparation and approval process. This starts with the initial enquiry, when the duty officer will take details and make an initial assessment about the potential of the enquiry. The Manager will decide if an initial visit is needed to give and receive further information and this is carried out by a social worker within a few days. It is then decided whether or not the application will proceed, and if so, an application form is sent out for the prospective adopters to complete.

Appropriate checks are undertaken, applicants attend a 4-day preparation group and undertake a home study with their allocated social worker.

The preparation group is very thorough and covers appropriate issues. It is held 4 times a year, on a Thursday and Friday, and the following Monday and Tuesday at the office in Birmingham. As NCH (Midlands) takes referrals from a 50-mile radius of the office, the location is not ideal for some families, but adopters interviewed did not see this as an inconvenience. They accept that by applying to a branch based in Birmingham, this is necessary. They did comment that there was plenty of notice given of the dates, which enabled them to take time off work if necessary. Some liked the intensity of having 4 days at one time; others felt it might be better to have it over a longer period. Adopters felt the groups were well run and the evidence seen showed them to be sensitive and use a number of mediums to convey information. The applicants are asked to record their learning for each session and this is used during the home study where necessary. Applicants are also asked to evaluate the course and facilitators use this information to change the programme where necessary. The facilitators plan to do this formally on an annual basis and record the results of their evaluation.

There was evidence that an interpreter had been offered to an applicant whose first language was not English and that interpreters had been used for applicants who were hearing impaired.

The home study looks at safe caring throughout the process. Form F's inspected were thorough and addressed experience, strengths and health and safety issues. Some form F's addressed competencies in a more structured way and were more evidenced based however, and it is recommended that the branch adopt a more consistent approach to this. Where assessments were more evidence based and addressed competencies, these were generally more helpful in highlighting the issues.

The branch has addressed the recommendations of the Brighton and Hove enquiry and takes up references from ex partners where possible. There was also evidence of checks being undertaken from other countries when applicants had been out of the country for some time. Checks are undertaken of all the local authorities where applicants have lived and employers' references are requested for everyone. Adopters spoken with were aware of the need for these checks.

Adopters spoken with were positive in their comments about how the home study was undertaken and found it a useful process. They felt they had been kept informed throughout and were aware of the reason for any delay.

**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

**National Findings**

The Adoption Information Pack gives a clear picture of the placement process, planning introductions, placement and how some placements do not work out.

The NCH are developing a Post Approval Pack.

The Adoption Practice Standards do not address the process of referral to the National Adoption Register.

**Branch Findings**

Adopters are given a folder of information about the Adoption Register once they are approved and sign to indicate whether they wish to be included on this. They are also given information about the West Midlands Consortium and Adoption UK and Be My Parent.

Adopters are given information about the matching process during their preparation groups and a post approval pack of information is being considered.

Adopters spoken with felt they had sufficient information about the child/ren who were placed with them. They had been able to discuss the implications with their social worker, had met foster carers and the child's social worker and seen the form E. More written evidence of the discussions between the family and social worker in relation to the implications is recommended, as are specific matching considerations, however, as there was not as much detail as there could be, for this very important area. Social workers commented that the quality of form E's varied and some were out of date. However, they see it as part of their role to chase up information and make sure it is accurate and up to date. There was evidence of this and one social worker had actually been to the Local Authority to look at the child's file to obtain as much information as possible for the prospective adopters.

The introduction process is detailed on the appropriate BAAF form.

The branch is in the process of developing a system for the adoptive parents to notify the agency if a child dies during childhood. One of the social workers has developed a form to record this, which was inspected and it is planned to implement this shortly. Currently adopters are asked if they wish to receive information from the birth family in the event of illness or death and this is recorded on the contact form.

Adopters spoken with indicated that they had prepared a book of information and photographs of themselves for sharing with children and social workers. Videos have also been produced.

