

# inspection report

Local Authority Adoption Services

## **Wiltshire County Council Adoption Service**

County Hall  
Bythesea Road  
Trowbridge  
Wilts  
BA14 8LE

22nd March 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.

<b>ADOPTION SERVICE INFORMATION</b>
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**Name of Local Authority**

Wiltshire County Council Adoption Service

**Headquarters Address**

County Hall, Bythesea Road, Trowbridge, Wilts, BA14 8LE

**Adoption Service Manager**

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

<b>Date of Inspection Visit</b>		22nd March 2004	<b>ID Code</b>
<b>Time of Inspection Visit</b>		10:00 am	
<b>Name of Inspector</b>	<b>1</b>	Delia Amos	128500
<b>Name of Inspector</b>	<b>2</b>	Sally Woodget	113975
<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 NCSC. 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 inspection</b>		Jane Dobson	

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## INTRODUCTION TO REPORT AND INSPECTION

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

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

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

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

The report will show the following:

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

This report is a public document.

## INSPECTION VISITS

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

## **BRIEF DESCRIPTION OF THE SERVICES PROVIDED.**

Wiltshire County Council's children's services are managed within the Department for Children, Education and Libraries. The nominated manager of the adoption agency is the Head of Children Looked After Support and Placement Services.

There are two teams of social workers who undertake the recruitment, preparation, assessment and support of people looking to adopt, based in three separate office sites. The North and West family placement team has one manager overseeing staff on two sites. This team has nine qualified family placement social workers and two support workers. The Kennet and Salisbury team has a manager and six qualified family placement officers. The family placement teams undertake both fostering and adoption work. Inter-country adoption assessments are undertaken by an experienced sessional worker commissioned as the need arises.

The agency has recently created the post of adoption support worker. This worker is managed separately to the family placement teams and has a county-wide brief to develop adoption support services. The role will include the co-ordination of support services, overseeing the letter-box arrangements, and managing direct contacts.

Social workers responsible for the children for whom adoption is being considered are distributed amongst fieldwork child care teams in a number of locations across the county. The council employs two independent reviewing officers who review the first three reviews of Children Looked After.

The agency has an independently chaired adoption panel which meets at least monthly.

Wiltshire County Council is a member of the South West consortium of adoption agencies. The agency has a service level agreement with South West Adoption Network (SWAN) for the provision of advice, counselling and support to people who are involved in the adoption process, including children and adults who have been adopted, birth family members, and adopters.



## 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.)

This report is the first by the National Care Standards Commission under the National Minimum Standards for Adoption, and therefore serves as an audit of the service against the new requirements, identifying developments needed to meet the new requirements within a reasonable period of time. Any more urgent issues are identified in the report.

Inspectors were told that the children's services had undergone significant restructuring. The integration of Children's services, Education and Libraries was providing opportunities for service development; the children's field work teams had been reorganised. There was a newly appointed director of children's services. There had been a number of changes and at this point the family placement teams had not been directly brought into line with the reorganised childcare teams. The agency identified that there were structural issues for the family placement teams, and there was a need for them to reflect the area services.

Staffing shortages were a difficulty for some teams, in particular one of the family placement teams. A number of the shortfalls identified in this report were directly related to pressures on staffing.

This inspection took place at a time when the agency was considering a number of measures which would ensure a more effective delivery of adoption services. An adoption support worker had been appointed to develop services across the county. Specialist workers within family placement were also being considered. The adoption agency was organised in a fragmentary way with differences between local teams leading to inconsistent practice.

The inspectors found that much adoption work was being undertaken by very experienced family placement workers. The need to recruit more foster carers and develop fostering services was impacting on the capacity of the workers to undertake adoption work and this was a concern.

The inspectors overall view of the service was that variable and idiosyncratic practice would be reduced with a more consolidated approach to adoption work. This would include the specific identification of adoption specialists to ensure the promotion of consistent good practice. Staff referred to different cultures in different parts of the county, influencing practice and thresholds.

The inspectors met with five sets of adopters. They met with social workers in each family placement team who undertook adopters' assessments and training, including intercountry adopters. They also met a group of placing childcare social workers from across the county. Questionnaire responses were received from 12 adopters, and from 7 childcare social workers, who between them had placed eight children with Wiltshire adoption agency. There was one response from a birth family member.

Evidence was seen of some commendable practice, on a case by case basis, in the agency's supportive and inclusive approach to supporting carers from a diverse range of backgrounds. In a more strategic sense the agency also relied on links with the consortium to help ensure placement choice for children from black and ethnic minorities. The SSI inspection of children's services (July 2003) identified the need for more complete ethnic monitoring and a sharper focus to responding to the needs of minority groups.

There was evidence seen of some excellent practice in assessments of adopters and in placing arrangements. Practice was however found to be variable, and procedures were not always followed. In one case child protection procedures were not implemented.

There were examples of some creative approaches to providing and supporting placements where there were some complex challenges. In some cases there was insufficient evidence that plans were being implemented with a full consideration of all the factors. The notion of 'hunch'-led planning needed to be more consistently supported by robust decision making. In particular inspectors noted several instances of confusion between fostering and adoption processes and procedures which were not always serving well the needs of the children or the prospective carers.

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

**This standard was not met**

There was a statement of purpose which with minor revisions would comply with regulations. It was shortly to be formally approved by the executive side of the council. Policies and procedures were being revised. There was no children's guide although a plan was in place to produce one.

#### **Securing and Promoting Welfare (Standard 2)**

**This standard was partially met**

The agency had various strategies to recruit adopters although there was no specific written plan for the implementation and evaluation of these strategies. Written assessments of children as evidenced in Form E reports included reference to their views and feelings as far as these could be ascertained. There was a commitment to ensure children were matched with adopters who reflect their ethnic origin and cultural background.

