

# inspection report

Local Authority Adoption Services

**London Borough of Hillingdon Adoption  
Service**

855 Uxbridge Road  
Hayes  
Middlesex  
UB4 8HZ

30th November and 1st and 2nd December  
2004

## **Commission for Social Care Inspection**

Launched in April 2004, the Commission for Social Care Inspection (CSCI) is the single inspectorate for social care in England.

The Commission combines the work formerly done by the Social Services Inspectorate (SSI), the SSI/Audit Commission Joint Review Team and the National Care Standards Commission.

### **The role of CSCI is to:**

- Promote improvement in social care
- Inspect all social care - for adults and children - in the public, private and voluntary sectors
- Publish annual reports to Parliament on the performance of social care and on the state of the social care market
- Inspect and assess 'Value for Money' of council social services
- Hold performance statistics on social care
- Publish the 'star ratings' for council social services
- Register and inspect services against national standards
- Host the Children's Rights Director role.

## **Inspection Methods & Findings**

SECTION B of this report summarises key findings and evidence from this inspection. The following 4-point scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

### **The 4-point scale ranges from:**

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

'O' or blank in the 'Standard met?' box denotes standard not assessed on this occasion.

'9' in the 'Standard met?' box denotes standard not applicable.

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

## ADOPTION SERVICE INFORMATION

**Name of Local Authority**

London Borough of Hillingdon Adoption Service

**Headquarters Address**

855 Uxbridge Road, Hayes, Middlesex, UB4 8HZ

**Adoption Service Manager**

Ann Holmes

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0189 527 7854

**Address**

855 Uxbridge Road, Hayes, Middlesex, UB4 8HZ

**Fax No:**

0189 527 7851

**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

<b>Date of Inspection Visit</b>		30th November 2004	<b>ID Code</b>
<b>Time of Inspection Visit</b>		09:30 am	
<b>Name of Inspector</b>	<b>1</b>	Rosie Dancer	125017
<b>Name of Inspector</b>	<b>2</b>	Sue Nott	105781
<b>Name of Inspector</b>	<b>3</b>		
<b>Name of Inspector</b>	<b>4</b>		
<b>Name of Lay Assessor (if applicable)</b> Lay assessors are members of the public independent of the CSCI. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
<b>Name of Specialist (e.g. Interpreter/Signer) (if applicable)</b>			
<b>Name of Establishment Representative at the time of inspection</b>		Ms Ann Holmes	

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## INTRODUCTION TO REPORT AND INSPECTION

Local authority adoption services are subject to inspection by CSCI, to establish if the service is meeting the National Minimum Standards for Local Authority Adoption Services and the requirements of the Care Standards Act 2000, the Adoption Act 1976 as amended, the Adoption Agencies Regulations 1983 as amended and the Local Authority Adoption Service (England) Regulations 2003.

This document summarises the inspection findings of the CSCI in respect of London Borough of Hillingdon 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.
<p>The Adoption and Permanency Team of the London Borough of Hillingdon is part of the provision of services of the Borough's Social Services Department. The service operates the services and functions as required by current legislation.</p> <p>The team do not undertake the preparation and assessment of inter-country adopters; all enquirers are referred to the Westminster and West London Consortium of which Hillingdon is a member.</p>

## PART A SUMMARY OF INSPECTION FINDINGS

### INSPECTOR'S SUMMARY

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

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

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

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

#### **Statement of Purpose (Standard 1)**

##### **This standard had minor shortfalls**

There was a clear Statement of Purpose, which identified the aims and objectives of the Adoption Service. The statement requires the addition of the details of the CSCI and the address and experience of the manager of the service.

Some further minor work was needed on the Children's Guides to ensure that they meet regulation and standard.

#### **Securing and Promoting Welfare (Standard 2)**

##### **This standard had minor shortfalls**

The inspectors noted that while targeted recruitment had been carried out in respect of a child with specific needs there was not an overall written plan for the implementation and evaluation of effective strategies to recruit adopters who could meet the needs of children waiting for adoption, this needs to be developed.

The inspectors noted some good examples of matching processes which were child focused.

The manager informed the inspectors that there is a letter being developed to explain to the child in later life the matching processes involved in their case.

The inspectors' looked at a sample of 8 cases; in respect of one case there were some issues which the inspectors were following up with the local authority after the inspection. So as not to further delay the publication of the report a decision was made by the commission



that the report would be sent to the service in draft while the inspector pursued the issues to a satisfactory conclusion.

### **Prospective and approved adopters (Standards 3-6)**

#### **2 standards assessed were met, 2 standards had minor shortfalls**

Overall the information sent to adopters following an initial enquiry and approval was adequate. The majority of adopters with whom the inspectors had contact with confirmed this view. The inspectors did however note that the information in respect of age criteria is not consistent across all written information, this needs addressing.

Adopters are provided with comprehensive preparation, assessment and programmes and statutory checks are carried out.

The inspectors noted some good quality assessment work had taken place and form F's viewed were of good quality and included a clear analysis of the information gathered.

The approach to assessment of adopters is based on the competency approach and this had allowed social workers to target support and training in the areas of most need.

There are systems in place to establish adopters' views about various stages of the process; however responses from the adopters indicate that a more systematic approach to this would be of benefit to the services future development.

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

The majority of adopters had been satisfied with their experience of adoption and a number of adopters praised their social workers professionalism and support.

Some adopters expressed some frustration in respect of the length of the process, in particular from approval to placement of their child.