**Does the VAA 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

**National Findings**

The NCH has a policy on “Supporting Placements” (Adoption Practice Standards standard 24), which addresses the agency’s commitment to providing a clear strategy for working with and supporting adoptive families. Link workers are available to support adopters and the service will provide an out of hours support service. The policy statement is specific in the frequencies of support visits to be made to adoptive families.

**Branch Findings**

NCH (Midlands) gives very good support to the adopters. This includes regular home visits following placement and telephone contact with their social worker at anytime. The Agency has a “Preparation for Placement” standard, which includes the collation of information, guidance on planning meetings and the preparation of families and a “Support to Placement” standard, which includes guidance on the frequency of visits and roles.

Adopters interviewed were aware of the importance of information about the child and their birth family and were prepared to share this with the child at an appropriate time. This area is covered during the preparation group and assessment and a workshop on “Explaining Adoption to children and others” is available at anytime. Prospective adopters sign confidentiality statements in relation to information about children, and their friends and families can attend a meeting, which includes the importance of keeping personal information confidential.

Issues of anti-discriminatory practice and racism are discussed during the preparation group and assessment and this includes how to promote positive values and identity and combat racism and discrimination.

**Number of adopter applications started in the last 12 months**

24

**Number of adopters approved in the last 12 months**

13

**Number of children matched with the agency’s adopters in the last 12 months**

19

**Number of adopters approved but not matched**

16

**Number of adopters referred to the Adoption Register**

18

**How many placements disrupted, between placement and adoption, in the last 12 months?**

1





## 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 – 7.3 and 7.5)

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

#### Key Findings and Evidence

#### Standard met?

9

#### National Findings

Primary responsibility for working with birth parents is accepted by NCH to reside with local authorities placing through NCH as a Voluntary Adoption Agency. The NCH policy on “Work with Birth Families” (Adoption Practice Standards standard 31) seeks confirmation from Local Authorities that birth families have been offered support and counselling and have had the opportunity to express their views and wishes in relation to the adoption and contact.

#### Branch Findings

NCH (Midlands) provides a limited service to birth parents, as this is generally the role of the Local Authority that has responsibility for the child. The only role would be in relation to birth records counselling and contact arrangements made by NCH or any specific work contracted to them by the Local Authority. Therefore this standard is generally not applicable to this branch.

### 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

#### Branch Findings

Birth parents and birth families contribute to the maintenance of the child's heritage through contact arrangements, which are set up by NCH. Adopters spoken with also indicated that they had photographs and other memorabilia and were aware of the importance of this in terms of keeping such information safe and sharing it with the child as appropriate. One of the NCH adoption standards gives a checklist of information which should be collated for a child placed. There is also evidence that social workers will chase up letterbox contact arrangements when necessary. Five questionnaires were received from birth parents/family members. One said the service was excellent, calls were returned and everything explained. Another commented on how impressed they had been by the content of the initial contact letter, in terms of confidentiality. “The help and assistance could not be improved upon and I cannot sing the praises highly enough of the worker involved”. Good support was given for the first meeting with the child. Another person commented that they were totally informed, they were made to feel happy and confident, treated sensitively and respectfully. A placing social worker commented that adopters were particularly well prepared about issues of contact.

**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?**

9

**National Findings**

Primary responsibility for working with birth parents is accepted by NCH to reside with local authorities placing through NCH as a Voluntary Adoption Agency.

**Branch Findings**

This standard is not applicable to this branch as this work is undertaken by the local authorities with whom they work.

## 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?

1

#### National Findings

The NCH has a policy on "Adoption Panels" (Adoption Practice Standards standard 20). The national adoption policy sets out the framework for the branch adoption panels and states that each project must establish an adoption panel, which must operate within the requirements of the law. There are supporting procedures for adoption panels and the terms and conditions for panel members. The policies and procedures should be developed to include those listed in the National Minimum Standards (standard 10.2)

Panel members have access to BAAF's booklet on "Effective Panels".

Attendance of adopters is expected at all adoption panels.

The NCH are introducing annual panel reports, which will be presented to the Adoption Sub Committee.

