



*Making Social Care  
Better for People*

# inspection report

Local Authority Adoption Services

## **Bexley Council Adoption Service**

Howbury Centre

Slade Green Road

Erith

Kent

DA8 2HX

3rd November 2003

## **Commission for Social Care Inspection**

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

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

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

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

## **Inspection Methods & Findings**

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

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

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

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

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

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

**ADOPTION SERVICE INFORMATION**

**Name of Local Authority**

Bexley Council Adoption Service

**Headquarters Address**

Howbury Centre, Slade Green Road, Erith, Kent, DA8  
2HX

**Adoption Service Manager**

Hilary Bull

**Tel No:**

020 8303 7777

**Address**

Howbury Centre, Slade Green Road, Erith, Kent, DA8  
2HX

**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>		3 <sup>rd</sup> November 2003	<b>ID Code</b>
<b>Time of Inspection Visit</b>		10:00 am	
<b>Name of Inspector</b>	<b>1</b>	Maureen Moore	125773
<b>Name of Inspector</b>	<b>2</b>	Sharon Lewis	073298
<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>			

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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 Bexley 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.

The Borough Bexley is in South East London. The council's adoption service falls within the remit of the Children's Placement Service; which is part of the wider Children's Resources and Commissioning division of the borough's social services department.

The children's placement service divides its time between providing fostering and adoption services for the people of Bexley. The adoption service is a member of the Southeast consortium which is made up of six local authority partner agencies.

The adoption service's statement of purpose includes the following in its range of services:

- Recruitment, preparation and assessment of adoptive parents
- Matching adoptive parents to children
- Inter-country adoption assessments
- Approval of non-agency adopters
- Special guardianship
- Support and supervision for prospective adopters
- Counselling for birth parents
- Counselling for children for whom adoption is the plan
- Post adoption contact

The children's placement service comprises 15 professionally qualified social work staff, including the manager, two assistant social workers and 4 administrative support workers. It is based at the Howbury Centre, Slade Green Road, Erith, Kent.

## **PART A SUMMARY OF INSPECTION FINDINGS**

### **INSPECTOR'S SUMMARY**

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

This inspection took place in November 2003. It was the first time that Bexley council's adoption service had had been measured against the National Minimum Standards and the Adoption Agencies Regulations (2003). It is intended that the commission will monitor the agency's response to some of the requirements and recommendations as indicated in the body of the report.

#### **Statement of Purpose** (Standard almost met)

The adoption service has a clear statement of purpose which reflects the services provided by Bexley's adoption team. The adoption service must produce a children's guide that complies with the Adoption Regulations 2003.

#### **Securing and Promoting Children's Welfare** (Standard almost met)

The inspectors found evidence of the service being pro-active in matching sibling groups; especially in terms of later siblings of children already placed. Also there are good matches for white British children. The recruitment plan needs to illustrate how it intends to meet its identified targets, and keep this under review.

#### **Prospective and Approved Adopters** (Standards almost met; 1 Standard met)

Discussion with approved adopters and social workers revealed that applicants are welcomed without prejudice. The adoption service recognises the need for more targeted recruitment of adopters from minority ethnic communities in order to best meet the needs of Bexley children. It was noted that the managers have highlighted this as their priority.

The recruitment and preparation of potential adopters was found to be quite thorough. The agency has a comprehensive equal opportunities policy which provides the backdrop for the anti-discriminatory framework within which all services of the department are expected to operate. The Forms F seen generally lacked analysis of diversity issues; and the adoption team social workers indicated that they would welcome specific training in this aspect of the assessment process. In all, feedback from those who had been or were still going through the adoption process was positive.



There was evidence that adopters were given sufficient information on children. Adopters indicated that they felt very well supported by the adoption social workers. There was evidence of the service working well with other agencies when a placement was in difficulties; with appropriate support offered throughout the crises. The agency should review its current adoption allowance scheme; with a view to making it more flexible in meeting children's and adopters' needs.

**Birth Parents and Families** (1 Standard met; 2 almost met)

No birth parents or families were interviewed as a part of this inspection. The one questionnaire that was returned indicated that they felt ill-informed during the adoption process. Birth parents sometimes are offered post-adoption counselling by members of the adoption team; but this is not always taken up.

The adoption service provides a post-adoption post box system for birth families to maintain contact with children placed for adoption.

The adoption service had identified as part of its performance plan the need to develop a strategy for the provision of appropriate pre and post adoption support for birth parents and families.