#### **Prospective and approved adopters Standards 3-6)**

**Two of these four standards were partially met and two not met.**

Prospective adopters were provided with a good range of information in an information pack and at information sessions. Most adopters reported they were satisfied with the pre-approval information and with the response they had received from staff, although a few had more mixed experiences. The service evidenced very positive and inclusive responses to applicants who had expected a less helpful response because of their minority status. A number of adopters referred to delays occurring prior to their assessment. Files read indicated that there were some shortfalls and inconsistencies in practice in assessment, for example there was variable practice about contacting previous partners or relevant employers of applicants. Preparation courses were to be reviewed. Inspectors heard that the present courses may not be preparing adopters adequately for the issues they are likely to encounter. It was also identified that issues about child protection awareness and procedures need to be more clearly included in the assessment and preparation of adopters, and in guidance for staff working with adopters. There was a written procedure for the

matching process which was not followed in all cases seen by the inspectors. Some adopters were not clear about the arrangements for matching and there was a need to review the way they were supported through this process. The regular newsletter used to promote children needing placements caused concern to some adopters. The agency was working towards a clearer strategy for working with and supporting adopters. It had recently appointed an Adoption Support Worker and it was anticipated that this post would address some of the identified shortfalls. There was a service level agreement with South West Adoption Network to provide independent support. Information for those wishing to adopt from overseas was to be revised.

**Birth Parents and birth families (Standards 7–9)**

**Each of these three standards was partially met.**

The adoption agency had a recently established service level agreement with South West Adoption Network, SWAN, to provide independent support to birth parents. There needed to be attention given to giving birth parents the opportunity to comment about what was written about them. Direct and indirect arrangements for contact were also evidenced. Some Form Es seen did not evidence adequate information had been sought about the birth family. The appointment of the adoption social worker was seen as a helpful development and she was to have a co-ordinating role with the arrangements for contact.

**Adoption Panels and Agency Decisions (Standards 10-13)**

**One of these four standards was met and three were partially met.**

Policies and procedures of the adoption panel were in need of some revision and updating. Panel members included people with considerable experience of adoption matters although the proportion of managers on the panel may need to be reconsidered. Adopters described panel as well run and fair. This was seen to be the case in the panel observed during the inspection. There was a thorough consideration to the cases presented. The adoption panel was efficiently organised and conducted. Reports were generally circulated in advance although not all information was available before panel. The newly appointed decision maker was committed to ensuring a thorough approach to the information.

**Fitness to provide or manage an adoption agency (Standards 14,15)**

**One of these standards was not met and one partially met.**

The nominated manager of the adoption agency had considerable relevant experience for the role. Not all the relevant managers, including one of the family placement team managers had formal management training. A requirement was made that managers responsible for the adoption service must have an appropriate management qualification. The recruitment practices needed to be revised to more completely comply with the National Minimum Standards.

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

**These three standards were partially met.**

There were variations in the way the family placement teams were run which needed to be monitored more closely to ensure the agency was run in accordance with its statement of purpose. An adoption reference group was an established forum for the consideration of adoption issues across the county and for the development of practice. The Adoption Co-

ordinator also had a key role in promoting county wide developments. There needed to be clearer guidelines about adoption allowances and preliminary consideration had been given to this in the adoption reference group. An annual report in regard to the adoption panel was presented to the executive and a recommendation is made that six monthly reporting should be introduced. Medical and legal advisers were available to the adoption service. There was some concern about whether the legal department had appropriate capacity to meet the needs of the adoption agency.

**Employment and management of staff (Standards 19-23)**

**Two of these five standards were met, two partially met and one not met.**

There were clear written recruitment and selection procedures but some shortfalls were identified where files did not contain sufficient information to meet the requirements. CRB checks needed to be undertaken on staff and a system established for updating them on a three yearly basis. Staff had relevant qualifications. The agency had a strong commitment to training. Inspectors were informed that 43% of staff already had the Post qualifying Child Care Award.

Staff involved in the recruitment, and assessment of adopters were based in three separate sites. They were clear lines of management delegation and responsibility, but inconsistencies between teams about the implementation of policies and procedures. Differences between areas because of staff shortages had an impact on the consistency of the service. Throughout the agency inspectors heard there was insufficient administrative support. Inspectors heard that there was considerable pressure on family placement workers to assess and recruit more foster carers and this had an impact on their capacity to undertake adoption work. The county wide adoption support worker post was managed by the Head of Children Looked After Support and Placement Services, not within the family placement teams. The arrangements for adoption work needed to be more focussed to ensure that the agency gave a consistent response. Staffing shortages were having a major impact on one of the family placement teams. The county council evidenced a strong commitment to staff training including regular evaluation of the programme.

**Records (Standards 25-28)**

**Two of these four standards were partially met and two not met.**

There was a recording policy although there was no consistently established practice of opening a separate adoption file for each child. There were also gaps in records seen. Adopters files contained the required records of status, health and CRB checks, enquiries and written references. Inspectors saw evidence of supervisors' notes on children's files. There was a policy about access to records which was being updated. There was a Complaints Officer; no complaints or allegations had been recorded in the last five years and no separate log was being maintained. Insufficient information was included on staff files to meet the requirement for staff records.

**Fitness of Premises (Standard 29)**

**This standard was not met.**

The family placement service operates from three different county council sites. These were all seen to be generally adequate although security in one office needed to be reviewed, and premises for archive use were not satisfactory. The inspectors were informed that there were adequate measures to safeguard IT systems. There was no specific Disaster Recovery Plan which addressed the safeguarding/back-up of records. This is recommended.

## Reports and Notifications to the Local Authority and Secretary of State

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

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

NO

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

YES

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

NO

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

NO

**The grounds for the above Report or Notice are:**

<b>Implementation of Statutory Requirements from Last Inspection</b> <b>(Not relevant at first NCSC inspection)</b>
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Requirements from last Inspection visit fully actioned?

