



Making Social Care
Better for People

inspection report

Local Authority Adoption Services

**Shropshire C C (inc Telford & Wrekin)
Adoption Service**

Observer House (joint Adoption Service)

Holywell Street

Abbey Foregate

Shrewsbury

SY2 5DE

3rd August 2004

Commission for Social Care Inspection

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

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

The role of CSCI is to:

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

Inspection Methods & Findings

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

The 4-point scale ranges from:

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

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

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

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

ADOPTION SERVICE INFORMATION

Name of Local Authority

Shropshire C C (inc Telford & Wrekin) Adoption Service

Headquarters Address

Observer House (joint Adoption Service), Holywell Street,
Abbey Foregate, Shrewsbury, SY2 5DE

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01743 241915

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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		3rd August 2004	ID Code
Time of Inspection Visit		10:00 am	
Name of Inspector	1	Sally Woodget	113975
Name of Inspector	2	Sean White	
Name of Inspector	3	Viv Slyfield	
Name of Inspector	4		
Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the CSCI. 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		Catherine Warner	

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INTRODUCTION TO REPORT AND INSPECTION

Local authority adoption services are subject to inspection by CSCI, 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 CSCI in respect of **Shropshire C C (inc Telford & Wrekin) 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 CSCI 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.

Shropshire and Telford and Wrekin Local Authority Social Services Departments have since 1998 developed and maintained a joint adoption service, which had been provided through the terms of a service level agreement. This agreement is renewed every 3 years.

The joint adoption service provides a service for all children for whom adoption is identified as their plan from both local authorities via their link social workers who provide a family finding service.

- The joint adoption service recruits, assesses, trains, prepares and supports a wide range of prospective adoptive parents to meet the needs of children referred to them. Furthermore the service offers: Counselling for pregnant women who wish to relinquish their babies for adoption;
- Counselling for birth families who children have had adoption identified as their plan, a service which is available at any stage during the adoption process and beyond;
- Counselling for adoptive adults;
- Assessment, training, preparation and counselling of people wishing to adopt from abroad;
- Advice and consultancy service to case managers and social workers in fieldwork teams who are working with a child and its family where adoption is the plan;
- Assessments and preparation of reports in step parent adoptions;
- Preparation of work for the adoption panel and the courts on all aspects of adoption work;
- Inter-agency work with other local authorities who place children for adoption with adopters approved by the agency;
- An adoption support service after placement of a child(ren) and post an order being made; and
- Use of resources for and from the West Midlands Regional Family Placement Consortium and the National Adoption Register.

The main aim of the Joint Adoption Service is to provide stable, secure adoptive families for children who are unable to remain with their families of origin and for whom adoption is judged to provide the best alternative to secure their long-term well being.

PART A SUMMARY OF INSPECTION FINDINGS

INSPECTOR'S SUMMARY

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

This service has been inspected for the first time against the National Minimum Standards introduced from the 1st April 2003. As a result, this report may contain a substantial number of recommendations and requirements. If so, the number of these should fall significantly at the next inspection. This inspection found that there a significant number of developments, changes and additions that the service needed to make to comply fully with the Standards and Regulations, however inspectors found the strategic management of the service to be strong and committed to fulfilling the changes required by this inspection report.

Standard 1 Statement of Purpose

This standard was nearly met

The joint service had produced a detailed and accessible Statement of Purpose, which reflected the services and facilities provided. However more work is required on the Children's Guide to comply with the regulations and standards.

Standard 2 Secure and Promote Welfare

This standard was met

The joint adoption service provides a child centred approach, with staff working hard to ensure that children requiring a service are identified at an early stage. The service is very responsive and engaged in specifically targeted recruitment to meet the needs of children with special needs. The service has well developed matching procedures to ensure children's' need are thoroughly addressed.

Standards 3 – 6 Prospective and approved Adopters

2 of these standards are met, one is nearly met and one is not met.

The joint adoption service has a good process for preparation and training of adopters. Adopters were positive about the service that they had received. Inspectors had some concerns about the quality of the assessments and recommend a more evidenced based approach, which identifies the prospective adopters competences and skills as well as their needs for further experience and training.

Standards 7 – 9 Birth Parents and Birth Families

2 of these standards were nearly met. 1 was met.

Whilst a lot of good work is being undertaken with some birth families, but this was not consistent, and birth parents were reluctant to take support from a social worker who was furthering their child's plan for adoption. The manager has recognised the need for independent support and counselling and was developing plans to set up a service level agreement with an independent agency to provide this.

Standards 10 – 13 Adoption Panels and Agency Decisions

All of these standards were nearly met

The panel met regularly and complied with regulations regarding its membership. The panel procedures did not contain all the information required by the standards however and not all panel members had had the appropriate checks and references undertaken before commencing their work. The panel met monthly and could convene an interim meeting if required so as not to delay plans for children. The Panel Chair needs to be clearer in the summing up as to the reasons for making a recommendation and the joint adoption service needs to ensure there is no delay in sending out the agency's decision to all concerned parties.

Standards 14 – 15 Fitness to Provide or Manage an Adoption Agency

1 of these standards was nearly met, 1 was met.

The joint adoption service manager provided effective leadership and skills and was ambitious and enthusiastic about service development. She needs however to obtain some management qualifications to comply fully with the standards.

The personnel files evidenced that all the relevant checks and references had been undertaken.

Standard 16 – 18 Provision and Manager of the Adoption Agency

2 of these standards were met, 1 was nearly met

There are clear lines of accountability and communication between the management staff. Inspectors felt that due to heavy workloads a further manager to assist with the development of the service would be helpful. Appropriate levels of monitoring and security were developed. Written protocols covering the role of the specialist advisors needs to be drawn up.

Standard 19 – 23 Employment and management of staff

3 of these standards were nearly met, 1 was met

Staff were organised in a way, which delivered an effective and efficient service. Staff were however overworked and tired and systems need to be in place to manage their workload and assist with prioritising. All staff felt their employer was fair and there was good training available, but inspectors felt that regular ongoing Child Protection training should be expected of all staff. There was some innovative and creative work being carried out by adoption support staff. Some staff were not receiving regular ongoing supervision or annual appraisals.

Standard 25 – 28 Records

3 of these standards were nearly met 1 was not met

Separate adoption files were set up for each child and adopter, however in many cases they did not contain the appropriate information or this had been inappropriately filed. Minutes of

some important meetings i.e. Consent Panel were perfunctory, and managers decisions were not recorded on the appropriate files. Appropriate remedial action had not been taken following the interval audit of the files. CRB checks had not always been appropriately carried out for others members of the household. The service were illegally using Schedule 2 reports to provide information about children to prospective adopters and other interested parties. The access to records policy needs reviewing and updating. Panel member's files did not comply with the Regulations.

Standard 29 Premises

This standard was nearly met.

The premises were cramped for the number of staff, and not enough storage space was available for therapists in the adoption support team. The building was inappropriate for sessional therapeutic work with young children, and the sound insulation was poor, causing concerns over issues of confidentiality. Files were appropriately stored and Inspectors were informed that IT systems were adequately safeguarded.

