



Making Social Care
Better for People

inspection report

Local Authority Adoption Services

Liverpool City Council Adoption Service

Millennium House, 1st Floor

60 Victoria Street

Liverpool

L1 6JQ

10th May 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

Liverpool City Council Adoption Service

Headquarters Address

Millennium House, 1st Floor, 60 Victoria Street, Liverpool,
L1 6JQ

Adoption Service Manager

Steve Oliver

Tel No:

0151 233 6806

Address

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L1 6JQ

Fax No:

Email Address

Certificate number of this adoption service

Date of last inspection

na

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

na

Date of Inspection Visit		10th May 2004	ID Code
Time of Inspection Visit		10:00 am	
Name of Inspector	1	Jayne Ivory	125225
Name of Inspector	2	Maureen Moore	
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.		None available at this inspection.	
Name of Specialist (e.g. Interpreter/Signer) (if applicable)		Not required.	
Name of Establishment Representative at the time of inspection		Steve Oliver	

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

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

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

The report will show the following:

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

This report is a public document.

INSPECTION VISITS

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

BRIEF DESCRIPTION OF THE SERVICES PROVIDED

This was the first time that Liverpool City Council's Adoption Service had been inspected against Local Authority Adoption Service Regulations 2003 and National Minimum Standards.

Liverpool City Council Supported Living Children and Families Service aimed to provide a comprehensive adoption service, either directly or through partnerships with other adoption agencies for children, birth families. Prospective adopters, adoptive families and adopted adults.

The objectives of the service were as follows:

- To place the welfare, safety and needs of children at the centre of the adoption process.
- To ensure that for each child where adoption is the plan delay in achieving an appropriate match is minimised.
- To respect and promote the child's specific needs arising from their ethnicity, culture, religion, language and any disability that they may have.
- To listen to children and take into account their wishes and feelings when making decisions on their behalf and to ensure that children are properly prepared for adoption and informed at all stages of the adoption process.
- To recruit or identify sufficient numbers of prospective adopters to match the needs of Looked After Children requiring adoption.
- To ensure that all enquiries concerning adoption are dealt with promptly and that prospective adopters are welcomed and treated with respect.
- To ensure that prospective adopters are provided with clear written information, good quality preparation training and are assessed fairly and thoroughly against their ability to provide lifelong care for a child through adoption.
- To respect the role of adoptive parents by maintaining links and helping to deliver a range of appropriate support services in response to assessed need.
- To recognise the specific needs of birth families in adoption and provide or help to access support services.
- To respect birth families wishes and feelings and to take account of their views when planning for adoption.
- To maximise the contribution that birth families make to promoting and preserving a child's heritage and sense of identity.
- To provide a service for stepparents who wish to adopt
- To ensure provision of Section 51 counselling for adopted adults.
- To provide advice and information to those seeking to adopt from overseas to arrange for assessments to be undertaken in partnership with the family and another adoption agency.

Overall Liverpool aimed to provide an adoption service, which reflects the lifelong implications of adoption and recognised that effective inter and intra agency working was the only way to achieve this.

At the time of this inspection the adoption service had been through a number of changes. The service had a team manager who had come into post in February 2004. The resource manager had been the first line manager in the team for a number of years. Both managers were well supported by the family placement group manager.

The team had developed some new posts including a recruitment and training officer and a senior practitioner post. The service had also expanded and filled vacancies in the team by transferring staff with a special interest in adoption across from the childcare fieldwork teams.

The service had ambitious Local Public Service Agreement's for numbers of children adopted in 2004-2005. The service were also expanding to meet the needs of the large number of Looked After Children in Liverpool and the correspondingly large number of children waiting for an adoption placement.

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.)

Statement of Purpose 1**One standard was assessed. All aspects of this standard were assessed as met.**

Liverpool Adoption Service had a good Statement of Purpose, which reflected the aims and objectives of the service. Staff members confirmed in interviews that the Statement of Purpose was accurate and captured the facilities and the services that the adoption team aimed to provide.

The Statement of Purpose had been reviewed in line with Local Authority Adoption Service Regulations 2003 in March 2004 and had been formally approved by the executive side of the council in April 2004.

Liverpool had developed a lovely children's guide for children between the ages of 6 to 12 years for whom adoption is the plan. The booklet was available in Braille and Audio formats and could be made available in other languages.

Securing and Promoting Children's Welfare 2**One standard was assessed. This standard was assessed as not being met.**

The service had recognised that there was much to be done to meet the needs of older children, black children and children who were of dual heritage, sibling groups and children with a disability for whom the plan was adoption. The inspection identified that some children were experiencing delay and that the need for a creative, dynamic and local recruitment strategy was essential to the future success of the service. The implementation of a recruitment strategy will be kept under review by the CSCI.

Prospective and Approved Adopters**Standard 3-6****All four standards were assessed as part of this inspection. Out of the four standards three were assessed as nearly met and one was assessed as not met.**

The inspection found evidence that Liverpool's Adoption Service welcomes interest from prospective adopters without prejudice. All prospective applicants are sent an information pack containing details of the following.

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Prospective Adopters enquiring about adopting children from other countries were provided with information regarding cultural issues and the legislative framework surrounding inter-country adoption. Information was also provided about specific criteria or procedures applicable in different countries

Children waiting were analysed through the Adoption Matrix in terms of age, sibling groups, ethnic, cultural and religious needs and this information was conveyed to prospective adopters. Priority was given to those children waiting . The service had prioritised prospective adopters expressing an interest in adopting older children or sibling groups, given that the service had twelve sibling groups in need of placement at the time of the inspection.

The service should be mindful of providing prospective adopters with accurate information about waiting times before their assessments start and should ensure that all prospective adopters are advised that they could approach a different agency if they could not offer a placement to a child waiting.

The inspection found that all prospective adopters undertake a formal, and comprehensive assessment, preparation and approval process.

Prospective adopters and adopters confirmed in questionnaires that the preparation course had helped to inform them about the needs of children who are looked after and had helped to equip them with an understanding of the implications of adoption and had enabled them to make an informed decision regarding the lifelong commitment of adoption.

Preparation was followed by the assessment which utilised the BAAF Form F framework and guidance. The inspection found that the quality of completed Form F's varied across the team, from good to weak and would recommend that external training is identified to ensure that all staff are implementing the BAAF Form F assessment framework and guidance consistently.

Statutory checks were undertaken on all prospective adopters, members of their household and significant others over the age of 18years, however the service must ensure that e mailed confirmations of status checks are printed off and records kept on file. Some files examined had no record of confirmation of the outcomes of statutory checks.

A full explanation is given both verbally and in writing as to why the checks are undertaken. Prospective adopters confirmed in case tracking that they were kept informed of progress throughout the assessment to approval and beyond, via regular visits to their homes, phone calls and when necessary in writing.

The majority of prospective adopters confirmed that they were kept well informed of progress throughout the assessment to approval and beyond, via regular visits to their homes, phone calls and when necessary in writing. A few adopters expressed some concern about lack of information or not being kept informed and updated with changes concerning the assessment or about a proposed match. The inspector recommends that the team should develop a system which can be monitored to ensure that all prospective adopters are contacted about any delays in progressing the assessment or changes regarding a proposed match or placement.

Birth Parents and Birth Families

Standards 7-9

All three standards were assessed as part of this inspection. One standard was assessed as nearly met, the other two standards were assessed as met.

Liverpool has a service level agreement with "After Adoption: Adoption Agency" which involved provision of support and counselling to birth parents.