NA
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**If No please list below**

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

**Action is being taken by the National Care Standards Commission to monitor compliance with the above requirements.**

## STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

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

### STATUTORY REQUIREMENTS

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

No.	Regulation	Standard *	Requirement	
1	LAAS Regs. 2003  3 & 4	LA1	The local authority must produce a children's guide to the adoption service.	22.07.04
2	LAAS Regs 2003  9(1) & (2)	LA4	The local authority must review the child protection policy and staff guidance to include reference to children placed for adoption and ensure that the policy is adequately implemented.	22.06.04
3	AA Regs 1983  8(1)	LA5	Prospective adopters must be provided with appropriate counselling, advice and written information which includes adequate support during the matching process.	22.07.04
4	LAAS Regs 2003  6(2)(b)(i)	LA14	The managers of the adoption service must have appropriate skills and qualifications to undertake the management task.	22.07.04
5	LAAS Regs 2003  11(3)	LA19	All people working for the adoption agency must have a satisfactory CRB check, and a system for updated checks every three years	22.06.04
6	LAAS Regs 2003  11(2)	LA19	The local authority must ensure the fitness of all workers who may be employed by a person other than the authority, including having full and satisfactory information in respect of the matters in Schedule 3.	22.06.04



7	LAAS Regs 2003 12(2)(a)	LA20	The local authority must ensure that there is consistent practice in implementing regular appraisals, and that appraisals are used to inform training needs.	22.07.04
8	LAAS Regs 2003 10	LA21	The local authority must ensure there is a sufficient number of suitably qualified, competent and experienced persons working for the adoption service. Measures must be put in place to address staff shortages in the family placement team, and the insufficiency of clerical and administrative staff.	22.07.04
9	AA Regs 1983 7(2)(a)	LA25	When adoption is being considered for a child, the agency must set up a case record to include the relevant information as specified in this regulation. Adoption file	22.06.04
10	LAAS Regs 2003 16(2)(a)	LA25	The local authority must ensure that adoption records are securely stored to minimise the risk of damage from fire or water, and to safeguard against unauthorised access.	22.07.04
11	LAAS Regs 2003 6(2)(c) and 11(3)(d)	LA28	Personnel files for members of staff and members of adoption panels must contain the required information, including CRB checks, references, documentary evidence of any relevant qualifications and all matters as outlined in Schedule 3 and 4.	22.06.04

## GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

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

No.	Refer to Standard *	Recommendation Action
1	LA2	The agency should have a written plan for the implementation and evaluation of effective strategies to recruit sufficient adopters to meet the needs of the range of children waiting for a placement locally.
2	LA4	The agency should implement a more evidenced based approach to assessment which addresses the issues that adopters are likely to encounter and identifies the competencies and strengths they have or will need to develop needs to be more robustly evidenced.
3	LA3	The agency should ensure that responses to enquiries from prospective adopters are consistent.
4	LA4	The assessment and preparation of adopters should include consideration of their capacity to look after children in a safe and responsible way, and should include safe care guidelines and child protection awareness.
5	LA4	The effectiveness of preparation programmes for prospective adopters should be evaluated and reviewed annually.
6	LA4	There should be more effective systems to ensure that prospective adopters are kept informed throughout the process.
7	LA5	The information available to approved adopters about the matching, introduction and placement process should be reviewed.
8	LA5	The circulation of information about children through the homefinder and stop press newsletter should be reviewed, and the effectiveness of this strategy and its impact regularly evaluated.
9	LA5	The role of the adoption worker should be made clearer to the adopters and should include supporting them through the matching process.
10	LA5	The adoption agency should have a system in place to ask adoptive parents whether they are prepared to agree to notify the agency if their adopted child dies, and to record decisions as per Standard 5.3
11	LA6	The adoption agency should have a clear strategy for working with and supporting adopters.
12	LA6	There should be promptly implemented procedures for disruption meetings and reporting outcomes to panel.

13	LA7	The local authority must ensure that birth parents see and have the opportunity to comment on what is written about them or their circumstances before information is passed to the adoption panel or to adopters.
14	LA8	Information about the child's birth and early life, the birth family's view about adoption and contact should be adequately assessed and recorded.
15	LA9	The agency's strategy for working with birth parents and families, both before and after adoption, should be monitored to ensure workers have sufficient capacity to provide relevant services.
16	LA10	The agency should review its panel procedures to ensure they include all elements listed in Standard 10.2. In particular, this should consider circumstances when there are dissenting views.
17	LA11	The local authority should consider awareness raising, and some basic training, for each panel member, in regard to basic principles of intercountry adoption.
18	LA12	All the necessary information on the prospective/ approved adopters and children should be made available to panel members in advance of the adoption panel. (Standard 2.2)
19	LA15	Telephone enquiries should be made to each referee to verify written references.
20	LA16	The adoption agency should ensure that effective management systems are in place to monitor that all parts of the adoption agency are run in accordance with its statement of purpose.
21	LA17	The executive side of the council should receive written reports on the management and outcomes of the services of the adoption agency every six months.
22	LA18	The adoption agency should ensure that access to legal services is appropriate to the needs of the agency.
23	LA20	The agency should review the organisation and management of workers undertaking adoption work.
24	LA20	The local authority should ensure staff have a copy of the GSCC's Code of Practice
25	LA26	The agency should review procedures about how staff should deal with requests for access or disclosure of information from files.
26	LA27	Collating information about those concerns or complaints that are resolved outside the formal Complaints Procedure should be considered.

27	LA28	Up to date, comprehensive files should be maintained for each member of the adoption panel.
28	LA29	The local authority should have a Disaster Recovery Plan which includes the safeguarding/back-up of records.

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

**PART B****INSPECTION METHODS & FINDINGS**

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

Placing authority survey	YES
Placing social worker survey	YES
Prospective adopter survey	NO
Approved adopter survey	YES
Birth parent / birth family member survey	YES
Checks with other organisations and Individuals	
• Directors of Social services	YES
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	YES
• Interview with children	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
Date of Inspection	22/03/04
Time of Inspection	09.00
Duration Of Inspection (hrs)	48
Number of Inspector days	8
Additional Inspection Questions:	
Certificate of Registration was displayed at time of inspection	NA
The certificate of registration accurately reflected the situation in the service at the time of inspection	NA
Total Number of staff employed (excluding managers)(nb number refers to staff in family placement teams)	18

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

The scale ranges from:

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

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

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

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

## Statement of Purpose

The intended outcome for the following standard is:

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

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

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

### Key Findings and Evidence

### Standard met?

1

A statement of purpose was available and had recently been circulated to staff. With some minor revisions it would comply with regulations and it was shortly to be presented to Cabinet for final approval.

