



Making Social Care
Better for People

inspection report

Local Authority Adoption Services

Somerset County Council Adoption Service

C Block, County Hall

Taunton

TA1 4DY

12th October 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

Somerset County Council Adoption Service

Headquarters Address

A Block, County Hall, Taunton, TA1 4DY

Adoption Service Manager

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Blake, Northgate, Bridgewater, Somerset

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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		12/13/14 October 2004	ID Code
Time of Inspection Visit		09:00 am	
Name of Inspector	1	Sean White	127556
Name of Inspector	2	Delia Amos	096257
Name of Inspector	3	Lynn Smith	
Name of Inspector	4		
Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the CSCI. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
Name of Specialist (e.g. Interpreter/Signer) (if applicable)			
Name of Establishment Representative at the time of inspection		Karen Kral	

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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 Somerset County 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.

The Somerset adoption agency operates within its legal expectations to provide adoption services by a local authority. It is part of a joint fostering and adoption service that functions from several locations across the county. A senior manager has responsibility for all adoption matters but does not take day to day management responsibility for all adoption functions; other managers take on these responsibilities but the communication systems are sufficiently well installed to ensure that line management and operational matters are appropriately coordinated. The management structure is relatively new following a recent reorganisation in the social services department.

The agency is a member of the local consortium and plays a pivotal role in its arrangements; the relationship with the consortium was well managed.

The agency undertakes assessments of applicants wishing to adopt locally, applicants who wish to adopt children from overseas, birth records counselling, post adoption support and all other matters relevant to adoption. Its statement of purpose sets out clearly its aims, objectives and operational structures, and includes details of the range of work that it is involved in and responsible for.

PART A SUMMARY OF INSPECTION FINDINGS

INSPECTOR'S SUMMARY

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

This inspection was carried out over three days by three inspectors. The agency provided a comprehensive range of information prior to the inspection and was clearly committed to ensuring a positive experience. Managers, workers and service users provided every assistance and courtesy; this enabled the inspection to be conducted effectively and with cooperation at all stages; the inspectors offer their gratitude for this.

The following summary is provided under the main headings of the National Minimum Standards.

Statement of purpose.

The one standard in this section was almost met.

The agency has a comprehensive statement of purpose – last reviewed in July 2004 - that clearly outlines the aims, principles and philosophy of the service. It is well written and provides a thorough insight into the agency although it did not include all regulatory requirements.

The children's guide is a generic document produced by BAAF with an insert provided for the inspection – in draft form – that informed about Somerset's adoption agency. It was not felt, however, to be a suitable document to meet the requirements of this standard.

Securing & promoting children's welfare.

The one standard in this section was almost met.

The agency has a central recruitment team; this team works to a written procedure for the recruitment of adopters. The procedure, however, does not specifically address the need for a strategic approach to recruitment to ensure that the needs of children awaiting adoption can be met. The agency does, however, focus its attentions on recruiting families to meet the needs of older and disabled children - and sibling groups.

Prospective & approved adopters.

All four standards in this section were met.

The agency had an information pack that was sent to all enquirers and includes all relevant details in respect of adopting children including those from overseas. There are no formal systems in place to prioritise or 'fast-track' applicants who may be particularly suitable for specific children although there are informal prioritisation initiatives plus a policy that considers foster carers as a primary source.

There is a clear process and structure to the agency's approach to recruitment, information, preparation and assessment. Feedback from adopters was, in the main, positive – most having had good experiences but there were some negative comments received in respect of the length of time the process took.

Forms F were well written and indicated a thorough approach to assessment - with a realistic balance of information and analysis. All required checks are routinely and efficiently carried out.

The information received from adopters was generally positive in respect of their experiences of being matched with children. The organisational structure of the agency is such that there is a discrete adoption support team who provide assistance to approved adopters during placement; they are allocated to adopters as soon as they are approved, although there was some confusion about the specifics of the role of support workers.

Birth parents and birth families.

