



Champions for
Social Care
Improvement

inspection report

Local Authority Adoption Services

Staffordshire County Council Adoption Service

St Chad`s Place

Stafford

ST16 2LR

19,24,25,26 November 2003

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

Staffordshire County Council Adoption Service

Headquarters Address

St Chad`s Place, Stafford, ST16 2LR

Adoption Service Manager

Marian Richards

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01785 223121

Address

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Certificate number of this adoption service

Date of last inspection

N/A

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

N/A

Date of Inspection Visit		19th November 2003	ID Code
Time of Inspection Visit		9:30 am	
Name of Inspector	1	Vivien Slyfield	075999
Name of Inspector	2	Lynn Smith	
Name of Inspector	3		
Name of Inspector	4		
Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the NCSC. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
Name of Specialist (e.g. Interpreter/Signer) (if applicable)		Rehana from Staffordshire's Racial Equality Council.	
Name of Establishment Representative at the time of inspection		Marian Richards	

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INTRODUCTION TO REPORT AND INSPECTION

Local authority adoption services are subject to inspection by NCSC, 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 NCSC in respect of Staffordshire 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 NCSC 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.

Staffordshire Social Services Department provides an adoption service as part of its service for children and families in the county. The direct provision of the adoption service is undertaken by different teams. The initial referral, preparation training and ongoing fostering and adoption training is done by the team based at Madford House in Stafford. The Madford team manage a family placement page on Staffordshire SSD's web site and organise a recruitment bus promoting family placement work across the county.

There are two geographical teams based at Lichfield for the south of the county and Uttoxeter for the north. They are responsible for the assessment and individual support of adoptive parents/families before and after placement. This includes presentation of reports to adoption panel and to the courts. Some members of the teams provide Section 51 counselling for adopted adults. Independent counselling for birth relatives where adoption is the plan is also offered by the team. The teams undertake placement finding for children in need of adoptive placements and one team member is responsible for the organisation of the adoption Post Box.

Managers and assistant managers of the Lichfield and Uttoxeter teams chair permanency planning meetings, matching meetings, Life Appreciation Days and any adoption disruption meetings needed.

The Adoption Options Team is based in Burton on Trent. The aim of this team is to find families for children who have traditionally been hard to place. They have a particular remit to recruit from black, Asian and community groups. The team have built links with the Asian community locally.

Two further teams have been piloted in response to the introduction of the Adoption Standards 2003. These are Permanency Teams based at Lichfield and Uttoxeter, again for the south and north of the county. The aim of these teams is to support the area workers in adoption work, speeding up the process, enhancing twin tracking and the quality of the service provided.

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 came at a time when Staffordshire SSD had prepared for three inspections in three months, two for the NCSC and one for the SSI. Managers and staff remained committed, helpful and cooperative throughout the process, which is much to their credit. The Pre-Inspection Questionnaire and Manager's Self Assessment were both fully completed, giving an overview of the service and a view of how it was seen by the manager in relation to the National Minimum Standards. Plans were in place to develop adoption support and to move the service forward in providing safe, stable placements for children.

The following summarises the inspection findings in relation to the Standards.

Statement of Purpose

At the time of the inspection there was a draft Statement of Purpose in place but the Council had not formally approved it. It provided a clear statement of the aims and objects of the service and was felt by staff to be an accurate reflection of the service provided. It needs some adjustment in order to comply with Schedule 1. Work on the children's Guide also needs to be finalised and the service's policies and procedures need to be reviewed in line with the current Standards and Regulations.

Securing and Promoting Children's Welfare

Staffordshire places a high number of children seeking adoptive families. Matching is taken seriously, but there is a need to consider all the relevant information in linking children with adopters in order to minimise the number of disruptions.

The development of the Permanency Teams is focused on improving the support to birth families and in assisting in Life Appreciation Days and Life Story work, to support children in making sound and stable placements.

Prospective and Approved Adopters

A proactive approach has been established by the Adoption options Team in recruiting from black and Asian community groups. There is a comprehensive preparation and approval process. However, there is a need for the service to prevent delays and move prospective adopters as quickly as possible through the assessment process. Work is needed on assessments to ensure they are of a consistently high quality. It was positive to note the well established operation of Adoption Support Groups.

Birth Parents and Birth Families

The life long implications of adoption were recognised by the service. There is a need to strengthen the involvement of birth parents and families and to ensure the Post box communication works effectively. The development of the Permanency Teams is intended to address some of the work with children and birth families.