Policies and procedures were generally in place but some updating was required which was acknowledged by the agency.

There was no children's guide. This is a requirement. An Adoption Reference Group had been established within the agency and the production of the guide was part of the work plan of this group.

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

NO

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

NO

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

NO

**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?

2

The recruitment strategy included a calendar of events for prospective adopters and foster carers with information sessions held every two months. Wiltshire has also been part of the South West consortium's adoption recruitment campaign. Evidence was seen that information about children waiting informed how assessments were prioritised. Inspectors considered that the approach were somewhat piecemeal, and did not constitute a specific written plan for the implementation and, particularly, the evaluation of strategies to recruit sufficient adopters. This is recommended.

The agency strives to ensure children are matched with adopters who reflect their ethnic origin and cultural background and inspectors saw evidence of this in cases chosen for tracking. Siblings were placed together wherever possible.

The views and feelings of the child were included in written assessments as evidenced in Form E reports.

#### In the last 12 months:

How many children were identified as needing adoptive families?

18

How many children were matched with adopters?

22

How many children were placed with the service's own adopters?

16

How many children were placed with other services' adopters?

6

How many children were referred to the Adoption Register?

10

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

21

What percentage of children matched with the adoption service's adopters does this represent?

95.5

%

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

3

How many allegations of abuse or neglect were made about adopters approved by this adoption service?

0

On the date this form was completed, how many children were waiting for a match to be identified?

4



## Prospective and approved adopters

The intended outcome for the following set of standards is:

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

**Standard 3. (3.1 – 3.3 and 3.5 - 3.6)**

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

Key Findings and Evidence	Standard met?	2
<p>The information pack sent to enquirers and the information given out at information sessions evidence that Wiltshire had a clear commitment to recruiting adopters from diverse backgrounds. Inspectors heard from some adopters that they had received a more positive response than they had expected in view of their minority status, and the agency is commended on this. It remains a challenge for the agency to recruit adopters to meet the needs of children from black and ethnic minorities. Links with the Consortium have been helpful in respect of such placements.</p> <p>Most adopters reported they were satisfied with the pre-approval information they had received although there were references to a poor response to their initial enquiry in two cases. A recommendation is made about ensuring initial enquiries are responded to appropriately.</p> <p>Prioritising of prospective adopters was evidenced; knowledge about children needing to be matched informed the response that prospective adopters received. In one case the inspectors were told that adopters felt they were a bit too 'rushed' through the process because they were seen to be a likely match.</p> <p>Applicants were given information about the preparation and support services available.</p>		

**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?****1**

Prospective adopters files indicated that they were involved in a formal assessment, preparation and approval process. Delays in assessment were referred to by some adopters and staff indicated that timescales have not always been met because of staff shortages and having to prioritise fostering work.

Satisfactory CRB checks were recorded; other checks and personal references were undertaken. There were some shortfalls and inconsistencies in practice. Files read, and social workers confirmed that the practice had not become consistently established of contacting previous partners or relevant employers of applicants. Some assessment formats included a competency based approach but these were weakly presented and practice was inconsistent. A recommendation is made for the agency to implement a more evidenced based approach which addresses the issues that adopters are likely to encounter and identifies the competencies and strengths they have or will need to develop needs to be more robustly evidenced.

Health and safety checks were included in assessments but there was less evidence of a broader attention to informing adopters about safe care practices in caring for children, particularly where abuse has been a factor in the child's history. In one case there was evidence that the failure to prepare adopters in this way contributed to some concerns, which were not then addressed in a timely way. Appropriate child protection procedures were not followed. A requirement has been made in regard to ensuring the child protection policy and staff guidance includes reference to children placed for adoption and that appropriate procedures must be implemented. The case highlighted that child protection awareness should have a higher profile in the preparation of adopters and the staff who are working with them.

Prospective adopters generally reported that they had been prepared to become adoptive parents in a sensitive way, but some indicated they did not feel sufficiently prepared for the issues they encountered. The needs of older children placed for adoption may have insufficient attention. In some cases adopters had been advised to attend fostering training because of gaps in the training.

Inspectors were told that the current preparation programme for adopters had developed over time from an original BAAF framework and the family placement team were proposing to introduce an updated package of training. Each course is evaluated by feedback from adopters but a more rigorous overall evaluation on an annual basis is recommended.

The inspectors were informed that where prospective adopters are already foster carers of the child they wish to adopt they are entitled to the same information and preparation as other prospective adopters. Three survey responses from adopters who had fostered were critical of the response they had received, one saying they had a poor initial response, another that staff were not easy to talk to, and the third that the courses were irrelevant to them.

Those who were wanting to adopt from another country were generally given initial advice and information by a team manager and referred for an assessment to a sessional worker with experience of intercountry adoption.

Five of the twelve responses from adopters indicated dissatisfaction with the level of communication. A recommendation is made that more effective systems are implemented to keep prospective adopters informed.

**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?****1**

Written information was made available to prospective adopters during the preparation and assessment process about the matching process. This included the role of the Adoption Register. A review of the written information made available to adopters is recommended. Inspectors heard from staff that procedures were not always followed. Records of matching discussions were not always found on files. Social workers completed a matching factors tool, but there was limited recorded input from the assessing worker. In one case a placement was proceeding although matching criteria were not met. The child had been placed with adopters as a foster placement.

A number of adopters indicated that matching processes lacked clarity; that the basis of decisions was not always made clear to them. Adopters described experiencing considerable distress which they felt arose from a single social worker's decision. It is noted that adoption workers were not spoken about as actively supporting prospective adopters through these sensitive discussions. A requirement is made that prospective adopters should have appropriate counselling and advice.