A minority of two adopters, expressed frustration about what they felt had been incomplete information about their children from placing authorities. Both authorities mentioned were not Hillingdon. However the inspectors have recommended that Hillingdon are more pro-active in obtaining information from other local authorities where necessary.

A more formalised approach to post adoption support work is about to be established with the appointment of a worker to carry out this role.

In respect of information provided to children about prospective adoptive parents one of the responses from a questionnaire completed by a placing social worker commended the information which had been provided to the child she was placing.

### **Birth Parents and birth families (Standards 7-9)**

#### **The 3 standards assessed had minor shortfalls**

The service to birth parents was acknowledged by the manager as being a service under development. At the time of the inspection options were being considered in respect of providing independent support to birth parents. The inspectors are of the view that when established this will enhance birth parents opportunities to participate as fully as is possible in all areas of the adoption process.

At the time of the inspection the adoption workers were co-ordinating the letterbox contact service but the inspectors were informed that consideration was being given to employing a worker to carry out this specific task.

### **Adoption Panels and Agency Decisions (Standards 10-13)**

#### **The 4 standards assessed were met**

There are clear policy and procedures in place in respect of the adoption panel. Adopters are routinely invited to attend the panel that their case is being considered at and are encouraged to make verbal representations.

Prior to the inspection the service had recognised the need to appoint an independent chair to the panel and arrangements were well in hand to interview a number of applicants for the post. The inspectors have recommended that consideration be given to how a more balanced membership in terms of gender and independence issues can be achieved.

Panel meeting dates are set in advance on an annual basis. Panel papers are provided to panel members and the decision maker in advance of each panel meeting.

Minutes are taken of each meeting and these are discussed and amended as required at the start of the next panel.

The processes for decision-making and notification of decisions made are effective.

### **Fitness to provide or manage an adoption agency (Standards 14,15)**

#### **The 2 standards assessed were met**

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

### **Provision and management of the adoption agency (Standards 16-18)**

#### **The 3 standards assessed were met**

The adoption service was assessed as operating in line with the statement of purpose.

The inspectors concluded that despite adoption social workers being under considerable pressure the team was staffed by workers committed to providing a good quality service. This view was reflected in the comments made by some adopters about their social worker and the service they had received.

An annual business plan is produced and reviewed and the inspectors heard about the broad range of monitoring systems in place which included reports to the elected members.

The service has access to a range of specialist advisors and services.

### **Employment and management of staff (Standards 19-23)**

#### **1 standard assessed was met, 3 standards had minor shortfalls, 1 standard had major shortfalls.**

It is the opinion of the inspectors that the adoption social workers employed within the adoption team were suitably qualified and the majority were experienced in childcare as well as adoption. These social workers reported that they received regular, planned supervision and were clear about the roles, responsibility and accountability of those employed by the service. Less experienced members of staff received a higher frequency of supervision and

reported that they were well supported by the team members.

The adoption social workers reported an increase in caseload which was due to a number of reasons fully discussed in the main body of the report. The workers informed the inspectors of their concern that this increase should not adversely impact on their ability to carry out their role effectively and to attend relevant training and other such sessions. At the time of the inspection senior managers had recognised some of the difficulties being experienced by the social workers and had begun to introduce measures to address this. The inspectors have recommended that the planned introduction of a caseload weighting system be introduced as soon as is possible and that there is time allocated to allow social workers to attend training.

In respect of the area teams the inspectors noted that the situation had been less stable and that across the area teams the level to which the team members felt supported by management varied. The inspectors were concerned to hear from some of the area team social workers that they felt unsupported and unprepared for their role in adoption work. The inspectors have made a requirement that this situation be addressed.

### **Records (Standards 25-28)**

#### **2 standards assessed were met, 2 standards had minor shortfalls**

There were clear systems for recording, confidentiality and safe storage of case files. Some attention is needed in terms of keeping records up to date and ensuring there are regular file audits.

Due to a misunderstanding during the planning stages of the inspection full staff personnel files were not available for the inspectors to view. The manager subsequently checked a sample of staff files chosen by the inspectors and confirmed that all the required information was held within these files.

### **Fitness of Premises (Standard 29)**

#### **This standard was met**

The premises were seen as adequate for their purpose, however with new personnel due to commence work this situation will need to be kept under review.

### **Questionnaires**

Comments from the questionnaires have been incorporated into the report within the appropriate sections of the main body of the report

The inspectors received the following questionnaires.

#### **Adopters and Prospective Adopters**

returned 8 Note not all adopters answered all questions.

#### **Birth Families**

returned 2 Note not all questions were answered.

#### **Placing Social Workers**

returned 8

#### **Specialist Advisors**

returned 2

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## 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:**

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

NA
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**If No please list below**

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

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

## STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

Action Plan: The appropriate officer of the Local Authority is requested to provide the Commission with an action plan, which indicates how requirements are to be addressed. This action plan is shown in Part D of this report.

### STATUTORY REQUIREMENTS

Identified below are areas addressed in the main body of the report which indicate non-compliance with the Care Standards Act 2000, the Adoption Act 1976, the Adoption Agencies Regulations 1983, the Local Authority Adoption Service (England) Regulations 2003 or the National Minimum Standards for Local Authority Adoption Services. The Authority is required to comply within the given time scales in order to comply with the Regulatory Requirements for adoption services.

