Making Social Care Better for People



inspection report

ADOPTION SUPPORT AGENCIES

Post-Adoption Centre

5 Torriano Mews Torriano Avenue London NW5 2RZ

Lead Inspector Jayne Ivory

> Announced Inspection 20th June 2006 09:30

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Reader Information			
Document Purpose	Inspection Report		
Author	CSCI		
Audience	General Public		
Further copies from	0870 240 7535 (telephone order line)		
Copyright	This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI		
Internet address	www.csci.org.uk		

This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this service are those for *Adoption Support Agencies*. They can be found at <u>www.dh.gov.uk</u> or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: <u>www.tso.co.uk/bookshop</u>

This report is a public document. Extracts may not be used or reproduced without the prior permission of the Commission for Social Care Inspection.

SERVICE INFORMATION

Name of service	Post-Adoption Centre
Address	5 Torriano Mews Torriano Avenue London NW5 2RZ
Telephone number	0207 284 0555
Fax number	0870 777 2167
Email address	advice@postadoptioncentre.org.uk
Provider Web address	www.postadoptioncentre.org.uk
Name of registered provider(s)/company (if applicable)	Post-Adoption Centre
Name of registered manager (if applicable)	Monica Delores Duck
Type of registration	Adoption Support Agency

SERVICE INFORMATION

Conditions of registration:

- 1. To provide services to Adults and Children.
- 2. In addition they can offer birth records counselling and intermediary services.

Date of last inspection This is the first inspection.

Brief Description of the Service:

The Post-Adoption Centre (PAC) was established in 1986 to provide an adoption support service (ASA) to all those touched by adoption. Over the last twenty years the service has grown and developed to provide the following range of services:

- A telephone advice and information line.
- Face to face counselling for adopted children and other children in permanent foster placements, counselling for adoptive parents or foster carers. Counselling for adopted and fostered adults
- Therapeutic services for adopted and fostered children and their families.
- An ethnically sensitive therapeutic service for Black and Multi-racial families.
- A contact and mediation service to each of the parties involved in adoption.
- Training for all parties to adoption
- Professional training courses, including a student placement service, seminars and conferences with national and international experts in the adoption field.

PAC operates from the main premises in Kentish Town in London. The PAC has service level agreements with 33 Local Authorities across the South East of England, 14 of WHICH have purchased locally based counselling surgeries. The three main areas of the service the Advice Line, Counselling and Outreach Service, the Child and Family Attachment Service and the Contact and Mediation Service are supported by Service Managers who are supervised and supported by the Director. The effective functioning of the PAC is overseen by the Council of Management, which is made up of 10 trustees. The chairperson of the Council of Management is the registered provider for the PAC.

SUMMARY

This is an overview of what the inspector found during the inspection.

This is the first time that the Post Adoption Centre (PAC) has been inspected against the regulations and national minimum standards for adoption support agencies.

The service was registered in April 2006 and agreed to participate in the asa inspection pilot. Three other asa's had also agreed to participate in the asa pilot.

As a result of the shortened timescale between registration and inspection the staff at the PAC had not had the usual amount of pre-inspection planning time. Despite this challenge the service and the staff within the agency worked hard to prepare for the inspection and facilitated the process to ensure that the inspection planning and fieldwork was completed in an efficient and effective manner.

The inspection fieldwork took place over five days, one day was allocated to attend a planning meeting with the agency and an additional day was used to select case tracking samples and analyse data and information forwarded by PAC as part of the pre-inspection planning process. The inspection fieldwork took place over three days and involved interviews with key members of staff including the director, managers and staff members from the different teams in the agency. An examination of personnel files was also undertaken.

Visits and interviews were made to four service users and their views are incorporated into the text of this report. Completed questionnaires were sent out to service users including children and adults, referrers to the PAC and staff members, including volunteers. We received the following numbers of surveys from service users, both adults and children (22), referrers from local authorities (4), staff, volunteers and contracted workers (22).

The case files of service users who were visited or interviewed were read. Other case files were also examined. Written materials relating to the operation of the agency were read, including policies and procedures, protocols and information provided for service users and referring agencies.

The inspection was well organised and facilitated by the staff in the PAC who worked hard to demonstrate the broad range of services that they offer to all those touched by adoption.