Reports and Notifications to the Local Authority and Secretary of State

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

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

NA

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

NA

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

NA

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

NA

The grounds for the above Report or Notice are:

**Implementation of Statutory Requirements from Last Inspection
(Not relevant at first CSCI 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 Commission for Social Care Inspection 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 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	Reg 3(1) 2003	LA1	The summary of the statement of purpose must be produced in a <u>child centred</u> and accessible way, to meet the needs of the children and young people for whom the service plans adoption.	End of February 2005
2	Reg 8(a) 1983	LA4	The joint adoption service must be responsible for taking steps to obtain information about any previous convictions, which relate to a prospective adopter and other members of his household aged 18 or over	End of January 2005
3	Reg7 (1) (a) (I-iii) 1983	LA7	The joint adoption service must provide a more independent service to birth parents to ensure they access the support and counselling they need.	End of February 2005
4	Reg7 (1) (a) (I-iii) 1983	LA9	The joint adoption service must develop a strategy of working with and supporting birth families and birth parents both before and after adoption, including helping birth parents to fulfil agreed plans for contact.	End of February 2005
5	Reg 12 1983	LA25	The joint adoption service must cease using the Schedule II report as a document to impart information to prospective adopters about the proposed linked child's needs and background unless it has the specified permission of the Court to do so.	End of January 2005

6	Reg17 2003	LA27	The joint adoption service must ensure that a written record is made of any complaint including details of the investigation made the outcome and any action taken, and that these are kept on the relevant files for staff, prospective/approved adopters, birth parents/family as well as in a separate file on complaints held within the service office.	End of January 2005
7	Reg 6(2) (c) and 11 (3) (d) Schedule 3 2003	LA28	The joint adoption service must ensure that all the necessary checks and references are undertaken and information sought to comply with Schedule 3 in respect of Panel Members and all other staff working for the purposes of the Adoption Service.	End of January 2005
8	Reg 16 (1) 2003	LA29	The joint adoption service must ensure that the premises are suitable for the purpose of the adhering the aims and objectives set out in the statement of purpose.	End of February 2005

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	LA4	The joint adoption service should develop a framework of assessment, which addresses the issues prospective adopters are likely to encounter and <u>identifies the competencies</u> and strengths they have or will need to develop.
2	LA4	The joint adoption service should provide a clearly set out preparation programme which takes into account the particular needs of those who intend to adopt from another country
3	LA4	The joint adoption service should ensure that all prospective adopters are aware of that the training is used as part of their assessment process, and that this part of the assessment is included in the document which goes to the Panel.
4	LA4	The joint adoption services should evaluate and review annually the effectiveness of the adoption preparation.

5	LA4	The joint adoption service should ensure that the remit of the 'Consent Panel' is fully understood by both staff and prospective adopters. This information needs to be included in that sent out to enquirers.
6	LA6	The joint adoption service should ensure that a specific support service is available to adopters adopting from overseas.
7	LA10	The joint adoption service's Panel handbook should include policies and procedures for; decision making when members of the Panel are not in agreement; the method of providing feedback to the agency on the quality of cases being presented to Panel; the promotion of good practice and consistency of approach and fairness by Panel members in assessing carers and receiving progress reports on individual cases. This could also include the Panel's function in relation to disruptions.
8	LA11	The joint adoption service should provide training for Panel members in the basic principles of the law and eligibility criteria for overseas adoption.
9	LA12	The Panel Chair should clearly state the reasons for the conclusions reached, and the joint adoption service should ensure that these reasons are clearly recorded and minuted in the recommendation.
10	LA13	The joint adoption service should ensure that all relevant parties are informed of the agency decision in writing immediately.
11	LA14	The manager of the joint adoption service should undertake and achieve an NVQ Level 4 course in management by 1 April 2005.
12	LA18	The joint adoption service must develop a written protocol governing the role of specialist advisors
13	LA19	The joint adoption service needs to develop a system that evidences their phone calls to verify written references, and file this with other appropriate personnel documents.
14	LA19	The joint adoption service should include details of the 'Consent panel' within their recruitment and selection policies and procedures, and also within their equal opportunities policies
15	LA19	The joint adoption service should ensure that all staff members have access to regular child protection training and knowledge of Working Together and Safeguard Children
16	LA19	The joint adoption service should ensure that all adoption social workers undertaking assessments of prospective adopters have up to date training in competency based, evidential and analytical assessments
17	LA23	The joint adoption service should ensure that all staff undertaking assessments for applicants who wish to adopt from overseas, and those who manage and supervise their work have received up to date training in this area.

18	LA23	The joint adoption service should ensure that all advisors are fully informed of the processes involved in the work of the adoption team including the way in which information is shared with adopters when linking, matching and placing children for adoption.
19	LA20	The joint adoption service should ensure that it has systems in place to determine, prioritise and monitor workloads and assign tasks to appropriate staff.
20	LA20	The joint adoption service should ensure that the professional supervision and consultation provided for staff is evaluative and analytical in its approach and provides a positive and decisive approach to managing issues that arise, and that this is well documented and understood.
21	LA20	The joint adoption service should provide regular supervision and consultation and be accountable for the work undertaken by the adoption support workers
22	LA20	The joint adoption service should ensure it had an adequate level of clerical and administrative support, office equipment and infrastructure to enable staff to carry out their duties in an efficient and effective manner. This is more urgent with the 3 new staff due to be recruited shortly.
23	LA23	The joint adoption service needs to include the adoption support workers in their appraisal or joint review scheme to identify their training and development needs in adoption work.
24	LA25	The joint adoption service should ensure that comprehensive and accurate, up to date case records are maintained for each child, prospective and approved adopters
25	LA25	The joint adoption service should ensure that the minutes of the 'Consent Panel' are detailed and informative, clearly identifying the reasons for the decision-making.
26	LA25	The joint adoption service should ensure that decisions by managers/supervisors are recorded on case files and are signed and dated.
27	LA25	The joint adoption service should ensure that the filing cabinets, which store the case records and archived records, are fire and waterproof.
28	LA26	The joint adoption service should ensure that its Access to Records policy is compliant with the Data protection Act 1998 and the Human Rights Act 1998.
29	LA27	The joint adoption service should ensure that written entries in case files are signed and dated by the author.

30	LA27	The joint adoption service should ensure that where an independent officer is used to investigate a complaint, that this person meets with the complainant.
31	LA27	The joint adoption service needs to send out a complaint leaflet to all prospective adopters at an early stage of the process.
32	LA27	The joint adoption service should ensure that there is a system to monitor the quality and adequacy of the records and that remedial action is taken where necessary (and this is documented).