**Adoption Panel and Agency Decisions** (2 Standards met 2 almost met)

The adoption panel was observed during the inspection; there were clearly written policies and procedures available relating to its functions. The panel is properly constituted and comprises relevantly qualified and experienced people. All new panel members receive an induction pack but there was no evidence of induction training taking place. At the time of the inspection the independent members of the panel were in the process of being checked by the Criminal Records Bureau (CRB).

**Fitness to Provide or Manage an Adoption Agency** (1 Standard almost met; 1 met)

The manager of the adoption service has a professional social work qualification and was in the process of undertaking a relevant management award. The manager proved very knowledgeable and experienced in adoption matters. Social work staff stated that they felt supported by their manager, who they said was open and approachable. The service should however review its use of social work resources in the children's placement team as there was evidence to suggest unnecessary delays in the care planning processes. The department's recruitment and selection procedures must be updated to comply with standard 15 and the attendant regulations.

**Provision and Management of the Adoption Agency** (3 Standards almost met)

There are clear arrangements in place to identify the person in charge in the manager's absence. The managers are thought to be very approachable in terms of consultation on cases. There was some evidence of the service monitoring and controlling its activities, but it is recommended that the service reconsiders all of its policies and procedures in this area. There are medical and legal advisers available to the staff and panel who are reported to be knowledgeable, and approachable for consultation. The service has an appropriate written protocol governing the role of specialist advisers.

**Employment and Management of Staff** (2 Standards met; 3 almost met)

The agency has recruitment and selection procedures, but it is recommended that these are reviewed in order to comply with standard 19. The agency must also obtain full and satisfactory information to comply with the 2003 regulations.

All social workers are appropriately qualified and knowledgeable about the broad adoption process. It was recognised that there is a wealth of experience within the adoption team; however, there was also recognition that the team would benefit from the opportunity to refresh its approach to practice issues. It is suggested further that the service undertakes an objective review of the team's activity. Consideration should be given as to how both the fostering and adoption agendas might best be met.

The children's placement service has an apparently competent and knowledgeable administrative team, who appeared sensitive to the needs of would-be adopters.

Bexley's adoption service has been affected by the national shortage of suitably qualified and experienced social workers to fill vacancies. At the time of the inspection, the pay and conditions of the workers in the children's placement team were less favourable than those of their child care colleagues; however, senior managers confirmed that a new recruitment and retention strategy was being considered at board level.

**Records** (3 Standards almost met; 1 met)

The adoption service has appropriate written policies and procedures governing the keeping of records and there was some evidence that they were being complied with. The method for keeping records is congruent with the Looked After Children system. They are stored appropriately in fire-proof containers. There were suitable policies and procedures regarding access to records, which take into account Data Protection and Human Rights legislation. All personnel files must be scrutinized to ensure that they comply with the 2003 regulations.

**Fitness of Premises** (Standard met)

THE PREMISES OF THE ADOPTION SERVICE ARE FIT FOR PURPOSE; ADEQUATELY PROTECTED AND APPROPRIATELY INSURED. CONSIDERATION SHOULD BE GIVEN TO ENSURING THAT ALL SECTIONS OF THE CAR PARKING AREAS ARE FITTED WITH ADEQUATE LIGHTING.

## 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:**

**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**

<b>STATUTORY REQUIREMENTS</b>				
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 (2003)	LA1	The adoption service must produce a children's guide that complies with Schedule 2 of the regulations.	September 1 <sup>st</sup> 2004
2	7 (2003)	LA18LA4	The adoption service must produce a strategy, including a specific training plan, to address the shortfalls of the service in relation to children and adopters from black and minority ethnic communities.	September 1 <sup>st</sup> 2004
3	9 (2003)	LA6	The adoption agency must develop strategies to help adopters understand and assist children to address racism and other forms of discrimination.	September 1 <sup>st</sup> 2004
4	7 (1983)	LA7	The adoption service must develop a written protocol that addresses the needs of birth parents.	September 1 <sup>st</sup> 2004
5	7 (1983)	LA9	The adoption service must develop a strategy for the provision of independent support for birth parents and families as set out in the regulation.	September 1 <sup>st</sup> 2004
6	15 (2003) 11 (2003)	LA11	The adoption service must produce evidence that each of its members of staff and panel members that comply with the regulations and Schedules 3 & 4.	September 1 <sup>st</sup> 2004

7	7 (2003)	LA14LA20	The adoption service must review its policies, procedures and working practices to comply with these Standards.	September 1 <sup>st</sup> 2004
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### 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 children's guide should be more readily accessible to all children and young people who have adoption as their plan.
2	LA2	The adoption service should revise its action plan to illustrate how identified target are intended to be met; and should include built-in periods of review.  Consideration should be given to the provision of training in adoption matters to child care social workers.
3	LA3	The adoption service should consider how they will raise the awareness of overseas adoption matters for all of its staff.
4	LA4	The adoption service should consider involving specialists in attachment theory and practice in its preparation programmes.  The adoption service should review its policy and information for foster carers who become adopters and consult such adopters as part of this process.
5	LA5	The adoption service should consider developing a written protocol in accordance with 5.3 of the Standards
6	LA8LA6	The adoption agency should review its current adoption allowance scheme, making it more flexible.  The adoption service should develop a system of monitoring the existence and quality of life-story work for children who have adoption as their plan.
7	LA7	The adoption service should review the low take up of counselling by birth parents and plan to improve this .

8	LA11	The adoption service should review the training needs of, and provision for, new and established members of the adoption panel.
9	LA13	The adoption service should review existing timescales and monitoring procedures to govern the processing of all panel recommendations and subsequent approval.  The adoption service should ensure that prospective adopters are aware that the panel serves to make recommendation only.
10	LA14	The adoption service should inform the Commission when the manager has achieved a management award.
11	LA19LA15	The adoption service should set up a system that ensures CRB renewal every three years.
12	LA16	The adoption service should develop written procedures governing the use of the National Adoption Register.
13	LA17	The adoption service should consider revising the knowledge base of the executive side of the council in respect to adoption matters.
14	LA18	The adoption service should produce written guidance for social workers in respect of accessing specialist advice from other agencies.
15	LA19	The adoption service should inform the commission when its target in relation to social workers achieving the Post Qualifying Child care Award is met.
16	LA23	The adoption service should liaise with the in-house training department in order to develop a system of evaluation of training that links directly to performance requirements.
17	LA25	The adoption service should that all practicable efforts to trace ex-partners of prospective adopters and to record the efforts made when this has not proved possible.  The adoption service should ensure that supervision notes of cases reflect the discussion as well as any decisions made.  The adoption service should ensure that any audit of case notes take place regularly and are signed and dated.
18	LA26	The adoption service should amend its policies and procedures to take account of the points listed under 26.2 of the standards.
19	LA27	The adoption service should record action required and its outcome when case files are audited.  The adoption service should consider computerising its entries on files.  All entries on files should be clearly signed and dated.

20	LA29	The adoption service should review its provision of computers to social work staff.  The council should consider the provision of lighting to all sections of its car park.
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- 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	NO
Placing social worker survey	YES
Prospective adopter survey	YES
Approved adopter survey	YES
Birth parent / birth family member survey	YES
Checks with other organisations and Individuals	
• Directors of Social services	NO
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	YES
• Interview with children	NO
• Interview with adopters and prospective adopters	YES
• Interview with birth parents	NO
• Interview with birth family members	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 (vice 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	7/11/03
Time of Inspection	09.30
Duration Of Inspection (hrs)	98
Number of Inspector days	9
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)	21

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

The scale ranges from:

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

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

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

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

## Statement of Purpose

The intended outcome for the following standard is:

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

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

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

### Key Findings and Evidence

Standard met?

2

The adoption service has a clear statement of purpose of which staff were aware, and who confirmed that it reflects accurately the services provided by Bexley's adoption team. The Statement of Purpose was recently reviewed and formally ratified by the elected members.

Currently there are two children's guides about the adoption service; one is produced by British Agencies for Fostering and Adoption (BAAF) and one is a locally produced, general information leaflet. The adoption service must produce a children's guide that complies with Regulation 3 and Schedule 2 of the Adoption Regulations 2003.

The agency relies on use of interpreters and specialist communication workers to convey its information to children and young people who do not have English as their first language; or who have communication difficulties. Consideration should be given to producing guides that are more readily accessible to all children and young people who have adoption as their plan.

### See Statutory Requirement 1

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

YES

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

YES

Is there a children's guide to adoption?

YES

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

NO

## Securing and promoting children's welfare

The intended outcome for the following set of standards is:

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

### Standard 2 (2.1 - 2.3)

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

Key Findings and Evidence	Standard met?	2
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The agency is a member of the Southeast consortium through which it works on joint recruitment strategies. The inspectors found evidence of the service being pro-active in matching sibling groups; especially in terms of later siblings of children already placed. Also there are good matches for white British children.

The adoption service does have a plan, regarding effective strategies to recruit sufficient adopters, particularly those from black and minority ethnic communities. However, the plan needs further development so that the service can illustrate *how* it intends to meet its identified targets; it should include time limits and have in-built periods of review.