What the service does well:

The Post Adoption Centre is an agency that is managed and delivered by all staff in the best interests of service users. The agency works with children, young people, adults and families whose lives have been touched by adoption. The broad range of services offered by the agency are provided by staff who are expert in providing adoption support services that are sensitive to the needs of children, adoptive parents, adopted adults and birth family members. Children and young people reported that they were happy with the work that they had or were completing with staff from the centre. One young person said that the PAC," Made me smile again!" another child said "I liked going." Adoptive parents spoke about the positive outcomes of the therapeutic assessments and interventions they and their children had completed with the child and family team. One adoptive parent said, "Without the support and advice our family has received from this service our family would be in crisis." Adopted adults receiving support also confirmed that, "The service I receive is always totally professional, supportive but never patronising.... I can't praise it enough."

Another adult confirmed that, "The service I have received has been impeccable and life-saving."

Staff at the centre work flexibly and within sometimes very limited resources to provide a responsive service to all those who are eligible for a service form the centre.

Outreach services are delivered to commissioning local authorities and some specialist services can be purchased as part of a service level agreement. Specialist attachment assessments of children and families and contact and mediation services were considered to be of exceptional quality. Some of the outcomes of the intensive attachment work and contact and mediation service were very positive. Adoptive families and children who were at crisis point reported improved relationships, increased insight and work that had empowered them to parent.

Staff and service users benefit from the excellent training programme that the centre has developed and provides. Training involves sharing good practice, and commissioning leading experts in the field of adoption to lead seminars for adoptive parents, birth families and interested professionals.

The staff in the agency have all worked hard to ensure that PAC has complied with the new regulations and standards. All staff have received training in promoting the welfare of service users and in dealing with allegations of child abuse.

Staff are well managed and supported and receive access to good professional supervision and excellent clinical supervision from external consultants with a special interest in adoption.

The agency offers good value for money and is efficiently and effectively run. The managers of the agency are developing quality assurance systems within PAC. Reporting mechanisms between the staff and the committee of management are well developed.

The agency has sound financial policies and procedures that are implemented in practice. PAC manages to provide a consistent service despite the challenge of identifying consistent funding for all of the services provided by the agency. Overall the agency was assessed as providing an excellent service to children, adults, families and referring agencies who use the centre with good support and facilities available for staff.

What has improved since the last inspection?

This is the first time that the Post Adoption Centre has been inspected against the Adoption Support Agency Regulations 2005 and National Minimum Standards for Adoption Support Agencies.

What they could do better:

The managers and staff in the agency acknowledged that some of their practice concerning the recording and evidencing of good practice needed to be developed. Case files and case recordings were of a high standard, however not all case files had closure summaries or contained records of case discussions in supervision. The service had recognised this as an area of development and had resolved to address this to ensure consistency of recording across the service.

The inspection found that although all referring agencies were kept well informed about the status of a referral, that they would appreciate a more formalised written format regarding the progress of a referral, with more built in reviews and closure meetings with staff from the PAC.

All service users spoken to or who had returned a survey had received an assessment for adoption support services. Not all files had evidence of an adoption assessment from the referring agency. The agency's policy and procedure for accessing services should state more clearly that any service users approaching the PAC should be advised of their right to apply for an assessment of need for adoption support services from their respective local authority.

Other good practice recommendations are contained within the content of the report and concern the staffing of the agency and the need to refine and

review some existing policies and procedures in light of the agency's first inspection

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from <u>enquiries@csci.gsi.gov.uk</u> or by contacting your local CSCI office.

DETAILS OF INSPECTOR FINDINGS

CONTENTS

Statement of Purpose				
Safeguarding and Promoting Welfare				
User Focused Services				
Service Delivery				
Fitness to provide or manage an adoption support agency				
Management of the adoption support agency				
Employment and management of staff and volunteers				
Individual Practitioners				
Complaints and Representations				
Records				
Fitness of premises				
Financial requirements				
Scoring of Outcomes				
Statutory Requirements Identified During the Inspection				

Statement Of Purpose

The intended outcome for Standard 1 is:

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

1 Statement of purpose

JUDGEMENT

Standard 1

Quality in this outcome area is good. This judgment has been made using available evidence including a visit to this service, which found that the Statement of Purpose is used to inform all service users, and referring agencies about what to expect from the agency and is accurate and comprehensive.

EVIDENCE:

PAC has developed a Statement of Purpose that accurately describes the services provided by the agency. The Statement of Purpose meets the regulations and standards; staff have been consulted about the content of the document, which is then ratified by the Council of Management at least annually.

