



Making Social Care  
Better for People

# inspection report

Local Authority Adoption Services

## **Derby City Council Adoption Service**

Social Services Department

Perth Street

Chaddesden

Derby

DE21 6XX

22nd March 2004

## **Commission for Social Care Inspection**

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

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

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

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

## **Inspection Methods & Findings**

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

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

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

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

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

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

**ADOPTION SERVICE INFORMATION**

**Name of Local Authority**

Derby City Council Adoption Service

**Headquarters Address**

Social Services Department, Perth Street, Chaddesden,  
Derby, DE21 6XX

**Adoption Service Manager**

Mohammed Jakhara

**Tel No:**

01332 717760

**Address**

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Derby, DE21 6XX

**Fax No:**

**Email Address**

**Certificate number of this adoption service**

**Date of last inspection**

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

<b>Date of Inspection Visit</b>		22nd March 2004	<b>ID Code</b>
<b>Time of Inspection Visit</b>		10:00 am	
<b>Name of Inspector</b>	<b>1</b>	Rosemary Chapman	075198
<b>Name of Inspector</b>	<b>2</b>	Lynn Smith	
<b>Name of Inspector</b>	<b>3</b>		
<b>Name of Inspector</b>	<b>4</b>		
<b>Name of Lay Assessor (if applicable)</b> Lay assessors are members of the public independent of the NCSC. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
<b>Name of Specialist (e.g. Interpreter/Signer) (if applicable)</b>			
<b>Name of Establishment Representative at the time of inspection</b>		Mohammed Jakhara	

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## INTRODUCTION TO REPORT AND INSPECTION

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

This document summarises the inspection findings of the NCSC in respect of Derby City Council Adoption Service. The inspection findings relate to the National Minimum Standards for Local Authority Adoption Services published by the Secretary of State under sections 49 of the Care Standards Act 2000.

The Adoption Agencies Regulations 1983 and the Local Authority Adoption Service (England) Regulations 2003 are secondary legislation, with which a service provider must comply. Service providers are expected to comply fully with the National Minimum Standards. The National Minimum standards will form the basis for judgements by the NCSC regarding notices to the local authority and reports to the Secretary of State under section 47 of the Care Standards Act 2000.

The report follows the format of the National Minimum Standards and the numbering shown in the report corresponds to that of the standards.

The report will show the following:

- Inspection methods used
- Key findings and evidence
- Overall ratings in relation to the standards
- Compliance with the Regulations
- Notifications to the Local Authority and Reports to the Secretary of State
- Required actions on the part of the provider
- Recommended good practice
- Summary of the findings
- Report of the Lay Assessor (where relevant)
- Providers response and proposed action plan to address findings

This report is a public document.

## INSPECTION VISITS

Inspections will be undertaken in line with the regulatory framework with additional visits as required. This is in accordance with the provisions of the Care Standards Act 2000. The inspection methods used in the production of this report are set out in Part B. Pre-inspection information, and the manager's written self-evaluation of the service, have also been taken into account. The report represents the inspector's findings from the evidence found at the specified inspection dates.

**BRIEF DESCRIPTION OF THE SERVICES PROVIDED.**

Derby City Council is a unitary Local Authority. It provides an adoption service which includes recruiting and approving prospective adopters, identifying adoption as being in the best interests of children and matching those children with appropriate adopters. It offers birth records counselling for adopted adults and is planning to develop support for birth parents, as this area of the service is currently very limited. Post adoption support is also offered, and again, this is a developing service. The agency is part of the East Midlands Consortium.

The service is based at Perth Street. The team consists of a service manager, 7.5 social workers, a marketing officer, and an adoption support co-ordinator and adoption support worker.



## PART A SUMMARY OF INSPECTION FINDINGS

### INSPECTOR'S SUMMARY

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

The inspection fieldwork took place over 3 days in March and in addition, a number of questionnaires were received from specialist advisers, approved adopters, birth families, placing social workers and placing authorities. Many documents were received in advance and read as part of the inspection.

The majority of questionnaires from adopters indicated an overall satisfaction with the service, any dissatisfaction being related to lack of contact following approval. The questionnaires from birth families indicated a mixed response and those from social workers and other authorities were very complimentary about the professionalism of the service. The inspection overall was very positive and there was evidence that shortfalls had already been identified and measures to improve these were either underway or were to be implemented in the near future. The service is developing to meet the National Minimum Standards and no major shortfalls which are a cause for concern were identified.

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

**The 1 standard assessed was not met.**

This standard was not met because the Children's Guide does not contain all the information required in Schedule 2 and Standard 1.4 and needs further additions. The manager is aware of this and is already addressing the issue. There has been a delay because he particularly wants the information to be meaningful to young people and is enlisting the assistance of a group of "looked after" young people to ensure it is written in a "child friendly" manner, which is very good practice. The statement of purpose addresses the requirements of the standard but should give more detail to reflect the good practice of the agency more accurately.

#### **Securing and promoting children's welfare (Standard 2)**

**The 1 standard assessed was exceeded.**

The Council employs a marketing officer to concentrate on the recruitment of adopters and there is plenty of evidence that a range of techniques are used, including the use of the national media. There is evidence that the recruitment of prospective adopters is appropriate and there are good matching procedures in place. Individual efforts are made to find suitable families to ensure siblings can stay together and that families match with the culture, religion and ethnicity of children. These efforts include national advertisements in the press.