Discussion with groups of social workers revealed that there was professional respect and a joint approach to adoption work. Representatives from both disciplines attend all relevant meetings once adoption is identified as the plan for a child.

Child care social workers pointed out that although there is written guidance on adoption procedures, they would still benefit from formal training on the process; especially as they are not continually involved in adoption work.

**See Recommendation 2**

**In the last 12 months:**

<b>How many children were identified as needing adoptive families?</b>	12	
<b>How many children were matched with adopters?</b>	17	
<b>How many children were placed with the service's own adopters?</b>	10	
<b>How many children were placed with other services' adopters?</b>	7	
<b>How many children were referred to the Adoption Register?</b>	7	
<b>In the last 12 months, how many children were matched with families which reflected their ethnic origin, cultural background, religion and language?</b>	16	
<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>	6	
<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>	9	

## 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>	
<p>Discussion with approved adopters and social workers revealed that applicants are welcomed without prejudice. The service has a comprehensive, culturally reflective, information pack that is sent out to potential adopters. Applicants mainly said they felt very well-informed about the process; however dissatisfaction was expressed at the apparent lack of knowledge regarding overseas adoption. There needs to be more staff awareness in this area.</p> <p>The agency subscribes to the Overseas Adoption Helpline, which offers advice to Bexley residents. The manager and another member of staff have received training in overseas adoption but other staff seemed unfamiliar with the procedures for this. Consideration should be given to training for social workers in this area of practice.</p> <p>The adoption service recognises the need for more targeted recruitment of adopters from minority ethnic communities in order to best meet the needs of Bexley children. It was noted that the managers have highlighted this as their priority.</p> <p><b>See Recommendation 3</b></p>	2	

**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?**

**2**

The returned questionnaires, interviews with approved adopters and adoption social workers; as well as the reading of preparation materials, revealed the recruitment and preparation processes to be quite thorough. However, it is suggested that more detailed consideration be given to the coverage of the needs of children who have experienced disordered attachments; perhaps involving specialist professionals such as clinical psychologists – as raised by some adopters and placing social workers.

The agency has a comprehensive equal opportunities policy which provides the backdrop for the anti-discriminatory framework within which all services of the department are expected to operate. Examination of Forms F, and interviews with placing social workers and adopters, revealed that further thought should be given as to how the needs of children from black and minority ethnic communities can best be met. The Forms F seen generally lacked analysis of diversity issues; and the adoption team social workers indicated that they would welcome specific training in this aspect of the assessment process, as well as in the targeted recruitment of adopters from black and minority ethnic backgrounds.

It is acknowledged that work is being undertaken on how the children and families' department can improve its overall provision to children from the black community, following an external evaluation of its services in this area; however the adoption service needs to show evidence of how this work translates directly to its own service provision.

The agency should review its policy and information for foster carers who become adopters; in particular, what practical and financial support might be available. The agency should consider consulting such adopters as part of this review.

In all, feedback from those who had been or were still going through the adoption process was positive. Relevant checks were carried out and prospective adopters were informed of, and understood the reasons for them. Adopters generally found their social workers to be professional, sensitive and respectful towards them. (There was one striking exception found among the returned questionnaires; the content of which was noted, and has been taken into consideration alongside other findings).

**See Requirement 2**

**See Recommendation 4**

<b>Standard 5 (5.1 – 5.4)</b>		
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.		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>There was evidence that adopters were given sufficient information on children; initially through the provision of a Form E; and subsequently via discussion with relevant parties; including if necessary, access to specialist advisers.</p> <p>Although the placement agreement addresses the question of the adoptive parents informing the agency if a child dies, the service should consider developing a written protocol for ensuring that adopters are aware of the importance of this issue and the keeping of written records in accordance with 5.3 of the National Minimum Standards.</p> <p>The profiles of potential adopters are collated in files and include videos and photographs as well as written information.</p> <p><b>See recommendation 5</b></p>		
<b>Does the local authority have written procedures for the use of the Adoption Register?</b>	NO	



**Standard 6 (6.1 – 6.7)**  
**Adoptive parents are helped and supported to provide stable and permanent homes for the children placed with them.**

<b>Key findings and evidence</b>	<b>Standard met?</b>	<b>2</b>
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Discussion with adopters and returned questionnaires indicated that that they felt very well supported by the adoption social workers. One adopter said that the usefulness of the preparation was less in the written information provided, but more in the detailed discussions that occurred during the preparation groups and assessment process.

There was evidence of the service working well with other agencies when a placement was in difficulties; with appropriate support offered throughout the crises.

Adopters indicated that the transition into placement was well thought through and supported by the adoption team with help being on hand generally as needed.

It is recommended that the agency reviews its current adoption allowance scheme; with a view to making it more flexible in meeting children’s and adopters’ needs, particularly in relation to children who have a disability and or complex needs.

Evidence from adopters, social workers and case tracking suggests the agency must develop strategies to help adopters understand and assist children to address racism and other forms of discrimination.

The adoption service should develop a system of monitoring the existence and quality of life-story work for children who have adoption as their plan.

**See Recommendation 6**  
**See Requirement 3**

<b>Number of adopter applications started in the last 12 months</b>	15	
<b>Number of adopters approved in the last 12 months</b>	18	
<b>Number of children matched with the local authority’s adopters in the last 12 months</b>	10	
<b>Number of adopters approved but not matched</b>	11	
<b>Number of adopters referred to the Adoption Register</b>	7	
<b>How many placements disrupted, between placement and adoption, in the last 12 months?</b>	0	

## Birth Parents and Birth Families

The intended outcomes for the following set of standards are:

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

**Standard 7 (7.1 – 7.5)**

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

**Key Findings and Evidence**

**Standard met?**

**2**

No birth parents or families were interviewed as a part of this inspection. One questionnaire was returned. The family who returned the questionnaire indicated that they felt ill-informed during the process and expressed the view that extended families should have access to independent advice and support.

There was evidence on files of birth families' views and wishes being recorded, but no evidence of whether this was actually considered and acted upon (or not). Birth parents sometimes are offered post-adoption counselling by members of the adoption team. This is not always taken up; and the agency should review the possible reasons for this.

The agency did not meet the requirements set out 7 (1) of the Adoption Agencies Regulations (1983). It must develop a written protocol and monitoring systems to ensure that all points listed are adhered to. Any information regarding the assessment, planning and adoption processes should be plainly written and available in languages and forms to best suit its intended audience.

**See Requirement 4**

**See Recommendation 7**

**Standard 8 (8.1 – 8.2)**

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

**Key Findings and Evidence**

**Standard met?**

**3**

The adoption service provides a post-adoption post box system for birth families to maintain contact with children placed for adoption. Birth families are encouraged to contribute towards information for Forms E and in providing information and photographs for life-story work. At the time of the inspection there was no system in place to monitor the existence and quality of life-story work; this should be rectified.

**See Recommendation 6**

**Standard 9 (9.1)**

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

**Key Findings and Evidence**

**Standard met?**

2

The adoption service had identified as part of its performance plan the need to develop a strategy for the provision of appropriate pre and post adoption support for birth parents and families.

At the time of the inspection consideration was being given to engaging with voluntary agencies for this purpose and the agency had recently advertised a post for an assistant social worker to contribute to this area of service. This must be given high priority as the agency fails to meet 7 (1) of the Adoption Agencies Regulations (1983).

**See Requirement 5**

## 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>3</b>
<p>The adoption panel was observed and the vice-chair was interviewed as part of the inspection process. There were clearly written policies and procedures available relating to the functions of the panel and all points under 10.2 of the National Minimum Standards were covered. All prospective adopters were given the opportunity to attend the panel, and evidence was provided of feedback from previous applicant attendees.</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.

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
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Bexley’s adoption panel is properly constituted and comprises relevantly qualified and experienced people. However the make-up of the panel is almost exclusively white European; consideration should be given to addressing how this imbalance might be addressed. The panel that was observed as part of the inspection was quorate.

All new panel members receive an induction pack but there was no evidence of induction training taking place. There was evidence during the inspection of apparently isolated incidents of naïve views being held in respect of perceived ‘political correctness’ in matching issues. Consideration must be given as to how such issues are covered before any person is appointed to panel. New members have the opportunity to observe a panel before joining properly.

Panel training is arranged at least annually and there are plans to introduce additional courses to cover the recent legislative changes.

It is recommended that the service produces a training needs analysis in respect of panel members and a plan that encompasses all points under 11.4 of the National Minimum Standards.

At the time of the inspection the independent members of the panel were in the process of being checked by the Criminal Records Bureau (CRB). However, it is accepted that these checks had been completed before the report was published.

The agency must produce and properly maintain discrete files on each of its panel members that provides evidence of the relevant checks (including for those of employees), and information required under Regulation 15 and Schedule 4 of the Adoption Agencies Regulations (2003).