- 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	YES
• 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	3/8/04
Time of Inspection	09.00
Duration Of Inspection (hrs)	90
Number of Inspector days	11
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)	10

The following pages summarise the key findings and evidence from this inspection, together with the CSCI 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
<p>The joint adoption service's statement of purpose is comprehensive, accessible and detailed. The aims and objectives accurately reflect the facilities and services provided. It has been formally approved and signed by both Telford and Wrekin Executive Council and by Shropshire Executive Council. It would be helpful if the date of approval was also included on the document.</p> <p>Inspectors were told that the document is reviewed annually. A shortened version in more informal format is available and given to all prospective adopters. The full version of the SOP is also available on the service's website for adopters.</p> <p>There are two guides, which provide information for children of different age groups and abilities. These are colourful and accessible to a child audience. Inspectors were informed that arrangements could be made for these documents to be translated into different languages or formats as and when required to ensure that all children, whether those whose first language is not English or those with a disability can access this information. The guide is also available on audiotape. A leaflet from a Shropshire children's advice and representation service and a rather poor quality photocopy of the Telford and Wrekin "Rights and Representations Project" have been included with the children's guides. It is suggested that this information is contained within the body of the children's guide. The summary of the Statement of Purpose has also been included as a photocopied leaflet. This document has not been produced in a child centred manner to make it interesting or accessible to children, and as above it is advised that this information is incorporated into the body of the children's guide to make one comprehensive document, which would also include the information on how to make a complaint.</p>		

Has the Statement of Purpose been reviewed annually? (Record N/A if the information is not available)	YES
Has the Statement been formally approved by the executive side of the council?	YES
Is there a children's guide to adoption?	YES
Does the children's guide contain all of the information required by Standard 1.4?	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

The joint adoption service has been able to place all the children referred to their service with their own adopters within the last year. The service has also been able to offer placements to 15 children in the last year, from other areas, via the West Midlands Regional Family Placement Consortium and the National Adoption Register.

The joint adoption service has not had to undertake any major strategies to attract or recruit prospective adopters as they have had enough applicants come forward to adopt of their own volition. The service manager believes that a sensitive and speedy response, followed by good, accessible training has the effect of "word of mouth" recruitment and advertising. Adopters interviewed by inspectors, referred to a courteous, personal and timely response by staff from the agency, which supports this view.

The service managers currently attends all the looked after children meetings in both authorities to ensure contingency plans are being made, and to ensure that adoption plans are progressed in a timely fashion. This work will soon be taken up by two new permanent social workers, one from each authority, in order to ensure this piece of work is given the priority and integrity that it requires.

Shropshire have recently advertised for a senior social worker – permanence, who will be based in the joint adoption service and whose role will be to establish and chair regular monitoring meetings to consider the progress of plans for looked after children, developing and implementing policies and procedures to support and underpin the concept of permanence in the children's teams

Telford and Wrekin authority are planning to recruit a permanence officer to advise and train fieldwork teams in contingency and permanence planning, and to set up and chair regular monitoring meetings to consider the progress of children's plans.

Inspectors were convinced therefore that the adoption service was putting the children for whom they were providing as service at the heart of the process.

The adoption manager is and will be kept fully informed about how many adopters may be required and the sorts of skills the service will be looking for.

For those children with very specialised needs the service is able to respond by fast tracking adopters who can match the child's needs or engage in specifically targeted recruitment and inspectors saw evidence of this.

The service manager is also the co-ordinator for the West Midlands Consortium and this

offers the facility of sharing, selling or purchasing resources locally and therefore extends the range of adopters available for children.

The service has a matching policy and procedure which establishes “a common format for identifying the family placement requirements of children and young people”, and for identifying ‘the strengths and concerns of making a specific family placement. The service use a well developed matching tool to ensure matching considerations such as; individual ethnic origin, cultural background, religion and language, as well as the needs of siblings to be kept together, are thoroughly addressed.

There was evidence that a great deal of work was being carried out by adoption and field social workers alike, to ensure that adopters are fully appraised of and consulted about the children with whom they are linked. Adopters were given the opportunity to meet with foster carers caring for the child, and other professionals including consultants where these children had complex needs, which is good practice.

Whilst most of the children linked and matched were too young to be properly consulted, there was evidence that their responses, behaviour and needs were considered through the process of explanation, preparation and introductions.

In the last 12 months:

How many children were identified as needing adoptive families?	29	
How many children were matched with adopters?	39	
How many children were placed with the service’s own adopters?	37	
How many children were placed with other services’ adopters?	0	
How many children were referred to the Adoption Register?	39	
In the last 12 months, how many children were matched with families which reflected their ethnic origin, cultural background, religion and language?	38	
What percentage of children matched with the adoption service’s adopters does this represent?	98	%
How many sibling groups were matched in the last 12 months?	11	
How many allegations of abuse or neglect were made about adopters approved by this adoption service?	2	
On the date this form was completed, how many children were waiting for a match to be identified?	13	

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>This service has an information pack for enquirers, which includes a broad range of information and leaflets from a variety of sources on adoption issues. The joint adoption service’s own leaflets do not specifically contain an eligibility criteria, rather it explores the sorts of people who make good adopters, the sorts of children available for adoption, and explores a few myths about who is likely to adopt. One of these booklets is translated Welsh, Punjabi, Chinese and other languages as required.</p> <p>An inter-country adoption leaflet is also available which includes a useful step-by-step approach to counselling, assessment, checks and approval. A further information pack is sent out to prospective adopters and newly approved adopters, which includes information about the rights to leave and pay, the West Midlands Family Placement Consortium and National Adoption Register, the Joint Adoption Panel and the Independent Review Mechanism. Adopters who were visited as part of the inspection process and those who responded to the questionnaire were all positive about the swift and sensitive way in which their enquiry application and assessment were undertaken.</p> <p>There was evidence that the agency ‘fast track’ applicants who are most likely to meet the needs of children waiting and those who respond to advertisements for specific children requiring placement are assessed as a priority.</p> <p>Members of the adoption social work team assess applicants who wish to adopt from overseas. There was evidence to suggest that the level of experience expertise and still in this area was not as strong as in other areas of the teams work. This work is of a specialist nature and it is suggested that more training is provided for staff or that one member of staff be allowed to build up some expertise in this area. The manager of the service also requires some training in this area to be able to support such staff appropriately. (See Standard 23.) Prospective overseas adopters were appropriately referred however to other agencies such as the Overseas Adoption Helpline.</p>	<p>Standard met?</p>	<p>3</p>

Standard 4. (4.1 – 4.9)

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

Key Findings and Evidence**Standard met?**

1

Inspectors found that assessments were detailed and narrative in their style and approach. Prospective adopters were encouraged to participate fully by writing about their childhoods and experiences.

Adopters who responded to the questionnaires were satisfied with the assessment process, which they described as thorough, non-invasive, sensitive, interactive and informative. However, inspectors were concerned that the assessments lacked an evidential and analytical approach. Adopters were encouraged to write descriptions of themselves which were included often wholesale into the report with little or no comment from the assessing social worker. There was little evidence those facts were checked or that links were made from these descriptions to indicate competence, skill, experience or ability to care for an adopted child. Issues such as discrimination and racism were not fully explored with adopters wishing to adopt from overseas. Personal losses, mental health issues, impact of having adopted relatives and disability issues were not fully explored or assessed in relevant cases. In two cases criminal convictions were not fully explored with applicants to identify their reactions, note what had changed since or record their present views. In another case issues about a couple's experience, skills and competence since the adoption of their first child were not fully explored or analysed in their second assessment for another child.