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

The agency demonstrated a commitment to the needs of birth parents and families through a clear policy statement and wherever possible, the views of birth parents were clearly expressed and recorded. There was no system in place to provide birth parents with support that was independent of the child's social worker but there were plans in progress to invite tenders from independent providers to undertake this work. Every endeavour is made by the agency, through its strong links with children's social workers, to ensure that appropriate, relevant and up to date information is gathered from birth families and the letterbox and contact arrangements were well managed.

Adoption Panels & Agency decisions.

Of the four standards in this section, two were met and two were almost met.

Although the panels appear to operate successfully, the written policies and procedures for adoption panels are inadequate and do not provide sufficient information. The two adoption panels of the agency are suitably constituted; they operate effectively and in the best interests of children. The management, organisation and administration of the adoption panels were efficient.

The arrangements for decision-making were efficient and timely; the decision maker receives minutes of panel business and recommendations within forty-eight hours and the decision is made within four days. Overall, the system for decision making worked reasonably well but there were some issues that were found to be potentially problematic that the agency should address.

Fitness to provide or manage an adoption agency.

Of the two standards in this section, both were almost met.

The nominated manager is very experienced in child-care and related social work, and other managers with responsibilities for adoption were also suitably qualified and experienced. The manager, had not, however, obtained any management qualifications and there were no plans in hand for her to do so.

The human resources section had not routinely maintained copies of CRB disclosures; it was said, nevertheless, that plans were well in hand to change routine practice in personnel operations and that it had been established that systems are to be in place that would meet all NMS.

Provision & management of the adoption agency.

All of the three standards in this section were met.

The organisational and management structure of the agency is fairly new following a re-structuring in recent months. It is a large local authority and the management arrangements are not straightforward and somewhat elaborate; nevertheless, despite the rather intricate structure the evidence found during the inspection suggested that the managers and staff are comfortable with the organisational arrangements and that, thus far, the system is developing successfully.

There is an unusually high involvement of elected members of the council in the activities of the agency, three of whom sit on the adoption panels; this ensures, along with the twice yearly reports, that the executive of the council is continually apprised of the activities of the agency.

Employment & management of staff.

Of the five standards in this section, two were met and three were almost met.

In the main, the arrangements for recruiting staff to the agency are satisfactorily organised and managed, although improvements need to be made in some areas. The social workers in the agency demonstrated skills and expertise in adoption matters and related work with children and families, and that they were able to undertake effective & thorough assessments of prospective adopters. It was evident that the managers had a good grasp of their duties and responsibilities in a complex organisation and the workers felt that they were well managed and supported. There were particularly positive reports in respect of the knowledge and abilities of some managers and the influence this had on promoting good practice. Supervision was provided for employed social workers on a regular basis but the supervision of sessional social workers, however, was reportedly sometimes only done over the telephone; none of the records were written in a way that would enable them to be transferred to a case file.

The agency appeared to have sufficient qualified and experienced staff to undertake the work of the agency and it was clear that the authority has good working and employment practices aimed at retaining good staff.

Training has focused mainly on Post-Qualifying Awards with limited opportunities in other areas, including birth records counselling updates.

Records.

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

In the main, case records were well maintained, accessible and contained most required information, and all required checks were made and appropriately recorded; there were some shortfalls, however, that need addressing. All necessary and appropriate arrangements were in place to ensure that all required and necessary information is made available to other adoption agencies and local authorities whenever required. The authority has a case recording policy and guidance but it is aimed at children's files, the policy is not directly relevant to the recording and file maintenance of adopter's files. In the main, personnel records were of a good standard but there were some omissions that require attention.

The systems for dealing with complaints were not as robust as they should be.

In the main, personnel records were of a good standard, well maintained and appropriately ordered but there were some omissions that require attention.

Fitness of Premises.

The one standard in this section was met.

The agency operates from several premises at different locations throughout the county, not every location was inspected. Of the premises that were assessed it was found that location and facilities were generally good, and there were fire and flood proof storage facilities at all 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:

Not applicable.

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

Requirements from last Inspection visit fully actioned?

