



Champions for
Social Care
Improvement

inspection report

Local Authority Adoption Services

London Borough of Sutton

The Lodge

Honeywood Walk

Carshalton

Surrey

SM5 3NX

17th 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

London Borough of Sutton

Headquarters Address

The Lodge, Honeywood Walk, Carshalton, Surrey, SM5
3NX

Adoption Service Manager

Ian Lewis

Tel No:

020 8770 4507

Address

The Lodge, Honeywood Walk, Carshalton, Surrey, SM5
3NX

Fax No:

020 8770 5214

Email Address

ian.lewis@sutton.gov.uk

Certificate number of this adoption service

Date of last inspection

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

Date of Inspection Visit		17th November 2003	ID Code
Time of Inspection Visit		10:00 am	
Name of Inspector	1	Jane Allan	078961
Name of Inspector	2	Kathy Mann	127098
Name of Inspector	3		
Name of Inspector	4		
Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the NCSC. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
Name of Specialist (e.g. Interpreter/Signer) (if applicable)			
Name of Establishment Representative at the time of inspection			

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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 London Borough of Sutton. 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 adoption service of the London Borough of Sutton, which is known as the Adoption and Permanence Team is based in The Lodge in Carshalton which also houses the Fostering Team, the Assessment and Care Planning teams of the Children and Families Service. The team, which comprises a full time manager and four full time and two part time social worker posts, is a constituent part of the wider Adoption, Permanence and Fostering Service which also employs a recruitment and publicity officer and is led by a Service Manager.

The primary function of the Adoption and Permanence Team is to fulfil a range of tasks associated with providing a service for children looked after by the local authority for whom a return to their birth family has been ruled out. The team also provides a service to adopted adults. A service is provided to inter-country adopters in conjunction with the Overseas Adoption Helpline.

The authority has entered in to a Local Public Service Agreement with the Department of Health with the intention of increasing the numbers of children looked after by the borough who are adopted between April 2002 and March 2005.

The authority is a member of the South West London Adoption Consortium which seeks to pool resources in terms of access to adoption placements and in the provision of preparation training and ongoing support to adopters.

The service has developed rapidly during the last 2 years and although appointments have not been made to two newly created posts in kinship care and adoption support, the staffing establishment for the team appears to be adequate and provision has been made for the demands of new legislation.

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.)

Statement of Purpose (Standard 1)

This standard was partially met.

A Statement of Purpose has been produced in response to the requirements of regulations and new legislation. This document adequately addresses all but two of those matters outlined in Schedule 1 of the regulations.

Securing and Promoting Welfare (Matching) (Standard 2)

This standard is met.

This is an area of particularly good practice.

As a consequence the borough has a recruitment profile that mirrors the profile of Looked After Children. The creation of a recruitment and publicity officer post servicing the fostering and adoption teams has been critical in achieving this congruence and the borough is commended for this. There is a well-documented family finding procedure and a variety of strategies are employed to disseminate it.

Prospective and approved adopters (Standards 3,4,5,6)

Each of the standards were met.

This is also an area of good practice and adoptive parents praised the staff of the service for the efficient and sensitive manner in which the approval process was orchestrated. Publicity material is of a high quality and information packs are well presented.

Preparation groups are run in conjunction with Consortium partners. They include contributions from adoptive parents, birth parents, adoptees and health professionals. The assessment process appears to be robust and to be characterised by a thorough and professional approach. Those people wishing to adopt from another country are referred to the Overseas Adoption Helpline for specialist preparation training and subsequently assessed by Sutton staff.

Support is routinely provided to adoptive parents until the making of an adoption order and for 12 months thereafter.

Birth Parents and Birth Families (Standards 7,8,9)

Each of the standards was assessed as partially met.

Field social workers are the primary source of support for birth parents. They may be referred for counselling and support to a local voluntary agency but do not routinely have access to a support worker independent of their child's social worker.

Birth parents and other significant family members are consulted and given the opportunity to be involved in the making of the permanency plans for children. The content of the Form E is shared with birth family members whenever possible and their views about adoption are recorded on files, in Forms E, in matching reports and in later in life letters.

The authority operates a system for letterbox contact between adopted children and birth family members.

Support services are being developed in line with the Adoption and Children Act 2002.

Adoption Panel and Agency Decisions (Standards 10,11,12,13)

All four standards were assessed as met.

The Sutton Adoption and Permanence Panel has an independent chair and meets once a

month. There are clear written policies and procedures relating to the handling and implementation of panel functions. The 'Panel Briefing' that takes place in advance of each panel is a quality assurance forum that engenders confidence in presenting social workers and generates panel debate that focuses upon substantive issues rather than the minutiae of paperwork. It is an example of excellent practice that has wide ranging benefits. Prospective adopters have the opportunity to attend the adoption panel. Panel members include an adopted adult, an adoptive parent and an educational psychologist. In November 2003 there was an appropriate gender mix but no panel members were from black ethnic minorities. The elected member has positions on a number of key committees within the Council and is an effective conduit between the adoption panel and other forums and key personnel that represent the interests of children in the Borough.

