



*Making Social Care
Better for People*

inspection report

ADOPTION SERVICE

City of Wakefield Metropolitan DC Adoption Service

**Placement and Adoption Service
Unit 21, Green's Industrial Estate
Calder Vale Road
Wakefield
WF1 5PH**

Lead Inspector
Sue Spencer - Newth

Announced Inspection
9th February 2007 09:30 am

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Adoption*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

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

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

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

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

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SERVICE INFORMATION

Name of service	City of Wakefield Metropolitan DC Adoption Service
Address	Placement and Adoption Service Unit 21, Green's Industrial Estate Calder Vale Road Wakefield WF1 5PH
Telephone number	01924 302160
Fax number	01924 304004
Email address	
Provider Web address	www.wakefield.gov.uk
Name of registered provider(s)/company (if applicable)	Wakefield MDC
Name of Nominated manager (if applicable)	Lyn Burns
Type of registration	Local Auth Adoption Service

SERVICE INFORMATION

Conditions of registration:

Date of last inspection

28th January 2004

Brief Description of the Service:

Wakefield Metropolitan District Council is a member of the Yorkshire Adoption Consortium. The adoption service is an integral part of Looked After Children's services, which forms part of the Children and Families department.

The council offer the following adoption services:

- recruitment, preparation, assessment and approval of adopters
- matching adoptive parents to children
- approval of non-agency adopters
- independent support and counselling to birth parents and their families
- the assessment of children's needs in relation to permanent placements
- production of relevant reports for court
- support for children and adopters post-placement
- post-adoption contact
- counselling for adults who have been adopted.

The After Adoption Yorkshire provides a range of services on behalf of the local authority, which included independent support, and counselling service for parents whose children are placed for adoption.

SUMMARY

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

This is the second inspection by the Commission of Wakefield Metropolitan Borough Council's Adoption Service. Prior to the inspection fieldwork, the lead inspector read the supporting documentary evidence. Questionnaires were received from 7 prospective and approved adopters, 4 placing social workers, 1 placing authority and 3 specialist advisers.

Two inspectors spent 5 days in the agency and interviewed the following:

- a group of placing social workers
- two Independent Reviewing Officers (IRO's)
- the team manager of the adoption service
- a group of child care team managers
- administrative staff
- adoption social workers
- the service director for commissioning, performance and partnering plus the performance improvement manager
- the nominated service manager
- the team managers of the adoption team and permanency team
- the agency decision maker
- the executive cabinet member with responsibility for children's social care services.

Three adoptive families were selected to be case tracked and this involved reading their files, the files of the children placed with them and they were interviewed, two at home and one over the telephone. Two families in receipt of adoption support received telephone interviews. In addition, the adoption panel was observed and the chairperson was interviewed.

A selection of files, including personnel files, adopters and children's files were read during the course of the inspection.

The premises and archive storage were also inspected.

The inspection was extremely well organised by the managers of the service and the inspectors would like to thank them and the staff for their co-operation during the inspection and the hard work which they put in when organising both the pre-inspection material and the inspection programme. The openness and helpfulness of staff at all levels enabled the inspection to be carried out efficiently and effectively.

What the service does well:

The current interim management team, led by the interim children's director, have demonstrated throughout the inspection their complete commitment to improving outcomes across the services. Although they have only been together since November 2006 it is commendable that in this short period of time they have identified the challenges facing the services. They have set about meeting them with the development of a comprehensive improvement plan, which echoes many of the findings of this inspection.

Adopters spoke very positively about the quality and delivery of the preparation training, saying that it was "comprehensive, informative" and "made you think about things you wouldn't think about normally"

The panel minutes are informative and comprehensive. The panel administrator works effectively and with commitment to the provision of an effective system and ensures the panel is administered efficiently. Administration staff are efficient and sensitive to the work they do. They are highly thought of across the service.

The agency decision maker is well informed and has all the available information when reaching a decision. The decisions are made within the timescales and the decision maker appropriately follows through issues.

The service has access to a legal adviser who attends panel, and a medical adviser who is a member of panel. Staff confirmed that both advisers are available and "accessible" by social workers.

What has improved since the last inspection?

Adopters told inspectors that they had received a very positive response when they first contacted the agency and found the duty workers helpful and informative. The appointment of a dynamic and enthusiastic recruitment officer has enhanced the response that potential adopters receive on first calling the agency.

Teams across the service work well together. They have all been consulted regarding the adoption improvement plan and are confident about their roles and the part they play in the implementation.

What they could do better:

The adoption service needs to be integrated within the wider strategy for the delivery of services to children and young people. The agency themselves have identified significant shortfalls in the service and service delivery and have recently put together a comprehensive improvement plan. This is in its infancy. However, with the mechanisms that have been put in place to monitor and evaluate progress should result in achieving success and improve outcomes.

Senior managers are aware that they must produce a comprehensive framework within which social workers can operate effectively. This includes the development of clear policies and procedures. Quality assurance, monitoring and reporting procedures need to be made more robust. The service realignment will hopefully address the above issues and improve the quality of the service performance and outcomes.

The length of time from adopters making an initial enquiry to being approved by the agency averages out at about two years. This is unacceptable, and the process needs to be streamlined so that potential adopters receive a more efficient service and delays are kept to a minimum for children waiting for permanent families.

The agencies adoption panel need to have clear written procedures for monitoring and controlling the activities of the adoption agency and ensuring quality performance. They need to ensure that 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.

The adoption panel needs to have clear written policies and procedures about the handling of their functions and ensure that they are implemented. They need to be efficiently organised and conducted and convened regularly to avoid delays in the consideration of prospective adopters and matching children and adopters.

The adoption agency needs to ensure that comprehensive and accurate case records are maintained for each child, prospective and approved adopter with whom the agency has worked. The agency must establish and maintain files in relation to adoption support services as laid down in the regulations.

The agency must maintain Up-to-date, comprehensive personnel files for each member of staff and members of the adoption panel, as laid down in Schedules 3 & 4. The agency must ensure that the children's guide meets the requirements in Schedule 2.

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

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

DETAILS OF INSPECTOR FINDINGS

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

Staying Safe

Enjoying and Achieving

Making a Positive Contribution

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

Management

Scoring of Outcomes

Statutory Requirements identified during the inspection

Staying Safe

The intended outcomes for these standards are:

- The agency matches children with adopters (NMS 2)
- The agency assesses and prepares adopters (NMS 4)
- Adopters are given information about matching (NMS 5)
- The functions of the adoption panel are as specified (NMS 10)
- The constitution and membership of adoption panels are as specified (NMS 11)
- Adoption panels are timely (NMS 12)
- Adoption agency decision is made without delay and appropriately (NMS 13)
- The manager is suitable to carry on or manage an adoption agency (NMS 15)
- Staff are suitable to work with children (NMS 19)
- The agency has a robust complaints procedure (NMS 24 Voluntary Adoption Agency only)
- The agency safeguards and promotes the welfare of its service users (NMS 32)

The Commission considers Standards 2, 4, 5, 10, 11, 12, 13, 15, 19, 24 and 32 the key standards to be inspected.

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

2,4,5,10,11,12,13,15,19 and 32

Quality in this outcome area is poor.

This judgement has been made using available evidence including a visit to this service. The agency has provided some successful placements for children. However, the lack of suitable policies, procedures and robust management oversight has significantly affected this outcome.

EVIDENCE:

Although the service does not have a current written strategy for the recruitment of adopters, its development is well underway and should be implemented in April 2007. It is good that this will be based on the analysis of children's needs.

The service placed 17 children for adoption in the twelve months preceding the inspection. There was one disruption during this time. The teams might benefit in future if such cases could be used as a reflective development tool to inform service development and practice. Discussions with social workers demonstrated their knowledge in this area of work. There was evidence of generally good matching procedures. Of the 17 children placed in the last 12 months, 14 were with Wakefield's adopters, which contradicts the perception across the service that Wakefield mainly places their children with outside agencies.

Currently there are 16 children waiting and 12 sets of adopters awaiting a match, which indicates a previous unevenness in strategy, which has been identified by senior managers and is in the process of being rectified. Wakefield has had two recent enquiries for inter-country adoption and consideration is being given to commissioning this work to a specialist agency.

There are significant delays in the process of recruiting, assessing and approving adopters. Inspectors found that there was an average of two years from initial enquiry to approval. This is unacceptable and requires addressing urgently as it contributes to significant delays for children. Overall, adopters were pleased with the professionalism and sensitivity of their workers during the process, delays notwithstanding.

Team managers and staff across the service said they would welcome adoption workers becoming involved earlier in the process when permanency is first considered as a possible plan. Although adoption social workers do try to avail themselves of information early on there is no formal process for this to occur.

The majority of adopters reported that they were kept informed during the process, and had good support from individual adoption team workers. There was one Life Appreciation day held in the last 12 months. Wakefield should consider these for all children who have adoption as the plan to facilitate the sharing of all relevant information different people have on children.

Adopters spoke very positively about the quality and delivery of the preparation training, saying that it was "comprehensive, informative" and "made you think about things you wouldn't think about normally". Applicants knew that preparation course was part of the assessment, but there was no evidence of their learning from the course in their assessments.

The quality of Children's Permanence Reports was generally poor; there was little analysis of children's life experiences and the circumstances leading to the plan for permanency. They would not aid the understanding of a child in later life. Inspectors did not see any evidence of children's views being taken into account.

The quality of the adopters' assessment reports was also variable from good to poor. The good ones were insightful and analytical while others were merely descriptive and issues that were raised about applicants' life experiences were left unexplored and not analysed. Issues of diversity were not explored adequately. This was also highlighted in an interview with an adopter who felt that attitudes towards sexuality were not covered in any depth. Staff and managers might benefit from refresher training in assessments. Appropriate references were taken up, referees were interviewed and weight was given to their views. Chronologies and significant life events should be recorded in months and years, as there were inconsistencies.

All files had evidence of enhanced Criminal Records Bureau (CRB) checks with disclosure numbers retained. All other statutory checks were completed. However, in one case the local authority check was only undertaken in the applicant's birth name and not married name, which was applicable in this case. In another file there was no evidence of identification (ID) verification, or of employment or household income and expenditure. Some files did not contain health and safety checklists and in one case, although the form F indicated that one had been completed, the panel asked the social worker if this was the case. The social worker confirmed it was, but it was not evident on the file. Health and safety checklists should include guns and other weapons.

The acting team manager is respected across the service. He is appropriately qualified and has considerable experience. However, at the time of inspection, inspectors felt that there were unrealistic demands on his time. For example, attending panel, as panel adviser; managing and overseeing the letterbox contact scheme; helping to write policies and procedures. These additional responsibilities were deterring him away from the operational role that is required in terms of the general management of the team, files and quality assuring work.

Childcare social workers confirmed that they look to their colleagues in the family placement team for help and advice. They said that they have "every confidence in them".

The adoption panel does not have clear written policies and procedures. However, this has been identified as a priority in the improvement plan.

There have been problems with quoracy in the past twelve months and there are outstanding vacancies for vice-chair, independent and social work members. There is no permanent panel advisor. The team manager takes this role at present but this seriously impacts on his time and takes him away from operational tasks. However, there has been very recent recruitment of a new independent member to the panel. Recruitment for all the other posts is being addressed through an active commitment from the new independent panel

chair and senior managers who have recently agreed further funding for panel members attendance.

Panel struggles to meet the demands of the service. Adopters confirmed significant delays in terms of deferrals and in time waiting on the day for their cases to be heard. All of these issues need addressing urgently as they contribute to significant delays for children.

The panel minutes are informative and comprehensive. The panel administrator works effectively and with commitment to the provision of an effective system and ensures the panel is administered efficiently.

The agency decision maker is well informed and has all the available information when reaching a decision. The decisions are made within the timescales and the decision maker appropriately follows through issues.

There is an independent chair whose CRB was obtained for another organisation. Wakefield must carry out its own CRB checks. The chair does not inform applicants of the outcome at the end of panel deliberation. This resulted in some applicants having to wait over the weekend for the recommendation. Very recently this process has been amended to ensure that applicants are not waiting for the recommendation. The social workers are told of the recommendations and the reasons. It is then their responsibility to ensure that the applicants or adopters are contacted in an appropriate time.

The panel observed was well chaired and all panel members raised questions that were appropriate. There is a planned programme for training for panel members, which is in process of being implemented. The agency should consider developing a formal system for the panel to quality assure (QA) the work put before it. For example, using a pro forma. There have been significant issues about the quality of work and content of reports coming to panel over the past twelve months, which suggests an urgent need for quality assurance checks earlier in the process.

Enjoying and Achieving

The intended outcomes for these standards are:

- The adoption agency provides support for adoptive parents (NMS 6)
- The agency has access to specialist advisers as appropriate (NMS 18)
- Services are tailored to meet the needs of people affected by adoption (NMS 33)

The Commission considers Standards 6 and 33 the key standards to be inspected.

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

6, 18 and 33

Quality in this outcome area is poor

This judgement has been made using available evidence including a visit to this service. The lack of strategy for this area means that the quality of support is in danger of being compromised.

EVIDENCE:

Wakefield has identified post adoption support as a priority in their service improvement plan. There was a vacancy for the post of post adoption worker, which is due to be advertised by April 2007. This vacant post has had a significant impact on the ability of the service to provide post adoption support effectively.

Adopters spoke well of the general support they receive from their individual workers, but also said that it is difficult to access especially since the previous worker who held responsibility for this area left.

Adopters have the opportunity to attend a support group held monthly. However, they spoke of feeling very frustrated at what they perceive as a lack of co-ordinated approach, particularly multi-agency involvement. Particularly when trying to access education and the child and adolescent mental health service (CAMHS). Through discussions with senior managers inspectors were

informed that work is underway considering ways in which adopted children can be fast tracked into such services.

One adopter said they felt "fobbed off" and was made to feel "over anxious" and another said "we were left to our own devices despite our child's health problems" and had to state, "we can't cope anymore". Wakefield needs to complete and implement the strategy for adoption support services, which should be informed by a mapping exercise. This would help identify the scope of tasks in terms of complexity and quantity and so ensure that resources could be better targeted.

Social workers involved in adoption support need clear policies, procedures and guidance on how to plan, record and review the work. Files had no assessment and recording was poor. Assessments should be based on the framework and there should be solution-focused work, with timescales that will not foster dependency.

The service has access to a legal adviser who attends panel, and a medical adviser who is a member of panel. Staff confirmed that both advisers are available and "accessible" by social workers.

Making a Positive Contribution

The intended outcomes for these standards are:

- Birth parents and birth families are involved in adoption plans (NMS 7)
- Birth parents and birth families are involved in maintaining the child's heritage (NMS 8)
- The Adoption agency supports birth parents and families (NMS 9)
- Service users receive good quality services based on their needs (NMS 34)

The Commission considers Standards 7, 8, 9 and 34 the key standards to be inspected.

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

7,8,9 and 34

Quality in this outcome area is poor.

This judgement has been made using available evidence including a visit to this service. Birth parents have limited access to independent support and counselling. The potential for collating information about a child's heritage is therefore undermined.

EVIDENCE:

The agency does endeavour to involve birth parents in adoption plans and discussion with staff across the agency demonstrated an understanding of the life-long implications for all who are affected by adoption. However, the way that Wakefield have set up their children's service means that a child can expect to have three changes in social workers as their case progresses. This does not enable meaningful relationships to be formed with birth parents and impacts on the commitment to involving birth parents in the process of preserving the child's heritage.

Again, the service improvement plan and the agency's senior management team have identified this and work is underway to minimise the numbers of social workers involved with families. This should be underpinned by training for childcare staff involved in permanency planning.

Inspectors found that many social workers find it difficult to engage with birth parents and families with a view to gathering information and memorabilia for life story work. However one social worker described some very innovative work completed with grandparents that enabled this crucial information to be gathered effectively.

There was also evidence that social workers and their managers find it difficult to prioritise the work due to competing demands on their time and lower priority afforded to some life story work and support to adopters, as case work dominates the agenda. This is despite independent reviewing officers asking about it at every review and sometimes asking to see it. Adopters told us they had to constantly chase-up their children's life story work. There needs to be a system to monitor its development and quality.

Although birth parents and families can access support and counselling from a different worker in the fieldwork team this is not independent. Referrals can be made to After Adoption Yorkshire, but there is no system for the promotion of this service or analysis of the take up and quality of it.

The letterbox service is co-ordinated by an administration person who has been identified as being strong on systems. The team manager oversees the process, and monitors the content but again this impacts on his time.

Management

The intended outcomes for these standards are:

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

The Commission considers Standards 1, 3, 16, 21, 25 and 27 the key standards to be inspected.

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

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

Quality in this outcome area is adequate.

This judgement has been made using available evidence including a visit to this service. The current management team has identified the weaknesses in the service and are working hard to address the shortfalls through the close monitoring of the service improvement plan, which if implemented successfully, should improve outcomes across the service.

EVIDENCE:

The agency's statement of purpose sets out the aims and objectives of the adoption service. It has recently been reviewed and has been approved by the executive. However, it does not reflect the policies and procedures as they have yet to be updated in line with the Adoption and Children Act. It must include the systems for monitoring and evaluating activity of the service.

The children's guide is mainly suitable for older children and should be adapted for younger children and those with learning or communication difficulties. It doesn't meet requirements of Schedule 2.

The information pack sent out to enquirers has recently been revised and is clearly set out and informative. However, there is no reference to those wishing to adopt from overseas.

Adopters told us that they felt they had received a very positive response when they first contacted the agency and found the duty workers "very helpful, informative and sensitive". The appointment of a dynamic and enthusiastic recruitment officer who is strong on marketing and public relations has enhanced the response that potential adopters receive on first calling the agency.

Staff across the service expressed a high level of confidence in this current management team. They told us that they had felt genuinely consulted and so "owned" the plans for improvement. Administration staff are efficient and sensitive to the work they do. They are highly thought of across the service.

Childcare managers impressed also as being knowledgeable of and committed to their work. Since the appointment of the acting team manager activity of the service is now monitored through supervision.

The executive member is clearly committed to and interested in the corporate parenting role and has recently set up a corporate parenting panel. He is kept apprised of service development by meeting regularly with the corporate director and receiving regular reports.

There was evidence of poor quality assurance in relation to adopters' assessment and children's permanence reports. This needs to be addressed with a clear system to monitor this work. Adopters' files were generally well ordered, but adoption support files were poor, with little information or current records. Children's adoption files do not meet regulations and must be reviewed. There was very little evidence of management oversight on files but

again this is addressed in the service improvement plan by the development of an audit tool.

Panel members' files do not meet the regulations and must be addressed. Staff personnel files were generally well ordered. The checklist at the front of files should be amended to record telephone follow-ups for references. One worker's reference wasn't followed up in this way. Wakefield must conduct their own criminal record checks for overseas employees.

The service has suffered from significant disruption in terms of line management, which has significantly contributed to the lack of coordination and management oversight of the adoption service. The current senior management team are all appointed on an interim basis, and have only been together since November 2006. This has inevitably had a serious impact on service delivery and outcomes for children.

However, there is much evidence of clear leadership from the interim children's director who, with colleagues has identified very quickly the shortfalls in the service. As a result they have produced a comprehensive adoption service improvement plan, which identifies the same issues found in this inspection. Lead officers are attached to priority areas and progress and outcomes are frequently monitored and reviewed. In order for this to be successful, it is essential that managers who have developed this service improvement plan follow it through to implementation to ensure that the outcomes for children in Wakefield are improved.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Adoption have been met and uses the following scale.

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

“X” in the standard met box denotes standard not assessed on this occasion
 “N/A” in the standard met box denotes standard not applicable

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

MAKING A POSITIVE CONTRIBUTION	
<i>Standard No</i>	<i>Score</i>
7	2
8	2
9	2
34	1

STAYING SAFE	
<i>Standard No</i>	<i>Score</i>
2	2
4	1
5	2
10	1
11	1
12	1
13	3
15	3
19	2
24	X
32	2

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

ENJOYING AND ACHIEVING	
<i>Standard No</i>	<i>Score</i>
6	2
18	2
33	1

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

Are there any outstanding requirements from the last inspection? No

STATUTORY REQUIREMENTS

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

No.	Standard	Regulation	Requirement	Timescale for action
1	AD10	AAR (2003 as amended)	Adoption panels have clear written policies and procedures about the handling of their functions and ensure that they are implemented.	31/08/07
2	AD12	AAR (2003 as amended)	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.	31/08/07
3	AD17	AAR (2003 as amended)	There are clear written procedures for monitoring and controlling the activities of the adoption agency and ensuring quality performance.	31/08/07
4	AD25	12 AAR (2005)	The adoption agency ensures comprehensive and accurate case records are maintained for each child, prospective and approved adopter with whom the agency has worked. The agency must establish and maintain files in relation to adoption support services as laid down in the regulations.	31/08/07

5	AD20	AAR 2003 (as amended) Reg 10,11,12,13	Staff are organised and managed in a way, which delivers an efficient and effective service.	31/08/07
6	AD28	AAR 2003 (as amended) Reg 15 Schedules 3 & 4	The agency must maintain Up-to-date, comprehensive personnel files for each member of staff and member of the adoption panel, as laid down in Schedules 3 & 4.	31/08/07
7	AD1	24C (2005 as amendment)	The agency must ensure that the children's guide meets the requirements in Schedule 2.	31/08/07
8	AD33	AAR (2003 As amended)	Services are tailored to meet the needs of people affected by adoption	31/08/07
9	AD11	AAR (2003 As amended)	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.	31/08/07

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1	AD4	Completed health and safety checklists should be placed on all files and should include guns and other weapons. The months of adopters' employment histories should be obtained in every case and recorded. Issues of diversity should be explored in more detail in assessments of adopters.
2	AD6	The service should develop a written strategy for working with and supporting adopters. They should consider the arrangements in place to ensure a co-ordinated approach to multi-agency involvement in adoption work.
3	AD8	The service should review its current resources to address the increasingly low priority afforded to life story work and support to adopters, as children's cases dominate the worker's agenda.
4	AD9	The service should develop a written strategy for working with birth parents and families.
5	AD3	The service should develop a system of prioritising prospective adopters who are most likely to meet the needs of Wakefield's children awaiting adoptive placements. Information pack should include information for those people who wish to consider adopting from overseas.
6	AD20	The service should consider undertaking a mapping exercise of all its core functions.
7	AD20 AD25	The agency should make the system of file auditing more robust.
8	AD2	The service should ensure that children's views are explicitly recorded especially in the children's permanency reports.

Commission for Social Care Inspection

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