NA

If No please list below

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

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	Reg.2 (2003)	LA1	The agency must include all regulatory requirements in the Statement of Purpose. The agency must produce a children's guide that includes all required information.	01/01/05
2	Reg.11 (2003)	LA28	All required information must be recorded on personnel file for all staff.	01/01/05

GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

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

No.	Refer to Standard *	Recommendation Action
1	LA2	A more coherent, written strategy should be produced that explains how adopters are to be recruited to meet the needs of children requiring adoption.
2	LA7	The agency should ensure that the process for independent support for birth parents is expedited as soon as possible.
3	LA10	The agency should produce a more comprehensive adoption panel policy and procedure.
4	LA13	The agency should consider ways of ensuring that all information from panels is passed to the decision maker; this may include the chairperson having sight of minutes for checking and verifying purposes, before they are passed to the decision maker.
5	LA14	Arrangements should be made for the manager to obtain a management qualification.
6	A15	Plans to ensure that all relevant information, in respect of people managing the agency, can be evidenced on personnel files should be expedited as soon as possible.
7	LA19	All required information should be kept in relation to all people working for the adoption agency.
8	LA20	Supervision records should be maintained in a consistent fashion. Health & safety and security checks should be undertaken in all home-working situations.
9	LA23	Greater emphasis should be placed on training, in addition to PQA.
10	LA25	Files should have supervisors decisions recorded; assessment and contact visits should be recorded; full CRB information should be included and evidence of auditing should be recorded.
11	LA27	The agency should develop a case recording policy for adopter's files. A more robust system for recording complaints should be introduced.

- 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	YES
• 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	12/10/04
Time of Inspection	09.00
Duration Of Inspection (hrs)	70
Number of Inspector days	8
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)	41

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

The scale ranges from:

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

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

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

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

Statement of Purpose

The intended outcome for the following standard is:

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

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

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

Key Findings and Evidence

Standard met?

2

The agency has a comprehensive statement of purpose – last reviewed in July 2004 - that clearly outlines the aims, principles and philosophy of the service. It is well written and provides a thorough insight into the agency, the work it undertakes and the operational structures within which it functions. The statement also includes some statistical information in relation to the numbers of children placed, or awaiting placement, and the numbers of adopters approved or undertaking assessment. Some of this information is somewhat out of date, referring to 2001-2, and may not be particularly relevant to the current work and status of the agency. There is also information included in respect of the numbers of children in foster care; it is not understood why this information is included in the statement. Unfortunately, the statement does not include all the information required by regulations and this needs addressing.

The children's guide is a generic document produced by BAAF with an insert provided for the inspection – in draft form – that informed about Somerset's adoption agency. It was not felt, however, to be a suitable document to meet the requirements of this standard; the language (of the insert) is sparse and 'official' sounding, elements of the standards are not included and it is not presented in a 'child-friendly' fashion. Although plans were said to be in hand to develop the children's guide into a "colourful leaflet for children", this had not been achieved at the time of the inspection and it is felt that this should have been given that the NMS had been in existence for almost eighteen months. Several respondents to questionnaires said that they were not aware of the existence of a children's guide.

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

YES

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

YES

Is there a children's guide to adoption?

YES

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

NO

Securing and promoting children's welfare

The intended outcome for the following set of standards is:

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

Standard 2 (2.1 - 2.3)

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

Key Findings and Evidence

Standard met?

2

The agency has a central recruitment team; this team works to a written procedure for the recruitment of adopters. These procedures are comprehensive and indicate who is responsible for each action indicated; there is also a corresponding code that indicates any guidance that is available or necessary for each stage of the recruitment process. The procedures indicate timescales wherever necessary. Some comments were received, however, that indicated that the timescales were over optimistic and in some cases there had been considerable delay in the overall process.

Although the procedures are fulsome in indicating how the recruitment, assessment and approval processes should operate, they do not address the need to recruit sufficient adopters to meet the needs of the children requiring adoption in the County. Although it was acknowledged that the agency has a regular and plentiful stream of applicants, it was clear that there was a general feeling that this in itself would satisfy the needs of children awaiting adoption. The agency managers are clear about the fact that there are a range of complex and difficult to place children in the authority and strenuous efforts are made to ensure that they are not left waiting in 'the system'. The agency's business plan informs this view, but does not provide any clear, strategic indication of how recruitment should be managed to achieve the best outcomes.