Management of the Adoption Agency (Standards 14,15)

Both standards were assessed as met.

Those involved in managing the adoption service are suitably qualified and experienced. It is well managed, both strategically and operationally. It is a service that has undergone radical change in the last two years under the leadership of managers who have negotiated the necessary resources to achieve an adequate staffing establishment and to be responsive to the demands of new legislation.

Provision and Management of the Adoption Agency (Standards 16,17,18)

Both standards were assessed as met.

The adoption service is managed effectively and efficiently and operates in accordance with the Statement of Purpose.

There are sound and wide ranging procedures for monitoring, controlling and reporting on the activities of the service and for ensuring quality performance. The existence of a Public Service Agreement has given further impetus to the activities of the adoption service. The service has access to a medical adviser and to legal advice. A clinical psychologist also provides support to the adoption and fostering teams.

Employment and Management of staff (Standards 19,20,21,22,23)

Four of the five standards were assessed as met and one as partially met.

Recruitment and selection procedures follow good practice in safeguarding children and young people.

The staff team employed at the time of the inspection had appropriate qualifications and skills. They demonstrated commitment and enthusiasm and it was evident to inspectors that they are motivated to achieve high standards in adoption practice.

Staff confirmed that they receive good quality supervision on a regular basis and have access to external training. The quality of administrative support to the team was reported by social work staff to be 'excellent'.

There are structures and systems in place to ensure that assessments and approvals of prospective adopters are managed and implemented effectively and completed within the timescales prescribed by National Adoption Standards.

The staffing establishment appears to be adequate.

Records (Standard 25,26,27,28)

Two of the four standards were assessed as met and two as partially met.

The authority has written policies on confidentiality, on recording and on file retention and storage. Those case records that were seen at the inspection were well presented and organised in a way that made them easy to access. There is a file audit policy and evidence of audits and of actions arising from them was seen. Records of supervision decisions appeared on the files of both children and adopters. The authority has a policy on access to user records. Relevant information is provided from case files to adoption agencies and local authorities in order to facilitate placements.

Confidential records are stored securely and IT systems are password protected.

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

Fitness of Premises (Standard 29)

Adoption and Permanence Team workers occupy adequate office accommodation adjacent to that occupied by administrative staff and the Fostering Team. The building is accessible to the public. Staff are supported by efficient and robust administrative systems.

Appropriate measures are in place to safeguard IT systems and security measures operate within the building.

Reports and Notifications to the Local Authority and Secretary of State

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

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

NO

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

YES

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

NO

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

NO

The grounds for the above Report or Notice are:

That the inspection identified one failure to satisfy regulatory requirements that is not substantial.

**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	2	LA1	That the Statement of Purpose must be amended to include; a summary of the complaints procedure of the local authority and the address and telephone number of the Commission	March 2004
2	Adoption Agencies Regs 1983 15 (3)	LA26	That a written record must be kept of any access provided or disclosure made in line with Regulation 15 of the Adoption Agencies Regulations 1983	Immediate
3	11	LA28	Personnel files must be established for all panel members including all information in Sch. 3	March 2004

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 style and presentation of the Statement of Purpose should be modified to take account of the readership
2	LA1	Items equivalent to the in-house consultation materials used with children and young people in advance of statutory reviews should be produced to assist children of all ages and abilities to understand the adoption plan
3	LA3	A copy of the complaints procedure of the authority and the policy on access to records should be included in the information pack that is sent to prospective adopters
4	LA4	The particular preparation needs of foster carers seeking to become approved as adopters for children in placement should be addressed more appropriately
5	LA4	Confirmation should be obtained with regard to the employment of applicants in the previous five years
6	LA4	The service should develop guidelines as to the circumstances in which previous partners of either applicant will be contacted
7	LA4	Recording which provided evidence for the judgements made in Forms F should be retained on file as a matter of course
8	LA6	The Family Finding Procedure should be revised to include additional references to arrangements associated with convening disruption meetings
9	LA6	The workload of the adoption support worker should be closely monitored
10	LA7	Birth parents should have access to a support worker that is independent from the child's social worker
11	LA8	The timing of the transfer of cases involving children placed for adoption should be given careful consideration
12	LA9	Mechanisms for providing support to birth parents should be extended and that they should be provided with written information about support services
13	LA10	Consideration should be given to including observation of the adoption panel in the induction of new social workers and reviewing officers
14	LA18	A written protocol governing the role of specialist advisers should be produced

