

# inspection report

Local Authority Adoption Services

## **London Borough of Lambeth Adoption Service**

Mary Seacole House, 3rd Floor  
91 Clapham High Street  
London  
SW4 7TF

29th June 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**

London Borough of Lambeth Adoption Service

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

<b>Date of Inspection Visit</b>		29th June 2004	<b>ID Code</b>
<b>Time of Inspection Visit</b>		09:30 am	
<b>Name of Inspector</b>	<b>1</b>	Maureen Moore	125773
<b>Name of Inspector</b>	<b>2</b>	Marian Denny	158200
<b>Name of Inspector</b>	<b>3</b>		
<b>Name of Inspector</b>	<b>4</b>		
<b>Name of Lay Assessor (if applicable)</b> Lay assessors are members of the public independent of the CSCI. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
<b>Name of Specialist (e.g. Interpreter/Signer) (if applicable)</b>			
<b>Name of Establishment Representative at the time of inspection</b>		Ruth Wise	

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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 London Borough of Lambeth Adoption Service. The inspection findings relate to the National Minimum Standards for Local Authority Adoption Services published by the Secretary of State under sections 49 of the Care Standards Act 2000.

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

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

The report will show the following:

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

This report is a public document.

## INSPECTION VISITS

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

## BRIEF DESCRIPTION OF THE SERVICES PROVIDED.

The Borough of Lambeth is in an inner city area of Southwest London. The council's adoption service falls within the remit of the Children's Services Division, which is part of the borough's wider social services department.

The adoption service had until just prior to the inspection, worked as a joint provision with the agency's fostering service. It now stands alone and has a practice manager in charge of the day to day business. The service manager oversees the work of the adoption and fostering teams. The adoption service is a member of the Southeast consortium which is made up of six local authority and four voluntary sector partner agencies.

The adoption team offers the following services:

- Recruitment, preparation and assessment of adoptive parents
- Matching adoptive parents to children
- Inter-country adoption assessments
- Approval of non-agency adopters
- Special guardianship
- Support and supervision for prospective adopters
- Counselling for birth parents
- Counselling for children for whom adoption is the plan
- Post adoption contact.

## 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 took place in June and July 2004. It was the first time that Lambeth Council had had been measured against the National Minimum Standards and the Adoption Agencies Regulations (2003).

The children's service was emerging from a transitional phase which had seen the realignment of its structure, brought about by the recognition of the council of the need to improve its performance. Among other things, this led to the provision of a relatively new stand alone adoption service team.

The service was in the process of rewriting its policies and procedures in relation to the adoption process. It is advised that the requirements and recommendations from this report are considered during the drafting of them.

The following is a brief summary of how the agency fared against the National Minimum Standards and Adoption Agencies Regulations:

#### **Statement of Purpose** (Standard almost met)

Lambeth's adoption service has a clearly written statement of purpose, but it needs to be amended to comply with the minimum standards and the regulations. The service has a children's guide to adoption which is more suited to older children, and which also needs to ensure compliance.

#### **Securing and Promoting Children's Welfare** (Standard met)

The inspectors found evidence that the adoption process is essentially child-centred. The social workers within the adoption team were aware of the need to match children with families who best reflect the ethnic origin, cultural background, religion and language of the children. The adoption panel considers matching issues very carefully; and it has had a significant impact in driving up standards in this, and other areas of the adoption process.

#### **Prospective and Approved Adopters** (2 standards met; 2 standards almost met)

There was evidence that applicants are welcomed without prejudice; that the eligibility criteria were explained, and that the service aimed to prioritise applicants to suit the needs of children who were awaiting adoption. There was confirmation that appropriate information was given to enquirers regarding overseas adoption. The recruitment and preparation processes were found to be to be quite thorough.



The service needs to improve the quality assurance systems around the Forms F (adopters' assessments). The service had already taken steps to improve the quality of the Forms E (assessments of children's needs). The adoption service has a service level agreement with Lambeth Post-adoption Centre which provides a variety of services on behalf of the council. The service should monitor the outcomes of this provision. It was found that Lambeth should review its approach to children's life-story work.

**Birth Parents and Birth Families** (1 standard met; 2 standards almost met)

The views of the parents are recorded on the Form E and there are plans for the service to develop a system for the birth parents' to be able to contribute further, for example, in a letter to the panel. The agency does have written information for birth parents and families regarding the adoption process. Placing social workers demonstrated sensitivity to the needs of birth families. The adoption service provides a post-adoption post box system for birth families to maintain contact with children placed for adoption.

**Adoption Panels and Agency Decisions** (1 standard exceeded; 3 standards almost met)

There were some clearly written policies and procedures available relating to the functions of the panel; but they need to be amended to comply with the standards. The adoption panel is properly constituted and comprises relevantly qualified and experienced people. The service must ensure that the panel members' files contain all information required under the regulations. The panel that was observed during the inspection was extremely well chaired and very clearly focused. The debate was extremely child-centred and very sensitive to all involved. The legal and medical advice was exceptionally thorough; very detailed and informed. It is commendable that the service acknowledges the amount of work being a member of the panel entails for all involved by appropriate remuneration. The service needs to review the timeliness of the decision making and must ensure that the subsequent confirmation in writing is monitored.