In the last 12 months:

How many children were identified as needing adoptive families?

35

How many children were matched with adopters?

14

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

16

How many children were placed with other services' adopters?

5

How many children were referred to the Adoption Register?

35

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

21

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

100

%

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

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?

19

Prospective and approved adopters

The intended outcome for the following set of standards is:

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

Standard 3. (3.1 – 3.3 and 3.5 - 3.6)

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

Key Findings and Evidence

Standard met?

3

The agency had an information pack that was sent to all enquirers; whilst it contained all relevant material it relied mainly on documentation produced by the Dept. of Health's Quality Protects initiative. The information pack did, nevertheless, provide details of all forthcoming information sessions that are held by the agency, at different venues around the county, every month. It is these sessions that provide the detailed information about adoption and respondents to questionnaires and interviewed adopters stated that these sessions were invaluable in helping them to understand the more complex and arcane issues associated with adopting children. The information pack includes all relevant details in respect of adopting children from overseas.

Although the agency recognises the fact that there are many children requiring adoption who may have particular and complex needs, and recruiting adopters to meet those needs is often difficult, it does not have any formal process to follow should there be a necessity to prioritise prospective adopters. It was acknowledged that the agency managers are aware of the possible need to prioritise in certain cases – and this is written into the Business Plan, but this would be done on an ad-hoc, case by case basis; it was said that there is no system in place to 'fast-track' any applicants who may be able to offer particular skills or circumstances to meet children's needs although there are informal prioritisation initiatives plus a policy that considers foster carers as a primary source.

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?****3**

There is a clear process and structure to the agency's approach to recruitment, information, preparation and assessment. Feedback from adopters was, in the main, positive – most having had good experiences throughout the process of approval as adopters; comments were made about the skills and support provided by social workers, about the suitability of the preparation courses and the thoroughness of the assessments.

The preparation groups are held over three days and respondents said that they were as conveniently organised/located as possible given the large geographical size of the county. The groups were reduced to two-day sessions in recent times for a period and it is felt that this would not be sufficient to provide a comprehensive preparation to adoption assessments.

Forms F were well written and indicated a thorough approach to assessment - with a realistic balance of information and analysis. All required checks are routinely and efficiently carried out. There was also an issue raised in respect of the range of references sought; for instance if an applicant undertakes voluntary work with children, then a reference should be sought from the agency or group.

There were some negative comments received in respect of the length of time the process took –from initial enquiry/information evenings to approval, and some criticisms of the availability of social workers – some respondents said that it was often difficult contacting social workers by 'phone.

Although the agency encourages applicants to provide feedback on their experiences at preparation courses, it was not clear whether this information is used in any true evaluation, although it was evident that comments were taken seriously.

Standard 5 (5.1 – 5.4)

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

Key Findings and Evidence

Standard met?

3

The information received from adopters was generally positive in respect of their experiences of being matched with children. They felt that they had been provided with realistic, up-to-date information, were adequately prepared for the experience of adopting and were aware of the arrangements with the consortium and National Register.

Satisfactory arrangements were in place to ask adopters to notify the agency of the death of a child – this is contained in the contract that adopters sign before the placement is made – but there was some vagueness expressed by at least one adopter in respect of their responsibilities in this area.

Forms E were found to be of a good standard and children’s adoption files contained all relevant material.

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

YES

Standard 6 (6.1 – 6.7)

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

Key findings and evidence**Standard met?**

3

The organisational structure of the agency is such that there is a discrete adoption support team that provides assistance to approved adopters; they are allocated to adopters as soon as they are approved and an introductory letter is sent. There is also a range of training opportunities for adopters to access and a four-day post-approval training course for new adopters.