Further training on assessment and the use of competencies based approach is necessary to improve the quality of the core assessment of prospective adopters. (See Standard 19). This service now includes previous partners in the list of references to be undertaken prior to approval.

There is a clearly set out preparation programme that is mandatory for all prospective adopters.

Preparation courses are available approximately 5 times per year and include 6 full days of training, (4 week days and 2 weekend days) and cover such issues as confidentiality, assessment, child development, managing behaviour, attachment and loss, abuse and the birth families perspective. During the course prospective adopters have the opportunity to meet adopters who have had a placement and learn about their different experiences.

The venue for this training is in the Joint Adoption Service's Office. However, 40% of the adopters who replied to the questionnaire felt that the venue and timing of this preparation was not suitable or convenient. The Adoption preparation course booklet clearly outlined the process for the applicants. The training and preparation group explains that the course must be attended by all applicants and be completed prior to the commencement of the "home study" or assessment.

Applicants for children from overseas were also included in this preparation course. Overseas adopters who were interviewed or returned questionnaires reported that the course was extremely useful and informative about the needs of children locally who require an adoptive placement. However the specific preparation for those wishing to adopt from overseas was not covered in this course, and this issue needs to be addressed.

Adopters reported that they were asked to give feedback on the course provided and course instructor completed a section of the prospective adopters assessment. This report however

lacked any detail of the course content and did not evaluate the applicant's commitment to, involvement in or contributions made to the course. It is important that the applicants are aware that the training and preparation course is also part of the assessment process and contributes to the adoption service's understanding of the applicant's continued learning needs.

One adopter commented on the 'tiredness' of the materials used during the training course.

The service needs to develop a tool to evaluate the effectiveness of the preparation course on an annual basis.

Prospective adopters reported being kept informed of what was happening throughout the process. In some cases carers were given a list with dates of assessment visits and information about what sorts of issues would be discussed on each date.

Where an applicant had a positive disclosure on their Criminal Report, a 'consent panel' consisting of a legal advisor and senior managers met to discuss the issues, risks and concerns. Inspectors were disappointed that these meetings were either not minuted or not thoroughly minuted in order to provide a full audit of the reasons for the decision-making. The adoption social workers were unsure of who constituted the 'Consent Panel' or of the arrangements for its use. The joint adoption service needs to ensure that the policy, procedure and remit for the 'consent panel' are fully understood by both staff and prospective adopters alike. Information about the 'consent panel' needs to be included in the information for enquirers and prospective adopters.

The joint adoption service has a dangerous pets policy and procedure, however inspectors were concerned to note that in some cases applicants were completing their own 'animal ownership questionnaire' and risk assessments were not being undertaken in relation to possible dangerous pets.

In one case the Joint Adoption Service as evidence accepted police checks bought from abroad. It is the responsibility of the Adoption Agency to carry out these Police checks directly with the agencies responsible in those countries where the adults have lived, in relation to any adults of the household who will have direct contact with children placed.

Standard 5 (5.1 – 5.4)

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

Key Findings and Evidence**Standard met?**

3

The joint adoption service has a comprehensive policy and procedure on matching and linking. A matching tool document is completed and presented to the adoption panel where the match may be recommended for approval.

Adopters are given information about a possible match to a child, verbally by their link social worker. If they wish to continue, they then receive written information in the form of the Schedule 2, a legal Court document which includes information about the child's history and background their needs and plan (see standard 25). Adopters reported that they were given the opportunity to fully discuss the child's needs and their own ability to manage these with their link social worker. Opportunities for meeting the child's social worker and present carer were also made available at the appropriate time in the matching process. Approved adopters are asked to prepare a book or photo album about themselves that are used with the child for the purpose of introductions.

The adoption service had systems in place to; ask adoptive parents whether they are prepared to agree to notify the adoption agency if their adopted child dies; explain the importance for the birth family of having this information; and to pass on the information to birth parents if they wish to have it.

A number of adopters had experienced inter-agency placements via the West Midlands family placement consortium or the National Adoption Register. These adopters did not always experience the same level of openness about a child's history and background, though they felt that their own caseworker had supported them in trying to obtain this information. Tighter protocols about inter-agency working need to be addressed via these routes to ensure a helpful and informative process to linking and matching.

No children from Telford and Wrekin or Shropshire had been placed via the West Midlands County Placement Consortium or the National Adoption Register.

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?****2**

All social workers in the adoption service are expected to provide 'practical' information and support to families after placement, and this is part of their job description. Inspectors found evidence of ongoing support to adoptive parents following the placement, which was appreciated by adoptive parents

Prior to the placement a support plan is drawn up to identify any areas of need for each child placed, and to record the responsibility of each individuals involved in the plan, to undertake support or liaison with other services such as CAMMS, SENCO occupational therapist, physiotherapist, etc...

The joint adoption service also employs 3 experienced social workers as adoption support workers. These staff have had specialist training with Dr Dan Hughes at the Family Future Centre in London, where they have learnt to apply a holistic and therapeutic approach to attachment issues.

The adoption support workers receive referrals from case managers regarding children whose plan is adoption and where they may be concerns regarding attachment issues prior to placement. They will also receive referrals from the adoption social workers where issues have risen doing introduction or after placement, and they will then work with both the adoptive parents and the children placed.

These pieces of work are specific, often intensive and usually time limited. This small team also receive referrals requesting specific attachment work to be undertaken with birth family members (this will be discussed again in Standards 7-9)

Adopters told inspectors that they had been told that support was available to them, but they had received nothing in writing to explain what form this would take. Written information about adoption support services and post order support services do need to be provided so that adopters can return to seek support advice as required.

The joint adoption service is presently advertising for a new post 'Adoption Support Service Advisor'. It planned that this new member of staff's role will be to "sign post" people affected by adoption to appropriate services, and to liaise with other agencies and services to ensure that support is available. This member of staff will also be undertaking 'assessments for adopter support' and undertake some specific direct 'work with families'. It is intended that the post holder will develop the thinking and the practice for the provision of adoption support for the service as a whole.

Overseas adopters were not being provided with any specialist support and advice relevant to their situation, most of the support groups and meetings represented the views of the domestic adopters; this area therefore needs further work.

Inspectors interviewed a number of adopters and were impressed by their commitment. All were heavily involved in helping their adopted children develop and maintain a positive self identity which included being open and honest about the child's birth history and birth family background. All the adopters interviewed were clear about the need to maintain confidentiality and keep safe information provided by the birth families.

The service has recently run a course for adopters called 'Talking to Children about Adoption', which was well attended and well received. It is intended to provide this course as a rolling programme for adopters which is commendable.

However it was felt more training, guidance and support needed to be available for adopters from overseas, to assist them to understand the need for and to develop strategies, to help the child address issue of racism in the future.

Inspectors were informed that there had been no disruptions in the period of 12 months, but were assured that if this occurred all parties would cooperate to provide information and support to the adopters and the child. Any disruptions meetings would be chaired independently via a reciprocal arrangement with members of the West Midlands Family Placement Consortium.