Birth parents were also provided with the BAAF leaflet "if your child is being adopted"

Training had been provided by the adoption managers for social workers concerning the consultation of birth parents, and the recording of their views on the Form E. The inspectors consider that this training should be supplemented by external training on the preparation of Form E's for all social workers involved in the adoption service.

The inspectors were impressed by the investment, development and potential of the Life Card interactive life story system. But consider that the service should ensure a final date for implementing the system given some of the delays that they had experienced (through no fault of their own) from the IT company providing the Life Card technology and server.

Adoption Panels and Agency Decisions

Standards 10-13

All four standards were assessed as part of this inspection. Out of the four standards two were met and two were nearly met.

The inspection found that the adoption panel was organised efficiently and effectively. Staff confirmed that the independent panel chair had in their view enhanced the functioning of panel and made staff members more welcome as a result. The panel were aware that they needed to address practice concerning the attendance of prospective adopters in the panel meeting as part of the services action plan.

The service should ensure that training on overseas adoption is provided for panel members as part of the services action plan. The inspection confirmed that the panel has access to good medical and legal advice.

The inspector found that the minutes of each panel record clearly the panel's discussions, reasons, and recommendations. Minutes are agreed as accurate and matters arising are discussed at each subsequent meeting

Prospective adopters and, subject to age appropriateness, the child or children were informed of the panel recommendation as soon as practicably possible via telephone. The Panel recommendation and following Agency Decision was conveyed in writing within seven days. The service had also put in place a system to notify Birth Parents of the decisions made by the agency in writing.

Fitness to Provide or Manage an Adoption Agency

Standards 14-15

Both standards were assessed as part of this inspection. Both standards were assessed as met.

However the service will have to demonstrate how the manager will be supported to achieve

a management qualification which matches the competencies required by the NVQ Level 4 by 1st April 2005.

Provision and Management of the Adoption Agency Standards 16-18

All three standards were assessed as part of this inspection. The inspection found that one of the standards was met, and two were nearly met.

The inspectors found that the service had been expanded to meet the challenge of National Adoption Standards and National Minimum Standards. The service benefits from having experienced managers who have considerable knowledge about Adoption and child care matters. The inspection found that on a strategic level the service was being managed effectively and efficiently, but that the team managers needed more time to evidence how they will ensure that the service is run in accordance with the Statement of Purpose.

The service had recognised that practice concerning referrals to the National Adoption Register for children and adopters needed to be developed consistently across the service. The timescale for resolving some of the inconsistencies across the service should be included as part of the services action plan.

The inspectors were impressed by the investment in a performance management system and culture in Liverpool. The Chief Executive, Executive Director, Assistant Executive Director and the Executive Member for children's services were well informed about the services overall performance and received monthly updates on how the service was matching up against National Adoption Standards and other key performance indicators. All managers tracked the progress of children for whom the plan was adoption via the Adoption Matrix.

The inspectors were impressed by the effective working partnerships that Liverpool had developed to meet the needs of adoption service users. As has already been stated the service had service level agreements with After Adoption and Nugent Care adoption agencies.

The service had recognised that they needed to develop a written protocol governing the role of specialist advisers and consultants as part of the services action plan.

Employment and Management of Staff Standards 19-23

Five standards were assessed as part of this inspection. Standard 24 was not assessed as it relates to voluntary adoption agencies only.

Out of the five standards two were met and two were nearly met and one was not met.

Social work staff in the adoption service had a recognised social work qualification. This was confirmed by examination of personnel files. Liverpool adoption service recruited all new staff using an Assessment Centre approach which examined candidates competencies in the core Social Work skills and provided an outline developmental plan for future training needs. Liverpool City Council's Human Resource Service provided an oversight of all recruitment processes.

The manager confirmed that all Staff involved in recruitment and selection were experienced managers who had been trained in the assessment centre approach to recruitment. All staff in the adoption service had suitable qualifications, which were listed in the Statement of Purpose. 30% of the adoption team social workers hold PQ1.

The service should demonstrate how they will achieve 20% of social workers being in the process or having the Post Qualifying Child Care Award by 1st April 2006 as part of their action plan.

Given the earlier findings concerning the implementation of child protection procedures concerning looked after children the inspectors consider that the service must ensure that all staff within the adoption service revisit child protection training to ensure compliance with Liverpool's own child protection policies and procedures.

The inspection confirmed that staff were managed and monitored by people who had the appropriate skills and qualifications, Staff advised that they had regular supervision and were clear about levels of management delegation and responsibility.

Liverpool had experienced some difficulties regarding workload management. The service had acknowledged these difficulties and senior managers were negotiating with the unions and staff about a workload management system that would benefit the service. The service should provide details of the outcome and implementation of the agreed workload management system as part of their action plan.

Staff advised the inspectors that although they were aware of a number of training events available to them that their workloads did not always allow for on going training and appropriate professional and skills development. The need for the service to support staff to gain the full PQ Child Care Award and any other appropriate training, in line with National Minimum Standards, will have to be factored into any team or business plan and should form part of the service action plan.

The adequacy of clerical and administrative support will also need to be kept under review. The inspection found evidence that the new working environment had caused problems within the team, and had at times undermined the efficient and effective running of the service. A lack of a designated phone line, fax and purpose built office space meant that administrative and social work staff felt their time was not always being spent on core tasks. The inspectors could appreciate the challenging nature of the office environment and recommend in the strongest terms that the move to the new purpose built offices should take place with ongoing consultation with staff. Further to this interim measures should be put into place in Parklands to make the communication into and within the adoption team much easier. This must include the provision of a designated phone line and designated family placement team fax machine.

The Staff Development section provided a comprehensive range of training designed to meet the needs of each service area. Consultation occurs in relation to training needs and there is also access to funding for appropriate external training courses.

The induction pack was being redesigned to provide specific service area information in line with TOPSS induction standards. The implementation of the new induction programme should form part of the services action plan.

The adoption service organises training to meet some identified needs and also provides training on adoption issues/developments to social workers in other service areas. The inspection found that the service may benefit from accessing external training in the preparation of Form F and Form E.

Records

Standard 25-28

Four standards were assessed as part of this inspection. One standard was assessed as not met, two standards were assessed as met, and one standard was assessed as nearly met.

The examination of files confirmed that the service must ensure that they keep some form of hard evidence of when statutory checks have taken place and the outcome of the checks if they are to meet Local Authority Adoption Service Regulations 2003.

Further to this decisions by supervisors should be recorded on case files. This is in addition to the file audits that take place throughout the service. These decisions should be legible, clearly expressed, signed and dated.

The adoption service provides relevant information to other adoption agencies at the earliest, appropriate opportunity.

Liverpool has a clear and well-understood system for authorising the access to adoption case records and their indexes and for authorising disclosure of adoption information in line with Local Authority Adoption Service Regulations 2003 and National Minimum Standards. There is a written policy on case recording, a copy of which was supplied to the inspectors. No one outside of the adoption service can gain official access to any records relating to children and prospective adopters unless the team manager gives permission. All forms F that leave the adoption service are clearly marked indicating that they are confidential documents. Separate records are kept for staff, complaints and allegations.

Complaints were managed efficiently and effectively by the service.

Staff files are maintained by the council's Human Resources Section and were found to meet Local Authority Adoption Service Regulations 2003.

Panel Members files were maintained by the Panel administrator and held within the Adoption service. Panel members files should be developed to meet National Minimum Standards , but did include signed declarations and CRB checks.