There was some conflicting information provided that created some confusion about the specific role of the adoption support service; the manager's self-assessment states that "the Adoption Support Team are available to adoptive parents for advice and support after the Adoption Order is made", whilst other information states that, "The adoption support workers aim to make personal contact and give a pack of information that will be useful for when they are matched with children", and, "they are available to support and visit families where there are difficulties in placement". Whilst there is no criticism of the support provided by this team- the evidence suggested that the service provided was satisfactory - there should be more clarity demonstrated throughout the adoption process to avoid any confusion. This was also reflected in some of the responses received from adopters, insofar as who took responsibility for supporting them throughout the introduction and matching stages; their assessing social worker or a support worker? It was clear that there was an inconsistent understanding of the role of support workers throughout the agency and its service users, in so far as when their involvement began, despite the good work obviously undertaken by workers in the team. The agency should endeavour to ensure that all approved adopters are clear about the arrangements and responsibilities at this crucial stage and that the arrangements are more clearly written into procedures and practice guidelines.

Number of adopter applications started in the last 12 months	20	
Number of adopters approved in the last 12 months	7	
Number of children matched with the local authority's adopters in the last 12 months	16	
Number of adopters approved but not matched	15	
Number of adopters referred to the Adoption Register	7	
How many placements disrupted, between placement and adoption, in the last 12 months?	0	

20

Number of adopters approved in the last 12 months

7

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

16

Number of adopters approved but not matched

15

Number of adopters referred to the Adoption Register

7

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

0

Birth Parents and Birth Families

The intended outcomes for the following set of standards are:

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

Standard 7 (7.1 – 7.5)

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

Key Findings and Evidence	Standard met?	
<p>The agency demonstrated a commitment to the needs of birth parents and families through a clear policy statement and strong links with social workers involved in working with the families of children whose plans were for adoption. Forms E were well presented and, wherever possible, the views of birth parents were clearly expressed and recorded.</p> <p>At the time of the inspection there was no system in place to provide birth parents with support that was independent of the child's social worker. Nevertheless, there were plans in progress to invite tenders from independent providers of support services to undertake work with birth families and the outcome of the tendering process was imminent with hopes that the successful provider would begin their work in the near future.</p>	2	

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?	
<p>Every endeavour is made by the agency, through its strong links with children's social workers, to ensure that appropriate, relevant and up to date information is gathered from birth families to enable children to have as much of their history available to them as possible. This is usually in the form of life-story books and other accessible material such as photographs and family heirlooms etc.</p> <p>The letterbox and contact arrangements were well managed although there had been some difficulties experienced through another agency inadvertently providing a birth family with information that had the potential to identify an adopter. Although this was beyond the control of the agency it is felt that there needs to be some diligence applied to ensure that every effort is made to protect adopter's identities becoming known and that stronger representation should be made to the agency concerned.</p>	3	

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 agency has a clear and robust permanency policy that outlines its commitment to birth families and clearly states that it intends to work, so far as is possible, in partnership with them. Once the arrangements for an independent agency to be employed to carry out birth family support are finalised, there should be an effective and complete service available.

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 agency operates two panels (A&B) that sit, alternately, every two weeks; each of these panels have a slightly different membership in so far as the independent members are concerned – the same person chairs both panels.</p> <p>There is a 'General Information, Protocol & Confidentiality Bond' for panel members, which appears to function as a policy and procedure. Whilst this contains much of the required information, it is not as complete as it should be; the document is written in a way that states how things are rather than dictates a policy and procedure. There is no information, for instance, on the procedures for appointing a panel chairperson or vice chairperson – only a statement saying, "The chairperson is currently an elected member..." and no clarity regarding ensuring the panel is always a quorum.</p> <p>There was other supporting information on adoption panels available for adopters who attend panel and for social workers that present cases. Adopters are encouraged to attend panels and, generally speaking, there were positive reports about the welcome they received and their opportunities to be heard.</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?	3
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The two adoption panels of the agency are suitably constituted; they operate effectively and in the best interests of children. The chairperson of both panels is an elected member of the council and, as such, cannot be seen as independent; this appears to be an historical tradition in this authority and consequently the chairperson is appointed rather than recruited - with the managers of the agency apparently having little input into the process. Although the chairperson has experience of adoption through being, previously, a member of the panel, she has little other direct experience or expertise of adoption matters. Nevertheless, the panel was noted as being effectively conducted with all members being given the opportunity to express their views and ask questions.