No.	Regulation	Standard *	Requirement	
1	LAAS Regs 2003 Regulation 2. (1)	LA1	The manager must ensure that the statement of purpose is amended to include all matters listed in Schedule 1 of the 2003 regulations and when amended provide a copy to the commission.	By 28/02/04
2	LAAS Regs 2003 Regulation 3. (1)	LA1	The manager must ensure that the children's guide contains all matters listed in Schedule 2 of the 2003 regulations.	By 28/02/04
3	LAAS Regs2003 Regulation 11	LA19	The manager must ensure that all members of staff undertaking birth records counselling have received appropriate training in this area.	Immediate
4	LAAS Regs2003 Regulation 12	LA21	The managers of the adoption and area teams must ensure that a system is developed to ensure that all staff employed to undertake adoption work are appropriately supported and trained in adoption issues.	By 28/02/04
5	LAAS Regs 2003 Regualtion 11 and 15	LA28	The manager must ensure that all information required by regulation in respect of panel members are obtained and placed on their respective files.	By 28/02/04

### GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

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

No.	Refer to Standard *	Recommendation Action
1	LA2	The manager should ensure that there is a formal written plan developed in respect of the implementation and evaluation of effective strategies to recruit sufficient adopters to meet the needs of the range of children waiting for locally.
2	LA3	The information in respect to the age criteria should be consistent.
3	LA5	The manager should ensure that written procedures are developed in respect of the use of the adoption register.
4	LA5	The manager should ensure that in every case adoption social workers obtain full information in respect to any child being considered as a potential match for a Hillingdon adopter.
5	LA6	The written information in respect of the out of hours service should be amended to include adopters.
6	LA6	The manager should ensure that the newly appointed adoption support worker is well supported and enabled to develop her knowledge of adoption issues.
7	LA7	The manager should ensure that the system for offering birth families independent support is established as a matter of urgency.
8	LA6	The manager should ensure that the planned development for the service to inter-country adopters is actioned.
9	LA9	The manager should ensure that birth parents are provided with leaflets produced by the organisations which offer services to birth parents and birth family members.
10	LA10	The manager should ensure that the arrangements for calling an emergency panel are included in the panel procedures.
11	LA11	The manager should ensure that training in Inter-country adoption is provided to panel members as soon as is possible.
12	LA11	The appointment of an independent panel chair should be made as soon as is practicable and consideration should be given to promoting a more balanced membership in terms of gender and independence issues.
13	LA12	The panel minutes should record clearly who is presenting each case.



14	LA13	The decision maker should consider personally signing the letters which are sent out following decision making.
15	LA20	Consideration should be given to revising the job descriptions of all working for the purpose of the adoption service to include specific reference to the adoption roles and responsibilities.
16	LA20	The manager should closely monitor the situation in respect of equipment available to staff and should it be assessed that a lack of equipment impacts on the ability of staff to carry out the work of the adoption service effectively this should be immediately addressed.
17	LA20	The manager should ensure that the caseload weighting system is introduced as soon as possible and that within this system time is allocated for training.
18	LA23	The manager should consider allowing more time during team meetings to discuss practice issues.
19	LA23	The managers from the area teams should ensure that the social workers working on those teams are enabled to attend all training relevant to adoption issues.
20	LA25	All recording should be signed (full signature) by the member of staff making the recording and the manager should establish an effective system to ensure that files are audited on a frequent basis.
21	LA27	The manager should keep a dedicated record of any allegations.
22	LA29	The manager should ensure that the disaster recovery plan is documented.

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

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

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

Placing authority survey	YES
Placing social worker survey	YES
Prospective adopter survey	YES
Approved adopter survey	YES
Birth parent / birth family member survey	YES
Checks with other organisations and Individuals	
• Directors of Social services	NO
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	YES
• Interview with children	NO
• Interview with adopters and prospective adopters	YES
• Interview with birth parents	NO
• Interview with birth family members	YES
• 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	30/11/04
Time of Inspection	09.00
Duration Of Inspection (hrs)	62
Number of Inspector days	8.5
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) 6.3 FTE	8

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

There was a clear Statement of Purpose, which identifies the aims and objectives of the Adoption Service. The statement requires the addition of the details of the CSCI and the address and experience of the manager of the service.

Staff were aware of the Statement of Purpose and informed the inspectors that they had input into its development.

The London Borough of Hillingdon's Cabinet approved the Statement of Purpose in January 2004 and a system for regular review is in place.

At the time of the inspection there were two Children's Guides in use. One was the BAAF Children's Guide to Adoption, this needs to have information added about the local arrangements and contacts for adoption and the inspectors were informed that this had been recognised and work was in progress in addressing this. The service also has produced a guide for children of a younger age range; this needs amendment to include the details of the CSCI as well as the Children's Rights Director.

The inspectors were informed that different forms of communication were available for the Guide and Statement on a needs basis.

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

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

YES

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

YES

**Is there a children's guide to adoption?**

YES

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

NO

## Securing and promoting children's welfare

The intended outcome for the following set of standards is:

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

### Standard 2 (2.1 - 2.3)

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

Key Findings and Evidence	Standard met?	2
<p>The Hillingdon Adoption Service does not have clear written plans in place in respect of the implementation and evaluation of strategies to recruit sufficient adopters to meet the needs of Hillingdon children waiting for adoption. It was clear that there had been a significant increase in sibling groups and children over the age of 8 who were requiring an adoptive placement and while there had been some targeted advertising in respect of this there needs to be a more formalised planning system established to ensure recruitment is targeted towards the needs of local children. Bearing in mind that Hillingdon is a member of the Westminster and West London Consortium for adoption it may be decided that the plans be developed in association with the consortia and could cover the needs of all children from the member agencies.</p> <p>There had been some targeted recruitment in respect of a child with a specific medical condition.</p> <p>There were some good examples of work noted in respect of the matching processes and matching reports viewed by the inspectors were well thought out and written.</p> <p>The inspectors noted that while care is taken to find a match in respect of a child's origins, cultural background, religion, language and where appropriate placement with siblings there are realistic timescales in place which ensure that children are not left waiting indefinitely in the care system.</p> <p>In matching children with adopters the inspectors were informed by the manager that care is taken to ensure as far as is possible the wishes and feelings of the child are taken into account in an age appropriate way. The service is developing a child-focussed letter for later life to explain the outcome of the family finding. This will be in addition to the later life letter that the child's Social Worker writes.</p> <p>As stated in the summary there was one case sampled for which it was apparent to the inspectors that some issues required further follow up. This follow up is being carried out as this report is being written and therefore the scoring on this occasion relates to the parts of the standard which have been fully assessed.</p> <p>The figure in the box How many children were identified as needing adoptive families relate to 20 children for whom adoption was the plan and 12 children for whom the plan was adoption or long-term fostering.</p>		

**In the last 12 months:****How many children were identified as needing adoptive families?**

32

**How many children were matched with adopters?**

10

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

12

**How many children were placed with other services' adopters?**

2

**How many children were referred to the Adoption Register?**

8

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

17

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

89.5

%

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

1

**How many allegations of abuse or neglect were made about adopters approved by this adoption service?**

1

**On the date this form was completed, how many children were waiting for a match to be identified?**

14

## Prospective and approved adopters

The intended outcome for the following set of standards is:

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

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

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

Key Findings and Evidence	Standard met?	3
<p>Hillingdon Borough Council has an Equal Opportunities Policy which the adoption service abides by.</p> <p>Following the initial enquiry from prospective adopters a range of information is sent out detailing the eligibility criteria, information on becoming an adoptive parent and what is expected from adopters. At the time of this inspection there was some conflicting information being provided to enquirers in respect of the age criteria, this needs addressing so as enquirers are clear from the start if there are any age restrictions and if there are the details of these. The majority of adopters (6) who returned their questionnaires were satisfied with the written information provided, however 2 did not feel that the information sent to them explained the process of becoming an adopter, one of these 2 stated that there had been no written information made available to them and that they were very unclear about the process and timescales.</p> <p>The adoption team meeting is the forum where adopters' initial information forms are considered and prioritised in respect of the likelihood of them proving a suitable match for children for whom the family finding process has begun.</p> <p>Prospective adopters are given a copy of the BAAF workbook at the start of the preparation training; details of the adoption panel process are given to prospective adopters prior to their attendance at panel.</p> <p>Adopters with children are invited to speak at the preparation groups and the service runs 'family fun days' and seminars to which adopters at all stages of the adoption process are invited to.</p> <p>The inspectors were informed by the manager that consideration is being given to including all the information available on the service's website.</p>		

In respect of people enquiring about adopting a child from another country they are provided with the details of organisations to contact for help and advice in such matters, including the Department of Health. Interested parties are expected to research the issues pertaining to the specific county they wish to adopt a child from and then make contact with the service or any other specialist agency if they wish to proceed. An initial appointment will be carried out in order to assess if they are ready to proceed to the stages of preparation and home study. In practice Hillingdon subscribe to the Westminster and West London Consortium and refer prospective adopters wishing to adopt a child from over seas to the inter-country group set up by the member authorities. There are sessional workers employed by the consortia run the preparation groups and they carry out the home studies for inter-country adopters.

Prospective adopters are informed in general terms about Hillingdon children needing adoptive placements at the initial assessment visit. Prospective adopters are invited to attend exchange meetings during which they are able to express an interest in any child featured at the meeting. Some adopters with whom the inspectors met confirmed that they receive the Be My Parent publication.



**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 was a structured programme of preparation, assessment and approval. The processes fit within a framework of equal opportunities and anti-discriminatory practice.

The preparation training was based on the BAAF training manual and was planned and led by the adoption social workers. Applicants were provided with a copy of the manual.

The training is run over 8 sessions, 6 half days and 2 evenings. Responses from the 8 adopters' questionnaires were overall positive about the timing and venue for the sessions, with only 1 of the 8 not finding the venue and timing convenient.

The adopters are asked to complete an evaluation form detailing their view about the effectiveness of the preparation groups. The inspectors noted that this information had been used to make some changes to the sessions.

6 adopters who completed the questionnaire felt satisfied with the preparation process, 1 was not satisfied.

In the event of applicants being unable to attend Hillingdon preparation groups it can be arranged for them to attend an alternative group run by one of the consortium members.

The inspectors were informed that Foster Carers who are proposing to adopt are offered the preparation training and advised of the differences between fostering and adoption.

As stated in standard 3 inter-country adopters attend the consortia preparation sessions, on this occasion the inspectors did not have an opportunity to evaluate these sessions.

A system was in place for seeking references and Criminal Records Bureau (CRB) checks.

Adopters' strengths and areas for development are identified during the training and this provides the social worker with an informed view about which areas require further work. Appropriate additional training in specific areas can be offered.

The home study/ assessment is carried out by the allocated worker and follows the BAAF form F assessment. There was evidence noted of some sound assessment work undertaken by the Adoption workers. The use of competency-based assessments has led to a consistent approach, which was commended by some of the placing social workers. The assessment work includes a Safety Questionnaire and a Pet Assessment.

