Making Social Care Better for People



# inspection report

# ADOPTION SERVICE

Northamptonshire County Council Adoption Service

Norborough House Coverack Close Delapre Northampton NN4 8PQ

*Lead Inspector* Rosie Dancer

Announced Inspection28th November 200510:00

The Commission for Social Care Inspection aims to:

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

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

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

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

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

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

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# SERVICE INFORMATION

| Name of service  | Northamptonshire County Council Adoption Service                        |
|--|---|
| Address  | Norborough House<br>Coverack Close<br>Delapre<br>Northampton<br>NN4 8PQ |
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| Provider Web address   |   |
| Name of registered<br>provider(s)/company<br>(if applicable) | Northamptonshire County Council   |
| Name of registered<br>manager (if applicable)                | Sue Lowe  |
| Type of registration   | Local Auth Adoption Service   |
| No. of places registered<br>(if applicable)                  | 0   |
| Category(ies) of<br>registration, with number<br>of places   |   |

# SERVICE INFORMATION

#### Conditions of registration:

#### Date of last inspection

This is the first inspection under The Local Authority (England) Regulations 2003.

#### **Brief Description of the Service:**

Northamptonshire's adoption agency is part the local authority services for children. The agency is constituted as a service under current legislation that requires local authorities to provide or make provision for adoption services.

The agency is a member of an adoption consortium, adoption 7 that comprises of five other local authorities and two voluntary adoption agencies.

The agency accepts applications from people wishing to adopt a child from England and those wishing to adopt a child from another country. The agency recruits, prepares, assesses and approves adopters, provides post adoption support, places children with adoptive families and provides a service to birth families and offers birth records counselling.

# SUMMARY

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

This inspection was the first inspection of the adoption service provided by Northamptonshire. The manager and her staff had prepared well for the inspection. The openness and cooperation of everyone involved meant that the inspection process could be carried out effectively and efficiently.

The inspection was carried out over three days by two inspectors. Senior personnel were interviewed, as were front-line workers and administrative staff; two elected members of the council were also interviewed. The lead inspector observed one of the adoption panels and interviewed the panel chair. Four adoptive families were visited and their case files examined, children's adoption files were also inspected. Policies, procedures, professional practices and the department's recruitment procedures were inspected.

Completed questionnaires from prospective adopters (10), professional advisers (4) and placing social workers (14) also informed the inspection.

#### What the service does well:

The preparation groups were found by adopters to be useful and informative and the agency arranges for training sessions for prospective adopters family and friends.

The staff with whom the inspectors met were found to be committed individuals.

Some good examples of innovative work were noted as having been carried out by individuals in the adoption and permanence teams.

The Northampton adoption support forum, a multi disciplinary team was a useful resource to social workers and other professionals in terms of support, advice and training in adoption issues.

The arrangements for archived files were excellent.

The office premises were accessible, secure and had good facilities for direct work with children.

#### What has improved since the last inspection?

This is the first inspection under The Local Authority (England) Regulations 2003.

#### What they could do better:

A review of the organisation of adoption work and the adequacy of staffing levels is urgently required to ensure that the overall management of all adoption work is of a consistently good quality.

The panel processes need to be underpinned by clear policies and procedures

A more robust approach needs to be taken in the decision-making processes.

The services to birth parents and families require further development.

Quality assurance of practice needs a more robust approach to be taken.

The practices in respect to recruitment of staff and personnel records need some attention.

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

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

# **DETAILS OF INSPECTOR FINDINGS**

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## **Staying Safe**

#### The intended outcomes for these standards are:

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

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

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

Overall the adoption teams arrangements for assessing and approving adopters were satisfactory. However, there were some areas of inconsistent practice that need to be addressed in order to ensure the safety and well-being of all children is promoted.

#### **EVIDENCE:**

The recruitment team had developed a recruitment strategy for fostering and adoption; this included a clear strategy to target recruitment from black and ethnic minority communities.

The agency, as part of the recruitment strategy, organises evenings for prospective adopters and fosters carers during which social workers discuss the needs of children waiting for a placement and show video profiles of some of the children. The aim of these evenings is to involve prospective adopters in finding a child whose needs they could meet.