#### Branch Findings

Although the panel has some written policies and procedures e.g. Prior Knowledge, they do not have policies and procedures which cover the full range listed in 10.2. Some of the issues are covered in panel minutes and the chair of the panel gave examples of how she addresses some of the areas, but written policies and procedures as outlined should be devised for consistency. Each panel member is provided with the BAAF publication "Effective Panels" to guide them.

Prospective adopters are invited to attend panel and this practice has been going on for some time. The branch has developed a small information booklet which is given to prospective adopters before they attend and this describes the panel process and has information on and a photograph of each panel member. It is made clear that non-attendance at the panel is not prejudicial. A prospective adopter attended the panel observed and was made to feel welcome and at ease. The Chair and her supervising social worker went out to the waiting area to welcome her and she was then shown into the meeting, along with her social worker. The panel process is also covered in the preparation groups and home study.

**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?**

1

**Branch Findings**

The NCH (Midlands) panel is properly constituted and the panel members have suitable qualities and experience. Some panel members have personal experience of adoption; others have a professional background in childcare and family placement. New panel members observe at least one panel, usually two, before they sit as a member, and this was observed during this inspection as a new panel member was observing her second panel. The panel members' files were inspected and there was not evidence of Criminal Records Bureau checks on every file. Neither did all panel members' files have written references on them, and there was no evidence of confidentiality agreements, although the manager's self-assessment made reference to indemnity bonds, which are signed and filed. These were not seen. Panel members' files will be addressed further in Standard 28 also.

Each panel member has a brief induction. The recruitment interview with the panel chair and branch manager identifies specific induction and training needs and this is followed up by an induction meeting. Written information is provided and the new member observes at least one panel. They are also allocated to a more experienced panel member as their "mentor" to assist with any queries. This induction should be recorded.

There was evidence of training for panel members, including at least one joint day with branch staff. The panel adviser provides regular updates at the end of each panel on any changes, literature is available and there are also a number of training sessions each year. The branch does not deal with inter-country adoptions at present.

**Does the adoption panel membership meet all of the statutory requirements?**

YES

**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

**Branch Findings**

The panel is well organised and the dates for the year are arranged well in advance. The panel is held monthly and this is of a sufficient regularity to ensure there is no delay in the consideration of panel business. The chair of the panel and the agency decision maker confirmed that they received all the information about the panel at least a week in advance to enable them to have time to read it.

The panel minutes inspected were very thorough and clear and gave a good account of the discussion, the reasons and the recommendation made. The minute taker is very experienced and has undertaken a BAAF minute taker course in the past. She writes the minutes shortly after the panel meeting and emails them to the chair for her approval and any alteration. This is very good practice.

**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?**

3

**National Findings**

The NCH has a policy on "Decision Making" (Adoption Practice Standards standard 21); it states that there must be a clear distinction between the recommendation-making responsibilities of the adoption panel and the decision-making responsibilities of the agency.

**Branch Findings**

The decision maker receives and reads all the panel papers in advance of the panel. He then receives the minutes of the panel meeting and there is a decision-making meeting held within 5 working days of the panel, when the decision is made.

The recommendation of the panel is conveyed orally to the applicants by the social worker within 24 hours of the panel but it is very clear that this is only the recommendation. The decision is conveyed in writing, usually on the day of the decision-making meeting and letters confirming the decision were inspected on the files. These are very clear that the decision relates to the present circumstances and that this will be reviewed after a period of time and if circumstances change.

## 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 – 14.6)

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?	1
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#### National Findings

The Registered Person is Nigel Harper, the North East Regional Director. He sits on the Children's Management Group, which is made up of Directors from all the regions. This group determines the organisation's policies and procedures.

He was formally interviewed on the 7<sup>th</sup> May 2004 by the CSCI as part of the registration and inspection process.

The current Registered Manager is Linda Plummer whose designated role within the organisation is as a professional advisor on Family Placements. She has previously managed an adoption service for the NCH but in her present capacity as a professional advisor, she does not line manage the managers of the individual branches.