Records were kept in respect of all the elements mentioned with the exception of training undertaken. Training diaries were being introduced and would be included in staff files in the future.

Fitness of Premises**Standard 29**

This standard was assessed as part of this inspection. This standard was assessed as not met.

The service was based in a large open plan office with other social services teams. Home working had been piloted with adoption service social workers having the option of being home or office based. This new way of working had been introduced with a move towards becoming a "paperless" office. There is now heavy reliance on computers and adoption social workers are expected to be able to manage their own administrative work.

During the course of this inspection little support could be found amongst adoption social workers and administrative staff for the new ways of working. Workers reported that there has been insufficient training in how to use the computer systems and this is something the service should address as part of their action plan.

The adoption service cannot be entirely paperless as it relies upon a significant amount of third party information. The inspectors were concerned that the current office has one communal combined fax, printer and photocopier. Confidential information coming into the office can get easily lost. The inspectors consider that given some of the sensitive and highly confidential material concerning adoption that the adoption service must have its own designated fax machine.

Supervision and case discussions take place in the main office in a “pod”, which has partial screening but no sound -proofing. The manager advised that supervision could also take place within the workers home. Staff reported that having supervision in the Parklands raised issues about service user and their own personal/professional confidentiality.

The staff in the adoption service raised concerns about communication systems within the office. At present there is not one designated phone line for enquiries. This has resulted in workers taking a number of messages for other people from other teams. This impacts on their ability to focus on their own work. There is also a limited number of phone lines available which has resulted in service users and workers not being able to get through to the team.

With regards to security of records, workers who work from home are provided with a three drawer lockable unit.

Files at the office are held within lockable shelving, although they were rapidly running out of space. The service will need to ensure that they have access to additional lockable storage for files as part of the action plan.

The inspectors were advised that there is adequate insurance for the premises and its contents.

At the time of the inspection, the difficulties encountered with the new premises and new ways of working had resulted in there being low morale amongst a number of workers in the adoption service.

The inspectors were informed that the adoption service will be moving to a purpose built office in the next twelve months, which will provide accommodation for all the child care staff within the service.

The inspectors do not consider that the current working environment provides social work or administrative staff with an office that is fit for purpose at the present time and recommends in the strongest terms that representatives from all staff within the adoption service are consulted at length and involved wherever possible in the design of the new working environment and offices.

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:

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

Requirements from last Inspection visit fully actioned?

NA

If No please list below

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

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	9. 1 (a), (b) 9.2 (b) and (c)	LA2	Liverpool must ensure that all staff follow correct policies and procedures in the event of any allegation of abuse or neglect.	1.9.04
2	7	LA2	Liverpool must ensure the implementation and evaluation of a recruitment strategy to meet the needs of those children waiting.	1.12.04
3	7	LA5	Liverpool must ensure that adopters are provided with accurate and up to date information concerning a child's assessed needs.	1.12.04
4	7	LA20	The service must ensure effective and confidential communication particularly with information that is faxed and a telephone line to ensure that the adoption service is managed with care competence and skill.	1.10.04
5	8.2 (a) and (b)	LA25	The service must ensure that they set up a case file and place on it any information required to meet regulation 8 and schedule VI of the Adoption Agency Regulations 1983(amended 2003)	1.10.04
6	14.4	LA29	The service must ensure that they have access to additional lockable storage for active adoption files. This storage must meet the Adoption Agency Regulations.	1.10.04

7	14.4	LA29	The service should develop a disaster recovery plan which meets National Minimum Standards and Local Authority Adoption Service Regulations 2003.	1.12.04
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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 service should provide adopters with accurate information about waiting times before their assessments starts.
2	LA3	The service should ensure that all prospective adopters are advised that they could approach a different agency if they cannot offer a placement to a child waiting.
3	LA5	The service should access external training to ensure that all staff are implementing the BAAF Form E and F assessment framework and guidance consistently. This recommendation is linked to Statutory Requirement 3 above.
4	LA6	The service should develop a clear and overarching strategy for working with and supporting adopters, which incorporates the role and responsibilities of the child care social worker.
5	LA8	The service should ensure a final date for implementing the Life Card system.
6	LA10	The service should demonstrate how they can make panel more accessible to adoptive applicants.
7	LA11	The service should ensure that training on overseas adoption is provided for panel members.
8	LA14	The service should demonstrate how the manager will be supported to achieve a management qualification which matches the competencies required by the NVQ Level 4 by 1 st April 2005.
9	LA16	Liverpool should demonstrate how they monitor the adoption service and ensure that it is run in accordance with the Statement of Purpose.

10	LA16	The service should ensure that practice concerning referrals to the National Adoption Register for children and adopters is developed consistently across the service.
11	LA18	The service should develop a written protocol governing the role of specialist advisers and consultants.
12	LA19	The service should demonstrate how they will achieve 20% of social workers being in the process or having the Post Qualifying Child Care Award by 1 st April 2006.
13	LA20	The service should provide details of the outcome and implementation of the agreed workload management system.
14	LA20	The service should demonstrate how their investment in Information Technology will be implemented effectively.
15	LA23	The service should implement an induction programme in line with TOPSS Induction Standards in England.
16	LA25	The service should ensure that any decisions by supervisors should be recorded on case files. These decisions should be legible, clearly expressed, signed and dated.
17	LA28	Panel members files should be developed to meet National Minimum Standards.
18	LA29	The service should consult with representatives from all staff within the adoption service at length and involve them wherever possible in the design of the new working environment and offices.
19	LA6	Liverpool should ensure that all children and adopters approved, matched and placed between October 2003 and February 2004 have a post adoption support plan as part of the services action plan

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

PART B**INSPECTION METHODS & FINDINGS**

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

Placing authority survey	YES
Placing social worker survey	YES
Prospective adopter survey	YES
Approved adopter survey	YES
Birth parent / birth family member survey	YES
Checks with other organisations and Individuals	
• Directors of Social services	YES
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	YES
• Interview with children	YES
• Interview with adopters and prospective adopters	YES
• Interview with birth parents	NO
• Interview with birth family members	NO
• Contact with supervising social workers	YES
• Examination of files	YES
Individual interview with manager	YES
Information from provider	YES
Individual interviews with key staff	YES
Group discussion with staff	YES
Interview with panel chair	YES
Observation of adoption panel	YES
Inspection of policy/practice documents	YES
Inspection of records (personnel, adopter, child, complaints, allegations)	YES
Date of Inspection	10/5/04
Time of Inspection	0900
Duration Of Inspection (hrs)	114
Number of Inspector days	10
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)	16

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) |
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| 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?

3

Liverpool Adoption Service have a good Statement of Purpose which reflects the aims and objectives of the service. Staff members confirmed in interviews that the Statement of Purpose was accurate and captured the facilities and the services that the adoption team aim to provide.

The Statement of Purpose had been reviewed in line with Local Authority Adoption Service Regulations 2003 in March 2004 and had been formally approved by the executive side of the council in April 2004.

Liverpool had developed a lovely children's guide for children between the ages of 6 to 12 years for whom adoption is the plan. The booklet was available in Braille and Audio formats and could be made available in other languages.

Older children, with an adoption plan, were provided with the booklet produced by BAAF entitled "Adoption, what it is and what it means".

In addition Social Workers working with children for whom adoption is the plan use a booklet called "What Does Adopted Mean" by Edith A Nicholls. This book is used as a tool to work directly with children. The booklet is personalised for each individual child and the child's personal information is incorporated into it providing an interactive method of information giving about the process of adoption from the beginning to the making of an adoption order.

