

inspection report

Local Authority Adoption Services

Royal Borough of Windsor & Maidenhead Adoption Service

Maidenhead Office 4 Marlow Road Maidenhead Berks SL6 7YR

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 Royal Borough of Windsor & Maidenhead Adoption Service **Headquarters Address** Maidenhead Office, 4 Marlow Road, Maidenhead, Berks, SL6 7YR Tel No: **Adoption Service Manager** Sheila Jones 01628 683138 **Address** Fax No: Maidenhead Office, 4 Marlow Road, Maidenhead, Berks, 01628 683100 SL6 7YR **Email Address** Certificate number of this adoption service **Date of last inspection** NA

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

service

Date of Inspection Visit		7th July 2004	ID Code
Time of Inspection Visit		09:00 am	
Name of Inspector	1	Sean White	127556
Name of Inspector	2	Rosie Dancer	
Name of Inspector	3		
Name of Inspector 4			
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.			
Name of Specialist (e.g. Interpreter/Signer) (if applicable)			
Name of Establishment Representative at the time of inspection		Ros Whittaker, Manager.	

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Implementation of Statutory Requirements from last Inspection
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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 Royal Borough of Windsor & Maidenhead 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. Preinspection 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.

The adoption agency of The Royal Borough of Windsor and Maidenhead provides all adoption services required by statute; its arrangements for inter-country adoption are through services provided by a voluntary adoption agency.

The agency is reasonably small and does not undertake many adopter assessments; it is a member of the Berkshire Consortium and has strong working relationships with all member authorities to ensure there are sufficient adopters available to meet the needs of the children within the boundaries of the consortium.

The Berkshire Adoption Advisory Service (BAAS) provides significant support, including managing the Adoption Panel, to the agency and all other members of the consortium.

PART A SUMMARY OF INSPECTION FINDINGS

INSPECTOR'S SUMMARY

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

This was a positive inspection that was very well prepared for by the agency manager; the collation and provision of pre-inspection material was of a good standard and the self-assessment was undertaken with honesty and integrity. Everyone involved in the inspection – managers, staff and adopters – provided every assistance and courtesy, for which the inspection team was grateful.

The following summary is presented under the main headings of the National Minimum Standards (NMS).

Statement of Purpose.

The one standard in this section was almost met.

The statement of purpose is one that has been customised for the specific services provided by the agency from a generic statement that had been collectively produced by the consortium. The statement covers all the requirements of the regulations and includes all the information contained in the NMS. The children's guide, whilst being well presented, however, does not meet all the requirements of regulations and NMS.

Securing & Promoting Children's Welfare.

The one standard in this section was met.

The agency, in line with its own policies and agreements drawn up with the consortium, has an active approach to the recruitment of adopters who can meet the needs of the children requiring adoption. There is a careful approach to ensuring children are placed with the most appropriate families, including a commitment to meeting their cultural and ethnic needs in suitable placements.

Prospective & Approved Adopters.

Of the four standards in this section three were met and one was almost met.

The information pack for prospective adopters is unequivocal in its welcoming of interest and applications from all sections of the community; adopters and prospective adopters who were interviewed or canvassed were unanimous in their praise of the information provided by the agency.

The schedule and format of the preparation groups, which are a formal and compulsory aspect of the application and assessment process, were appropriately structured. There was a thorough approach to the assessment of adopters, with, in the main, informative and analytical Forms F being produced.

The agency does not have a consistent practice of maintaining contemporaneous notes of assessment visits on case files and supervisor's decisions are only recorded if they are deemed 'important'.

All appropriate and necessary checks are routinely carried out on applicants but the methods of recording enhanced CRB disclosure information was not consistent in the way it was recorded on files.

The providing of information and the linking process was noted as being of a good standard and the agency is as thorough as possible in ascertaining that the matching process is informed by the need for full, up to date information on children.

The new, draft procedures and guidance on adopters is a clear and unequivocal statement of good practice that provides practitioners with sound advice on all matters concerned with legislation, practice and current thinking.

The arrangements for post-placement support were realistic, well organised and effectively managed. Responses from adopters were unanimous in their appreciation of the service offered and provided. Life-story work, undertaken by placing authorities, is an important aspect of the information provided for adopters; the agency is pro-active in working closely with placing social workers to ensure that this information is provided at the most appropriate time.

Birth Parents & Birth Families.

All three of the standards in this section were met.

The agency has an arrangement with the Berkshire Adoption Advisory Service (BAAS) to provide support for birth parents and this service is available as soon as adoption becomes the plan for a child. It was clear that the arrangements in place with BAAS are sophisticated and well managed in so far as enabling birth parents and relatives to have the opportunity to contribute to the overall picture of children's heritage and background. The BAAS provides a range of support services for birth parents, including a birth mothers' support group (run on its behalf by Slough Borough Council), and agency social workers ensure that when plans are made to adopt a child the birth parents are provided with necessary information.

Adoption Panels & Agency Decisions.

All four of the standards in this section were met.

The adoption panel is a joint panel that undertakes responsibilities for three member authorities of the consortium; it is managed and administered by the Berkshire Adoption Advisory Service (BAAS) and has an independent chair. Applicants are routinely invited and encouraged to attend the panel and are supported in this by the agency social workers. Policies and procedures were robust and up to date.

The panel membership, as a joint panel, is suitably constituted and panel minutes demonstrated that it is always a quorum when it meets. Before joining, all new members observe at least one panel and are provided with training and further training is available and encouraged.

The BAAS conducts, and manages the panel in an efficient and appropriate manner and the administration and distribution of panel papers was efficient. The minutes of the panels were well presented and gave a clear account of panel business. Decision-making was satisfactorily undertaken based on all necessary information being made available.

Fitness to Provide or Manage.

Of the two standards in this section one was met and one was almost met.

The agency's management is appropriately qualified in social work and has a wealth of experience in both adoption matters and child-care services. The manner in which the agency was managed and organised was efficient, forward looking and dynamic.

The recruitment procedures for managers are suitably robust to ensure that all necessary checks are carried out. There was insufficient evidence to show that all references had been verified by 'phone, however.

Provision & Management.

Of the three standards, two were met and one was almost met.

Overall, the agency was found to managed and organised to a good standard; its operations are informed by clear, appropriate and well-written policies and procedures. The agency had systems in place to monitor its work and outcomes, and the operations of the service were clearly evaluated on an on-going basis. There was a clear commitment to anti discriminatory practice and cultural awareness, which was evident also in the care that the agency took in matching and placing children in families after consideration was given to their racial, cultural and ethnic needs.

The manager has brought a more efficient and 'systemised' approach to managing the activities and responsibilities of the agency since her appointment and improvements have been made to ensure that the agency is run in accordance with current legislation and the NMS. Elected members are fully informed of the activities of the agency.

The agency has a policy in place that determines the use and roles of specialist advisers but it needs to be more specific. Medical and legal advice was of a good standard.

Employment & Management of Staff.

All five of the standards in this section were met.

The authority operates a rigorous recruitment and selection process that ensures only suitable people are employed. The agency is fully staffed with qualified workers who both individually and collectively have a wide range of experiential background in children's work and adoption matters. There are clearly defined roles and responsibilities in the agency and the organisation of duties, communication and support were well managed. All workers have appropriate job descriptions and all have a copy, or immediate access to, copies of all necessary policies and procedures, including the statement of purpose – which was written after consultation with the staff team.

There were sufficient workers employed at the agency. The workloads were manageable and there was no evidence of staff being expected to undertake duties that they were either unequipped for or unable to do. Training was clearly an important aspect of improving performance and quality in the agency and there was an annual training plan in place that outlined a range of in-house training, conferences and seminars, post-qualifying training, and management development.

Records.

Of the four standards in this section, three were met and one was almost met.

The case files that were inspected were found, in the main, to be of a good standard and well maintained, although in some cases records were not signed or dated. Supervisor's decisions are not always recorded and policies need to be more explicit in respect of the

recording of supervisor's decisions on case files.

All necessary information is provided by the agency to placing authorities with which they are working to effect the appropriate placement of children.

Overall the general administration and record management of the agency was of a good standard; sufficient safeguards are in place to maintain security and practices were committed to confidentiality and safety of information.

All the personnel files on the managers and workers of the agency that were inspected were found to be of a good standard, well maintained and included all relevant information.

Fitness of Premises.

The one standard in this section was met.

The office is situated in an accessible location and is open to visitors during normal office hours. There is sufficient space to accommodate the workers and managers and it is equipped to a satisfactory standard. There are satisfactory systems in place to ensure that information is kept secure and confidential and all electronically stored information is 'backed-up' continuously. There is a fully formed Disaster Recovery Plan for the Authority.

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 NA 2000 that the Commission considers the Local Authority's adoption service satisfies the regulatory requirements: Notice to the Local Authority under section 47(5) of the Care Standards Act 2000 NA 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: Report to the Secretary of State under section 47(4)(a) of the Care Standards Act NA 2000 of a failure by a Local Authority adoption service to satisfy regulatory requirements which is not considered substantial: Report to the Secretary of State under section 47(1) of the Care Standards Act NA 2000 of substantial failure to satisfy regulatory requirements by a Local Authority adoption service: The grounds for the above Report or Notice are:

-	ementation of relevant at fire	_	Requirements from Last Inspection spection	
Req	uirements fro	m last Inspe	ction visit fully actioned?	NA
If No	please list b	elow		
STAT	TUTORY REQ	UIREMENT	'S	
non-c	compliance wi	th the Care	addressed from the last inspection report which inc Standards Act 2000, the Adoption Agencies Regu on Service (England) Regulations 2003.	
No.	Regulation	Standard	Required actions	

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

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 (2003)	LA1	The agency must produce a customised children's guide that includes all the information required by regulations.	01/10/04

GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

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

No.	Refer to Standard *	Recommendation Action
1	LA4	The agency should establish a more consistent means of recording CRB checks on case files.
2	LA4	The agency should maintain on case files a record of notes made of all assessment visits.
3	LA15	All written references should be verified by telephone and a written record kept of the outcome.
4	LA18	The agency should incorporate into its policies and procedures more specific details on the use of specialist advisers.
5	LA25	Supervisor's decisions should always be recorded on case files and signed and dated.
6	LA28	Records in respect of panel members must include all necessary information.

 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				
Placing social worker survey				
Prospective adopter survey				
Approved adopter survey	YES			
Birth parent / birth family member survey	YES			
Checks with other organisations and Individuals	YES			
 Directors of Social services 	YES			
 Specialist advisor (s) 	YES			
Tracking Individual welfare arrangements	YES			
 Interview with children 	YES			
 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				
Group discussion with staff				
Interview with panel chair				
Observation of adoption panel				
Inspection of policy/practice documents				
Inspection of records (personnel, adopter, child, complaints, allegations)	YES			
Date of Inspection 07	7/07/04			
•	0900			
Duration Of Inspection (hrs)				
Number of Inspector days				
Additional Inspection Questions:				
Certificate of Registration was displayed at time of inspection				
The certificate of registration accurately reflected the situation in				
the service at the time of inspection	NA			
Total Number of staff employed (excluding managers)	9			

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)

[&]quot;0" in the "Standard met?" box denotes standard not assessed on this occasion.

[&]quot;9" in the "Standard met?" box denotes standard not applicable on this occasion.

[&]quot;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

The statement of purpose is one that has been customised for the specific services provided by the agency from a generic statement that had been collectively produced by the consortium. It is a well-presented document that provides a thorough and detailed explanation of the agency's operations, aims and objectives and its links to the Berkshire Adoption Advisory Service, and its membership of the local consortium. The details that the statement covers include the agency's approach to recruitment, assessment and support of adopters, the functions of the panel and decision making and adoption support services. The statement covers all the requirements of the regulations and includes all the information contained in the National Minimum Standards.

The children's guide, whilst being well presented, does not meet all the requirements of regulations and NMS. As the statement of purpose, it has been commissioned generically for the consortium, and produced by the Berks. Adoption & Advisory Service; it has not, however, been customised to present the services of the agency as a discrete service. The agency must produce a customised guide that includes all the information required by regulations.

YES	
YES	
YES	
NO	
	YES

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 EvidenceStandard met? 3 The agency, in line with its own policies and agreements drawn up with the consortium, has

The agency, in line with its own policies and agreements drawn up with the consortium, has an active approach to the recruitment of adopters who can meet the needs of the children requiring adoption in the consortium's area. It is rare that children looked after by the local authority are placed with its own adopters, because of the small geographical area and the difficulties of maintaining anonymity; hence the need for realistic arrangements with the consortium. There is also an agency recruitment strategy that is clearly followed given the rate and numbers of adopters assessed and approved and the needs of children awaiting adoption.

There is a careful approach to ensuring children are placed with the most appropriate families, including a commitment to meeting their cultural and ethnic needs in suitable placements. There is a range of safeguards in place to ensure that children are not left waiting in the system unduly if their needs cannot be met locally.

In the last 12 months: How many children were identified as needing adoptive families? 3 How many children were matched with adopters? 3 How many children were placed with the service's own adopters? 6 How many children were placed with other services' adopters? 2 How many children were referred to the Adoption Register? 0 In the last 12 months, how many children were matched with families which reflected their ethnic origin, cultural background, religion and 3 language? What percentage of children matched with the adoption service's % 100 adopters does this represent? How many sibling groups were matched in the last 12 months? 2 How many allegations of abuse or neglect were made about 0 adopters approved by this adoption service? On the date this form was completed, how many children were 1 waiting for a match to be identified?

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

The information pack for prospective adopters is unequivocal in its welcoming of interest and applications from all sections of the community and the practices of the agency reflected this with applications being received and processed from unmarried people, same-sex couples and people from any and all ethnic/cultural backgrounds. Adopters and prospective adopters who were interviewed or canvassed were unanimous in their praise of the information provided by the agency; it was said that it was possible to make informed decisions all the way through the process of adoption because of the clarity and honesty of the information and how it was disseminated. It was clear that applicants were under no illusions about the type and range of children who were likely to require adoptive parents. Information is available in a range of formats as required, depending on the needs of enquirers. Prioritisation of applications is undertaken through information gathered in respect of children waiting for adoption both locally and in the consortium; this is provided through the Berkshire Adoption Advisory Service (BAAS) on a monthly basis.

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 schedule and format of the preparation groups that are a formal and compulsory aspect of the application and assessment process were found to be appropriately focused on the adoption procedure and its importance in meeting the needs of children. People who had undertaken the preparation groups expressed their appreciation of the thoroughness and honesty of the way they were presented; it was clear that they had found them to be an important aspect of the whole process and felt suitably informed to make their own decisions. There are arrangements within the consortium for people to attend preparation groups run by member agencies to enable matters of convenience to be met.

Evidence found in files and through interviews with key staff and adopters demonstrated a thorough approach to the assessment of adopters, with informative and analytical Forms F being produced and effective on-going scrutiny of the process; there were, however, some inconsistencies in the quality of Forms F that the manager was aware of and said is taking active steps to improve any shortfalls. There were some matters, nevertheless, that would benefit from improvement to ensure that the overall procedure for assessing applicants could be seen as entirely transparent. The agency does not have a consistent practice of maintaining contemporaneous notes of assessment visits on case files; to enable tracking of the process and decision-making to be fully and continuously informed it would be preferable for all relevant information to be kept. Similarly, the agency's interpretation of supervisor's decisions is to only record on file any decision that is seen to be 'important'; it would be more prudent to establish a system of transferring all case work supervision details onto case file files.

All appropriate and necessary checks are routinely carried out on applicants but the methods of recording enhanced CRB disclosure information was not consistent in the way it was recorded on files.

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

All approved adopters interviewed said that they were fully informed about the family finding, matching and placement processes and how they are geared to ensuring that the needs of children were the paramount consideration in any decision-making. There is also a leaflet given to all applicants on the Adoption Exchange forum that provides information on the National Register; new, draft procedures and guidance make explicit the system for referral to the register.

The providing of information and the linking process was noted as being of a good standard and it became clear through evidence gathered from case files and interviews that the agency is as thorough as possible in ascertaining that the matching process is informed by the need for full, up to date information on children that is supplied by the placing authority.

The new, draft procedures and guidance on adopters is a clear and unequivocal statement of good practice that provides practitioners with sound advice on all matters concerned with current law, practice and current thinking and includes information on a wide range of issues and safeguards that promote suitable matches for children and adoptive parents.

The agency has systems in place to ensure that all relevant and necessary information is provided by adopters and agreements reached in relation to notification of the death of a child should this occur.

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?	3

The arrangements for post-placement support were realistic, well organised and effectively managed. Responses from adopters were unanimous in their appreciation of the service offered and provided; the overall conclusions drawn from the information we received were that there was a significant commitment in the agency, expressed through the efforts of the workers, to ensuring that children settled into their new families with as little trauma as possible. It was said that the information and guidance provided for them was clear and instructive and that they were able to develop insights into their new situations through the knowledge and expertise of their workers.

Life-story work, undertaken by placing authorities, is an important aspect of the information provided for adopters; the agency is pro-active in working closely with placing social workers to ensure that this information is provided at the most appropriate time and is as fulsome as possible.

There had been no placement disruptions in the twelve-month period leading up to the inspection.

The agency does not undertake the assessment of people who wish to adopt children from overseas but it has an arrangement for a local Voluntary Adoption Agency to carry these out on the behalf of the agency.

Number of adopter applications started in the last 12 months	4	
Number of adopters approved in the last 12 months	2	
Number of children matched with the local authority's adopters in the last 12 months	6	
Number of adopters approved but not matched	2	
Number of adopters referred to the Adoption Register	0	
How many placements disrupted, between placement and adoption, in the last 12 months?	0	

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

The agency has an arrangement with the Berkshire Adoption Advisory Service (BAAS) to provide support for birth parents and this service is available as soon as adoption becomes the plan for a child. Evidence has been gathered in respect of this at other inspections to which BAAS provides counselling facilities and it has become clear that this service is of the highest quality, so far as birth parents that have been interviewed are concerned. Birth parents are invited to contribute, so far as is possible, to plans for their child's future

and their views are sought in every case and they are enabled to read the Form E and

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

invited to comment on the relevant content.

Standard met?

3

It was clear that the arrangements in place with BAAS are sophisticated and well managed in so far as enabling birth parents and relatives to have the opportunity to contribute to the overall picture of children's heritage and background. The birth parents are offered the chance to meet their child's adopters, encouraged to be involved in constructing life-story books and supported to maintain contact through the letterbox system – this may include visits by the letterbox coordinator to assist with letter writing and the taking of photographs. In some instances the management of face to face contact is undertaken although this would usually be the responsibility of the child's case-worker.

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 BAAS provides a range of support services for birth parents, including a birth mothers' support group (run on its behalf by Slough Borough Council) and agency social workers ensure that when plans are made to adopt a child the birth parents are provided with necessary information. The BAAS has produced a range of leaflets that provide information on support networks; these include titles 'Adoption Support Services', 'Birth Parents-who you can talk to...' and 'Birth Relatives Seeking Information'; this, along with positive reports from various sources is viewed as a clear indication that the agency, through its arrangements with BAAS, have a thorough commitment to offering support to birth families.

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

The adoption panel is a joint panel that undertakes responsibilities for three member authorities of the consortium; it is managed and administered by the Berkshire Adoption Advisory Service (BAAS) and has an independent chair.

The policies and procedures of the agency were thorough, robust and unequivocal in their reflection of current legislation, good practice and standard setting and demonstrated a clear understanding of adoption panels, their constitution, functions and wider responsibilities; the procedures also make clear the commitment to monitoring the performance of the panel and the responsibilities of members to maintain a contemporary understanding of adoption matters.

Applicants are routinely invited and encouraged to attend the panel and are supported in this by the agency social workers; approved adopters expressed their appreciation of the sensitive support they received at this crucial and taxing part of the process.

Standard 11 (11.1 - 11.4)

The adoption agency shall ensure that each adoption panel is properly constituted, that panel members have suitable qualities and experience to be a panel member and have regular training to allow them to keep up to date with changes in legislation, guidance and practice. Where the adoption agency is involved in inter-country adoption, each member of the panel understands the implications of being adopted from overseas and seeks advice, when necessary, on the laws and eligibility criteria for the overseas country.

Key Findings and Evidence

Standard met?

3

The panel membership, as a joint panel, is suitably constituted and panel minutes demonstrated that it is always a quorum when it meets. The adoption panel policies and procedures include a job description for members that clearly outlines the qualities required for consideration as a member. The Chair of the panel was appointed by selective interview. Before joining all new members observe at least one panel and are provided with training by BAAS - this includes an introduction to adoption law. All panel members undertake further training, including joint sessions with agency workers at least one a year. Reports from new members stated that the quality and availability of training was impressive.

The chair of the panel was able to demonstrate a thorough understanding of her role and responsibilities and was keen to express her ideas in respect of continuously improving the work and functions of the panel; such ideas included greater involvement of adopters, and all members being involved in providing feedback to the agencies.

The files of members were, in the main, well maintained although there were some inconsistencies noted in the way that CRB information is held and there were omissions from the required details in respect of the chairperson. See section 28.

Is the panel a joint panel with other local authorities?

YES

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

YES

Standard 12 (12.1 – 12.3)

Adoption panels are efficiently organised and conducted and are convened regularly to avoid delays in the consideration of prospective adopters and matching children and adopters.

Key Findings and Evidence

Standard met?

3

The BAAS conducts, administers and manages the panel in an efficient and appropriate manner. It sits every month (although the agency may not have business on the agenda on every occasion) and there is the facility in place to call extra meetings if this is required or necessary to deal with urgent cases or to avoid undue delay. It was clear that the administration and distribution of panel papers was efficient; each member of the panel receives the documentation in sufficient time to read and absorb the information – and it was evident from the discussions held during the panel that was observed that members had informed themselves of the content of the papers sufficiently well.

The minutes of the panels were well presented and gave a clear account of panel business. There was a vacancy for a panel minute taker at the time of the inspection and although this was being satisfactorily covered it was noted that this position needed to be filled as soon as possible.

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

There were satisfactorily robust systems in place to ensure that decisions based on panel recommendations were made in full knowledge of the information available, were made without delay and took into consideration the best interests of children.

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?

3

The agency's management is appropriately qualified in social work and has a wealth of experience in both adoption matters and child care services in general; this includes the manager of the agency and her line managers up to and including the Director of Social Services. The agency manager is currently pursuing an award at NVQ level 4 in management. The job description of the manager clearly outlines the role and responsibilities of the position and is a suitable profile for the needs of the job. The manner in which the agency was found to be managed and organised was efficient, forward looking and dynamic; several new initiatives that had improved the operation of the service had been incorporated into the work of the agency since the current manager began her tenure.

Does the manager have Management NVQ4 or equivalent?

NO

Does the manager have at least 2 years experience of working in a childcare setting in last 5 years?

YES

Standard 15 (15.1 – 15.4)

Any person carrying on or managing the adoption agency are suitable people to run a voluntary organisation or business concerned with safeguarding and promoting the welfare of children.

Key Findings and Evidence

Standard met?

2

The recruitment procedures for managers are suitably robust to ensure that all necessary checks are carried out and that enhanced CEB disclosures are obtained in every case. There was insufficient evidence, however, to demonstrate that references had been verified by telephone in all circumstances, although a new system was about to be introduced..

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

Overall, the agency was found to managed and organised to a good standard; its operations are informed by clear, appropriate and well written policies and procedures – some of which were being re-drafted at the time of the inspection which demonstrated a continuous monitoring and reviewing system – and the structures in place were such that there would be continuity of operations should the manager be absent. The management systems within the authority were appropriately structured and lines of responsibility, accountability and communication were clear and understood by everyone.

The agency had systems in place to monitor its work and outcomes, and the operations of the service were clearly evaluated on an on-going basis. There was a clear commitment to anti discriminatory practice and cultural awareness, which was evident also in the care that the agency took in matching and placing children in families after consideration was given to their racial, cultural and ethnic needs.

Although there is a procedure in place that addresses arrangements for using the national register, it was being re-drafted at the time of the inspection to take into account recent government guidance on timescales; otherwise the procedure was appropriate.

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

0

Number of the above complaints which were substantiated

0

Standard 17 (17.1 – 17.3)

There are clear written procedures for monitoring and controlling the activities of the adoption agency and ensuring quality performance.

Key Findings and Evidence

Standard met?

3

The manager has, in the last two years since taking up her post, brought a more efficient and 'systemised' approach to managing the activities and responsibilities of the agency. It was evident that the operations of the service are continuously evaluated through careful monitoring of both processes and outcomes. Improvements have been made to ensure that the agency is run in accordance with current legislation and, more recently, with the NMS. Although elected members were not very clear about the availability of twice annual reports on the work of the agency being presented to the executive of the council, it was evident that such information is reported in writing through the BAAS annual report and inclusion in the generic Children & Families Performance Information. The members were, however, very interested in the work of the agency and in their positions as members of the corporate parenting group and regular meetings with the Director apprised themselves of the work of the service on an on-going basis.

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

Monthly?	
Quarterly?	
Less than Quarterly?	YES

Standard 18 (18.1 – 18.5)

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

Key Findings and Evidence

Standard met?

2

The agency has a policy in place that determines the use and roles of specialist advisers; although it is quite specific on the medical and legal advisers it is somewhat vague in relation to any other specialism that may need to be called upon; consideration should be given to developing more detailed policies and guidance in respect of using specialist advisers and specialists. There is specialist advice available through BAAF and BAAS, as well as access to other more discrete areas; policies and procedures should reflect this and how they should be used and accessed. The medical adviser is a member of the panel and the legal adviser, or a substitute, attends panel and offers appropriate advice. The legal adviser also provides advice to the agency workers at any time and will provide written legal advice for the panel if requested.

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

The authority operates a rigorous recruitment and selection process that ensures only suitable people are employed; the staff recruitment policies and procedures are realistic and rigorous. No workers are allowed to begin their duties until after satisfactory enhanced CRB disclosures are obtained and references received and verified (there is a new system in place to ensure that references are verified and recorded).

The agency is fully staffed with qualified workers who both individually and collectively have a wide range of experiential background in children's work and adoption matters. It was evident that they are knowledgeable in respect of adoption law, guidance, standards and current thinking. They were clear in their understanding of social work matters relating to children, including policy issues and general knowledge about their needs, development and child protection. The manager of the service has undertaken to raise standards in practice and performance and it was evident that the results of a concerted effort to, for instance, improve the quality of Forms F have reaped rewards, although there was a little inconsistency in quality still evident.

Birth records counselling is only undertaken by trained and experienced workers.

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?

33

%

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

Overall, this is a well managed agency. As already indicated in this report, the manager has significant experience and expertise in the field of adoption and has used the two years in her current post to improve and develop the service. There are clearly defined roles and responsibilities in the agency and the organisation of duties, communication and support were well managed. The staff team expressed their satisfaction with the support and development opportunities they had and with the knowledgeable management of their practice. One matter that was clearly in evidence, which the manager said had been a priority to develop, was an effective range of systems that had been put in place to monitor the processes and outcomes of the agency. This had clearly had a beneficial impact on the work of the service having brought greater clarity and purpose to the functions of the agency and how it operated.

All workers receive regular supervision as well as informal 'open door' support from the manager (who in turn has regular support meetings with her line manager). There is also an appraisal system in place.

An administration team that is adequate for the size of the service supports the agency - although the benefits of Information Technology are reasonably modest in this agency. A comment was made to us that suggested development of IT facilities would enhance and make more efficient the work of the agency — a comment with which we agree. Nevertheless, the administration of the service was found to be generally well organised and met the needs of the work being undertaken.

All workers have appropriate job descriptions and all have a copy, or immediate access to, copies of all necessary policies and procedures, including the statement of purpose – which was written after consultation with the staff team.

Standard 21 (21.1 – 21.4)

There is an adequate number of sufficiently experienced and qualified staff to meet the needs of the adoption agency and they are appropriately supported and assisted in providing a service.

Key Findings and Evidence

Standard met?

3

There were sufficient workers employed at the agency. The workloads were manageable and there was no evidence of staff being expected to undertake duties that they were either unequipped or unable to do. The management of the supervision and support systems were good and provided for a constant monitoring of workloads and, thereby, aided the allocation process. There were no vacancies in the team.

Total number of social work staff of the adoption service

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

0

Number of social work posts vacant In the adoption service.

0

Standard 22 (22.1 and 22.3)

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

Key Findings and Evidence

Standard met?

3

The general staffing policies of the authority were found to be appropriate for providing a purposeful yet caring organisation and the staff said that they felt they worked for a fair employer.

The authority's whistle-blowing policy was known and understood by all workers.

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

Training was clearly an important aspect of improving performance and quality in the agency and it was evident from discussions with key workers that staff development was of a good standard and aimed at meeting the needs of workers. Training is delivered from a range of sources, including external agencies and specialists, and covered a range of relevant areas. There was an annual training plan for the agency that outlined a range of in-house training, conferences and seminars, post-qualifying training, and management development. This was a coherent document that demonstrated that the agency had an evaluative approach to staff development and the benefits that this brought to the work of the agency. This is supplemented by the training programme offered by BAAS. The training that had been identified – and that which had been undertaken – was clearly aimed at developing knowledge and expertise in areas relevant to adoption work, the legislation governing it and contemporary developments in practice and thinking.

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

The case files that were inspected were found, in the main, to be of a good standard; they were well maintained, contained most of the required information and were subject to a new audit regime. The case recording policy is a reasonably comprehensive document that sets the baseline for case file management; it is felt, though, to be not as explicit as it should be. It does not make explicit, for instance, that decisions made by supervisors must be recorded, signed and dated. Although there was some evidence found of supervision decisions being recorded it was the exception rather than the rule; the interpretation by the agency of this standard being that only 'important' decisions are recorded may be the reason for this. Another deviation from the agency's policy was several occasions where records were not signed, either by the worker or the manager.

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

All necessary information is provided by the agency to placing authorities with which they are working to effect the appropriate placement of children; they agency ensures, so far as it is able, that reciprocal arrangements are in place to provide adopters with up to date and complete information on children being considered for placement.

The was a written policy and procedure that, taking into due consideration data protection legislation, clearly outlines the arrangements that the agency has put in place to provide access to case records, requests for access and written agreements. It was clear that the agency followed the policies and guidance that were in place.

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

There is a written case recording policy and procedure that covers most relevant areas (but see section 25 above); it was known and understood by the manager and workers of the agency, and it was evident that practice reflected procedures.

The records of all workers were in place and there were systems in place to record complaints and allegations (although there had been none). A new audit system was in place and the manager was keen to develop further good practice in record keeping.

Overall the general administration and record management of the agency was of a good standard; sufficient safeguards are in place to maintain security and practices were noted to be committed to confidentiality and safety of information.

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?

3

All the personnel files on the managers and workers of the agency that were inspected were found to be of a good standard, well maintained and included all relevant information. There were some inconsistencies regarding the system for verifying references but at the time of the inspection we were shown a new system that was about to be introduced to eliminate these inconsistencies. All CRB checks were in place and records maintained in a separate file. Most of the panel members' files were maintained correctly but there were some minor omissions that that the agency should audit to ensure full compliance with this standard.

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 office is situated in an accessible location and is open to visitors during normal office hours. There is sufficient space to accommodate the workers and managers and it is equipped to a satisfactory standard. There are satisfactory systems in place to ensure that information is kept secure and confidential and all electronically stored information is 'backed-up' continuously. There is a fully formed Disaster Recovery Plan for the Authority.

PART C	PART C LAY ASSESSOR'S SUMMARY				
(where applicable)					
Lay Assessor		Signature			
Date					

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PROVIDER'S RESPONSE

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

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

Please limit your comments to one side of A4 if possible

Action taken by the CSCI in response to the provider's comments: YES Amendments to the report were necessary YES Comments were received from the provider Provider comments/factual amendments were incorporated into the final YES inspection report Provider comments are available on file at the Area Office but have not been incorporated into the final inspection report. The inspector believes the report to be factually accurate Note: In instances where there is a major difference of view between the Inspector and the local authority adoption manager, both views will be made available on request to the Area Office. Please provide the Commission with a written Action Plan by 30th September **D.2** 2004, which indicates how statutory requirements and recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request. Status of the Provider's Action Plan at time of publication of the final inspection report: Action plan was required YES YES Action plan was received at the point of publication YES Action plan covers all the statutory requirements in a timely fashion Action plan did not cover all the statutory requirements and required further discussion Provider has declined to provide an action plan Other: <enter details here>

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	Maidenhead Adoption fair and accurate reproducted on the abo	of Royal Borough of Windsor & Service confirm that the contents of this report are a esentation of the facts relating to the inspection we date(s) and that I agree with the statutory d will seek to comply with these.
	Print Name	
	Signature	
	Designation	
	Date	
Or		
•		
D.3.2	of this report are a fai	am unable to confirm that the contents and accurate representation of the facts relating to the on the above date(s) for the following reasons:

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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