The local authority has a monthly newsletter, the Homefinder, featuring children waiting for foster or adoption placements. Inspectors heard some dissatisfaction from prospective adopters about their experience of this. Three of the twelve written responses from adopters included critical comments about this. In several other instances adopters had applied for children when they were not in the right location. Locations were specified but perhaps should be given more prominence. One referred to the process as mental cruelty, another about the frustration when no-one got back to them when they expressed an interest in a child. An additional 'stop press' newsletter goes out when babies need to be placed. Inspectors heard how nine sets of Wiltshire adopters responded to a baby recently featured in the newsletter, some outside the approval category. The view was heard that this system positively empowers adopters to put themselves forward rather than waiting to be nominated for consideration, and provides placement choice for social workers. That may be the case, but inspectors suggest that the format and circulation of the newsletter should be kept under regular review. There was a need for more robust input from adoption workers in filtering the information and managing any subsequent dialogue with the child's social worker.

The adoption agency had no system in place to ask adoptive parents to notify if their adopted child dies, to explain the importance of the birth family of having this information, and to keep relevant records of the decision. This is recommended. Plans were in place to amend the Adoption Agency Proposal to include the elements of Standard 5.3.

Adopters are encouraged to produce a Family Book with relevant photos. This, together with the Form F was made available to the child's social worker

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

**YES**

**Standard 6 (6.1 – 6.7)**

**Adoptive parents are helped and supported to provide stable and permanent homes for the children placed with them.**

**Key findings and evidence****Standard met?****2**

There was evidence that the agency had a commitment to providing support to adopters to provide stable and permanent homes, and the assessment of support was through the social worker and family placement worker. The view was expressed by several adopters and staff that a more consistent approach would be welcome. The Adoption Support Worker had not been long in post and inspectors anticipated that this post would address some of the shortfalls that were identified. There was insufficient evidence that a clear strategy for supporting adoptive parents was yet established and this is recommended. One of the cases selected for tracking was experiencing frustration having been 'approved subject to the financial issues being resolved.' Survey responses also indicated that adoption allowances were not clear. Another couple expressed confusion about having been advised that they would be supported if they became foster parents to the child in placement rather than adopters. Similarly inspectors met adopters with childcare experience who were puzzled about why they were being asked to become respite foster carers. Other adopters had been asked to foster a particularly challenging placement. The use of fostering experience and training as a way of preparing adopters did not seem well thought out to the inspectors. In two cases the inspectors heard that adopters did not feel sufficiently prepared for a child.

Adopters who were seeking to adopt from overseas were able to access advice from experienced workers and there were links with relevant support organisations.

Life story work was undertaken by family support workers, organised by the child's social worker. Inspectors were told that again practice was variable. In one case prospective adopters expressed some quite negative views about the process and more attention to this sensitive area of work may need to be included in preparation work with adopters.(see also Standard 4)

The recently appointed adoption support worker was to have a key role in developing post adoption services. There was also a service level agreement with South West Adoption Network to provide support. The arrangements for support were being developed by at this point did not constitute a clear strategy.

In cases where there were difficulties or a disruption, the local authority policy was to offer support and for disruption meetings to be chaired by independent reviewing officers. It was also planned that the meeting reports would go to adoption panel. Inspectors noted that a four month delay had occurred in one instance. As one manager said the meeting 'can get lost'. A recommendation is made that disruption meetings should be held within appropriate timescales and outcomes reported to panel.

<b>Number of adopter applications started in the last 12 months</b> (3 intercountry applications)	33	
<b>Number of adopters approved in the last 12 months</b>	20	
<b>Number of children matched with the local authority's adopters in the last 12 months</b>	19	
<b>Number of adopters approved but not matched</b>	22	
<b>Number of adopters referred to the Adoption Register</b>	20	
<b>How many placements disrupted, between placement and adoption, in the last 12 months?</b>	2	

## Birth Parents and Birth Families

The intended outcomes for the following set of standards are:

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

### Standard 7 (7.1 – 7.5)

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

#### Key Findings and Evidence

#### Standard met?

2

The adoption agency had a recently established service level agreement with South West Adoption Network, SWAN, to provide independent support to birth parents. A county council leaflet was available as well as the SWAN information.

Only one response was received from birth parents for the purposes of the inspection. This response was critical of the level of communication and the service provided and made the point that there had, from their perspective, been a failure to provide sufficient support for the parents in dealing with their own problems. Social workers spoke about having insufficient time to give adoption work the priority they knew it needed and the availability of the SWAN service was too new for them to consider that there was sufficient support to birth families.

The adoption agency acknowledged that there was a need to improve practice in ensuring that birth parents had the opportunity to comment on what was written about them and to sign Form Es. This was noted by inspectors in examination of files. A recommendation is made.

### 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?

2

Birth parents were encouraged to contribute to the maintenance of the child's heritage where possible. The local authority facilitated indirect letter box contact or direct contact arrangements with birth parents. Information was made available largely as recorded in Form Es. Form Es were found to be variable in quality. One example seen was extremely limited and gave little indication that DH Assessment Framework guidelines had been implemented or had contributed to the Form E information.

**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?****2**

The strategy for working with and supporting birth parents and birth families before and after adoption includes the contract with SWAN. This was a new development (since November 2003). Social workers reported that there had been insufficient staff and resources for offering an effective service and the SWAN service was too new to assess the impact. Inspectors heard that social workers had variable knowledge and time to provide information about local and national support groups and services. Such work was spoken of as a luxury. The letter box service was described as 'hit and miss' and there was a need for a more comprehensive system. The appointment of the adoption support worker in a county wide role was seen as a very helpful development. Procedures on direct contact arrangements were also to be under the remit of the adoption support worker and there was a need for careful monitoring of the capacity of this worker to undertake all that is being flagged up for the role. It is recommended that this is regularly monitored. Adoption support plans were being introduced.



## 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?

2

The panel procedures are included in the Adoption Agency Procedures. They generally included the relevant policies and procedures as specified in Standard 10.2 although there were some omissions and the agency acknowledged they need some updating. In particular there needed to be a reconsideration of panel membership to ensure that panel members could effectively reflect the statement of purpose of the agency. Procedures for dissenting views were in need of review. In certain cases matters of principle were being cited as reasons for dissent when this was inconsistent with the policy of the agency.

The inspector observed that there was good practice in the panel in identifying issues for feedback to the agency on a case by case basis, although there was a need for a more systematic approach to feedback about the quality of the cases. Evidence was seen from notes about training events (24<sup>th</sup> September 2003 and 18<sup>th</sup> November 2003) that panel has considered the need to develop its quality assurance role.

Prospective adopters in Wiltshire have, since 1999, had the opportunity to attend panel and to be heard. Adopters made positive comments to the inspectors about the experience of attending panel. There was an opportunity for all applicants attending panel to give written feedback to the agency. Inspectors were provided with good evidence that practices around panel attendance have been evaluated and modified.

**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?**

2

The adoption panel was properly constituted. There was an independent chair, and panel members included people with a range of experience of the adoption process. The inspector observing panel considered that the panel process may benefit from a review of the number of managers who were members of the panel. At the time of this inspection this included a childcare team manager and two family placement team managers.

There was a system for recording the relevant experience of panel members, and the interview process with independent members. Evidence was seen that relevant CRB checks were undertaken and that confidentiality agreements were signed. In some cases the information was not available on panel members' files. (see requirement made in Standard 28)

Panel members confirmed that they had valued the opportunity to observe an adoption panel and that induction training is provided.

Training was available to panel members. More training in the basic principles of the law and eligibility criteria for overseas adoption was an identified need. The numbers of such applicants had been very small but the observed panel indicated that some basic awareness raising should be undertaken.

**Is the panel a joint panel with other local authorities?**

NO

**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?**

2

The adoption panel observed was efficiently organised and adopters reported that they had found panels to be well run and fair. Inspectors were told that the number of panels per year had been increased to reflect the increasing workload and to avoid delays.

There were examples of information being presented to panel members just prior to panel although inspectors were told this was not typical. A recommendation is made that all the necessary information should be made available to panel members in advance of the adoption panel (Standard 2.2)

The minutes read were accurate and informative.

**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**

The agency decision maker, the recently appointed Head of Service, confirmed that he received the papers before panel and was committed to giving them careful consideration. Following panel decisions were generally made without delay. There were clear arrangements for conveying the decision to the applicants, to the parents and to the social worker for the child. There was less specific guidance in the procedures about how the decision is conveyed to the child.

## Fitness to provide or manage an adoption agency

The intended outcomes for the following set of standards are:

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

Standard 14 (14.1 – 14.3 and 14.5 – 14.6)

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

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

### Key Findings and Evidence

### Standard met?

1

The local authority corporate structure included a dedicated accountant for the children and families service, and appropriate financial reporting systems. The nominated manager of the agency was a senior manager with considerable relevant experience. The managers directly responsible for the adoption agency were experienced although in some instances, including one of the family placement team managers, lacked formal management training. A requirement has been made that the relevant managers should have appropriate management skills and qualifications. By 2005 each manager should have, or be expected to have, a qualification at level 4NVQ in management or equivalent.

Managers' job descriptions had recently been revised. As stated elsewhere in this report the agency was reconsidering the management and structure of adoption services which would more effectively promote best practice in a consistent way across the county.

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?****2**

Recruitment systems evidenced that appropriate steps were in place to ensure managers were suitable people. Documentation needs to be maintained in line with Schedule 3. The practice of making telephone enquiries to each referee needed to be instigated for future appointments (see also Standard 15)

## 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?**

**2**

The agency referred to evidence from PAF indicators that children are not usually kept waiting long for placement and targets were being attained.

The recently introduced statement of purpose reflected current practice only to a point. The adoption agency needed to take more robust steps to monitor the performance of the different areas in order that policies and procedures were implemented in accordance with the statement of purpose. There was a county wide Adoption Reference Group which included representation from fieldwork, family placement and independent reviewing officers. The terms of reference dated October 2001 continued to have some validity although with current developments some review would be timely. Minutes were seen of the previous three monthly meetings of this group. These evidenced that this was an effective forum for addressing practice and strategic issues. The Adoption Coordinator had a key countywide role in raising adoption issues in the strategic and development team. She represented the service at BAAF and at the SW Adoption Consortium. She did not have management responsibility for the adoption team but close liaison was evidenced.

The local authority had identified an urgent need to increase the range of fostering placements but this was eroding the capacity of the service to respond promptly and effectively to adoption applications.

Staff and managers reported clear roles and lines of communication. In one family placement team there had been staff shortages for some time and the senior post which would have a deputising role to the manager had not been filled. This contributed to differences in the way that areas operated.

Any possible conflicts of interests were addressed through the staff code of conduct. Panel members were asked to declare any possible conflicts of interest to the panel chair, and the inspector was able to observe that good practice was well implemented in this respect. There were systems, i.e. forms and guidelines, to ensure that staff took into account the racial origin, religion, culture, language, sexuality, gender and disability.

There were written procedures for the use of the Adoption Register.

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

0

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

0

<b>Standard 17 (17.1 – 17.3)</b> <b>There are clear written procedures for monitoring and controlling the activities of the adoption agency and ensuring quality performance.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
<p>There were written procedures although the adoption agency recognised that they are in need of revision. There were supervision, appraisal and file auditing policies. The adoption reference group was established as a regular forum for the consideration of adoption issues and for the development of practice. This group had undertaken much work in developing countywide policies and practice. Its terms of reference included overseeing the implementation of government guidance, standards and regulations and legislation as well as producing quality standards for practitioners. Minutes indicated that work recently undertaken included a preliminary review of adoption order and residence order allowances.</p> <p>Satisfactory information was seen about interagency agreements for the purchase of services and for charging for intercountry assessments.</p> <p>The adoption agency produced an annual report for the executive side of the council. It is recommended that these reports should be submitted every six months in accordance with Standard 17.3.</p>		
<b>How frequently does the executive side of the council receive written reports on the work of the adoption service?</b>		
Monthly?		<input type="text"/>
Quarterly?		<input type="text"/>
Less than Quarterly?		YES

<b>Standard 18 (18.1 – 18.5)</b> <b>The adoption agency has access to specialist advisers and services appropriate to its needs.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
<p>The adoption agency had access to a specialist advisers and services. There were two medical advisers from different Health Care Trusts. Inspectors met with legal and medical advisers. They were available for consultation with staff. The legal adviser attended panel by request. The inspectors heard some concerns about the capacity of the legal department to address all the issues presented to it in a timely way, and the adoption panel had identified the need to take this concern to the head of service. A recommendation is made that access to legal services should be appropriate to the needs of the agency.</p> <p>The agency had access to specialist advice and input when required from education and therapeutic services. Social workers indicated that access to therapeutic services was variable, and particularly weak in the south of the county.</p> <p>There were links with the Race Equality Council, and evidence was seen on files that specific information had been sought in assessing cultural needs.</p> <p>Specialist advice when needed about intercountry adoptions was sought from the DfES. The social worker who had undertaken the most recent intercountry assessments was well informed about local networks of support, and specialised training.</p> <p>There were written protocols for the educational and professional advisers.</p>		

## 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?	1
<p>Inspectors were satisfied that Wiltshire County Council had clear written recruitment and selection procedures to ensure that good practice was followed to safeguard children and young people.</p> <p>This inspection was undertaken soon after the annual NCSC inspection of fostering services which took place in January 2004. A number of personnel files were examined as part of that inspection and to avoid duplication a small number was sampled for the purposes of this inspection. Some shortfalls were identified which echo the findings of the fostering inspection. These included the need to follow up written references with telephone enquiries (see also Standard 15), to ensure there was documentary evidence of qualifications.</p> <p>CRB checks had not yet been undertaken on all staff, records sometimes indicating a very dated police check. A requirement is made that CRB disclosures are obtained for all staff and that a system should be in place for them to be updated every three years</p> <p>Most of the workers undertaking adoption work in the family placement teams were very experienced practitioners. The agency had a strong commitment to training and inspectors were advised that 43% of staff already had a Post Qualifying Child Care Award. Knowledge evidenced by some of the staff in family placement work demonstrated a leaning towards fostering, with inspectors noting a vagueness about adoption work in some cases.</p> <p>Birth records counselling was undertaken by social workers with relevant experience in the childcare teams and more recently in the family placement teams. No specific training was evidenced though inspectors were informed that workshops have been provided on occasions.</p> <p>Case files indicated that specialist therapists and consultants were on occasions working with adopters or the children. Detailed information about these people was not made available to the inspectors. As well as needing to ensure that appropriate checks have been confirmed, it would be good practice if more robust recording of the status of different individuals was seen on files and that adopters were informed. An inspector was told in one case that the adopters were very unclear of the role of a particular person who was undertaking some sessional work with them.</p>		



The inspectors were informed that unqualified social workers were not employed to carry out social work functions. There was evidence that some contact arrangements with birth families was undertaken by appropriately supervised workers or by qualified staff. Social workers referred to unqualified workers doing life story work when they had no specific training about adoption issues.

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

YES

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

43

%

**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?****1**

Staff involved in the recruitment, assessment and support of adopters were based in three Family Placement teams, managed by two Family Placement team managers. The level of management delegation and responsibility were clearly defined. The implementation of procedures was not consistent. There were significant differences between the teams, in particular the Salisbury and Kennet team had major staff shortages. The position of senior had not been filled and other staff vacancies were impacting on service delivery. There was not consistent practice about ensuring that training needs were identified through appraisals, or that appropriate procedures were followed.

Clerical and administrative support was described by managers and staff as insufficient throughout the agency. Family placement workers were carrying out some administrative tasks and files were not always maintained in orderly fashion. The panel administrator provided a high level of support and advice and her thoroughness and skill was much valued by social workers in childcare and in family placement teams.

Staff identified that access to IT was limited but improving. The agency identified that the limited availability of IT hardware and paucity of internet connectivity within teams had been a continuing issue which was being addressed and inspectors observed staff adapting to improved provision.

The Adoption Coordinator and the Adoption Support Worker were countywide roles. The Head of Strategy and Development line managed the Adoption Co-ordinator. Line management of the Family Placement Teams was by the Head of Children Looked After Support and Placement Services.

The family placement team social workers were responsible for fostering and adoption. In some cases individual preference and experience had resulted in caseloads that were more predominantly fostering or adoption. A number of staff spoken to expressed the view that they valued the experience of a mixed fostering and adoption caseload, and that one area of work informed the other. Some felt that adoption work was not given the priority it required to do the job well, that fostering emergencies impinged on the work. At the same time there was undoubtedly a pressure on adoption work because of the identified need to recruit more foster carers to provide in- service placements for Looked After Children. The agency's self assessment document notes that the pressure to support/assess foster carers can on occasions conflict and override the interests of the adoption service. Adopters referred to this in survey responses; one commented that their assessment was delayed due to the foster workload of the officers.

In some cases the blurring between fostering and adoption was a concern to the inspectors. An adoptive couple with child care experience expressed confusion about why they had been asked to become respite foster carers. In another case the relevant training for the adopters was seen to be through the fostering process. There are certainly many areas in which the skills required for fostering, permanence and adoption rightly overlap and complement each other, but the inspectors believed there was an unwarranted level of confusion. Practices had evolved in local and idiosyncratic ways.

The inspectors considered that the present arrangements for adoption work were somewhat fragmentary with the involvement of multiple managers and insufficient monitoring of practice

in all areas. A recommendation is made that the organisation of adoption work should be reviewed to ensure that the service delivered is effective and consistent.

Adoption work that takes place in the fieldwork childcare teams is generally undertaken by childcare social workers, sometimes with very limited experience. They also described variable practice and cultures across the county, and their struggle to give adoption work the priority it needed. They expressed confusion about the philosophy of the county in relation to twin tracking and concurrent planning, and their capacity to effectively undertake the work required. An additional issue for Child Health team workers was their marginalisation from the systems, that they did not get the appropriate information or forms, and were uncertain about resources in regard to direct work with disabled children.

Appropriate staffing policies and procedures were available for staff on the intranet or on hard copy with the exception of the GSCC' Code of Practice.