It was reported that where a possible match has been identified as a result of these evenings there is a fast track procedure in place to enable a placement to be made in a timely way.

The majority of adopters were satisfied with the response to their initial enquiry one adopter commented:

'We were most satisfied with the speed of the response'

A number of adopters stated that they had found the information evenings held useful and informative.

However, some adopters reported that they had found the wait for allocation of a social worker to undertake their assessment and the waiting time from approval to placement frustratingly long. One adopter stated that they had found the process:

' A slow and painful experience.'

A number of adopters expressed difficulties in contacting the adoption team, with some stating that messages left were not always responded to.

A minority of adopters were of the view that age or marital status had led to their application having been given a low priority. Clearly the primary function of the service is to meet the needs of the children, however, a more sensitive approach to diversity issues would ensure that adopters anxieties about such issues would be minimised.

The preparation training was run on a rolling basis. Domestic, intercountry adopters and foster carers who were hoping to adopt the child placed with them were expected to attend this training. Single adopters had been invited to bring a support along to the sessions.

There were also preparation-training sessions run for friends and family members three times a year.

A useful calendar of training events was provided to each prospective adopter.

Intercountry adopters were also encouraged to attend sessions run by the Overseas Adoption Centre.

There was one case noted of intercountry adopters not having attended preparation training. The couple were recommended as prospective adopters and subsequently approved on the basis that work could be carried out between approval and matching. In effect, the assessment process was incomplete in this case.

Adopters were provided with an opportunity to give their views about each session via a questionnaire. The adoption team periodically consider the

questionnaire responses, and changes to improve the arrangements or content can be made.

Adopter's comments about the training sessions included:

'Useful, brilliant'

and

'The preparation meetings were good'

The quality of the adoption assessments were variable, most clearly identified the adopters capacity to look after children in a safe and responsible way, and provided evidence of their competencies and strengths. However, for some assessments, missing information was noted for example:

- In one case a CRB check on an adult child living in the household had not been carried out
- A lack of consistency in obtaining references from employers where the employment was in a childcare service
- A lack of consistency in evidencing that health and safety checks had been carried out and issues identified had been addressed. It would also be good practice to include on the health and safety form a section in respect to the safe storage of guns or other weapons that may be owned by the adopters.
- The months of employment on adopters' career histories were not always recorded, this being important to ensure that any gaps in employment can be followed up

General issues, which needed addressing, included ensuring that all Forms F assessment reports and second opinion reports are signed.

Second opinion visits are carried out routinely and some good examples of second opinion reports were noted.

Forms E assessments in respect to children were of varying standards, and there was evidence of shortfalls in the quality assurance process. For example:

- On more than one occasion a lack of clarity about who was the birth father
- In one case a lack of clarity about the outcome of an assessment of a family member

- There was a lack of consistency in obtaining reports from foster carers about children
- Some assessment reports had not been subject to updating.

None of these significant issues had been identified through the quality assurance processes in place.

Where foster carers wish to adopt a child placed with them the foster carers link worker carries out an assessment on the adopters in respect of their suitability as adoptive parents. If the foster carers wish to continue fostering the adoption support services provided are via the fostering and childcare teams. This is further discussed in the management section of this report.

Two adopters who had waited a long time for a match reported that they had felt unclear about the activities that take place in respect to family finding after they had been approved at the panel. The manager acknowledged that written information about the matching process was in the development stage; this needs to be progressed.

There were guidance documents in place, for social workers, in respect to the matching process. There is also a draft matching report format that had recently introduced. In practice the quality of the matching process was variable and for some matches there was little evidence of management oversight.

It was planned that in 2006 a more measured approach to matching will be taken. There was a multi-disciplinary group of interested professionals, who meet on a regular basis, to propose and implement changes to improve practice. One of the areas they were working on was the matching process. A training package for social workers and tools for them to use in assessing potential matches were being developed by this group.

Adopters reported that they felt informed about the needs of the child and confirmed that there were opportunities to meet with the child's foster carers. Some staff interviewed were of the view that life appreciation days should be held in each case, to ensure that the matching process is comprehensive as is possible.