Adoption Panels and Agency Decisions

The adoption panel is properly constituted and members are clear about their roles. Prospective adopters have the opportunity to attend panel if they wish. Improvements are needed to reduce the number of items withdrawn and rescheduled for a later date. Notification of the decisions by the decision maker must be made without delay.

Fitness to Provide or Manage an Adoption Agency

The manager is experienced in working with children and families and in adoption work with appropriate qualifications. Leadership is exercised effectively.

Provision and Management of the Adoption Agency

There are elements of sound and effective management in place. Systems of planning and communication need to be strengthened to benefit fully from sound developments within the service. Similarly, better and more effective use should be made of monitoring systems, which exist.

Employment and Management of Staff

There is a clear recruitment and selection procedure in place, which has provided the service with qualified and experienced staff to undertake adoption work. There are regular team meetings and meetings across the teams of all those involved in adoption. Staff and managers demonstrated a strong commitment towards their work.

Records

There were separate records appropriately kept in relation to each child, prospective and approved adopters, complaints and allegations. There is need to ensure that all the relevant information is held on each child's file. The collation of data about complaints and allegations across the county needs to be improved. There is a need to strengthen the system for undertaking and recording the references and confidentiality agreements with panel members and staff, including outstanding issues in relation to some CRB checks.

Fitness of Premises

The adoption service premises are fit for its purpose. There is a need for files to be stored in lockable rooms as well as in locked cabinets. A Disaster Recovery Plan is in place for the service.

Questionnaires

Birth Families returned 4 questionnaires.

Placing Social Workers returned 4 questionnaires.

Adopters and Prospective Adopters returned 12 questionnaires.

Comments from the questionnaires have been incorporated in to the body of the report.

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:

NO

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:

YES

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:

NO

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:

NO

The grounds for the above Report or Notice are:

See main body of the report

**Implementation of Statutory Requirements from Last Inspection
(Not relevant at first NCSC 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 National Care Standards Commission 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 and recommendations 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	The Local Authority Adoption Service Regs 2003 Schedule 1	LA1	The adoption service must have a Statement of Purpose which complies with Schedule 1	30.4.04
2	The Local Authority Adoption Service Regs 2003 Reg 3 Schedule 2	LA1	The adoption agency must develop an appropriate Children's Guide.	30.4.04.
3	Adoption Agency Regs 1983 (8)(2)	LA4	The adoption service must provide full and accurate information in assessments.	28.5.04
4	Adoption Agency Regs 1983 (9) (1)	LA4	The adoption service must consider all the information available in matching children with adopters.	30.4.04

5	Adoption Agency Regs 1983 (9)(1)	LA26 LA5	The adoption service must provide full and accurate information to adopters prior to placement.	30.4.04
6	Adoption Agency Regs 1983 (9)(1)	LA6	The adoption service must ensure appropriate information, advice and support is offered to prospective inter-country adopters.	30.6.04
7	Adoption Agency Regs 1983 7 (1)	LA9 LA7	The adoption service must provide a consistent and appropriate service to birth parents and families.	30.4.04
8	Adoption Agency Regs 1983 5	LA10	The adoption service must review its policies and procedures in line with NMS 10(2)	30.7.04
9	Adoption Agency Regs 1983	LA12	The adoption service must organise panel meeting to ensure they are effective and avoid changes with short notice to the agenda.	30.4.04
10	Adoption Agency Regs 1983	LA13	The adoption service must ensure those involved in decisions relating to adoption are informed without delay.	30.4.04
11	The Local Authority Adoption Service Regs 2003 11(3)(d)	LA11 LA28 LA25 LA15	The adoption service must obtain full and satisfactory information on each member of staff and each panel member, as specified in Schedule 3.	30.4.04
12	The Local Authority Adoption Service Regs 2003 12	LA23	The adoption service must provide an appraisal system for its staff.	30.7.04.