**Fitness to Provide or Manage an Adoption Agency** (1 standard met; 1 standard almost met)

The service and practice managers are both professionally qualified and experienced in child care and adoption work. Social workers in the adoption team found their manager to be open and approachable. The agency's recruitment and selection procedures need to be amended to comply with the standards and regulations.

**Provision and Management of the Adoption Agency** (2 standards met; 1 standard almost met)

There was some evidence during the inspection that the service was run in an effective manner, and it is believed that some of the fundamental components are there to develop a very good service. Lambeth has a clearly set out equality and diversity policy that states clearly the agency's expectations in relation to practice. The key performance indicators are viewed as the significant tool for judging the agency's achievements, and the executive side of the council receives these reports monthly. The elected members have established a tripartite forum whereby the leaders of the three main political parties will meet to discuss potentially sensitive cases without engaging party-political tactics.

**Employment and Management of Staff** (3 standards met; 2 standards almost met)

The inspection found that the recruitment and selection procedures were not robust enough. There appeared to have been some failures in communication between the adoption service and the HR division resulting in crucial information not being held on personnel files. All social workers in the service are professionally qualified, suitably experienced and

knowledgeable. The recent reconfiguration of the structure and the new computer data base system, "Framework", due to be implemented in October 2004, should help shape the continuous development of the adoption service. There was evidence that the service had given much consideration to the response to the national shortage of social workers and were in the process of implementing new ideas. The annual training plan provided evidence that training is linked to relevant legislation and policies. It is commendable that all social work staff are to be trained up to the European Computer Driving Licence standard via a local college.

**Records** (3 standards almost met; 1 standard not met)

The adoption service has written policies and procedures that cover the standards of record keeping which need to be updated to comply with the standards. The agency needs to develop guidance on the format of adopters' files. The children's adoption files that were seen were of a good standard and contained all information relevant to the adoption. There was evidence of a good, tight system of access to the archived records and a good tracking device for requests made for access.

However, the agency should review its procedures regarding access to information from current adoption files. The service has an appropriate statutory complaints procedure and the complaints' file was seen as part of the inspection. Staff and panel members' personnel files must be updated to ensure that they comply with regulations.

**Fitness of Premises** (Standard met)

The premises that house the adoption service are fit for purpose. The building is adequately protected and insured and the adoption service falls within the remit of Lambeth's disaster recovery plan.

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

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

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

NA

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

NA

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

NA

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

NA

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

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

NA
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**If No please list below**

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

**Action is being taken by the 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	2 (2003)	LA1	The statement of purpose must be amended to include all of the items listed under Schedule 1.	January 2005
2	3 (2003)	LA1	The children's guide must be amended to cover the points listed under schedule 2.	January 2005
3	8 (1983)	LA4	The service must undertake its own police checks in relation to the cases referred to in standard 4 and inform the commission when it has done so.	Immediately
4	15 (2003)	LA11	The service must ensure that the panel members' files contain all information required under Schedule 4 of the regulations.	January 2005
5	11A (1983)	LA13	The service must ensure that all adopters approved by the panel are notified in writing.	Immediately
6	15 (2003)	LA19	The adoption service and the HR department must develop a clearly set out protocol in relation to the Adoption Agencies Regulations and the National Minimum Standards.	January 2005
7	6,15 (2003)	LA28	All personnel files must be updated to ensure that they comply with the regulations.	January 2005

## GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

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

No.	Refer to Standard *	Recommendation Action
1	LA1	<p>The service should ensure that all prospective adopters and other stakeholders receive copies of the statement; and that it is formally approved by the executive side of the council.</p> <p>The statement of purpose and the (two) children's guides should be produced in different formats in order that it is more readily understood by adults and young people who have communication and or learning difficulties.</p>
2	LA2	<p>The service should update its policy and procedures on the matching process.</p> <p>The service should further develop its targeted recruitment of adopters from black and minority ethnic communities.</p>
3	LA3	<p>The service should review its policies regarding the information given to adopters at the onset of their assessment.</p> <p>The service should consider developing a policy of addressing prejudices and discrimination within placing agencies.</p>
4	LA4	<p>The service should put in place a system to ensure a high standard of quality assurance in relation to the assessment process as a whole, and the Forms F in particular.</p> <p>Social workers should retain copies of the notes collected during the home study visits on file, so that judgements made can be evidenced.</p>
5	LA6 LA6LA7LA9 LA6LA8	<p>The service should review its procedures in relation to support available to adopters prior to placement.</p> <p>The service should monitor and evaluate the services provided by the Lambeth Post-adoption Centre.</p> <p>The adoption service should develop a system of monitoring the existence and quality of life-story work for children who have adoption as their plan.</p>
6	LA9	<p>The service should produce a clearly written strategy for working with and supporting birth parents and families.</p>
7	LA10	<p>The written policies in relation to the functions of the panel should be amended to cover the points listed under 10.2 of the National Minimum Standards.</p>