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?

YES

Securing and promoting children’s welfare

The intended outcome for the following set of standards is:

- The needs and wishes, welfare and safety of the child are at the centre of the adoption process.

Standard 2 (2.1 - 2.3)

The adoption agency has written plans for the implementation and evaluation of effective strategies to recruit sufficient adopters to meet the needs of the range of children waiting for adoption locally.

Key Findings and Evidence

Standard met?

1

Liverpool City Council had reviewed and revised their recruitment strategy in an effort to meet the needs of the Looked After Children of Liverpool waiting to be adopted. The very recent development of the recruitment strategy had meant that the service had not been able to assess their success and evaluate the impact of the recruitment strategy at the time of the inspection.

Given the large numbers of Looked After Children in Liverpool and the number of children waiting for adoptive placements the successful implementation and evaluation of the recruitment strategy is essential to the ability of the service to meet the needs of the children in Liverpool and will be kept under review by the CSCI.

A Recruitment and Marketing Officer had recently been appointed who would be responsible for devising and implementing activities to attract prospective adopters. Again the very recent appointment into this post made it difficult to assess the impact that the Recruitment and Marketing officer would have on identifying adopters who could meet the needs of harder to place children. Of particular concern was the need to recruit carers for: black and dual heritage children, older children and groups of brothers and sisters. At the time of the inspection the case tracking identified that difficulties in identifying placements for a number of sibling groups and black and dual heritage children was leading to delay.

The case tracking during the inspection highlighted some issues, in one particular case, regarding a lack of clarity in the adoption service about child protection procedures concerning looked after children. Whilst the procedures were clearly set out, there was evidence that managers were not as familiar with them as they should have been. The service must ensure that these procedures are followed in all cases. This may include reviewing the training needs of the staff.

In the last 12 months:

How many children were identified as needing adoptive families?

72

How many children were matched with adopters?

45

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

43

How many children were placed with other services' adopters?

2

How many children were referred to the Adoption Register?

0

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

95.5

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

97

%

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

4

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?

57

Prospective and approved adopters

The intended outcome for the following set of standards is:

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

Standard 3. (3.1 – 3.3 and 3.5 - 3.6)

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

Key Findings and Evidence	Standard met?	2
<p>The inspection found evidence that Liverpool's Adoption Service welcomes interest from prospective adopters without prejudice. All prospective applicants are sent an information pack containing details of the following.</p> <ul style="list-style-type: none"> ➤ The Initial visit preparation and training. ➤ An overview of the children waiting to be adopted including age ranges, ethnicity and sibling groups. ➤ Information about adoption support services including post adoption support. ➤ The role of the Adoption panel and guidance involving their attendance when their assessment is to be considered. ➤ An opportunity to meet representatives of the Adoption Team at informal drop in sessions. <p>The eligibility criteria is included in the information sent out to prospective adopters and was also outlined in the Statement of Purpose, which was available to all interested parties upon request.</p> <p>Prospective Adopters enquiring about adopting children from other countries were provided with information regarding cultural issues and the legislative framework surrounding inter-country adoption. Information was also provided about specific criteria or procedures applicable in different countries.</p> <p>Children waiting were analysed through the Adoption Matrix in terms of age, sibling groups, ethnic, cultural and religious needs and this information was conveyed to prospective adopters. Priority was given to those children waiting. The service had developed a system to prioritise prospective adopters expressing an interest in adopting older children or sibling groups, given that the service had twelve sibling groups in need of placement at the time of the inspection.</p> <p>The service should be mindful of providing prospective adopters with accurate information about waiting times before their assessments start and should ensure that all prospective adopters are advised that they could approach a different agency if they could not offer a placement to a child waiting.</p> <p>All prospective adopters were provided with an information pack containing information. ("Adopting Children; your questions answered")</p> <p>All applicants confirmed that they had the opportunity to meet with others who have Adopted during the preparation and assessment process.</p>		

Approved adopters were provided with information about post adoption support groups facilitated by the “After Adoption” agency on behalf of Liverpool City Council.

Approved adopters when linked to a specific child were provided with information as presented on the Form E to the Adoption Panel. However a number of carers expressed concern about the quality of some of the Form E’s and had experienced some problems in accessing accurate information about a child both before and after the match and early placement. This is an area that is dealt with in more depth in Standard 5 of this report.

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 inspection found that all prospective adopters undertake a formal, and comprehensive assessment, preparation and approval process.

Prospective adopters and adopters confirmed in questionnaires that the preparation course had helped to inform them about the needs of children who are looked after and had helped to equip them with an understanding of the implications of adoption and had enabled them to make an informed decision regarding the lifelong commitment of adoption.

Preparation was followed by the assessment, which utilised the BAAF Form F framework and guidance. The inspection found that the quality of completed Form F’s varied across the team, from good to weak and would recommend that external training is identified to ensure that all staff are implementing the BAAF Form F assessment framework and guidance consistently.

Liverpool City Council have a service level agreement with a voluntary adoption agency (The Nugent Care Society) to ensure that prospective adopters who wish to adopt a child from another country are prepared and assessed appropriately.

The inspector found evidence that preparation training and materials used are developed with close attention to equal opportunities and anti-discriminatory practice.

Preparation groups were organised at various times including evenings and weekends to meet the needs of the applicants.

The service evaluated and reviewed each preparation group straight after training and implemented changes prior to starting any new groups. The inspectors found that the Adoption Workers involved in preparation training consider “what does and what does not work” along with the feedback provided by participants to inform changes made.

The service had recently sent out an evaluation questionnaire to all adopters and prospective adopters who had been assessed in the past two years. The service planned to use feedback from the questionnaire to inform service development and practice. The results of this survey were not available at the time of this inspection. The inspectors consider that the service should be commended for this type of consultation and recommend that the team should seek to consult with service users on a regular and frequent basis.

Foster Carers requests to be assessed as adopters for a child or children they are fostering were considered against the criteria detailed in the Statement Of Purpose. Foster carer’s received the same information as other prospective adopters and the assessment process was also the same.

Assessments of foster carers as prospective adopters were completed within four months in accordance with the National Adoption Standards.

The inspectors found evidence that the preparation of prospective adopters was planned carefully and sensitively taking into account the various experiences and motivations behind their desire to adopt.

Preparation, by the provision of information, meeting adopters, individual discussion and

training exercises, was designed to address and identify competencies, strengths and additional training needs.

All the checks mentioned were undertaken on all prospective adopters, members of their household and significant others over the age of 18years, however the service must ensure that e mailed confirmations of status checks are printed off and records kept on file.

A full explanation is given both verbally and in writing as to why the checks are undertaken. The majority of prospective adopters confirmed in case tracking that they were kept informed of progress throughout the assessment to approval and beyond, via regular visits to their homes, phone calls and when necessary in writing.

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?**

2

The majority of prospective adopters confirmed that they were kept well informed of progress throughout the assessment to approval and beyond, via regular visits to their homes, phone calls and when necessary in writing. A few adopters expressed some concern about lack of information or not being kept informed and updated with changes concerning a proposed match. The inspector recommends that the team should develop a system which can be monitored to ensure that all prospective adopters are contacted about any changes with the proposed matching and placement of a child.

The booklet "Adopting Children: Your Questions Answered" provided information about the processes of adoption and the types of support services available.

The preparation groups also addressed the matching, introduction and placement and support that adopters may need.

Information regarding the Adoption Register for England and Wales was also provided during the preparation and assessment process.