Of the 8 Adopters who returned their questionnaires the following responses were given in respect of how well they felt they had been kept informed and if their views had been sought about the service provided:

- 4 were "always well informed", 2 were "sometimes" and 2 were "usually"
- 2 were "always asked" 1 was "usually asked" 2 were "sometimes asked" and 3 were "never asked"

While the sample is small the responses indicates there may be a need for a more systematic approach to be developed in establishing the views of adopters at various stages

in the process and providing feedback to them.

**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 matching process is explained and reinforced as part of the preparation training. The adoption social workers support adopters through the matching and placement of children. Adopters spoken to by the inspectors were clear about the arrangements for the Adoption Register. It is the responsibility of each social worker to ensure that their adopters/child's name is entered onto the register; there are no written procedures in place in respect of this and a recommendation has been made that procedures be developed.

Two sources expressed frustration about what was described by them as delay being caused by the practice of initially only looking internally and within the consortium for a match.

Adopters reflected mixed views about their experience from approval to a child being identified with the majority being overall satisfied but comments such as "the time taken was too long" and "inadequacies in other Local Authorities caused delay and distress" 1 adopter stated, "social workers focus is on getting people through the home study and approval processes and have less time to focus on matches once people are approved."

When a potential match has been identified prospective adopters are provided with a copy of the child's Form E and meetings with the medical advisor and child's foster carer are arranged. The inspectors formed the view from discussions with prospective adopters and responses from questionnaires that overall the service works hard to ensure that full and adequate information is provided to adopters and understood by them but that there are occasions, especially when the child is being placed by another local authority, that information has been incomplete or incorrect. While the inspectors acknowledge that such situations are beyond Hillingdon control they are of the view that it is essential that Hillingdon workers are proactive in obtaining additional information where it seems there is a shortfall.

The contact agreements signed by adopters contain a statement that adopters sign to agree that in the event of the child's death they agree for the birth family to be notified.

Prospective adopters are expected to put together a book or video together about them and their home for the child to view. One of the responses from a questionnaire completed by a placing social worker commended the information which had been provided to the child she was placing.

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

NO

**Standard 6 (6.1 – 6.7)**

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

**Key findings and evidence****Standard met?****2**

It is the allocated social workers responsibility to support the adopters through the matching and placement processes. All approved adopters are invited to the adoption support family days and seminars. There is an out of hours service run by the permanency team which is in addition to the emergency duty team. Details of this system are provided to adopters with placements; the inspectors noted that the information refers to foster carers and should be amended to include prospective adopters.

The responses on the questionnaires completed by adopters and placing social workers were in the main complimentary about the support provided by the individual adoption workers, comments such as “service from Hillingdon good via our social worker” and “Although it has been a long process and we are still waiting, we remain positive as we have an excellent social worker” (adopters comments) Placing social workers comments about the adoption staff included “The link worker is very supportive and knowledgeable “ and “A very good worker – well prepared and supported adopter, excellent form F. Where there was some dissatisfaction expressed the inspectors noted that this tended to be around information about a specific child where there were cross county placements and a recommendation has been made in respect of this under standard 5.

The arrangements for support to adopters at the time of the inspection were that the allocated workers liaise, support and assist adopters through the introduction process. The inspectors were informed that an additional worker had been appointed and that one of her roles will be to co-ordinate the preparation of adopters for a placement and the post placement support. This worker was due to take up the post in early 2005. The inspectors were made aware that the worker appointed was not experienced specifically in adoption matters and the inspectors have recommended that the manager ensure that she receives the support and training required to carry out this demanding role.

In respect to support to inter-country adopters the manager acknowledged that the services to such adopters are in their infancy and as such work is required to develop practice and procedures in this area

During the preparation and home study processes adopters are informed about the importance of keeping information about families’ safe and sharing information with the child here appropriate. These processes also inform the adopters of the importance of helping the child develop and maintain a positive sense of self-identity.

In respect of difficulties in placements most adopters were satisfied with the support they received from the adoption social workers but a number of adopters cited a lack of support from placing social workers.

In the event of a disruption of an adoptive placement there is a policy and procedure in place.

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

**14**

<b>Number of adopters approved in the last 12 months</b>	14
<b>Number of children matched with the local authority's adopters in the last 12 months</b>	12
<b>Number of adopters approved but not matched</b>	9
<b>Number of adopters referred to the Adoption Register</b>	7
<b>How many placements disrupted, between placement and adoption, in the last 12 months?</b>	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

The service provided to birth parents was being developed at the time of the inspection. In general the children's social workers had the most involvement with birth families in cases where there are care proceedings in progress.

In respect of parents relinquishing their child for adoption the inspectors noted that an adoption social worker is allocated and parents are encouraged to be as fully involved as possible in the planning for the child.

The inspectors were informed that birth parents are encouraged to read and sign the Form E for their child before it is passed to the adoption panel.

Birth parents views in respect of contact are generally considered as part of the legal process and then further discussed as part of the needs and matching processes.

Letterbox contact is arranged by the service and this enables parents and children to maintain a link with each other.

While there is a budget available to provide independent support for birth parents at the time of the inspection the options for how this will be developed were being considered. The inspectors are of the view that this needs to be progressed as a matter of urgency.

**Standard 8 (8.1 – 8.2)**

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

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

The inspectors were satisfied that birth families are encouraged to contribute to the maintenance of their child's heritage in the following ways:

- By providing information about the child's and family history
- By providing their views about adoption
- By providing up to date information about themselves and their situation

The inspectors are aware that it can be difficult in the cases whereby the child is subject to care proceedings to develop a working relationship with some parents and the inspectors are of the view that the plans for an independent support source for parents could significantly benefit this area of work.