Linda Plummer is a qualified social worker with considerable experience in childcare and family placements. She qualified in 1975. She has no formal management qualification. She was formally interviewed on the 7<sup>th</sup> May 2004 by the CSCI as part of the registration and inspection process.

The branches are currently line managed within their particular region and each branch manager is part of their regional management team. The Adoption Service Development Group brings together the branch managers, their line managers, the adoption agency manager and the registered person.

The branch managers also meet quarterly as The Adoption Service Development Group to discuss practice issues.

In recognition of the need to strengthen the identity of the adoption services on a national basis the NCH are currently reorganising their adoption services. There have been a series of draft reports and consultations on the agency's proposals. These have now been presented to the Children's Management Group and NCH is to appoint an Adoption Manager. It will be a specialist role to give direction and leadership to the developments in the field of adoption and have oversight of all the NCH adoption services. The person will also have line management responsibility for each of the branch managers.

#### Branch Findings

The branch manager for NCH (Midlands) has a professional social work qualification, which

was seen on her personnel file, and a number of years child care experience, which was evidenced on her application form which was also inspected. There is also a deputy branch manager who is professionally qualified and experienced. The branch manager is about to undertake a management qualification, which previously had to be postponed for personal reasons.

The manager holds regular staff meetings and staff receive regular supervision. There is evidence that issues of concern are raised with staff and the branch manager presents as capable, approachable and assertive. She has a job description and there are clear lines of accountability and responsibility throughout the branch and agency.

**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?**

1

#### **National Findings**

The NCH has well-established policies and procedures for the recruitment and appointment of staff to ensure that children are safeguarded.

The personnel files of the registered person and the registered manager were checked as part of the inspection of the headquarters.

The Registered Person does not have a current CRB

The Manager has an enhanced CRB check.

All checks on other staff will be renewed every 3 years.

#### **Branch Findings.**

The branch manager has not been appointed since the standards were implemented so there was no evidence of telephone enquiries to verify the references. The branch manager informed the inspectors that this will be carried out in future. Her personnel file contained written references, an up to date and satisfactory Criminal Records Bureau check at an enhanced level and photocopies of her birth certificate and qualifications.



## 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?	
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#### National Findings

The NCH is administered under a scheme by the Charities Commission, Nigel Harper, the North East Regional Director sits on the Children's Management Group, which is made up of Directors from all the regions. This group determines the organisation's policies and procedures.

Linda Plummer whose designated role within the organisation is as a professional advisor on Family Placements has previously managed an adoption service for the NCH but in her present capacity as a professional advisor, she does not line manage the managers of the individual branches.

The branches are currently line managed within their particular region and each branch manager is part of their regional management team. The Adoption Service Development Group brings together the branch managers, their line managers, the agency manager and the registered person.

The branch managers also meet quarterly as The Adoption Service Development Group to discuss practice issues.

The agency's management structure is under review in the light of legislative requirements and the business requirements of the NCH.

There are policies and procedures governing adoption activity.

#### Branch Findings

There are clear arrangements in place to identify who is in charge when the manager is absent. These include the deputy manager, regional staff and the Family Placement Adviser. Managers and staff have job descriptions and methods of communication include regular staff meetings and supervision as well as informal channels. There is also communication at Agency level through Adoption Agency Management meetings.

Staff are informed of the conflict of interest policy and the manager was very clear that this happened in all cases. No written evidence was seen of this however.

Staff are made aware of the importance of taking into account racial origin, culture, gender etc and this is discussed in supervision and staff have undertaken training in this area. An adopter commented that they had requested a black worker and this had been provided for them. Adopters were positive about the support and sensitivity of the social workers who worked with them.

The branch uses the guidance provided by the Adoption Register in relation to giving information about adopters waiting for a placement. A pack is given to adopters which includes details and a consent form.

