



*Making Social Care
Better for People*

inspection report

Local Authority Adoption Services

**Bath and NE Somerset District Council
Adoption Service**

Lewis House

Manvers Street

Bath

BA1 21JG

7th December 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.

ADOPTION SERVICE INFORMATION

Name of Local Authority

Bath and NE Somerset District Council Adoption Service

Headquarters Address

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Certificate number of this adoption service

Date of last inspection

August 2000

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

NA

Date of Inspection Visit		7th December 2004	ID Code
Time of Inspection Visit		10:00 am	
Name of Inspector	1	Marian Denny	125215
Name of Inspector	2	Jayne Ivory	098916
Name of Inspector	3	Not Applicable	
Name of Inspector	4	Not Applicable	
Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the CSCI. They accompany inspectors on some inspections and bring a different perspective to the inspection process.		Not Applicable	
Name of Specialist (e.g. Interpreter/Signer) (if applicable)		Not Applicable	
Name of Establishment Representative at the time of inspection		Sara Worth and Sarah Acheson	

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INTRODUCTION TO REPORT AND INSPECTION

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

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

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

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

The report will show the following:

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

This report is a public document.

INSPECTION VISITS

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

BRIEF DESCRIPTION OF THE SERVICES PROVIDED.

Bath and North East Somerset Council's adoption service is a local authority service located within one of the Council's offices in the centre of Bath.

At the time of the inspection, the adoption service worked as a joint provision with the agency's fostering service. The team manager has managerial responsibility for the fostering and adoption services and is supported by the senior practitioner, who takes lead responsibility for the development of the adoption services. The group manager oversees the work of the adoption and fostering teams. The adoption service is a member of the South West Adoption Consortium (SWAC), which is made up of a number of local authority and voluntary partner agencies.

The service's main purpose is to make arrangements for the adoption of children and in doing so provides a comprehensive, recruitment, training, assessment, approval and support service to prospective and approved adopters. It is also involved in matching adoptive parents and children. Bath and North East Somerset Council's adoption service is linked with the South West Adoption Consortium in seeking and providing placements, as well as the Adoption Register.

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

The service maintains a Letterbox Exchange that supports information exchange in adoption placements.

The agency commissions a specialist inter-country adoption worker to provide an intercountry adoption service. Preparation training, specifically for inter country adopters is available through the South West Adoption Consortium and intercountry adopters are also able to access the adoption multi-agency support services.

The service provides post adoption support services to adopters, children and adults who have been adopted, as well as independent support services to birth parents, through its service level agreement with The South West Adoption Network (SWAN).

PART A SUMMARY OF INSPECTION FINDINGS

INSPECTOR'S SUMMARY

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

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

During the Inspection, the inspection team received nine questionnaires from prospective and approved adopters, five questionnaires from placing social workers and two from specialist advisors. Interviews also took place with several prospective and approved adopters. The responses received from these questionnaires and the information obtained from these interviews has been reflected in the main body of this report.

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

Statement of Purpose (standard1)

This standard was almost met.

Bath and North East Somerset Council's adoption agency had recently reviewed and updated its statement of purpose, which was comprehensive, extremely detailed and contained all the information outlined, in Schedule 1 of the Adoption Services Regulations 2003.

The adoption service provided the British Association of Adoption and Fostering's booklet, "Adoption, what it is and what it means" to children who were to be adopted. The inspectors were advised that the agency, as part of SWAC, had commissioned a South West Children's Guide, which was to be in a child friendly form and suitable for children of different ages.

However, the agency must include a summary of the statement of purpose and complaints procedure in the guides, as outlined in Schedule 2 of the Adoption Regulations 2003, if the agency is to fully meet this standard.

Securing and promoting children's welfare (standard 2)

This standard was almost met

The adoption agency had a clear, written recruitment strategy, which was based on an analysis of the current and predicted need of local children, whose plan was adoption. This strategy was regularly reviewed and up-dated to ensure that it met the needs of the children waiting for adoption.

The adoption agency was a member of the South West Adoption Consortium and worked closely with members of this consortium to widen the placement choice for children needing local adoptive placements. They had also undertaken joint recruitment activity in relation to older children requiring an adoptive placement.

The agency had permanence, family finding and matching policy and procedures, which they had recently revised. This documentation emphasised the importance of children being matched with adopters who best met their needs, including wherever possible placing siblings together and in a family, which reflected their ethnic origin, cultural background, religion and language.

During the course of the inspection, a sample of files were examined. Some shortfalls were found and recommendations were made, which are detailed in the recommendation section of this report. Overall though, the inspectors were of the view that the agency was extremely child focused, with the child's needs, wishes, welfare and safety, clearly at the heart of the adoption process. This was also commented upon by placing social workers, who indicated that the adoption service had been of real assistance in securing and promoting the children's welfare.

Prospective and approved adopters (standards 3 – 6)

3 of the 4 assessed standards were met

The adoption agency recruited adoptive parents, without prejudice and they were treated fairly, openly and with respect through out the adoption process. Initial enquiries made to the agency were responded to in a prompt, friendly, helpful and informative manner. Prospective adopters were provided with clear details regarding the agency's eligibility criteria, information regarding the children in need of adoption, the preparation training and assessment process, as well as the interagency support services available to adopters.

The comprehensive, preparation training provided was extremely informative and provided opportunities for prospective adopters to explore a variety of issues in relation to becoming an adoptive parent. Information obtained from returned questionnaires, together with those interviewed indicated that the preparation training had been excellent.

The agency provided an intercountry adoption service, commissioning a specialist worker to carry out this role. Over the years, this service had developed quite considerably and in collaboration with the South West Adoption Consortium, a specialised, intercountry preparation group had been established. Information from returned questionnaires, together with an interview with intercountry adopters indicated this preparation training was of an exceptionally high standard and provided good preparation for their role as intercountry adoptive parents. They also stated that the service they had received from the agency was of a high standard.

The assessment process used by the adoption service was based on the BAAF form F model and operated within an anti – discriminatory and equal opportunities framework. In considering prospective adopters' ability to provide a safe environment, an extremely detailed, health and safety checklist and action plan was provided. However, this documentation was not always fully completed, and a recommendation was made regarding this matter.

The preparation and assessment process ensured adopters were informed and aware of the importance of addressing issues of discrimination and helping children deal with this. They also learnt of the need for children to understand their history and develop a positive self – esteem through life story work. A recommendation was made in relation to life story work (please see standard 2 of this report, for details.)

During the course of the inspection, the inspectors examined a sample of files and found that the assessments were generally thorough, detailed, insightful and the quality of assessments overall were of a high standard. However, there were three shortfalls found in relation to these files, which resulted in one requirement and two recommendations being made (please see the recommendation and requirement section of this report, for details.)

The inspectors interviewed several adopters, who expressed the view that the preparation, assessment and approval process had been comprehensive, extremely detailed and had been handled in a sensitive, skilful manner. They also stated that the completed form F's had portrayed them accurately. This was further corroborated through information obtained from the placing authorities' and adopters' questionnaires returned to the Commission.

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

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

The inspectors were advised that prior to a match being agreed the agency ensured accurate, up-to-date and full written information was provided to prospective adopters by way of the BAAF form E. Three recommendations were made in relation to the form E 's and were detailed in standard three and twenty-five of this report. In the main though the overall evidence obtained in the inspection was that adopters were well informed about the child placed with them.

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

A clear multi - agency commitment was given to adoption support services, which resulted in an impressive pro-active, integrated adoption support service. This support service was offered to prospective and approved adopters, including intercountry adopters, at all stages of the adoption process with the aim of enabling adoptive parents to provide stable and permanent homes for their children. Adopters indicated they had received good information

regarding these services and were well supported by the agency.

Birth Parents and Birth families (standards 7 – 9)

3 of the 3 assessed standards were met

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

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

The agency had a service level agreement with the South West Adoption Network (SWAN) to provide an independent counselling and support service to birth parents. The agency had also arranged for SWAN to hold a clinic for birth parents, which was held in a local family centre every two months. Details of the support services available to birth parents and families were on the Bath and North East Somerset Website.

Adoption Panels and Agency decision (standards 10 – 13)

4 of the 4 assessed standards were met

The agency had clear, detailed policies and procedures relating to the Adoption and Permanence Panel, which was effectively implemented. This documentation contained all the information required to meet the National Minimum Standards.

The Adoption and Permanence Panel was properly constituted. The membership of the panel included people, who had suitable qualities, as well as a wide range of differing adoption experience.