Evidence was noted that adopters make a family book about themselves to share with a child for who a match with them is made.

Northamptonshire operates two adoption panels. The panel policies and procedures need to be developed in line with regulation and standards. The respective panel dates are arranged in advance and were being held in a timely way.

The panels were properly constituted and there was an induction process in place for new panel members; this included an expectation that members observe two panels. Panel members had been provided with training relevant to their role. Training in the complexities of inter country adoption had not been provided to panel members and it is strongly recommended that such training is arranged.

All adopters are invited to attend panel; it was noted from the panel observed that adopters attending were treated with sensitivity. There was a mixed view from adopters about their experience of attending panel. One adopter stated 'it was scary but appropriate questions were asked', another adopter said that they had been made to feel inferior.

There was a tracking system in place whereby panel are informed about the progress of cases on a quarterly basis. The panel chair stated that it would be useful for panel to be provided with details of the family finding efforts for each child in order that panel are kept up to date with progress in this area.

There is a system for feedback to the agency where there are any issues about the quality and content assessments presented.

It was noted from reading past panel papers that a couple were recommended for approval, subject to CRB clearance. This practice seriously affects the safeguarding of children and must cease immediately.

The administration of the panel was satisfactory. The panel administrator was described as 'hard working'. The panel minutes were satisfactory but need to include clear reasons for the recommendations made. The minutes as filed on adopters and adoption files do not show the attendees; it would be good practice to ensure that attendees' names appear on the filed document.

The decision maker was not routinely considering all of the information available in respect to each case when making his decisions. The decision maker needs to make sufficient time to fully consider all of the information available prior to making his decision. This will ensure the decision making process is as thorough as possible.

Letters from the decision maker were being sent out in a timely way.

There were recruitment and selection procedures general to Northamptonshire County Council. These procedures, being general to the County as an employer, did not reflect all of the requirements of the Adoption Standards and Regulations. For example, the service does not follow up written references with telephone enquiries. In addition one of the staff files viewed showed that a member of staff had commenced employment prior to CRB clearance. No member of staff should begin employment until a satisfactory CRB check has been obtained. The recruitment procedures must be amended and the recruitment practice tightened.

In addition it was found that not all of the social workers carrying out assessments of adopters were social work qualified. This had been recognised as an issue prior to the inspection and arrangements were being made for these workers to gain such a qualification. Arrangements were in place to ensure that the work carried out by these unqualified workers was supervised by one of the principal social workers. As the commitment required in studying for such a qualification is significant, consideration needs to be urgently given to how these workers will be supported in their studies.

There was a child protection policy in place. This needs to include details of the arrangements for staff and others to contact CSCI and must clearly state that clear records are made and kept in respect to such issues.

## **Enjoying and Achieving**

#### The intended outcomes for these standards are:

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

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

#### 6,18

The agency provides some support to adopters to encourage successful placements. The agency needs to monitor and keep under review the service delivery to ensure that the casework is manageable for social workers and that support can be provided in a timely way.

#### **EVIDENCE:**

The arrangements for support to adopters in Northamptonshire were complex. There were support workers for adopters who were managed within the adoption team and the support workers for the children were managed within the permanence team.

Support services in place run by the adoption team included:

- Support groups
- Newsletter
- Social events
- Family days
- Links with other adoptive families
- Parenting group
- Support from an allocated linkworker
- The duty system

The majority of adopters reported that the support provided to them by their support worker from the adoption team was good. However, two adopters stated they were very unsatisfied with the support that had been provided to them.

One adopter with children placed reported that:

'We do not seem to have any support regarding any problems that come up.'

Another who had adopted reported:

'I feel that there is a lack of support after adoption'

Some adopters reported that the dedicated answer phone, for the adoption team, was not always responded to in a timely way.

Support services in place run or commissioned by the permanence team for children included:

- One to one work with children preparing them for adoption
- Play therapy
- Access to external therapeutic organisations
- Life story work
- Work with older adopted children on a needs basis

While there were some good pieces of work evidenced, some staff stated that the volume of work was such that early intervention was not always possible.