**Standard 9 (9.1)**

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

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

At the time of the inspection parents were being provided with the contact details for national support groups at the point of the matching stage. The inspectors were of the view that the service could be more pro-active in this respect by obtaining a supply of the leaflets produced by these organisations and sending these directly to parents.

The inspectors received 2 completed questionnaires from birth family members the identity and circumstances of their involvement with the adoption agency is not known by the inspectors, one had responded that they were told about national support groups the other response was that they had not been told about such groups.

The service subscribes to the Post Adoption Centre and the manager informed the inspectors that a referral could be made to the centre on behalf of birth parents.

The adoption service manages the letterbox contact arrangements and the co-ordinators made themselves available to birth family members in writing their letter correspondence where required.

As stated an independent support work system for parents was being considered. The inspectors are of the view that with this in place a clear strategy for working with birth parents will be able to be developed.

## Adoption Panels and Agency decisions

The intended outcomes for the following set of standards are:

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

### Standard 10 (10.1 – 10.3)

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

#### Key Findings and Evidence

#### Standard met?

3

There are clear written policies and procedures in place in respect of the adoption panel. These require the addition of the details of the arrangements for emergency panels. The inspectors did however note that in practice the systems for extra panels are effective and that there have been extra panel dates scheduled for next year in order that there is no delay to children.

Prospective adopters are routinely invited to attend panel and the inspector who observed the panel noted that this was well managed by the panel chair.



**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

At the time of the inspection the panel chair was not independent in that she was employed by Hillingdon Borough Council as a service manager for one of the Boroughs Children's Team. This had been recognised and recruitment was underway for an independent chair.

The inspectors are of the view that consideration should be given to the achieving a more even balance in panel membership in terms of:

- The gender mix, there was only one male panel member.
- The 'independence' of two of the independent members. The inspectors were of the view that their independence could be compromised due to them both being employed by Hillingdon in children's services.

New panel members are provided with the opportunity to observe at least one panel prior to becoming a voting member.

The inspectors were shown the training attended by panel members during the 12 months preceding the inspection. The inspectors were also shown the draft training plan for panel members for 2005; this included joint training with social work staff. The training plans were noted as being in line with the standards and it was further noted that discussion topics are added to each panel agenda.

On the managers self-assessment document the manager stated that there was a shortfall in training for panel members in Inter-country adoption. The manager confirmed during the inspection that such training is being planned.

**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**

The panel observed was chaired effectively.

There are sufficient panel meetings. These are set in advance to ensure that delay to adopters or children is not an issue.

Panel Papers are provided to panel members in advance of the meeting, the inspectors interviewed the panel administrator and formed the view that she is a dedicated individual who carries out her role in an effective way; the panel chair was also very complimentary of the efficiency of the administrator.

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

Panel minutes include details of the panel discussion, recommendations made and reasons for conclusions having been reached. The inspectors recommend that the panel minutes also record clearly who is presenting each case.

**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**

The inspectors were satisfied that the decision maker takes into account all the information surrounding the case and the panel's recommendation before making a considered and professional decision. The adoption advisor meets with the decision maker following each panel to assist and advise where required.

Decisions were being made in a timely way and the relevant people notified in writing. The inspectors suggest that as a good practice issue that the decision maker consider personally signing the letters which are sent out.

## Fitness to provide or manage an adoption agency

The intended outcomes for the following set of standards are:

- The adoption agency is provided and managed by those with the appropriate skills and experience to do so efficiently and effectively and by those who are suitable to work with children.

**Standard 14 (14.1 – 14.3 and 14.5 – 14.6)**

The people involved in carrying on and managing the adoption agency:

- possess the necessary knowledge and experience of child care and adoption law and practice and
- have management skills and financial expertise to manage the work efficiently and effectively and
- ensure that it is run on a sound financial basis and in a professional manner.

### Key Findings and Evidence

### Standard met?

3

The adoption manager has a CQSW and 7 years experience in managing a Children and Families Team. She is in the process of completing the NVQ level 5 management programme and at the time of the inspection had completed 50% of the assessment modules.

The inspectors concluded that the manager exercises effective leadership of the staff and operation of the service and that with the recent appointment of an experienced worker to the vacant post of assistant team manager the service would be further developed.

The inspectors were provided with copies of the job description for the manager and assistant manager. These job descriptions would benefit from revision to include specific reference to adoption work. A recommendation has been made in respect of job descriptions under standard 20.

**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?****3**

As stated in standard 14 the manager has the appropriate experience and qualifications to manage the adoption service.

The manager has a satisfactory enhanced disclosure from the CRB.

There is a system in place to ensure that CRB checks are renewed on a three yearly basis.

## 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**

From the evidence seen during the inspection the inspectors concluded that the adoption service operates in accordance with its statement of purpose.

There are clear arrangements in place for deputising for the manager in her absence, which are known by all staff.

Managers and staff were aware of their responsibility to declare any conflicts of interest.

The inspectors were satisfied by the evidence seen during the inspection that social workers had a good level of respect for differences in terms of race, culture religion, sexuality, gender and disability and dealt with such issues in a sensitive way. However in respect of one case tracked the inspectors noted that there were indications that it would have been of benefit for the white worker to have accessed some specialist advice about the culture of the adopter being assessed.

The service has not developed written procedures in place covering the arrangements for the use of the Adoption Register for England. A recommendation has been made in respect of this under standard 5.

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

2

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

0

**Standard 17 (17.1 – 17.3)**

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

**Key Findings and Evidence****Standard met?****3**

A Business plan is produced for each financial year and this is subject to periodical review. The plan viewed by the inspectors reflected the statement of purpose in terms of the aims and objectives. The manager informed the inspectors that the Quality Standards team collate the final draft of the plan along with the other children's team's plans.