15	LA19	Specialist training should be provided for staff who take responsibility for counselling under section 51 of the Adoption Act 1976
16	LA20	Staff who attend external training should routinely cascade the content to colleagues
17	LA25	The form of the record of supervision decisions placed on adopters files should replicate that on children's files
18	LA26	The policy and practice guidance on access to user records should take into account the requirements of the Human Rights Act 1998
19	LA26	Written confidentiality agreements should be routinely obtained from those persons to whom information is being disclosed from case files and that a written record of access provided or disclosure should be kept
20	LA27	The adoption service should notify the National Care Standards Commission or its successor organisation of the instigation and outcome of any child protection investigation involving children placed for adoption

- 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	YES
Observation of adoption panel	YES
Inspection of policy/practice documents	YES
Inspection of records (personnel, adopter, child, complaints, allegations)	YES
Date of Inspection	17/11/03
Time of Inspection	09.30
Duration Of Inspection (hrs)	63
Number of Inspector days	8.4
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)	4

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
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A Statement of Purpose has been produced in response to the requirements of regulations and new legislation. This document adequately addresses all but two of those matters outlined in Schedule 1 of the regulations. To comply fully it should be amended to include; a summary of the complaints procedure of the local authority and, the address and telephone number of the Commission. The readership of the Statement of Purpose may include children, as well as all of those adults in the adoption triangle and it is recommended that the style and presentation be modified to take account of this.

Policies, procedures and other written guidance to staff reflect the content of the Statement of Purpose and the inspectors concluded that it provides an accurate description of the facilities and services provided by the London Borough of Sutton adoption service.

An annual report on the adoption service is presented to the Learning Services Performance Committee of the Council. In future the annual report should also consider the performance of the service against the Statement of Purpose.

The service has not developed a children's guide to adoption but utilises the BAAF publication; 'Adoption – What it is and what it means. A guide for children and young people'. It is designed for the use of children of six upwards for whom adoption is the plan and embraces all of that information required by standards and regulations. It also provides space for the agency to incorporate details of its own services. The manager of the Adoption and Permanence Team indicated that the adequacy of this publication would be reviewed in due course.

Inspectors saw excellent examples of in-house consultation materials that have been developed for use with children in advance of statutory reviews and recommend that the service develop something that is similar in style and presentation for use with children, of all ages and abilities, for whom adoption is the plan.

Adopters are given advice about age appropriate literature that will assist adopted children to understand the concept of adoption at different stages in their life.

Information provided by the adoption service is not routinely made available in alternative formats or languages but would be produced as required.

Has the Statement of Purpose been reviewed annually? (Record N/A if the information is not available)	NA
Has the Statement been formally approved by the executive side of the council?	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?	YES

Securing and promoting children's welfare

The intended outcome for the following set of standards is:

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

Standard 2 (2.1 - 2.3)

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

Key Findings and Evidence	Standard met?	3
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This is an area of particularly good practice.

The service has a Marketing and Recruitment Plan for the period from September 2003 to March 2005 that is based on close monitoring and sophisticated analysis of two years of recruitment and advertising activity. As a consequence the borough has a recruitment profile that mirrors the profile of Looked After Children.

The creation, in 2001, of a recruitment and publicity officer post servicing the fostering and adoption teams has been critical in achieving this congruence and the borough is commended for this.

The general adoption recruitment objectives are:

- to generate an increase in enquiries for older children, for children with disabilities and for children from ethnic minorities and dual heritage backgrounds
and
- to increase the number of adoption enquiries from outside the area in order to meet the need for adoption placements to be made away from the borough

A series of other objectives relate to timescales associated with the distribution of information packs and application forms, to the conduct of initial visits and to the completion of assessments.

Staff are alert to the need to be cautious and to provide training for both staff and panel members in advance of promoting recruitment in the specialist press or in minority forums of various kinds.

The recruitment and publicity officer is responsible for general advertising campaigns for adopters as well as specific advertising for individual children, and routinely attends the first permanency planning meeting for a child.

There is a clear family finding procedure. This is encompassed in a booklet that is designed to be a working tool to guide departmental staff through the process, it specifies tasks and timescales and includes report pro-formas and sample agendas for planning meetings. Briefing sessions for field social work staff and independent reviewing officers on the process and the importance of the early formulation of permanency plans complement this guidance. These formal strategies, allied with the close physical proximity of adoption and permanence staff to other social work teams, are instrumental in promoting effective planning for children.

On the basis of evidence gathered during the inspection it would appear that children are matched with adopters who best meet their assessed needs. Inter-agency placements will be sought at an early stage for children with very specific needs. Two inter-agency matches were recommended at the panel observed by an inspector in November 2003. Membership of the South-West London Consortium widens the pool of approved adopters to which Sutton staff have access but at the time of the inspection the benefits in terms of placements had been limited.

Inspectors found evidence to the effect that the views and feelings of children had been taken in to account in matching them with adopters.