The members of the panel had all been subject to a CRB disclosure, all had signed a confidentiality statement and all had undertaken appropriate training. A new member was observing the panel on the day of inspection and it was stated that this is usual protocol in every case.

The panel has a twice-yearly training day – which includes agency workers – and there is extra training for new members.

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
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The management, organisation and administration of the adoption panels were efficient. They are convened every two weeks, which is sufficient to manage the usual volume of business, and there are extra panel dates ‘pencilled in’ to accommodate any extra business or to address any emergencies that may arise which it needs to deal with.

Panel papers are distributed in plenty of time for members to read and digest the contents and social workers – both those assessing adopters and children’s social workers - have sufficient information about time scales for booking dates and preparing Forms E & F for inclusion.

Standard 13 (13.1 – 13.3)

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

Key Findings and Evidence

Standard met?

2

The arrangements for decision-making were efficient and timely; the decision maker receives minutes of panel business and recommendations within forty-eight hours and the decision is made within four days of the panel. Panel papers are sent to the decision maker at the same time as panel members, enabling her to be in receipt of all available information. Overall, the system for decision making worked reasonably well but there were some issues that were found to be potentially problematic that the agency should address.

The statement of purpose states that, "Somerset's Decision Maker is the Director of Social Services. This role is delegated to the Head of Children's Services, except where the Panel is split on its recommendation, or where approval is not the recommendation". The Head of Children's Services said that she makes all decisions, and does not refer to the Director – which appears to be at odds with the policy.

The chairperson of the panel does not have sight of the panel minutes before they are sent to the decision maker; there were instances found where not all of the recommendations of the panel were included in the minutes – this has the potential for a decision to be reached based on limited information.

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?

2

The nominated manager is very experienced in child-care and related social work; she has considerable management experience at a senior level with a background in children and families, assessment and adoption matters and has a recognised qualification. She had not, however, obtained any management qualifications and at the time of the inspection there were no plans in hand for her to do so; she does, nevertheless, hold a post-graduate qualification in applied social studies.

Other managers with responsibilities for adoption were also suitably qualified and experienced; some, it was noted, had considerable experience, skill and knowledge in adoption matters with two having served for two years on the Adoption Task Force.

The nominated manager had only been in her current post for a relatively short time; this, and the fact that a recent organisational re-structuring had occurred, meant that there was some uncertainty in the overall management arrangements but this was assessed as being part of the process of 'bedding-in' the new system. Nevertheless, it was clear that the manager(s) were exercising a sense of direction and leadership that should show benefits when the new system is better established.

Does the manager have Management NVQ4 or equivalent?

NO

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

YES

Standard 15 (15.1 – 15.4)

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

Key Findings and Evidence

Standard met?

2

The human resources section had not routinely maintained full evidence of CRB disclosures on personnel files; although there were entries to state that a CRB had been undertaken, there was no copy of it on the file of the manager. Neither was there any evidence of written references being verified by telephone; it was said, nevertheless, that plans were well in hand to change routine practice in personnel operations and that it had been established that systems are to be in place that would meet all NMS.

Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

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

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

Key Findings and Evidence

Standard met?

3

The organisational and management structure of the agency is fairly new following a restructuring in recent months. There is a central recruitment team, geographically based teams, a central team and a support team. It is a large local authority and the management arrangements are not straightforward and somewhat elaborate; the nominated manager of the agency, for instance, does not carry management responsibility for all adoption work, although she does carry responsibility for all aspects of adoption matters. Other managers (Area Managers and Children's Services Managers) carry out all management functions within their sphere of responsibility, including adoption work, and a consequence of this is that lines of accountability, responsibility and communication are rather complex. Nevertheless, despite the rather intricate structure, the evidence found during the inspection suggested that the managers and staff are comfortable with the organisational arrangements and that, thus far, the system is developing successfully.