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

#### **4 of the 4 standards assessed were met.**

Prospective adopters receive a prompt response from the agency and are invited to an information evening before they make their application. This is very informative and offers the opportunity of a personal interview with a social worker. There is comprehensive written information, which covers all aspects of the adoption process. Assessments and training are thorough and include a 4 day preparation course with opportunities to meet adopters. Approved adopters are given good information about children with whom they may be matched. They see the form E and meet social workers and foster carers to ask further questions. The agency also produces very professional booklets on a regular basis, which have good quality photographs and details of adopters and children waiting for matches. The importance of keeping information about a child's past is stressed. Good support is available to adopters and children from a variety of sources and this is a developing area for the agency. Two social workers are in post and have started a support group and have other plans for the future. An adoption allowance scheme is in place.

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

#### **2 of the 3 standards assessed were met.**

The agency provides a limited service to birth parents at present. The child's social worker does most of the information gathering about the child's background and discussion with the family about their views but there is no independent support, although a post has been advertised to provide this. The post adoption support service provides a good letterbox scheme, with an in built reminder system, and will assist with letter writing if necessary. A monthly surgery for birth parents is being developed and birth parents are currently given details of a voluntary body, which will provide assistance.

### **Adoption panels and agency decisions (Standards 10-13)**

#### **0 of the 4 standards assessed were met.**

The panel is properly constituted and meets on a regular basis, with the meeting dates planned a year in advance. Papers are sent out with a week's notice to enable proper consideration. Prospective adopters can now attend panel. The panel policies and procedures need some further information to comply with standard 10.2. Panel members should have induction training, the minute taker should undertake specific training in minute taking for the adoption panel and the agency decision maker should receive all the panel papers to assist in making the decision.

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

#### **1 of the 2 standards assessed was met.**

The manager is qualified and experienced in all aspects of childcare including adoption and is undertaking a management qualification. There was no evidence of telephone calls to verify written references in his personnel file however and this must be rectified. Other checks, including an up to date enhanced Criminal Records Bureau check were in evidence.

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

#### **2 of the 3 standards assessed were met.**

The agency is well managed and lines of communication and delegation are clear. The manager has a very large remit, however, and this may need addressing in order to facilitate all the management functions being carried out in a timely manner.

There are good internal systems in place at all levels to monitor the work of the agency. The executive side of the Council is well informed and fully aware of its responsibility as corporate parent. The agency has access to appropriate legal, medical and psychological advice and staff feel they benefit from this. Written protocols should be developed in relation to the use of specialist advisers

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

**2 of the 5 standards assessed were met.**

The staff employed by the agency are qualified, undertake regular training, are supervised on a regular, formal basis and supported. Good recruitment and selection procedures are in place but some improvement in the evidence of some of the required checks is needed. There are a number of avenues for professional development, which include monthly developmental team meetings, a multi – agency adoption development group, and formal internal and external training courses. Appropriate employment policies and procedures are in place. The retention of staff in the adoption agency is not a problem and this stability is due to good relationships and support given by the service manager and the staff group as a whole. Additional administrative staff and equipment is recommended.

**Records (Standards 25-28)**

**3 of the 4 standards assessed were met.**

Appropriate records are maintained and stored confidentially in fireproof cabinets. A system is in place for monitoring the quality and content of case files. Personnel files contain all the necessary information, although the method of evidencing the Criminal Records Bureau check needs to be improved. Panel members' files need to contain more evidence of qualifications, references, photographs and a separate file maintained for each panel member. The agency has appropriate policies and procedures in relation to case recording and access to information.

**Fitness of premises (Standard 29).**

**The 1 standard assessed was not met.**

The adoption agency is located in suitable premises with appropriate security in place. A disaster recovery plan needs to be devised and rooms where records are stored should be lockable.

## Reports and Notifications to the Local Authority and Secretary of State

The following statutory Reports or Notifications are to be made under the Care Standards Act as a result of the findings of this inspection:

Report to the Secretary of State under section 47(3) of the Care Standards Act 2000 that the Commission considers the Local Authority's adoption service satisfies the regulatory requirements:

NA

Notice to the Local Authority under section 47(5) of the Care Standards Act 2000 of failure(s) to satisfy regulatory requirements in their adoption service which are not substantial, and specifying the action the Commission considers the Authority should take to remedy the failure(s), informing the Secretary of State of that Notice:

NA

Report to the Secretary of State under section 47(4)(a) of the Care Standards Act 2000 of a failure by a Local Authority adoption service to satisfy regulatory requirements which is not considered substantial:

NA

Report to the Secretary of State under section 47(1) of the Care Standards Act 2000 of substantial failure to satisfy regulatory requirements by a Local Authority adoption service:

NA

### **The grounds for the above Report or Notice are:**

Any shortfalls can be addressed with an action plan.

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

Requirements from last Inspection visit fully actioned?

