

inspection report

Local Authority Adoption Services

West Berkshire Council Adoption Service

Avonbank House

West Street

Newbury

Berkshire

RG14 1BZ

13th 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 West Berkshire Council Adoption Service **Headquarters Address** Avonbank House, West Street, Newbury, Berkshire, RG14 1BZ **Adoption Service Manager** Tel No: Maggie Short 01635 519051 **Address** Fax No: Avonbank House, West Street, Newbury, Berkshire, RG14 01635 519740 1BZ **Email Address** Certificate number of this adoption service **Date of last inspection** Date, if any, of last SSI themed inspection of adoption service

Date of Inspection Visit		13th December 2004	ID Code
Time of Inspection Visit		10:00 am	
Name of Inspector	1	Rosie Dancer	125017
Name of Inspector	2	Lyn Smith	
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		Mrs Maggie Short	

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Description of the Adoption Service

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Implementation of Statutory Requirements from last Inspection
Statutory Requirements from this 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 West Berkshire 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. 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 Family Placement Team is part of the provision of adoption services provided by West Berkshire Council's Children and Young people Directorate. The Directorate operates the services and functions as required by current legislation.

The team do not undertake the preparation and assessment of inter-country adopters; all enquirers are referred to PACT (Parents and Children Together) with which West Berkshire has a service agreement to carry out assessments of people wishing to adopt from overseas.

The Berkshire Adoption Consortium comprises of six Berkshire local authorities and was established in order that the small unitary councils could share adoption resources and placement opportunities. The Berkshire Adoption Advisory Service (BAAS) is jointly owned by the six unitary Authorities in Berkshire and this service is available to members of the public seeking advice on all aspects of adoption.

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 inspection was the first of West Berkshire Council's Adoption Service undertaken in relation to The Care Standards Act 2000 Part 111 and the National Minimum Standards introduced on 1st April 2003. The developments in adoption legislation and practice have initiated significant changes for those delivering an adoption service, with this in mind the inspectors are of the view that the evidence gathered during this inspection shows that West Berkshire's adoption service is developing in line with legislation and standards.

The inspectors were aware of the enthusiasm of managers and staff to further develop their service and hope that this report and its findings will assist them in this process.

The inspectors would like to thank the managers, staff and the adopters who took part in the inspection process for the hospitality shown to them during the time of the fieldwork

<u>Statement of Purpose (Standard 1)</u> <u>This standard had minor shortfalls</u>

There was a clear Statement of Purpose, which identified the aims and objectives of the Adoption Service. The select committee had approved the statement and a process for review was in place. The services policies and procedures reflected the information contained within the statement.

The information provided to children had been well developed and was presented in an attractively designed booklet. There are some additions required in order that children are provided with all information required by regulation.

<u>Securing and Promoting Welfare (Standard 2)</u> This standard was met

The inspectors noted some good examples of matching processes which were child focused. The choice of placement for West Berkshire children is widened by the consortia arrangements.

The inspectors noted some excellent practice in respect of the placements of a large sibling group for whom it was not possible to place together. Careful assessment of the children's needs and placement issues had taken place and the children's grandparents had been fully involved at all stages of the process.

In respect of one case there were some issues identified which the inspectors referred to the local CSCI office. The issues are not directly related to the adoption service.

Prospective and approved adopters (Standards 3-6) 1 standard was fully met 3 standards had minor shortfalls

There is a comprehensive pack of information for prospective adopters with which the inspectors were impressed.

Some adopters reported that they had experienced delays at various stages of the process including the response to their initial enquiry, in the commencement of the preparation group, in the home study commencing and in the case being heard at panel.

Inter-country adopters are referred to PACT.

There had been a recent appointment to a new post of recruitment worker. The inspectors were informed by social workers that this appointment had meant that their workload was more manageable due to not having to carry out recruitment tasks. It was hoped that a targeted approach to the recruitment of prospective adopters would be developed.

The content of the preparation group sessions was comprehensive; adopters reported that the sessions were informative and that their views about the sessions had been sought by the adoption service. The inspectors noted that some changes had been made to the sessions following suggestions by adopters.

The inspectors noted some good quality assessment work had taken place and form F reports viewed were of good quality and included a clear analysis of the information gathered. The inspectors noted that in each case second opinion visits are carried out by one of the assistant team managers; the inspectors view this as good practice.

Written procedures for the use of the adoption register need to be developed in line with the recent changes.

Information about a child prospective adopters are considering is provided in a number of ways;

- The child's form E is provided
- Life appreciation days are held during which all relevant professionals and people who have known the child such as foster carers and school teachers attend to meet with prospective adopters to talk about the child's early life
- Separate meetings with the child's foster carer or the medical adviser can be arranged
- A one off meeting with birth parents in appropriate cases is arranged
- A placement planning meeting is always held and is subject to review during the introduction stages.

The inspectors noted that comprehensive adoption support plans were in place and that there was a good range of services available to adopters provided internally and externally.