13	Adoption Agency Regs 1983 7(2)	LA25	The adoption service must maintain full and accurate information on each child placed for adoption.	30.4.04.
14	The Local Authority Adoption Service Regs 2003 16 (2)(b)	LA29	The adoption service must ensure that confidential files are stored in lockable rooms.	30.6.04

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	LA3	The adoption service should provide clear information to prospective adopters about the recruitment criteria of the service.
2	LA5	The adoption service should monitor the effect of the change in its procedure to ensure adopters are asked if they will inform the adoption service in the event of an adopted child's death.
3	LA6	The adoption service should monitor disruptions to assess where changes are needed to reduce the number of disrupted placements.
4	LA6	The adoption service provides timely, suitable and accessible information for adopters to use with children placed with them.
5	LA21 LA8	The adoption service should maintain an effective Post-Box system for the exchange of information between birth and adoptive families.
6	LA19	The adoption service should complete its changes to the selection process to ensure telephone enquiries are made and recorded in relation to each reference.
7	LA20 LA16	The adoption service should plan and communicate effectively when developing changes to the service.

8	LA5 LA16	The adoption service should ensure staff and adopters are aware of the service's procedure for entry on the Adoption Register and are provided with consistent information.
9	LA17	The adoption service should ensure effective monitoring of the service it provides and use this information to improve the quality of the service.
10	LA18	The adoption service should establish a written protocol governing the role of specialist advisers.
11	LA19	The adoption service should make relevant training provision for staff engaged in adoption work.
12	LA26	The adoption service should provide training in effective recording for staff.
13	LA27	The adoption service should ensure separate records are kept which bring together data on allegations and on complaints.
14	LA27	The adoption service should review the storage arrangement for confidential files.

- 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	NA
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	NA
• Interview with children	NO
• 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	19/11/03
Time of Inspection	9.30
Duration Of Inspection (hrs)	72
Number of Inspector days	9.7
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) This number includes staff working on both fostering and adoption as workers cover both areas of work.	41

The following pages summarise the key findings and evidence from this inspection, together with the NCSC 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 Statement of Purpose was in draft form and out for consultation at the time of the inspection. The draft needed further additions in order to comply with Schedule 1, for example in relation to the information on staff and the Permanency Teams.

Similarly work was reported to be underway in the production of a Children's Guide, with use made of the BAAF "Children's Guide" and with the expectation of a publication of a Guide by the West Midlands Family Placement Consortium. There was an awareness of the need for the Guide to be available in forms other than written English. Inspectors were told of the translation into Urdu of some leaflets, which will be considered for the Children's Guide. Work is also underway on information in Makaton and tapes to offer alternative forms of communication.

The policies and procedures in place and the guidance to them, needs to be reviewed to be brought in line with the National Minimum Standards (NMS) and Local Authority Adoption Service Regulations 2003 (LAA Regs2003).

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

NA

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

NO

Is there a children's guide to adoption?

NO

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

NO

Securing and promoting children's welfare

The intended outcome for the following set of standards is:

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

Standard 2 (2.1 - 2.3)

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

Key Findings and Evidence

Standard met?

3

Staffordshire have a clear written strategy for the recruitment of adopters and foster carers. The Annual Adoption Report analyses the statistics collated in relation specifically to adoption, showing there were 179 enquiries made from prospective adopters in the year 2002-2003. This resulted in 49 adopters being approved and 57 children were placed with Staffordshire adoptive families (46 looked after by Staffordshire and 11 by other agencies). Inter-agency placements have been sought to ensure where possible children are placed with a family of the same ethnic origin, cultural background, religion and language. There have been no brothers and sisters placed separately in the last year, unless this was identified in their individual care plans.

In the last 12 months:

How many children were identified as needing adoptive families?

63

How many children were matched with adopters?

48

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

46

How many children were placed with other services' adopters?

2

How many children were referred to the Adoption Register?

5

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

4

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

94

%

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

8

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?

27

Prospective and approved adopters

The intended outcome for the following set of standards is:

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

Standard 3. (3.1 – 3.3 and 3.5 - 3.6)

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

Key Findings and Evidence

Standard met?

2

Staffordshire's adoption service had a clear recruitment strategy, which is reviewed annually. The recruitment responsibility is mainly undertaken by the Madford Team, which recruits and trains both prospective adopters and foster carers. A variety of methods have been used in recruitment, including "Reggie" the bus, the mobile recruitment and training vehicle, which enables the team to visit communities across the disparate areas of this large county. The Adoptions Options Team has a particular focus on the recruitment of adopters from Asian and black and community groups. Information and documentation indicates prospective adopters are welcomed without prejudice and all the returned questionnaires showed prospective adopters received clear information about the adoption process. There was evidence of the service's ability to prioritise prospective adopters to meet the needs of children waiting. The criteria for prioritising was not always clear to prospective adopters. In the questionnaires returned 4 indicated they were unclear about the recruitment criteria. The commitment and clarity about the approach to recruitment was noted.