The agency has developed a children's guide to the PAC. Staff are familiar with the contents of the guide, however some staff members were using the guide more "freely" than others with children or young people. Although the agency may have to be sensitive to the individual circumstances concerning the child and family, all children and young people should be provided with a copy of the guide as part of the work they undertake or complete.

The agency would benefit from involving children and young people who have used the service in reviewing the guide.

Safeguarding And Promoting Welfare

The intended outcome for Standard 2 is:

The adoption support agency safeguards and promotes the physical, mental and emotional welfare of people affected by adoption who wish to use its services.

2 Safeguarding and promoting welfare

JUDGEMENT

Standard 2

Quality in this outcome area is good. This judgment has been made using available evidence including a visit to this service.

PAC ensures that all staff members and volunteers are confident and competent to manage safeguarding issues. The welfare of service users is at the heart of the agency, who are confident in the service they receive and clear about the agencies commitment to promoting their welfare.

EVIDENCE:

PAC has robust safeguarding policies and procedures that are implemented in practice.

All staff members including sessional staff and volunteers confirmed that they have received recent training in safeguarding children and vulnerable adults and are aware of how to deal with allegations of historical abuse. The agency makes it clear to new service users that client confidentiality cannot be maintained in cases where the safety or welfare of children is under question.

PAC had developed a system to ensure that the appropriate authorities were notified of any instances or allegations of abuse.

The agency had dealt with an allegation of historical abuse in a comprehensive manner and had persisted with the responsible agency to ensure that the outcome of any enquiry into allegations of historical abuse was clearly evidenced. As an area for development the agency should develop the existing child protection and safeguarding policies and procedures to involve the Director in following up the outcomes of an investigation or enquiry with the respective Head of Service in the responsible authority, if feedback is not forthcoming. This would ensure that the agency has done everything within its power to receive information about the outcome of any enquiry in accordance with the regulations.

User Focused Services

The intended outcome for Standard 3 is:

People affected by adoption receive a service from the adoption support agency that is appropriate and tailored to their particular need. They are treated fairly, openly and with respect throughout their contact with the agency.

3 User-focused services

JUDGEMENT

Standard 3

Quality in this outcome area is considered as excellent. This judgment has been made using available evidence including a visit to this service. PAC provide an excellent service that is appropriate, tailored and sensitive to the needs of all who use the service.

EVIDENCE:

There was compelling evidence from a range of service users, staff and referring agencies that the PAC is user focused, and offers an appropriate, tailored and sensitive service to the needs of children and adults.

All the young people that returned surveys confirmed that they were happy with the services that they were receiving, and felt that the staff working with them understood what was important. One young person said, "It is a very, very good service. Made me smile again!"

Children are given the opportunity to provide feedback throughout the work they and their families complete to their workers in the child and family therapy service. One young child who had completed a therapeutic assessment and intervention with his adoptive parents spoke to us about their experience of PAC. They said, "I liked going". The therapeutic assessments and sessions involve consulting with children and their adoptive families about their experiences of family life and of their life stories. The sessions are conducted with the full consent of children and their parents. Feedback is sought at the end of each session. At the close of the work children and families are asked to formally evaluate their experience and to provide feedback to the agency. PAC also arranges for further historical evaluations with children and their adoptive families.

Adoptive parents were very happy with the outcome of work with the child and family therapy service. One adoptive parent said, "The service was excellent and everybody who knows our child has noticed a positive difference", another adoptive parent commented, "Our family therapy sessions were excellent and our lives feel much better. The therapists were very skilled and sensitive to the needs of our family. The PAC is a much -needed organisation. As a racially diverse family we especially appreciated the support from PAC."

The PAC's service to black and multi-racial families provided excellent outcomes to children and their families. The quality of the service provided had ensured an increased rate of referral and increased uptake of services by black and multi-racial families.

Young people have access to their own advocate in the contact and mediation team. For example one case file demonstrated the user focus of the work undertaken with a young person, their adoptive parents and their birth family by the contact and mediation team. The young person was struggling to come to terms with their adoption and was challenging their adoptive parents and school. After receiving a referral and assessment from a local authority for work to be completed to prevent an adoption breakdown, the workers engaged with the family and the young person. The work was completed with great sensitivity by the children's advocate and by the support worker for the adoptive parents. Information was gathered from the young person's birth family and this was shared in a sensitive way. After dealing with the initial crisis in the family the work focused on longer term issues within the adoptive family. The outcome of this work was to complete life work with the young person. After twelve months the support worker for the adoptive parents could withdraw as the issues that the young person was struggling with had been addressed and relationships within the adoptive family had improved significantly. The case file gave a sense of a family who had been empowered by the support they had received. The work was completed with great emphasis being placed on the workers from PAC communicating effectively with the young person, the birth family and the referring local authority adoption support worker.