NA

**If No please list below**

**STATUTORY REQUIREMENTS**

Identified below are areas not addressed from the last inspection report which indicate a non-compliance with the Care Standards Act 2000, the Adoption Agencies Regulations 1983 and the Local Authority Adoption Service (England) Regulations 2003.

No.	Regulation	Standard	Required actions	

**Action is being taken by the National Care Standards Commission to monitor compliance with the above requirements.**

## STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

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

### STATUTORY REQUIREMENTS

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

No.	Regulation	Standard *	Requirement	
1	3	LA1	The Children's Guide must meet the requirements of Schedule 2 and 1.4	30.9.04
2	6,11	LA15	The evidence of Criminal Records Bureau checks must have more detail including the level, date and reference number. This relates to the manager, staff and panel members – standards 15, 19 and 28.	30.9.04
3	6,11	LA15	There must be evidence of telephone enquiries to verify references. This relates to the manager and staff – standards 15,19 and 28.	30.9.04
4	6,11	LA28	Panel members' files must comply with the requirements of Schedule 3 and 4 and 28.2, with a separate file for each panel member.	30.9.04

### GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

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

No.	Refer to Standard *	Recommendation Action
1	LA1	The statement of purpose should reflect more accurately the work of the agency when it is next reviewed.
2	LA5	The agency should provide more detailed information about the matching and introduction process following approval.
3	LA7	Birth parents should be offered the opportunity to read and comment on what is written about them.
4	LA7	The agency should ensure there is a person independent of the child's social worker, for the birth parent to have access to.
5	LA10	The panel policies and procedures should be extended to include those detailed in 10.2.
6	LA11	All panel members should have induction training when they become a panel member.
7	LA12	The panel administrator should undertake training on minute taking for adoption panels.
8	LA13	The agency decision maker should receive all the information from the panel in addition to the minutes.
9	LA18	The agency should have evidence of the qualifications of their specialist advisers.
10	LA18	There should be written protocols for the use of specialist advisers by the agency.
11	LA20	The agency should have sufficient administrative staff and office equipment.
12	LA29	Rooms where records are stored should be lockable.
13	LA29	The agency should have a disaster recovery plan.

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

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

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

Placing authority survey	YES
Placing social worker survey	YES
Prospective adopter survey	YES
Approved adopter survey	YES
Birth parent / birth family member survey	YES
Checks with other organisations and Individuals	
• Directors of Social services	YES
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	YES
• Interview with children	NO
• Interview with adopters and prospective adopters	YES
• Interview with birth parents	NO
• Interview with birth family members	NO
• Contact with supervising social workers	YES
• Examination of files	YES
Individual interview with manager	YES
Information from provider	YES
Individual interviews with key staff	YES
Group discussion with staff	YES
Interview with panel chair	YES
Observation of adoption panel	YES
Inspection of policy/practice documents	YES
Inspection of records (personnel, adopter, child, complaints, allegations)	YES
Date of Inspection	22/3/04
Time of Inspection	09.30
Duration Of Inspection (hrs)	90
Number of Inspector days	12
Additional Inspection Questions:	
Certificate of Registration was displayed at time of inspection	NA
The certificate of registration accurately reflected the situation in the service at the time of inspection	NA
Total Number of staff employed (excluding managers)	13



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

The scale ranges from:

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

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

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

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

## Statement of Purpose

The intended outcome for the following standard is:

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

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

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

### Key Findings and Evidence

Standard met?

2

A statement of purpose has recently been developed and has been approved by the Cabinet. The statement of purpose meets the regulatory requirements but the inspectors felt that, when it is reviewed, it should be further developed and give more detail to more accurately reflect the good practice which is carried out by the agency. As it stands, the statement of purpose does not do enough justice to the work of the agency.

The agency uses the BAAF children's guide, which is very good and readable. The manager is aware that it does not include all the information which is required to be added to reflect local practice. This is because a children's group are going to look at the statement of purpose and complaints procedure and advise how to write this in a manner which is suitable for children and young people, which is very good practice. Unfortunately, that piece of work is not yet completed so this standard is not met at the moment, although the inspectors have every confidence that it will be.

Some information is already available in Urdu and Punjabi and the agency have access to interpreters and translators at reasonably short notice for many languages.

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

YES

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

YES

Is there a children's guide to adoption?

YES

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

NO

## Securing and promoting children's welfare

The intended outcome for the following set of standards is:

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

### Standard 2 (2.1 - 2.3)

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

Key Findings and Evidence	Standard met?	4
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There is a written recruitment strategy and the agency employ a marketing officer whose specific remit is to recruit adoptive parents. This post has been in existence for over 3 years. The marketing officer liaises with social workers, develops profiles of children and uses a variety of advertising techniques to try and find suitable families. A well-used adoption web site advertises the Council's services in a prime position and children's profiles are available on this site. Models are used for the pictures and names are changed, which is good practice in terms of maintaining confidentiality and protection. Interested people can fill in a simple on line form to obtain more information about adoption.

There is evidence of very good practice in the imaginative use of the media to find families for specific children and this has generated a number of enquiries. This includes national and local television stations, national newspapers, specialist magazines, local newspapers and local radio. Council taxpayers receive information about the service with their council tax bill each year. The use of marketing techniques is very forward thinking and has proved successful.

There was evidence in the files inspected that both the form F's and form E's address the issues of race, culture and religion and good matching processes which aim to place children with their siblings unless this is not appropriate. However, it was also clear from cases tracked that children are not left to wait inordinate amounts of time for a perfect match and that the best available placement would be used. The adoption panel monitor all children who have been identified as having an adoption in their best interests decision, to ensure there is no drift. The service manager, who has a system in place to meet with the panel chair and administrator on a 2 monthly basis to look at all the children who are still awaiting placement, also monitors this regularly.

**In the last 12 months:**

<b>How many children were identified as needing adoptive families?</b>	69
<b>How many children were matched with adopters?</b>	47
<b>How many children were placed with the service's own adopters?</b>	11
<b>How many children were placed with other services' adopters?</b>	35
<b>How many children were referred to the Adoption Register?</b>	0
<b>In the last 12 months, how many children were matched with families which reflected their ethnic origin, cultural background, religion and language?</b>	43
<b>What percentage of children matched with the adoption service's adopters does this represent?</b>	94 %
<b>How many sibling groups were matched in the last 12 months?</b>	11
<b>How many allegations of abuse or neglect were made about adopters approved by this adoption service?</b>	0
<b>On the date this form was completed, how many children were waiting for a match to be identified?</b>	70

## Prospective and approved adopters

The intended outcome for the following set of standards is:

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

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

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

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>There are clear written eligibility criteria used and one adopter interviewed commented that she had been made very welcome, when another agency had not seemed interested in her as a single adopter.</p> <p>There is a good information pack, which is sent to all enquirers. Derby offers an inter country adoption service and this is dealt with on an individual basis. It is a member of the Overseas Adoption Helpline and this can be accessed for advice and guidance.</p> <p>The agency is able to fast track families who come forward to meet the needs of particular children waiting for placements e.g. sibling groups. This can be done through prioritising the work of the team or by the employment of independent social workers on a contract basis.</p> <p>In addition to the information pack, which is sent to all potential applicants, prospective adopters are also invited to an information evening. This was observed by the inspector. This meeting provides a useful opportunity for potential applicants to hear about the whole process, including the types of children for whom families are needed, before indicating an interest to pursue the application and also offers the opportunity to speak to social workers on an individual basis for any particular queries to be answered. During this evening, they also hear about the consortium and see copies of “Be my parent”. If applicants cannot attend the open evening, a social worker will visit them at home to impart the same information.</p> <p>The agency has developed books, which give photographs and profiles of adopters who have been approved and children waiting to be matched, which are sent out to a variety of places, including a number of other adoption agencies, 4 times a year. These are very good and a professional photographer is used to ensure the quality of the material is accurate and attractive. This is very good practice.</p> <p>Prospective adopters are able to talk to people who have adopted children during the preparation groups which are run. Adopters interviewed said they found this very useful.</p>	<p>3</p>	<p>3</p>

**Standard 4. (4.1 – 4.9)**

**Prospective adopters are involved in a formal, thorough and comprehensive assessment, preparation and approval process.**

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

There is a formal process for the assessment and preparation of adopters, which is thorough and comprehensive. There is a home study and the form F is used for assessment purposes. Those forms inspected were comprehensive. Social workers have also had training on competency-based assessments although the BAAF form is not used to evidence this.

Prospective adopters must also attend a 4-day preparation group, which covers a lot of information. The agency has decided to run these 3 times a year instead of 2, to increase the possibility of it being available early in the assessment process. Those adopters who wish to adopt from overseas are given information about the Overseas Adoption Helpline training in addition to the local group. Adopters interviewed and those who responded to questionnaires commented very favourably on the preparation groups and found them informative and useful.

The location of the training group is convenient for public transport and the timing can be flexible, although plenty of notice is given to enable time to be booked off work if necessary. Attitudes and values are discussed in one of the sessions as well as throughout the training to highlight the need for anti discriminatory practice. Attendees complete an evaluation form after each session and these were inspected. All were very positive.

The files had evidence of Criminal Records Bureau and other checks being undertaken and adopters interviewed were aware of the reasons behind these. There was evidence that the agency have responded to the recommendations of the Brighton and Hove enquiry in an appropriate manner.

Although some adopters had experienced delay in the application process, they said they had been made aware of the reasons for this and felt they had been kept informed.

**Standard 5 (5.1 – 5.4)**

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

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

3

The initial written information, which adopters receive, includes details of the matching, introduction and placement process, support and the Adoption Register. It is also covered in the preparation group. It is recommended that more detailed information is also given to adopters once they are approved, as it is then more meaningful at that time.

All approved adopters have a social worker allocated to them to support them through the matching and introduction process. Adopters are given a copy of the form E to look at and this will then be discussed with the social worker. Adopters also have the opportunity to ask more detailed questions of the foster carers, the child's social worker and the home finder. There is a pro forma, which adopters sign which asks them to notify the agency if a child dies and addresses issues of contact and information about and from the birth family. Adopters interviewed were very aware of the importance of the birth family and such information.

Adopters interviewed had prepared books of information about themselves for the child and a camcorder is also available to prepare a video.

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

YES

**Standard 6 (6.1 – 6.7)**

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

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

3

Support is available from a variety of sources. Adopters are prepared during the approval and introduction process for the impact of a child coming to live with them. The adoption social worker will be involved until the adoption order is made, there are monthly surgeries run by a clinical psychologist and an out of hours service run by the local authority. The adoption manager makes this service aware of any issues, so they have background information if they are contacted. The authority also has a child sexual abuse unit, which can undertake direct work with children over a long period, although there are only a small number of staff in post. The Overseas Adoption Helpline can be accessed for those adopters with children from overseas.

Support is detailed in a contract and post adoption support is now becoming available. There are 2 people in post, with a remit to provide the whole range of support to birth families, adoptive parents and adopted people. They have had to prioritise the work and have spent time on the letterbox scheme. At the moment, they will refer adopters on to other agencies for support if appropriate, and protocols are being developed in relation to this. They have plans to start a telephone advice line from April, they already send a newsletter to adopters every quarter and they have held one meeting of an adopters support group, which was well attended. This will be held bi-monthly at a central location at an evening time. The adoption support workers attend one session of the preparation group to ensure adopters are aware of their service.

The agency pays for 1 year's membership of Adoption UK for all approved adopters.

There is no post approval training for adopters at the moment, but again, the workers are considering the "piece of cake" training and this may be an area for further development.

Adopters interviewed were very clear about the need to keep information about the birth family safe and one family were extremely positive about this and were using photographs and information on an ongoing basis as the need arose.

If a placement disrupts, a meeting is held, no blame is attached but lessons for the future are highlighted and used as a learning experience.

<b>Number of adopter applications started in the last 12 months</b>	29	
<b>Number of adopters approved in the last 12 months</b>	19	
<b>Number of children matched with the local authority's adopters in the last 12 months</b>	11	
<b>Number of adopters approved but not matched</b>	9	
<b>Number of adopters referred to the Adoption Register</b>	18	
<b>How many placements disrupted, between placement and adoption, in the last 12 months?</b>	2	



## Birth Parents and Birth Families

The intended outcomes for the following set of standards are:

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

### Standard 7 (7.1 – 7.5)

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

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
<p>The service to birth parents is currently provided by the assessment and care management teams, and the child's social worker will work with the birth family to make plans for the children. The difficulties in this are acknowledged and a post for a worker to work with birth families, independent of the child's social worker, has been advertised.</p> <p>The files inspected had evidence that the birth families' views had been recorded but birth parents did not sign the form E and there was no evidence to show they had been offered this opportunity and refused it.</p>		

### Standard 8 (8.1 – 8.2)

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

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>There is a very good letterbox scheme in place. Currently there are 260 exchanges a year which relate to 132 children. Reminder letters are sent out before each contact by recorded delivery, which is very good practice. There are written contracts for each party, welcome letters and there is written guidance for social workers and people involved in the letterbox scheme. The post adoption workers will assist birth families with writing letters if they need help.</p> <p>The child's social worker will obtain as much information from the birth family as possible and undertake life story work. One example of good practice was the efforts made by the agency to establish paternity in one case and then obtain a later life letter from the father.</p>		

**Standard 9 (9.1)**

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

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

3

The service to birth families is limited at present but the agency has a strategy in place to improve this. The child's social worker does as much as they can, but there is often a conflict of interest and relationships can be tense. Birth parents are given details of Natural Parent Network and the new post will also assist with support for them. The post adoption workers are starting monthly surgeries for birth parents in April. Adoption social workers will provide some information during the home finding process and there is assistance with letter writing if there is indirect contact. The reminder letters sent through the letterbox scheme also assist birth parents fulfil their agreements in relation to contact.

## Adoption Panels and Agency decisions

The intended outcomes for the following set of standards are:

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

### Standard 10 (10.1 – 10.3)

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

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
<p>There are written policies and procedures in relation to the panel but some of the elements of this standard are not included in this. These should be further developed to include the policies and procedures detailed in 10.2.</p> <p>The panel receives progress reports on children every 6 months and on adopters who have not had a placement every 2 years.</p> <p>Adopters now attend panel and there is good written information available to them to explain the process and what to expect. Prospective adopters attended the panel which was observed by the inspector. They were made to feel welcome and at ease and the questioning was appropriate.</p>		

**Standard 11 (11.1 – 11.4)**

The adoption agency shall ensure that each adoption panel is properly constituted, that panel members have suitable qualities and experience to be a panel member and have regular training to allow them to keep up to date with changes in legislation, guidance and practice. Where the adoption agency is involved in inter-country adoption, each member of the panel understands the implications of being adopted from overseas and seeks advice, when necessary, on the laws and eligibility criteria for the overseas country.

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

2

The panel is properly constituted and panel members have suitable experience and qualities. They have regular training and the legal advisers will update them on any issues, including inter country adoption.

New panel members observe a panel prior to sitting and all panel members have satisfactory Criminal Records Bureau checks and sign a confidentiality statement, the evidence of which was in their files.

Panel members do not have induction training and this should be developed. Currently, a new panel member meets with the service manager and the panel chair and observes 1-2 panels as part of their induction. The panel has 4 training events a year, which also include staff and they can attend the adoption development group, which is a multi agency group which delivers training, updates on legislative changes and discusses issues. Some panel members take advantage of this.

**Is the panel a joint panel with other local authorities?**

NO

**Does the adoption panel membership meet all of the statutory requirements?**

YES

**Standard 12 (12.1 – 12.3)**

Adoption panels are efficiently organised and conducted and are convened regularly to avoid delays in the consideration of prospective adopters and matching children and adopters.

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

2

The panel meets monthly and the dates are planned for the year. The panel papers are sent out a week in advance of the panel. The chair said the organisation of the panel was very good.

The minutes inspected were not as informative as they should be and lacked detail, an analysis of the discussion and clear reasons for the recommendation. The minute taker has not had training in this area and it is recommended that training be provided for her, which deals with minute taking for adoption panels.

**Standard 13 (13.1 – 13.3)**

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

**Key Findings and Evidence**

**Standard met?**

**2**

The agency decision maker receives the panel minutes as soon as they are written. This is usually within 7 days although there have been times when there has been a longer delay. Currently, the decision maker does not receive all the information about the case and bases the decision on the minutes, and any further discussion with the panel chair as is thought necessary. It is recommended that all the panel papers be sent to her in advance of the panel, to ensure sufficient information is available to enable her to make an informed decision.

The decision is conveyed to the child, their family and the adopters following this and pro forma letters are available for this purpose.

## Fitness to provide or manage an adoption agency

The intended outcomes for the following set of standards are:

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

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

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

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

#### Key Findings and Evidence

Standard met?

3

The service manager has good knowledge and experience of childcare and adoption law, based on his employment within children's services for over 10 years. He has a social work qualification and a post qualification award in childcare. He is currently undertaking an NVQ5 in management and has a foundation certificate in management. The financial side is overseen by the assistant director.

Staff interviewed were very positive in their comments about the service manager. They feel he is a good leader, gives good guidance and support and communicates well with them. The staff group enjoy working for the agency.

The service manager has a job description and there are clear lines of accountability. The service manager has a large remit – one that is usually carried out by 2 people.

Does the manager have Management NVQ4 or equivalent?

NO

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

YES

### Standard 15 (15.1 – 15.4)

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

#### Key Findings and Evidence

Standard met?

1

The manager's personnel file has evidence of qualifications, experience, a satisfactory Criminal Records Bureau check and references. However, the method of recording the Criminal Records Bureau check is not adequate and needs to have the reference number and level of the check detailed, along with the date it was received. There is also no evidence that telephone checks were made to verify references.

## Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

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

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

**Key Findings and Evidence**

**Standard met?**

3

All the evidence seen and gathered as a result of interviews confirms that the agency is managed effectively and efficiently. However, the inspectors felt that the remit of the service manager was very large and were surprised that there was not a team manager position to fulfil some of the roles, which the service manager undertakes.

There is a clear management structure and staff are aware of whom to contact when the service manager is unavailable. Staff said that lines of communication were good, with regular team meetings as well as informal channels.

There is a clear policy in relation to the declaration of interests. There is also very good information and policies for staff on equal opportunities and this addresses very fully all aspects of possible discrimination. Staff interviewed were clearly aware of the issues. Interpreters are used to explain issues to birth families who have a language other than English.

There is a clear procedure for the use of the National Adoption Register and staff and adopters interviewed were aware of this.

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

5

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

1

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

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
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There are very good monitoring procedures in place, both from within the agency and by the executive. The agency has a business plan and the adoption strategy steering group meets 6 weekly to monitor the progress, which includes a qualitative approach. The group consists of the an assistant director, head of service, the panel chair, the service manager for adoption, the adoption support co-ordinator and the service manager for children looked after. The assistant director receives monthly reports on targets, sees the panel minutes and discusses adoption issues within the supervision of the service head.

There is also a consultation process whereby a sample of adopters and children over the age of 7 are asked their views.

The executive has a corporate parenting group, which meets quarterly and receives a report on adoption. An annual report is presented to the cabinet and every quarter, and there are monthly monitoring reports, which the cabinet member for social care and health receives. He also has weekly briefings from the assistant director. All the councillors have had training on their role as corporate parents. Two members of the council also sit on the adoption panel.

There is little information on charging at present as the agency does not charge for many of its services. There is written information on the adoption allowance scheme and the consortium rates.

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

Monthly?	
Quarterly?	YES
Less than Quarterly?	

**Standard 18 (18.1 – 18.5)**  
**The adoption agency has access to specialist advisers and services appropriate to its needs.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
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The agency has access to 2 part time legal advisers and a medical adviser. It is also a member of the Overseas Adoption Helpline, Adoption UK and Norcap and has access to the services of a clinical psychologist and the child sexual abuse unit. Staff said that the specialist advisers were approachable and available for any advice.

The legal advisers are employed by the local authority and are qualified solicitors, the proof of which is with the personnel section. It is recommended that the agency also retain some form of proof of the qualifications and registration with the professional bodies of its specialist advisers. The legal advisers attend panel and will address inter-country adoption when required. They have also provided some training for staff.

The medical adviser is a member of the panel and is a fairly recent appointment. She has received BAAF training and also attends the Adoption Development Group and other panel training. She confirmed she is available to give advice to social workers.

There is no written protocol for advisers at present and the manager is aware of this and intends to produce it.



## Employment and management of staff

The intended outcome for the following set of standards is:

- The people who work in the adoption agency are suitable to work with children and young people and they are managed, trained and supported in such a way as to ensure the best possible outcomes for children waiting to be adopted or who have been adopted. The number of staff and their range of qualifications and experience are sufficient to achieve the purposes and functions of the adoption agency.

Standard 19 (19.1 – 19.14)

Anyone working in or for the adoption agency are suitable to work with children and young people and to safeguard and promote their welfare.

Key Findings and Evidence	Standard met?	1
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Staff undergo a thorough recruitment and selection procedure. The personnel files inspected had evidence of interviews being carried out and written references, but no evidence of telephone enquiries to verify these. The service manager said these were carried out by the senior member of the interview panel, but this needs to be recorded. All staff have up to date Criminal Records Bureau checks, but as stated earlier, the method of recording these is not adequate. A system is in place to ensure these are updated every 3 years.

All the social workers have a professional social work qualification and a sound knowledge of adoption and childcare.

One social worker has a post-qualifying award and this is also being undertaken by others.

There are good training opportunities for staff, including monthly developmental team meetings, when issues concerned with adoption and related matters are discussed. Staff have had training in assessments, attachment, adoption support, inter-country adoption, and the Adoption and Children Act. There is also an adoption development group, which meets regularly and is attended by any professional with an interest in adoption.

Birth records counselling is undertaken by a worker from adoption support and this person has undertaken training, is very experienced and meets regularly with other counsellors to keep up to date with any issues or new developments.

All advisers are appropriately qualified, although the agency does not hold proof of their qualifications. They are all employed by other public bodies or the local authority. If any independent service is used, the service manager ensures he is furnished with copies of the qualifications and checks they are suitable qualifications for the task.

There are no unqualified staff in the agency. All support, be it to birth families or adopters, is undertaken by qualified social workers.

Do all of the adoption service's social workers have DipSW or equivalent?	YES	
What % of the adoption service's social workers have a PQ award?	10	%

**Standard 20 (20.1 – 20.12)****Staff are organised and managed in a way which delivers an efficient and effective service.****Key Findings and Evidence****Standard met?****2**

There is one team of social workers but they undertake specific roles within the team, such as family finding, assessment and support and adoption support. They are managed by the service manager, who is appropriately qualified, experienced and skilled. Workloads are monitored and prioritised by the service manager. The management of the team and the workload is efficient with good monitoring systems in place to ensure assessments and approvals are undertaken.

All staff receive regular, professional supervision and this was documented in their files. Staff commented that the service manager was also available for informal or impromptu supervision if this was required. They have a training profile and assessment and are encouraged to undertake appropriate training.

The level of administrative support and equipment is insufficient for the agency. Social work staff reported having to undertake basic administrative tasks, such as filing, which are time consuming and impact on their adoption work. There is very limited access to computers for the adoption team – only 1 for the whole team.

The team has a duty system every afternoon Monday to Friday and social workers will contact people who have left messages in the morning. Administrative staff were said by the manager to know the boundaries and obtain sufficient information without offering inappropriate advice.

The adoption agency has access to a full range of advice to enable them to support adopters and children appropriately. This includes medical, legal, psychological, educational and other direct work with children.

All staff have contracts and job descriptions and a copy of the GSCC code of conduct. They have a staff handbook which includes relevant policies and procedures and the statement of purpose and these are also available on the Derby intranet.

**Standard 21 (21.1 – 21.4)**

There is an adequate number of sufficiently experienced and qualified staff to meet the needs of the adoption agency and they are appropriately supported and assisted in providing a service.

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

3

There are sufficient social work staff to meet the requirements of the agency and there are contingency plans to meet any shortfalls, such as the employment of independent social workers. They are well supported and speak highly of the service manager. Although Derby City has difficulties recruiting and retaining social work staff, this is not the case for the adoption agency. Good communication, support and relationships within the team maintain a stable, committed and content work force, with long standing staff who have made newer members of staff welcome and valued the new ideas and expertise which they have brought to the team.

<b>Total number of social work staff of the adoption service</b>	10	<b>Number of staff who have left the adoption service in the past 12 months</b>	0
<b>Number of social work posts vacant In the adoption service.</b>	.5		

**Standard 22 (22.1 and 22.3)**

The adoption agency is a fair and competent employer, with sound employment practices and good support for its staff.

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

3

Derby City Council appears to be a good employer and operates in line with other local authorities in the area. There is a whistle blowing policy in place, which is in draft form at present, awaiting approval from the Departmental Management team.

**Standard 23 (23.1 – 23.6)**

There is a good quality training programme to enhance individual skills and to keep staff up-to-date with professional and legal developments.