Prospective adopters confirmed that they were shown a copy of the BAAF Form E on a child and were helped to understand the contents by the assessing Social Worker. However as has already been mentioned the service may benefit from accessing external training in the preparation of Form E's, as a number of adopters raised the lack of significant information about the child on the Form E as an issue.

Adopters have an opportunity to meet the child's Social Worker and are also given the opportunity to meet the medical adviser to the panel if requested.

A Professional instruction notice and associated practice guidance was issued to all Social Workers effective from 1st March 2004 concerning the need for social workers to record whether adoptive parents are prepared to agree to notify the agency if their adopted child dies during childbirth or soon afterwards. The practice guidance covers the need for such a procedure and a method of recording such discussions on the prospective adopter's file.

The inspectors found evidence that this issue was also recorded on the BAAF Form F presented to the Adoption Panel and was checked by the panel chair.

Prospective adopters were encouraged and helped to produce "Family Books" which describe themselves, their families, pets, lifestyles hobbies etc these will include photographs and often videos.

"Family Books" were prepared with the chosen age range of the child in mind.

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

YES

Standard 6 (6.1 – 6.7)**Adoptive parents are helped and supported to provide stable and permanent homes for the children placed with them.****Key findings and evidence****Standard met?****2**

A number of adopters praised the efforts of their social worker in supporting them throughout the adoption, matching and placement process, although a number expressed concern about the lack of support from the childcare social worker. The service should consider the need to develop a clear and overarching strategy for working with and supporting adopters, which incorporates the role and responsibilities of the child care social worker.

The service had introduced post adoption support assessments in February 2004. Although this procedure was late in being implemented the written assessments seen of support needs for individual children, prospective adopters, and adopters and birth children were based upon the BAAF Adoption Support Plan forms.

There was evidence that post adoption support plans were beginning to become an established part of practice at the time of the inspection. However the service must ensure that all children and adopters approved, matched and placed between October 2003 and February 2004 have a post adoption support plan as part of the services action plan.

Liverpool has a direct work team that has a remit to work specifically with looked after and adopted children, the support of this team, where appropriate was available both pre and post adoption.

The adoption service had recently sent some of the direct work team on a BAAF course concerning race, identity and attachment. The intention was to cascade the training throughout the adoption and fostering team. The direct work team also provided a resource to adopters to help them to support a child to address racism and other forms of discrimination.

The inspectors found that adopters and children placed for adoption may benefit from access to specialist advice and resources, in addition to the direct work team, concerning the need to develop strategies to help children address racism and other forms of discrimination. This should form part of the services action plan and will be reviewed by the CSCI.

The service has an arrangement with Nugent Care Society Adoption Agency to conduct assessments of prospective inter-country adopters. An Adoption Worker from Liverpool provided post placement support and advice for families who wished to adopt a child from another country. The Liverpool Adoption Service would also prepare the Schedule 2 report. The need for the adoptive parents to support the child to develop and maintain a positive sense of self-identity was addressed during the assessment, preparation and training of prospective adopters. The importance of lifework was stressed and guidance given on how to get the most out of life story work.

The inspectors were interested in the innovative approach to life story book work that the service had adopted. The development of a sophisticated but simple to use interactive programme for developing and recording life work will be a central part of the service's approach to supporting children and adopters. The inspectors are fascinated by the impact that this development will have and are anxious that staff, birth parents, foster carers and adopters have the opportunity to access training concerning the use and development of the Life Card before it is implemented.

The inspectors consider that the service should be commended for this innovative approach, but should be mindful of providing training which ensures the successful implementation of the Life Card.

Planning meetings were used to provide a forum with the overall aim of supporting families and preventing breakdown or disruption and the service was working with the consortium to consider the provision of independent chairs being provided across the consortia boundaries. The service should ensure that practice concerning disruption meetings is confirmed with partners in the consortium as part of the action plan.

Number of adopter applications started in the last 12 months	42	
Number of adopters approved in the last 12 months	26	
Number of children matched with the local authority's adopters in the last 12 months	43	
Number of adopters approved but not matched	1	
Number of adopters referred to the Adoption Register	0	
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
<p>Liverpool has a service level agreement with “After Adoption: Adoption Agency” which involves provision of support and counselling to birth parents. Birth parents were also provided with the BAAF leaflet “if your child is being adopted”. Assessment of the birth parents needs were included in Liverpool’s Adoption Support Policy. It was an expectation that all Liverpool Social Workers endeavour to work in partnership with all birth parents. Birth parents were invited to and encouraged to participate in meetings about their child including planning meetings and reviews. Guidance had been issued concerning obtaining birth parents views, wishes and feelings which should have been recorded on the BAAF Form E. It was expected that the information on the Form E should be shared with birth parents and signed by the birth parents. Birth parents were encouraged to contribute to the Life story books and will be asked to contribute to the child’s Life Card, when the system is fully developed and implemented. The agreement with the After Adoption Agency includes support for parents without children. It was an expectation that information written about birth parents was shared and birth parents were given the opportunity to comment on what was written. Training had been provided by the adoption managers for social workers concerning the consultation of birth parents, and the recording of their views on the Form E. The inspectors consider that this training should be supplemented by external training on the preparation of Form E’s for all social workers involved in the adoption service. This good practice recommendation is linked to standard 5.</p>		

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
<p>As has already been stated the inspection found evidence that Birth parents were encouraged to contribute to the information included in Life Story Work. As part of Liverpool’s Service Level Agreement with After Adoption, the Agency facilitated an information exchange (Letter box) service between Adopted and Birth Families. When possible arrangements were made for birth parents to meet adoptive parents. Information gathering started at the earliest opportunity and guidance was issued in respect of interviewing birth parents to obtain significant information. This information is included in the Life story books and the Life Card will allow for this information to be provided in an interactive user- friendly format. The information exchange system will allow for this information to be updated.</p>		

The inspectors were impressed by the investment and development of the Life Card system, but consider that the service should ensure a final date for implementing the system given some of the delays that they had experienced (through no fault of their own) from the IT company providing the Life Card technology and server.

Standard 9 (9.1)

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

Key Findings and Evidence

Standard met?

3

The service had developed a range of partnerships with specialist Adoption Support Agencies to meet this standard. The service had acknowledged that practice needed to be developed through out the service concerning working with and supporting birth parents and birth families both before and after adoption. This issue has been dealt with in another standard and therefore the inspectors consider that Liverpool Adoption Services commitment to continuing to develop their strategy for working with birth parents and birth families can be considered as met.

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
<p>The service had developed policy and procedures with the assistance of the Independent Adoption Panel Chairperson concerning panel procedures and functions. The service ensured that the panel was properly constituted,.</p> <p>Adoption panel members confirmed that they had been issued with the recently revised Statement of Purpose.</p> <p>The amended policies and procedures could be found in the professional instruction notice called "The Adoption Panel" and included the following:</p> <ul style="list-style-type: none"> ➤ The functions of the Adoption Panel and guidance for attendance. ➤ The constitution and membership of the panel. ➤ The chairperson's role in ensuring the panel is quorate. ➤ Declaration of interests. ➤ Decision making and the process when consensus can not be reached. <p>The panel administrator confirmed that she contacts the panel chair to ascertain availability and contacts other panel members to arrange an emergency panel, such a panel would only be arranged under exceptional circumstances. The inspection found that the Chairperson provides feedback formally twice a year to the Group Manager for Adoption And Fostering. The vice chair of the panel, who was interviewed as part of this inspection, brings back practice issues regularly to the team manager and group manager were necessary. A system is to be introduced of providing quarterly reports detailing the business of the panel and progress to the group manager and the AED.</p> <p>A policy of encouraging prospective adopters to attend panel had been introduced, however practice had not reflected the policy as no prospective adopters had attended a panel at the time of the inspection. The service had provided training on this issue, but needs to reflect on additional ways to make panel more accessible to adoptive applicants if they can be assessed as meeting this standard.</p>		

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
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The constitution of the panel was included in the Adoption Panel Professional instruction notice.