The case file demonstrated effective mechanisms from seeking feedback and evaluation from the family and from the referring agency in the contact and mediation team.

Comments from an adult receiving a mediation service confirmed the view that the service is user focused,

"My mediator has been encouraging and helpful all the time. They have worked hard to ensure that I understand the law and what we may or may not achieve. They are realistic, practical and helpful."

The range of services to birth family members was also valued. There is a monthly drop in for non-relinguishing birth parents, an outreach service in Holloway Prison for birth mothers to offer support and consideration to contact issues with their adopted children. One birth parent spoke about the value of the drop in-group and the support they had received since their children had been placed for adoption. They said, "It helps to know that I am not alone. It can be difficult sometimes, I thought I was going mad, but the worker at PAC has helped me to understand that I am grieving for my children, and that what I am going through is part of that. Without the support I would have really struggled to cope. They help me to write my letters for post-box if I need it." The training service provided by PAC is also regarded as being well managed and creatively delivered within existing resources. The training service manager commissions national and international experts in the adoption field. Regular seminars are delivered and evaluated. All of the training events that are offered are valued highly by the staff, service users and professionals who attend. A number of referring agencies and families spoke in glowing terms about the training opportunities that they had at the PAC. One family said, "Whilst we were working with the child and family team we were offered an opportunity to attend a workshop. The training was fabulous and really helped us to understand our child and how we help them."

Typical comments from referring social workers were "The training and workshops are done really well," and "The Post Adoption Centre are innovative in their approach and have a strong lead in educating and training the social work professionals/adoptive parents and birth parents. This approach is positive and valuable."

The PAC offer specialist attachment training for adoption workers and provide student placements.

The advice line provides a valuable source of information for enquirers but can only be operated for three hours every day due to financial restrictions. The outreach surgeries offered throughout the south-east in commissioning local authorities is also an important part of the work of the PAC and keeps specialist workers in touch with some of the broader aspects and perspectives of people whose lives have been touched by adoption.

Children were consulted about their involvement with the agency by their therapist or by the children's advocacy worker. Staff worked in an integrated but essentially child-focused way to ensure that children's wishes and feelings informed the work that the child, parents and staff would complete. Children's wishes and feelings were captured in direct work with younger children and through personalised life stories where appropriate. Although PAC sends out a letter confirming the status of the referral after 7 days of receipt, some local authorities would appreciate a more formalised written format regarding the progress of a referral. This is an area of good practice that the agency should consider developing. PAC ensures that service users are consulted on decisions made in relation to their service provision. They evaluate the work that they undertake with all service users and ask for feedback throughout the work that is undertaken. Evidence of evaluations was seen on case files and was confirmed in discussion with children and adults who had received or who were receiving a service from the agency.

All service users confirmed that they were aware of their rights to make complaints or representations. The inspection confirmed that service users had been assisted to make a complaint or representation to the agency by the Director and other members of staff.

Service Delivery

The intended outcome for Standard 4 is:

The adoption support agency's service users receive a good-quality, professional service, based on their needs identified by an assessment.

4 Service delivery

JUDGEMENT

Standard 4

Quality in this outcome area is good. This judgment has been made using available evidence including a visit to this service which confirmed that the agency's service users receive an excellent service, which is professional and is based on their assessed needs.

EVIDENCE:

All of PAC's service users receive a service that is appropriate and tailored to their particular need. They are given information about the service they can expect to receive and what the service is designed to achieve from each of the service areas.

Prospective service users are welcomed without prejudice. This has been confirmed in the surveys that have been received and from discussions with children, adults and families who have accessed the range of services at PAC. The majority of referring agencies confirmed in their surveys that they had received "very full and clear information" about the range of services offered by PAC and that they were kept well informed about the progress of any referral through "good liaison, over 'phone and e-mail". Another social worker suggested, "The contact and mediation service are very good at keeping referrers up to date. As families also contact us this communication is useful." PAC have worked hard to ensure that there are up to date written policies and procedures for each service it provides. Staff members confirmed that service provision accurately reflects those policies and procedures.