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

The adoption agency provided an opportunity and indeed encouraged prospective adopters to attend the Adoption and Permanence Panel and provided them with a helpful leaflet about the panel. Those interviewed, together with information obtained from returned questionnaires, indicated that adopters were generally of the view that their attendance at panel had been a well - managed and positive experience.

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

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

2 of the 2 assessed standards were met

The people involved in the management of Bath and North East Somerset Council's adoption agency had the appropriate management skills and financial expertise to manage the work efficiently and effectively. Both managers were well respected and staff had a great deal of confidence in their ability to effectively manage the adoption service. The adoption agency had a written recruitment, selection policy and procedures for the appointment of a manager and staff. The inspectors were able to confirm that these policies and procedures had been strictly adhered to in relation to the appointment of the managerial staff of this agency.

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

3 of the 3 assessed standards were met

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

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

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

The adoption service had access to a variety of specialist advisors from both within and outside, Bath and North East Somerset Council, some of whom included a clinical psychologist, a therapist, a legal and medical advisor, SWAN and BAAF. The agency had written protocols regarding the roles of specialist advisers.

Employment and management of staff (standards 19 – 23)

4 Of the 5 assessed standards were met; the remaining 1 was almost met

Bath and North East Somerset Council had written recruitment and selection procedures for the appointment of staff, which followed good practice guidelines. The inspectors were advised that a system had recently been put into place to ensure all staffs' Criminal records Bureau check was renewed every three years.

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

All staff working within the adoption service were suitably qualified and had childcare experience. They also had experience in carrying out assessments, as well as appropriate experience in relation to family placement work and adoption and were well regarded by their colleagues.

The manager of the service anticipated that by 1st April 2006, 20% of the adoption agency's social workers would have the post qualifying childcare award. A recommendation was

made in relation to this.

The level of management delegation and responsibility was clearly defined. Staff interviewed had a good understanding of the levels of management delegation, responsibility and decision making within the service.

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

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

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

Bath and North East Somerset Council was seen as a fair and competent employer and had sound employment practices. At the time of the inspection, the council was considering introducing a variety of initiatives to attract, recruit and retain staff.

Records (standards 25 – 28)

2 of the 4 assessed standards were met

A recording policy was in place, which provided clear guidelines and expectations regarding recording. Subsequent examination of a sample of, as well as children's files demonstrated some shortfalls in recording (please see standard 25,for further details.) A requirement and recommendations were made, which were detailed in the appropriate sections of this report.

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

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

Bath and North East Somerset Council had recently up-dated its Access to Records policy to ensure that it was compliant with the National Minimum Standards and the Adoption Agency Regulations 1983.

The adoption agency's confidential records were stored securely and there was a policy on access. The service was of the view that all adoption files were securely stored to minimise the risk of damage from fire or water. A recommendation was made in relation to future storage of files and is detailed in standard 29 of this report.

In examining a sample of records, the Inspectors found that not all the written records complied with standard 27.5 and a recommendation regarding this was made. (Please see the relevant section of this report for details.)

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

were stored confidentially and securely. Complaints were investigated promptly and the findings evaluated. Learning derived from such investigations, informed service development and was actioned by management.

Personnel files for members of staff and panel members were examined. Some shortfalls were identified in these files, as they did not contain all the information required, under Schedule 3 and 4 of the Adoption Services' Regulations 2003 (please see standard 11, 18, 19 and 28, for details.) Two requirements and a recommendation were made and detailed in the appropriate section of this report.

Premises (standard 29)

This standard was assessed and met

The adoption agency was located in one Council's offices, Lewis House, which is in the centre of Bath. This is a large office building, which provides accommodation for Social and Housing Services. The premises provided waiting, interview and meeting rooms, as well as kitchen facilities for staff. The premises had disabled access and a lift, which serviced the upper floors of the building.

Inspection of the agency's current accommodation confirmed that there was adequate space for staff, as well as sufficient IT and other necessary equipment to support staff in the effective delivery of an adoption service. The inspectors' were advised of the security in place to safeguard all information contained in the IT system.

The premises had lockable filing cabinets to secure confidential information. Archived adoption files were kept in lockable filing cabinets, in a lockable room. The floor of the building where these files were kept was only accessed via a security-coded door. The premises had an appropriate security system in place to prevent inappropriate access to the building.

At the time of the inspection, the inspectors were informed that there were plans for the service to move to a higher floor in the building. This accommodation would only be used by childcare staff and would essentially be open plan, though there would be small meeting rooms available for managers to undertake supervision and confidential discussions. The inspectors were of the opinion that if the premises were to be fit for purpose, strict safeguards would have to be introduced to ensure all information and records relating to the adoption service were kept completely confidential, safe and secure.

Bath and North East Somerset Council had adequate premises and contents insurance to promptly replace any lost or damage caused to contents of the building or premises. They also had a Disaster Recovery plan, which was specific to the adoption agency.

Reports and Notifications to the Local Authority and Secretary of State

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

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

NA

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

NA

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

NA

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

NA

The grounds for the above Report or Notice are:

Not Applicable

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

Requirements from last Inspection visit fully actioned?

NA

If No please list below

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

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

STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

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

STATUTORY REQUIREMENTS

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

No.	Regulation	Standard *	Requirement	
1	3(1) & Schedule 2	LA1	The manager of the service must ensure all the information contained in Schedule 2 of the Adoption Services Regulations 2003, is included in the children's guide.	30/04/2005
2	The adoption agency regs.1983, 7(2)(e), 8(2)(c), 10(3)(a) & Schedule, part V11	LA4	The manager of the agency must ensure a written report by a registered medical practitioner on the prospective adopters health available to the agency. This information should be taken into account in recommending the approval of a prospective adopter.	8/01/2005
3	The adoption agency regs.1983, 8(2)(h)	LA4	A 28-day waiver notice in respect of the adopters' written assessment should be held on file, where this is applicable.	28/02/2005

4	Local Authority Adoption Service (England) Regs 2003 10(b)	LA18LA28	The agency must ensure that those working for the service are suitably qualified and competent. In view of this, the documentary evidence of the qualifications and registration with the appropriate professional body must be obtained in relation to panel members and specialist advisors'. This evidence must be held on their file.	31/03/2005
5	Local Authority Adoption Service (England) Regs 2003 6(2)(c), 11(3)(d), 15(1) & Schedules 3 & 4	LA11LA18 LA19LA28	The manager of the service must ensure that information is held on all persons who work for the adoption service in accordance with Schedule 3 and 4. This applies to all staff, panel members and specialist advisors, who provide services to the agency.	31/03/2005
6	The adoption agency regs.1983, 7(2)(a), schedule part I and LAC (97) 13	LA25	The manager of the agency must ensure a case record is set up for a child, where the adoption agency is considering adoption for a child. This case record must contain the information specified in the Adoption Agency Regulations 1983 and the guidance provided in the local government circular.	01/03/2005
7	The Data Protection Act 1998.	LA28	The manager must ensure that any person's criminal records bureau check must only be placed on the case record relating to that person.	01/03/2005

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	LA2LA25	It is recommended that all children's adoption files should contain a copy of the form E.
2	LA2	All written assessments of a child/children should be comprehensive and detailed.
3	LA2	Consideration should be given to the training on form E 's being a standing item on the training programme.
4	LA2 LA25	The agency should ensure that clear and appropriate information is obtained for the child about themselves and life before adoption. This information should be provided in a timely manner and in accordance with their needs.
5	LA4	The manager of the adoption agency should ensure that any health and safety checklist and action plan is fully completed.
6	LA11	An administrative system should be devised to evidence the induction programme provided to new panel members.
7	LA21	Current staffing levels within the adoption agency should be reviewed to ensure the needs of the adoption agency are fully met.
8	LA22	The whistle blowing policy, together with permission for its use, should be re –launched. This policy should also include the details of the Commission for Social Care Inspection, as a source to whom issues can be directed.
9	LA25	Case decision forms should be used in a consistent manner.
10	LA25	To aid the legibility of records, consideration should be given to case records being typed. The agency should also ensure that all records are signed and dated, by both staff and managers.
11	LA25	In moving to alternate accommodation in the agency's premises, the agency should undertake a risk assessment in relation to the storage of all adoption records.
12	LA28	Guidance provided by the Commission for Social Care Inspection concerning the portability of Criminal Records Bureau checks should be followed.