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

0

Number of the above complaints which were substantiated

X

Standard 17 (17.1 – 17.3)

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

Key Findings and Evidence**Standard met?**

3

There is an unusually high involvement of elected members of the council in the activities of the agency. Three councillors (one of whom is the chairperson) sit on the adoption panels and all have a particular interest in adoption matters and the welfare of children. In addition the executive of the council receives a report on the conduct and activities of the agency every six months. At present, however, the council does not operate a corporate parenting group; there is an 'Official Visitors Panel' – which undertakes some corporate parenting responsibilities – but this tends to focus on residential care of young people and fostering issues with adoption only being considered by default. Nevertheless, it was demonstrated by councillors that they are keenly aware of their responsibilities as corporate parents and that their work on adoption panels keeps the executive fully informed of how the needs of children are being met through adoption.

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

Monthly?

Quarterly?

Less than Quarterly?

YES

Standard 18 (18.1 – 18.5)

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

Key Findings and Evidence**Standard met?**

3

The medical adviser is a member of the adoption panel and attends on most occasions; she also demonstrates a pivotal role in ensuring that the health issues and needs of children are addressed appropriately and that adopters are appropriately assessed to ensure that they can meet children's needs.

There is also a legal adviser to the panel, who is also in attendance on most occasions and the agency uses the services of a specialist adviser for inter-country adoption matters.

All appropriate protocols, policies and procedures governing advisers were in place.

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

In the main the arrangements for recruiting staff to the agency are satisfactorily organised and managed, and personnel matters are generally robust. Improvements could be made, however, to ensure that the NMS are met in full: this would include routine verification of written references, verified copies of all relevant qualifications and original CRB checks being kept on personnel records.

The social workers in the agency demonstrated skills and expertise in adoption matters and related work with children and families, and the written material that they produce showed that they have the ability to assess prospective adopters and work effectively with them. There was considerable praise provided by adopters about the skills and abilities of the workers who undertook their assessments.

The agency has an active approach to Post Qualifying awards and has exceeded the target of 20% already.

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?

27

%

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**

As outlined previously in this report, the current organisational structure has only been in operation for a short time; the agency managers were positive about the new structure and felt that it was capable of delivering services more effectively in a large county authority. It was evident that the managers had a good grasp of their duties and responsibilities in a complex organisation and the workers felt that they were well managed and supported. There was particularly positive reports in respect of the knowledge and abilities of some managers and the influence this had on promoting good practice, and developing skills and knowledge across both the adoption service and children's services generally.

The agency undertakes both fostering and adoption; although it acknowledged that fostering can overshadow adoption work (because of the unpredictable demands that it can place on a service) the arrangements for allocating and prioritising work in the teams insures against an unbalanced workload and enables adoption responsibilities to prevail appropriately. Experienced managers, through supervision and workload management, satisfactorily monitor this; supervision was provided for employed social workers on a regular (usually every 4-6 weeks) basis. Supervision records, however, were inconsistently maintained; of the records that were inspected (from two different teams) there were different styles evident, some were handwritten, some typed, some with a supervision agreement, others without. None of the records were written in a way that would enable them to be transferred to a case file and none of the records differentiated between fostering and adoption work. The supervision of sessional social workers, however, was reportedly only done over the telephone. There were some issues raised in respect of the management of workers who operate mainly from home that could be improved upon; these included health & safety matters and IT and file security.

All workers, including sessional workers, have written contracts, all are aware of the council's policies and all were aware of the role and responsibilities of the agency.

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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The agency appeared to have sufficient qualified and experienced staff to undertake the work of the agency, although this is achieved through the regular use of sessional workers – who are also used whenever there are shortfalls due to sickness, vacancies etc. A high proportion of long serving workers populates the workforce. They are encouraged through effective employment practices that are flexible and enable, for instance, people to work at home.

Total number of social work staff of the adoption service	22	Number of staff who have left the adoption service in the past 12 months	2
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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The authority has sound recruitment, selection and appointment practices, suitably informed by corporate policies. The support systems for staff are comprehensive and aimed at providing workers with as comfortable and productive a working life as possible. Workers reported that they found the authority a competent and fair employer – many workers had been in post, or had worked in different jobs in the authority, for some considerable time. They said that they would feel supported in bringing bad practice to the attention of the authority and were aware of the Whistle-blowing policy and where to gain access to it.