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?**

1

Procedures and policies support a formal, thorough and comprehensive preparation and approval process. This was reflected in discussions with the managers, adoption social workers and approved adopters.

The information provided for the inspection was of 12 planned preparation sessions for the year, which were reduced to 6 due to the number of prospective applicants. Issues were identified during the inspection of concerns from some adopters about the delay at an early stage in the application process and in getting to panel. 4 of the 12 returned questionnaires reflected dissatisfaction with the assessment and preparation process. Adopters were concerned about delays in the allocation of their assessing social worker, one said they applied in January and did not meet their social worker until September the same year. There were other examples of applicants waiting unacceptably long periods for the assessment to begin. To quote another questionnaire, "The whole system needs to be speeded up. We understand the need to be thorough. But it could be much quicker and more efficient!! For the sake of the children".

The same issue relates to the panel where there were examples of applications being withdrawn, some adopters quoted two occasions on which this happened.

The content of the preparation sessions was seen as relevant and helpful. Placing social workers' questionnaires reflected the view that adopters were well prepared in appropriate areas of information. Information about inter-country adoption was not as full and left some areas still to be researched by the applicants.

The quality of assessment was variable. Some were of good quality and addressed areas fully. There were other files seen where previous partners had not been interviewed and where the presence of pets had not been explored in terms of the applicant's attitude to safety issues. There was also an example of limited exploration of health issues with an applicant. This appeared to become an issue during introductions and the following placement disrupted. There was information available that would have indicated problems with this particular match, which appear not to have been used in the matching process nor fully highlighted in the assessment.

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

Information was available to adopters prior to placement. The majority of adopters felt they were given full and accurate information, although there was an example where adopters felt they received more information from the child's Guardian ad Litem than from the placing social worker.

A policy is in place relating to referrals to the Adoption Register. Very few adopters acknowledged an awareness of the Register in the questionnaires. One adopter reported being advised they could not be referred to the Register because of the nature of placement they were seeking.

It was reported that a Handbook for Adopters was in its final draft and due out shortly after the inspection. This will provide accurate and consistent information to assist adopters.

Similarly it was reported that new procedures have been introduced asking adopters about notification in the event of the death of an adopted child. The files seen during the inspection did not reflect adopters being asked this question.

There was evidence of children awaiting adoption being given information about the prospective adopters. Family books were used and the use of videos was being developed. A questionnaire was available in respect of adopter's pets. Although this was useful it was not completed consistently.

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

YES

Standard 6 (6.1 – 6.7)

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

Key findings and evidence**Standard met?**

2

The majority of information from adopters indicated that they felt supported by the adoption service in the provision of stable and permanent homes for children. There was evidence of plans for the development of Adoption Support, including the extension of Sustain, which offers support to foster carers. There were established Adoption Support Groups which meet every two or three months and were seen as useful forums by adopters met during the inspection.

While it may not relate solely to support there have been 5 adoption disruptions within the twelve months prior to adoption, which is relatively high. Information about this needs to be monitored to assess the need for changes to systems in place.

It was recognised by the service that there are a limited number of inter-country adoption assessments undertaken. A specialist worker has been identified to take lead responsibility in this area to allow the development of specialist knowledge. Comment was received in the questionnaires of the difficulties for prospective inter-country adopters in gaining appropriate information. The concerns expressed were clearly related to the lack of help at a national level and problems with the way the Department of Health dealt with paperwork, rather than with problems in dealing with Staffordshire. However, one point related to the feeling that the preparation training was not relevant to inter-country adoption. This needs some further exploration to ensure appropriate information is provided to all prospective adopters.

Managers of the service identified the need for further training and development in assisting adopters to address racism and other forms of discrimination. The inspectors were informed of proposed work in this area with the Midlands Family Placement Group.

Adopters seen during the inspection demonstrated an awareness and understanding of the significance of information provided by birth families. Some good examples were observed of Life-Story Books. Adopters reported the standard of these was variable and one example was given of an appropriate book taking over a year to be produced, for a child who was old enough to need the information from the start of the placement.

The service has systems in place to provide support to placements in difficulty. Use is made of Disruption Meetings to coordinated the various roles of those involved should the placement disrupt. It was reported that the West Midlands Family Placement Consortium are discussing the possibility of identifying an independent chairperson for such meetings.