Financial support is available for adopters who have a low income, it is suggested that an adoption allowance is also linked to the needs of the child/ren, particularly where there is a need to keep a sibling group together or where it is identified that the child has significant needs, or a specific disability, which may require specialist support in the future.

Number of adopter applications started in the last 12 months	22	
Number of adopters approved in the last 12 months	30	
Number of children matched with the local authority's adopters in the last 12 months	52	
Number of adopters approved but not matched	15	
Number of adopters referred to the Adoption Register	30	
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?	2
<p>Inspectors were informed that both parents do have the opportunity to discuss and comment on what is written about them in the Schedule 2 Report via the “Court process”.</p> <p>Field social workers/children’s case managers are assisted by the ‘ sunshine pack’, a file containing information about the adoption process, which assists them in knowing at what stage of the process to write reports, letters etc ...and gives guidelines on how to do this.</p> <p>The counseling and support of the birth parents throughout the process is presently the work of the adoption social workers. Inspectors noted that while there was once good evidence of positive work going on with some birth families, often birth families did not wish to pursue this offer of support, as they perceived the adoption social worker as someone who was progressing the plan of adoption, often when they themselves were opposed to it. It was not always clear from the files when or if birth families had seen the information written about them or where their comments were recorded. Both authorities need to address this with their fieldwork staff to ensure this takes place and is recorded.</p> <p>The service manager informed the inspectors that the joint adoption service had recognised that there were difficulties in them providing support directly to birth families and that they had commenced a competitive tendering process, to provide the support and counselling to birth families via an independent organisation</p> <p>Inspectors receive 3 responses from birth parents questionnaires, these were all were very negative about the way the service regarded their needs. Whilst this is not an unusual response, it does indicate that more work does need to be carried out in this area to enable birth families to fully explore their feelings and reactions.</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>Inspectors saw records on children files, which indicated that information had been sought from birth families to contribute to the maintenance of the child’s heritage. Placing social workers from both Telford & Wrekin and Shropshire identified that completing life story work is problematic in terms of time and that staff had had no recent training. It is crucial that the quality of the information about the child’s history with birth family and his life before adoption is clear and accurate and imparted appropriately and sensitively to each child. Work with birth parents is crucial to being able to complete this piece of work in a meaningful</p>		

way. Each local authority needs to address this issue in their training for staff responsible for undertaking this piece of work. (See standards 23).

There is however also some evidence of positive pieces of work that has been undertaken by the joint adoption service, which has culminated in the birth family meeting adopters to exchange information to assist the child placed.

Standard 9 (9.1)

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

Key Findings and Evidence

Standard met?

2

The joint adoption service was in the process of developing its post adoption services, but these were much more geared to supporting young people and their adopters who were experiencing difficulties with regards to attachment issues. Adoption support workers did receive referrals for birth family members but were not in a position to undertake such pieces of work due to their workload priorities.

Inspectors noted that contact issues were not always well addressed. Placing social workers were a little unclear about whose role it was to pursue this. This was something that the joint adoption service had recognised and as already stated, were at the time of the inspection, advertising for an 'Adoption Support Service Advisor'. It is hoped that this post holder will also take responsibility for ensuring that birth families are assisted with undertaking and maintaining the contract agreed in the contract plans.

It is also anticipated that support for birth parents to fulfil agreed plans for contact would be part of the contact within the service level agreement with an independent provider of services for birth families (as mentioned earlier).

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?	2
<p>The joint adoption service has a policy & procedure handbook on the functions and membership of the Adoption Panel. This includes the appointment of the Chair & Vice Chair. The Chairperson is also the Head of Services, Children and Families Division in Shropshire County Council and therefore the Joint Adoption Service manager's direct line manager. The adoption services manager also sits as a panel member. For this reason the Panel Chair needs to be vigilant about ensuring a level of independence and distance from the running of the joint adoptive service to ensure proper scrutiny of the cases put before the panel. The Panel Chair presently feels that he can undertake this level of independent scrutiny in a satisfactory manner.</p> <p>The Panel Chair felt well able to manage panel members in the event of ineffective or disruptive behaviour, but he was not aware of any written guidance or protocol regarding this, which do exist in the handbook. It is recommended that the panel chair is made aware of these written procedures.</p> <p>The panel handbook should also include policies and procedures for; decision making when members of the panel are not in agreement; the method of providing feedback to the agency on the quality of cases being presented to panel; and the promotion of good practice and consistency of approach and fairness by panel member in assessing cases, as outlined in Standards 10.2.</p> <p>The panel were receiving progress reports an individual cases but the policy handbook did not cover this.</p> <p>Prospective adopters are given the opportunity to attend the adoption panel, and a leaflet is provided beforehand to inform them who will be present, and what to expect when they attend.</p> <p>The panel were also involved in discussing any disruption meeting minutes and were considering these in relation to practice particularly in relation to matching which is good practice.</p>		

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

Key Findings and Evidence	Standard met?	2
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The joint adoption service ensures that each new panel member has an opportunity to observe panel prior to formally joining the panel.

Not all panel members has had CRB checks undertaken and status checks required by Schedule 3 and 4 had not been undertaken (this matter is also mentioned under Standard 28)

The panel has representatives from education, health, and legal services and this provides a multidisciplinary approach to decision making. Each of these panel members assist in keeping the rest of the panel abreast of the relevant changes to legislation, regulation and guidance, as well as practical assistance in ensuring children and their prospective adopters receive the proper and appropriate support from the statutory services providers which is good practice.

Training is provided for panel members and inspectors were informed that during the year panel members had received training in; contingency planning, disability and attachment issues. The panel members need to receive training on overseas adoption as outlined in Standard 11.4

All the panel member’s files that were inspected showed evidence of a signed confidentiality agreement.

Is the panel a joint panel with other local authorities?	YES	
Does the adoption panel membership meet all of the statutory requirements?	YES	

Standard 12 (12.1 – 12.3)
Adoption panels are efficiently organised and conducted and are convened regularly to avoid delays in the consideration of prospective adopters and matching children and adopters.

Key Findings and Evidence	Standard met?	2
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The Adoption Panel was organised efficiently and the panel chair conducted the discussions in an inclusive and sensitive manner.

The panel met monthly, but there were procedures for calling an interim meeting in order to prevent any delay in the consideration of prospective adopters or matching children and adopters.

Members of the Adoption Panel receive all the necessary information in advance of the panel.

The minutes of the panel were accurate and informative, and are indicative of the panel discussion. The panel chair needs to be clearer in the summing up however, including the reasons for the conclusions reached, prior to making a recommendation. This could include a brief summary of the strengths, identifying any weaknesses and suggesting ways in which any weakness may be addressed ie; by referring to matching issues, training needs etc

Standard 13 (13.1 – 13.3)

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

Key Findings and Evidence

Standard met?

2

The panel chair has a meeting with the agency decision maker in Shropshire within a few days of the panel meeting. The agency decision maker will consider any recommendations made by the panel during this meeting and a document containing the agency decision is sent to the joint adoption service for letter to go out to the appropriate parties. In Telford & Wrekin the arrangement is rather different in that the panel chair will have telephone contact with the agency decision maker.

In both cases the agency decision maker will have received all the paperwork and the minutes of the panel discussion to inform his / her professional decision.

Prospective adopters are asked to wait for the panel to make its deliberations and are informed personally of the panel recommendation on the same day. However inspectors noted that in a number of cases the written decision of the agency to the prospective adopter was taking sometimes up to a month to arrive. Clearly this administrative procedure needs to be revised and action taken to ensure that the adoption agency conveys the written decision in a more timely manner.

Fitness to provide or manage an adoption agency

The intended outcomes for the following set of standards are:

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

Standard 14 (14.1 – 14.3 and 14.5 – 14.6)

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

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

Key Findings and Evidence	Standard met?	2
<p>The service manager of the joint adoption service has 18 years experience in family placement adoption work. She is appropriately qualified with a CQSW and Diploma in applied Social Studies. She has been service manager of the joint adoption service since 1993. She has many years of service management experience but presently no managerial qualifications. An appropriate course in management at level 4 NVQ or another which matches the competence required by NVQ level 4 needs to be identified swiftly, as the standard requires a qualification at this level by April 2005.</p> <p>The service manager also has responsibility for managing a devolved budget and for requesting funding as appropriate to develop services. She also has responsibility for managing the money received from West Midlands Family Placement Consortium when their adoption services (adopters) are bought by other local authorities. The last year the joint adoption service has received £130,000.00 through these arrangements and part of this amount is being used to set up the service level agreement to provide independent support services for Birth families.</p> <p>The manager with a day-to-day responsibility for the joint adoption service has 16 years experience in family placement work and has been team manager of this service since 1998.</p> <p>Inspectors were impressed to hear from all placing social workers in both Telford and Wrekin and Shropshire, from counsellors, advisors, support workers, adoption social workers and adoption support workers, that the services had benefited enormously from the service manager's effective leadership skills, her drive, her enthusiasm and ambition for the development of the service.</p> <p>She is considered to be accessible and approachable at all levels with the organisation and her constructive and helpful approach has clearly created a positive working environment for staff both up and down the hierarchy and across both local authorities.</p> <p>The manager has a clear written job description, which meets all the elements of Standard 14.6</p>		

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
As previously stated both managers of the joint adoption service have worked for the organisation for a long time.		
Inspection of personnel files showed that all the elements of Schedule 3 were met and that the organisation was fulfilling their responsibilities with regard to safeguarding and promoting the welfare of children.		
It was however difficult to evidence that telephone enquiries were being undertaken to each referee to verify the written references. Inspectors were told that this was the team manager's responsibility. The manager needs to develop a pro-forma document to ensure that these phone calls are recorded and that these are kept with the personnel documents required by Schedule 3, this is a requirement of Standard 19 in connection with staffing.		

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

The joint adoption service manager's role is more about the strategic overall development and direction of the service. The joint adoption service team manager's role is to manage the staff and their work on a day-to-day basis. All the staff are aware of these different roles and there are clear lines of accountability and communication between the managers.

The service manager will delegate her responsibilities to the team manager if she is absent, the team manager would then have access to the district manager, other service managers or Head of Children's Services depending on the nature of the matter. Concerns were raised with inspectors about how realistic it was to expect the services manager's strategic and developmental work to be delegated in her absence to the team manager.

The team manager has her own job description managing the day-to-day running of the service and supervising the social work team. However inspectors found that the team manager was also occasionally undertaking social work tasks and carrying out assessments in order to support her staff.

It is therefore suggested that further consideration is given to the role of assistant development manager of this service to ensure continuity and a sharing of expertise.

The inspectors were informed that the joint adoption service has a conflict of interest policy.

The joint adoption service uses the equal opportunities policies from the Shropshire Council to define their work with prospective adopters and birth families. Inspectors were informed that training on equality issues is provided for staff, and equalities is a standing item on the team meeting agenda. The staff team are representative of the ethnic minority population in the area. Prospective adopters and birth families from these groups were receiving a service sensitive to their religious, cultural and ethnic needs from the staff team.

Leaflets are provided to approved adopters about the National Adoption Register and the West Midlands Family Placement Consortium

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

4

**Number of the above complaints which were substantiated
2 are still ongoing investigations**

2

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

Key Findings and Evidence	Standard met?	3
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Inspectors saw a number of different levels of monitoring activity ranging from staff supervision, staff meetings, and the business/team plan, as well as the reports to the Scrutiny Panel in Shropshire County Council and the Children’s Service Monitoring Group in Telford & Wrekin.

Inspectors met with the relevant elected members for both Telford & Wrekin and Shropshire local authorities. It was reported that the Judge from the Telford Family Court gave a very positive and complimentary account of the Joint Adoption Service at the Scrutiny Panel Meeting in July this year.

Information is provided to inter-country adopters, which includes a breakdown of the charges for training and assessment. Interagency and consortium placement fees are detailed in a leaflet available for anyone with a legitimate interest.

The arrangements for scrutiny were separate for each local authority; councillors from the different authorities did not however, have any structures in place for regular meetings with each other. This meant that any bids for service development of the joint adoption service could be more complicated and time consuming. Some developments were being acted on independently in each local authority, for example, the new posts for “permanence social workers” will be managed quite differently in each area, with Shropshire’s “permanence social worker” being based in the joint adoption service and the Telford and Wrekin “permanence social worker” being based in the Telford & Wrekin’s fieldwork service. This could possibly create different practices and different outcomes for children across the two authorities with whom the joint adoption service works. The service manager will need to be vigilant in identifying if any difficulties or issues that arise from this decision.

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

Monthly?	YES
Quarterly?	
Less than Quarterly?	

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 joint adoption service has access to legal advisors from both Telford & Wrekin and Shropshire Local Authorities. Inspectors interviewed a legal advisor from each authority. The appointed legal advisors from each authority attend the adoption panel alternately, they each give advice on request to the joint adoption service. They also provide advice to children’s social workers/case managers within their own borough. Children’s cases for both Telford & Wrekin and Shropshire authorities are usually heard in the Telford & Wrekin family court, and both authorities work hard to maintain a dialogue with the court to ensure a good working relationship and to avoid any delay in the process.

Legal advisers need to be clear in the advice they give to the joint adoption service about the use of Schedule 2 reports which are completed by the field social workers in each authority on the children for whom requests for permanent plan and care orders are being lodged with the court. The joint adoption service also need to ensure that the legal services are fully aware of the duration and processes carried out by the joint adoption service when progressing children plans through to a link, match and placement. (Please see Standard 25).

There is a medical advisor who is also a panel member, and who has longstanding experience of adoption matters. The Community Paediatric Department take responsibility for overseeing the children's health assessments.

The joint adoption service is a member of the Overseas Adoption Helpline from whom they could obtain any specialist advice about overseas adoption queries.

The joint adoption service also has an educational adviser who sits on the Adoption Panel.

Whilst all the specialist advisors are qualified and registered appropriately there is no written protocol governing their role with the joint adoption service or for their panel membership and this needs to be addressed.

Employment and management of staff

The intended outcome for the following set of standards is:

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

Standard 19 (19.1 – 19.14)

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

Key Findings and Evidence

Standard met?

2

The joint adoption service has clear written recruitment and selection procedures for appointing staff, which follow good practice in safeguarding children. All staff responsible for recruitment and selection has completed an inter-departmental training course that covers this area.

Whilst inspectors were informed that managers were carrying out telephone enquiries to verify written references it was difficult for inspectors to evidence this, As already mentioned in Standard 15 the manager needs to develop a pro-forma document to record all phone calls made to verify written references and these should be kept with the other information required by Schedule 3. Regulations 6(2)(c) and 11(3)(d).

All staff working for the joint adoption service has had an enhanced CRB check carried out and no person was allowed to commence work until this had been received. Shropshire Social Services Department who were the employing authority under the service level agreement between the two Councils had introduced a 'Consent Panel'. This panel consisted of legal advisors and senior management who would consider any information regarding disclosed convictions or positive information received in the CRB checks with regard to the employment of any prospective employee. It would be helpful for this information to be included in the recruitment and selection policies and procedures together with a leaflet containing information about the panel's 'modus operandi' and membership.

All apart from one member of staff are fully qualified social workers. The unqualified member of staff has 30 years experience in adoption work and inspectors were informed her work is regularly supervised. One member of staff is currently undertaking the PQ award in social work and 3 members of staff are qualifies practice teachers.

Whilst inspectors were informed that staff developed knowledge and skills, which equated to those outlined in Standard 19.9, the training courses for 2003-2004 or 2004-2005 did not reveal any regular and ongoing training in the area of child protection. This matter therefore needs to be addressed.

Workers from the Adoption Support Team had recently undergone some intensive training in the Dan Hughes attachment theory and issues for practice, which they highly valued.

Adoption social workers had been able to undertake training with their colleagues from the West Midlands Family Placement Consortium, which undertakes 3 training events per year.

Inspectors were informed that the staff were all experienced and trained in assessment work. However inspectors were concerned at the lack of an evaluative and analytical approach to these assessments and have advised further training in this area to include the evidential and competency based approach. (See Standard 4).

As already stated in this report (Standard 18) all advisors need to have a good understanding of the processes involved in the child's adoption plan and further training is important in this area to ensure there are no misunderstandings.

Do all of the adoption service's social workers have DipSW or equivalent?

NO

What % of the adoption service's social workers have a PQ award?

33

%

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

The management and operation of the joint adoption agency had much to commend it. The accessibility and open door policy of the service manager was considered by all staff to be the most positive aspect of this. Shropshire County Council have a detailed and thorough staff supervision document.

Inspectors were concerned to note however that staff were feeling overstretched, tired and under pressure almost without exception. Supervision notes recorded that this had been going on for some time. Clearly management had picked this up and at a more strategic level this was being addressed via the 4 newly created posts (2 permanence workers, 1 in each authority, an adoption support advisor and a contact worker). Also the work to set up a service level agreement with independent organisation to take responsibility for providing support and counselling for birth families would reduce the pressure on the adoption social workers. However inspectors noted that supervision notes did not evidence a more analytical, evaluative or problem solving approach to this issue, and it appeared as if, in the short term, social workers were left to get on with it.

Adoption support workers had been successful in obtaining 'supervision' with a consultant who specialises in the therapeutic approach used by the team, but supervision with a supervisor/manager directly accountable for the work they are undertaking was not happening. Referrals were received directly by the adoption support workers and self allocated. These staff were beginning to struggle with how to manage the incoming work of day to day cases.

It is crucial that short term goals about how to determine, prioritise, manage and monitor workloads to prevent stress is managed appropriately, and that the issues are raised with higher management so that alternatives can be considered quickly.

Staff were working in rather cramped conditions, where noise levels were impeding work.

All staff were complimentary about the administrative support that they received, but they felt that these staff were overworked as well. Unfortunately due to sickness and compassionate leave by the administrative staff during the time of the inspection the inspectors were unable to interview them to hear their views. Both the present cramped conditions and the need for more administrative support will be an issue that becomes more pressing when the new staff join the team and this will need addressing in both the local authorities. (See Standard 29). The service manager is however well aware that the above issues need to be addressed and is intending to do so immediately.

There was evidence that the service manager was supporting staff to undertake specialist training as appropriate.

Adoption social workers had been successful in recruiting, assessing and approving enough adopters to meet the needs of children from both authorities. The team had also approved adopters, which were bought via the West Midlands Family Placement Consortium, and 15 interagency placements were made over the last year. Whilst this practice is very impressive it does create additional work for the staff as each of these placements needs to be supported and involves a great deal of liaison work with the placing agency. Managers do need to seriously consider how to manage this increase in workload if this pattern of practice is to continue.

These staff were clearly beginning to struggle with how to manage the incoming work and day-to-day cases.

Questionnaires and feedback from adopters provided evidence that enquiries were dealt with promptly and courteously, and that systems to ensure information was provided swiftly were being carried out. Social workers reported being able to access advice and support from a range of advisors and other services such as CAMHS.

All employees had written job descriptions, contacts and copies of the GSCC code of practice.

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?	2
<p>As already stated, staff have been overstretched and under pressure for some time. It is hoped that the 4 new advertised posts will soon be filled and this will relieve some of the pressure for staff members. Also if the pattern of inter-agency placements is to continue then the managers must look at ways of managing this increase of work.</p>		
<p>All adoption social workers were carrying out overseas adoption assessments, (see Standard 23) of which there were only one or 2 per year. No skill base was therefore being built up in this area and the manager was struggling to offer appropriate advice and support. Managers need to identify what would be the best way to provide a quality and knowledgeable service for those wishing to adopt from overseas.</p>		

Total number of social work staff of the adoption service	11	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.	3		

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 felt that the joint adoption services employment practices were sound and the training offered was good. Despite pressures of work staff informed inspectors that they were happy in their present position and felt their manager was fair and supportive. All staff were given individual copies of the authority's '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?

2

Inspection of the staff supervision files revealed that staff had been able to undertake a variety of training courses, some examples of these were; placement mentors and supervisors, power point (IT), home working, managing anger, disengagement, care first, personal safety, L.A.C. and training for trainers. Staff informed inspectors that specialist courses in adoption issues were usually arranged by outside agencies and were therefore expensive, however as already stated some training was provided three times per year by staff with the West Midlands Family Placements Consortium network. One member of staff is presently undertaking the P.Q. award; another is undertaking a practice teacher award.

As already stated elsewhere in the report further training needs to be provided for staff undertaking assessments of prospective adoptive parents, to include a more evidential analytical and competency based approach.

All of the adoption support workers have recently undertaken an intensive training course in London on the Dan Hughes approach to attachment issues to enable them to assess and provide therapy for specific cases where there are known attachment difficulties to prevent disruption and breakdown in placements.

Annual performance reviews have been undertaken on all adoption social workers. At the time of the inspection however this work was outstanding for some of the, adoption support workers. Inspectors were informed that this was intended and would be undertaken before the end of the year.