The panel were provided with information regarding legislative changes but training had not yet been delivered on a regular basis. The service should develop training for panel members in line with National Minimum Standards as part of the services action plan. The Panel Membership was being reviewed at the time of the inspection and there were plans to include a senior practitioner from the adoption service with a developmental and training remit.

Mersey Region Consortium had arranged joint panel training and had scheduled another training event.

All current panel members are long standing. The current panel is under review and this will result in new members being inducted which will include an opportunity for all new members to observe a panel before taking up full panel duties.

All panel members had an enhanced CRB and other statutory checks before commencing their duties.

A Panel induction programme within set timescales was included in the review of panel membership.

Members were provided with updates in respect of internal policy and procedural issues. Time permitting national developments and other adoption related issues were discussed at panel meetings.

The service should ensure that training on overseas adoption is provided for panel members as part of the services action plan. The inspection confirmed that the panel has access to good medical and legal advice.

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?	3
<p>Adoption Panels are held on the first Monday of each month, with arrangements for alternative panel dates when Bank Holiday's clash. There is a panel administrator who organises the information and keeps the records for each panel.</p> <p>All staff spoke positively of the impact that the independent panel chairperson had had on the experience of attending panel.</p> <p>All panel reports are required to be with the Panel Administrator two weeks prior to the panel and all reports and information on panel business is sent to panel members one week prior to the Panel date.</p> <p>The panel administrator uses a laptop to record the minutes of the meeting. The minutes of the meeting were found to be accurate and informative and clearly stated the panel's discussion, reasons for conclusions reached, and all recommendations made.</p> <p>The inspector found that the minutes of each panel record clearly the panel's discussions, reasons, and recommendations. Minutes are agreed as accurate and matters arising are discussed at each subsequent meeting.</p>		

Standard 13 (13.1 – 13.3)		
The adoption agency's decision is made without delay after taking into account the recommendation of the adoption panel and promotes and safeguards the welfare of the child.		
Key Findings and Evidence	Standard met?	3
<p>The Assistant Executive Director is the agency decision maker and considers all recommendations and makes his decision within seven working days of the Adoption Panel.</p> <p>All decisions were made with due regard to the duty to promote and safeguard the welfare of the child. The decision maker was provided with the minutes of each panel, full recommendations and reasons for recommendations. The decision maker could also when necessary choose to discuss particular issues with the Panel Chair or any other relevant staff member prior to reaching a decision.</p> <p>Prospective adopters and, subject to age appropriateness, the child or children were informed of the panel recommendation as soon as practicably possible via telephone. This was followed up in writing within seven days. The service had also put in place a system to notify Birth Parents of the decisions made by panel in writing.</p>		

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
<p>The Group manager for The Adoption and Fostering Service in Liverpool had twenty years experience of working in child care. The Team Manager of the Adoption Service in Liverpool had twenty seven years experience of working in child care. The Social Work Resource Manager of the Adoption Service In Liverpool had twenty nine years experience in child care. Liverpool City Council is a large Local Authority with a designated Financial Services section. The manager advised that monthly budget meetings in respect of the Fostering and Adoption Service take place to review expenditure in relation to adoption, with the advice of a finance manager. All staff confirmed that the agency was run on a sound financial basis and that there was appropriate access to resources. The Team Manager of the Adoption Team had the following professional qualifications: Certificate of Qualification in Social Work. Diploma of Applied Social Studies The Social Work Resource Manager had the following professional qualification: Certificate of Qualification in Social Work. The service will have to demonstrate how the manager will be supported to achieve a management qualification which matches the competencies required by the NVQ Level 4 by 1st April 2005.</p>		
<p>Does the manager have Management NVQ4 or equivalent?</p>	<p>NO</p>	
<p>Does the manager have at least 2 years experience of working in a childcare setting in last 5 years?</p>	<p>YES</p>	

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

Examination of staff files confirmed that all staff members, including the managers have a Criminal Records Bureau check. Each referee is contacted by telephone to verify written references. The Supported Living Directorate have developed a system to ensure that Criminal Records Bureau checks are renewed every three years in line with National Minimum Standards and Local Authority Adoption Service Regulations 2003.

Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

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

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

Key Findings and Evidence

Standard met?

2

The inspectors found that the service had been expanded to meet the challenge of National Adoption Standards and National Minimum Standards. The service benefits from having experienced managers who have considerable knowledge about Adoption and child care matters. The inspection found that on a strategic level the service was being managed effectively and efficiently, but that the team managers needed more time to evidence how they will ensure that the service is run in accordance with the Statement of Purpose.

The management structure of the adoption service provides for clear lines of responsibility and delegated powers. The resource manager, team manager and group manager are able to delegate for one another when one of the management team is absent.

The team manager was available to all staff on a day to day basis. Team meetings take place on a monthly basis with shorter team briefing meetings every two weeks.

Liverpool City Council has a clearly defined code of conduct, including a conflict of interest, to which all staff had access through the City Council Intranet Service.

Liverpool City Council has an equal opportunities policy, which promotes anti-discriminatory and anti-oppressive practice. The inspection found that front line staff were able to demonstrate awareness of anti-discriminatory practice. But the service had some way to go before they had developed systems which demonstrated that staff who work with children and adults in the adoption service take into account and respect racial origin, religion, culture, language, sexuality, gender and disability. Further to this the service needed to develop systems, which evidenced a birth parents experience and understanding of adoption.

The service had recognised that practice concerning referrals to the National Adoption Register for children and adopters needed to be developed consistently across the service. The timescale for resolving some of the inconsistencies across the service should be included as part of the services action plan.

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

6

Number of the above complaints which were substantiated

2

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
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The inspectors were impressed by the investment in a performance management system and culture in Liverpool. The Chief Executive, Executive Director, Assistant Executive Director and the Executive Member for children’s services were well informed about the services overall performance and received monthly updates on how the service was matching up against National Adoption Standards and other key performance indicators. All managers tracked the progress of children for whom the plan was adoption via the Adoption Matrix.

The senior management and Executive of the council acknowledged that the service had started out from a very low base and were determined to drive forward service improvements. The council considered that the adoption service played a key role in delivering better outcomes for looked after children in Liverpool and were committed to their role as corporate parents.

Liverpool adoption service had clear information concerning any charges for services, and had recently implemented clear guidelines on the amount of adoption support allowances available for adopters.

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

Monthly?	YES
Quarterly?	
Less than Quarterly?	

Standard 18 (18.1 – 18.5)
The adoption agency has access to specialist advisers and services appropriate to its needs.

Key Findings and Evidence	Standard met?	2
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The inspectors were impressed by the effective working partnerships that Liverpool had developed to meet the needs of adoption service users. As has already been stated the service had service level agreements with After Adoption and Nugent Care adoption agencies.

The service had access to the Direct Work Team and had an effective working relationship with CAHMS who provided a priority service for Looked After Children, which included all adopted children.

Liverpool had a Consultant Community Paediatrician as medical adviser to the Adoption Panel. He was available for consultation regarding general health issues relating to children and adults involved in the adoption process. Liverpool City Council also had a designated nurse for looked after children which included children awaiting adoption.

The Principal Solicitor from Liverpool City Council Child Care Business Unit, Legal Services Department was the legal adviser to the panel.

The service had recognised that they needed to develop a written protocol governing the role of specialist advisers and consultants as part of the services action plan.

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

Social work staff had a recognised social work qualification, This was confirmed by examination of personnel files. Liverpool adoption service recruited all new staff using an Assessment Centre approach which examines candidates competencies in the core Social Work skills and provided an outline developmental plan for future training needs. Liverpool City Council's Human Resource Service provided an oversight of all recruitment processes. The manager confirmed that all Staff involved in recruitment and selection were experienced managers who had been trained in the assessment centre approach to recruitment. Every manager has experience as an assistant assessor and the assessment centre is led by a senior manager with experience of at least three previous assessment centres.

Successful candidates from the assessment centres do not take up their posts until satisfactory references have been received and references have been verified. Enhanced CRB checks along with health checks are also carried out prior to commencement of employment.

The service should be mindful that when employing staff from an agency, that the service needs to undertake their own Criminal Records Bureau to meet Local Authority Adoption Service Regulations 2003 and National Minimum Standards.

The service had developed practice concerning the follow up of written references with a telephone call. In addition to this the service had developed a system to ensure that staff working in the Adoption service have current and updated enhanced CRB check in accordance with Local Authority Adoption Service Regulations 2003.

All staff in the adoption service had suitable qualifications, which were listed in the Statement of Purpose. 30% of the adoption team social workers hold PQ1. The service should demonstrate how they will achieve 20% of social workers being in the process or having the Post Qualifying Child Care Award by 1st April 2006 as part of their action plan

Liverpool City Council Supported Living has a training and development programme aimed at all levels of experience. Core topics included the Use of the Framework for Assessment of Children in Need, Child Protection and the statutory framework in which social work operates. Newly recruited Social workers were required to enrol for PQ training within the first three months of appointment.

Given the earlier findings concerning the implementation of child protection procedures concerning looked after children the inspectors consider that the service must ensure that all staff within the adoption team revisit child protection training to ensure compliance with Liverpool's own child protection policies and procedures.

Established members of the adoption team confirmed that they had a Personal Development Plan, which identifies individual training needs. However newly transferred staff did not have an updated Personal Development Plan and this is something that the service should address as part of the action plan.

All adoption staff confirmed in interview that they have access to funding to attend appropriate external courses.

Staff advised that team meetings include a regular training element and had been used to keep them informed about the recent changes in Adoption Legislation and about changes to policy and procedures.

The adoption service also had designated workers within a direct work team who were available to offer advice and guidance to other Social workers as well as direct work with adopted or children for whom the plan was adoption.

The Complaints procedure is cascaded to all staff and regular training events are held to inform and update staff on the procedures.

Liverpool City Council Supported Living had a designated nurse responsible for the health of Looked After Children and provided a link between the Health Service and Social Workers. The Looked After Children's nurse was also a member of the adoption support panel and offered her expertise in meeting the health needs of adopted children.

Liverpool City Council Supported Living had a virtual school for looked after children. This consisted of a head teacher, teachers, support staff and a board of governors designed to address the educational needs of all looked after children including those with plans for adoption or who had been adopted. The Virtual School offers advice and guidance on all aspects affecting the education of children and provided an important link between social workers and the Education Service.

Staff interviews, case tracking and examination of files confirmed that all Social Workers undertaking assessments of adoptive parents were experienced and trained.

Birth Counselling under Section 51 of the Adoption Act 1976 was carried out on behalf of Liverpool City Council by the After Adoption Agency. The service level agreement with the agency ensured that their staff were suitably trained and experienced to conduct this type of counselling.

Specialist advisers to the Adoption Panel were all suitably qualified and had a particular interest in adoption. They all received training within their specialisms and training as Panel members had occurred and was planned for the future.

When other professionals were engaged to work with children and families their credentials were assured via the organisation who employed them or in the case of agencies or companies via Liverpool City Council's contracts section.

The employment of support workers to work within the adoption service was a recent development. Their remit mainly involves practical tasks but they do not work without direct supervision from a qualified worker. Support Workers were formally supervised by a Social Work Manager.

The service had also developed a system of linking a support worker with more experienced social workers. The team had a senior practitioner who also had responsibility for mentoring less experienced members of staff.

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?	30	%

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**

The inspection confirmed that staff were managed and monitored by people who had the appropriate skills and qualifications, Staff advised that they had regular supervision and were clear about levels of management delegation and responsibility.

Liverpool had experienced some difficulties regarding workload management. The service had acknowledged these difficulties and senior managers were negotiating with the unions and staff about a workload management system that would benefit the service. The service should provide details of the outcome and implementation of the agreed workload management system as part of their action plan.

Staff advised the inspectors that although they were aware of a number of training events available to them that their workloads did not always allow for on going training and appropriate professional and skills development. The need for the service to support staff to gain the full PQ Child Care Award and any other appropriate training, in line with National Minimum Standards, will have to be factored into any team plan.

The adequacy of clerical and administrative support will also need to be kept under review. The inspection found evidence that the new working environment had caused problems within the team, and had at times undermined the efficient and effective running of the service. A lack of a designated phone line, fax and purpose built office space meant that administrative and social work staff felt their time was not always being spent on core tasks.

The inspectors could appreciate the challenging nature of the office environment and recommend in the strongest terms that the move to the new purpose built offices should take place with ongoing consultation with staff. Further to this interim measures should be put into place in Parklands to make the communication into and within the adoption team much easier. This must include the provision of a designated phone line and designated family placement team fax machine. This is referred to further in standard 29.

Further to this staff members who are being asked to adapt to different ways of working, for example if social workers are required to complete their own administrative tasks then they should have training in word processing and Information Technology.

The management of the service should demonstrate as part of the action plan how their investment in Information Technology will be implemented effectively.

The inspectors confirmed with the managers of the service that all staff employed have appropriate written contracts, job descriptions and conditions of service which comply with the General Social Care Council (GSCC) of England.

The managers of the service and the staff group confirmed that they had access to the Statement of Purpose, a grievance and disciplinary procedure, services offered, and equal opportunities policy, health and safety procedures, a complaints procedure and the GSCC's Code of Practice.

Standard 21 (21.1 – 21.4)
There is an adequate number of sufficiently experienced and qualified staff to meet the needs of the adoption agency and they are appropriately supported and assisted in providing a service.

Key Findings and Evidence	Standard met?	3
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Liverpool had expanded the team by transferring a number of staff from the looked after children’s fieldwork teams into the adoption service. At the time of the inspection the managers considered that the staffing compliment in the team would be sufficient to meet the adoption services challenging LPSA’s. The inspectors recommend that the service should keep under careful review the adequacy of staffing.

The managers had the capacity to employ agency staff if there was a staffing shortage and staff policies in general encouraged the retention of staff.

The service should be mindful however of the impact that the new working environment and culture had had on the adoption team. A number of staff had left the service in the previous year, some of whom had felt unable to work in such a new office culture and environment. The effective management of change for the service including the management of new technology and working environments will continue to be a challenge for the adoption service.

Total number of social work staff of the adoption service	13	Number of staff who have left the adoption service in the past 12 months	6
Number of social work posts vacant In the adoption service.	0		

Standard 22 (22.1 and 22.3)
The adoption agency is a fair and competent employer, with sound employment practices and good support for its staff.

Key Findings and Evidence	Standard met?	3
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Staff reported that despite the challenges of working and delivering an adoption service in such a challenging working environment that in general Liverpool was a fair and competent employer.

Some staff were positive about the investment in the service and the expansion of the team, however, others expressed real concerns about their lack of involvement in decisions which impacted greatly on their work.

The managers of the service had addressed some issues raised for example the number of administrative support staff in the team. Further to this, as has already been mentioned, staff were clear that the dispute concerning the workload management scheme would have a positive outcome.

The staff working in the service confirmed that they had access to a whistleblowing 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?	2
<p>The Staff Development section provided a comprehensive range of training designed to meet the needs of each service area. Consultation occurs in relation to training needs and there is also access to funding for appropriate external training courses.</p> <p>Liverpool City Council has a new e-learning website (i-learn). This provided an easy to use catalogue and on line access to training and development. The City Council has an induction day but this was being reviewed at the time of the inspection. The induction pack was being redesigned to provide specific service area information in line with TOPSS induction standards. The implementation of the new induction programme should form part of the services action plan.</p> <p>Staff confirmed that a review of training needs formed part of supervision and that longer standing members of the team had had their Personal Development Plans reviewed and updated.</p> <p>Team meeting and staff briefings in addition to team and management development days were held regularly.</p> <p>The adoption service organises training to meet its specific needs and also provides training on adoption issues/developments to social workers in other service areas that deal with children who have adoption plans.</p> <p>As has already been stated the inspection found that the service may benefit for accessing external training in the preparation of Form F and Form E.</p>		

Records

The intended outcome for the following set of standards is:

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

Standard 25 (25.1 – 25.5)		
The adoption agency ensures comprehensive and accurate case records are maintained for each child, prospective and approved adopter with whom the agency has worked.		
Key Findings and Evidence	Standard met?	1
<p>The examination of files confirmed that the service must ensure that they keep some form of hard evidence of when statutory checks have taken place and the outcome of the checks if they are to meet Local Authority Adoption Service Regulations 2003.</p> <p>Case reading highlighted that there was little evidence of managerial involvement in the decision- making and overall case management that was recorded and evidenced on file. The service should ensure that any decisions by supervisors should be recorded on case files. This is in addition to the file audits that take place throughout the service. These decisions should be legible, clearly expressed, signed and dated in line with National Minimum Standards .</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?**

3

The adoption service provides relevant information to other adoption agencies at the earliest, appropriate opportunity.

Liverpool has a clear and well-understood system for authorising the access to adoption case records and their indexes and for authorising disclosure of adoption information in line with Local Authority Adoption Service Regulations 2003 and National Minimum Standards.

Standard 27 (27.1 – 27.6)

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

Key Findings and Evidence**Standard met?**

3

There is a written policy on case recording, a copy of which was supplied to the inspectors. No one outside of the adoption service can gain official access to any records relating to children and prospective adopters unless the team manager gives permission. All forms F that leave the adoption service are clearly marked indicating that they are confidential documents. Separate records are kept for staff, complaints and allegations. Complaints were managed efficiently and effectively by the service.

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
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Staff files are maintained by the council’s Human Resources Section and were found to meet Local Authority Adoption Service Regulations 2003.
 Panel Members files were maintained by the Panel administrator and held within the Adoption service. Panel members files should be developed to meet National Minimum Standards , but did include signed declarations and CRB checks.
 Records were kept in respect of all the elements mentioned with the exception of training undertaken. Training diaries were being introduced and would be included in staff files in the future.

Fitness of Premises

The intended outcome for the following standard is:

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

Standard 29 (29.1 – 29.5)
Premises used by the adoption agency are appropriate for the purpose.

Key Findings and Evidence	Standard met?	1
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The service was based in a large open plan office with other social services teams. Home working had been piloted with adoption service social workers having the option of being home or office based. This new way of working had been introduced with a move towards becoming a “paperless” office. There is now heavy reliance on computers and adoption social workers are expected to be able to manage their own administrative work.
 During the course of this inspection little support could be found amongst adoption social workers and administrative staff for the new ways of working. Workers reported that there has been insufficient training in how to use the computer systems and this is something the service should address as part of their action plan.
 The adoption service cannot be entirely paperless as it relies upon a significant amount of third party information. The inspectors were concerned that the current office has one communal combined fax, printer and photocopier. Confidential information coming into the office can get easily lost and several social workers and administrative staff commented that this was the case. The inspectors consider that given some of the sensitive and highly confidential material concerning adoption that the adoption service must have its own designated fax machine. This requirement is linked to standard 20.
 Supervision and case discussions take place in the main office in a “pod”, which has partial screening but no sound -proofing. The manager advised that supervision could also take place within the workers home. Staff reported that having supervision in the Parklands raised issues about service user and their own personal/professional confidentiality.
 There is no designated reception for the building. Visitors report to the one stop shop and a phone call is made to the team. Workers access the building with a swipe card at another entrance. There is no system other than workers’ vigilance for ensuring that individuals without a card do not enter the building at the same time. During the course of the inspection, there was concern that on several occasions, the inspectors were invited into the building without being asked for any form of identification.

The staff in the adoption service raised concerns about communication systems within the office. At present there is not one designated phone line for enquiries. This has resulted in workers taking a number of messages for other people from other teams. This impacts on their ability to focus on their own work. There is also a limited number of phone lines available which has resulted in service users and workers not being able to get through to the team.

With regards to security of records, workers who work from home are provided with a three drawer lockable unit.

Files at the office are held within lockable shelving, although they were rapidly running out of space. The service must ensure that they have access to additional lockable storage for files as part of the action plan.

The inspectors were advised that there is adequate insurance for the premises and its contents.

The plans to scan all paper files as part of the services disaster recovery plan had not been fully implemented. The service should ensure how a comprehensive disaster recovery plan can be achieved as part of the action plan.

At the time of the inspection, the difficulties encountered with the new premises and new ways of working had resulted in there being low morale amongst a number of workers in the adoption service.

The inspectors were informed that the adoption service will be moving to a purpose built office in the next twelve months, which will provide accommodation for all the child care staff within the service.

The inspectors do not consider that the current working environment provides social work or administrative staff with an office that is fit for purpose at the present time and recommends in the strongest terms that representatives from all staff within the adoption service are consulted at length and involved wherever possible in the design of the new working environment and offices.

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 10th May 2004 of inspection Liverpool City Council Adoption Service and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary	<input type="checkbox"/> YES
Comments were received from the provider	<input type="checkbox"/> YES
Provider comments/factual amendments were incorporated into the final inspection report	<input type="checkbox"/>
Provider comments are available on file at the Area Office but have not been incorporated into the final inspection report. The inspector believes the report to be factually accurate	<input type="checkbox"/>

Note:

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

D.2 Please provide the Commission with a written Action Plan by 14th December 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	<input type="checkbox"/> YES
Action plan was received at the point of publication	<input type="checkbox"/> YES
Action plan covers all the statutory requirements in a timely fashion	<input type="checkbox"/> YES
Action plan did not cover all the statutory requirements and required further discussion	<input type="checkbox"/> NO
Provider has declined to provide an action plan	<input type="checkbox"/> NO
Other: <enter details here>	<input type="checkbox"/>

Public reports

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

D.3 PROVIDER'S AGREEMENT

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

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

Print Name _____
Signature _____
Designation _____
Date _____

Or

D.3.2 I _____ of _____ 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) 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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