Number of adopter applications started in the last 12 months	38	
Number of adopters approved in the last 12 months	51	
Number of children matched with the local authority's adopters in the last 12 months	48	
Number of adopters approved but not matched	36	
Number of adopters referred to the Adoption Register	22	
How many placements disrupted, between placement and adoption, in the last 12 months?	5	

Birth Parents and Birth Families

The intended outcomes for the following set of standards are:

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

Standard 7 (7.1 – 7.5)

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

Key Findings and Evidence	Standard met?	2
<p>The service provided for birth parents demonstrates an awareness of the lifelong implications of adoption. Staff specifically trained in this area of work undertakes section 51 counselling. It was also reported during the inspection that as part of the development of Adoption Support, meetings are planned with voluntary agencies to discuss the possibility of commissioning services of birth families.</p> <p>Examples were seen during the inspection where the need was identified for more effective involvement for birth parents in planning for children and for the need for more effective support for birth parents and families. There was concern about the involvement of birth parents and families in commenting on the information passed to the adopters and the panel. The development of the Permanency Teams is viewed positively within the service in relation to the support it will offer to birth families and in raising the standard of service consistently offered.</p>		

Standard 8 (8.1 – 8.2)

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

Key Findings and Evidence	Standard met?	2
<p>There were examples of birth parents and families being enabled to contribute the maintenance of their child's heritage. However, this was not consistent. One birth parent reported she had not seen any written information about herself and that her mother had not been consulted about family history or use of the Post-Box system.</p> <p>There was evidence during the inspection of delays of two years for exchanges through the Post-Box. Again the manager of the service identifies the establishment of the Permanency Teams as improving such problems.</p>		

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?**

1

The 4 returned questionnaires from birth families indicated a very mixed view of the adoption service. There were issues of lack of trust and limited information identified. Only 1 indicated they had been informed of any local or national support groups and the same number felt they were treated fairly and sensitively. The majority felt treated with respect by workers but identified a lack of accurate, reliable information.

While this is clearly a difficult area of work where a number of factors may influence how the service is seen, there is also a clear need for further development in providing the best possible service.

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>There are clear policies and procedures in place in relation to the adoption panel. Some areas of these need to be reviewed in line with the NMS 2003. For example, the current procedures do not address how to deal with a disruptive panel member or an emergency procedure if there is an urgent need for matters to be considered prior to the next panel meeting.</p> <p>Prospective adopters are given the opportunity to attend panel and 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?	2
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The adoption panel is properly constituted and members are clear about their roles. There were two training days for panel members in the twelve months prior to the inspection. One on “Adoptive Applicants attending Panel” and a second entitled “ Panel induction, NCSC inspection, Adoption & Children Act 2002”. A further two more are planned for 2004, one day with the agency staff and one on “Valuing Diversity”. The latter addresses an area identified in the returned questionnaires as in need of further development. The panel members’ personnel file showed CRB checks had not been received on all members nor had members signed a confidentiality agreement with the adoption service.

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?	2
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The adoption panel meets at least twice per month and there was evidence of emergency panels being convened when the need arises, although there is no procedure to support this. Despite the frequency of the meetings comments were received from a number of adopters about their application being withdrawn from the expected panel. This lead to delays in considering the application. This was reported to have occurred on two occasions in relation to one applicant. The same impression was repeated with the placing social workers who cited delays in matters being able to be heard at panel. One example was given to inspectors of a Form E report having to be re-written three times due to the matter being withdrawn from panel. The panel is clearly minuted and members in advance to allow time to read and prepare receive panel papers.

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 agency decision maker is the Assistant Director for Children and Family Services. He receives panel papers and minutes, which he reads in making his decision. The maximum time allowed, in the service's procedures, for the letters to be sent with formal notification of the decision is fifteen days. The decision maker signs the letters within this time frame. There is a need to review the procedures in order to provide written confirmation of decisions more speedily.

There were issues raised during the inspection highlighting the need to ensure information is conveyed sensitively and without delay to those involved. This was not happening consistently in the situations considered during the inspection.

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
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All managers of the adoption service are suitably knowledgeable, experienced and qualified for the task. Three of the managers at the time of the inspection had management qualifications and three were undertaking NVQ Level 4. While the job descriptions for the lead manager and the nominated manager are relevant to their roles, inspectors were informed it is intended to review these in line with the extension of duties and responsibilities.