PAC has a written policy and procedure on how it will decide whether to provide an adoption support service to all service users. The policy concerning service provision provides a clear guide for staff, referring agencies and service users about the process of accessing a service from the agency. All prospective service users are made aware that they are entitled to request an assessment of their needs for adoption support services from their local authority. A number of service users initially contacted the agency via the advice line, via letter or emails or through the outreach counselling surgeries. All staff are advised that service users or referring agencies making contact to request a service must have an assessment either from their local authority or by PAC. As an area for service development the policy and procedure for accessing PAC's services should state more clearly that any service users approaching the agency should be advised of their right to apply for an assessment of need for an adoption support service from their respective local authority.

The service managers and staff in the agency ensure that services provided are based upon sound assessments. Service users confirmed that they were given a clear explanation of what was involved in any service provision and that they were asked to provide their consent at the outset of any therapeutic work, counselling or group work.

PAC has well developed systems to monitor and review the services provided to children, adults and families. These include regular staff supervision, team meetings and six weekly specialist clinical consultations. The range of professional and clinical supervision ensures that the length of service provision is appropriate for all who come to PAC and that the work delivers good outcomes. In addition to the range of supervision and consultation opportunities that are available to monitor the quality of service provision staff ask all service users for feedback and evaluate the work they do on a formal and informal basis.

Fitness To Provide Or Manage An Adoption Support Agency

The intended outcomes for Standards 5 and 6 are:

The adoption support agency is provided and managed by those who are suitable and have the appropriate skills and experience to do so effectively and efficiently to provide the services specified in the Statement of purpose

- 5 Skills to provide or manage
- 6 Suitability to carry on or manage

JUDGEMENT – we looked at outcomes for the following standard(s):

Standards 5 and 6

Quality in this outcome area is considered as excellent. This judgment has been made using available evidence including a visit to this service. The managers of the agency ensure that they provide an excellent, innovative and professional service to children, adults and families, within the resources available to them.

EVIDENCE:

There was substantial evidence that the director and the service managers of the agency are experts in the field of adoption. The range of services offered by the PAC and the provision of services that promote diversity require a proactive but sensitive management style. The director has a number of years experience in social work and social work management. The service managers are also experienced and knowledgeable and have years of experience within their professional field. The agency had recently appointed an operations manager to support the director and service managers and to ensure that the agency's management arrangement were enhanced.

PAC is an effective and efficiently run operation. Funding is a major preoccupation for the managers of the services who seek to find funding from a range of sources to support the core work of the agency. All income and outgoings are reviewed and controlled carefully by the management team. The director has a professional qualification relevant to working in an adoption agency and is the process of completing their registration as a psychotherapist. The director is also studying for a strategic management qualification which will be completed within the next twelve months and which will exceed the competencies of NVQ4.

All staff reported that they were supported, supervised and managed well by the director and by their respective service and line manager. Further to this the staff within the agency all acknowledged the service user focus of the management and of the agency of which they were a part.

Examination of personnel files confirmed that the director is a suitable person to run an agency concerned with providing adoption support services. Interviews with all staff and with the chairperson of the committee of management confirmed that the director and service managers safeguard and promote the welfare of the agency's service users at all times.

Management Of The Adoption Support Agency

The intended outcomes for Standards 7 and 8 are:

The adoption support agency safeguards and promotes the physical, mental and emotional welfare of people affected by adoption who wish to use its services.

- 7 Managing effectively and efficiently
- 8 Monitoring and controlling

JUDGEMENT – we looked at outcomes for the following standard(s):

Standards 7 and 8

Quality in this outcome area is considered as excellent. This judgment has been made using available evidence including a visit to this service.

The managers of the agency ensure that they provide a service that promotes the physical, mental and emotional welfare of people affected by adoption. PAC contributes to the adoption community and shares good practice by providing excellent training and workshops to promote good outcomes in other agencies. The drive to disseminate good practice is commendable.

EVIDENCE:

The managers of the agency ensure that it is managed effectively and efficiently within available resources and that PAC is run in accordance with the statement of purpose.

The director has a clear job description, which sets out their duties, responsibilities and level of delegation of roles and responsibilities. The director and the team of service managers and administrative managers were interviewed as part of the inspection process. They confirmed in their separate interviews that there were clear lines of accountability in the agency and that communication as a management team was very effective.