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

3

There is a good training programme for staff, which includes both internal and external courses. Staff interviewed felt there were sufficient and appropriate training courses to meet their needs and keep them up to date. Staff can undertake NVQs and post qualifying training. Staff have personal development profiles to identify training needs. They also said the service manager kept them abreast of any changes in the regular staff meetings. There is a monthly developmental team meeting, in addition to the Adoption Development Group which meets regularly

## Records

The intended outcome for the following set of standards is:

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

### Standard 25 (25.1 – 25.5)

The adoption agency ensures comprehensive and accurate case records are maintained for each child, prospective and approved adopter with whom the agency has worked.

Key Findings and Evidence	Standard met?	3
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There are case records for each child and prospective and approved adopters. Records are kept in locked cabinets, which have been recently purchased. These are said to be fire proof but not necessarily waterproof, although they are made of steel. Computer records are password protected. There are clear written policies in relation to confidentiality and data protection.

There was evidence in the adopters' files inspected of status, health, Criminal Records Bureau checks and references. The full Criminal Records Bureau check is now kept on the file, rather than a memo from personnel, which had been the previous system. This is better practice. The agency undertakes Criminal Records Bureau checks on everyone over 10 rather than 18, which is good practice.

There was evidence in the files inspected of regular monitoring by the service manager and any decisions are written in green pen in the case records.

### Standard 26 (26.1 – 26.2)

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

Key Findings and Evidence	Standard met?	3
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There is a draft policy in relation to access to records, the disclosure of information, and how to deal with requests for access to information. It is very comprehensive and takes account of the Data Protection Act and the Human Rights Act.

**Standard 27 (27.1 – 27.6)**

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

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

3

There is a thorough case recording policy, which is a local authority policy, and this covers all aspects of recording, storage and access.

There are separate records maintained in relation to staff, complaints and allegations. Files are regularly monitored and there was evidence seen of this. Files are kept in locked cabinets.

The files inspected had evidence of well-written records, which were signed and dated.

There are separate records of complaints and allegations and there was evidence of this cross-referencing in the adopters' file.

**Standard 28 (28.1 – 28.2)**

Up-to-date, comprehensive personnel files are maintained for each member of staff and member of the adoption panel.

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

1

There are comprehensive files for each member of staff, a sample of which were inspected. There are limited records maintained on the panel members and these are all stored in one file, rather than a separate file for each person. There was no evidence of professional qualifications, references or photographs. Panel members' files must comply with the requirements of Schedule 3 and 4 and 28.2.

Staff files had evidence of qualification, references, experience and Criminal Records Bureau checks. However, the record of the Criminal Records Bureau check is unsatisfactory as they are not dated, do not indicate the level and do not have the reference number.

## Fitness of Premises

The intended outcome for the following standard is:

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

Standard 29 (29.1 – 29.5)

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

Key Findings and Evidence	Standard met?	2
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The premises used are appropriate and easily identifiable. They can easily be accessed by adopters and other people and their separation from the childcare service in terms of location is seen as being of benefit.

The IT systems are efficient and robust and there is a back up system for computer records. The premises are alarmed. However, not all the rooms where records are stored are lockable and this should be addressed.

The manager said there was insurance cover in place although this was not verified by the inspectors.

There is no disaster recovery plan in relation to the premises or the backing up of records and this should be developed. The manager is planning to investigate various methods of retaining records.

**PART C**

**LAY ASSESSOR'S SUMMARY**

**(where applicable)**

**Lay Assessor** \_\_\_\_\_ **Signature** \_\_\_\_\_  
**Date** \_\_\_\_\_

**D.1 Local authority manager's comments/confirmation relating to the content and accuracy of the report for the above inspection.**

We would welcome comments on the content of this report relating to the Inspection conducted on 22/3/04 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible



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

Amendments to the report were necessary	<input type="checkbox"/> NO
Comments were received from the provider	<input type="checkbox"/> NO
Provider comments/factual amendments were incorporated into the final inspection report	<input type="checkbox"/>
Provider comments are available on file at the Area Office but have not been incorporated into the final inspection report. The inspector believes the report to be factually accurate	<input type="checkbox"/>

**Note:**

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

**D.2 Please provide the Commission with a written Action Plan by 22 June 2004, which indicates how statutory requirements and recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.**

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

Action plan was required	<input type="checkbox"/> YES
Action plan was received at the point of publication	<input type="checkbox"/> YES
Action plan covers all the statutory requirements in a timely fashion	<input type="checkbox"/> YES
Action plan did not cover all the statutory requirements and required further discussion	<input type="checkbox"/>
Provider has declined to provide an action plan	<input type="checkbox"/>
Other: <enter details here>	<input type="checkbox"/>

**Public reports**

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

**D.3 PROVIDER’S AGREEMENT**

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

**D.3.1 I Mohammed Jakhara of Derby City Council Adoption Service confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the statutory requirements made and will seek to comply with these.**

**Print Name** \_\_\_\_\_  
**Signature** \_\_\_\_\_  
**Designation** \_\_\_\_\_  
**Date** \_\_\_\_\_

**Or**

**D.3.2 I Mohammed Jakhara of Derby City Council Adoption Service am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:**

**Print Name** \_\_\_\_\_  
**Signature** \_\_\_\_\_  
**Designation** \_\_\_\_\_  
**Date** \_\_\_\_\_

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

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