<b>Number of statutory notifications made to CSCI in last 12 months:</b>	<input type="text" value="0"/>
<b>Death of a child placed for adoption by the agency.</b>	<input type="text" value="0"/>
<b>Referral to Secretary of State of a person working for the agency. (s2(1) of Protection of Children Act 1999)</b>	<input type="text" value="0"/>
<b>Serious illness or accident of a child.</b>	<input type="text" value="0"/>
<b>Serious complaint about an approved prospective adopter (no child placed).</b>	<input type="text" value="0"/>
<b>Serious complaint about an approved prospective adopter (child placed by agency).</b>	<input type="text" value="0"/>
<b>Serious complaint about an approved prospective adopter (child placed by another agency).</b>	<input type="text" value="0"/>
<b>Instigation of child protection enquiry involving a child placed by the agency.</b>	<input type="text" value="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

**National Findings**

The NCH is administered under a scheme by the Charities Commission.

The Children's Management Group is made up of Directors from all the regions. This group determines the organisation's policies and procedures.

The Adoption Sub Committee has overall responsibility for overseeing the work of the agency in accordance with the Adoption Agency Regulations 5 (3) (b). It has a wide ranging brief and approves the adoption programme for the NCH. It oversees the financial affairs of the adoption agency, approving budget plans and identifying the changes required in the funding arrangements.

The minutes of the Adoption Sub Committee show all relevant adoption matters are being considered.

The branches are currently line managed within their particular region and each branch manager is part of their regional management team. The branch managers also meet quarterly as the Adoption Service Development Group, and the registered person and the interim adoption manager attend these meetings.

The Strategic Performance Unit has a brief to go in to different projects to audit and report on the activities of the projects.

The NCH has a policy on "Financial Arrangements for Interagency placements"" (Adoption Practice Standards)

**Branch Findings**

There is clear written information about the charges for the services and these are given to Local Authorities.

A written report is sent to the management committee on a quarterly basis, business plans are reviewed annually and other statistical information is presented to them on a regular basis.

**How frequently does the executive side of the council receive written reports on the work of the VAA?**

Monthly?

Quarterly?

Less than Quarterly?

YES

**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?****2****National Findings**

The NCH has a policy on “Legal and Medical Advice” (Adoption Practice Standards standard 12); it states that each project has an appropriately qualified and experienced legal and medical advisor.

**Branch Findings**

The branch has access to legal and medical advice. The medical adviser is available for consultation by staff and staff confirmed this was the case. She will also liaise with other medical services where appropriate. The legal adviser is also available for consultation. Staff identified the need for other specialist to be available. There is no budget or funding for such services however.

There are written protocols in place for the role of specialist advisers.

## 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

#### National Findings

The NCH has a comprehensive recruitment policy, which fully addresses the recruitment and appointment processes including the obtaining of references and relevant safeguarding checks. There is a clear written checking process available to those responsible for recruiting new staff which sets out the role and responsibility of the Human Resources Departments.

All social workers are expected to be professionally qualified. There are social workers undertaking the PQ CCA but it is uncertain as to whether 20% of the agency staff across the agency will achieve the award by April 2006.

#### Branch Findings

NCH has a recruitment and selection procedure and training in recruitment and selection is mandatory for all management staff. The branch manager and the deputy branch manager have both completed this course.

An inspection of staff files indicated that staff are interviewed and written references are taken up before appointment. No staff have been appointed since the standards came into effect but the manager confirmed that telephone enquires will be made to verify references on all newly appointed staff in the future. Staff files also contained evidence of Criminal Records Bureau checks at the enhanced level, which were up to date.

All social work staff are professionally qualified and the manager said that qualifications are now verified at the interview. An inspection of application forms showed that staff have an understanding of adoption work from previous employment and this is explored further at interview.

One member of staff has a PQ award and it is planned for 2 more of the staff to begin this course in the near future. This will ensure that 20% of staff have this qualification.

Social workers interviewed showed a good understanding of adoption and this was also evidenced in their written assessments and case recording. They undertake training, which in the last year has included adoption support regulations, early trauma and attachment, the assessment of adoptive applicants, adult attachment relationships and the placement needs of black mixed heritage children. Training in child protection is a mandatory course but some of the social workers had this training many years ago and it has not been updated. Other staff have undertaken this course and found it to be too basic for their needs. Up to date and relevant child protection training is therefore recommended for all social work staff.