In the last 12 months:

How many children were identified as needing adoptive families?	12	
How many children were matched with adopters?	12	
How many children were placed with the service's own adopters?	10	
How many children were placed with other services' adopters?	2	
How many children were referred to the Adoption Register?	X	
In the last 12 months, how many children were matched with families which reflected their ethnic origin, cultural background, religion and language?	11	
What percentage of children matched with the adoption service's adopters does this represent?	X	%
How many sibling groups were matched in the last 12 months?	2	
How many allegations of abuse or neglect were made about adopters approved by this adoption service?	1	
On the date this form was completed, how many children were waiting for a match to be identified?	4	

Prospective and approved adopters

The intended outcome for the following set of standards is:

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

Standard 3. (3.1 – 3.3 and 3.5 - 3.6)

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

Key Findings and Evidence	Standard met?	3
See also Standard 2.		
<p>Those adoptive parents who were interviewed and who completed questionnaires were, almost without exception, positive about the speed and nature of the response at the point of initial enquiry. This was particularly true of those who had made contact in the two years prior to the inspection. All of them praised the staff of the service for the efficient and sensitive manner in which the subsequent process was orchestrated.</p> <p>Publicity material is of a high quality and information packs are well presented. The text is clear and concise and makes reference to all of those matters referred to in National Minimum Standards, including the rationale for prioritising certain applications. Timescales for the despatch of information packs are clearly defined and closely monitored.</p> <p>It is recommended that copies of the complaints procedure and of the policy on access to records are included in the information pack.</p> <p>An initial enquiry form is enclosed with the information pack and those who return it are offered an initial interview. Thus, all applicants who live within Sutton will be seen at least once. Dates for initial interviews are pre-planned. This is good practice that serves to reduce waiting times.</p> <p>The initial interview will usually be conducted by two staff. The outcome is relayed to the manager of the Adoption and Permanence Team who will determine whether or not to proceed. That decision will be based on the probability of the applicants providing a service that is needed. If the eligibility criteria are met and the applicants seem likely to progress to approval they must attend preparation groups before the assessment can commence.</p> <p>Staff of the adoption service undertake preliminary interviews with those wishing to adopt from another country but refer applicants to the Overseas Adoption Helpline for specialist preparation training. Assessments are subsequently carried out by Sutton staff and applications presented to the Sutton adoption panel.</p> <p>Discussion with approved adopters and scrutiny of files confirmed that there is consistency between policy and practice in relation to recruitment, preparation and assessment.</p>		
Members of the Adoption and Permanence Team operate a duty system in conjunction with the Fostering Team.		

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**

See also Standard 3.

Preparation groups are run three or four times a year in conjunction with the two Consortium partners. The facilitators of the groups will always include a member of the Sutton Adoption and Permanence Team. The groups are held in a convenient location and run over four days; two weekdays and two Saturdays. They include contributions from adoptive parents, birth parents, adoptees and health professionals. Attendance of both partners in a couple is mandatory and the groups are a constituent part of the assessment process. Participants are made aware of the fact that the groups have an assessment component. Pertinent issues are relayed to the assessing social worker and the views of the group facilitators are recorded in the Form F. Issues of anti-discriminatory practice are addressed in the training programme.

The facilitators evaluate the content of each preparation group and participants are invited to give feedback. Staff are aware of the pitfalls of trying to meet the needs of a range of prospective adopters in a single group and of the need to tailor the composition of groups to ensure that issues relating to certain categories of adopter are adequately addressed. In the course of the inspection it became apparent that groups and other aspects of the preparation were failing to address the particular needs of foster carers seeking to become approved as adopters for children already in placement.

Adoptive parents reported that they found preparation groups informative and thought provoking and that they had particularly valued the contributions of those directly involved in the adoption triangle. It was also clear from the comments of some that the aim of developing informal support networks between adoptive families had been achieved.

The individual assessment of prospective adopters is recorded on BAAF Form F. Staff undertaking assessments had attended BAAF training in the completion of Forms F. They reported that, as a consequence of that training, the assessment process is 'more thorough' and that practice in relation to consultation with referees, the inclusion of education and employment chronologies, contact with previous partners and competencies had developed.

In the interests of good practice it is recommended that confirmation is sought in relation to the employment record of applicants over the previous five years.

The assessment process appears to be robust and to be characterised by sensitivity, thoroughness and a professional approach. Adoptive parents spoke and wrote very positively about their experience of the assessment process and of the staff undertaking assessments. The assessment includes health and safety checks.

With one exception, the files of adopters that were examined included recording which provided evidence for the judgements made in Forms F. Such recording should be retained on files as a matter of course.

Appropriate statutory checks are undertaken on prospective adopters.

Checks are not routinely made on previous partners, however the appropriateness of doing so is considered on a case by case basis. In the interests of applicants and assessing social workers it is recommended that the service develop guidelines as to the circumstances in which previous partners of either applicant will be contacted.

The administrative procedures for initiating and tracking the completion of relevant checks are managed efficiently.

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

Approved adopters are provided with written information about the matching, introduction and placement process.

The service has produced a matching report pro-forma that addresses all the relevant issues. Those reports seen by inspectors were comprehensive, considered pieces of work.

Details of the Adoption Register are included in the information pack and inspectors saw evidence of routine referral to the Register.

There is undoubtedly an intention to ensure that adoptive parents are provided with as much background information about the child as possible and each of the six domestic adopters who submitted questionnaires indicated that they had been given adequate information. Adopters are given a copy of the BAAF Form E on any child/ren whose placement they are considering. They would invariably be provided with additional information from other sources, notably current carers. Preliminary meetings with the social worker for the child and where appropriate, with current carers, take place prior to the matching recommendation.

It was apparent from attendance at panel that members are very aware of the fact that the BAAF Form E will serve as the primary source of background information for the child later in life and that the content should therefore be accurate and carefully presented.

Contact arrangements with birth family members and significant others are recorded, as are the arrangements for contact with the adoption agency in the event of the death of the adopted child.

Prospective adopters are asked to produce information about themselves, in a suitable format, that can be shared with the child to be placed with them.

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

It was evident from discussion with adoptive parents and from questionnaire responses that preparation and support services are designed to, and indeed do, assist adopters to develop their understanding of issues relating to adoption and to the specific needs of children.

The preparation programme addresses relevant issues and utilises a variety of exercises that are intended to assist applicants to make links between a child's previous experiences and their behaviour, to recognise the importance that identity plays in adoption, to acquire an understanding of attachment and to appreciate the life-long nature of adoption. Applicants are provided with an abundance of written material and references which they can use to enhance the learning that takes place in groups and during the assessment process.

Support is routinely provided to adoptive parents until the making of an adoption order and for 12 months thereafter. In feedback to inspectors a small number of waiting adopters expressed dissatisfaction with the frequency and nature of the support offered to them in the interval between approval and the placement of a child.

Adoption support workshops take place three times a year under the auspices of the South West London Consortium. The meeting in December 2003 was to focus on mental health issues. There is an annual adoption picnic which offers a range of entertainment as well as the opportunity for adopters to forge mutually beneficial links.

The authority has developed an adoption support strategy in response to the requirements of the Adoption and Children Act 2002 that includes the creation of a specialist adoption support worker post. Whilst this constitutes a commendable response to new legislation inspectors were concerned that there was potential for the post-holder to become the repository of too many diverse tasks. That post was vacant at the time of the inspection in November 2003.

There is an expectation that adoptive parents will be given appropriate memorabilia that relates to the child's life prior to placement and that this will be shared with the child to assist them to understand and reflect upon their history.

Inspectors found evidence to suggest that foster carers going on to adopt were not given accurate and clear information about adoption allowances and the production of written information for this specific group is therefore welcomed.

The manager of the Adoption and Permanence Team indicated that the family finding procedure was to be revised to take account of actual practice in relation to disrupted placements and that the revision would incorporate references to the arrangements associated with disruption meetings. Inspectors endorse this intention.

The minutes/outcomes of disruption meetings are made available to the adoption panel.

Number of adopter applications started in the last 12 months

12

Number of adopters approved in the last 12 months	12
Number of children matched with the local authority's adopters in the last 12 months	10
Number of adopters approved but not matched	8
Number of adopters referred to the Adoption Register	X
How many placements disrupted, between placement and adoption, in the last 12 months?	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

Field social workers are the primary source of support for birth parents. Staff of the Adoption and Permanence Team are invariably present at meetings between birth parents and adopters and do encourage their field social work colleagues to gather as much background information and memorabilia as possible. However, they cannot significantly influence the quality of support that is offered to birth parents and do not ultimately determine whether and how this is done.

Birth parents may be referred for counselling and support to a local voluntary agency on the basis of funding from the local authority but they do not routinely have access to a support worker independent of their child's social worker. At the time of the inspection and in line with the content of new legislation the members of the South West London Consortium were considering the possibility of entering in to reciprocal arrangements to provide support to birth parents.

Examination of files and attendance at panel demonstrated that birth parents and other significant family members are consulted and given the opportunity to be involved in the making of the permanency plans for children. The content of the Form E is shared with birth family members whenever possible. Their views about adoption are recorded on files, in Forms E, in matching reports and in later in life letters.

Standard 8 (8.1 – 8.2)
Birth parents and birth families are enabled to contribute to the maintenance of their child's heritage.

Key Findings and Evidence	Standard met?	2
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In discussion with some adopters it became clear that material for life story books and memory boxes is not always gathered at an early stage and that, as a consequence, opportunities to acquire photos, other precious items and factual information may be missed.