When the director is absent the agency operates a duty manager system to ensure that all staff members are aware of who is in charge when the overall manager is away. The inspection confirmed that the agency would benefit from considering succession planning and the development of management skills within the service managers of the agency. It is recommended that the agency should develop or purchase management training for all service managers/ co-ordinators of teams to enhance service delivery by strengthening operational and strategic management skills.

The agency operates well-established systems of staff supervision. Staff confirmed that there are clear and developing lines of communication and accountability within the agency. Many staff considered that the agency had improved in keeping them informed about new policy developments and that things had been "tightened up" recently.

The director ensures that all staff are informed about any possible conflict of interest in their work for the agency and other organisations and individuals. The agency had introduced a supervision sheet to ensure that managers' comments were evidenced on the case file. There are clear written procedures for monitoring and controlling the activities of the PAC. There is an emphasis on staff development, supervision and evaluation of practice. The managers of the service and the director ensure that evaluations and feedback of work undertaken by staff is collated and analysed. Findings from feedback are reported to the management team and to the committee of management at every meeting, with written reports from each service area submitted annually, with an overall report of the business submitted prior to the annual general meeting.

Employment And Management Of Staff And Volunteers

The intended outcomes for Standards 9 to 14 are:

The staff and volunteers who work in the adoption support agency are suitable to work with the agency's service users and they are managed, trained and supported in such a way as to ensure the best possible outcomes for service users. The number of staff and volunteers and their range of qualifications and experience are sufficient to achieve the purposes and functions of the adoptions support agency.

- 9 Suitability to work with service users
- 10 Organisation and management of staff
- 11 Sufficient staff with the right skills and experience
- 12 Fair and competent employer
- 13 Training
- 14 Accountability and support

(These standards 9-14 do not apply where the registered provider is an individual and does not have staff or volunteers)

JUDGEMENT – we looked at outcomes for the following standard(s):

Standards 9,10,11,12,13,14

Quality in this outcome area is good. This judgment has been made using available evidence including a visit to this service, which confirmed that staff in the agency are suitable to work with children, adults and families. Staff are managed, trained and supported to ensure the best possible outcomes for service users.

EVIDENCE:

The inspection confirmed that PAC has clear written recruitment and selection procedures, which are implemented in practice. All staff are suitable to work with the range of the agency's service users.

However an administrative error on the personnel database for Criminal Records Bureau (CRB) checks confirmed that the agency should develop a quality assurance system to ensure that existing CRB's are updated every three years and that records are kept of the checks and their outcomes. The majority of staff working in the agency confirmed that they were well supported by their line manager. The service managers and the director monitored the quality of service provision, but acknowledged that more should be done to formalise the quality assurance of the service. Staff involved in providing a therapeutic service to children, adults and families also had access to clinical supervision every six weeks.

Service users confirmed that administrative staff were helpful and sensitive to their needs when they had contacted the agency. In addition to this referring agencies confirmed that all staff in the agency were well informed and responded to them professionally when they contacted PAC.

Staff confirmed that they had access to and had been consulted about the statement of purpose. All staff had access to safeguarding policies and procedures, and a range of other policies and procedures concerning their role and relationship with the agency. For example staff had access to a health and safety policy and a complaints procedure in accordance with national minimum standards.

Staff reported that they were all motivated to work hard to deliver good outcomes for service users. The quality of the some of the work that was seen was of a very high standard. Professional and personal commitment to the delivery of good outcomes to all service users was a feature of all the staff in the agency. All staff were expected to "multi-task" and had a variety of different roles and responsibilities. PAC is efficient and effective however the challenge of identifying consistent funding streams for core activity had resulted in some difficult staffing choices for the agency. A number of staff considered that if the agency does have some additional financial resources then they should be invested in increasing the hours of the advice line counselling service. Further posts to be considered involved replacing the outreach services co-ordinator and providing dedicated administrative support for the child and family therapy team. These staffing developments remain areas in which an already excellent service could be enhanced and reflect the wishes of the staff group. All staff appreciated the challenge of balancing the needs of the service to develop with the challenge of maintaining a wide range of funding streams to sustain the current range of services offered by the PAC. The agency had responded to staffing vacancies creatively and operated a waiting system and prioritisation system that were clearly described in policy and procedure, and were well understood by staff and referring agencies and individuals.

Staff confirmed that the agency encourages staff retention by providing excellent support and training opportunities. Staff have access to flexible working conditions and regular supervision. Workloads are monitored through supervision and through team meetings. The majority of staff are professionally qualified however students and volunteers carry out their functions under the direct supervision of qualified staff, who are accountable for their work.