13	LA29	The manager of the adoption agency must ensure that in moving to alternative accommodation, the agency's premises are fit for purpose. This will necessitate ensuring adequate safeguards are in place so all information and records relating to the adoption service are kept completely confidential, safe and secure.
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- Note: You may refer to the relevant standard in the remainder of the report by omitting the 2-letter prefix e.g. LA10 refers to Standard 10.

PART B**INSPECTION METHODS & FINDINGS**

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

Placing authority survey	YES
Placing social worker survey	YES
Prospective adopter survey	YES
Approved adopter survey	YES
Birth parent / birth family member survey	YES
Checks with other organisations and Individuals	
• Directors of Social services	YES
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	YES
• Interview with children	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	7/12/04
Time of Inspection	09.00
Duration Of Inspection (hrs)	112.5
Number of Inspector days	7.5
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)	7

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

The scale ranges from:

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

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

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

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

Statement of Purpose

The intended outcome for the following standard is:

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

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

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

Key Findings and Evidence	Standard met?	2
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At the time of the Inspection the agency's statement of purpose had been reviewed and updated. The inspectors were advised that the Head of Service and executive member for social services had formally approved this statement of purpose in October 2004. It was intended that this document would be reviewed on an annual basis, in accordance with the National Minimum Standards. The manager of the service was aware that if the statement of purpose were to be revised, the Commission for Social Care Inspection would need to be advised of any such revision within 28 days.

This statement of purpose was comprehensive, extremely detailed and covered all the areas required under Schedule 1 of the Adoption Regulations 2003. The statement clearly outlined the principles, aims and objectives of the Council's adoption service; its organisational structure, the functions of the service and the procedures in place for recruiting, preparing, assessing approving and supporting prospective adopters. The statement of purpose also provided information as to how operations are controlled, detailing the systems in place to monitor and evaluate the quality and effectiveness of the service. A summary of the complaints procedure was provided and included contact details for the Commission for Social Care Inspection.

The inspectors were also able to confirm that staff in the agency had been consulted about the statement of purpose at the initial draft stage; they were also fully conversant with the revised version and had received a copy. The revised statement of purpose had also been issued to the Director, Senior managers, all staff, panel members, prospective adopters and adopters. They were also advised that the executive members for Social Services had received a copy.

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

The adoption agency provided all children for whom adoption was the plan, with a booklet, entitled "Adoption, what it is and what it means". This booklet, which had been produced by the British Association of Adoption and Fostering (BAAF), explained what adoption meant and provided full details about the adoption process and procedures. It also provided information about independent advocates and the organisations that can assist a child or young person in contacting an independent advocate. In addition, the booklet contained details regarding the former National Care Standards Commission and the Children's Rights Director. The inspectors were advised that the agency ensured that the children's guide was appropriate to the individual needs of the child/ children and adapted it, where necessary. However, the guide did not contain a summary of the statement of purpose and complaints

procedure, as outlined in Schedule 2 of the Adoption Regulations 2003. This information must be included in the children's guide, if this standard is to be fully met.

At the time of the inspection, the agency, as part of the South West Adoption Consortium (SWAC) had commissioned a South West Regional Children's Guide, which to be produced in a child friendly form and suitable for children of different ages. The inspectors were informed that the adoption agency intended to use this children's guide, when it became available.

The inspectors were able to evidence that the adoption agency takes account, in both written and oral communication, of any physical, sensory or learning disability of members of the public, birth families, prospective and approved adopters and any professionals involved in the adoption process.

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

YES

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

YES

Is there a children's guide to adoption?

YES

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

NO

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 adoption agency had a clear, written recruitment strategy, which was based on an analysis of the current and predicted need of local children waiting to be adopted, as well as those in the South West Adoption Consortium. It identified the children who needed adoptive placements and the range and diversity of prospective adopters required to meet this need, along with the recruitment process.

This strategy was regularly reviewed and up-dated to ensure that it met the needs of the children waiting for adoption (October 2004). The inspectors were able to evidence that comprehensive information was kept on all aspects of recruitment, including advertising, media and geographical area.

At the time of the inspection, the agency was recruiting adopters for specific groups of children, such as school age children, sibling groups, as well as black and other ethnic minority children.

In addition to the adoption recruitment strategy, the agency was a member of the South West Adoption Consortium and worked closely with members of this consortium to widen the placement choice for children needing local adoptive placements. The service had also undertaken joint recruitment activity in relation to older children requiring an adoptive placement. The inspectors were advised that the adoption agency ensured that all children waiting for adoption were referred to the Adoption Register.

The agency had revised its permanence, family finding and matching policy and procedures. These written policies and procedures provided clear guidance to staff as to when a child/children should be referred to the Adoption Team for family finding and subsequent action to be taken in the child's care planning. The profiling of the child's needs, visits to prospective adopters and linking meetings were outlined in these documents, together with details about the adoption panel's role and procedures in relation to matching. The child's move to the prospective adoptive family, commencement of placement, as well as post adoption was also provided in this guidance.

These policies and procedures emphasised the importance of children being matched with adopters who best met their needs. It also emphasised that children, wherever possible, should be placed with a family, which reflected their ethnic origin, cultural background, religion and language. However, the documentation recognised that it was not always possible to achieve this ideal match and in these circumstances, children should be matched to a family, who as closely as possible met their needs. This documentation also stressed the importance of sibling groups remaining together, unless this would prevent the individually assessed needs of children being met.

During the course of the inspection, interviews took place with managers, staff, and prospective and approved adopters in the service. The Inspectors also examined a sample of records. Evidence was obtained that in matching a child with approved adopters, the service took the views and feelings of the child into account, as was appropriate to their age and understanding. The child's care plan, recent written assessments of the child, the birth family, potential adoptive parents and their children were also taken into account.

In one of the adoption file's examined though, the written assessment of the child required developing and a recommendation was made regarding this. The inspectors were aware that childcare staff had been provided with some form E training and that there was also a mentoring system in place to assist staff in the completion of these forms. However, in view of the small number of form E's that required completing and the limited experience staff could gain in this area of work, the inspectors recommended that such training should be a standing item in the childcare training programme.

In another child's adoption file that was examined during this inspection no form E could be found. The lead inspector was advised that staff had subsequently found this form on another of the child's files (Please see standard 25.)

During the inspection process, though it emerged that the quality of life story work was variable and not always completed in accordance with the child's needs, as demonstrated in one of the case records examined, where work relating to the child's life story had been delayed for over four months. This was raised with the manager of the adoption agency at the time of the inspection and a recommendation was made regarding this matter.

The Commission received nine questionnaires from prospective and approved adopters. Examination of these questionnaires, as well as interviews with approved adopters, provided evidence that the agency was extremely child focused, with the child's needs, wishes, welfare and safety clearly at the heart of the adoption process. (Please see standard 4, for further details.) The inspectors were also able to evidence that the agency took great care to ensure effective matching took place. (Please refer to standard 5, for the details.)

In addition, there was evidence in the five returned questionnaires, as well as from interviews with placing social workers that they greatly valued the experience and skill of the staff in the adoption service and believed them to be of real assistance in securing and promoting the children's welfare.

In the last 12 months:

How many children were identified as needing adoptive families?

9

How many children were matched with adopters?

15

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

12

How many children were placed with other services' adopters?

3

How many children were referred to the Adoption Register?

3

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

15

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

100

%

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

6

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

X

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

7

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?	3
<p>The adoption agency's recruitment plan, together with the arrangements which had been made to handle enquiries and the information provided prospective adopters clearly indicated that prospective adopters were valued, treated with respect and in a fair and open manner. The information regarding the initial visit and the assessment of prospective adopters, contained in the adoption manual, also reinforced the adoption service's commitment to ensuring prospective adopters would be welcomed without prejudice. The inspectors' examination of a sample of Adoption records, interviews with approved adopters, as well as observation of the Adoption Panel confirmed that the adoption agency was practising in accordance with this documentation.</p> <p>During the course of the inspection, the inspectors interviewed four approved adopters, who informed the inspectors that the initial enquiries made to the adoption service were responded to in a prompt, friendly, helpful and informative manner.</p> <p>Following their initial enquiries, the inspectors were advised that written information had been speedily sent to them, several adopters stated that they had received this information within a couple of days.</p> <p>Examination of this written information confirmed that clear details were provided regarding the adoption agency's eligibility criteria, as well as information regarding the children in need of adoption, the preparation training and assessment process, as well as what prospective adopters should expect from such training and assessment. The role of the adoption and permanence panel was also outlined, including prospective adopters' right to attend the panel when their assessment was presented.</p> <p>On receipt of this written information, prospective adopters who wished to proceed with adoption received an initial visit from a worker. In this visit, further information regarding the preparation courses, the assessment and approval process, as well as the interagency support services available to adopters was provided.</p> <p>During the inspectors' interviews with the four approved adopters, it was confirmed that they had received a written copy of the agency's eligibility criteria. The inspectors were advised that the agency had been very clear and open regarding the eligibility criteria and had ensured that the adopters had a good understanding of this, before proceeding with their adoption application. The approved adopters also indicated that the information they had received following their initial enquiries to the agency had been clear, sufficient for their immediate needs and useful in understanding the adoption process. This information had</p>	<p>3</p>	<p>3</p>

been subsequently expanded upon during the worker's initial visit. There was also very clear evidence from interviews with adopters and the case records that the service had welcomed them without prejudice. These findings were also substantiated in the nine prospective and approved adopters' questionnaires returned to the Commission.