<u>Birth Parents and birth families (Standards 7–9)</u> 2 standards were met 1 standard had minor shortfalls

The inspectors noted an example of excellent practice in fully involving the grandparents of a group of siblings in the adoption processes.

While the inspectors noted that in one case sampled a birth father had not been fully involved in the planning and legal processes in general the services available to birth parents in Berkshire are well developed. The BAAS provides an independent service to birth parents who are provided with details of national organisations which can offer them advice and support. The BAAS operates the letterbox facility and direct contact plans and the coordinator is available to support birth family members in letter writing if this is required.

Adoption Panels and Agency Decisions (Standards 10-13) 3 standards were met 1 standard had minor shortfalls

On this occasion the inspectors did not observe the panel. The inspectors did carry out a telephone interview with the chair of the panel and read the panel papers for the 3 panel hearings preceding the inspection.

There are clear written policies and procedures in place in respect of the panel's functions.

Prospective adopters are invited to attend panel routinely and are invited to be heard.

Induction and training for panel members had been established and new panel members are expected to observe a panel hearing prior to sitting as a voting member.

The adoption panel sits on a monthly basis and there is always an adoption adviser, medical adviser and legal adviser present. Two adopters informed the inspectors that the planned date for their case to be heard at the adoption panel had been cancelled due to incompleteness of paperwork. While this was frustrating for the adopters the missing paperwork had not been provided by an outside agency and therefore was beyond the control of the adoption service.

Minutes of each panel are produced.

Panel papers are provided in advance of the panel hearing to the panel members and the decision maker.

The arrangements for decision making are effective; the system for notification in writing was noted by the inspector as having been subject to considerable delay in some cases.

<u>Fitness to provide or manage an adoption agency (Standards 14,15)</u> 2 standards were met

The senior management team, including the adoption manager, were suitably qualified and experienced in carrying out their respective roles. The inspectors formed the view that some excellent working relationships had developed between the management team and this clearly benefited the service.

<u>Provision and management of the adoption agency (Standards 16-18)</u> 2 standards assessed were met, 1 standard had minor shortfalls

The inspectors formed the view that overall the adoption service was well managed and run effectively, and efficiently in line with the Statement of Purpose. The system for file auditing had slipped and needs re establishing.

The executive side of the council is proactive in the monitoring and the development of the adoption service; to fully meet this standard reports should be provided on a half yearly basis to the members.

The service had access to a good range of specialist advisers.

Employment and management of staff (Standards 19-23) The 5 standard assessed were met.

There are clear vetting and recruitment and selection procedures in place.

The members of staff involved in the adoption service were suitably qualified; the manager informed the inspectors that the family placement team is a new staff group with some team members relatively new to adoption work. She also informed the inspectors that there are similar difficulties in the children and families teams. This had put pressure on the more experienced members of staff in terms of providing advice and support to the newer team members and to the children's teams. The inspectors were satisfied that senior managers ensured that any impact on the adoption service had been kept to a minimum.

Staff did report that they received regular, planned supervision and were clear about their roles, responsibility and accountability. Overall the staff spoken to by the inspectors felt that West Berkshire was a fair and competent employer.

The inspectors were of the view that the internal and external training opportunities for staff were excellent both in terms of the quality and range of adoption issues. Some training sessions run by the BAAS are joint training with panel members or prospective adopters.

Records (Standards 25-28)

1 standard assessed was met, 3 standards had minor shortfalls

One case file sampled contained a number of inaccuracies, however In general files were well maintained and contained evidence of supervisor's decisions.

The system for file audit needed re establishing and a clear policy needs to be established in respect of the information held about CRB checks.

There is a clear access to records policy.

In respect of complaints and compliments and allegations there needs to be a separate record held by the manager in order that she is able to monitor these.

In respect of personnel files two files sampled by the inspectors noted some shortfalls in the information held.

Fitness of Premises (Standard 29)

This standard was met

The premises the family placement team are located in are fit for purpose and the arrangements in respect of security are adequate. The records are appropriately stored and there are arrangements in place in the event of a disaster for alternative premises and the back up of records.

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:

Implementation of Statutory Requirements from Last Inspection (Not relevant at first CSCI inspection)				
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 wit	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	LAAS Regs 2003 Regulation 3. (1)	LA1	The manager must ensure that the children's guide contains all matters listed in Schedule 2 of the 2003 regulations.	By 1/04/05
2	AAR 1983 Regulation 11	LA13	The manager must ensure that decisions made by the decision maker are conveyed in writing to the relevant people in a timely way.	By 28/02/05
3	LAAS Regs 2003 Regulation 11	LA28	The manager must ensure that all required information and checks are carried out in respect of all members of staff working for the purposes of the adoption service	By 28/02/05

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	LA3	The manager should monitor the speed of the response initial enquirers receive and ensure that there is no delay in sending out information. This is with specific reference to the point of first contact.
2	LA4	The manager should consider retaining CRB disclosures on adopters' files.