The training programme available to staff within the PAC is excellent. The programme is available for all staff whether they are part- time, sessional or volunteers. Newly appointed staff confirmed that they had received a good induction from their manager that met national minimum standards.

PAC has a well-developed appraisal scheme that is implemented in practice. Individual programmes of training are available, outcomes are monitored and linked to the assessment of staff needs and relate to the tasks assigned to them. All staff have received training in safeguarding policies and procedures, the Adoption and Children Act 2002, Adoption Support Agency Regulations and national minimum standards and record keeping, including service user confidentiality.

PAC evaluates training programmes for staff and volunteers and reviews and updates the programme annually.

Staff and volunteers reported that they consider that they are properly accountable and well supported by the agency, however some sessional staff reported that they would welcome the opportunity of increased contact with the agency. Staff who come into contact with service users receive management supervision, however a record of this supervision should be kept, and the agency should give thought to how the content of clinical supervision or consultation is kept on the relevant service users files.

Staff confirmed that they have an opportunity to attend regular supervision and staff and team meetings, which are appropriate to their role.

Individual Practitioners

The intended outcome for Standard 15 is:

The registered provider manages the agency effectively and efficiently and is suitable to work with the agency's service users. He or she is trained and supported in such a way as to ensure the best possible outcomes for service users.

15 Managing effectively and efficiently

(This standard only applies where the registered provider is an individual and does not have staff or volunteers)

JUDGEMENT

Not applicable

EVIDENCE:

Not assessed

Complaints And Representations

The intended outcome for Standard 16 is:

Complaints and representations are resolved quickly and handled in a sensitive, thorough and non-biased manner.

16 Complaints and representations

JUDGEMENT

Standards 16

Quality in this outcome area is good. This judgment has been made using available evidence including a visit to this service.

The agency has a clear and easily accessible complaints and representations policy and procedure that is implemented in practice. Complaints were handled in a sensitive and thorough manner in the best interests of service users.

EVIDENCE:

PAC has a written policy and procedure concerning complaints and representations that is implemented in practice. The small numbers of complaints received by the agency were well managed and responded to sensitively by the service manager or director where appropriate. The agency should revise the current complaints and representations leaflet to more accurately reflect the current policy and procedure, which does not place a time limit on a service user complaining to the agency.

PAC keeps a separate record of complaints and could demonstrate one area in which the agencies practice had been amended in light of a comment from a past service user.

Records

The intended outcomes for Standards 17 to 21 are:

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

- 17 Records with respect to services
- 18 Adoption case records
- 19 Access to adoption case records
- 20 Administrative records
- 21 Personnel files for members of staff and volunteers

JUDGEMENT – we looked at outcomes for the following standard(s):

Standards 17,20 and 21

Quality in this outcome area is good. This judgment has been made using available evidence including a visit to this service.

Records are stored appropriately, are of a good quality and are maintained and retained in accordance with the standards and regulations. This ensures that sensitive information about service users is kept confidential and records reflect the work that has been undertaken by the agency.

EVIDENCE:

The quality of the recording in the case files seen during the inspection reflected the quality of service delivery in the agency. Case files were well organised, and the recording of service provision was of a very high standard. All staff had received training in record keeping and the service ensured that records were fit for purpose. Confidential records were stored securely at all times and there was a clear written policy on access.

Entries were in the main legible, clearly expressed and non-stigmatising. Personnel files had some minor omissions, for example all files need an up to date photograph of staff working for the agency and this is a matter that must be addressed as part of the service's action plan.

Fitness Of Premises

The intended outcome for Standard 22 is:

The premises used by the adoption support agency are suitable for the purpose of providing the services as set out in the agency's statement of purpose.

22 Fitness of premises

JUDGEMENT

Standard 22

Quality in this outcome area is good. This judgment has been made using available evidence including a visit to this service, which confirmed that the premises used by PAC are suitable for the purpose for providing the range of services to children, adults and families.

EVIDENCE:

PAC's main office is based within a mews building. The centre has the use of two units within the same row of buildings and also rents an office across the road for the child and family team. The premises are secure and insured. The main office benefits from adequate information technology, however the child and family team office is not networked to the systems in the main building and this can cause some challenges for staff. The service would benefit from having an IT and communication system which is networked throughout each of the office bases.

Office space is at a premium and the service has no designated reception area as all available space on the ground floor of the main building is given over to therapeutic space and interview rooms. PAC has ensured that the available therapeutic space has facilities for people who have a disability.