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

With regard to intercountry adoption, the agency commissioned a specialist worker to carry out this work. During the initial visit undertaken by the specialist worker, prospective adopters were provided with detailed information regarding intercountry adoption. In addition, they were also encouraged to access the DFES website for the latest information. The agency ensured that this specialist worker completed all assessments in relation to intercountry adopters.

In interviewing one intercountry adopter, the inspector was informed that the agency's initial response to their adoption enquiry, as well as the information and service provided them in relation to intercountry adoption had significantly improved, since they first contacted the agency over six years ago.

The inspector was also informed about the specialised intercountry preparation group they had attended, which was held in collaboration with South West Adoption Consortium (SWAC). Those who had attended this training stated that it had been of an exceptionally high standard. Moreover, they were of the view that its specialised nature had more effectively prepared and enabled them to develop good networks/ support systems in adopting a child from another country. They described the service that they had received from the agency as "excellent" and had no hesitation referring others to this agency. These and comparable views regarding the agency's preparation training were also expressed in the nine adopters' questionnaires returned to the Commission.

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

Standard 4. (4.1 – 4.9)

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

Key Findings and Evidence**Standard met?****2**

The inspectors were informed that prospective adopters undergo a thorough comprehensive assessment, preparation and approval process.

With regard to the preparation training, the inspectors were advised that for domestic adopters a specific in – house three-day preparation course is provided. The materials and exercises used in this preparation training were continually evaluated and up-dated in response to participants' comments and practice changes. The courses were also, if necessary, structured as much as possible to meet the needs of the specific participants attending the course. In addition, the agency collaborated with the South West Adoption Consortium (SWAC) to provide specific preparation courses for inter –country adopters. The inspectors were advised that these preparation courses took place on a regular basis and met adopters' needs, within the timescale of the adoption standards.

In interviewing adopters, together with information obtained from the questionnaires received by the Commission, the inspectors were able to confirm that the adoption agency had a clear, well-structured and effective preparation programme, which was made available to both domestic and intercountry adopters. They were also advised that the service encouraged and facilitated their attendance in the preparation groups by ensuring the invitation packs were attractively presented and welcoming. The prospective adopters' introduction to the group was warm and friendly, the materials, as well as the discussions in the group extremely interesting and stimulating. In addition, prospective and approved adopters stated that the preparation groups had been held at convenient times and venues.

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

Collation of the information obtained from the inspectors' interviews with adopters, as well as from the returned questionnaires, indicated that prospective and approved adopters' thought the preparation training provided by the agency was of an excellent standard.

The assessment process used by the adoption agency was based on the BAAF form F model and operated within an anti – discriminatory and equal opportunities framework. This model ensured that adopters were considered in terms of their capacity to care safely and meet the developmental needs of children. The agency also used their medical adviser to assist in this process, for example, in the provision of information regarding the child's development. In addition, the agency' had introduced their own detailed, health and safety checklist and action plan, which was completed by a team member, who specialised in assessing the prospective adopters' ability to provide a safe environment. Whilst the detailed nature of this documentation provided an excellent means to assess this, in some of the case records examined by the inspectors, this documentation had not been fully completed. This was discussed with the manager at the time of the inspection and is to be addressed. A recommendation was made regarding this.

During the course of the inspection, a sample of files were examined. The inspectors were able to evidence that the agency carried out the necessary enquiries, health checks and obtains personal references, as well as enhanced Criminal Record Bureau checks in relation to prospective adopters and on all members of their household, who were aged eighteen

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

Overall the inspectors were of the view that the agency's practice was extremely child focused and assessments seen were generally thorough, detailed and of a high standard. This was further corroborated through information obtained in the placing authorities' questionnaires received by the Commission. However, in several files examined the inspectors were unable to find evidence of the 28-day waiver notice relating to the adopters' form F and a recommendation was made regarding this. In another file examined the outcome of the prospective adopter's medical examination had not been obtained prior to panel, though a panel recommendation, as well as an agency decision had been made. A requirement was made regarding this issue. This was discussed with the manager of the service, at the time of the inspection, who agreed that this task of work should have been completed prior to panel and would ensure that such an issue did not arise in the future.

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

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

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

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

Standard 5 (5.1 – 5.4)

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

Key Findings and Evidence**Standard met?**

3

The inspectors were advised that prospective adopters were given information regarding the assessment, approval, matching, introduction, placement processes, as well as the support services provided by the agency. (Please see standard 6, for further details re support services) In addition, written information about the use of the Adoption Register for England and Wales was also given prospective adopters. This was subsequently confirmed by the prospective and approved adopters during their interviews with the inspectors, as well as through the questionnaires returned to the Commission.

The inspectors were advised that prior to a match being agreed the agency ensured accurate, up-to-date and full written information was provided to prospective adopters by way of the BAAF form E. In two of the files examined, issues were identified in relation to form E, which was fully detailed in standard 2 and 25 (please see these standards for details.) Adopters were also given the opportunity to meet with the child's social worker and where applicable, the agency's medical adviser, the foster carer/carers and clinical psychologist. This enabled the adopters to have accurate up-to-date information about the child and consider the implications of this information for themselves and their family, before proceeding with the adoptive placement.

During the course of the inspection, one adopter interviewed stated that they had met with the medical adviser to obtain further information regarding the medical condition of a child, who was to be matched with them. Another adopter confirmed in their returned questionnaire that they had seen the child's social worker and visited the foster carer of the child to be placed with them to obtain further information about the child. Both adoptive families stated that these meetings had proved invaluable and that they had felt well informed about the child placed with them, a view which was commonly expressed during this inspection.

The high level of multi – agency work that took place with the adoption agency was impressive and was quite clearly and effectively demonstrated during the matching process and in the support provided to adopters. (With regard to this later matter, please see standard 6 of this report.)

The adoption agency had a system in place to address the death of an adopted child and this was dealt with at various points of the adoption process. This matter was also addressed in the assessment report, which was presented to and considered by the Adoption and Permanence Panel. In addition, the agency had developed a form to record the adoptive parents' decision, which was subsequently held on the adopters' file. Similarly, the adoption agency ensured that the birth family's wishes regarding this matter were fully recorded and held on file. This information was also incorporated into the letterbox scheme.

The inspectors were advised that the adoption agency recognised the need for all children placed for adoption to be given appropriate information about their prospective adopters, prior to placement. Adopters therefore prepared a detailed book of information, including photographs about themselves. This book was made available to the child's social worker

and the child who might be matched with them and could be used as a tool to help prepare the child, prior to placement. Subsequent examination of a sample of Adoption records evidenced that the agency gave very careful consideration to matching and to ensure that good practice and outcomes were achieved, including where possible, enabling siblings to live together.

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

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

YES

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

4

In 2002, Bath and North East Somerset established a multi –agency adoption support services strategy group to co-ordinate and drive the development of adoption support services. This group comprised of representatives from Children and Families Service, the Education service, the Primary Care Trust, the Children, Adolescent and Mental Health Service (CAMHS) and community Paediatricians.

In October 2003, this resulted in a written statement of intent in relation to the provision of adoption support services, which was endorsed by an Executive Member of the Council and by the board of the Primary Care Trust. This statement of intent provided a clear, written strategy for working with and supporting adopters.

Over the past two and half years, a clear multi - agency commitment was given to adoption support services, which resulted in a pro-active, integrated adoption support service. This support service was offered to prospective and approved adopters at all stages of the adoption process, with the aim of enabling adoptive parents to provide stable and permanent homes for their children. During this inspection, several adopters confirmed the pro-active nature of the multi –agency support services available and spoke highly of the service they had received. A similar view was also expressed in the placing authorities questionnaires that were returned to The commission.