Staff undertaking adoption work are also experienced in childcare work. Those involved in adoption work meet together at least twice per year to discuss relevant issues. Inspectors were told that there are plans to have county workshops to consider relevant issues. The overall impression was of a service managed appropriately and effectively.

Does the manager have Management NVQ4 or equivalent?	YES	
Does the manager have at least 2 years experience of working in a childcare setting in last 5 years?	YES	

Standard 15 (15.1 – 15.4)

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

Key Findings and Evidence	Standard met?	2
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The recruitment and selection process identifies the need for managers of the adoption service to have appropriate skills, knowledge and experience in childcare. All the current managers reflect this.

The current nominated manager has a completed Enhanced CRB Disclosure in place. The Personnel department had informed the inspectors during the fostering inspection that a system would be developed to renew CRB checks every three years. Due to the short time lapse between the two inspections no further CRB checks had been returned.

Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

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

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

Key Findings and Evidence

Standard met?

2

There was evidence during the inspection of a commitment to running an effective service. However, some areas are in need of strengthening. For example, the development of the Permanency Teams was considered by some to be at the “pilot” stage and by others to have reached the point of introduction as a permanent part of the service.

There is clarity about the role of managers and about who deputises in the absence of the nominated manager.

Files, adopters and social workers indicated that anti-discriminatory practice is addressed and there is reported to be further training planned in the development of awareness in this area.

The service has recently purchased the Charms Database, which is reported to be compatible with the Adoption Register, to ensure compliance and ease of transfer of information. Further work is needed to ensure that all staff are aware of the procedure for entry on the register and that information is consistently passed on to adopters.

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

2

Number of the above complaints which were substantiated

1

Standard 17 (17.1 – 17.3)
There are clear written procedures for monitoring and controlling the activities of the adoption agency and ensuring quality performance.

Key Findings and Evidence	Standard met?	2
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There are systems in place to monitor the performance of the service. These include, supervision and file checks by managers, an Annual Adoption report and bi-monthly reports to the Authority’s Performance Management Committee. It was reported that the service has a good record in terms of the number of adoptions and has “consistently received a 5 “blob” rating.”

There are still areas in need of strengthening on the basis of sound monitoring. For example the views of adopters and prospective adopters in relation to the assessment process and the quality of some recording needed some action following monitoring of the service provided.

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

Monthly?	<input type="checkbox"/>
Quarterly?	<input type="checkbox"/>
Less than Quarterly?	<input checked="" type="checkbox"/> 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?	2
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Access is provided to specialist advisers. The medical adviser is a member of the adoption panel and is available for consultation by staff as the need arises. The legal adviser is similarly available and attends panel. The Lead Manager for adoption meets with the medical adviser every three months.

There was no written protocol governing the role of the specialist advisers at the time of the inspection.

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

There are clear written recruitment and selection procedures. The person specifications and job descriptions appropriately describe the roles of those undertaking adoption work. Only qualified staff are employed in adoption work and three years previous childcare experience is also a prerequisite in the service's person specification for those applying for work of this nature.

At present the department does not update CRB checks. It was reported that this practice has been agreed to change following an inspection of the Staffordshire Fostering Service. The files indicated that qualifications are not always checked and there was no evidence on some files of these checks having taken place. It is not evident on the files that telephone references are undertaken in addition to written references.

The recording of this process needs to be strengthened in line with current standards.

Plans are in place to ensure at least 20% of social workers have the Post Qualifying Child Care Award by April 2006. On going training for staff is available and selected by staff from the Training Catalogue. Staff commented that their training needs are not always met through internal training and the need was identified for more specific training to be made available. Inspectors were informed that those involved in section 51 counselling have all undertaken relevant training and meet as a group at least twice each year to share experience and practice.

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?