The therapy rooms are very child and family friendly, however given the nature of the work that the agency completes it may be helpful if service users did have access to a reception area, to allow for sessions that are over running for example.

Financial Requirements

The intended outcomes for Standards 23 and 24 are:

The adoption support agency is financially viable

- 23 Financial viability
- 24 Financial processes

JUDGEMENT – we looked at outcomes for the following standard(s):

Standards 23 and 24

Quality in this outcome area is good. This judgment has been made using available evidence including a visit to this service. The committee of management and the director of the agency ensure that the organisation is financially viable this ensures continuity of service for children and adults who approach the agency for support.

EVIDENCE:

The director of PAC ensures that the agency is carried on in such a manner so as to ensure that it is financially viable and has sufficient resources to fulfil its obligations.

Financial processes within the agency are clear and are properly operated and maintained in accordance with the standards of the charity commission and within appropriate accounting standards and practice.

The accounts of the agency are subject to annual external audit and are scrutinised by the committee of management every three months.

PAC has a finance officer who ensures that the day-to-day finances of the agency support good outcomes to service users, and prepares financial statements and updates on the agencies financial status for the director. Finances are a regular item on the agenda of the monthly managers meeting. Financial procedures and responsibilities are well described and defined in the financial control policy, which is available for all staff members.

PAC is clear about the charging policy for organisations and individuals and has successfully maintained an increasing number of service level agreements with local authorities in the south east of the country. This is based on a clear

charging policy and service level agreement framework, but also demonstrable good outcomes for children, adults and their families.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Adoption have been met and uses the following scale.

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

"X" in the standard met box denotes standard not assessed on this occasion "N/A" in the standard met box denotes standard not applicable

STATEMENT OF PURPOSE		EMPLOYMENT AND MANAGEMENT OF	
Standard No	Score	STAFF AND VOLUNTEERS	
1	3	Standard No	Score
		9	2
SAFEGUAR	DING AND	10	3
PROMOTIN	PROMOTING WELFARE		3
Standard No	Score	12	3
2	3	13	4
		14	3
USER FOCUS	ED SERVICES		
Standard No	Score	INDIVIDUAL P	RACTITIONERS
3	4	Standard No	Score
		15	N/A
SERVICE	DELIVERY		
Standard No Score		COMPLAI	NTS AND
4	3	REPRESENTATIONS	
		Standard No	Score
FITNESS TO PROVIDE OR		16	3
	ADOPTION		
SUPPORT AGENCY		RECO	ORDS
Standard No	Score	Standard No	Score
5	4	17	3

MANAGEMENT OF THE ADOPTION SUPPORT AGENCY			
Standard No Score			
7	4		
8 3			

3

6

18

<u>19</u> 20

21

N/A

N/A

3

2

SCORING OF OUTCOMES Continued

FITNESS OF PREMISES		
Standard No	Score	
22	3	

FINANCIAL REQUIREMENTS			
Standard No Score			
23	3		
24	3		

Are there any outstanding requirements from the last inspection?

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Adoption support regulations and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale
		_		for action
1	ADS21	19.2 (d)	Staff personnel records files must meet the regulations and standards and contain all information outlined in schedule 2.	30/09/06

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1	ADS2	The agency should develop the existing child protection and safeguarding policies and procedures to involve the director in following up the outcomes of an investigation or enquiry with the respective Head of Service in the responsible authority, if feedback is not forthcoming.
2	ADS9 ADS21	The agency should develop a quality assurance system to ensure that existing CRB's are updated every three years and that records are kept of the checks and their outcomes.
3	ADS21	All staff personnel files need an up to date photograph of staff working for the agency.
4	ADS3	The agency should develop a more formalised written format regarding the progress of a referral, with more built in reviews and closure meetings with referring agencies

		with the staff at PAC.
5	ADS4	The agency's policy and procedure for accessing services should state more clearly that any service users approaching the agency should be advised of their right to apply for an assessment of need for adoption support services from their respective local authority.
6	AD16	The agency should revise the current complaints and representations leaflet to more accurately reflect the current policy and procedure, which does not place a time limit on a service user complaining to the agency.

Commission for Social Care Inspection

North West Regional Office 11th Floor West Point 501 Chester Road Old Trafford M16 9HU

National Enquiry Line: 0845 015 0120

Email: enquiries@csci.gsi.gov.uk

Web: www.csci.org.uk

© This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI