



*Making Social Care
Better for People*

inspection report

ADOPTION SERVICE

Hampshire County Council Adoption Service

**Trafalgar House
The Castle
Winchester
Hampshire
SO23 8UQ**

Lead Inspector
Sally Woodget

Announced Inspection
23rd November 2005 09:00

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

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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 establishment are those for *Adoption*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

Every Child Matters, outlined the government's vision for children's services and formed the basis of the Children Act 2004. It provides a framework for inspection so that children's services should be judged on their contribution to the outcomes considered essential to wellbeing in childhood and later life. Those outcomes are:

- Being healthy
- Staying safe
- Enjoying and achieving
- Making a contribution; and
- Achieving economic wellbeing.

In response, the Commission for Social Care Inspection has re-ordered the national minimum standards for children's services under the five outcomes, for reporting purposes. A further section has been created under 'Management' to cover those issues that will potentially impact on all the outcomes above.

Copies of *Every Child Matters* and *The Children Act 2004* are available from The Stationery Office as above.

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SERVICE INFORMATION

Name of service Hampshire County Council Adoption Service

Address Trafalgar House
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Winchester
Hampshire
SO23 8UQ

Telephone number 01962 841841

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Provider Web address

Name of registered provider(s)/company (if applicable) Hampshire County Council

Name of registered manager (if applicable) Karen Parkinson

Type of registration Local Auth Adoption Service

No. of places registered (if applicable) 0

Category(ies) of registration, with number of places

SERVICE INFORMATION

Conditions of registration:

Date of last inspection N/A

Brief Description of the Service:

Hampshire is a large shire county, which operates a County Adoption Team, and an Adoption Support Team based in Swanwick and three Permanency Teams each in a different geographical area of the county. The whole service is managed by an operational service manager who provides oversight and supervision to the managers of these teams. A second service manager also provides a strategic development role for the family placement service. The County Adoption team prepares and assesses prospective adopters and supports them from placement through to the adoption order. The adoption support team provide counselling and support to adoptive parents and adoptive children post order. The inter-country service provision has recently been transferred to an independent provider, Parents and Children Together (PACT) via a service level agreement. The permanency team's role is to progress plans for children to ensure they are prepared for adoption and to work with other family members to ensure they understand the process and receive counselling and support. The service operates four adoption panels which each meet monthly to ensure timeliness in plans for children. An Adoption adviser oversees the recruitment training and administration of these panels.

SUMMARY

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

Three inspectors undertook the inspection over 3 1/2 days. Three adoption panels were also observed and interviews undertaken with the agency decision maker, two panel chairs and a legal adviser prior to the inspection fieldwork. The inspection undertook analysis of pre-inspection material including one questionnaire from a birth parent, 10 from specialist advisers (including sessional staff), 14 placing social workers, 3 placing authorities and 12 adopters. The fourth Panel was observed and a further panel chair was interviewed and interviews were undertaken with key staff in all teams, managers and an elected member. A sample of cases was chosen and four adopters each with children in placement were interviewed. Two birth parents were also interviewed as part of the inspection process. Also included was an inspection of records of the agency and an analysis of administrative and resource matters, including premises, record keeping and security. Everyone involved in the inspection was helpful and courteous to inspectors and the facilities and resources provided were of good standard. The preparation for the inspection by the agency performance manager and senior staff was thorough.

What the service does well:

Hampshire adoption service employed a number of very experienced and well-qualified staff members who were committed and enthusiastic in carrying out their work.

Service managers were aware of the gaps in service provision and have been proactive in developing projects and setting up initiatives to improve service delivery and improved outcomes for both adopters and children, for example;-

- arrangements to provide opportunities for adopters to acquire more hands-on childcare experience,
- arrangements to develop a mediation service to assist in setting up direct contact plans,
- arrangements to improve recruitment of adopters for "hard to place" children,
- arrangements to provide further training for adoption social workers on attachment style interviews,
- arrangements to provide educational services to support adopters and
- arrangements to appoint a marketing officer to develop and operate a recruitment plan for adopters.

The agency operates four adoption panels per month who are able to progress children's plans in a timely manner. The administration of the panels was excellent and the quality of the minutes good.

Training provided for adopters was reported to be of a good standard, one adopter stated, "it opened my eyes", another that the training was "excellent".

Adopters reported that their assessments were sensitively undertaken, and a number of commendations were received from adopters about their individual social workers.

It was clear that as much information as was available on children was shared with adopters to help them consider a possible match. Medical advisers spend some time discussing the child's medical background with adopters prior to that match being made and adopters value this opportunity and guidance.

Other placing authorities reported that their experience of Hampshire adoption service was good and child focused.

The letterbox scheme run by the adoption support service was well organised and support was offered to the birth family members who required it.

There was evidence of good work being undertaken by childcare social workers regarding life storybooks.

Training for childcare staff on adoption issues was well received and comprehensive. Training opportunities were seen to be good and staff were encouraged to undertake a post qualifying award in social work.

The arrangements for the security and storage of archives in the County record office were excellent.

What has improved since the last inspection?

This was the first inspection of Hampshire adoption service.

What they could do better:

The agency need to improve the practices in relation to the safety and security of children; in particular, arrangements for appointing any staff who work for the purposes of the agency need to be more robust in ensuring the references and checks have been undertaken.

Further attention must also be paid to ensure proper child protection processes and procedures are pursued following the allegation of abuse and that these are recorded and filed appropriately.

The management of staff needs to be reviewed urgently to ensure effective organisation, appropriate levels of staffing and efficient processes to provide a more cohesive and integrated service. This is due to the number of concerns about, for example:

- levels of communication and consultation across the service,
- amount of equipment and administrative support,
- the quality of supervision of some staff,
- many staff feeling overwhelmingly undervalued,
- the isolation of adoption social work staff,
- the lack of fully integrated planning when creating new initiatives,
- inconsistencies in practice across the county,
- inconsistencies within the four adoption panels,
- staffing levels within adoption support and community therapy services,
- the difficulties in identifying all children who require an adoptive placement ,
- the mismatch between approved adopters and a range of children waiting for placements.
-

The agency also needs to develop and define written strategies, concerning a number of areas of responsibility, such as;

- the implementation and evaluation of recruitment of adopters (ensuring a more welcoming and inclusive approach);
- written procedures for the number of and range of references required when undertaking adopter assessments;
- the facilities and services provided to support both adopters and children in placement and the facilities and services provided for birth parents and birth family members both before and after the adoption order.

Once developed the agency need to ensure these policies are fully implemented.

Information for approved adopters needs to be developed to take into account the uncertainties and insecurities adopters feel whilst going through the linking, matching, introductions and placement process.

A number of issues around the operation of the panel were picked up, in particular; the need to challenge the sometimes unhelpful style and language used in children's assessments.

Further work needs to be undertaken to ensure the files of adopters and children contain appropriate information as required by the regulations and to ensure that these files are audited regularly and remedial action taken when necessary.

The agency needs to consider the safety and security of open case records held at different geographical locations and to ensure that the risk of fire and water damage is minimised.

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

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

DETAILS OF INSPECTOR FINDINGS

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Being Healthy - There are no NMS that map to this outcome

Staying Safe

Enjoying and Achieving

Making a Positive Contribution

Achieving Economic Wellbeing - There are no NMS that map to this outcome

Management

Scoring of Outcomes

Statutory Requirements identified during the inspection

Staying Safe

The intended outcomes for these standards are:

- The agency matches children with adopters (NMS 2)
- The agency assesses and prepares adopters (NMS 4)
- Adoptors are given information about matching (NMS 5)
- The functions of the adoption panel are as specified (NMS 10)
- The constitution and membership of adoption panels are as specified (NMS 11)
- Adoption panels are timely (NMS 12)
- Adoption agency decision is made without delay and appropriately (NMS 13)
- The manager is suitable to carry on or manage an adoption agency (NMS 15)
- Staff are suitable to work with children (NMS 19)
- The agency has a robust complaints procedure (NMS 24 Voluntary Adoption Agency only)

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

2 ,4, 5, 10, 11, 12, 13, 15, and 19.

The lack of a comprehensive, robust recruitment system for staff and the standard of some work, particularly the agency's response to managing allegations of abuse, leave children insufficiently safeguarded.

EVIDENCE:

The agency does have a recruitment strategy, which identifies the numbers and ages of children waiting for an adoption placement and the skills of adopters who need to be targeted for recruitment. However the strategy does not include plans for the implementation and evaluation of effective strategies to recruit sufficient adopters. There is currently a mismatch between the skills, abilities and approved age ranges of the adopters, and the significant number of children waiting for an adoptive placement. One adopter stated that "the age range and number of children you were approved for seems to be manipulated by staff to suit the children coming through rather than really looking at your abilities". The agency need to consider attracting adopters with the right skills, experience and abilities to care for the children waiting for adoption, rather than persuading adopters to adopt children outside their range of capacity.

There are plans to appoint a marketing officer to address this problem but this plan had not been ratified at the time of the inspection and this is recommended.

A pilot project is also being planned in the north of the county to develop the family finding role with responsibility for pursuing links with other agencies, organising "profiling" events and adoption exchanges. Further work however needs to be undertaken to ensure that strong links are maintained between these staff and the adoption team to provide thorough communication, cohesiveness and consistency of service.

Staff tended to talk about adoptive "couples" indicating a possible bias against single or gay and lesbian carers and further work needs to be undertaken on the written information provided to adopters to ensure an inclusive and welcoming approach to gay, lesbian and single prospective adopters.

Mechanisms for the early notification of children regarding adoption plans were evident through the adoption monitoring meetings, and spreadsheets made up by administrative staff in permanency and adoption teams. Independent reviewing officers and family support teams also made referrals to permanency team managers and legal services also reported on all children where care proceedings were being undertaken. There was some inconsistency however and some staff expressed concerns that they were not entirely sure how many children were waiting. In one case it was noted that a sibling group had had a best interest decision "in principle" made in 2003 that was not confirmed for two years. In another case the rescinding of a match had taken nearly a year. In another case a very young child had waited two and a half months following the full care order in court, to come to panel for the best interest decision. These examples indicate that the monitoring of children's plans to prevent delay needs tightening up to ensure good outcomes for children. Further work therefore needs to be done in this area to ensure a more robust approach to identifying and monitoring children for whom adoption is the plan.

Matches of children with adopters took into account the need to reflect the ethnicity and culture but in one case it was felt that not enough family finding had been carried out to secure a placement with the right religious background. Managers need to be mindful of this when carrying out linking meetings.

There was evidence of inconsistent practice across the county when assessing sibling attachments. There was some good written guidance for panel and staff members about this matter, however this guidance did not include advice on how many visits should be made in order to carry out a thorough assessment or indeed who was the best person to carry out this assessment. It is recommended that a qualified psychologist should carry out this skilled and very specific piece of work. It is also recommended that this person should be independent of the case in order to avoid subjective assessments.

The inspection process highlighted a number of cases where child protection issues had not always been managed in an appropriate manner. In one case, allegations of child abuse relating to a carer, had not been disclosed to the panel for consideration of a match. In another case allegations of child abuse were made and there was no evidence that proper procedures had been followed to investigate the matter. Information provided to a panel requesting deregistration of carers did not make reference to the need to carry out a Protection of Children Act (POCA) referral. A further case of an allegation of abuse, discussed with staff, indicated that they were unclear about proper procedures to follow. In another case the panel agreed to a match with adopters approved by another agency, who had not been appropriately CRB checked. As a result of these examples there was considerable concern about the safety of children in the service. Senior managers need to ensure that all staff and panel members have had appropriate training and are clear about the Child Protection policies and procedures. Further work also needs to be undertaken to ensure that allegations of abuse are managed appropriately, in a multidisciplinary meeting in the spirit of "Working Together" to ensure children are fully protected and their welfare safeguarded.

The practice of "blind sightings" by prospective adopters to children to be matched with them was used by the agency on occasions, where children were considered "hard to place". Three examples were seen, in one case the "blind sighting" had moved on into a situation where adopters had been given an opportunity to have "hands-on" experience of the children. In another case the prospective adoptive parent was having regular visits to the child. In another case adopters had not proceeded with the placement after formal introductions, due to the considerable needs of children in question. "Blind sightings" create a dilemma for the panel whose place it is to consider all the evidence before making a recommendation about a match. Where adopters have contact with the children beforehand, the panel are in a difficult situation if they feel the evidence concerning the match is lacking. It is also possible that adopters may fail to hear some of the relevant information, which may have implications for them about caring for the child longer term, as they become emotionally involved in meeting the child, as one case clearly illustrates. The staff involved in such practice reported to feel "uncomfortable" with the process and other staff felt that such practice was "disrespectful" to children. This practice runs counter to the spirit of consultation and openness enshrined in the 1989 Children Act and is contrary to Article 12 of the United Nations Convention on the Rights of the Child. It is recommended that this practice cease immediately.

The majority of adopters reported that they were happy with the training course provided by the agency, one adopter said it "opened their eyes" another stated that it was "excellent". A number however reported that the information evenings and the training course conveyed an overly negative side to adoption. One adopter felt that this was the way the agency could weed out the fainthearted. Whilst the challenges of caring for a child with a traumatic

past needs to be underlined it is important to emphasise the skills and competencies that adopters will need to be able to manage these. Adoption staff reported that the number of prospective adoptive referrals had dropped, and the dropout rate from preparation and training courses had risen. These trends need to be examined and systems reviewed to ensure the right people are recruited and selected.

Staff expressed concern about a lack of financial budget available in order to; up date training materials, to purchase equipment and to provide appropriate venues to carry out such training courses. One adopter with a disability felt that her specific needs had not been addressed during the training course, which was discriminatory.

A considerable number of adopters reported delays in processing their application through the different stages.

Nearly all the placing social workers were pleased with the assessment that adopters have experienced but a number felt that these courses needed to include more on child behaviour and attachment issues.

Senior managers have responded to concerns about the lack of childcare experience of most prospective adopters and have recently set up a programme with Sure Start to provide prospective adopters with the opportunity to develop such experience in a formal learning module. This development needs to be regularly reviewed to ensure it provides the expected outcomes.

Prospective adopters were asked to provide feedback on the training course and whilst it was evident that this information was taken into account by the trainers, formal evaluation was not carried out on a regular basis and this is recommended.

The assessments of prospective adopters are detailed and include a competency-based approach however the quality of these assessments is variable. Assessments on the whole need to be more analytical and less narrative based, and need to avoid assumptions. All cues need to be explored, gaps in CVs explored fully and thoroughly documented. It is suggested that chronologies are undertaken on all prospective adopters, which include their work, education and training, social and personal events and medical issues. Examples of such chronologies can be found in use with other adoption agencies.

Adoption staff assessing prospective adopters were not all carrying out the same references. In some cases references had not been undertaken from the schools of birth children or from employers. CRB checks had not always been executed on members of the extended family who were providing care for children placed for adoption. Social workers need to explore all support

networks of adopters and identify who will have direct contact with children and ensure that CRB checks are carried out to thoroughly ensure the safety of children placed.

Health and safety checks were rather limited and did not include reference to firearms. Furthermore risk assessments relating to dogs and dangerous pets were not evident, despite dogs being part of the adoptive family. It is recommended that a pro forma document is used to clearly state the range of different references which need to be undertaken for each assessment. It is also recommended that the health and safety checks are reviewed and that social workers receive appropriate training in carrying out risk assessments in this area.

In some cases issues of diversity (in particular sexuality issues) were not well addressed.

Adopters reported that the social worker undertaking assessments were sensitive and helpful. One adopter said "our social worker was fantastic!" another that "our social worker was understanding, honest and compassionate". Another adopter stated "our social worker had lots of experience and gave us confidence in the system" and another stated "our social worker is someone we can rely on to talk too with honesty about our anxieties".

Nearly all placing social workers praised the adopter assessments and felt they were clear and helpful. One social worker felt that the assessment should however adopt a more analytical approach to the attachment style of the adopters, another felt that they should be more child focused.

Senior managers were aware of the need for their staff to be more analytical when undertaking prospective adoptive assessments and have begun to explore, providing further training for their staff on adult attachment style interviews. Adoption staff indicated a willingness to develop their practice in this area in order to improve the quality of their assessments.

Adopters intending to adopt from another country are referred to PACT with whom the local authority has a service level agreement.

The quality of information provided to approved adopters about the matching, introduction and placement process is poor and this needs to be developed.

It was evident that adopters are given as full information as is available on children before a match is agreed. Medical advisers regularly see adopters before a match is made and in one case a recommendation about a match was deferred by panel to ensure that adopters had an opportunity to meet the medical adviser to ensure that they fully understood the implications for them and their family. This practice ensures good outcomes for children and is

commendable. Prospective adopters also have the opportunity to meet the child's present caregiver prior to a match being agreed.

Concerns were raised about the number of placements children may have had prior to being placed for adoption, as well as the number of changes in their social worker. In such instances, valuable information is often lost on children that may be helpful to prospective adopters and ensure the success of any placement. Child Appreciation Days have been used in the past but this is not usual practice. It is recommended that a policy and procedure is developed to ensure this practice is carried out for children where there have been a number of changes in their care history, to ensure that as much information as is possible is provided to prospective adopters.

The process of matching was not always fully understood. One social worker felt that the linking meeting was "muddled, prescriptive and unfriendly" another felt that the matching process confused the adopters. There was evidence in one case that a childcare social worker believed that the match was made by the court. Further work and training is therefore identified for social workers about the matching process.

Other placing authorities reported good experiences on matching children with Hampshire adopters, one stated "the service was excellent, with very good levels of contact and support" and another stated that there was "good attention to detail and (the service) was very child focused".

The adoption agency operates four adoption panels per month each with its own panel membership. It was evident that emergency panels were convened when necessary to prevent delay in children's plans.

The adoption Panel policies and procedures need further amendments and additions in order to fully comply with standards and regulations. For example procedures for managing; the appointment of the panel chair and vice-chair; decision-making and panel members are not in agreement; emergency procedures; evidence of feedback to the agency; the promotion of good practice and progress reports need to be completed.

Issues about how to handle declarations of interest from panel members need to be more strictly managed to ensure appropriateness of participation and quoracy issues. It was noted on occasions the panel was not quorate and the professional adviser had to be co-opted as a panel member. This is not considered safe practice and should be discontinued.

Issues regarding the management of inappropriate behaviour and comments by panel members also need to be addressed more rigorously.

Information on the composition of panels also needs to be amended to fully comply with the regulations. If the panel is to continue considering recommendations for carers for concurrency placements (foster adopters)

and long-term fostering, then it must also be constituted under the Fostering Regulations 2002.

The administration of the panels was excellent, papers were well-organised and sent out to panel members in good time. The panel minutes were a good reflection of the discussion and the reasons for recommendations were clear.

There was some inconsistent practice across the four panels and it is hoped that the arrangements for chairing panels, which are planned for the New Year under the new regulations, will ensure better management of these inconsistencies.

Panel members did not always get feedback formerly regarding the outcomes of recommendations that they had made. Three specialist advisers commented that the audit of outcomes and feedback to the panel members should be improved.

A quarterly meeting of the Adoption Policy and Practice Forum did however provide an opportunity for panel chairs and team managers to reflect on practice issues which impact on the Adoption Panels.

It was felt that the panel needed to be more robust regarding challenging negative and unhelpful language used about birth families in the forms presented to the panel.

All the panels participated in the practice of making recommendations about children's best interests "in principle". It is the Commission's view that the panel should make a clear recommendation based on all the information presented to them. If they are not happy with the information then the panel should defer the recommendation. The practice of making in principle decisions meant that cases had to return to panel for the recommendation to be confirmed which considerably increased the workload for panels. One specialist adviser felt that panels were pushed to get the work through, due to the pressure of work and in order to prevent delay for children. This matter needs to be addressed to ensure that panels are considering the safety and welfare of children as the overriding factor of importance. The panels are also involved in approving care plans for children again it is not considered that this is the role of the panel.

The Panel members' files did not show evidence of safe recruitment practices. A number of panel members had not been CRB checked and the information required in respect of people working for the purposes of the adoption service was not available as outlined in Schedule 3 and 4. Panel members also need to have signed confidentiality agreements.

The agency decision maker is a senior manager within Hampshire's children's services. It was clear the decision maker took into account all the information

surrounding the case and that the decision was made in a timely manner in order to prevent delay in children's plans.

A feedback form is received from each attendee at the panel, and these should be used to formally evaluate the performance and practice at each panel and inform any future changes.

The recruitment practices for managers and staff must be managed more robustly to ensure the safety and welfare of children. All staff employed for the purposes of the adoption agency including sessional staff and panel members, must have satisfactory enhanced CRB checks in place and all other status checks and references undertaken before they begin work. This also applies to any administrative staff for whom the standard CRB check is required (though an enhanced CRB check would be considered good practice). A number of staff undertaking sessional work for the agency reported that the agency had done nothing to ensure that they had the right skills, experience or appropriate qualifications to carry out specific pieces of work directly with children or adopters.

No CRB, references or checks had been undertaken for sessional workers and was no evidence of telephone verification of references on personal files. This must be carried out immediately to ensure the safety of all children.

Enjoying and Achieving

The intended outcomes for these standards are:

- The adoption agency provides support for adoptive parents (NMS 6)
- The agency has access to specialist advisers as appropriate (NMS 18)

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

6 and 18.

Support to adopters needs to be improved to ensure children placed are able to fulfil their potential within their adoptive placements.

EVIDENCE:

Hampshire children's services have a separate Adoption Support Team who undertake work with adoptive families and children placed for adoption. They also carry out birth records counselling and other intermediary work. This work is in great demand and the team carry a waiting list for birth records counselling. Staffing levels in this team must be regularly reviewed to evaluate the level of referrals and complexity of the work to be undertaken in this growing area

Staff in the County Adoption Team support adopters from placement through to the adoption order.

There was some evidence that adoptive families delayed applying for an adoption order due to concerns about the level of support after the order was made. Some adopters who had been approved and were awaiting a placement felt that there was not enough contact following approval. One adopter stated, "I feel as if I have been treated as a resource rather than a person with needs and feelings" another stated "now I've been approved they are not interested". It is crucial that social work staff continue good links with adopters waiting for placements to ensure that the working relationship is sustained and trust is maintained.

Adoption support plans indicated a lack of knowledge on behalf of staff completing them about what was available for adopters and children placed.

Following placement some adopters felt they did not receive as much support as they required, one adopter stated "there was no schooling provision for my

child and no help in appealing against the Education Department's decision". One placing social worker felt that "more therapy was required for a child with behaviour difficulties to avoid breakdown of the placement" another "help for adopters came too little too late".

Senior managers have undertaken an evaluation of all recent disruptions, highlighting the themes and trends and making recommendations for future practice in undertaking assessments. This is good practice as it ensures better outcomes for children placed. This document now needs to be used as a training tool for staff involved in all areas of the adoption work.

A community therapist post is linked via the CAMHS service in each of the permanency teams. Unfortunately at the time of inspection not all these posts were filled and there was some concern about the lack of therapy available to children both pre-and post-placement. However these posts were considered to be invaluable and were well used. Staff felt that if even all these posts were filled there would still be inadequate time available for the therapy of all children who required it. The service managers need to regularly review and evaluate how this service is working and determine if staffing levels need to be altered to meet demand.

Senior managers are aware of the need to develop further services in relation to adoption support and a number of measures have been taken to bolster existing arrangements.

The agency have recently developed a service level agreement with "Adoption UK" in order to develop support groups and provide ongoing training for approved adopters.

The education service "CLASS" have recently set up a consultation service for adopters. It is also hoped that members from this team will be involved with the adopter preparation groups and talk about the ways in which attachment difficulties impact on school achievement, as well as offering practical ways of helping with school admissions, school exclusions and homework issues.

The agency have also recently proposed developing the role of support workers within the adoption team, to provide practical support to adoptive families following placement, particularly in relation to sibling placements. The agency need to be clear about the development of this role to ensure that staff have the appropriate skills and experience to carry out this work.

A family mentoring service is being developed in one area within the county, which would be available to provide support to adoptive families.

These proposals need to be joined up with other work going on within the adoption support arena, and included into a detailed written strategy of adoption support services and facilities. This needs to be shared with adopters

to ensure that they are aware that is normal to continue to need assistance and to encourage them to seek support when they are struggling, without anxiety or fear of being seen as a failure.

The adoption support team operate the "letterbox" scheme between birth families and adoptive families, and the arrangements for administration of this service are good.

The service provided by medical advisers and legal advisers was good. Adopters valued the opportunity to meet with medical advisers to discuss any issues regarding the child to be placed. Medical advisers and legal advisers provide a valuable and committed service to the adoption panels.

The legal adviser is proactive in working with senior managers and undertaking regular meetings with local CAFCASS, the Court Users Group and the Court Forum to prevent delay in children's plans and improve outcomes.

Whilst protocols for specialist advisers exist not all medical advisers were aware of these. Two medical advisers clearly felt "overused". It is important that senior managers from both Health and Children's Services evaluate and monitor the work undertaken by medical advisers.

Making a Positive Contribution

The intended outcomes for these standards are:

- Birth parents and birth families are involved in adoption plans (NMS 7)
- Birth parents and birth families are involved in maintaining the child's heritage (NMS 8)
- The Adoption agency supports birth parents and families (NMS 9)

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

7,8,and 9.

The service to birth families is not sufficiently developed which affects the quality of information available to children as they grow up.

EVIDENCE:

There was evidence of some good work being done by childcare social workers with birth parents and birth family members and some good life story work being undertaken with children (copies of which were kept on child's adoption file.)

Some birth parents had the opportunity to receive counselling and valued this service. Leaflets had recently been introduced for birth parents and other family members explaining the process of adoption and offering opportunities for support and counselling. Senior managers described liaison work, which had been carried out with local advocacy services to provide support and counselling for birth family members. These advocacy groups represented adults with learning disabilities, mental health and substance misuse issues.

The panel were good at raising issues regarding birth families with childcare social workers and were happy to receive information directly from family members regarding plans for their children.

A social work assistant within the adoption support team had responsibility for assisting some birth parents with writing letters to their children.

Support for birth family members was however inconsistent. The forms E on children had been written by childcare social workers who often had little knowledge of the child or the child's family, and it was evident that in most instances these forms had not involved birth family member input or been

seen by them. A number of forms E contained negative and stigmatising language about the family members and panels need to be more robust in challenging this.

Some cases revealed that childcare social workers had not fully understood the implications of contact and were unrealistic regarding the support needs of birth family members in this matter. In one case there was evidence that little thought had gone into managing a direct contact arrangement, causing distress for both birth family member and adopter alike. In one case a birth family member reported, "Direct contact had been stopped and I was not told that this could happen". In another case a birth family member stated, "we were brushed aside". The agency needs to develop a comprehensive policy and procedure for managing direct contact arrangements to ensure proper planning, preparation and debriefing needs are met.

Senior managers have recently approached the courts with a plan to develop a mediation service regarding issues of contact between birth family members and their adopted children/families and this it is hoped will improve outcomes.

Present arrangements do not provide for support or counselling services once the adoption order is made. Senior managers have responded to this and are looking at developing a service level agreement with an independent organisation to provide support and counselling services to birth family members at any stage in the adoption process.

The agency need to develop a clear written strategy for working with birth parents and birth family members before and after adoption, including providing information about local and national support groups. These services and facilities then need to be described within the agency's Statement of Purpose.

Management

The intended outcomes for these standards are:

- There is a clear written statement of the aims and objectives of the adoption agency and the adoption agency ensures that it meets those aims and objectives (NMS 1)
- The agency provides clear written information for prospective adopters (NMS 3)
- The manager has skills to carry on or manage the adoption agency (NMS 14)
- The adoption agency is managed effectively and efficiently (NMS 16)
- The agency is monitored and controlled as specified (NMS 17)
- The staff are organised and managed effectively (NMS 20)
- The agency has sufficient staff with the right skills / experience (NMS 21)
- The agency is a fair and competent employer (NMS 22)
- The agency provides training for staff (NMS 23)
- Case records for children and prospective / approved adopters are comprehensive and accurate (NMS 25)
- The agency provides access to records as appropriate (NMS 26)
- The agency's administrative records processes are appropriate (NMS 27)
- The agency maintains personnel files for members of staff and members of adoption panels (NMS 28)
- The premises used by the adoption agency are suitable for purpose (NMS 29)
- The adoption agency is financially viable (NMS 30, Voluntary Adoption Agency only)
- The adoption agency has robust financial processes (NMS 31)

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

1,3,14,16,17,20,21,22,23,25,26,27,28 and 29,

Management practices and style, as well as management processes and procedures needs to be reviewed to ensure an effective and efficient workforce who are able to focus on improved outcomes for children.

EVIDENCE:

The Children's Services Policy Review Committee approved the Statement of Purpose in July 2005. A few amendments and additions need to be made to

the Statement of Purpose in order for it to fully comply with the standards and regulations, for example; services and facilities to birth family members; section 51 counselling and adoption support services need to be described in more detail. The arrangements to monitor the effectiveness of the adoption agency need to include information about the quality assurance role of the panel, business plans and agency targets. The address of the Commission for Social Care Inspection should be the Adoption Inspection Team based in Manchester.

The agency has been using the BAAF Children's Guide with additions, for older children to be placed for adoption and have recently produced (during the inspection fieldwork) a new guide for younger children. These guides fully comply with the regulations and standards. More recently a member of the adoption staff has created an "adoption game" which provides a creative and interactive way for young children to learn about the process of adoption. The agency must now ensure that each child with a plan for adoption, each childcare social worker with responsibility for a child and each adopter receives the guide.

Nearly all Hampshire's adopters are white heterosexual couples and the information provided to prospective adopters seems to reinforce this message. Amendments and additions to the information need to be made to ensure the recruitment strategy is open, welcoming and inclusive to adopters. Staff need to be consulted on or given the opportunity to contribute to these documents to ensure the information provided fits with current practice. As stated earlier this information needs to link with the recruitment strategy and include a positive emphasis on the skills, abilities and experiences that prospective adopters will need, to manage the needs of children who have had a troubled past.

The senior managers operating the adoption service are well qualified and experienced. Both the strategic and the operational service manager have appropriate management qualifications. Hampshire County Council continue to provide training called "leading success" to reinforce management skills and abilities. There are clear roles for managers and well-established lines of delegation and accountability.

The inspection revealed however concerns around the lack of communication and consultation both across the department and up and down the hierarchy. One adopter reported that the "main structure was too hierarchical... with too many layers between the social worker and the decision-makers". Another adopter stated, "staff openly criticise their own systems but nobody takes a stand to sort these out - they just accept the inflexibility of the system!". Staff need to be consulted and provided with an opportunity to contribute to documents or initiatives which have a significant impact on their working practice.

A significant number of staff across the service reported feeling undervalued, unsupported and not trusted.

Some staff felt that their time was heavily controlled giving rise to the feeling that they were untrustworthy. (Whilst issues about health and safety matters and lone working may have been responsible for such measures, this was clearly not communicated to staff.)

There was evidence of creativity and enthusiasm among staff for the work they had to undertake, but were no mechanisms for staff to get involved or take part in developmental improvements.

It was felt that the structure of the service was not providing a cohesive or integrated approach and it is recommended that senior managers review the arrangements considering, above all, positive outcomes for children for whom adoption is the plan. A system needs to be developed to provide for this, as the present structure is unwieldy with many staff having overlapping duties and responsibilities. It was difficult to determine whether therefore there was enough staff to carry out the responsibilities of the agency. As a reorganisation is underway within the children's department and new legislation is about to be implemented, this is a good time to review the structure and job descriptions of all staff.

The Adoption team reported feeling isolated and the assessments of adopters were considered to be too adult focused. Senior managers had recognised this problem and had recently set up a system of "swaps" between childcare social workers and adoption social workers to develop better links and create better understanding of each other's work. Adoption social workers interviewed had valued this initiative and felt it had been useful and informative.

Adoption social workers do not however have responsibility for working with children, nor do they have any family finding responsibility for children, and nor are they involved in linking meetings (unless one of their adopters is selected as a match.) It is suggested that if adoption social workers were involved in a range of adoption activity including family finding for children and birth records counselling, this would ensure a better understanding of the range of skills experience and abilities which adopters will need to care for a child with a troubled past.

There are procedures for monitoring and controlling the activities of the adoption agency and ensuring quality performance, however these procedures need to be written down and included in the agency's statement of purpose. Hampshire Council have an active lead member for children's services who is well informed about the activities of the adoption agency having read the Annual Adoption Agency Report, the Annual Performance Assessments and Performance Indicators, and other information. Young people who are looked after by Hampshire are invited to participate in the Care Action Team and are consulted about improvements to children's services.

Issues about the sufficiency of administration support and equipment are causing concerns in the Adoption team and within some of the permanence teams. Sharing computers between two or three members of staff, photocopiers unable to cope with the sheer amount of use, and the introduction of "swift" and its compatibility with other computer systems were the main areas of difficulty. Some social work staff reported undertaking administrative jobs and one example of this was social workers carrying out the payments for foster carers. Responsibility for managing financial arrangements was also raised as a concern for one manager. Involving qualified social work staff in carrying out administrative and other financial administrative tasks is not the best use of their skills and abilities and this practice should be reviewed.

A number of staff reported that supervision was task centred, lacked an analytical approach and failed to challenge their professional practice. Several specialist advisers returned questionnaires expressing concerns about the experience of childcare social workers and the lack of supervision and management that they received.

There was good evidence that staff were encouraged to undertake the post qualifying awards in social work. Staff reported that corporate training was good providing a number of opportunities for childcare staff to undertake specific courses in;-permanency planning, working with birth parents, letterbox, adoption panel training, engaging with children, life story work etc... There was also evidence that social workers within the County Adoption Team had recently undertaken training in undertaking assessments and looking at risks involved in placements. As stated earlier further training is being considered in relation to attachment style interviews. New strategy is also presently being developed within the children's department known as "evidence informed practice" and this will assist in determining the training needs for individual staff in the future.

Most staff reported that Hampshire was a reasonable employer and that policies and procedures relating to working practices in respect of leave, sickness, grievances and disciplinary matters together with a "whistle blowing" policy was available to all staff. A number of staff felt that the department could provide more flexible working conditions and provide them with better equipment for carrying out their jobs, for example, mobile phones.

The local authority has been addressing issues regarding recruitment and retention of staff and a number of measures have been put in place. The impact of "golden handshakes" has created some tensions between new and long-standing members of staff and this policy therefore needs to be reviewed.

The agency needs to consider the ways in which they manage case records for adopters and for children to be placed for adoption. A number of documents were found on adopters' files we should have been located on the child's file

and vice versa. Social workers reported that it was unclear which documents should be filed and where the document should be located within each file. Presently the contents list is a generic one which does not fit appropriately with adoption work and it is recommended that one is produced specifically. Contemporaneous notes need to be consistently kept on the adopters' files. These files also need to contain separate dividers to contain any information on allegations or complaints.

A process for the auditing of files has been set up but was not in use on the files that were seen. This process needs to be fully rolled out in all teams and evidence of this activity needs to be kept on the relevant files. There was also no evidence on the files of team manager oversight or of any decisions by supervisors. However written entries in records were clearly expressed, signed and dated by social work staff. Some further work needs to be undertaken to ensure that handwritten entries are legible.

There were a number of concerns around issues of confidentiality regarding the case files. Panel agendas with the names of other adopters and children were on individual case files of both adopters and children. In one case the life storybook of another child was filed inappropriately and in another case the linking of a child with certain adopters, which had not gone ahead, had not been removed. In HR files confidential information was found regarding other staff members. One adopter reported that he had received a letter for the birth parent at his home address raising concerns about issues of confidentiality and fears that his details they have been passed to the birth parent. Clearly such issues are important to ensure the safety and security of children placed but also consideration needs to be given to the fact that each child will have access to their adoption file should they wish in the future.

The agency reported that 18 complaints had been received by the adoption service in the last 12 months. Those complaints that were seen provided evidence that the agency were managing these in a timely and sensitive manner. However there were concerns that both these complaints and any child protection allegations (a few were picked up during the inspection process) had not been monitored by the managers in order to pick up any themes, trends or issues or to inform future practice. There was also no system for ensuring separate records were kept of any child protection allegations regarding prospective adopters and this needs to be put in place immediately.

The adoption service including the permanency teams is spread over five different geographical sites across Hampshire. The quality of premises was variable. In one area the premises were cramped and there was concern regarding the storage of files. The adoption support team was spread across two buildings and this was felt not to be conducive with effective and efficient working arrangements. It is suggested that a risk assessment is carried out to ensure minimal risk of fire or water damage to open children's adoption files

and adopters files across all teams and that appropriate security alarms are put in place at the County Adoption team.

The processes and procedures for managing the archiving of adoption files are good. The adoption archives are held within Hampshire record office, which conforms to appropriate B. S. standards and is atmospherically controlled. Hampshire record office also has an emergency plan for recovery and salvage of records in the event of a disaster. The council's own disaster recovery plan needs however to mention the arrangements for ensuring the safety of open adoption files.

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

BEING HEALTHY	
<i>Standard No</i>	<i>Score</i>
No NMS are mapped to this outcome	

MAKING A POSITIVE CONTRIBUTION	
<i>Standard No</i>	<i>Score</i>
7	2
8	2
9	2

STAYING SAFE	
<i>Standard No</i>	<i>Score</i>
2	1
4	2
5	2
10	1
11	1
12	3
13	3
15	1
19	1
24	N/A

ACHIEVING ECONOMIC WELLBEING	
<i>Standard No</i>	<i>Score</i>
No NMS are mapped to this outcome	

ENJOYING AND ACHIEVING	
<i>Standard No</i>	<i>Score</i>
6	2
18	3

MANAGEMENT	
<i>Standard No</i>	<i>Score</i>
1	1
3	2
14	1
16	1
17	3
20	2
21	2
22	2
23	3
25	2
26	3
27	2
28	1
29	2
30	N/A
31	N/A

Are there any outstanding requirements from the last inspection?

N/A

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Voluntary Adoption and the Adoption Agencies Regulations 2003 or Local Authority Adoption Service Regulations 2003 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action
1	AD2	LAA 9. (2) a, b & c	The agency must ensure that the written child protection policies and procedures are robustly followed to ensure thorough protection of children placed or to be placed for adoption.	01/01/06
2	AD2	Children Act	The Agency must ensure that the practice of "blind sightings" ceases.	01/01/06
3	AD11	AA Reg 5 (4)	The Agency must ensure that the panel is quorate at all times. The Panel must be constituted under the Fostering Regulations 2002 as well, if it is to consider plans for children who have a concurrency plan who are to be placed with foster/adopters or the recommendation of concurrency and long-term foster carers.	31/01/06
4	AD10	AA Reg 10	The agency's adoption panel must discontinue the practice of making	01/01/06

			recommendations "in principle".	
5	AD28AD19AD15	LAA Reg 11	The agency must ensure that all staff working for the purposes of the adoption agency, (including all administrative staff, panel members and sessional staff) have all checks and references carried out, and that evidence of this is held on their personal file.	10/02/06
6	AD1	LAA Reg 2	The agency must make some additions to its Statement of Purpose to ensure it fully complies with Schedule 1.	10/02/06
7	AD14	LAA Reg 10	The agency must ensure that there is a sufficient number of qualified, competent and experienced persons working for the purposes of the Adoption service.	31/03/06
8	AD16	LAA Reg 7	The agency must ensure that its service is managed with sufficient care, competence and skill.	10/02/06

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	AD2	The agency should develop a recruitment strategy, which includes 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. This strategy should also include the details of the pilot project and the ways in which this project work is linked to the rest of the adoption work.

2	AD3	The agency should ensure that people who are interested in becoming adoptive parents are welcomed without prejudice. Any staff preconceptions about who will best make good adoptive parents should be challenged to ensure an inclusive approach to single carers, older carers and gay and lesbian carers.
3	AD2	The agency should improve processes to develop a more robust approach to identifying and monitoring children for whom adoption is the plan.
4	AD2	The agency should ensure that it makes robust efforts to ensure that children are matched with adopters who best meet their assessed needs, in particular their religious needs.
5	AD2	The agency should ensure that a qualified psychologist, independent of the case, carries out all sibling relationship/attachment assessments.
6	AD4	The agency should ensure that any applicants with a disability are treated fairly and their needs are met so they can fully participate in the training and assessment.
7	AD4	The agency should ensure that it has a clearly set out preparation programme made available to all prospective adopters, which avoids delay in the process.
8	AD4AD4	The adoption agency should ensure that it regularly reviews and evaluates the outcomes of the "Sure Start" programme for prospective adopters. The effectiveness of the preparation programme should also be formally evaluated and reviewed annually.
9	AD4	The adoption agency should ensure a more analytical based approach to carrying out assessments. The assessment also needs to contain more investigation into the applicant's abilities to manage diversity issues (particularly sexuality issues.) An agreed policy about the number and range of references and checks should be agreed and implemented by the adoption staff.
10	AD5	The agency should ensure that it provides as much information as possible on the child to be placed for adoption; in particular it should develop a policy and procedure for the use of Child Appreciation Days.
11	AD5AD23	The agency should ensure that child care and adoption staff fully understand the matching process
12	AD10	The agency should ensure that the panel's policies fully comply with this standard. Panel policies concerning the handling of any declarations of interest

		and the management of inappropriate behaviour or language by panel members should be more robustly managed.
13	AD10	The agency should ensure the panel members receive progress reports on individual cases on a regular basis, in order for them to fully exercise their quality assurance function.
14	AD19	The agency should ensure that child care social workers receive further training, advice and guidance on the writing of a child form E document (including content, language and style) to ensure that it fully reflects the needs of its various audiences and functions and ensures a fair and accurate portrayal of the information provided.
15	AD10	The agency should ensure that feedback received by attendees of the adoption panel is formally evaluated to inform future practice.
16	AD19AD28AD15	The agency should ensure that telephone inquiries are made to verify the written references of all those working for the purposes of the adoption service, before they begin work.
17	AD21	The agency should ensure that the work of the adoption support team and community therapists is regularly reviewed, to ensure staffing levels are sufficient to meet the demand in this growth area.
18	AD6	The agency should ensure that it has a clear written strategy for working with and supporting adopters. This strategy should include all the recent developments across the department and must be shared with both adopters and staff. The agency should ensure that it improves the quality of the written information to approved adopters about the matching, introductions and placement of children
19	AD6	The agency should ensure that staff are fully aware of the services and facilities available to support adopters following placement and are helped and supported to complete the adoption support plans.
20	AD18	The agency together with relevant health services should ensure that the work of the medical advisers is regularly evaluated and monitored, and that the protocols reflect what has been agreed in this process.
21	AD9AD8AD7	The agency should develop a clear written strategy for working with birth family members both before and after adoption, including providing relevant information about local and national support groups.
22	AD9	The agency should develop a comprehensive policy and procedure for managing direct contact arrangements, to ensure proper planning, preparation

		and debriefing needs are met.
23	AD20	The agency should ensure that the professional supervision and consultation provided for social work staff provides an opportunity for reflective/analytical practice, as well as being task centred and the decisions agreed at annual appraisals are followed through.
24	AD21	The agency should ensure that adoption social workers have the opportunity to be involved in a broad range of adoption activity to enable them to develop a more child focused service.
25	AD19	The agency should ensure that the role of the proposed support workers in the adoption team is clearly defined, that these staff have the knowledge and understanding of the adoption process and that they are supervised appropriately.
26	AD20	The agency should ensure that the role of the professional/panel adviser is managed effectively to prevent confusion and inconsistent practices.
27	AD20	The agency should ensure that there is an adequate level of clerical and administrative support, office equipment and infrastructure, to enable staff to carry out their duties in an effective and efficient manner.
28	AD27	The agency should ensure that separate records are kept for the collation of complaints and allegations and that these are monitored regularly.
29	AD25AD27	The agency should ensure that the system used to monitor the quality and adequacy of records is "rolled out" to all adoption and permanency teams; that written entries are legible; and that decisions by supervisors are recorded on case files, signed and dated.
30	AD25	The agency should ensure that information is appropriately filed to ensure there is no breach of confidentiality.
31	AD25	The agency should ensure that a system is developed specifically for children's adoption files and adopters files that is relevant and appropriate for the information that is required to be stored there.
32	AD29	The agency should ensure that appropriate security systems are in place at all the identified adoption premises.
33	AD29	The agency's disaster recovery plan needs to address the issue of security of open adoption files held in different offices across the county. It should undertake a risk assessment on these files to ensure that damage by fire and water is minimised.

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