Staff of the Adoption and Permanence Team confirmed that although the need for life story work is firmly on the permanency planning agenda it is not always embarked upon at an appropriate stage by field social workers. Problems in this area seem to be associated with staff turnover as well as the timing of the transfer of cases from the Family Support Team to the Care Planning Team for Looked After Children and Young People.

The current team structure means that by the time a child is in an adoption placement he/she will have had at least three social workers. Managers are seeking to devise strategies to ameliorate the worst effects of this, in terms of preserving critical background information, and reported that the transfer of a case would be delayed if this was likely to be to the detriment of a child.

Examples of later in life letters written by birth parents and/or social workers were seen on files. Recording on one file showed that there had been considerable negotiation with birth parents over the content of one later in life letter.

A system for letterbox contact between adopted children and birth family members operates in the authority. In November 2003 one member of the Adoption and Permanence Team had oversight of the service. Inspectors found no evidence to suggest that it was not operating adequately but staff did acknowledge that constraints on time had not allowed for any development of the service. In future the co-ordination of the letterbox service will be the responsibility of the person appointed to the post of adoption support worker.

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
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This is an area of work that warrants development. The Adoption Support Strategy that has been produced in response to the requirements of new legislation refers to the possibility of developing services to birth parents in conjunction with the Consortium.

At the time of the inspection there was a dearth of written information for birth parents about support services.

Adoption Panels and Agency decisions

The intended outcomes for the following set of standards are:

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

Standard 10 (10.1 – 10.3)

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

Key Findings and Evidence	Standard met?	3
<p>There are clear written policies and procedures relating to the handling and implementation of panel functions. Inspectors endorse the intention of the Service Manager to update these in response to new legislation and some internal changes.</p> <p>A 'Panel Briefing' session is convened two weeks in advance of each meeting of the Adoption and Permanence Panel. On these occasions the panel chair and the panel adviser, who is the manager of the Adoption and Permanence Team, review the papers for the forthcoming panel in conjunction with the presenting social workers. In this context omissions or errors can be identified and wider issues addressed in time for appropriate action to be taken before the actual panel meeting.</p> <p>The outgoing panel chair reported that the content of Forms E is variable, particularly in relation to the assessment and analysis of attachment issues. This reflects poorly on field social work line management.</p> <p>An inspector attended the panel briefing and concluded that it is a quality assurance forum that affords an excellent opportunity for expectations to be clarified and one that in turn engenders confidence in presenting social workers and generates panel debate that focuses upon substantive issues rather than the minutiae of paperwork. It is an example of excellent practice that has wide ranging benefits.</p> <p>For the last two years prospective adopters have been given the opportunity to attend the adoption panel. It was reported that most do attend. In an attempt to put them at their ease the chair of the panel goes out to speak to them before they come in to the panel meeting room. In discussion and in questionnaires, those adopters who had attended panel indicated that it had been a positive experience that was sensitively handled. With effect from December 2003 and on a trial basis, the panel was to extend invitations to adopters from other agencies to attend panel where matches with Sutton children were being considered.</p>		

Foster carers, and in some instances young children for whom best interest recommendations are being considered, come to panel. Panel members who were asked felt that this practice did assist their deliberations.

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?**

3

An inspector observed the adoption panel held on 6th November 2003.

The panel was properly constituted. Included amongst the membership of the Sutton panel, at that time, were an adopted adult, an adoptive parent and an educational psychologist. At that time there was an appropriate gender mix but no panel members were from black ethnic minorities.

The panel on 6th November 2003 was conducted with efficiency and the information provided to the panel was considered in detail before recommendations were made. It was apparent that panel members had been diligent in reading the papers. They appeared to be well informed, the quality of discussion was high and their deliberations were thoughtful and child focussed. The contribution of the medical adviser was wide ranging and reflected his extensive and very relevant experience. He, like the elected member, sits on the Corporate Parents Forum. The elected member holds positions on a number of key committees within the Council and appears to operate as a very effective conduit between the adoption panel and other forums and key personnel that represent the interests of children in the borough.

The Sutton panel has an independent chair. For ten years prior to December 2003 the provision of a chair was based on an agreement with Coram. The person who had occupied the post was appropriately experienced and praised by staff for her competence and diligence and capacity to engender a 'welcoming' atmosphere.

The arrangement with Coram will cease in January 2004 when a new independent chair will take up post. The new chair was observing panel on 6th November 2003. New panel members observe panel and are provided with various documentation and literature including the BAAF publication; 'Effective Panels'.

Annual joint training with adoption service staff is facilitated by outside trainers and includes the staff and panel members of Consortium partners. Most recently it had featured the requirements of new legislation and previously had considered the outcome of the Brighton and Hove Part 8 Enquiry and issues around applicants attending panel.

It is recommended that the induction of new social workers and reviewing officers include observation of a panel.

Personnel files must be established for all panel members.

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?**

3

The adoption panel meets once a month.