8	LA13	The timeliness of the decision making and the subsequent confirmation in writing should be monitored as part of the tracking of all adoption cases.
9	LA14	The practice manager should undertake an appropriate management qualification.
10	LA15	Recruitment and selection procedures should be updated to comply with this standard.
11	LA16	The service should develop written procedures that cover arrangements for the use of services provided by the Adoption Register for England and Wales.
12	LA18	The service should produce procedures regarding the access to other specialist advisers and develop a written protocol governing the role of such advisers.
13	LA19	The service should provide the commission with its strategy to ensure that at least 20% of social workers will be on target to achieve the Post Qualifying Child Care Award.
14	LA20	The service should review its policy on, and approach to, the supervision process.  The service should assess the apparently high turnover of administrative staff.
15	LA21LA28	The managers of the service should consult with their colleagues in HR when considering developing any strategies regarding the recruitment and retention of staff.
16	LA25	The agency should ensure all adoption records are stored in such a manner to minimise the risk of damage from fire and water.
17	LA25	The service should adopt a system that allows for a consistent approach to recording supervision and management decisions on file.
18	LA26	The service should set up an appropriate system that monitors carefully the process of gaining access to current adoption records and ensure that staff are appropriately trained.
19	LA27	The service should develop a complaints monitoring form that tracks the whole complaints process, and cross-reference actions against the adopters' primary file.

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

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

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

Placing authority survey	YES
Placing social worker survey	YES
Prospective adopter survey	YES
Approved adopter survey	YES
Birth parent / birth family member survey	YES
Checks with other organisations and Individuals	
• Directors of Social services	NO
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	YES
• Interview with children	NO
• Interview with adopters and prospective adopters	YES
• Interview with birth parents	NO
• Interview with birth family members	NO
• Contact with supervising social workers	YES
• Examination of files	YES
Individual interview with manager	YES
Information from provider	YES
Individual interviews with key staff	YES
Group discussion with staff	YES
Interview with panel vice-chair	YES
Observation of adoption panel	YES
Inspection of policy/practice documents	YES
Inspection of records (personnel, adopter, child, complaints, allegations)	YES
Date of Inspection	29/07/04
Time of Inspection	10.00
Duration Of Inspection (hrs)	95
Number of Inspector days	9
Additional Inspection Questions:	
Certificate of Registration was displayed at time of inspection	NA
The certificate of registration accurately reflected the situation in the service at the time of inspection	NA
Total Number of staff employed (excluding managers)	13



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

The scale ranges from:

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

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

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

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

## Statement of Purpose

The intended outcome for the following standard is:

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

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

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

### Key Findings and Evidence

### Standard met?

2

Lambeth's adoption service has a clearly written statement of purpose (which sets out the service's own quality standards); of which staff were aware, and believed to be an accurate reflection of their work. This is the first statement of purpose that the service has produced and the document reflects accurately some of the work of the service; but it needs to be amended to include all of the items listed under Schedule 1 of the Adoption Agencies Regulations (the regulations).

The service should ensure that all prospective adopters and other stakeholders receive copies of the statement; and that it is formally approved by the executive side of the council.

The service has a children's guide to adoption which is more suited to older children and which needs to be amended to cover the points listed under schedule 2 of the regulations. It is understood that the service is in the process of developing a second guide more suited to younger children.

The statement of purpose and the (two) children's guides should be produced in different formats in order that it is more readily understood by adults and young people who have communication and or learning difficulties.

**See Requirement 1**

**See Recommendation 1**

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

NA

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

NO

**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 inspectors found evidence that the adoption process is essentially child-centred. Observation of the adoption panel and discussion with the panel vice-chair as well as discussion with, and questionnaires from, adoptive parents and placing social workers would support this view.

The agency is a member of the South London consortium through which it works on joint recruitment strategies. The social workers within the adoption team were aware of the need to match children with families who best reflect the ethnic origin, cultural background, religion and language of the children. The service has written guidance regarding the adoption placement of black and minority ethnic children. It also has a general matching policy and attendant procedures; this document should be updated to include relevant timescales for the matching process and to reflect the more recent legislative and national policy changes. The service also needs to ensure close monitoring and reporting of this area of practice.

The adoption service has produced a written plan that outlines the proposals for the recruitment of appropriate adopters for the children in need of families in Lambeth. However it would benefit from more analysis of the types of needs of children waiting; as well as the intended targeting of families to best meet those needs.

There was evidence during the inspection that the adoption panel considers matching issues very carefully; and that it has had a significant impact in driving up standards in this, and other areas of the adoption process.

The service had recently commissioned a quality assurance officer to monitor the quality of the Forms E. This appeared to have had a positive effect on the overall standards of the assessment of children's needs. It is understood that this work is to be expanded to cover the Forms F (potential adopters' assessments). The inspectors would support this move.