Examination of a sample of files confirmed that the adoption agency used the BAAF adoption support plan. These plans were generally detailed and monitored by the managerial staff within the team.

The agency supported adoptive parents in a number and variety of ways, which included support from their supervising social worker, from the post adoption support worker, the adoption support group, social events for adopters and their families, as well as an out of hours service. At the time of the inspection though a dedicated family placement out of hours' service was being developed, which it was anticipated would more effectively meet adopters' needs. The agency also provided on – going post approval training. Financial support such as adoption allowances was provided. The agency was also considering providing its own specific Website. In addition, specific support was provided from the multi –agency support services, e.g. the agency's Medical Adviser, the Clinical psychologist from the Locate Services, the child and adolescent mental health service (CAHMS) and the educational services. The agency also had a service level agreement with an independent adoption support organisation, South West Adoption Network (SWAN), which gave access to support groups, a helpline and counselling.

The adoption agency prepared adopters, in advance of a child going to live with them through the agency's experienced adoption workers, who were closely supervised by the senior practitioner within the service. The agency also used the form "H" meetings, as part of this preparatory process. Adopters were also given the opportunity, where appropriate, to meet with the medical adviser and/or clinical psychologist to develop their understanding of the child's needs.

At the time of the inspection, the agency had arrangements in place to offer information, support and advice to prospective adopters, who receive a proposed match with a child from an overseas authority. A specialist intercountry adoption worker had been commissioned to undertake this work, who was managed and supervised by the Senior Practitioner in the agency. Information obtained from questionnaires from intercountry adopters, together with an interview, indicated that the information, advice and support they received from this worker was excellent.

The inspectors were advised that during the preparation courses, prospective adopters were informed of the importance of addressing issues of discrimination and helping children deal with racism or other experiences of discrimination. They also learnt of the need for children to understand their history and to develop positive self – esteem through life story work. This training, together with the home study visits, emphasised the importance of ensuring that items of memorabilia and life story work were kept safe. This was revisited and further reinforced during the linking and placing processes, as well as after placement, through the adoption agency's post approval training, support services and letterbox exchange.

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

The adoption agency had a procedure in relation to Adoption Disruption. Thus, when placements were in difficulty, the adoption support was reviewed and appropriate support services put in place. In situations where placements broke down, disruption meetings were held as a matter of course, so that all parties had the opportunity to make sense of and understand the nature of the placement breakdown.

During the course of the Inspection, the Inspectors interviewed several prospective adopters and adopters, who spoke highly of the support, provided them at the time of the placement and subsequent, post placement support.

Number of adopter applications started in the last 12 months	15	
Number of adopters approved in the last 12 months	8	
Number of children matched with the local authority's adopters in the last 12 months	12	
Number of adopters approved but not matched	5	
Number of adopters referred to the Adoption Register	3	

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

X

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?	3
<p>The adoption agency recognised the important role that birth parents play in the adoption process and addressed this in their permanency policy, as well as in the adoption manual under the section entitled “Adoption of children looked after by the local authority”. In addition, the agency had a service level agreement with SWAN (see Standard 6); part of that contract was to provide an independent counselling and support service to birth parents. Details of this service were available in a leaflet entitled, “Birth Parents are important”, which was given to all birth parents, whose children had an adoption plan. The agency had also arranged for SWAN to hold a clinic for birth parents. This clinic was held in a local family centre, twice a month and assisted birth parents with a variety of practical and emotional matters relating to adoption. The inspectors were advised that the service provided by SWAN had been highlighted to all childcare staff to ensure the service was fully understood and promoted.</p> <p>The adoption agency had an expectation that from the outset birth parents were involved in their child’s planning process. The inspectors were informed that at the four month “looked after children” review, all multi –track plans were considered for the child, including that of adoption and the process was fully explained to them. In addition, birth parents whose children had an adoption plan, were given at an appropriate point, written information by way of the BAAF leaflet, “If your child is being adopted”. Whilst all birth parents were encouraged to attend the child’s planning meetings and reviews, some parents were unable or unwilling to attend such meetings. In these situations, birth parents were kept informed of the planning decisions made regarding their children by minutes of meetings, court documentation etc. The inspectors were able to evidence the adherence of this practice in their examination of a sample of files.</p> <p>In the adoption manual under the section entitled “Adoption of children looked after by the local authority”, there was a clear statement regarding the clarity of records in relation to the birth parents’ views about adoption and contact. In one of the files examined, the birth parents’ views about adoption and contact were clearly recorded on the form E and in other court documentation. The inspectors were advised that such information was being systematically recorded in case records, with such practice being reinforced in the care planning process and monitored through supervision.</p> <p>At the time of the inspection, birth parents were actively encouraged to contribute to the form E, the life story book and to take part in letterbox contact as a minimum. Whilst no birth parents or birth families’ questionnaires were returned to the commission and inspectors did not have the opportunity to meet with birth parents, the inspectors’ examination of a sample of files, panel papers, the letterbox scheme and discussions with staff confirmed adherence</p>		

to this practice.

Standard 8 (8,1 – 8.2)

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

Key Findings and Evidence

Standard met?

3

The inspectors were advised that birth parents and the birth family were encouraged to provide information on the child's birth and early life. Improvements in this information sharing were also being effected through the training provided childcare staff on the significance and completion of a form E, together with regular file auditing by managerial staff. Birth parents' views regarding the adoptive plans for the child were obtained.

The inspectors were informed that birth parents and families were asked to contribute to life story work. Whilst the inspectors were able to evidence that life story work was completed, evidence was found that life story work was not always completed in accordance with the child's needs and a recommendation was made regarding life story work. (See standard 2 and the recommendation section of this report for details).

The letterbox system also facilitated the exchange of information between the adopted and birth family. This enabled the child to receive up-dated information regarding their birth parents and family and maintain their heritage.

Standard 9 (9.1)

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

Key Findings and Evidence

Standard met?

3

The adoption agency had a clear written strategy for working with and supporting birth parents and families, both before and after adoption. Details of the support services available to birth parents and families were on the Bath and North East Somerset Website.

The agency also had a service level agreement with SWAN, who provided support to birth parents and families, prior to, during and after adoption. (Please see standard 6, for further details). The inspectors were informed that this service had been highlighted to childcare staff and evidence was obtained that it was actively being promoted by the adoption agency, e.g. Swan's two monthly clinic, which was held for birth parents at a local family centre.

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?	3
<p>The adoption agency had a clearly written policy and procedures in relation to the adoption and permanence panel, which had been recently updated and was available to all staff and panel members. This documentation outlined the principles governing the conduct of the panel, its responsibilities, the panel composition, the appointment of and role of the Panel chair, vice – chair and panel members. Panel members' records, their training and the performance review to be carried out in relation to panel members. Panel administration, adoption agency decisions, including notification procedures and timescales, complaints and representations to the agency and the independent reviewing mechanism. The inspectors were advised that there was strict adherence to this policy and procedures and this was clearly evidenced by one of the inspectors, during the Panel observation.</p> <p>The adoption agency provided an opportunity and indeed encouraged prospective adopters to attend the Adoption and Permanence Panel. The agency also provided prospective adopters with an information leaflet regarding the purpose, nature, responsibilities and tasks of the panel, including whom they would meet at panel. At the time of the inspection, the agency was considering introducing photographs of panel members in this leaflet. The inspectors would endorse such practice as many prospective adopters make extremely positive comments about this practice, where it exists in other agencies. Information regarding prospective adopters attendance at panel was also discussed during the assessment process.</p> <p>During interviews with adopters regarding their attendance at panel, several stated that the chair and all panel members had been extremely welcoming, had put them at their ease and throughout the process they had been treated with the utmost courtesy and respect. They were generally of the view that their attendance at panel had been a well - managed and positive experience. Similar views were also expressed in the prospective and approved adopters questionnaires returned to the commission. However, during an interview with one approved adopter they indicated that their attendance at panel had not proved to be a positive experience, particularly in relation to the panel members' questions to them. This particular difficulty had been resolved prior to the inspection, though was discussed with the manager of the service in the feedback session following the inspection.</p> <p>During the inspector's observation of the panel, it was noted that the agency had ensured that the waiting room for applicants was both private and comfortable. In addition, the</p>		

agency ensured that the panel's agenda was extremely well managed, so that it kept to time and prospective adopters did not have to share the waiting room with any other applicants prior to their attendance at the panel. Thus ensuring that applicants had the necessary privacy prior to their attendance at panel.

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 intercountry adoption, each member of the panel understands the implications of being adopted from overseas and seeks advice, when necessary, on the laws and eligibility criteria for the overseas country.

Key Findings and Evidence

Standard met?

3

The adoption agency had a properly constituted Adoption Panel. The membership of the panel included people who had suitable qualities, as well as a wide range of differing adoption experience.

The inspectors were advised that panel members had access to appropriate training and skill development. Panel members were kept up-to-date about internal policies and procedures, as well as changes in regulation and guidance through the circulation of appropriate documents, briefing at panels and training events. Generally, the joint training events were in –house and held for a full day once or twice a year. The inspectors were advised that in the past eighteen months, there had been two training days, which covered contact issues and permanency planning. Another joint training event had been planned for February 2005 and was to look at medical issues. Panel members had also received a full day’s training on intercountry – adoption in 2002 and in July 2004, a panel briefing had taken place to update members on the latest information and changes in relation to inter –country adoption. The inspectors were advised that in April 2005, the agency was to introduce performance reviews of panel members.

At the time of the inspection, the agency in collaboration with SWAC had introduced an induction programme for new panel members. All new panel members were given the opportunity to observe the adoption panel and had an induction meeting with the panel’s professional adviser, prior to panel. The inspectors endorsed the development of this induction programme for new panel members and recommend that an administrative system be devised to evidence this process.

At the time of the inspection, all documentation relating panel members were kept in one file. Moreover, on two panel members’ files, there was an “E. Mail”, which provided Criminal Records Bureau details of another panel member. In one file the agency had made the use of the portability of Criminal Records Bureau’s checks, however the Commission’s guidance in relation to this had not been followed. In some files, there were no references and other necessary documentation was also not found, however all panel members’ documentation contained signed confidentiality agreements. (Please see standard 28.) The manager was advised that in accordance with legislation, separate files were required for each panel member and any information regarding a Criminal Records Bureau check must only relate to that panel member. The manager readily acknowledged this and immediately agreed to rectify this matter. Several requirements and a recommendation were made regarding these matters and are referred to in standard 28, as well as the requirement and recommendation section of this report.

Is the panel a joint panel with other local authorities?

NO

Does the adoption panel membership meet all of the statutory requirements?	YES	
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Standard 12 (12.1 – 12.3)
Adoption panels are efficiently organised and conducted and are convened regularly to avoid delays in the consideration of prospective adopters and matching children and adopters.

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

During the inspection, one of the inspectors interviewed the panel administrator and was advised that the panel agenda and papers were sent out eight days, prior to the panel date. Occasionally, brief additional paperwork was brought to the panel and in such situations; the agenda times were adjusted to ensure panel members had additional reading time. Interviews with a selection of panel members confirmed that they usually had sufficient time to read the papers. The inspector was therefore of the view that the arrangements for sending out the panel papers was operating efficiently.

In directly observing the panel, it was noted that the panel chairperson was well organised and chaired the panel in an extremely sensitive, effective and efficient manner. Panel members had read the panel papers carefully and were observed to give thoughtful and insightful consideration to the matters presented to them.

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

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

Standard 13 (13.1 – 13.3)

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

Key Findings and Evidence**Standard met?**

3

File records, discussions with relevant staff and interviews with a several adopters indicated that the agency decision - maker showed diligence in making his decision, which was made in a timely and considered manner.

The Inspectors were also able to confirm that there were satisfactory arrangements in place for conveying the agency's decision to the child, prospective adopters and parents. In the main, these arrangements operated in an effective manner.

Fitness to provide or manage an adoption agency

The intended outcomes for the following set of standards are:

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

Standard 14 (14.1 – 14.3 and 14.5 – 14.6)

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

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

Key Findings and Evidence

Standard met?

4

The nominated manager of the adoption agency and the senior practitioner had a wealth of experience in the childcare and adoption field and held professionally recognised social work qualifications. The manager also had a managerial certificate; the Certificate in Health and Social Service Management and the senior practitioner was completing the certificate in Management Studies.

The manager of the agency had a clear job description, which although generic in nature, outlined the duties, responsibilities and line management arrangements. However, the Inspectors would recommend that this job description be revised, so that it reflects the manager's specific duties and responsibilities in relation to the Council's adoption agency.

Both the nominated manager of the adoption agency and the senior practitioner adopted an open, participative leadership style. Staff reported that they were supportive and encouraged autonomy of practice, though when the occasion demanded were able to be appropriately directive. They also encouraged staff in the team to be extremely child focused in their work and the inspectors were of the view that the agency excelled in this.

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

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

Does the manager have Management NVQ4 or equivalent?

YES

Does the manager have at least 2 years experience of working in a childcare setting in last 5 years?	YES	
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Standard 15 (15.1 – 15.4) Any person carrying on or managing the adoption agency are suitable people to run a voluntary organisation or business concerned with safeguarding and promoting the welfare of children.		
Key Findings and Evidence	Standard met?	3
<p>Bath and North East Somerset Council had written recruitment and selection procedures for the appointment of staff. An examination of a sample of management' personnel files confirmed that the adoption agency had obtained a Criminal Records Bureau, enhanced check, in relation to the managers of the adoption service. Two written references had also been obtained.</p> <p>The inspectors were advised that the Council had recently introduced a procedure for telephone enquiries to be made in order to verify the legitimacy of written references.</p> <p>The inspectors were also advised that the council had introduced a procedure to ensure that Criminal Records Bureau enhanced checks are renewed on a three yearly basis for all staff working in the adoption agency.</p>		

Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

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

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

Key Findings and Evidence

Standard met?

3

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

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

The agency informed managers and staff of their responsibility to declare any possible conflicts of interests, which was clearly set out in Bath and North East Somerset's general guidance.

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

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

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

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

X

Number of the above complaints which were substantiated

X

Standard 17 (17.1 – 17.3)

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

adoption agency and ensuring quality performance.

Key Findings and Evidence

Standard met?

3

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

- The manager of the adoption agency regularly tracked the progress of cases. This information was incorporated into an adoption tracking system, which monitored the outcomes for children and adopters and was considered every month by the group manager and children’s team managers.
- The agency’s supervision and appraisal systems monitored the adoption workers’ performance.
- The independent reviewing unit had a monitoring and quality assurance role in respect of the adoption service through the chairing of children’s reviews.
- The Adoption and Permanence Panel received regular progress reports.
- The Panel carried out a quality assurance role in relation to the cases presented to the panel with a view to promoting good practice.
- The panel chairperson regularly met and liaised with the agency–decision maker regarding the work of the adoption agency.
- The adoption agency had key performance indicators, which were regularly monitored by the department’s senior management team and used as a tool for judging the agency’s achievements.
- Regular briefings regarding the adoption agency’ s work were provided to the Executive member for Social services and the Children and Young People’s Champion on the Council. .
- Quarterly monitoring reports were made available to the Quality Protects and the Corporate Parenting Members group.
- An annual adoption monitoring report was completed.
- The Head of Children and Families Services and the Executive member for Social services reviewed the service’s statement of purpose on an annual basis.

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

There was written information for adopters about adoption allowances, which was clear and well presented. The inspectors were able to confirm in interviews with adopters that they were aware and understood the criteria for the payment of adoption allowances. Domestic adopters in the returned questionnaires to the Commission also confirmed this.

Interviews with senior management and the executive member for social services, as well as an examination of a variety other agency reports confirmed that Bath and North East Somerset took its responsibility as a corporate parent seriously and closely scrutinised the adoption agency’s work to ensure it was effective and achieved good outcomes for the children.

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

Monthly?	
Quarterly?	YES
Less than Quarterly?	

Standard 18 (18.1 – 18.5)

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

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

The adoption agency had access to a variety of specialist advisors from within Bath and North East Somerset Council. At the time of the inspection, the Council had a service level agreement with Swan, which clearly governed the specialist services that were provided. In addition, as a member of the British Association for Adoption and Fostering (BAAF), the service was also able to access advice and guidance from them.

The agency was also able to use the services of LOCATE, which provided psychological assessments and support to placements via consultations and training to social workers and adopters. (This service is also referred to in standard 6, of this report.)

Bath and North East Somerset had a Consultant Community Paediatrician as a medical advisor on the agency's adoption and permanence panel. She was well -qualified and extremely experienced in her field and clearly committed to her work, as medical panel advisor. She had attended the medical panel advisors' training course provided by BAAF and chaired the regular panel medical advisors meetings that took place in the South West. The medical advisor provided comprehensive and detailed reports on all children, whose plan was for adoption. She also provided specialist advice to the agency's staff and where appropriate, adopters, regarding any health issues regarding these children. The medical advisor was also able to access further medical specialist advice on behalf of the adoption agency, if required. In addition, she provided an adoption clinic to adoptive families to support placements (This service is also referred to in standard 6, of this report.)

The Adoption and Permanence Panel also had a representative from Bath and North East Somerset Council's legal department and this advisor or other members of the legal team were available to panel members and staff for consultation regarding adoption issues.

The inspectors were advised that the adoption agency was part of the South West Adoption Consortium and could therefore approach these consortia, for any specialist advice required.

The adoption agency had procedures in place to access other specialisms according to their needs. This was quite clearly demonstrated through their practice of commissioning a specialist, inter –country worker to undertake all Intercountry preparation training and home study assessments. The adoption agency also had written protocols governing the role of specialist advisers. The inspectors advised that the agency must obtain documentary evidence of specialist advisers' qualifications and their registration with the appropriate professional body, when using their services (please see standard twenty-eight of this report, for further details.)

Employment and management of staff

The intended outcome for the following set of standards is:

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

Standard 19 (19.1 – 19.14)

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

Key Findings and Evidence

Standard met?

3

Bath and North East Somerset Council had written recruitment and selection procedures for the appointment of staff, which followed good practice guidelines. The inspectors were advised that the procedures had recently been amended to ensure managers now make telephone enquiries to follow up each written reference to verify their legitimacy. The manager of the service illustrated adherence to this practice confirming that telephone enquiries had been made in relation to staff, who had recently been appointed to the service. The inspectors were advised that an enhanced Criminal Records Bureau check was undertaken in respect of all staff appointed to the service.

During the inspection, a sample of personnel files of staff working within the adoption service were selected and examined. From the files seen the inspectors were able to evidence that individuals working in or for the adoption service were interviewed as part of the selection process and with the exception of one file had the required written references. With regard to this file the staff appointment had been made though prior to the implementation of the National Minimum Standards. The inspector also noted that in one file there was no signed employment contract. (These matters are also referred to in standard 28.) All files contained enhanced Criminal Records Bureau checks. The inspectors were advised that a system had recently been put into place to ensure all staffs' Criminal records Bureau check was renewed every three years.

A sample of panel members files were seen and some shortfalls were seen in relation to these files. (Please see standards 11 and 28.)

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

At the time of the inspection, all staff working within the adoption service were suitably qualified and had childcare experience. They also had experience in carrying out assessments, as well as appropriate experience in relation to family placement work and adoption.

From the inspectors' interviews with a number of child care managers and staff, as well as an examination of a variety of documentation, the inspectors were of the opinion that the

staff working within the adoption service were well informed and their specialist knowledge and skills were valued by their colleagues in the other teams.

The inspectors were able to evidence that the agency was committed to ensuring staff had the necessary training for their professional development, affording them a variety of training opportunities, including to obtain the post qualifying award. At the time of the inspection, one member of staff had obtained the post qualifying childcare award, another had commenced post qualification training, part one and a newly appointed member of staff already had the qualification. The manager of the service therefore anticipated by 1st April 2006, 20% of the adoption agency's social workers would have the post qualifying childcare award. A recommendation was made in the report in relation to this.

The specialist advisors who were on the Adoption and Permanence Panel had received training and had a good understanding of adoption, as did the specialist advisors in SWAN.

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?

14.28 %

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?****3**

The team manager of the fostering and adoption service managed the adoption agency. A senior practitioner supported her in this task and they share responsibility for the supervision of the staff team, while the team manager retains overall responsibility. Both the team manager and the senior practitioner were experienced, qualified and skilled managerial staff. (Please see standard 14, for further details.) From the inspection of the service the inspectors concluded that the service was organised and managed in a way that ensured the service was delivered in an efficient and effective manner.

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

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

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

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

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

The adoption service had regular team meetings, where work was allocated and practice issues discussed. Staff informed the inspectors that there was clear, open and effective communication in team meetings and their views were elicited regarding the operation of the service. A quarterly good practice workshop was also held, which staff found extremely useful in the improvement and development of their practice.

The service had clear and well - defined assessments and approval processes, which were monitored and quality assured by the team manager or senior practitioner. However,

examination of a sample of case records indicated that such monitoring was not always consistently evidenced. (Please see standard 25, for further details.) The adoption panel also undertook a quality assurance role in relation to assessments and had a formal system, which was used to feedback to the agency on the quality of cases presented to panel.

The inspectors were able to evidence that the adoption and fostering service had an adequate level of clerical, administrative support, office equipment and infrastructure to enable staff to carry out their duties in an efficient and effective manner. However, some issues were raised in relation to the proposed move to other accommodation in the agency's premises (please see standard 29, for further details.)

During the course of the inspection, the inspectors were able to evidence that the enquiries made to the agency were being dealt with promptly and in a polite, courteous and helpful manner.

The inspectors were able to evidence that the agency was pro –active in ensuring adopters, as well as children and young people, who were subject to an adoption plan, received written information and literature exploring the process of adoption and were clearly advised of the range of multi-agency support services provided (please see standards 1,6 & 18, for further details.)

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

The Council had an equal opportunities policy, complaints, grievance, disciplinary, as well as various health and safety policies and procedures. These were available to staff on the Council's intranet. Adoption staff confirmed that they had seen these policies and procedures, including the adoption agency's statement of purpose and were able to obtain a copy should they so wish. The Inspectors were advised that individual copies of the General Social Care Council's code of practice were circulated to staff at the time of issue.

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?	2
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Bath and North East Somerset Council had a family placement team, which provided an adoption and fostering service. Within this team there was one designated adoption support worker.

At the time of the inspection, the inspectors were advised that there was one vacant post in the team, however an appointment had been made and the person was shortly to commence employment. The inspectors were advised that to ensure the agency was able to function and the service be effectively delivered, the adoption agency had contingency plans in place to address any shortfall in staffing levels.

All staff working within the family placement team were qualified and had considerable experience in this area of work. Whilst the inspectors were of the view that staff in the family placement team had an appropriate mix of skills and experience, the complexity and demands of the work were such that the inspectors were concerned about the adequacy of the staffing levels. The inspectors raised this matter with the nominated manager of the adoption agency at the time of the inspection and made a recommendation in relation to this.

Bath and North East Somerset Council's personnel policies and procedures provided for regular supervision, training through in-house and short external courses, study leave and post qualification study. At the time of the inspection, the Council was considering a range of initiatives to encourage the recruitment and retention of staff. The inspectors were pleased to learn of these initiatives and would fully endorse their implementation. The inspectors were able to confirm that the Council worked to the requirements set out in the General Social Care Council's code of practice.

Total number of social work staff of the adoption service	7	Number of staff who have left the adoption service in the past 12 months	X
Number of social work posts vacant In the adoption service.	1		

Standard 22 (22.1 and 22.3)

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

Key Findings and Evidence**Standard met?**

3

Bath and North East Somerset Council was considered to be a fair and competent employer by its managers and staff. There were clear, comprehensive and sound employment practices in relation to staff, which included a recruitment and selection policy, an equal opportunities policy, grievance and disciplinary procedures. The Council also had a code of conduct. A whistle blowing policy was in place and available to all staff. The inspectors would recommend though that this policy, together with permission for its use be re – launched. It was also recommended that the whistle blowing policy should include the details of the Commission for Social Care Inspection as a source to whom issues can be directed.

The adoption agency had Public Liability and Professional indemnity insurance for all staff.

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

Bath and North East Somerset Council had an annual training programme, which was designed to provide appropriate professional and skill development for its staff. The training was provided via a rolling programme of courses, which ensured a full range of training was provided for all staff. This training not only reflected the social care aspects of the work, but also the wider organisation's policies, procedures and guidance. There was evidence that training was routinely evaluated with the training programmes reviewed and up-dated on an annual basis.

The inspectors were advised that the adoption agency was committed to ensuring staff had the necessary training for their professional development. Consequently, training was commissioned according to the service's requirements with specialist training being provided by BAAF and SWAC. Staff confirmed this and informed the inspectors that they had received a variety of training, some of which had included permanency planning, attachment, building relationships, contact issues and the placement of ethnic minority and black children. The agency had also arranged form E training for the looked after children's team.

All staff received induction training and the induction programme was tailored to their specific needs. The inspectors were advised that the supervision system identified staffs' training and development needs, which were regularly appraised through ongoing supervision. A formal, annual review in line with the supervision policy was also undertaken for staff, which identified any on-going training needs. This information was then shared with the childcare training group. Managers' training and developmental needs were similarly addressed through an annual performance developmental review. The inspectors were able to evidence that a variety of training opportunities were provided staff, including post-qualifying training. There was also evidence that individual training programmes were commissioned, with the outcomes monitored and evaluated through the supervision system.

The inspectors were able to confirm that the adoption agency kept abreast of any changes in legislation, guidance and case law relevant to adoption and cascaded this information to staff through staff briefing sessions, team meetings and the adoption manual.

Subsequent interviews with staff confirmed that both external and in-house training was provided. They also informed the inspectors that there was an expectation that they had five study days per year. However, several childcare staff indicated that due to time constraints, they found real difficulty accessing the training and using the mandatory five study days. They also indicated that they would like the specialist training provided to family placement workers cascaded to other childcare staff more effectively. A recommendation was made in the report in relation to this.

Family placement staff though were generally of the opinion that the training and developmental opportunities provided, together with information available at team meetings enabled them to keep up-to-date with the professional and legal developments in adoption. However, in discussion with the specialist intercountry worker, it emerged that she was not routinely invited to attend relevant training provided by the agency. This matter was raised with the nominated manager at the time of the inspection and a recommendation was made in the report regarding this.

Records

The intended outcome for the following set of standards is:

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

Standard 25 (25.1 – 25.5)

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

Key Findings and Evidence	Standard met?	2
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The adoption agency had a recording policy, which provided clear guidelines and expectations regarding the recording and organisation of case files. Thus there was an expectation that clear, concise individual records would be maintained for all children, prospective and approved adopters.

Subsequent examination of a sample of adopters and children's files confirmed that they were well structured and organised. In the main they were also comprehensive in their nature and up-to-date. However, in one child's file, where adoption was the plan, there was no separate adoption file, containing all the information prescribed in the recording policy. In another file, there was no form E, though this was subsequently found on another of the child's files, neither was there information relating to the child's earlier history. Moreover, the child's life story had been delayed for over four months. A requirement and recommendation was made regarding these matters.

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

Examination of adopters' files confirmed that the service generally carried out the necessary enquiries, health checks and obtained personal references, as well as enhanced Criminal Record Bureau checks in relation to prospective adopters and on all members of their household, who were aged eighteen years or over. However, in one of the adopter's files a written medical report had not been obtained prior to the adoption panel's recommendation for approval and the agency's decision being made. A requirement was made in the report regarding this matter.

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

The inspectors were able to evidence that all files were stored in lockable filing cabinets and kept in a lockable room. The inspectors were advised that archived adoption files were securely stored to minimise the risk of damage from fire or water. However, these files were

to be moved when the service moved to a higher floor in the premises. The inspectors were advised that the adoption files would continue to be stored in lockable filing cabinets, in a lockable room and would be securely stored to minimise the risk of damage from fire or water. It was recommended that the service should re-assess these risks prior to the files being move to an alternative location in the building.

At the time of the inspection, there was further work taking place for keeping adoption records safe and congruent with the looked after children' s system via the new "Care First" computer system.

Standard 26 (26.1 – 26.2)

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

Key Findings and Evidence

Standard met?

3

The Inspectors were advised that the adoption service provided information to partner agencies within the consortium and to other adoption agencies in as short a time as possible to effect the placement of a child. In the placing social workers questionnaires returned to the Commission all commented that the information provided had been comprehensive and detailed. Several also indicated that this information had been provided in a timely way, enabling the child's placement to take place in an effective manner and with minimal delay.

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

The inspectors were able to confirm that adoption panel members had been asked to sign an undertaking of confidentiality. Copies of this confidentiality agreement were seen on all the panel members' files.

Standard 27 (27.1 – 27.6)

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

Key Findings and Evidence**Standard met?**

3

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

There were separate personnel files on all members of staff, which were maintained by the Human Resources section of the council. The team manager of the service also kept separate supervision records. Separate records were kept of all complaints, allegations and child protection matters. These records were held in a confidential and secure manner. Records were monitored through the supervisory system and the agency had also recently introduced a system where a sample of files were audited by the team manager and group manager. The Adoption Panel also carried out a quality assurance function; in monitoring the quality of prospective adopters assessments and feeding this information back to the agency.

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

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

Standard 28 (28.1 – 28.2)

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

Key Findings and Evidence

Standard met?

1

The Council's human resource section maintained all the adoption agency's staff records. In the personnel files examined they were comprehensive and up-to-date, though in one of the files there was no signed employment contract. In another file, there were no written references on file, however, this file related to a member of staff who had been appointed prior to the introduction of the National Minimum Standards.

In examining the documentation relating to panel members, all documentation relating panel members were kept in one file. Moreover, on two panel members' files, there was an "E. Mail", which provided Criminal Records Bureau details of another panel member. In one file the agency had made the use of the portability of Criminal Records Bureau's checks, however the Commission's guidance in relation to this had not been followed. In some files, there were no references and other necessary documentation relating to panel members' experience, documentary evidence of their qualifications and a record of their training were not found. In addition, the inspectors would recommend that their registration with the appropriate professional body be also obtained. The agency must ensure that all files relating to staff employed by the agency and all panel members contain the information required under Schedule 3 and 4 of the Adoption Services Regulations 2003, if the agency is to meet this standard. Two requirements and one recommendation were made in the report regarding these matters.

Fitness of Premises

The intended outcome for the following standard is:

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

Standard 29 (29.1 – 29.5)

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

Key Findings and Evidence

Standard met?

3

The adoption agency was located in one Council's offices, Lewis House, which is in the centre of Bath. This is a large office building, which provides accommodation for Social Services and other Council departments. The premises provided waiting, interview and meeting rooms, as well as kitchen facilities for staff. The premises had disabled access and a lift to the upper floors of the building.

At the time of the inspection, the adoption service was located on the second floor of the building and shared accommodation with other childcare teams and staff from housing. Whilst good use had been made of filing cabinets and office cabinets to divide the teams and reduce the noise, the inspectors had some concerns in relation to confidentiality of information given the multi-occupancy of the office accommodation.

Inspection of the agency's current accommodation confirmed that there was adequate space for staff, as well as sufficient IT and other necessary equipment to support staff in the effective delivery of an adoption service. The inspectors' were advised of the security in place to safeguard all information contained in the IT system.

The premises had lockable filing cabinets to secure confidential information. Archived adoption files were kept in lockable filing cabinets, in a lockable room. The floor of the building where these files were kept was accessed via a security-coded door. The premises had an appropriate security system in place to prevent inappropriate access to the building.

At the time of the inspection, the inspectors were informed that there were plans for the service to move to a higher floor in the building, which would only be used by childcare staff. This accommodation would essentially be open plan, though there would be small meeting rooms available for managers to undertake supervision and confidential discussions. The team manager and senior practitioner currently had a designated office and there was concern that removing this facility may have a detrimental effect the service given the highly confidential nature of the service. The inspectors were of the opinion that such a move would have to be considered extremely carefully, if the premises were to be fit for purpose, with strict safeguards introduced to ensure all information and records relating to the adoption service were kept completely confidential, safe and secure.

Bath and North East Somerset Council had adequate Premises and Contents Insurance to promptly replace any lost or damage caused to contents of the building or premises. They also had a Disaster Recovery plan, which was specific to the adoption agency.

PART C

LAY ASSESSOR'S SUMMARY

(where applicable)

Not Applicable

Lay Assessor _____ **Signature** _____

Date _____

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

We would welcome comments on the content of this report relating to the Inspection conducted on 7th December 2004 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary	<input type="checkbox"/> YES
Comments were received from the provider	<input type="checkbox"/> YES
Provider comments/factual amendments were incorporated into the final inspection report	<input type="checkbox"/> 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	<input type="checkbox"/>

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 30th March 2005, which indicates how statutory requirements and recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.

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

Action plan was required	<input type="checkbox"/> YES
Action plan was received at the point of publication	<input type="checkbox"/> YES
Action plan covers all the statutory requirements in a timely fashion	<input type="checkbox"/> YES
Action plan did not cover all the statutory requirements and required further discussion	<input type="checkbox"/> NO
Provider has declined to provide an action plan	<input type="checkbox"/> NO
Other: <enter details here>	<input type="checkbox"/>

Public reports

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

D.3 PROVIDER'S AGREEMENT

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

D.3.1 I _____ of Bath and NE Somerset District 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 _____ am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:

Print Name _____
Signature _____
Designation _____
Date _____

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

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