3	LA4	The manager should closely monitor the length of time adopters are waiting to attend preparation groups and for home studies to commence.
4	LA5	The manager should ensure that all policy, procedures and other documents used by the service are updated to reflect the recent changes to the use of the Adoption Register.
5	LA6	The manager should arrange for a professionals meeting to be held in respect of the disruption case tracked in order to establish if there were any lessons to be learnt which could inform future practice.
6	LA7	The manager should ensure that a record is made in the event of a parent declining the opportunity to read and sign the Form E.
7	LA17	The manager should ensure that the plans to provide reports to the elected members on a 6 monthly basis are actioned.
8	LA25	The manager should ensure that the file identified by the inspectors as having a number of inaccuracies is audited and all necessary amendments are made.
9	LA27	The manager should ensure that the case audit system is reestablished.
10	LA27	The manager should ensure that she keeps records of complaints and allegations about the adoption service for monitoring purposes.

• 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				
Prospective adopter survey				
Approved adopter survey	YES			
Birth parent / birth family member survey	YES			
Checks with other organisations and Individuals				
 Directors of Social services 	YES			
Specialist adviser (s)				
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 	YES			
 Contact with supervising social workers 	YES			
Examination of files	YES			
Individual interview with manager	YES			
Information from provider				
Individual interviews with key staff				
Group discussion with staff	YES			
Interview with panel chair	YES			
Observation of adoption panel				
Inspection of policy/practice documents				
Inspection of records (personnel, adopter, child, complaints, allegations)				
	2/40/04			
·	3/12/04 09.00			
<u> </u>				
Duration Of Inspection (hrs)				
Number of Inspector days				
Additional Inspection Questions:	NA			
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				
Total Number of staff employed (excluding managers) FTE	7.9			
including support worker and Publicity and Recruitment worker.	1.9			

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

There was a clear Statement of Purpose, which identifies the aims and objectives of the Adoption Service and fully meets the regulations.

Staff were aware of the Statement of Purpose and had input into its development.

The Statement of Purpose was approved by the Select Committee on 30/09/04; the next review is planned for September 2005.

The manager informed the inspectors that children are provided with a booklet compiled by the Berkshire Adoption Advisory Service (BAAS), the children's complaints leaflet and information about the children's rights service provided by NCH.

The information provided is being reviewed to provide information to children based on their age and level of understanding; the manager must ensure that the information includes the address and telephone number of the commission and the name, address and telephone number of the Children's Rights Director for England.

The inspectors were also informed that information can be provided in a range of languages and formats and that parents with learning difficulties have access to an advocate.

The policies and procedures viewed by the inspectors reflected the information contained within the statement of purpose.

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?

3

The adoption service's procedures in respect to family finding and matching have been well developed and the inspectors noted from the cases sampled in practice these procedures had been followed.

The choice for local children is widened through the service being a member of the BAAS in the following ways:

- Monthly lists of available adopters throughout the consortium are produced enabling possible matches to be considered
- The Adoption Exchange Forum which is held twice a year and includes agencies outside the consortium. This involves social workers meeting together with profiles of their adopters or children and adopters are invited and are able to discuss any child featured at the forum who they may like to consider adopting.

The manager informed the inspectors that when it is not possible to match a child with adopters who reflect his culture, ethnicity, religion and/ or language a clear written explanation is provided to the adoption panel and the child in an age appropriate way.

The inspectors noted from one case sampled that there had been careful consideration in terms of placements in respect of a large sibling group of children who could not be placed together. The inspectors spoke to a birth family member of this sibling group who told the inspectors about the careful child focused planning carried out by the service in terms of which siblings would be placed together and the matching with adopters.

As stated in the summary there was one case sampled for which it was apparent to the inspectors that some issues required further follow up. Following the inspection, the inspectors requested further information from the adoption manager, which was duly provided by her. The inspectors were able to conclude that this standard had been met, as the issues did not relate directly to the work of the adoption service.

In the last 12 months:	
How many children were identified as needing adoptive families?	6
How many children were matched with adopters?	3
How many children were placed with the service's own adopters?	7
How many children were placed with other services' adopters?	7
How many children were referred to the Adoption Register?	2
In the last 12 months, how many children were matched with families which reflected their ethnic origin, cultural background, religion and language?	3

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How many sibling groups were matched in the last 12 months? How many allegations of abuse or neglect were made about adopters approved by this adoption service? On the date this form was completed, how many children were waiting for a match to be identified?	What percentage of children matched with the adoption service's adopters does this represent?	100	%
adopters approved by this adoption service? On the date this form was completed, how many children were	How many sibling groups were matched in the last 12 months?	2	
		1	
		3	

Prospective and approved adopters

The intended outcome for the following set of standards is:

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

Standard 3. (3.1 – 3.3 and 3.5 - 3.6)

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

Key Findings and Evidence

Standard met?

2

The inspectors were provided with the comprehensive information pack provided to enquirers at the initial stage. This includes clearly written details about the adoption processes and the services eligibility criteria.

The inspectors found some disparity between the speed of response to initial enquiries, which was stated by the manager as being within 3 days, and the experience of some of the prospective adopters. The two questionnaires received by the inspectors showed that these adopters had issues with the speed of the response to their initial enquiry. One stated they had waited one month before written information was provided and stated that the information provided was poor. The second couple stated that they had waited 2 months for a response.

The inspectors met with 4 adopters and discussed with them their experience of the arrangements the service made in respect to arranging an initial appointment with them to discuss their application. Two stated that they had been satisfied with the speed of the response, one stated that the information sent out was informative and an appointment was made promptly and the fourth stated that they made a number of telephone calls to request an initial appointment before receiving a response.

The service has a contract with Parents and Children Together (PACT), an adoption agency which provides a service to inter-country adopters.

There are systems in place to ensure that priority is given to those most likely to meet the needs of the children waiting for a placement. There has been a recent appointment of a recruitment worker. The inspectors are of the view that this appointment will mean the service will be able to take a targeted approach to the recruitment of adopters most likely to meet the needs of children waiting for adoption.

Prospective adopters meet with people who have been through the adoption process as part of the preparation group sessions.

For adopters considering challenging placement such as a large sibling group or a child with disabilities there is the scope to put them in touch with adopters who have similar experiences.

There is an adoption newsletter produced 3 times a year and this provides details of support available.

Adopters are provided with general information about children waiting for adoption through the initial information pack and preparation groups. In addition to the monthly list of consortium children waiting for a placement adopters have access to the BAAF "Be My Parent" publication.

The BAAS pays for approved adopters to have membership for a 3 year period of Adoption UK.

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 viewed the details for the preparation groups adopters are required to attend. The content of the programme fits into a framework of equal opportunities and provides a comprehensive view of the adoption process.

There is a rolling programme of preparation groups, with the consortium members running a group in turn. This allows for adopters from West Berkshire to attend a group run by another member agency.

Some of the adopters who expressed a view about the timescales involved were frustrated at the length of time before they were invited to attend a preparation group.

The venues used clearly may mean that a West Berkshire adopter may need to travel to attend other areas' preparation groups and two sets of adopters informed the inspectors that the venue was not convenient for them. All of the venues used have access for people with a disability.

Feedback forms are completed by adopters following the preparation groups and information from feedback is used to inform future preparation programmes. Adopters are also asked at the second opinion visit and at the panel stage to provide feedback on the process.

Overall adopters were complimentary about the content of the preparation groups, with positive comments made such as that it was a rewarding experience.

The assessment process is based on the BAAF form F format and references and statutory checks are carried out. In respect to evidence of CRB disclosures, the information on files viewed varied from the disclosure being on file to notification by the Human Resources department that a check had been carried out. The inspectors have recommended, in line with recent guidance from the CRB, that disclosures are kept on adopters' files.

In terms of the home study process the adopters were complimentary about the sensitivity of the social workers involved but in some cases concerned about the wait for a social worker to be allocated and in two cases adopters experienced a change in social worker. One set of adopters felt that this led to the assessment being started from scratch.

The inspectors noted some good examples of form F reports which contained detailed analysis by the social worker of the information contained within the report.

The assistant team managers carry out second visit opinions visits to each adopter to assess the quality of the information and analysis as contained in the form F report.

The manager informed the inspectors that the allocated worker keeps the prospective adopters informed of the progress of their application.

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 provided with a pack of information which is provided to adopters following approval. In the inspectors view this pack was an excellent example of the key information adopters need. The booklet had been written by BAAS. Two of the four couples spoken to by the inspectors stated they had not received any information post approval. This was immediately addressed by the manager who subsequently reported to the inspectors that one of these couples had been handed the pack by their social worker.

The inspectors noted that due to very recent changes in the use of the Adoption Register (LAC (2004) 27 the policy, procedures and information provided to adopters in respect of the register was in need of updating.

The arrangements for matching, introduction and placement processes are contained in the post approval pack.

Prospective adopters are provided with the BAAF form E report for any child they are considering. The child's social worker and the family finder visit the adopters to discuss the information provided. The adopters also have the opportunity to discuss the child with the foster carer caring for him. If there are specific needs which are of a specialised nature the service will seek specialist advice. The service had access to the services of a medical specialist and she is available to meet with adopters in the event of a medical query.

The BAAS runs Life Appreciation days. These aim to help the adopters gain a greater understanding of the child's history. Attendees include professionals who have worked with the child and birth family in the planning processes, professionals such as playgroup leaders and where appropriate birth family members who are supportive of the plan.

The inspectors noted that for the cases sampled there were comprehensive post adoption support plans in place.

Another arena for adopters to further advance their understanding of the child is during the placement planning meeting.

The system in place to record if adoptive parents agree to notifying the service of the death of the child is contained within the post adoption letter contact agreement. This issue is also covered during the preparation and assessment processes.

Adopters are expected to make a book about themselves and their family when a placement is proposed. On this occasion the inspectors did not have an opportunity to view an example. The inspectors were informed that it is possible for a video to be made about the adopters in the event of the child's needs dictating that this would be a better medium.

Does the local authority have written procedures for the use of the	YES	
Adoption Register?	163	

Standard 6 (6.1 - 6.7)

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

Key findings and evidence

Standard met?

2

There is a comprehensive range of services available to support adopters in providing a permanent, stable and safe home for children placed with them. These include:

- A detailed adoption support plan which includes arrangements for post adoption contact plans
- Financial assistance during the introductory period.
- Adoption allowance where appropriate
- Support by a family placement worker and an expectation that all children will have a named social worker
- Regular reviews of the placement
- The emergency duty team and an out of hours service run by the family placement workers which is available to provide support and advice
- Access to various specialist teams such as the CAMHS team, the Connect team and the educational adviser
- Access to a post adoption support group
- An adoptive fathers group
- An annual conference and post adoption training organised by BAAS
- Membership of Adoption UK for 3 years post approval at panel

While the service does not deal with inter-country adoption the manager informed the inspectors that Pan Berkshire support is available to inter-country adopters and they are able to access the conference run by BAAS.

As a part of the preparation and assessment processes adopters are informed about issues around discrimination and the impact on individuals' lives and enabled to develop strategies to help a child placed with them to develop a positive sense of self. This includes helping a child to understand his history through using life storybooks and through the contact arrangements. The BAAS runs post adoption training courses such as explaining adoption to children. There is also a newsletter produced periodically and an annual conference is held.

In the event of any difficulties in an adoptive placement occurring the manager informed the inspector that the welfare of the child is considered as paramount. A placement review will consider interventions and support needed and the adoption support plan will be reviewed. Separate supports will be identified for the adopters and the child and if there is a risk of placement breakdown contingency plans will be established.

In 12 months preceding the inspection there had been one placement disruption. The issues involved were out of the ordinary and the inspectors accept that the issues involved were not a result of any omission on the part of the adoption service. The inspectors noted that the panel adviser advised that in the circumstances a disruption meeting was not needed. However, It was recommended by the adviser that an internal professionals' meeting should be held to look at the specific issues in this case. This had not occurred. The inspectors are of the view that in this case such a meeting should have occurred and have recommended that the manager consider arranging such a meeting.

Number of adopter applications started in the last 12 months	3	
Number of adopters approved in the last 12 months	5	
Number of children matched with the local authority's adopters in the last 12 months	7	
Number of adopters approved but not matched	3	
Number of adopters referred to the Adoption Register	2	
How many placements disrupted, between placement and adoption, in the last 12 months?	1	

Birth Parents and Birth Families

The intended outcomes for the following set of standards are:

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

Standard 7 (7.1 - 7.5)

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

Key Findings and Evidence

Standard met?

2

On this occasion the inspectors did not have contact with birth parents of children adopted. They did speak to the grandmother of children who had been placed for adoption. The grandmother to whom the inspectors spoke was fully involved at all stages of the process and reported that the service that her family had received had been very child focused but also sensitive to the adults' needs. She reported that she was happy that the outcome for her grandchildren had been positive and that ongoing contact had been organised with her. This in the inspectors' view was a case which clearly shows that some excellent practice had resulted in effective planning for the children with the full involvement of birth family members.

A second case sampled seemed not so positive in terms of fully involving a birth father. In the inspectors' view he had not been enabled to be as fully involved in the planning and legal processes as he should have been and the prospective adopters had been left in an anxiety provoking situation. The inspectors have recommended that the manager carry out a review of this case in order to establish if there were any lessons to be learnt which could inform future practice.

The inspectors also viewed children's files and with the exception of the case discussed above found evidence to show that children's birth parents and family members had been involved in the planning processes and had been provided with information about various support groups and services available to them.

The support service available is independent in that services are run by BAAS and this is available to parents at the time that adoption is identified as the plan for the child. In most cases there is an opportunity for birth parents and other significant people to meet with the adopters. Birth family members are encouraged to contribute to their child's life story work.

There is a leaflet in respect of advising parents of the importance of their views being presented to the adoption panel. Parents are encouraged to provide their views before each statutory review. Parents' views are included in the form E, which the manager informed the inspectors they are encouraged to sign. The inspectors recommend that the service record where a parent declined to read and sign the Form E.

The BAAS has a project worker whose role is to engage with parents at the point at which adoption has been identified as the plan for the child.

The work carried out can include advice, general support, counselling and advocacy. Parents are also signposted to other organisations that can offer a similar service such as

Norcap and the National Parents Network.	

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

In addition to the work carried out as identified in standard 7 the letterbox facility operated by BAAS provides birth family members with the opportunity to revisit and add to the information the child has about his heritage. The BAAS letterbox co-ordinator is available to assist birth family members in letter writing and providing photographs. In the event that the contact plan is a face-to-face meeting the BAAS worker co-ordinates this and supports birth family members as necessary.