At the time of the inspection, Lambeth had 55 children awaiting placement; 35 of whom were not classed as white British. However, since January 2004 16 out of 26 children placed for adoption were not of white British heritage, so although there has been some improvement; the service acknowledged that the targeted recruitment of families from the black and minority ethnic communities needs further development.

**See Recommendation 2**

**In the last 12 months:**

**How many children were identified as needing adoptive families?**

55

How many children were matched with adopters?	26	
How many children were placed with the service's own adopters?	12	
How many children were placed with other services' adopters?	1	
How many children were referred to the Adoption Register?	11	
In the last 12 months, how many children were matched with families which reflected their ethnic origin, cultural background, religion and language?	13	
What percentage of children matched with the adoption service's adopters does this represent?	100	%
How many sibling groups were matched in the last 12 months?	3	
How many allegations of abuse or neglect were made about adopters approved by this adoption service?	0	
On the date this form was completed, how many children were waiting for a match to be identified?	28	

## Prospective and approved adopters

The intended outcome for the following set of standards is:

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

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

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

Key Findings and Evidence	Standard met?	3
<p>Discussion with approved adopters and social workers revealed that applicants are welcomed without prejudice. The service has an information pack that is sent out to potential adopters. However there was also evidence that these packs were not always sent out within timescales. It was reported that the eligibility criteria were explained, and that the service aimed to prioritise applicants to suit the needs of children who were awaiting adoption. There was confirmation found on files and through discussion with staff in the service, that appropriate information was given to enquirers regarding overseas adoption.</p> <p>Some approved adopters reported that they felt well-informed about the process; others less so. Comments included: "...sent relevant information...[social worker] responded to lots of questions...kept informed of process"; "A friendly social worker, we were given lots of reading material" and "it took a while for a response; we were not given enough information about how adoption works".</p> <p>During preparation adopters had been given access to other adopters, who were found to be very helpful and informative.</p> <p>Whilst, as stated above, applicants are welcomed by Lambeth adoption team without prejudice; the inspection found evidence that once approved, this issue was seen to be less straightforward when it came to having children suitably matched to some individual profiles. Although there was only one example of this during the inspection, the inspectors believed it to be a matter that could easily occur again. The inspectors found that the service needs to review its policy on the information provided to applicants at the onset, as to the likelihood of their being considered appropriate matches for the majority of children awaiting adoptive placements. Simultaneously, they should also contemplate how best to address the potential and perceived prejudices of placing social workers, whether they are part of their own service or from other agencies. It is important to emphasise that the inspectors found no evidence of discrimination in this or any other case on behalf of Lambeth's adoption service.</p> <p><b>See Recommendation 3</b></p>		

**Standard 4. (4.1 – 4.9)**

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

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

The returned questionnaires, interviews with approved adopters and adoption social workers; as well as the reading of preparation materials, revealed the recruitment and preparation processes to be quite thorough. Adopters' comments included: "...the assessment process is very thorough, which is good"; "[the ] preparation sessions [were] very intense, very good". Adopters particularly found the input from the extended adoptive family very useful during the preparation groups.

The agency has a comprehensive equal opportunities policy which provides the backdrop for the anti-discriminatory framework within which all services of the department are expected to operate.

In the Forms F seen during inspection there were indications of some carelessness and lack of management oversight in the detail of the assessments. It is acknowledged that just prior to the inspection the family placement team was split into two components to cover fostering and adoption separately; there now being one manager for each service. The current manager of the adoption service had hitherto been responsible for both. It is understood that the consultant engaged to work on the standards of Forms E is to be retained to do similar work on the calibre of Forms F.

It is strongly recommended that a system is put in place to ensure a high standard of quality assurance in relation to the assessment process as a whole, and the Forms F in particular. It is further recommended that social workers retain copies of the notes collected during the home study visits on file, so that judgements made can be evidenced.

The above comments notwithstanding, adopters found that on the whole, their Forms F were accurate and reflective of themselves. It was reported that social workers conducted their business with sensitivity, skill and understanding.

There was evidence on files of appropriate checks having been made on adopters. However there was an example of one applicant obtaining their own police check from another country. This is unacceptable, and the service must undertake its own check in relation to this case and inform the commission when it has done so. There was another example of an applicant having resided overseas and no police check having been obtained from that country. The service must rectify this omission and inform the commission of its outcome.

The service reviews and evaluates its preparation training regularly and makes amendments as appropriate.

Applicants who wish to adopt from overseas are seen initially by Lambeth social workers, and the subsequent preparation and assessment is commissioned to another agency.

**See Requirement 3**

**See Recommendation 4**

**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**

There was evidence that some adopters were given sufficient information on children; initially through the provision of a Form E; and subsequently via discussion with relevant parties, including if necessary, access to specialist advisers. However, the inspectors found inconsistency in some cases regarding the quality of information in the Forms E; which, as alluded to earlier in this report are now subject to review and monitoring.