Staff are kept up to date of new regulation and legislation via staff meetings, the West Midlands Family Placement Consortium Training and via briefing documents. Staff complete Shropshire C C (inc Telford & Wrekin) Adoption Service

evaluation forms on all courses attended, and are asked to feedback to colleagues on training attended. Those providing the training courses review their programmes following feedback. As already stated regular child protection courses need to be ongoing for staff involved in this area of work.

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?	1
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The joint adoption service maintains separate files for adopters. The checklists on the front of these files were not always fully completed with dates of receipt of references and checks not filled in. Basic information sheets on each file were helpful when completed, but the whole file was not designed with adoption paperwork in mind and it was difficult therefore to complete audit trails. Adoptive parent files need to be reorganised and documents appropriately filed in named sections.

Inspectors noted that attention to detail was poor, a number of form F details were incomplete gaps in employment records not explored. In some cases there were no copies of the freeing order or care order on the child's file where appropriate.

As stated earlier (Standard 4) the joint adoption service were referring to a 'Consent Panel' where CRB disclosures revealed previous offences, this mechanism was also used, for prospective adopters. The minutes of this panel were perfunctory and lacked detail about the reasons for the decision making. As the decision from the Consent panel is provided to the Adoption Panel it is felt that more information should be provided to them about how they reached their conclusion to assist them in making their recommendation.

Supervisor or manager decisions were not recorded on the files seen by the inspectors and there was no evidence that some files had been monitored or audited or remedial action taken where necessary.

Closed cases such as those adopters who had withdrawn from the process had no closure summary; original CRB checks were loose in the files, despite the policy of storing all CRBs at the Personnel Department.

Both current case records and archived files were stored in filing cabinets. The joint adoption service needs to ensure that these files are fire and waterproof.

It is current practice with the joint adoption service to share the Schedule 2 Court report document to provide all the information on children with all the adopters who may be considered a match for the child. This is a document produced for the purposes of obtaining a freeing order or a care order and once lodged is the property of the Court. Whilst inspectors understand the need to prevent further work for their staff by preparing a further form E report, the present practice is not legal without the permission of the Court.

Inspectors were informed that all staff, panel members and specialist advisors signed a confidentiality agreement, and confidentiality issues are covered in the 'Access to Records' Policy and the Confidentiality policy.

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 joint adoption service has a comprehensive and detailed policy on 'Access to Records' it is not clear if these comply with the requirements of the Data Protection Act 1998 or the Human Rights Act 1998. It does however deal with the issues relating to Standard 26.2. Parts of this policy were written at different times in 1998, 1999 and 2001. Inspectors were told that Shropshire Social Services Department will be undertaking a reviewing and redrafting of all their policies and procedures to bring theirs up to date with new legislation via an independent organisation called TRIEX.

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
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Inspectors were informed that there was a policy on case recording, which establishes the purpose format, confidentiality and contents of files. However as stated previously (Standard 25) inspectors found that the content in the files needed to be managed, organised and monitored in a more accessible manner.

There were separate records for staff, which were kept at the Human Resources Department, and for complaints and allegations.

Confidential records were kept securely at all times and as already stated there was a clear policy in access.

Written entries were detailed, legible and clearly expressed, they were however not always signed and dated.

Complaints were managed via Shropshire Social Services Consumer Services department for the whole of the joint adoption service, though inspectors were informed that they were logged with Telford and Wrekin Social Services Department as well and that Telford and

Wrekin were kept informed of the progress of any complaint. The joint adoption service had received 4 complaints in the past 12 months. The inspectors felt that these were dealt with in a timely and sensitive manner. It was noted however that when independent persons were used to investigate a complaint, they did not meet with the complainant. Inspectors recommend that this be introduced as good practice particularly where the complainant is a child.

The complaints file held at the joint adoption service did not comply with Regulation 17 (a) which requires that a written record is made of any complaint, including details of the investigation made, the outcome and any action taken in consequence.

Over half of the questionnaires returned from adopters reported that they had not been informed how to make a complaint. The service needs to ensure that a complaints leaflet is sent out with the information to adopters and that this explained during the process at an early stage.

As already stated in Standard 25 there is not evidence that files are being audited appropriately. The service needs to develop a system to monitor the quality and adequacy of the records, and take remedial action when necessary. Also written entries in records need to be signed and dated.

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
<p>Inspectors noted some good practice with regard to record keeping of personnel files, for example letters of thanks from adopters, letter of appreciation from Heads of Children’s Services were included on individual records.</p>		
<p>Most of the elements of Schedule 3 were available on file for the inspectors to check with one or two omissions with regards to references. This may have been due to the fact that the member of staff had moved jobs within the department; nevertheless it is a requirement that all staff files have the information required by Schedule 3.</p>		
<p>There were serious omissions in relation to the information on the Panel member’s files, in particular CRB checks were not always undertaken, documentary evidence of qualifications was missing, and photographs as proof of identification were not available on file.</p>		
<p>This issue needs prompt attention to comply with the regulations.</p>		

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

The joint adoption service is based in Shrewsbury, in a building situated in a modern estate of office buildings close to the city centre. The office uses the second floor of the building and security to the offices is very secure.

The premises have facilities for the secure retention of records (see Standard 25 re; risk of damage from fire and water). Inspectors were assured that IT systems were appropriately safeguarded and fire walled, and that there was an appropriate security system in place.

There is a shared open plan office for all adoption social workers and adoption support workers. Some ½ time staff have to share desks, and computers. Staff informed inspectors that the space was cramped for the number of staff and this problem will be exacerbated with the arrival of 3 of the new advertised post-holders. Noise levels are high and working conditions are therefore difficult. The office has a large meeting room, which is used for training purposes, the monthly Panel meeting and other case conferences as required. The walls are thin and as a result there are concerns of about possible breeches in confidentiality. This has been recognised by the managers and the staff, and prospective adoptive applicants are now asked to wait in the manager's office whilst awaiting their invitation into the Panel meeting.

The interview room is also used for therapy for adoptive parents and for children who are receiving assessment or support from the adoption support social workers. Although enormous attempts have been made to make this a child friendly environment it is not considered appropriate to bring children into an office setting for this purpose. The issues of confidentiality are concerning here as already stated due to the poor quality of soundproofing between the rooms.

Adoption support workers have a variety of tools and play therapy materials and there is no space to store these appropriately or conveniently. The issue of accommodation with such a growing team of staff with diverse roles needs to be seriously considered to ensure a safe and healthy working environment for all staff and visitors.

Inspectors were assured that the premises and its contents were adequately insured and that this was organised centrally via their business support department. Inspectors have received a copy of Shropshire's Disaster Recovery Plan "Emergency planning strategy".

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 3rd August 2004 and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary

YES

Comments were received from the provider

YES

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

YES

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

Note:

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

D.2 Please provide the Commission with a written Action Plan by 20th December 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>

Public reports

It should be noted that all CSCI 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 Shropshire CC (inc Telford & Wrekin) Adoption Service confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the statutory requirements made and will seek to comply with these.

Print Name _____
Signature _____
Designation _____
Date _____

Or

D.3.2 I _____ of Shropshire CC (inc Telford & Wrekin) Adoption Service am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:

Print Name _____
Signature _____
Designation _____
Date _____

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

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