The systems for referral to the permanence team had been informal with work having been taken by them in an ad hoc way. This had been recognised as difficult for the team to manage and at the time of the inspection the manager of the permanence team had been attending the two monthly adoptiontracking meetings. Attending the meetings was providing the manager with a clear view about work that would be likely to be referred to the team. The effect had been that a more informed approach could be taken in respect to the referral and allocation of adoption support work.

However, it was stated that due to pressure of work in some of the childcare teams there was an expectation, by some managers and social workers, that all life story work would be passed to the permanence team, there was not the capacity within the team for them to take on this level of work.

The situation needs careful monitoring and regular review to ensure that the wide range of adoption support work carried out by the permanence team is accessible to all relevant children and can be carried out in a timely, planned and manageable way.

While there were some adoption support plans viewed there was little evidence that these were being devised until a placement was made. This led to a lack of clarity about what support was needed, and what support could be arranged, during the crucial stages of matching and introductions. This also meant that panel was not being informed about the support plans when considering their recommendation.

It was stated that intercountry adopters had access to a local support group.

There was a clear policy and procedure document in place in respect to disruptions of fostering and adoptive placements that included the requirement for such meetings to be chaired by an independent person. However in practice disruption meetings were not taking place in every case; it seemed that social workers made the decision as to whether to convene such a meeting or not. Following every disruption a formal meeting should be held, in a timely way, and the findings should be disseminated across the service and be used as a learning process.

The minutes of the disruption meetings that had been held were noted as being, detailed and contributory issues had been identified. It was not however clear as to if the findings had been widely shared across the teams in order to use them as a learning process.

The agency has access to legal and medical advice through the panel advisers. Written protocols in respect to advisers need to be developed.

The Northamptonshire Adoption Support Forum is Multi-disciplinary team with representatives from health, education, children's psychology service, voluntary agencies, adoptive parents and the adoption team. The work of this team included, training, about adoption issues for, health visitors, school nurses, teachers and other interested professionals, providing information leaflets about adoption to a range of professionals such a teachers, running an adoptive parents consultation group, weekly consultation sessions for social workers by the clinical psychologist, training for social workers in improving the educational achievements of children through the 'Virtual School' project.

This service was key in developing other professionals' knowledge and understanding about adoption issues.

## Making a Positive Contribution

#### The intended outcomes for these standards are:

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

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

#### 7,8,9

The service to birth parents in Northamptonshire is in the early stages of development; there was little evidence noted of birth parents involvement in the planning for their children and little evidence of meaningful support having been provided to them, in a timely way.

#### **EVIDENCE:**

The manager identified in the self-assessment questionnaire that the service to birth parents was a developing service. Further services were being developed in line with new legislation.

There was little evidence of a strategic approach to providing support to birth parents when the plan for adoption has been identified.

There was some evidence of some sensitive work having been carried out in some cases but this seemed very dependant on individual social workers skills, experience and capacity, in terms of caseload, to carry out this work.

There is a confidential service, for birth parents, which is provided by an independent organisation. This service includes in-depth counselling, advocacy, advice and support. Leaflets informing parents of this service are generally sent out, by the local authority, after panel has approved a plan for adoption. Birth parents should have the option to use the service at a far earlier stage. A more proactive approach could be taken to inform parents of this service such as providing details of the service to local childcare solicitors and GP surgeries.

There was an excellent piece of work noted where a relinquished/abandoned baby had been taken to be placed with adopters in mothers country of origin. The work carried out to achieve this had been done in a very skilled, sensitive and professional way. There was little evidence noted of parents involvement in the planning for their child; a guidance sheet was about to be introduced for social workers which will require them to include, in the Forms E, birth parents views and record where a birth parent has declined to offer to read the report. A checklist, which includes reference to the views of parents, had also been developed for panel members to use. These documents will clearly evidence that parents' views have been sought and considered.

It was reported, from a number of sources, that life story work, including books, was not being completed in a timely way. As this work is key in helping children understand their situation a higher priority needs to be placed on ensuring that all such work is progressed in a timely way.