There was evidence of excellent contribution from the medical adviser in relation to this standard. Adopters and social workers commented on the full and clear explanation of medical conditions given, so that adoptive parents could make informed decisions regarding matching issues.

The agency has a written policy that addresses the question of the adoptive parents informing the agency if a child dies, and a relevant example was given of when this recently had to be implemented. The issue is also covered in the placement agreement.

The profiles of potential adopters are collated in files and include photographs as well as written information.

Adopters are given the guidelines issued by the DfES on the role of the National Adoption register.

**Does the local authority have written procedures for the use of the Adoption Register?****NO**

**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**

The service has in place appropriate written policies and procedures for working with adopters from approval through to an adoption order being granted. However, the inspection found evidence that there was not sufficient contact from the agency once adopters had been approved and were awaiting placement. It was reported that the initiative to make contact, too often had to come from the adopters themselves. It is recommended that the service reviews its procedures to clarify this issue. All such contact should be recorded on case files and monitored through the supervision process.

It is understood that support groups are soon to be developed in conjunction with other members of the consortium; and that the service is to introduce a newsletter for its adopters. Lambeth has in place an adoption allowance scheme which is complemented by an adoption support plan. The agency is also looking to recruit an additional adoption support worker.

The agency has a service level agreement with Lambeth the Post-adoption Centre which offers services, including therapy, to adoptive parents and their children. It is recommended that the service monitors the outcomes of this service.

Discussion with placing and adoption social workers revealed that the agency takes seriously the importance of keeping safe information on the child provided by birth families and of the development of life-story work; however, it was found that in reality this work was not given a high priority in Lambeth. One adopter reported that they were still awaiting their child's life-story book two years after placement. This is unacceptable. The adoption service should develop a system of monitoring the existence and quality of life-story work for children who have adoption as their plan.

**See Recommendation 5**

**Number of adopter applications started in the last 12 months**

16

**Number of adopters approved in the last 12 months**

15

**Number of children matched with the local authority's adopters in the last 12 months**

12

**Number of adopters approved but not matched**

6

**Number of adopters referred to the Adoption Register**

8

**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**

No birth parents or families were interviewed as a part of this inspection. No questionnaires were returned.

The views of the parents are recorded on the Form E and there are plans for the service to develop a system for the birth parents' to be able to contribute further, for example, in a letter to the panel.

The agency has written information for birth parents and families regarding the adoption process. It clearly sets out the adoption procedure and advises birth parents of their rights and how they might seek independent advice. Birth parents and families can access a range of counselling services from the Lambeth Post-adoption Centre. It is recommended that the uptake of this service is monitored and the information gathered be used to inform the future development of the service.

Discussion with placing social workers revealed that they were sensitive to the needs of birth families and that they understood very well the life-long implications of adoption. Comments were made regarding the huge responsibility that their role in the adoption process carries. The placing social workers said that once an adoption case was closed, there was a need for them to reflect and emotionally disengage; but that this was never possible. It is recommended that the service considers this issue as part of the workers' case and developmental supervision.

**See Recommendation 5**

**Standard 8 (8.1 – 8.2)**

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

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

2

Although there was some evidence that birth families are encouraged to contribute to the maintenance of their child's heritage, and the service clearly states its commitment to life-story work and gathering evidence for it, this appeared to be on an ad-hoc basis; dependent on the capacity, interest and or ability of individual social workers.

The adoption service provides a post-adoption post box system for birth families to maintain contact with children placed for adoption.

**See Recommendation 5**

**Standard 9 (9.1)**

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

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

2

Although the service level agreement with Lambeth Post-adoption Centre provides pre-adoption counselling for birth parents and families; Lambeth's adoption services should produce a clearly written strategy for working with and supporting birth parents and families throughout the adoption process. The strategy should include a monitoring system to measure its effectiveness.

**See Recommendation 6**

## Adoption Panels and Agency decisions

The intended outcomes for the following set of standards are:

- Each adoption agency has an adoption panel which is organised efficiently and is effective in making quality and appropriate recommendations about children suitable for adoption, the suitability of prospective adopters and the matching of children and approved adopters.
- The adoption agency's decisions are made to promote and safeguard the welfare of children.

### Standard 10 (10.1 – 10.3)

Adoption panels have clear written policies and procedures about the handling of their functions and ensure that they are implemented.

#### Key Findings and Evidence

#### Standard met?

2

The adoption panel was observed and the vice-chair was interviewed as part of the inspection process. There were some clearly written policies and procedures available relating to the functions of the panel; but these need to be amended to cover all points under 10.2 of the National Minimum Standards. All prospective adopters were given the opportunity to attend the panel, and the service has produced a leaflet (as yet in draft form) for applicants to consider beforehand.

**See Recommendation 7**

**Standard 11 (11.1 – 11.4)**

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

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

Lambeth's adoption panel is properly constituted and comprises relevantly qualified and experienced people.