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 emphasis on training and staff development has been in the agency's commitment to post-qualifying awards; it was noted, and accepted, that other training had been somewhat 'sidelined' by this – although not ignored completely, there was evidence of some training having been provided and undertaken. However, some staff said that they felt a little 'jaded' and added that they would appreciate the opportunity to refresh their practice by having the opportunity to undertake more relevant, in-depth training. In respect of s51 (birth records counselling) there has been no training undertaken for three years. One member of the management team undertakes much of the in house training across the agency (although other managers take some responsibility) but it was felt that she was somewhat stretched in this role given her other pivotal responsibilities in the agency.</p> <p>However, there has been recently set up a Training and Development Group that has the task of developing a more coherent training and staff development strategy.</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?	2
<p>In the main, case records were well maintained accessible, contained most required information and all required checks were made and appropriately recorded (but see CRB issues below); it was said that there is a regular management audit of files undertaken, but there was no record made on the file to indicate when this had been done or by whom. The adopters' files would benefit from an up to date chronology/checklist and contemporaneous records of all assessment and contact visits being kept. The files do not have records of supervision decisions; neither do they contain full CRB information in every case. Children's adoption files were well kept and contained all relevant information.</p> <p>The systems for securing case records were not inspected at every location, but those that were examined were satisfactorily managed and followed policy guidelines.</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
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All necessary and appropriate arrangements were in place to ensure that all required and necessary information is made available to other adoption agencies and local authorities whenever required. There are appropriate and satisfactory departmental policies and procedures in place to protect data and confidentiality of all information shared with any other agency.

Standard 27 (27.1 – 27.6)
There is a written policy on case recording which establishes the purpose, format, confidentiality and contents of files, including secure storage and access to case files in line with regulations.

Key Findings and Evidence	Standard met?	2
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The authority has a case recording policy and guidance but it is aimed at children’s files; although it is comprehensive and thorough, and includes procedures for supervision and contact recording, file format and all matters relevant to accuracy, security and confidentiality of information, the policy is not directly relevant to the recording and file maintenance of adopter’s files. The agency should develop a discrete policy that is aimed at consistency of file content and file management in respect of adopters.

Although there were no complaints recorded there was evidence found that suggested complaints had been made and not dealt with or followed through as such. It is important that the agency has a robust system in place to identify and record complaints as they arise, and deal with them accordingly.

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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In the main, personnel records were of a good standard, well maintained and appropriately ordered. There were some omissions that require attention in the systems that operate in this section to ensure compliance with NMS, notably: evidence to demonstrate written references are routinely verified by telephone, clearer evidence of CRB checks, a recent photograph and verified copies of all relevant qualifications. It is also suggested that records of interviews are maintained on personnel files.

Fitness of Premises

The intended outcome for the following standard is:

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

Standard 29 (29.1 – 29.5)

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

Key Findings and Evidence

Standard met?

3

The agency operates from several premises at different locations throughout the county, not every location was inspected. The adoption functions that operate from the main council offices in Taunton were assessed, as were the premises in Bridgewater. The offices are available to the general public during normal office hours and are located in accessible positions. The offices provide reasonable working conditions but in some locations space is at a premium and workers do not have a personal desk; home-working arrangements are in place in such circumstances. Appropriate security measures are in place and satisfactory health and safety measures are provided, including fire safety; the authority has a disaster recovery plan for all records and emergency working conditions.

The storage of files is, generally speaking, satisfactory and there are fire-proof storage facilities at all offices, including the council offices.

Administrative arrangements are generally good although there was some concern that admin workers were sometimes 'stretched' to meet all their responsibilities; IT services were generally good.

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 12th October 2004 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary

YES

Comments were received from the provider

YES

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

YES

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

Note:

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

D.2 Please provide the Commission with a written Action Plan by 17th 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

YES

Action plan was received at the point of publication

YES

Action plan covers all the statutory requirements in a timely fashion

YES

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

Provider has declined to provide an action plan

NO

Other: <enter details here>

Public reports

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

D.3 PROVIDER'S AGREEMENT

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

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

Print Name _____
Signature _____
Designation _____
Date _____

Or

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

Print Name _____
Signature _____
Designation _____
Date _____

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

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