There are arrangements in place in respect to letterbox contact. A dedicated member of the adoption team administers these arrangements. Overall the system seemed to work well.

However, in respect to the commencement of indirect contact for one child, one adopter reported a significant delay.

### Management

#### The intended outcomes for these standards are:

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

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

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

There was a lack of strategic planning in the management of the adoption work; this was affecting the ability of managers and staff to provide an effective and efficient service.

#### **EVIDENCE:**

The agency has a statement of purpose that outlines its aims and objectives. However, some of the content would seem to be aspirational rather than descriptive of the service delivery. The statement of purpose does not comply with Schedule 1 of the regulations, and must be amended.

The adoption board had ratified the statement; the portfolio holder for children and young people's service in the cabinet had subsequently approved the statement. There was evidence noted which confirmed that the statement is subject to amendment when required.

The agency was using the guide for children produced by BAAF and had included some local information about adoption in this guide; some further additions are required to the guide to ensure that it meets regulations. The guide is not suitable for all age ranges and levels of functioning and a guide for younger children needs to be developed.

A number of adoption policies and procedures were being subjected to update in line with the Children and Adoption Act 2002.

The agency had developed information packs. One adopter commented:

'The information given to us prior to assessment was comprehensive and informative.'

These packs were provided to intercountry adopters and helpful contact numbers and information about other resources was provided.

There was also an information pack for prospective adopters friends and family; this was useful in informing the support network about areas in which support may be required.

It had been acknowledged, by the manager, that there were gaps in the written information provided to adopters in some areas of the work and it was confirmed by her that work was underway to address this.

There were various systems in place in respect to monitoring and controlling the agency. These include tracking of all children waiting for adoption, requests for feedback from adopters about various stages of the process, a quarterly meeting of the adoption board and weekly briefings between the director of social services and the portfolio holder. There had also been the recent appointment of a business manager for adoption and fostering which will allow for further development in this area. Reports were provided to the executive on an annual basis; the frequency should be twice yearly as a minimum.

The adoption manager was suitably qualified and experienced in adoption matters and the statutory checks required in respect of her employment had been completed. She was supported in the management role by two principle social workers. Some of the arrangements for the management of the adoption work were unsatisfactory. For example, the policy that adoption assessments and support to foster carers wanting to adopt was managed within the busy fostering team, clarification for some social workers about the arrangements for referral of cases from the childcare teams to the permanence team was needed and quality assurance of practice was not always effective. In addition there was evidence to show that the adoption team was not sufficient in terms of number; for example the training session for November 2005 had been cancelled due to a waiting list for allocation of adopter assessments. It was also stated by a number of sources that the arrangements for administrative support were insufficient; this being in terms of admin time not the personnel involved.

The adoption service manager had been absent from the adoption service for approximately twelve months and while this may account for some of the shortfalls noted urgent attention needs to be given to improving the management arrangements.

The members of the adoption team and the permanence team were dedicated individuals who were committed to the work they carry out. Members of the team who did not hold a social work qualification had made a commitment to gain such a qualification.

A number of adopters commended the adoption team. The following comments were made:

- 'I found the adoption team friendly and helpful'
- 'Everyone is supportive'

Conversely two sets of adopters were dissatisfied with the service from their social worker with one couple commenting that there had been a lack of consideration shown to them by their worker.

As a part of the inspection process it is routine to meet with childcare social workers to discuss their role. On this occasion it was disappointing that only two social workers from one of the four fieldwork teams turned up to meet the inspectors as clearly it has not been possible to gain a representative view from the childcare workers about the work they do and the support they receive in their role. The social workers who met with the inspectors stated that they found the adoption team supportive; questionnaires received were also overall positive about working relationships with individual adoption workers.

The children' teams were reported as having a high vacancy rate and it was stated that some children had inexperienced workers holding their case. It was noted from the panel papers viewed that panel had concern about an unqualified worker holding a complex adoption case. Some of the children's' files viewed did not provide evidence that reviews were being held in line with requirements; it was not possible to establish if this was due to paperwork having not been filed on the relevant files or a case of reviews having not been held. These issues need to form part of the review of management arrangements.