Performance Indicator data is regularly collated by the Quality Performance Manager and this manager reports to the Director on a regular basis. The Director has regular meetings with the Chief Executive and the Councillor with portfolio for Social Services.

The manager presents the annual panel report to the service managers

Interagency agreements are used and inter-country adopters are provided with details of the charges made by the adoption service although the inspectors were informed in the case of one inter-country adopter there had been some confusion about charges made by the service.

**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?****3**

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

The adoption service is a member of BAAF and PAC and staff can use these for consultation and training.

For inter-country adoptions specialist advice is available through the workers employed by the consortia.

There are written protocols in place in respect of the medical and legal advisers and with mental health and education professionals who are also available for consultation.

## 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
<p>The inspectors had hoped to sample the personnel files for some of the adoption team members. Due to a misunderstanding at the planning stage of the inspection it was not possible to assess if all the required information was in place as the full personnel records were not kept in the building in which the inspectors were based. The inspectors wrote to the manager requiring her to view the files identified and inform the inspectors of any shortfalls. The manager subsequently confirmed, in writing, that all information was on the personnel files held by human resources and stated that she was going to ensure that the files held in the adoption offices were updated.</p> <p>While the inspectors are disappointed that inspection of these files could not take place on this occasion a sample of social workers files will be sampled in the course of the next fostering inspection carried out by the area CSCI team.</p> <p>There are clear written recruitment and selection procedures for appointing staff which follow good practice in safeguarding children. Personnel responsible for the recruitment and selection of staff receive training in these processes.</p> <p>The procedures confirm that it is a requirement that interviews are carried out and references are taken up and are subject to verification by telephone enquiries. Prior to employment commencing all staff must have had a satisfactory disclosure from the CRB.</p> <p>There is a system in place to ensure that CRB's are updated on a 3 yearly basis.</p> <p>30% of the social workers employed within the adoption team have obtained a Post Qualifying award. The majority of these social workers are senior practitioners with a wealth of experience. The less experienced workers are supported through regular supervision and by the more experienced members of the team.</p> <p>The vacancy for a post adoption social worker has meant that this work had fallen to the team. The inspectors became aware during the inspection that social workers who were not trained in birth records counselling had been carrying out this work. The inspectors have required that manager must ensure that any member of staff who carries out birth records counselling has received appropriate training in this field.</p> <p>As stated in standard 7 a service for birth parents is being considered.</p> <p>For further discussion in respect of the situation at the time of the inspection in respect to the</p>		

area team social workers see standard 21.

The scoring of this standard on this occasion relates to the parts of the standard which the inspectors were able to fully assess. The practice in terms of recruitment was not fully assessed on this occasion for the reasons stated above.

**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**

There is a clear management structure and clear lines of responsibility.

The adoption team manager informed the inspectors that she has an overview of the workload for each team member; there was not a formal workload management system in place at the time of the inspection although the inspectors were informed that discussions are taking place in respect of introducing a caseload weighting system. A recommendation has been made that this is introduced as soon as is possible and that the system includes sufficient time for social workers to attend training sessions.

Assessments and approvals are monitored through the supervision and panel processes.

The adoption workers confirmed that they receive regular supervision, notes are taken of the meeting and both the supervisor and supervisee sign the notes.

There is an annual appraisal system in place which covers professional development issues.

The manager informed the inspectors that there had been a turnover of administrative staff; at the time of the inspection the inspectors met with the admin team and it seemed that the situation was more stable. The admin workers reported that the equipment provided to them in carrying out their role was adequate.

The social workers reported having their own desks but having to share computers which in the workers and inspectors view is less than ideal. The inspectors discussed this with the manager and it seems that there are difficulties in introducing additional equipment due to the potential for overloading of the current server. The inspectors understand that there are laptops for the workers to use and that at some point in the future there are plans to move the adoption team to other premises. Issues such as the infrastructure of any new premises will need careful consideration before any move is agreed. In the meantime the inspectors have recommended that the managers monitor the situation closely to ensure that the lack of equipment does not adversely impact of the ability of the social workers to carry out their roles effectively.

There is a duty in system in place and this was the point of call for all enquiries. The duty system is manned by both fostering and adoption workers. All referrals requiring a response are passed to the admin team and information is sent out within 48 hours.

The team have access to a range of specialist advisers as discussed earlier in this report.

Social workers are provided with a contract of employment, a job description and conditions of service. The inspectors have made a recommendation that the job descriptions for the members of the adoption team are revised to be adoption specific.

The social workers employed on the adoption team at the time of the inspection were in the process of registering with the social care register.

Social workers were aware of the statement of purpose and had input in the development and revision of the statement. All other documents such as the equal opportunities policy and the grievance procedures are available on the intranet.



**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?****1**

The inspectors met with some workers from the area teams (children's social workers) and had a separate meeting with the adoption social workers. From discussions with these two groups and information provided by the adoption manager the inspectors became aware that there had been a high turn over of staff on some of the area teams and that following a recent recruitment drive a number of newly qualified and overseas staff had been appointed to these teams.

This situation was acknowledged by managers as not having been ideal and senior managers had recognised the need to provide a high level of support to these workers through an enhanced induction, a high level of supervision and training targeted in the areas these staff most need to develop. From the discussions the inspectors had with the area team staff it was clear that the support described above had not been received by all of the workers. The inspectors have made a requirement that all social workers on areas teams who are carrying out adoption work are well supported and trained in adoption issues

The adoption team social workers were clearly extremely busy in terms of cases worked; PQ and other training and an increase in kinship care assessments. Some improvements were being made:

- The vacant assistant team managers post had been filled
- A marketing officer had been appointed
- A post adoption support worker had been appointed and was due to start work in early 2005
- It is planned that an additional member of staff will be appointed to support the letterbox system.