**See Requirement 6**  
**See Recommendation 8**

<b>Is the panel a joint panel with other local authorities?</b>	<b>NO</b>	
<b>Does the adoption panel membership meet all of the statutory requirements?</b>	<b>YES</b>	

<b>Standard 12 (12.1 – 12.3)</b> <b>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.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>The Adoption panel meets monthly and panel members receive the necessary papers 7 to 10 days in advance of the meeting. This was borne out during the inspection. From the observation of the panel it was clear that all panel papers had been read by each panel member.</p> <p>The minutes of the panels to which the inspectors had access appeared to reflect the debate (which the vice-chair confirmed was always the case). At the panel which was observed, members were seen to discuss and agree the accuracy of the previous meeting.</p>		

<b>Standard 13 (13.1 – 13.3)</b> <b>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.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
<p>The director of social services is the agency decision maker and he receives the relevant paperwork within one week of the panel's sitting. If the decision maker has any queries then he meets with the panel chair to address them before making the final decision. There is a process whereby the papers are turned around more quickly if there is indication that introductions should start urgently. Good practice would dictate that all decisions are processed in as short a time as possible. It is recommended that specific timescales are introduced on the processing of all panel recommendations; and that they are monitored by the service and included in outcomes statistics.</p> <p>Systems are in place for the oral and written relaying of decisions by and to the appropriate people.</p> <p>Although the process of recommendation and approval is set out in writing by the agency; there was evidence from adopters that they believed that they had been "approved" by the panel. Those spoken to were unaware of the final stage of the process. The agency needs to consider how they will ensure that adopters understand this process.</p> <p><b>See Recommendation 9</b></p>		

## 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?	2
<p>The manager of the adoption service has a professional social work qualification. At the time of the inspection she was undertaking an MA / Advanced Social Workers' Award (management route). It is envisaged that this award will be completed by April 2005: However, it is accepted that before the report was published another manager was appointed, who did have an appropriate management qualification.</p> <p>The manager at the time of the inspection proved very knowledgeable and experienced in adoption matters. Social work staff stated that they felt supported by their manager, who, they said was open and approachable.</p> <p>The service needs to review its use of social work resources in the children's placement team; for example, there was evidence to suggest unnecessary delays caused by the manager employed at the time of the inspection, having to attend all permanency planning meetings, for which her diary did not always have the capacity. Also, some adoption team staff assume case responsibility on a 'negotiated' basis with child care colleagues. The process by which this happened was not clear, and the service needs to consider whether the interests of the child are appropriately served by this practice.</p> <p><b>See Requirement 7</b> <b>See Recommendation 10</b></p>		
<p><b>Does the manager have Management NVQ4 or equivalent?</b></p>	NO	
<p><b>Does the manager have at least 2 years experience of working in a childcare setting in last 5 years?</b></p>	YES	

**Standard 15 (15.1 – 15.4)**

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

**Key Findings and Evidence**

**Standard met?**

3

The social services department had recruitment and selection procedures, which at the time of the inspection required updating.

At the time of the inspection, examination of personnel records revealed gaps in required information. Although the manager confirmed that written references are followed up with telephone enquiries there was no evidence on file to corroborate this. However before the report was published, evidence has been produced to indicate that this standard is now met and the recruitment and selection procedures had been reviewed and amended appropriately.



## Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

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

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

**Key Findings and Evidence**

**Standard met?**

2

There are clear arrangements in place to identify the person in charge in the manager's absence. Discussion with social work staff revealed that all of the managers through to the assistant director, to be very approachable and accessible; especially in terms of consultation on cases. The council's code of conduct informs employees of their responsibility to declare any conflicts of interest.

The children families' division engaged a team of external consultants to evaluate its work in relation to the delivery of services to children of black and ethnic communities. This prompted the adoption service to review its own policies and procedures in relation to issues to do with diversity in its resource provision to children and adults.

Although the service had referred cases to the National Adoption Register on several occasions up to the time of the inspection; there were no written procedures covering such usage. These should be developed to comply with 16.7 of the National Minimum Standards.

**See Recommendation 12**

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

4

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

2

**Standard 17 (17.1 – 17.3)**

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

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

2

There was some evidence of the service monitoring and controlling its activities through supervision of staff, and statistical information provided to the adoption panel and elected members. At the time of the inspection a database was being developed and the service needs to ensure that it produces:

- a) a straightforward system for producing relevant data that can be analysed in a way that is useful for the development of the service and
- b) a way of monitoring all activity so that any good practice can be highlighted; and any potential shortfalls identified quickly and contingencies put in place.