The administrative procedures that support the work of the panel are efficient and were reported to have improved considerably. Reports and associated paperwork are forwarded to panel members at least one week ahead of the meeting.

Minutes summarise the content of panel discussion and include clear recommendations and a separate statement of the reasons for reaching the conclusions.

The Any Other Business slot on the panel agenda is used to inform panel of events arising from their recommendations. This would include information about placements that have disrupted.

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?**

3

The panel adviser meets with the agency decision maker as soon as possible after panel and makes minutes and panel papers available. In offering a verbal synopsis of the cases presented to panel, she provides information that may not appear in the minutes.

Decisions are communicated to relevant parties in writing. Examples of such letters to adopters were seen on file.

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

Those involved in managing the adoption service are suitably qualified and experienced.

The service manager for Adoption and Fostering has a CQSW and has occupied the post since 2001. The manager of the Adoption and Permanence Team has a CQSW and practice teaching award and was appointed to that post in 2002. Both had extensive relevant experience prior to taking up their current posts.

The service manager is to commence an Executive Diploma in Management Studies at Kingston University in March 2004. This is equivalent to NVQ level 5 and it is anticipated that it will be completed by September 2005.

Inspectors concluded that the adoption service is well managed, both strategically and operationally. It is a service that has undergone radical change in the last two years. The rapid developments have primarily taken place under the leadership of the current managers who have negotiated the necessary resources to achieve an adequate staffing establishment and to be responsive to the demands of new legislation.

The two managers have job descriptions that set out their duties, responsibilities and level of delegation.

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?**

3

The Service Manager for Fostering and Adoption has a satisfactory enhanced disclosure from the Criminal Records Bureau. Senior staff in the department are reminded that CRB checks on staff who manage the adoption service must be renewed every three years and that telephone enquiries must be made to verify the written references of those appointed to such posts.

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

On the basis of evidence gathered from a variety of sources, inspectors concluded that the adoption service is managed effectively and efficiently and that it operates in accordance with the Statement of Purpose.

There are clear arrangements in place to identify the person in charge and it was reported that the two managers stagger periods of leave in order to ensure that one or other is available to staff.

The Adoption and Permanence Team is small and lines of communication between the manager and social workers in the team were reported to be effective.

Staff are required to declare any conflict of interest.

Arrangements are in place for making use of the services provided by the Adoption Register for England and Wales and these are described in the information pack that is sent to prospective adopters.

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

1

Number of the above complaints which were substantiated

1

Standard 17 (17.1 – 17.3)

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

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

There are clear written procedures for monitoring, controlling and reporting on the activities of the adoption service and ensuring quality performance. They are embraced in a number of documents and range from obtaining feedback from applicants about preparation groups and attendance at panel, through to the operation of the permanency planning spreadsheet, the submission of annual reports to the executive side of the Council, quarterly summaries of workflow and the close analysis of recruitment strategies.

A further and significant element of monitoring has been introduced through a Local Public Service Agreement with the Department of Health which proposes that the number of adoptions from local authority care reach 39 in the three years from 1st April 2002. It is acknowledged that this is challenging target based on a high performance and unrepresentative year ending in March 2002.

The only service for which the agency makes a charge is that surrounding the assessment and support of inter-country adopters. Clear information about the charges is made available to applicants. Sutton adheres to the BAAF inter-agency payment system.

Individual children with specific needs attract adoption allowances and adopters matched with children for whom an allowance may be payable are provided with written information. As and when the parameters of new arrangements and eligibility are finalised these should be published and made available as appropriate.

There are clear budget statements of payments made to adopters.

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

Monthly?

Quarterly?

Less than Quarterly? YES

Standard 18 (18.1 – 18.5)

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

Key Findings and Evidence

Standard met?

2

The adoption service has access to a medical adviser who is a Developmental Paediatrician, and the Principal Physician for Child Health in Sutton. He is the designated doctor for Looked After Children and a member of the Corporate Parents Forum. The medical adviser sits on the adoption panel, sees those children whose cases are brought to panel, provides a summary of child's health and well-being to adopters and other interested parties, and comments on the health of prospective adopters.

A solicitor from the Council attends each adoption panel and the manager of the Adoption and Permanence Team acts as adviser to the panel.

A clinical psychologist offers support to the adoption and fostering teams that may take the form of assessments of the emotional health of children, direct therapeutic work with young people, work with adopters and a training input for substitute carers.

Other specialist advice is accessed on a case by case basis and referrals may be made to the Post Adoption Centre.

At the time of the inspection there was no written protocol that specifically governed the role of specialist advisers. This should be developed and distributed to relevant personnel. Copies should be placed on the personnel files of panel members.

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?

3

Inspectors from the Social Services Inspectorate examined a sample of staff recruitment records and concluded that recruitment and selection procedures follow good practice in safeguarding children and young people.