In terms of general employment conditions overall staff were satisfied. It was reported that training opportunities were reasonable although at times it was difficult to find the time to attend and staff in the adoption team felt well supported through supervision, both formal and informal, and peer group support.

However, there were some issues raised by adoption staff in terms of their working conditions that had left them feeling undervalued.

Adoption social work staff stated that there is an identified link worker from the adoption team to each of the fieldwork teams. However, it was stated, by various sources, that since the team had moved the links in terms of working relationships were not as strong as they had been.

A sample of adoption files for children was viewed. The files did not contain all of the required information and there was no evidence of decisions made during supervision or of any effective management oversight.

Files are also kept on adoptive applicants. Again there was no effective management oversight of these and while in general the files were found to be well ordered some gaps in information was noted for some. For example, evidence of CRB clearance was absent on one file, minuets of a significant meeting in respect to a potential child protection issue was absent from another file, notes from assessment visits were not routinely retained and written recording was not signed with a full signature.

The agency should produce guidance on the content and maintenance of files and ensure that files are subject to regular audit.

There were clear arrangements in place in respect to access to records.

The arrangements for record storage within the adoption team building need to be subject to a risk assessment; the arrangements for the archived files were excellent in terms of the arrangements for accessing files and the storage facilities.

Not all of the Personnel files viewed met the regulations and two files that were chosen to view could not be found.

The office premises were accessible during normal office hours. There were good facilities for social workers to use in carrying out direct work with

children. Appropriate security systems were in place, including security and back up of the IT systems.

# **SCORING OF OUTCOMES**

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

**4** Standard Exceeded **2** Standard Almost Met (Commendable)

**3** Standard Met (No Shortfalls) (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion "N/A" in the standard met box denotes standard not applicable

| BEING HEALTHY                     |  |  |
|-----------------------------------|--|--|
| Standard No Score                 |  |  |
| No NMS are mapped to this outcome |  |  |

| MAKING A POSITIVE |  |  |
|-------------------|--|--|
| CONTRIBUTION      |  |  |
| Score             |  |  |
| 2                 |  |  |
| 2                 |  |  |
| 2                 |  |  |
|                   |  |  |

| STAYING SAFE      |     |  |
|-------------------|-----|--|
| Standard No Score |     |  |
| 2                 | 1   |  |
| 4                 | 1   |  |
| 5                 | 2   |  |
| 10                | 1   |  |
| 11                | 3   |  |
| 12                | 2   |  |
| 13                | 2   |  |
| 15                | 3   |  |
| 19                | 1   |  |
| 24                | N/A |  |

| ENJOYING AND ACHIEVING |   |  |
|------------------------|---|--|
| Standard No Score      |   |  |
| 6                      | 2 |  |
| 18                     | 2 |  |
|                        |   |  |
|                        |   |  |

| ACHIEVING ECONO  | DMIC WELLBEING    |
|------------------|-------------------|
| Standard No      | Score             |
| No NMS are mappe | d to this outcome |

| MANAGEMENT  |       |  |
|-------------|-------|--|
| Standard No | Score |  |
| 1           | 1     |  |
| 3           | 3     |  |
| 14          | 2     |  |
| 16          | 1     |  |
| 17          | 2     |  |
| 20          | 1     |  |
| 21          | 1     |  |
| 22          | 3     |  |
| 23          | 3     |  |
| 25          | 2     |  |
| 26          | 3     |  |
| 27          | 3     |  |
| 28          | 1     |  |
| 29          | 3     |  |
| 30          | N/A   |  |
| 31          | N/A   |  |