However at the time of the inspection one appointment had been very recent and the other two appointments had not occurred it was difficult to assess any positive effects these would have on the team.

Due to the above issues it was difficult to fully assess if there was an adequate number of staff working in the adoption team and senior managers will need to monitor the situation very carefully.

There are recruitment and retention schemes in place, flexible working is in place for those staff who want this. The inspectors were informed by the workers that while this is welcomed it is difficult to manage due to the workload.

The number of social work staff in the box below relates to the FTE as some member of staff are part time.

**Total number of social work staff of the adoption service**

6.5

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

0

<b>Number of social work posts vacant In the adoption service.</b>	0
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<b>Standard 22 (22.1 and 22.3)</b> <b>The adoption agency is a fair and competent employer, with sound employment practices and good support for its staff.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	3
<p>In general the staff felt that Hillingdon Borough Council was a fair and competent employer and senior managers seemed to be aware of the difficulties staff were experiencing and had begun to address some of the difficulties.</p> <p>There is a clear whistle blowing policy in place which encourages staff to raise any issues of concern without fear of intimidation. Staff reported they were aware of the policy.</p>		

<b>Standard 23 (23.1 – 23.6)</b> <b>There is a good quality training programme to enhance individual skills and to keep staff up-to-date with professional and legal developments.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	2
<p>There is a centralised, rolling training programme and there is access to more specialised training from outside organisations. However some social workers from both the adoption and area teams reported that external training requests are not always granted and that it is not always possible to attend internal training due to caseloads. As stated in standard 20 a workload management system is to be introduced for the adoption team workers and careful consideration will need to be made to including sufficient time out for training.</p> <p>The inspectors were informed by the area social workers that the adoption team members had provided some training for them and that this had been very useful, especially for the workers from overseas.</p> <p>There is an induction programme in place; for overseas and newly qualified workers there is an enhanced programme recently introduced.</p> <p>There is an annual appraisal system in place and each plan developed is subject to a review.</p> <p>Over the past year there had been training on the Adoption and Children Act, Adoption Support Regulations and contact issues in permanent placements, attachment difficulties and the effects of trauma on children.</p> <p>Staff confirmed that there are weekly team meetings held but that they would like more time during these meetings to discuss practice issues. There has been a recommendation made in respect of this issue.</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

There is a clear file structure which includes guidance for each section. Some attention is required to ensuring that recording is kept up to date and that all recording has a full signature of the person recording it. The inspectors noted little evidence of files having been audited; the manager had identified that this was a system which required some attention.

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

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

From the files sampled the inspectors noted that all statutory checks were on file and the manager informed the inspector that the administration staff operate the systems for requesting, filing and updating all checks.

The inspectors noted from the files sampled that decisions made by supervisors are on file.

### Standard 26 (26.1 – 26.2)

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

#### Key Findings and Evidence

#### Standard met?

3

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

There is a clear access to records policy and procedure; this is available to all staff on the intranet.

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

Separate records are kept for staff employed including agency staff and in respect of complaints and compliments; there also needs to be a record kept of any allegations.

As discussed in standard 25 an effective system for case audit needs to be established. The quality of panel papers, including the Form F's are monitored by the panel.

Confidential records are securely stored.

It is hoped that a new computer system will allow for all case records to be stored on electronically.

There is a system in place for dealing with and keeping records of complaints.

**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**

As discussed in standard 19 The inspectors were unable to fully assess the contents of social workers personnel files but the manager confirmed that all the files sampled met regulation and standard.

The inspectors viewed a sample of the information available in respect of panel members. The information available did not fully meet the regulations and standards. The two files sampled had evidence of a satisfactory CRB disclosure and a signed confidentiality agreement. Both panel members had been appointed prior to the Adoption Regulations 2003 coming into force. While it is not expected that references be taken up retrospectively in such cases information such as evidence of qualifications should be gained and placed on file.

The scoring of this standard on this occasion relates to the parts of the standard which the inspectors were able to assess. The practice in terms of recruitment was not fully assessed on this occasion for the reason stated above.

## 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
<p>There are identifiable office premises to which all staff and others with a legitimate interest have access during normal office hours. There is wheelchair access to the building.</p> <p>At the time of the inspection the premises were adequate in terms of accommodation for the numbers of staff employed. However the inspectors have recommended that this will need to be kept under close review as the available space was limited and new personnel were about to commence work.</p> <p>There are adequate administrative systems in place, including secure retention of records, measures for safeguarding IT systems and an appropriate security system.</p> <p>There was not a written disaster recovery plan specific to the adoption service, however the office manager was aware of the arrangements to continue the work of the service in an emergency situation and these need to be put in writing.</p>		

**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 30<sup>th</sup> November and 1<sup>st</sup>, 2<sup>nd</sup> December 2004 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary

NO

Comments were received from the provider

YES

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

NO

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

NO

**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 23<sup>rd</sup> February 2005, which indicates how statutory requirements and recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.**

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

Action plan was required

YES

Action plan was received at the point of publication

YES

Action plan covers all the statutory requirements in a timely fashion

YES

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

NO

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 Ann Holmes, Team Manager of London Borough of Hillingdon 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.

## Commission for Social Care Inspection

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