Staff said they also kept up to date by looking on the internet for information and sharing this with colleagues.

Birth records counselling is provided by NCH (Midlands) and the members of staff who

undertakes this have undertaken training for this role. It is not a large part of their tasks however.

The medical adviser is appropriately qualified and experienced.

There are no support workers and no unqualified staff. If students undertake any social work functions, they are directly supervised by qualified social workers.

**Do all of the agency's social workers have DipSW or equivalent?**

YES

**What % of the agency's social workers have a PQ award?**

11

%

#### **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

##### **National Findings**

Adoption branch managers within the NCH are required to have a professional social work qualification and post qualifying experience plus management experience.

There are appropriate job descriptions and person profiles for all jobs.

##### **Branch Findings**

The branch has a small team of social work staff who are supervised by either the deputy branch manager or the branch manager. Both of these people are appropriately skilled and qualified. Their abilities are monitored by their line managers and evidence of annual appraisal and regular supervision were seen.

Social workers interviewed felt they managed their own caseloads. The branch manager and deputy have an overview of this and ensure the work is shared out evenly, monitoring this through supervision. A more formal system of workload management and monitoring is recommended.

Assessments and approvals of adopters are monitored through supervision and the manager is implementing a formal recording system to improve the monitoring of this.

An inspection of staff files showed that all staff receive regular supervision from the branch manager or the deputy branch manager. This was at an interval of 4-6 weeks. Managers are also available for consultation at other times.

Staff are encouraged to undertake training although some of the staff felt that limited training opportunities were available to them, given their knowledge and experience. NCH has a number of mandatory courses and the branch has at least 1 joint training event with the panel each year. Staff have annual appraisals which identify training needs and staff have been able to access external courses to meet these needs.

Additional administrative support has been identified as a need and funding has been agreed for extra hours. Currently there are 2 administrative workers, one of whom is on maternity leave. This post is being covered by agency staff at present. Office equipment is said to be adequate.

Queries are generally dealt with by the social work staff who have a duty system which operates in office hours Monday-Friday. Questionnaires from adopters and placing social workers commented on the professionalism of all staff, including administrative staff, in their dealing with NCH (Midlands). They also commented on the prompt service they received.

NCH (Midlands) only has access to medical and legal advice and staff felt there was a need for other professional advice at times, to support prospective and approved adopters. This should be provided by NCH. This has been made a recommendation under standard 18. Local Authorities are sometimes accessed for services for children placed. Staff interviewed confirmed they had the General Social Care Council code of conduct, job descriptions, contracts and conditions of service and these were also available in their personnel files. They also said they have seen the statement of purpose and have copies of other policies and procedures.

#### **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

#### **Branch Findings**

There appears to be sufficient staff to undertake the work of the branch and they receive good support. There is access to sessional social work and administrative staff if necessary, and part time staff will also undertake more hours if required.

Many of the staff at the branch have been there for some years, which would imply that policies in relation to staff retention are good. Staff can work flexibly as there is a recognition that some of the tasks are undertaken out of normal office hours. Staff have regular supervision and access to training. Staff expressed some disquiet about their pay scales, which they say have fallen behind equivalent staff in the same organisation.

**Total number of social work staff of the agency**

8

**Number of staff who have left the agency in the past 12 months**

0

**Number of social work posts vacant**

0

#### **Standard 22 (22.1 – 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

#### **National Findings**

The NCH follows the requirements of national employment legislation.

#### **Branch Findings**

NCH is a fair employer and has sound employment practices and support for staff.

Appropriate insurance cover is in place. The Agency also has a whistle blowing procedure, which was circulated to all staff last year.