Before the report was published it is accepted that the database had been established. Statistical information that is collated at present is sent to the executive side of the council quarterly; this incorporates the service activity reports that are required by the department of health. Discussions with elected members of the council revealed an essentially child centred approach and an understanding of some of the issues related to adoption matters. However, it is recommended that consideration be given to revising the knowledge base of the executive side of the council; ensuring that they are fully au fait with the service's philosophy and up to date with the required changes in policy and procedure.

**See Requirement 7**

**See Recommendation 13**

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

<b>Monthly?</b>	
<b>Quarterly?</b>	YES
<b>Less than Quarterly?</b>	

**Standard 18 (18.1 – 18.5)**

The adoption agency has access to specialist advisers and services appropriate to its needs.

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

2

There are medical and legal advisers available to the staff and panel who are reported to be knowledgeable, and approachable for consultation. Although staff in the service would have access to specialist advice from other agencies; there is no written guidance for staff to follow. It is recommended that this be corrected. At the time of the inspection, staff expressed the view they would welcome training and advice regarding issues of race and culture.

The service has an appropriate written protocol governing the role of specialist advisers.

**See Recommendation 14**

## Employment and management of staff

The intended outcome for the following set of standards is:

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

**Standard 19 (19.1 – 19.14)**

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

**Key Findings and Evidence**

**Standard met?**

2

The agency has recruitment and selection procedures. At the time of the inspection examination of personnel files revealed that that application forms are retained but records of panel interviews are not. All those who interview staff undergo the council's training on recruitment and selection, and refresher training is available to managers.

All written references must be followed up by telephone enquiries. CRB checks must be completed on all staff working for the service and a system should be set in place to ensure their renewal every three years. It is accepted that prior to the report being published, this had been completed.

The service were able to evidence before the report was published that they had full and satisfactory information on each member of its staff, in respect of matters set out in Schedule 3 and their recruitment procedures had been reviewed to incorporate the requirements of the legislation.

All social workers are appropriately qualified and knowledgeable about the broad adoption process. It was recognised that there is a wealth of experience within the adoption team; however, there was also recognition that the team would benefit from the opportunity to refresh its approach to practice issues. At the time of the inspection, one assistant social worker was undertaking the employment route to DipSW qualification; one member of the adoption team had achieved PQ in child care and one social worker was working towards PQ1.

The adoption service expects to meet the target of having 20% of its workers holding, or on course to achieving, the Post Qualifying Child Care Award by April 2006. The agency should inform the commission when this target is met.

**See Recommendation 15**

**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**

At the time of the inspection there were 14 qualified social work staff in the children's placements team (permanent and non-permanent) equalling some 11.5 full time equivalents. There were also two full time assistant social workers. The team was also able to call upon the services of an independent social worker as required. The team concentrates on both fostering and adoption work. There are also times when workers assume case responsibility for a child.

Many of the staff reported that they were working in excess of their hours, in goodwill, for time off in lieu. Some staff felt that the fostering agenda sometimes overshadowed the adoption work (but understood why it had to at times); and there were mixed feelings regarding taking case responsibility for children placed for adoption. To the inspectors it seemed that the team required some incisive intervention in order to obtain a clear sense of direction. To achieve this will require an objective review of the team's activity (with effective monitoring systems in place) as well as a realignment of the workload management system to ensure the most effective use of staff resources. Consideration should be given as to how the fostering and adoption agendas might best be met, and as to whether the placement workers should be taking on case responsibility.

The children's placement service has a competent and knowledgeable administrative team, who appeared sensitive to the needs of would-be adopters. There was particular understanding of the response to the first, often difficult to make, telephone call. Adopters supported this finding.

**See Requirement 7.**

**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.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
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Bexley’s adoption service has been affected by the national shortage of suitably qualified and experienced social workers to fill vacancies. At the time of the inspection, the children’s placements team relied on the services of agency social workers for the filling of the equivalent to 2.25 full time posts. One of these had been employed on this basis for three years. The staffing complement was in line with the statement of purpose.

The management and staff confirmed that the adoption work has increased in line with the national and local agendas; which further highlights the need for a review such as outlined in the standard above.

At the time of the inspection, the pay and conditions of the workers in the children’s placement team were less favourable than those of their child care colleagues; which could have had further detrimental effects on the retention of staff in the future. However, senior managers confirmed that a new recruitment and retention strategy was being considered at board level. It is accepted that prior to the publication of the report, that this was completed.