All panel members receive induction training and have the opportunity observe panel prior to commencement. The panel also receives at least two full days' training and more if required, which covers all of the issues listed under 11.4 of the National Minimum Standards. Observation of the panel revealed that members consider training issues seriously. Discussion was held regarding forthcoming events and how best training could be evaluated.

At the time of the inspection, there was evidence that all panel members had been cleared by the Criminal Records Bureau. Although proper discrete files are kept on all panel members, there was inconsistency as to the information kept on them. The service's triennial review document contains a checklist of the required contents; the service must ensure that the panel members' files contain all information required under Regulation 15 and Schedule 4 of the Adoption Agencies Regulations (2003).

**See Requirement 5**

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

NO

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

YES

**Standard 12 (12.1 – 12.3)**

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

**Key Findings and Evidence****Standard met?****4**

The inspection revealed some excellent practice in relation to this standard.

The adoption panel meets every two weeks in order to avoid unnecessary delays, and panel members receive the papers ten days prior to the panel date. This was borne out during the inspection. The panel has clearly set out administration procedures which appear to work very well.

The panel agenda is very well structured with the first half hour dealing with panel “business” including training issues; policy updates or departmental matters that are related to the service. The panel attended by the inspector was extremely well chaired and very clearly focused.

From the observation of the panel it was clear that all papers had been carefully considered by each panel member. Discussion on each item took place following a summary which had been prepared and presented by a member of the panel (usually this is the responsibility of the vice-chair). Debate was heard to be extremely child-focused and very sensitive to all involved. Questions were insightful and carefully put. The legal and medical advice was exceptionally thorough; very detailed and informed. The minute taking was seen to be accurate, informative and of a high quality.

There was evidence throughout the inspection that the panel is a positive influence for driving up standards within the adoption service.

It is commendable that the service acknowledges the amount of work being a member of the panel entails for all involved, including the staff employed by the service. Each independent member is paid £100.00 and agency members are paid £50.00 per panel. All members are paid an additional £25.00 for every case over the usual five, heard at each panel.

**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 head of the children's division is the agency decision maker. He confirmed that decisions were taken after consideration of all papers, and if necessary after discussion with the service manager or panel chair. There was evidence of some delay at times from the panel's recommendation through to the decision being made. The head of services acknowledged that the five day deadline was not always strictly met.

There was evidence that agency decisions are relayed orally to the relevant people; but not always in writing or at least copies were not being put on file. This contravenes 11A (3) of the 1983 Adoption Agencies Regulations.

It is recommended that the timeliness of the decision making and the subsequent confirmation in writing is monitored as part of the tracking of all adoption cases.

**See Requirement 5**

**See Recommendation 8**

## 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 service manager is professionally qualified and has a diploma in Health and social services management. She had been in post for one year prior to the inspection, and had extensive experience in child care social work and management before that.

The practice manager is professionally qualified and extremely knowledgeable of and experienced in adoption work. She had had sole responsibility for the adoption service for only a short time before the inspection. It is recommended that the practice manager undertakes an appropriate management qualification so that her management skills and knowledge are further developed in line with the “new” service. Discussion with adoption social workers revealed that they felt supported by their line manager, who, they said was open and approachable.

The children’s division as a whole had recently undergone some reconfiguration and some workers were still adjusting, particularly those in child care. After the relative upheaval of recent years there is seem to be a need for some consolidation. The apparently sound professional relationship between the two service managers and the reviewing manager should prove to be a good foundation for future service development.

**See Recommendation 9**

**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?****2**

The social services department had recruitment and selection procedures which should be updated to comply with this standard. Both the service and practice managers had current enhanced clearance from the CRB.

**See Recommendation 10**



## 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**

Lambeth has a “best practice” policy for Lambeth managers and there was some evidence during the inspection that the service was run in an effective manner and in accordance with the statement of purpose. As referred to earlier in this report, the service is only just emerging from a state of transition; but it is believed that some of the fundamental components are there to develop a very good service.

Roles are clearly defined, communication within the service is good, and accountability clear. Discussion with staff confirmed this. Lambeth has a clearly set out equality and diversity policy which states clearly the agency’s expectations in relation to practice; this provides the structure for the anti-discriminatory practice within which the service operates.

Although the service had referred cases to the National Adoption Register on several occasions up to the time of the inspection; there were no written procedures covering such usage. These should be developed in accordance with 16.7 of the National Minimum Standards.

**See Recommendation 11**

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

2

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

1

**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 service had reporting systems on national performance indicators, and had recently implemented a management monitoring and review system. This system incorporates the "Performance Data Set" which integrates key national and local statistics in adoption activity as well as other areas of work across the department. The key performance indicators are viewed as the significant tool for judging the agency's achievements, and the executive side of the council receives these reports monthly. They are examined by the children's scrutiny committee as well as the education and children's committee. The portfolio holder for the service described the children's scrutiny committee as "vibrant" and "interested in performance".

Discussion with the head of children's services and the portfolio holder confirmed that the elected members have established a tripartite forum whereby the leaders of the three main political parties will meet to discuss potentially sensitive cases without engaging party-political tactics.