<b>Standard 23 (23.1 – 23.6)</b> <b>There is a good quality training programme to enhance individual skills and to keep staff up-to-date with professional and legal developments.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<b><u>Branch Findings</u></b> NCH have their own training programme but staff can also apply for external courses. Staff training needs are assessed in supervision and appraisals and these are documented. No staff have been recruited since the introduction of TOPPS standards but the manager and deputy have received training on the new requirements and will implement this for new staff. Staff felt they were kept abreast of any changes through team meetings, the circulation of documents, practice discussions and away days, team and panel training and national training events. They also access the internet. Staff are asked to evaluate training undertaken and the individual outcomes of training are evaluated through supervision and appraisal.		

<b>Standard 24 (24.1 – 24.9)</b> <b>Complaints are resolved quickly and handled in a sensitive, thorough and non-biased manner.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
<b><u>National Findings</u></b> The NCH has a policy on “Complaints, Suggestions and Compliments” (Adoption Practice Standards standard 7). There is a supporting procedure on “Representations about unfavourable agency decisions”. It is a well-defined complaints procedure for the whole organisation. Details of the complaints procedure are available on the intranet and leaflets are expected to be available in each of the branches. The NCH should consider reviewing some of the timescales for investigating and responding to complaints. The policy states that where complaints can easily be resolved to the complainant’s satisfaction, it will be investigated and the complaint responded to within 6 weeks (adults), 2 weeks for children under 18 and care leavers. Where complaints are not considered easy to resolve the timescales extend to 14 weeks for adults and 6 weeks for children. It is suggested that the agency endeavors to investigate and respond to all complaints within 28 days regardless of their severity, complexity or whether they are considered easy to resolve or not.		
<b><u>Branch findings</u></b> There is a complaints procedure and complaints are monitored by Head Office. All the adopters interviewed were aware of the complaints procedure and had received this information in their pack. Staff were also aware of the complaints procedure. The complaints procedure inspected did not make reference to the Commission for Social Care Inspection and this must be added. The branch manager has received training in complaints and plans to go through the training pack with other staff. Complaints are seen positively as a way of improving services. Complaints are kept centrally and include the outcome. These are reviewed annually by 2 members of staff at Head Office. One complaint made recently was not about a child and is in the process of being investigated. It was in the too early stages for any records to be available for inspection.		



**Number of complaints made by, or on behalf of a child, in the last year?**

0

**Number of the above complaints which were substantiated**

0

## 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

#### Branch Findings.

There is a case file for each adoptive family and a separate record maintained for each child, although the main adoption file is maintained by the Local Authority social worker. Anyone with access to any information regarding aspects of the work of the branch signs a confidentiality agreement form. Records are stored in locked cabinets and the Office Manager thought these were fire and waterproof but there was no written evidence of this. Some verification of this should be sought. The office has a smoke alarm system. Records of all status, health, references and Criminal Records Bureau checks were in evidence on the files inspected. There was also evidence of discussions between social workers and supervisors being recorded on the case file and these were legible, signed and dated.

### 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

#### Branch Findings.

NCH Midlands has a good system of sending form Fs to other agencies and keeps a note of what information was sent to which authority on what date. There is a NCH standard in relation to access to adoption case records, which takes account of the Data Protection Act and Human Rights Act. A confidentiality agreement is signed by anyone other than the child or the adopter.

**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?**

2

**National Findings.**

The NCH has a policy on “Confidentiality” (Adoption Practice Standards standard 8); it states that the NCH will uphold its duty to maintain confidentiality. The policy addresses issues of confidentiality; secure storage and access to files and the purpose and content of case files.

**Branch Findings**

NCH has a case recording policy. Separate records are kept for staff, complaints and allegations. There is a file audit system in place and evidence was seen of this, although it is a relatively recent system. Confidential records are stored in locked cabinets. The content of records was clear and distinguished between fact and opinion. However, although records are typed, making them legible and easy to read, they were not always signed or dated by the author and this should be implemented. Complaints and allegations are recorded on relevant files and this information is also collated regionally and nationally for monitoring purposes.