**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?**

1

The agency identified that the number of dedicated adoption workers needed strengthening. There were insufficient staff to meet the needs of the adoption agency and the expanding role and expectations of the adoption service. Inspectors were told that this was being considered as part of a wider service review. A requirement has been made about staffing. Providing adequate administrative support and appointing a senior in the Salisbury team should be particularly addressed.

Strategies to deal with shortfalls in staffing had included prioritising of work, and the occasional use of independent social workers to carry out assessments. There had undoubtedly been an impact from the staff shortage. Four survey responses from adopters referred to experiencing long delays.

The difficulties recruiting to the family placement posts may also be connected with the degree of uncertainty in the teams. Restructuring of general children's services did not include the family placement teams at this point. The expected retirement of one of the family placement team managers, the failure to recruit a senior, and the considerations that were being given to more specialist adoption roles, all create some doubts about how the service will develop. Terms and conditions for staff in some respects encourage retention, but at team manager level there is a disparity with managers in other teams. The service is in a transitional period.

**Total number of social work staff of the adoption service**

26

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

1

**Number of social work posts vacant in the adoption service.**

4

**Standard 22 (22.1 and 22.3)**

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

**Key Findings and Evidence****Standard met?**

3

The staff spoken to expressed no concerns about employment issues. Inspectors saw documentary evidence to indicate that these appropriate employment practices are in place and that this standard is met.

Staff confirmed there was a whistleblowing policy available to them.

**Standard 23 (23.1 – 23.6)**

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

**Key Findings and Evidence****Standard met?****3**

There was a staff development policy and plan which evidenced a strong commitment to training. Training pathways were established for newly qualified staff and for non professionally qualified social care staff. Social workers were encouraged to engage with the PQ framework .

Wiltshire had appraisal guidelines. Information from appraisals contributed to the evaluation of training. As stated elsewhere (Standard 20) there was variable practice about implementing the appraisal scheme. Training co-ordinators regretted that not all appraisals were made available for the regular review of training programmes.

Family placement team members had regular team meetings. External training courses were also accessed.

## 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?

1

Inspectors looked at samples of children's files, and prospective and approved adopters files. There was a recording policy for children's social services which included some excellent guidelines for staff (February 2004). It was not clear about children's adoption files and it was found that there was no consistently established practice of opening a separate adoption file for every child for whom the decision was made that adoption was in his or her best interests. This is a requirement. Where there was an adoption file, practice was seen to be variable. For example, the Form E was not included in one file seen. In another case the inspector found significant gaps in the social worker's recording of some major events. Adopters files contained the required records of status, health and CRB checks, enquiries and written references. Decisions by supervisors were seen on files.

Inspectors were concerned that the storage arrangements for archived adoption files did not sufficiently safeguard against the risk of damage from fire or water. A requirement has been made.

### 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?

2

Inter-agency agreements and consortium procedures were in place in respect of providing relevant information to other agencies and local authorities. Adopters were asked to sign a Data Protection Act consent form agreeing to the collection, storage and sharing of information. There were Access to Records procedures. Inspectors were advised that Wiltshire was in process of producing a booklet on 'Your information and how to access it' and was updating the procedures.

There were some guidelines in the February 2004 Recording Policy document about the arrangements for access to the adoption case records but this policy did not include sufficient detail to meet with all aspects of Standard 26.2 The agency had identified that there was a need to review procedures about how staff should deal with requests for access or disclosure. This is recommended.

**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**

There was a recording policy for children's social services which included some excellent guidelines for staff (February 2004). Files that were examined were not always kept in a manner that reflected the policy. In one or two cases handwritten records were not very legible. As previously stated (Standard 25) the adequacy of the records seen was variable. It has also been noted elsewhere that security of storage facilities needed to be reviewed.

Inspectors were advised that separate records were not kept of complaints and allegations and that none had been recorded in the past five years. The council had a Complaints Officer employed to deal with all complaints. Although this arrangement meets the legal requirement the inspectors considered that the complaints data may not completely reflect the number of complaints. Some case files indicated that adopters had raised some significant issues which had been resolved by a letter or discussion. The opportunity to monitor patterns or themes of such issues is reduced without some form of collation. It is suggested that collating these concerns or complaints which have been resolved outside the formal procedure, could inform practice and it is recommended. Four adopters reported in survey responses that they had never been informed how to make a complaint, two indicated they did not know, and four said they had been told.

**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**

As previously stated the personnel records did not all contain the required information and a requirement has been made.

Adoption panel members did not have an individual file although some minimal records were maintained on each member of the panel. It is also required that up-to-date comprehensive personnel files should be maintained for each member of the panel.

## 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?	1
<p>The family placement service operates from three different county council sites. These were all seen to be generally adequate, although security in one office needed to be reviewed. As previously stated (Standard 25) the premises in which the archived records were stored was also in need of review and a requirement has been made. This issue had been identified in the agency's adoption service review in 2000.</p> <p>Staff used lockable cabinets for the storage of working files. Inspectors were informed that the IT systems had appropriate security arrangements. Managers were confident that the corporate Wiltshire County Council insurance policy was adequate for the purpose.</p> <p>There was no specific Disaster Recovery Plan for the adoption agency which addressed the safeguarding/back –up of records. This is recommended.</p>		



**PART C**

**LAY ASSESSOR'S SUMMARY**

**(where applicable)**

**Lay Assessor**

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**

\_\_\_\_\_

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

We would welcome comments on the content of this report relating to the Inspection conducted on 22 March 2004 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary

YES

Comments were received from the provider

YES

Provider comments/factual amendments were incorporated into the final inspection report - **NB Not all comments were incorporated.**

YES

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

YES

**Note:**

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

**D.2 Please provide the Commission with a written Action Plan by 7 July 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

NO

Provider has declined to provide an action plan

NO

Other: <enter details here>

NO

**Public reports**

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

### D.3 PROVIDER'S AGREEMENT

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

**D.3.1 I, \_\_\_\_\_ of Wiltshire County Council Adoption Service confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the statutory requirements made and will seek to comply with these.**

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

**Signature**

### Designation

Date \_\_\_\_\_

**Or**

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

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

**Signature**

### Designation

Date \_\_\_\_\_

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