These arrangements were subject to review in 2001 and this review took into account birth parents' views, It was reported to the inspectors that the feedback from parents has been very positive. A further review of these arrangements is planned for 2005.

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

When adoption has been identified as the plan for a child a referral is made via the BAAS to the birth parents project. This runs a bi-monthly birth mothers' group operated by Slough Borough Council on behalf of the consortium and BAAS. The project provides information to birth families about national and local support groups and supports birth parents.

The manager informed the inspectors that following discussions with some birth parents a booklet for birth parents is being developed.

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

On this occasion the inspectors did not observe the panel. The panel had been observed twice in the past 12 months as part of inspections of two of the other member authorities. The inspectors did carry out a telephone interview with the chair of the panel.

There are clear written policies and procedures in place in respect of the panel's functions. The conclusion reached following the previous observations was that these were followed.

The panel chair informed the inspectors that a formal system for feedback to the adoption service about the quality of cases presented to panel was being considered. The chair also said that a formal system for updating panel about the progress of cases was to be developed.

Prospective adopters are invited to attend panel. From the seven adopters and social workers who expressed a view about panel, two stated that they found the experience daunting. One set of adopters reported that they had been shown a folder containing the details and photograph of each panel member before going in to the meeting; they told the inspectors that they had found this very useful information.

The panel chair stated that she was satisfied that the quality of work carried out by the service was good. She explained that the adviser to the panel reads all papers and if there are concerns about missing information or poor quality of information she will advise that the case is deferred.

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 inspectors were provided with the papers for the three panel hearings preceding the inspection. The inspectors noted that each of these panels had been properly constituted.

There are written job descriptions in respect to panel members.

Training is provided to panel members by the BAAS and panel members can attend any training arranged for adoption staff.

Panel members receive copies of the BAAF news and events letter.

This panel does not consider inter-country adoption cases.

New panel members are expected to observe a panel hearing before sitting as a voting member.

The inspectors viewed the contents of one panel members' file, all appropriate information was present.

There is a programme of induction for panel members and all panel members are provided with an induction pack.

There is an annual joint training session with adoption social workers; in 2004 the topic was the Adoption and Children Act 2002.

In respect of ensuring that panel members are appropriately trained and are kept abreast of changes in legislation the inspectors noted that there were relatively new systems in place which appeared to work effectively.

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 adoption panel sits on a monthly basis and minutes of each panel are produced.

There is always a professional adviser present and access to medical and legal advice. The arrangements for ensuring there is no delay to planning for children are that either a panel sitting will be extended or an additional date will be arranged.

Panel Papers are provided to panel members in advance of the meeting.

Two adopters informed the inspectors that the planned date for their case to be heard at the adoption panel had been cancelled due to incompleteness of paperwork. While this was frustrating for the adopters, as an outside agency had failed to provide the paperwork the situation was beyond the control of the adoption service.

The minutes of the previous panel are discussed at each panel and amended as necessary.

Panel minutes include details of the panel discussion, recommendations made and reasons for conclusions having been reached and an extract of the minutes for each case is sent to the social worker for inclusion on the appropriate case files.

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?

2

The inspectors noted that the system for decision making works effectively with the decision maker reading the panel papers and a draft set of minutes prior to his decision making. The panel adviser is available for discussion if required.

The system for relevant people to be informed verbally appeared to work well, however the inspectors noted that letters written to inform the relevant people of the decision makers decision are often subject to considerable delay and a requirement has been made in respect to this.

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 manager of the service holds a CQSW/Postgraduate Diploma in Social Work, an NVQ level 4 in management and has extensive management experience within a childcare setting.

The two assistant team managers are also suitably qualified and experienced in working within children's services.

The financial arrangements appeared to ensure that the adoption service is run on a sound basis. There are monthly budget reports produced.

The manager and her assistant managers form an effective management team (see also standard 16)

The adoption service produces an annual business plan and the inspectors were provided with a copy of the most recent plan. The inspectors noted that the plan had been developed in line with the changing legal requirements for adoption services and overall the plan reflected the aims and objectives of the statement of purpose.

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	

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

There are appropriate job descriptions in place in respect of managers and the managers had undergone satisfactory statutory checks.

There is a system in place of verifying references provided for staff.

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 The adoption service is managed by knowledgeable and efficient managers and is effective overall. At the time of the inspection there had been pressure on the management of the service as two extremely complex cases were being case worked by the two assistant team managers. This was as the there was a shortfall in social workers who were experienced in Court work. The inspectors were informed that this situation had impacted on the time the two managers had available to carry out their primary roles and that this had especially impacted on the developmental work planned for the service. The inspectors were pleased to note that both of these cases were nearing completion. The placing social workers confirmed that the above situation had not impacted significantly on issues relevant to them such as supervision and team meetings. The service is run in accordance with the statement of purpose and the business planning reflects the stated aims and objectives. There are clear arrangements in place in respect of lines of responsibility and staff seemed clear about these. Managers and staff were aware of their responsibility to declare any conflicts of interest. The inspectors were satisfied by the evidence seen during the inspection that social workers had a good level of respect for differences in terms of race, culture religion, sexuality, gender and disability and dealt with such issues in a sensitive way. A recommendation has been made under standard 5 in respect of the recent changes to the Adoption Register. Number of complaints received by the adoption service in the last 12 1 months Number of the above complaints which were substantiated

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?