All of the social work staff of the Adoption and Permanence Team have a DipSW or equivalent professional social work qualification. They have a sound understanding of adoption and appropriate knowledge and skills drawn from employment in a variety of statutory services and voluntary agencies.

Staff of the adoption service have recently assumed responsibility for counselling under section 51 of the Adoption Act 1976. Whilst this is considered to be an appropriate transfer of responsibility it should be accompanied by the provision of specialist training for staff.

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?

50

%

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?****3**

See also Standard 14 and 16.

A workload management scheme operates within the team.

There are structures and systems in place to ensure that assessments and approvals of prospective adopters are managed and implemented effectively and completed within the timescales prescribed by National Adoption Standards.

Members of the Adoption and Permanence Team meet once every two weeks and peer support appears to be good.

Staff confirmed that they receive good quality supervision on a regular basis and stated that they are able to access external training. They do not routinely cascade the content of external training to colleagues.

There is access to a range of advice needed to provide a full service for children and young people and adopters seen by one inspector cited an example of being assisted through the intervention of an educational psychologist. Files seen contained other examples of specialist interventions and support.

The quality of administrative support to the team was reported by social work staff to be 'excellent'.

All staff of the adoption service have access to a PC and to email.

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
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The staff team employed at the time of the inspection had appropriate qualifications and skills. They demonstrated commitment and enthusiasm and it was evident to inspectors that they are motivated to achieve high standards in adoption practice.

The consensus amongst staff was that the staffing establishment is adequate and that when the newly created posts in adoption support and kinship care are filled it will be possible to provide a full adoption service.

Total number of social work staff of the adoption service	7	Number of staff who have left the adoption service in the past 12 months	0
Number of social work posts vacant In the adoption service.	2		

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
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Those staff to whom inspectors spoke were positive about the nature of support which they were offered and did not identify any significant shortcomings in their working conditions.

A whistle blowing policy is in place.

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**

The authority has a broad general in-house induction and ongoing training programme.

Staff confirmed that their performance had been formally appraised but identified some shortfalls in the process, notably the absence of a rigorous review of their training/professional development needs.

Nevertheless certain specialist training needs have been met and the Consortium has provided additional training opportunities.

It was acknowledged that the Post Qualifying Award has brought dividends for those undertaking it but also for other members of the team. There may be scope to expand the formal opportunities for staff to share the wealth of experience that exists within the team.

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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The authority has written policies on confidentiality, on recording and on file retention and storage.

Those case records that were seen at the inspection were well presented and organised in a way that made them easy to access. They were full, up-to-date and almost always typed.

Confidentiality agreements are signed by staff and panel members.

Records of supervision decisions appeared on the files of both children and adopters. It is recommended that the form of the record on adopters files replicate that on children's files.

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 authority has a policy on access to user records. The version in existence in November 2003 took in to account the requirements of the Data Protection Act 1998 but not the requirements of the Human Rights Act 1998.

Relevant information is provided from case files to adoption agencies and local authorities in order to facilitate placements. However, written confidentiality agreements are not routinely obtained from those persons, other than the child or adopter, to whom information is being disclosed. In addition to routinely obtaining a written undertaking that information will be kept confidential a written record of access provided or disclosure should be kept.

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

Those adopter's files that were seen held essential information and contained evidence that relevant enquiries, including health, employment and CRB checks, had been undertaken.

Separate records are kept for staff and in relation to complaints and allegations.

The adoption service should notify the National Care Standards Commission or its successor of the instigation and outcome of any child protection investigations involving children placed for adoption.

The authority has a file audit policy and evidence of audits and of actions arising from them was seen.

Confidential records are stored securely and an archivist has been appointed to ensure that practice is in line with the requirements of legislation.

IT systems are password protected.

Standard 28 (28.1 – 28.2)

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

Key Findings and Evidence**Standard met?**

2

Up-to-date, comprehensive personnel files are maintained for each member of staff and records are kept of qualifications, status and CRB checks, enquiries and references that have been obtained and their outcomes, experience of working in a child care setting, training undertaken, complaints made against a member of staff and any disciplinary action.

CRB checks will be renewed every three years

At the time of the inspection personnel files were not held on all adoption panel members.

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
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Adoption and Permanence Team workers occupy adequate office accommodation adjacent to that occupied by administrative staff and the Fostering Team. The building is accessible to the public and is appropriately insured.

Meeting space is at a premium.

Staff are supported by efficient and robust administrative systems. All workers have PC's and access to relevant IT systems. Appropriate measures are in place to safeguard IT systems and security measures operate within the building.

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 17 November 2003 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary	<input type="checkbox"/>
Comments were received from the provider	<input type="checkbox"/>
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 19 February 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"/>
Action plan was received at the point of publication	<input type="checkbox"/>
Action plan covers all the statutory requirements in a timely fashion	<input type="checkbox"/>
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 _____ of London Borough of Sutton Adoption Agency 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.