28

%

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
<p>The adoption service is complex, covering staff in different teams with the Adoption Options Team taking lead responsibility. A dedicated enquiry line ensures a prompt and informed response to all enquiries about adoption. All the staff, including those with administrative roles were committed, knowledgeable and experienced. There are appropriate systems in place to maintain an effective service, including a workload system operated by managers. In addition to regular team meetings, adoption workers meet together at least twice annually to share skills, experience and information on developments in adoption.</p> <p>There was a need for greater clarity in the introduction of the Permanency Teams. The uncertainty amongst staff about whether or not this was a pilot meant the very positive views of those who had experienced of the Teams were not used fully.</p> <p>Although the Statement of Purpose was not finalised, all staff were aware of it and felt it accurately reflected the service they provide.</p>		

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?	2	
<p>At the time of the inspection there were no significant gaps in staffing the service, although the administrative support was limited.</p> <p>Evidence during the inspection indicated that the Post Box system was run by one social worker with no administrative support, although the manager of the service stated administrative support was available. It provides a service for a large number of children and young people (360 exchanges). The service should consider how it maintains an effective service and review the staffing needed to provide this service.</p>			
Total number of social work staff of the adoption service	48	Number of staff who have left the adoption service in the past 12 months	5
Number of social work posts vacant In the adoption service.	3		

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

Staffordshire County Council appeared to have sound employment practices. A recently reviewed Whistleblowing policy was in place supported by posters raising awareness of the subject. There was an established Equal Opportunities Policy which supports the Council's employment practice.

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

There was an established training and development system in place for the service. The annual Training Catalogue identifies internal courses available throughout the year. It was reported that a Family Placement Training Strategy has been proposed. This would be a positive development reflecting the need raised by adoption staff for more training reflecting their particular specialism.

While there was on going, regular supervision for most staff, there is no formalised appraisal system. This needs to be addressed to provide a system for evaluation and development for staff.

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
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Separate records were maintained in relation to staff, prospective and approved adopters and children. The personnel records need to be improved to comply with Schedule 3. There was a written policy and guidance in place in relation to recording.

The quality of the recording on the files seen was varied. Some were well constructed and clear. Others had evidence of mixing fact and opinion, typing errors and inaccuracies.

Although there was a system of files audit through supervision there appeared no correction of these issues. There was however, evidence on files of management decisions and endorsement of the record.

The children's files were consistent with the Looked After Children system. On the files seen there were discrepancies in the information held in respect of siblings, necessitating access to all the sibling's files to gain a complete picture.

Standard 26 (26.1 – 26.2)

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

Key Findings and Evidence	Standard met?	2
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There was evidence of some good practice by family placement social workers and placing social workers. All the adopters who responded to the questionnaire felt they had received full and appropriate information about the child being placed. There was also evidence of adopters feeling they had limited information and received more for the child's Guardian ad Litem.

There were procedures in place governing access to files and training available to staff in relation to this.

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

A written policy establishing the purpose, format, confidentiality and contents of files was in place but under review at the time of the inspection.

There were separate records kept on staff, complaints and allegations. However, it was difficult for the manager organising the inspection to collate all the information for the county as files on complaints and allegations were held in the individual offices.

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

Inspectors were informed that the procedure for the recording of information on staff has been reviewed. The current personnel files do not include all the appropriate information required by NMS28.2. There was evidence on the files of recent activity in renewing CRB checks, indicating the implementation of the changes.

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?

2

The premises seen during this inspection were fit for purpose. It should be noted that this inspection only visited the Lichfield Area Office and the Adoption Options office in Burton. The buildings were adequately protected. There was reported to be a Disaster Recovery Plan in place, which is part of the Council's plan.

While files were stored appropriately in locked cabinets, the rooms they were stored in were not lockable individually, only at strategic points of entry to parts of the buildings. This needs to be altered to ensure the rooms are lockable to comply with NMS 29.3.

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 19/24-26 November 2003 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary	<input type="checkbox"/> YES
Comments were received from the provider	<input type="checkbox"/> YES
Provider comments/factual amendments were incorporated into the final inspection report	<input type="checkbox"/> 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	<input type="checkbox"/> 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 21 April 2004 which indicates how statutory requirements and recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.

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

Action plan was required	<input type="checkbox"/> YES
Action plan was received at the point of publication	<input type="checkbox"/> YES
Action plan covers all the statutory requirements in a timely fashion	<input type="checkbox"/> YES
Action plan did not cover all the statutory requirements and required further discussion	<input type="checkbox"/> NO
Provider has declined to provide an action plan	<input type="checkbox"/> NO
Other: <enter details here>	<input type="checkbox"/> NO

Public reports

It should be noted that all NCSC 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 Staffordshire CC Adoption Service confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the statutory requirements made and will seek to comply with these.

Print Name _____

Signature _____

Designation _____

Date _____

Or

D.3.2 I _____ of _____ 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.