2

There are clear procedures for the overall monitoring of the service. These include monitoring timescales for applicants and children and quality assurance issues. The inspectors noted at the time of this inspection that the system for file auditing, which enables the managers to carry out first hand quality assurance of individual cases, had slipped and the inspectors have recommended that attention be paid to this issue.

Where other local authorities are placing children BAAF interagency charges are made. For placements within the consortium the BAAS consortium financial agreements are used.

The inspectors were informed by the manager that there was an established adoption allowance system in place for relevant cases.

The elected members receive an annual report; the inspectors were informed that it had been recognised that reports should be provided on a half yearly basis to meet standards and that arrangements to action this were in progress.

There is a Corporate Parenting Task Group. Councillors receive regular reports on Performance Indicators and a West Berkshire councillor sits on the adoption panel.

The inspectors met with two of the councillors and were impressed with their enthusiasm and dedication in progressing the services provided to looked after children, including those for whom the plan is adoption.

The inspectors were informed that the BAAS provided training for the members on the work of the adoption service and BAAS and on changes to legislation.

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?

3

There is a medical adviser and a legal adviser who are available for consultation by staff. Both of these individuals are advisers to the panel.

The adoption service is a member of BAAF, Norcap, Adoption UK and BAAS. Staff use these organisations for consultation and training.

For inter-country adoption specialist advice is available through PACT.

There are written protocols in place in respect of the medical and legal advisers.

Employment and management of staff

The intended outcome for the following set of standards is:

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

Standard 19 (19.1 – 19.14)

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

Key Findings and Evidence

Standard met?

3

There are clear vetting and recruitment and selection procedures in place. Staff who are involved in the interviewing process receive appropriate training in this area.

All workers are expected to have had a satisfactory CRB check before taking up their post.

The manager informed the inspectors that there is a system in place in respect of updating CRB checks on a 3 yearly basis.

All social workers are qualified at DipSW or equivalent.

The service is on track for 40% of social workers employed within the adoption team having obtained a PQ1 by April 2006.

The social workers with whom the inspectors met displayed a good knowledge and understanding of the issues around adoption and confirmed that a variety of training is offered to them through BAAS, including birth records counselling training.

A system is in place for less experienced members of staff to work a case jointly with a more experienced member of staff.

The manager informed the inspectors that specialist advisers are appropriately qualified in their respective fields.

The BAAS provides a service to birth parents and undertakes the Section 51 birth records counselling for adoptees.

Qualified workers supervise the support workers who carry out specific pieces of work during the adoption process.

(See standard 28 in respect to the content of personnel files.)

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?	12.5	%

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 inspectors met with a group of family placement social workers, they confirmed that they received regular supervision and there is an annual appraisal system in place. Their individual training needs are identified through the supervision and appraisal systems. The less experienced workers confirmed that there is a tailored induction programme in place and that the more experienced workers provided a good level of support to them. The group also informed the inspectors that senior managers are approachable. The inspectors noted that senior managers, such as the service managers, sit with the social workers in the open plan office. The inspectors are of the view that this arrangement seemed beneficial in terms of enhancing the working relationships between fieldwork staff and managers.

The manager identified some issues that were impacting on the running of the adoption service. These included:

- The family placement team being a relatively new staff team with a lack of experienced practitioners in the field of adoption presented a challenge in providing appropriate levels of consultation and guidance to colleagues in the children's teams on adoption issues and adhering to all adoption procedures.
- Difficulties in the children and families teams in prioritising adoption work due to this team experiencing a deficit of sufficiently skilled and experienced staff.

The inspectors are of the view that senior managers had ensured that these issues had not had a significant impact on adoption work. The inspectors were confident that senior managers would continue to monitor the situation.

All members of staff have job descriptions which clearly set out their roles and responsibilities.

All social workers employed by West Berkshire are in the process of registering with the GSCC.

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

The inspectors were of the view that there were an adequate number of posts to meet the needs of the service.

As stated in standard 20 there was a shortage of staff who were sufficiently skilled and experienced in adoption work. The inspectors were satisfied that senior managers ensured that these issues had not significantly impacted on the adoption work.

Staff reported that while they were busy they felt the situation would be eased by the appointment of the recruitment worker. The inspectors also observed that as the cases, which assistant team managers were working, were coming to a conclusion they would be free to work on the planned developmental projects aimed at improving the service.

Recruitment and retention policies are in place.

Total number of social work staff of the adoption service

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

1

Number of social work posts vacant In the adoption service.

1.6

Standard 22 (22.1 and 22.3)

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

Key Findings and Evidence

Standard met?

3

The staff felt that West Berkshire was a fair and competent employer and they felt well supported by senior managers.

There is a clear whistle blowing policy in place which encourages staff to raise any issues of concern without fear of intimidation. Staff reported they were aware of the policy.

Standard 23 (23.1 - 23.6)

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

Key Findings and Evidence

Standard met?

3

There was a well-established induction training programme in place.

Individual training needs are identified through the supervision and appraisal processes and the inspectors noted that there was a good range of training opportunities in place for staff.

Training is provided internally, through the BAAS and through BAAF. Staff were also able to access other external training relevant to adoption issues.

The service ensures that staff are kept abreast of changes in adoption issues in a number of ways through:

- External speakers attending some of the fortnightly team meetings
- Circulating relevant documents such as LAC circulars
- Monthly lunchtime seminars
- Team development days
- Membership of BAAF
- The BAAS holds a comprehensive variety of sessions and forums

A system to evaluate training is in place.

The training programme delivered by BAAS covered a comprehensive range of adoption subjects and the inspectors noted that sessions were available for adopters, panel members and social workers.

The inspectors met with some of the family placement team social workers and they confirmed that the training offered to them was of good quality but said that on occasions it was difficult to attend due to the pressures of caseloads.

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

There is a clear file structure in place and overall the case records were of good quality. However, in one case the inspectors noted a number of inaccuracies and the manager agreed to ensure that these were corrected. The inspectors noted little evidence of files having been audited and clearly had this occurred in this case the inaccuracies would have been identified. A recommendation has been made in respect of this under standard 27.

The arrangements for maintaining the safety and confidentiality of adoption information, in terms of the paper and electronic systems, appeared satisfactory.

All staff, including panel members and advisers, sign a confidentiality agreement.

From the files sampled the inspectors noted that evidence that statutory checks had been carried out were on file but that in some cases the information held about the check was not sufficient. A recommendation has been made in respect of this under standard 4.

The inspectors noted from the files sampled that decisions made by supervisors were kept on the adopters file.

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

Relevant information is provided to other adoption agencies in a timely way.

There is a clear access to records policy and procedure.

Standard 27 (27.1 - 27.6)

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

Key Findings and Evidence

Standard met?

2

Written policies were in place in respect of case recording which included the purpose, format, confidentiality and contents. Clear arrangements are in place in respect of secure storage and access to case files.

Separate records are kept for staff employed.

In respect of complaints and compliments and allegations there needs to be a separate record held by the by the manager in order that she is able to monitor these.

There is a case audit system in place, however at the time of this inspection it was noted that this system had not been implemented on a consistent basis. A recommendation has been made in respect of this.

The quality of panel papers, including the Form F's, are monitored by the panel.

Confidential records are securely stored.

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?

2

The inspectors viewed the personnel records for six members of staff, including the manager and one panel member. Overall, the files met regulation and standard but the inspectors noted that there was the lack of consistency in respect of the information held about CRB checks. Also:

- For one member of staff it seemed that she had been checked against the Protection of Vulnerable Adults list but not the Protection of Children Act 1999 list.
- There were some discrepancies in respect of another member of staff in terms of her employment history.
- Telephone calls to referees to verify the reference were not carried out in all cases.
- Records of the interview were not on file in every case.

A requirement has been made in respect of the above issues.

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 premises used for the purpose of the adoption service are easily accessible from Newbury town centre and open to the public during office hours. The children's teams work from the same premises and this allows for a good level of communication between the social workers.

The office used by the family placement team is open plan and the personnel who sit in this office include senior managers; the inspectors are of the view that this arrangement had enhanced relationships between the social workers and the management team.

The inspectors were informed of recent improvements in the administrative arrangements and further planned improvements. The administrative team were consulted about which system they would like to be introduced; the team informed the inspectors that the system they favoured is the one which is to be used.

Paper records are stored appropriately and the IT system is backed up on a daily basis.

Archived records are kept in a purpose built records office which is fireproof and had a sprinkler system installed.

The arrangements for security of the premises are satisfactory.

There were suitable arrangements in place in respect of provision of premises and back up for records in the event of a disaster.

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 13th 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: 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. **D.2** Please provide the Commission with a written Action Plan by 21st April 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 YES Action plan was received at the point of publication YES Action plan covers all the statutory requirements in a timely fashion YES Action plan did not cover all the statutory requirements and required further NO discussion Provider has declined to provide an action plan NO

Public reports

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

Other: <enter details here>

D.3 PROVIDER'S AGREEMENT

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

D.3.1	Service confirm that the representation of the state of t	of West Berkshire Council Adoption e contents of this report are a fair and accurate ects relating to the inspection conducted on the above with the statutory requirements made and will seek to
	Print Name	
	Signature	
	Designation	
	Date	
Or		
D.3.2	to confirm that the co	of unable tents of this report are a fair and accurate acts relating to the inspection conducted on the above g reasons:
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D.3.2	to confirm that the correpresentation of the date(s) for the following	tents of this report are a fair and accurate acts relating to the inspection conducted on the above

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.

Commission for Social Care Inspection

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