<b>Total number of social work staff of the adoption service</b>	21	<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>	2.5	Currently filled with agency staff	

**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.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
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Bexley council has apparently sound employment practices. As well as the support found through the supervision process; staff can access a free and confidential counselling service. The occupational health unit and mediation service is also available to employees. The council has a whistleblowing policy of which staff are aware, and about which staff were due to receive training.

**Standard 23 (23.1 – 23.6)**

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

**Key Findings and Evidence**

**Standard met?**

**2**

The children and families' division of the social services department has a training plan, within which, intended training specific to the adoption service is incorporated. Each member of the adoption service has a personal development portfolio, which contains records of training undertaken. Each new employee is expected to undergo induction training commensurate with the TOPSS Induction Standards.

There is a system of bi-annual assessment of individual training needs; but no evidence that training undertaken is evaluated according to individual learning outcomes and linked in to the continuing assessment of staff needs. It is recommended that the adoption team liaises with the in-house training department in order to develop a system of evaluation of training that links directly to performance requirements.

As well as access to in-house courses, the adoption team are able to attend training provided by BAAF, which is reportedly always well attended and received.

**See Recommendation16**

## Records

The intended outcome for the following set of standards is:

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

### Standard 25 (25.1 – 25.5)

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

Key Findings and Evidence	Standard met?	2
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The adoption service has appropriate written policies and procedures that cover the points raised in 25.2 of the National Minimum Standards. There was evidence on files regarding appropriate CRB checks, enquiries and written references obtained on adopters and other adult members of the household, and their outcomes. There was evidence on one file seen of the adoption worker contacting an ex-partner in relation to an applicant; but in another case there was none. It is recommended that managers remind social workers of the need to make all practicable efforts to trace ex-partners of prospective adopters and to record the efforts made when this has not proved possible.

The method for keeping records is congruent with the Looked After Children system. Records are stored appropriately in fire-proof containers.

There was evidence on the files seen during the inspection that discussion of individual cases had occurred; but not necessarily of the content of such discussion. On the supervision case sheets there was a potentially useful space headed 'feelings' which was not completed in any of the files examined. This should be remedied.

Case files had been audited prior to the inspection, and it is understood that this shall continue on a regular basis.

**See Recommendation 17**

### Standard 26 (26.1 – 26.2)

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

Key Findings and Evidence	Standard met?	2
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The adoption service has an appropriate policy and attendant procedures governing the access to records which take into account the requirements of the Data Protection and Human Rights legislation. However they should be amended to take account of the issues listed under 26.2 of the National Minimum Standards.

**See Recommendation 18**

**Standard 27 (27.1 – 27.6)**

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

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

2

There are separate files kept in respect of staff (stored by personnel department), complaints and allegations (kept by the adoption service manager). There is a written policy on case recording a copy of which was supplied to the inspectors. Although the files had been audited prior to the inspection, there was no evidence of remedial action having been taken. Supervisors should make a note of action required and when completed. Not all written records on files examined during the inspection were legible; consideration should be given to computerised record keeping. Not all entries were date marked; this should be addressed.

**See Recommendation 19**

**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?**

3

At the time of the inspection staff personnel records seen did not meet this standard. However, it is accepted that prior to the publication of the report, evidence was provided to show that this standard is now met in full.



## Fitness of Premises

The intended outcome for the following standard is:

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

Standard 29 (29.1 – 29.5)

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

**Key Findings and Evidence**

**Standard met?**

3

The premises of the adoption service are fit for purpose. Staff expressed satisfaction with them (but many remarked that it would be better if the children and families teams were placed back there). It is recommended that the agency reviews its provision of computers for social work staff .

There are lockable facilities for records in place and IT systems are protected by passwords and ant-virus arrangements. The building is adequately protected and insured, although consideration should be given to ensuring that all sections of the car parking areas are fitted with adequate lighting. The adoption service falls within the remit of Bexley's Emergency Planning Remit.

**See Recommendation 20**

**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 3 November 2003 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary

YES

Comments were received from the provider

YES

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

YES

Provider comments are available on file at the Area Office but have not been incorporated into the final inspection report. The inspector believes the report to be factually accurate

**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 10 November 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

YES

Action plan was received at the point of publication

YES

Action plan covers all the statutory requirements in a timely fashion

YES

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

Provider has declined to provide an action plan

Other: <enter details here>

**Public reports**

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

**D.3 PROVIDER'S AGREEMENT**

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

**D.3.1 I \_\_\_\_\_ of Bexley 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 \_\_\_\_\_ of \_\_\_\_\_ am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:**

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

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

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