Following what was described as "historical misunderstanding"; the council's corporate parenting board was in the process of being re-established during the inspection and will have a dedicated quality protects officer who will report directly to the executive.

Although this is viewed as additional evidence of the service laying good foundations for an identifiable quality service; it is acknowledged that it may take further time for these systems to settle, and for the culture to change significantly.

The service is clear about allowances paid and provides clear information and case specific advice to purchasers of services and others with a legitimate interest.

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

<b>Monthly?</b>	YES
<b>Quarterly?</b>	
<b>Less than Quarterly?</b>	

**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**

As referred to earlier in this report the adoption service has access to excellent medical and legal advisers. Without exception, all who commented, cited the availability of, and high quality advice from, the medical adviser.

The service was in the process of producing procedures to access other specialisms as required. It was also understood that the child care placement planning group were considering a written protocol governing the role of specialist advisers.

**See Recommendation 12**

## 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?

2

Lambeth has recruitment and selection procedures, in which those workers responsible for the recruitment of staff are trained; however the inspection found some evidence that the procedures are not robust enough. It was explained that until relatively recently social services had its own dedicated personnel department, which was disbanded and the workers were integrated into the council's central human resources pool. There appeared to have been failures in communication between the two departments since that time.

Despite assurances from managers that references are taken up and telephone enquiries are followed through, there were some HR files on which documentary evidence was not there. There were examples of managers assuring the inspectors that notes were kept of interviews, but they were not on the personnel records. Similarly, although staff had obtained CRB clearance; there was no evidence on their files. The adoption service and the HR department must develop a clearly set out protocol in relation to the adoption Agencies Regulations and the National Minimum Standards.

All social workers in the service are professionally qualified and evidence from discussion with them and examination of their work, suggest that they are also suitably experienced and knowledgeable.

All social workers hold professional qualifications. Three social workers were expected to complete PQ1 during 2004 with another two due to start the award in the same year. The service should provide the commission with its strategy to ensure that at least 20% of social workers will be on target to achieve the Post Qualifying Child Care Award.

**See Requirement 6**

**See Recommendation 13**

**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?**

0

%

**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?****2**

There was some evidence that the managers have the knowledge and skills to ensure the effective running of the adoption service. The recent reconfiguration of the structure and the new computer data base system, "Framework", due to be implemented in October 2004, should help shape the continuous development of the provision.

However, the effectiveness of any system is linked to regular and consistent monitoring. It is recommended that the service refreshes its approach towards supervision and reviews its policy to reflect the more recent developments. Although supervision did occur, it appeared to be inconsistent in its frequency and structure. There was evidence on case files of a good supervision tool; the three monthly review sheet. However, its use was so infrequent that the information on those that were completed, was rendered almost futile. The service as a whole might benefit from fostering a culture of regular, pre-booked sessions – which ought not to be cancelled except in exceptional circumstances. If it is assumed that a significant component of the monitoring systems that the service has invested in, is the production of worthwhile management information; it is difficult to envisage how staff and managers will keep on top of the requirements of the systems without a sound and consistent supervision framework.

The adoption service had access to adequate numbers of administrative staff who were managed by a knowledgeable and competent supervisor. However, there appeared to be an issue regarding the retention of administrative staff; this had direct implications for the supervisor, given the specialist nature of the work, in that she had to train new people relatively frequently.

All employees had appropriate written contracts, job descriptions and conditions of service. All employees have access to the items listed under 20.12 of the National Minimum Standards - either in an employee handbook or via the agency's intranet sites.

**See Recommendation 14**

**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

Lambeth's adoption service has been affected by the national shortage of suitably qualified and experienced social workers to fill vacancies. At the time of the inspection, the children's division relied on the services of agency social workers for the filling of up to 50% of its posts.

The staffing establishment of the adoption team had also increased in line with the adoption agenda – but all adoption team social workers were on permanent contracts. The adoption team was carrying one vacancy and one new post, yet to be advertised, that of adoption support worker.

The service had been considering its recruitment and retention policies and had developed several contemporary strategies aimed at attracting and keeping staff. This is commendable. However, it is recommended that the managers of the service consult with their colleagues in HR when considering developing any further schemes.

**See Recommendation 15**

<b>Total number of social work staff of the adoption service</b>	9	<b>Number of staff who have left the adoption service in the past 12 months</b>	1
<b>Number of social work posts vacant In the adoption service.</b>	1		

**Standard 22 (22.1 and 22.3)**

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

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

3

Lambeth council has apparently sound employment practices. Its social services division was awarded the Investors in People award in November 2003. The council has a whistleblowing policy of which staff confirmed they are aware. The inspectors were provided with copies of the certificates covering public liability and professional indemnity insurance.

**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**

Each member of staff has a professional development portfolio, although no current ones were seen during the inspection. Pre-inspection information indicated that social work staff had access to 24 short courses in the twelve months prior to the end of December, 2003. Managers confirmed that staff are able to attend courses and appropriate seminars provided by external facilitators, and that a two week induction programme commensurate with TOPSS standards had been developed. The annual training plan provided evidence that training is linked to relevant legislation and policies. It is commendable that all social work staff are to be trained up to the European Computer Driving Licence standard via a local college.

## 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
<p>The adoption service has written policies and procedures that cover the standards of record keeping which need to be updated to comply with this standard. The files were generally well ordered, but there was evidence of inconsistency in relation to the placing of confidential / third party information within them. The inspectors were not aware of any guidance for the format of adopters' files and this should be rectified.</p> <p>There was evidence on files regarding appropriate CRB checks, enquiries and written references obtained on adopters and other adult members of the household, and their outcomes – but as mentioned elsewhere in this report, sometimes omissions on the Forms F prompted the adoption panel to request evidence of certain checks. There was further evidence of when panel had been assured mistakes on the assessment document would be put right that they had not.</p> <p>It is recommended that the service adopts a system that allows for a consistent approach to recording supervision and management decisions on file.</p> <p>The children's adoption files that were seen were of a good standard and contained all information relevant to the adoption.</p> <p>The Framework data base, when it is implemented, will be congruent with the Integrated Children's System.</p> <p>Archived files were held in secure premises, though at the time of the inspection these files were not kept in fire or water proof filing cabinets, nor was there any evidence that a risk assessment had been carried out regarding this. It is recommended that the service urgently address this matter.</p> <p><b>See Recommendation 16</b> <b>See Recommendation 17</b></p>		



**Standard 26 (26.1 – 26.2)**

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

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

The adoption service has an appropriate policy and attendant procedures governing the access to records which take into account the requirements of the Data Protection and Human Rights legislation. There was evidence of a good, tight system of access to the archived records and a good tracking device for requests made for access.

However, there was evidence of inconsistency of the agency providing relevant information from current files to other agencies with whom it had been working to effect the placement of a child. The service should set up an appropriate system that monitors carefully the process of gaining access to current adoption records and ensure that staff are appropriately trained.

**See Recommendation 18**

**Standard 27 (27.1 – 27.6)**

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

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

There are separate files kept in respect of staff (stored by personnel department), complaints and allegations (kept by the adoption service manager). There is a written policy on case recording, a copy of which was supplied to the inspectors. As mentioned earlier in the report, the service should produce some guidance for social workers regarding the format of adopters' files.

The service has an appropriate statutory complaints procedure and the complaints' file was seen as part of the inspection. There was evidence on this file that complaints were dealt with in a timely manner and apparently without prejudice. In one case the complaint was referred to an independent consultant to investigate. Where complaints had been substantiated, the head of children's services had written unambiguous letters of explanation and apology. However, it is recommended that a monitoring form be put on file that not only records outcomes; but also any action taken to try to remedy the situation (by whom and when) as in all cases seen, there was allusion to the matter having been resolved – but no evidence. Cross referencing with the adopters' primary file should also be monitored.

**See Recommendations 19**

**Standard 28 (28.1 – 28.2)**

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

**Key Findings and Evidence****Standard met?****1**

Staff and panel members' personnel records did not meet this standard. All personnel files must be updated to ensure that they comply with Regulations 6 and 15 of the Adoption Agencies Regulations.

It should also be noted that interviewers should keep notes of a successful interview on the employee's file and that photographs of employees should not be photocopied from passports as they are very often indistinguishable.

Reference has been made elsewhere in this report regarding the managers of the adoption service and the HR department to liaise on this matter.

**See Requirement 7**

**See Recommendation 15**

## 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 that house the adoption service are fit for purpose. However the service will be moving to another site in September 2004. The administrative systems appear to be efficient and all records are kept in a lockable room. There are lockable facilities for records in place and IT systems are protected by passwords and ant-virus arrangements. The building is adequately protected and insured and the adoption service falls within the remit of Lambeth's disaster recovery plan.		

**PART C**

**LAY ASSESSOR'S SUMMARY**

**(where applicable)**

**Lay Assessor**

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**

\_\_\_\_\_

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

We would welcome comments on the content of this report relating to the Inspection conducted on 29<sup>th</sup> June 2004 and any factual inaccuracies: 16th September 2004

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary

YES

Comments were received from the provider

YES

Provider comments/factual amendments were incorporated into the final inspection report

YES

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

**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 30<sup>th</sup> September 2004, which indicates how statutory requirements and recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.**

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

Action plan was required

YES

Action plan was received at the point of publication

YES

Action plan covers all the statutory requirements in a timely fashion

YES

Action plan did not cover all the statutory requirements and required further discussion

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

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

**Signature** \_\_\_\_\_

**Designation** \_\_\_\_\_

**Date** \_\_\_\_\_

**Or**

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

--

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

**Signature** \_\_\_\_\_

**Designation** \_\_\_\_\_

**Date** \_\_\_\_\_

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

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S0000056817.V176017.R01

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