**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

**Branch Findings**

Personnel files for staff are held at Regional office and a separate supervision and appraisal file kept at the branch. The personnel files at Regional office did not contain all the required information e.g. copies of qualification, photographs and copies of birth certificates. In 2 of the 3 files where these were missing, the information (but not photographs) was available on the file held at the branch. There must be a photograph of each member of staff on their file and copies of qualifications and birth certificates. This is a regulatory requirement. Panel members' files are held at the branch. These were not compliant with the regulations. It is recommended that a front sheet be devised to give the date of appointment, when the induction was held and any training undertaken. All panel members must have an up to date Criminal Records Bureau check, photocopies of qualifications where relevant, written references, an application form or CV, photograph and a confidentiality statement. Some of these elements were available on some of the panel members files, others had very little.

## 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

### **National Findings**

The NCH do not have a disaster recovery plan.

### **Branch Findings**

The branch is located in a single storey building, with an adequate car park for staff and visitors. There is a large room for meetings and contact and a number of offices where staff are located. The office is easily identifiable and open to the public during office hours from Monday to Friday.

The IT systems are efficient and are password protected. Many of the records are archived in another branch office. Records, which are retained at this branch office, are stored in lockable cabinets in lockable rooms and the building has an alarmed security system. There is appropriate insurance cover in place and the certificate was on display.

The branch does not have a disaster recovery plan and this should be developed.

## Financial Requirements

The intended outcome for the following set of standards is:

- The Voluntary Adoption Agency is non-profit making and is financially viable.

### Standard 30 (30.1 - 30.2)

The adoption agency ensures it is financially viable at all times and has sufficient financial resources to fulfil its obligations.

#### Key Findings and Evidence

#### Standard met?

3

#### National Findings

The NCH Children's Services is a company limited by its shares wholly owned by the NCH. The company is non-profit making and works in conjunction with funding partners. The agency has had an injection of funding from a corporate sponsor (Scottish Power), which has enabled the agency to deploy extra resources, staff, materials and advertising campaigns.

#### Branch Findings

This standard was not inspected at branch level.

### Standard 31 (31.1 – 31.5)

The financial processes/systems are properly operated and maintained in accordance with sound and appropriate accounting standards and practice.

#### Key Findings and Evidence

#### Standard met?

3

#### National Findings

All of the financial processes and systems operating in the adoption service are in accordance with those set and maintained by NCH Finance Committee. The NCH accounts are audited and published annually in the company's annual report. The Adoption Agency accounts are published annually in the Adoption Agency report having been approved by the Adoption Sub-Committee. At the time of the inspection of the headquarters, financial accounts were being prepared for the management meeting being held on the day of the inspection and were not available. These will be requested by the CSCI once the Senior Management Committee has formally approved them. The Adoption Sub Committee has overall responsibility for overseeing the work of the agency in accordance with the Adoption Agency Regulations 5 (3) (b). It has a wide ranging brief and approves the adoption programme for the NCH, it oversees the financial affairs of the adoption agency, approving budgets plans and identifying the changes required in the funding arrangements. The agency has a three-year Adoption Agency Business plan, which is reviewed each year. The plan shows the agency have set 5 objectives, including to sustain high quality services.

#### Branch Findings

This standard was not inspected at branch level.

**PART C**

**LAY ASSESSOR'S SUMMARY**

**(where applicable)**

**Lay Assessor**

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**

\_\_\_\_\_

**D.1 Registered Person'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 29<sup>th</sup> June – 2<sup>nd</sup> July 2004 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary

NO

Comments were received from the provider

NO

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

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 Registered Provider, both views will be made available on request to the Area Office.

**D.2 Please provide the Commission with a written Action Plan by 29<sup>th</sup> October 2004 , 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

NO

Other: <enter details here>

**Public reports**

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



**Registered Person's statement of agreement/comments: Please complete the relevant section that applies.**

**Print Name** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Designation** \_\_\_\_\_

**Date** \_\_\_\_\_

**D.3.2 I Sally Heaven-Richards of NCH West Midlands 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** \_\_\_\_\_

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