



Champions for
Social Care
Improvement

inspection report

Local Authority Adoption Services

Redcar & Cleveland Borough Council Adoption Service

Grosmont Resource Centre
20 Grosmont Close
Redcar
Cleveland
TS10 4PJ

10th 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

Redcar & Cleveland Borough Council Adoption Service

Headquarters Address

Grosmont Resource Centre, 20 Grosmont Close, Redcar,
Cleveland, TS10 4PJ

Adoption Service Manager

Joanne Gilroy

Tel No:

01642 495910

Address

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Cleveland, TS10 4PJ

Fax No:

01642 491630

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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		10th November 2003	ID Code
Time of Inspection Visit		10:00 am	
Name of Inspector	1	Lynn Smith	094143
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 Redcar & Cleveland Borough 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.

Redcar and Cleveland adoption service is provided by social workers from the Permanency Team. It works closely with and is part of the local consortium group. The team is based separately from the social services department. The team consists of a Manager, three full-time permanency social workers and a part-time clerk.

The Permanency Team's objective is to prepare, assess and support adopters and to provide Children Looked After with suitable, permanent substitute families within acceptable timescales.

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.)

Redcar and Cleveland Adoption Service is a good service that provides positive outcomes for children and young people.

Statement of Purpose standard 1 (not met)

The Statement of Purpose is clear and informative, however needs to be accessible to people with communication difficulties. The Statement of Purpose needs to be approved by the Authorities Executive Committee to meet this standard.

The BAAF children's guide is used by the service and the publication has been expanded to include useful additions about Redcar and Cleveland's permanency team, the complaints procedure and the advocacy and Children's Rights Service.

Securing and promoting children's welfare standard 2 (met)

The Placing Social Workers informed Inspectors through the questionnaires and interviews that the matching of adopters to children is excellent. They feel the forms F's accurately describe the adopters which has enabled children to be matched with adopters that best meet their assessed needs.

The matching report is detailed and thorough and addressed short falls and children's views well. The matching performance used is excellent.

Prospective and approved adopters standard 3 to 6 (standards met)

Prospective adopters and adopters informed Inspectors of the positive response they received from Redcar and Cleveland adoption service. Enquiries were dealt with promptly and the information pack explained very well the processes. The approval process inspected was thorough and formal. There are 4 days of preparation training. These are linked with other local authorities to ensure prospective adopters can access preparation groups close by to ensure timescales are adhered to.

Through the preparation group and home study the link worker builds up the relationship with the adopter, this enables them to support the adopter to continue the child's life storybook and create memory boxes. The adopters informed the Inspectors that post adoption training is available and they are encouraged to attend. Evidence that adopters were well prepared in advance of children coming to live with them was seen.

Birth Parents and Birth Families standards 7 to 9 (standards met)

Births parents can access and be referred to the support service offered by 'After Adoption'.

Redcar and Cleveland have negotiated a contract with them. The post adoption counselling supports birth families to write letters in workshops or individually. Before placements are made, adopters sign an agreement for letterbox contact between children and birth families. The agency promotes post-adoption contact by operating a trigger system to send reminders when contact letters are due.

Adoption panels and Agency decisions standards 10 to 13 (standards met)

The Inspector viewed previous panel minutes and confirmed all adoption panels had been properly constituted. The panel members have suitable qualities and experience. Evidence was viewed of the training the members have received over the last 12 months. It consisted of approximately 5 days and addressed aspects of law and relevant information for permanency panels.

The Permanency Team operate an excellent practice of recording recommendations and further recommendations in a letter to the Decision Maker as well as in the minutes. A similar letter is then sent to the adopters.

Fitness to provide or manage an adoption agency standards 14 &15 (standards met)

Redcar and Cleveland Borough Council ensure, through the interview process the manager of the adoption service is suitable for the post.

The Permanency Manager has an MSc in Applied Social Studies/Dip Sw and several years experience in social work. In November 2003 she will be commencing a management qualification - MBA.

Provision and management of the adoption agency standards 16 to 18 (no standards met)

The agency is run in accordance with its statement of purpose and is managed efficiently. Roles are clear and lines of communication are reported by all staff to be good.

The adoption agency needs to put in place written procedures that cover all aspects of 16.7 National Minimum Standards.

The Permanency Panel have Panel Guidance. The medical advisor to the adoption team is also a panel member. A written protocol is required governing the engagement. Staff informed the Inspectors that the Legal Advisor is supportive, approachable and knowledgeable. However the service does not have clear written procedures for monitoring and controlling the activities of the Adoption Service.

The medical advisor to the adoption team is also a panel member. A written protocol is required governing the engagement. Staff informed the Inspectors that the Legal Advisor is supportive, approachable and knowledgeable.

Employment and management of staff standards 19 to 24 (4 standards met)

All Redcar and Cleveland adoption service permanent social workers hold a DipSw qualification. The permanency team have no unqualified supervising social workers. 100% hold the PQ1 award and 66% hold the full Child Care Award.

Staff are managed in a way which delivers an efficient and effective service. Through team meetings, supervision, appraisals and ensuring policies are known and followed.

The Manager needs to ensure all staff have written contracts, job description and conditions of service which comply with the General Social Care Council (England).

Staff informed the Inspectors that they are members of BAAF and able to access the many publications produced. The links formed within the consortium also promote a wider knowledge base.

Records standards 25 to 28 (2 standards met)

The standard of the files viewed were high.

All staff files are held in the personnel department.

During the inspection, all confidential files were stored securely however, a clear written policy on service user access to files is required.

The Manager audits the files during supervision and signs them off. The Quality Assurance Officer also undertakes case audits.

The Manager informed Inspectors that the service is at present writing policies and procedural guidance covering all aspects of 26.2 of the Nation Minimum Standards.

Fitness of Premises Standard 29 (not met)

The premises used by the adoption agency are accessible during office hours, however are not identifiable. Internally the building is clean tidy and spacious. All records are kept in a lockable room in locked filing cabinets.

Family placement social workers expressed their frustration over the lack of email and computer facilities that impacts on efficient communication with Placing Social Workers.

The Manager informed the Inspectors that the premises are adequately insured, however they do need to put in place a disaster recovery plan.

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:

One requirement.

**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	Adoption Agencies regulations 1983	LA26	The service needs to have in place written guidance on, access to records and disclosure of information.	

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	<ol style="list-style-type: none"> 1. The Statement of Purpose should to be presented for approval to the Council Executive Committee for approval. 2. Evidence is required on how the service will make the Statement of Purpose and the Children's Guide available for people with communication difficulties.
2	LA16	Arrangements for deputising in the absence of the Manager should to be clear.
3	LA16	Guidance should be in place for staff requiring them to declare possible conflicts of interest.
4	LA16	Written guidance should be in place for all aspects of 16.7 National Minimum Standards.
5	LA17	Written procedures are needed for monitoring and controlling the activities of the adoption service.
6	LA18	The Medical Advisor should have a written protocol governing their terms of engagement.
7	LA20	IT equipment should be sufficient for the purpose of the adoption team.
8	LA20	All staff should have written contracts, job description and conditions of service that comply with the General Social Care Council.
9	LA26	Policies and procedures should be in place covering all aspects in standard 26
10	LA27	A written policy on access to files should be in place.
11	LA29	The premises should be identifiable from the outside.
12	LA29	The Manger should have a disaster recovery plan.

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

PART B**INSPECTION METHODS & FINDINGS**

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

Placing authority survey	YES
Placing social worker survey	YES
Prospective adopter survey	YES
Approved adopter survey	YES
Birth parent / birth family member survey	YES
Checks with other organisations and Individuals	
• Directors of Social services	YES
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	YES
• Interview with children	YES
• Interview with adopters and prospective adopters	YES
• Interview with birth parents	YES
• 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	10/11/03
Time of Inspection	10:00
Duration Of Inspection (hrs)	70
Number of Inspector days	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

Redcar and Cleveland permanency team have in place a Statement of Purpose that is clear and informative. The agency needs to evidence how communication of the Statement of Purpose and children's guide will be addressed when communication difficulties arise. The children's guide used is the BAAF publication with useful additions addressing Redcar and Cleveland's permanency team, the complaints procedure, advocacy and how to contact the Permanency Team and Children's Rights Director. At present this guide is in draft. The Statement of Purpose has been approved by the Children's Management Team, however is awaiting approval from the Council's Executive Committee.

See recommendation number 1

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?

NO

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?

4

At the time of the inspection, the adoption agency had in draft, a written recruitment plan for recruiting sufficient adopters.

The Placing Social Workers informed Inspectors through the questionnaires and interviews that the matching of adopters to children is excellent. They feel the Forms F's accurately describe the adopters which has enabled children to be matched with adopters that best meet their assessed needs.

The matching report is detailed and thorough and addressed shortfalls and children's views well. The Performance used is excellent.

Ethnic and cultural background, religion and language are assessed. The Manager informed Inspectors that 100% are matched appropriately; this can also be said for sibling groups. Inspectors observed the panel and found it to be very child-centred. Adopters were able to put across their views and feelings. Form E's considered care plans and written assessments. Panel members addressed the thoughts and feelings of other children within the household. Views were also sought of the children matched with adopters.

In the last 12 months:

How many children were identified as needing adoptive families?

11

How many children were matched with adopters?

4

How many children were placed with the service's own adopters?

4

How many children were placed with other services' adopters?

5

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?

13

What percentage of children matched with the adoption service's adopters does this represent?

100

%

How many sibling groups were matched in the last 12 months?

1

How many allegations of abuse or neglect were made about adopters approved by this adoption service?

0

On the date this form was completed, how many children were waiting for a match to be identified?

8

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
<p>Prospective adopters and adopters informed Inspectors of the positive response they received from Redcar and Cleveland adoption service. Enquiries were dealt with promptly and the information pack explained very well the processes. Inspectors viewed the introduction pack and found it to be well presented, welcoming without prejudice and informative. A clear explanation was given for each stage from preparation to approval. Throughout the reader is requested to contact the permanency team if unsure of any aspect. Prospective adopters informed Inspectors that they were able to discuss issues with adopters with children in place throughout the preparation training. They all expressed how useful this was.</p> <p>The information pack did not contain any information on inter-country adoption, however the agency do offer professional advice and counselling and will under take home study reports and assessments. Redcar and Cleveland Panel can then approve them prior to being forwarded to the Department of Health.</p> <p>The Manager informed Inspectors that the inter-agency information pack is complete, however is awaiting approval.</p> <p>Information regarding children who's plan is adoption is contained within the consortium, National Adoption register and on Form E.</p>		

Standard 4. (4.1 – 4.9)

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

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

The approval process inspected was thorough and formal. There are 4 days of preparation training. These are linked with other local councils to ensure prospective adopters can access the groups close by when necessary and within a suitable timescale. The adopters interviewed felt it was useful and said the timing and venues were convenient. All training is undertaken within an anti discriminatory framework. At the end of the sessions, participants are asked to complete an assessment form to comment on the group. The permanency team evaluate the assessments and the Team Manager evaluates the process. The abilities of prospective adopters in relation to caring for children in an appropriate manner is fully assessed in the home study and detailed in the form F. The form Fs inspected were thorough.

The permanency team undertakes personal and employers references, witness statements, health and safety checklist, pet questionnaires, contact ex partners, medical information and all statutory checks including Criminal Records Bureau. The reason for the checks is detailed in the adoption guide. Adopters do not start having an assessment until the checks are returned and are satisfactory. Adopters interviewed felt they had been kept informed through their Link Worker of the process.

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

Within the introduction pack, prospective adopters are given clear written information on the matching process. Adopters also informed Inspectors that their Link Workers explained the processes very well to them and answered any questions. Prospective adopters are given Forms E's on suitably matched children. Families are first sought within Redcar and Cleveland, however if no suitable match is found, the northeast consortium is approached. The Permanency team also refers to the National Adoption Register. Matching reports are completed and link meetings set up once a match has been made. The Adoption service has in place written agreements that are made regarding the adopters informing Redcar and Cleveland Social Services of the death of an adopted child. Adopters informed Inspectors that providing information for children is discussed in the preparation groups. Once a prospective match has been made, the adopters design an information book for that child, taking into account age and ability. The information provided is presented child appropriate in several different ways, letter, book, photos, video etc.

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

Through the preparation group and home study the link worker builds up the relationship with the adopter, this enables them to support the adopter to continue the child's life storybook and create memory boxes. The adopters informed the Inspectors that post adoption training is available and they are encouraged to attend. Evidence was viewed of a clear strategy to prepare adopters in advance for a child coming to live with them. This included the continued support from the link worker, a link meeting, support from the child's social worker, timetable of introductions and financial support.

The manager informed the Inspector that information, support and advice regarding overseas placement is at present being produced.

Adopters informed inspectors that through preparation training and support from the link worker safekeeping of information, racism and discrimination and promoting a child's identity have been addressed.

Where difficulties arise in placements or there is an adoption breakdown, disruption meetings are held. Throughout adopters are supported.

Number of adopter applications started in the last 12 months

10

Number of adopters approved in the last 12 months

6

Number of children matched with the local authority's adopters in the last 12 months

4

Number of adopters approved but not matched

6

Number of adopters referred to the Adoption Register

10

How many placements disrupted, between placement and adoption, in the last 12 months?

1

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?	3
<p>Births parents are supported by 'After Adoption', Redcar and Cleveland have negotiated a contract with them. The post adoption counselling supports birth families to write letters in workshops or individually.</p> <p>Birth parents informed Inspectors of the emotional difficulties they faced during the adoption process and how they did not feel listened to, however evidence on Forms E's indicated the birth parents views.</p>		

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
<p>Before placements are made, adopters sign an agreement for post box contact between children and birth families. The agency promotes this contact by sending reminder letters when contact is due.</p> <p>Birth parents stated after the legal process was complete, they felt more able to contribute to the life story work and did feel able to meet the adopters, where appropriate.</p>		

Standard 9 (9.1)

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

Key Findings and Evidence**Standard met?**

3

'After adoption' support adopted people, birth parents and relatives and siblings. Inspectors viewed several leaflets that outlined the support given.

Children's social workers and link workers are also able to give support to birth parents and children.

Redcar and Cleveland Permanency Team were at the time of the inspection, addressing the requirements of the Adoption Support Regulations.

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>The adoption services permanency panel has clear written procedures in line with (10.2) National Minimum Standards. They are used in conjunction with BAAF publication 'Effective Panels'.</p> <p>The panel chair gives feedback on the quality of information presented to panel and social workers interviewed confirmed this was the case. Any typing errors within the reports are minuted and followed up to ensure they are corrected. This excellent practice ensures children's Forms E's are filed without mistakes.</p> <p>Panel minutes evidence that prospective adopters are given the opportunity to attend panel and ask questions.</p>		

Standard 11 (11.1 – 11.4)
The adoption agency shall ensure that each adoption panel is properly constituted, that panel members have suitable qualities and experience to be a panel member and have regular training to allow them to keep up to date with changes in legislation, guidance and practice. Where the adoption agency is involved in inter-country adoption, each member of the panel understands the implications of being adopted from overseas and seeks advice, when necessary, on the laws and eligibility criteria for the overseas country.

Key Findings and Evidence	Standard met?	4
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The Inspector viewed past panel minutes and clarified all adoption panels have been properly constituted. The panel members have suitable qualities and experience. Evidence was viewed of the training the members have received over the last 12 months. It consisted of approximately 5 days and addressed aspects of law and relevant information for permanency panels.

The adoption service has an informative Panel Induction Pack that includes confidentiality and contract agreements to sign, personnel information required including CRB checks and the general expectations of panel members including observing before becoming an active panel member.

Evidence was viewed of a questionnaire for new panel members, requesting feedback on induction and training. This is an excellent monitoring tool.

The Service also has procedures for the permanency panel and policy for permanency planning.

The Legal Advisor has a written contract with Redcar and Cleveland Borough Council to provide a comprehensive legal service and be legal advisor to the panel. Legal issues surrounding inter-country adoption can be discussed.

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?	4
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Permanency Panels are conducted monthly in an efficient and organised way. Panel members receive all relevant information approximately two weeks in advance. The Panel Chair views the information first to ensure it is complete before it goes to panel members.

The minutes of the panel meeting are informative and addressed by the panel at the next meeting to ensure accuracy.

The Permanency Team operate an excellent practice of recording recommendations and further recommendations in a letter to the Decision Maker as well as in the minutes. A similar letter is then sent to the adopters.

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?

4

Information viewed during the inspection states that the Agency Decision Maker makes the decision without delay after taking into account the recommendations from the panel. All panel papers are sent to the Agency Decision Maker prior to the panel meeting. The Chair meets after the panel with the Decision Maker and within seven days. Panel advisors may also attend if required.

Inspectors observed social workers informing adopters of the recommendations. The Agency sends an excellent letter addressing the recommendation and the approval to the adopters.

Adopters spoken to informed Inspectors that they do receive a letter after they have been to panel.

The Manager informed Inspectors that the child's social worker informs the child of the decision made. The adoption agency will write a letter to the parent /guardian informing them of the decision made, this letter is sent to the field social worker for them to share with the individual.

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
<p>The Permanency Manager has an MSc in Applied Social Studies/Dip Sw and several years experience in social work. In November 2003 she will be commencing a management qualification - MBA. Staff informed the Inspectors that the Manager exercises effective leadership. The Manager's job description has been recently up dated.</p>		
<p>Does the manager have Management NVQ4 or equivalent?</p>	NO	
<p>Does the manager have at least 2 years experience of working in a childcare setting in last 5 years?</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
<p>Redcar and Cleveland Borough Council ensure, through the interview process the manager of the adoption service is suitable for the post. References and CRB checks are completed and Inspectors were informed the personnel department ensure CRB checks are reviewed every three years.</p>		

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

The agency is run in accordance with its statement of purpose and is managed efficiently. Roles are clear and lines of communication are reported by all staff to be good. The adoption service needs to put in place clear arrangements to identify the person in charge when the manager is absent. There is panel guidance requiring members to declare possible conflicts of interest, however guidance is also required for staff members. Redcar and Cleveland Borough Council have in place substantial policies and procedures regarding equal opportunities and anti-discriminatory practice. The adoption agency needs to put in place written procedures that cover all aspects of 16.7 National Minimum Standards.
See recommendation numbers 2,3 & 4

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

1

Number of the above complaints which were substantiated

X

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
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The elected Members of the council receive a six monthly report on the adoption services achievements.
Files/cases are audited quarterly and findings presented to the Permanency Panel.
The Permanency Panel have Panel Guidance, however the service does not have clear written procedures for monitoring and controlling the activities of the Adoption Service.
The Permanency Panel has an Elected Member and independent members that sit on the panel, which enables it to independently scrutinise all assessments and judgements made about children being considered for adoption and those relating to prospective adoptive parents.
See recommendation number 5

How frequently does the executive side of the council receive written reports on the work of the adoption service?		
Monthly?	<input type="checkbox"/>	
Quarterly?	<input type="checkbox"/>	
Less than Quarterly?	<input checked="" type="checkbox"/> 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
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The medical advisor to the adoption team is also a panel member. A written protocol is required governing the engagement. The Medical Advisor is suitably qualified and registered. Staff informed the Inspectors that at times they do find it hard to approach the Medical Advisor.
The Legal Advisor has a contract with Redcar and Cleveland Borough Council. Part of his role is to provide advise to the Permanency Panel. Staff informed the Inspectors that the Legal Advisor is supportive, approachable and knowledgeable.
Within the consortium, BAAF and 'After Adoption', Redcar and Cleveland Adoption Services are able to access other specialisms according to needs.
See recommendation number 6

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

All Redcar and Cleveland adoption service permanent social workers hold a DipSw qualification. The permanency team have no unqualified supervising social workers. 100% hold the PQ1 award and 66% hold the full Child Care Award.

Through interviews with the link workers, it was evident they have the appropriate knowledge and skills to undertake adoption work including Section 51 counselling.

The standard of assessments viewed by Inspectors were high.

The adoption service recruits staff through the personnel procedures. Personnel and the management team assess interviews and personal references of prospective candidates.

The manager confirmed all staff have suitable, up to date CRB checks.

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?

100

%

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

Staff are managed in a way which delivers an efficient and effective service. Through team meetings, supervision, appraisals and ensuring policies are known. The Manager holds or is in the process of achieving the relevant qualifications to ensure the service attains a high standard. Staff interviewed confirmed they received professional supervision and had access to training, although due to the specialist nature of the work, most appropriate training is external, which has bigger cost implications. Staff informed Inspectors that due to location and lack of IT equipment, efficient communication is an issue. The Manager needs to ensure all staff have written contracts, job description and conditions of service which comply with the General Social Care Council (England).

See recommendation numbers 7 & 8

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
During the inspection the Manager informed Inspectors that the service has sufficient staff, however the Manager has identified a need for adoption support and informed Inspectors that the service may well be appointing a support worker. In The event of a shortfall in staffing levels, the Manager informed Inspectors that they would 'buy in' social workers to conduct Forms F assessments.			
Total number of social work staff of the adoption service	5	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.	0		

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
Staff informed Inspectors that Redcar and Cleveland Borough Council has sound employment practices. Staff were aware of equal opportunities procedures and whistle blowing policy.			

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
Staff have undertaken regular joint training with field social workers. Recently the team have addressed adoption legislation. Redcar and Cleveland Social Services Training Department ensure staff complete the induction programme. Annual appraisals identify training requirements of individual staff. Regular staff meetings enable staff to debate and challenge issues. Staff informed the Inspectors that they are members of BAAF and able to access the many publications produced. The links formed within the consortium also promote a wider knowledge base.			

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?	
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Records were observed by the inspectors, clarity is needed regards hand written notes being kept on files as in many cases these were duplicating typed information.

The standard of the files viewed were high. Regular monitoring of files was evident.

The Redcar and Cleveland Borough Council have practice guidance and procedures in place. These procedures address confidentiality and the Data Protection Act 1998. The procedures address the recording of children's files that comply with the Assessment Framework and Integrated Children's System.

Supervision forms are kept on files; all viewed were signed and dated.

Adopter records contain up to date information including CRB checks on all members of the household over the age of 16 years.

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?	
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At the time of the inspection, the adoption service did not have written guidance regarding how it will provide relevant information to other agencies.

The Manager informed Inspectors that the service is at present writing policies and procedural guidance covering all aspects of 26.2 of the National Minimum Standards and Adoption Agencies Regulations 1983 (Regulation 15).

See recommendation 9

See requirement 1

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 is a written policy on case recording, a copy of which was supplied to the Inspectors. Separate records are kept for staff, complaints and allegations. The Manager audits the files during supervision and signs; also case audits take place by the Quality Assurance Officer. The written entries in the files viewed were clear and legible, however dates and signatures were missing on some.

During the inspection, all confidential file were stored securely however, a clear written policy on access is required.

See recommendation number 10

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

All staff files are held in the personnel department. The Manager holds personal files for all Permanency Panel Members. The Manager informed the Inspectors that all staff have up to date relevant CRB checks. Staff qualifications and experience is evident within the Statement of Purpose as well as personnel records.

Fitness of Premises

The intended outcome for the following standard is:

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

Standard 29 (29.1 – 29.5)

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

Key Findings and Evidence	Standard met?	2
<p>The premises used by the adoption agency are accessible during office hours, however are not identifiable. The office is located on a housing estate; graffiti was noticeable on the walls and around the surrounding area. Evidence was viewed where a fire had been started against the fire door of the building. Parking is limited and difficult. Entrance into the building is by swipe card and all windows have security bars against them. Internally the building is clean tidy and spacious. All records are kept in a lockable room in locked files.</p> <p>Support Social workers expressed their frustration over the lack of email and computer facilities that impacts on communication with Placing Social Workers.</p> <p>The Manager informed the Inspectors that the premises are adequately insured, however they do need to put in place a disaster recovery plan.</p> <p>See recommendation numbers 7, 11 & 12</p>		

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 10 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

NO

Comments were received from the provider

NO

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

NO

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

NO

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 7 April 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

NO

Provider has declined to provide an action plan

NO

Other: <enter details here>

NO

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 Joanne Gilroy of Redcar and Cleveland 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 Joanne Gilroy of Redcar and Cleveland 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.