#### STATUTORY REQUIREMENTS

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

| No. | Standard | Regulation                 | Requirement  | Timescale<br>for action |
|-----|----------|----------------------------|--|-------------------------|
| 1   | AD4      | 7(2) e<br>8(2) g AA<br>Reg | The manager must<br>ensure that the<br>assessments in respect<br>of children and<br>adopters meet<br>regulation with specific<br>reference to the issues<br>detailed in the main<br>body of this report.   | 01/12/05                |
| 2   | AD19     | 11 2003<br>regs            | The recruitment policy<br>and procedure<br>documents need to<br>reflect recent legislation<br>and good practice<br>issues. No member of<br>staff is to begin work<br>until satisfactory<br>information in respect<br>to his or her suitability<br>has been received. | 01/12/05                |
| 3   | AD2      | 9 2003<br>Regulations      | The child protection<br>policies and procedures<br>must include all points<br>in Regulation 9  | 31/01/06                |
| 4   | AD1      | 2                          | The statement of<br>purpose must comply<br>with Schedule 1 of the  | 31/01/06                |

N/A

| 5 | AD1              | 3                      | 2003 regulations and<br>should be approved by<br>the executive.<br>The children's guide<br>must comply with<br>schedule 2 of the 2003<br>regulations and<br>consideration should be<br>given to producing a<br>guide for less able<br>children.  | 28/02/06 |
|---|------------------|------------------------|--|----------|
| 6 | AD14AD16AD20AD21 | 10                     | <ul> <li>There must be a review<br/>of the management<br/>arrangements. The<br/>review must include: <ul> <li>The adequacy of<br/>staff in terms of<br/>numbers</li> <li>The effectiveness<br/>of management<br/>arrangements for<br/>adoption work not<br/>being carried out<br/>within the<br/>adoption team</li> <li>Quality control<br/>issues as<br/>identified in the<br/>main body of this<br/>report</li> <li>The arrangements<br/>for reviewing<br/>cases in a timely<br/>way</li> <li>The commission<br/>must be kept fully<br/>informed about<br/>the review and<br/>any decision<br/>reached.</li> </ul> </li> </ul> | 31/03/06 |
| 7 | AD25             | 7(2) & 8(2)<br>AA Regs | Case files for adopters<br>and children must<br>contain all required<br>information and be<br>subjected to regular<br>auditing arrangements.   | 28/02/06 |

| 8 | AD28 | 11 2003<br>Regulations | Personnel files for any<br>person working for the<br>purposes of the<br>adoption agency must<br>contain all information | 31/01/06 |
|---|------|------------------------|---|----------|
|   |      |                        | as required by  |          |
|   |      |                        | regulation.   |          |

#### RECOMMENDATIONS

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

| No. | Refer to<br>Standard | Good Practice Recommendations  |
|-----|----------------------|--|
| 1   | AD3                  | The manager should consider if training in diversity issues<br>would enable all staff to take a more sensitive approach to<br>adopters in this category.   |
| 2   | AD5                  | The manager should ensure that the information in respect<br>to the matching process being developed for adopters is<br>progressed as soon as is possible. |
| 3   | AD10                 | The manager should ensure that panel policies and procedures are developed in line with standard 10.2.   |
| 4   | AD10                 | The panel should not make recommendations subject to CRB disclosure.   |
| 5   | AD11                 | The manager should ensure that training is provided to panel members in the complexities of intercountry adoption.   |
| 6   | AD12                 | The panel minutes should include the reasons for the recommendation and the minutes as filed should include attendees' names.                              |
| 7   | AD13                 | It is strongly recommended that the decision maker takes<br>into account all the information surrounding each case<br>before he makes his decision.        |
| 8   | AD20                 | There should be arrangements put into place to adequately support the unqualified workers in carrying out their studies.                                   |
| 9   | AD6                  | Arrangements should be made to ensure that support to adoptive parents is achieved in planned and timely way.  |
| 10  | AD6                  | Disruption meetings should be held in every case and the finding of such meetings should used as a learning exercise.                                      |
| 11  | AD18                 | Protocols should be developed in respect to specialist advisers.   |

| 12 | AD7  | The service to birth parents needs to be further developed.<br>Independent support should be offered at a much early<br>stage.                                   |
|----|------|--|
| 13 | AD8  | Life story work should be given a higher priority.   |
| 14 | AD17 | Reports should be provided to the executive on at least a six monthly basis.   |
| 15 | AD27 | A risk assessment should be carried out in respect to if<br>there is a risk of fire or water damage to records stored at<br>Norborough House prior to archiving. |

# **Commission for Social Care Inspection**

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