

# inspection report

## Local Authority Adoption Services

# The London Borough of Croydon Adoption Service

Taberner House, Room 4, 4th Floor

Park Lane

Croydon

CR9 2BA

## **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 The London Borough of Croydon Adoption Service **Headquarters Address** Taberner House, Room 4, 4th Floor, Park Lane, Croydon, CR9 2BA **Adoption Service Manager** Tel No: Mr Sammy Forbes 020 8686 4433 **Address** Fax No: Taberner House, Room 4, 4th Floor, Park Lane, Croydon, CR9 2BA **Email Address** 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		18/19/20 August 2004	ID Code
Time of Inspection Visit		09:00 (18 <sup>th</sup> ) – 16.00 (20 <sup>th</sup> )	
Name of Inspector	1	Sean White	127556
Name of Inspector	2	Patricia McKay	125790
Name of Inspector	3		
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		Mr Sammy Forbes	

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Implementation of Statutory Requirements from last Inspection
Statutory Requirements from this Inspection
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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 The London Borough of Croydon 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. Preinspection information, and the manager's written self-evaluation of the service, have also been taken into account. The report represents the inspector's findings from the evidence found at the specified inspection dates.

## BRIEF DESCRIPTION OF THE SERVICES PROVIDED.

The adoption agency of Croydon Social Services Department covers the range of services required by current legislation. These include recruiting, assessing and preparing prospective adopters, supporting approved adopters who have children placed with them and some post adoption support. The agency also provides a counselling service to people affected by adoption, including birth records counselling, provides information about the Adoption Contact Register and supports adults wishing to establish contact with birth families. The agency provides, or arranges, inter-country adoption services.

The service operates from the main council premises in the centre of Croydon, which are conveniently located and accessible to the public during normal office hours.

## 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 was a positive inspection; the agency made considerable efforts to provide all necessary and relevant material prior to the fieldwork being undertaken and all arrangements that were made contributed to the overall efficiency of the process. The managers, staff and service users who contributed to the inspection were helpful, courteous and made the inspection team welcome and comfortable.

The following summary is presented under the main headings of the National Minimum Standards

## Statement of Purpose.

The one standard in this section was almost met.

The Statement of Purpose is a well-written document that covers all the required elements of the National Minimum Standards (NMS) and is presented in a way that clearly outlines the agency's commitment to providing a service that aims to place children with families that can meet their needs. The executive of the council, however, had not ratified the statement of purpose at the time of the inspection. The children's guide is a well written document, available in several languages, that provides necessary and useful information for children who are to be, or have been, adopted.

## Securing & promoting children's welfare.

The one standard in this section was met.

There were clear objectives for improving the recruitment of adopters by the agency and for reducing the numbers of children waiting for adoption, as well as indicating the targets for reducing the time that children are waiting for adoption. Plans and objectives by the authority also address the targeting of carers from ethnic minorities and to develop support services as an aid to improving recruitment.

## Prospective & approved adopters.

Of the four standards in this section, one was met and three were almost met.

The agency provides a reasonably thorough and informative pack for people considering adopting a child or children which states that it welcomes applications from a wide range of people but it does not specifically state that it welcomes same sex couples. The information explains all about adoption, the application, preparation and assessment processes and adopters said that they were happy with the detail it contained and its relevance to them.

The preparation and assessment processes were of a good standard overall and were undertaken by experienced and knowledgeable workers. The preparation course material was thorough and contained all relevant material to enable applicants to be fully informed about adoption, its processes and about the range of children requiring adoption. The assessments, as demonstrated in Forms F, were noted, overall, as being thorough and undertaken in a way that evaluated applicant's abilities to meet the needs of children. The agency should consider the consistency and quality of the forms F that it produces; there were errors found that should have been picked up by better quality control and some were found to be less analytical than others.

The agency tries to ensure that all adopters have comprehensive information about the matching and placement process and that they are fully informed about the support services available and encourages placing social workers to provide complete and up to date information about children prior to matching.

There was no system in place to formally request adopters to agree to notify the agency of the death of a child.

The support offered and provided to adopters who have a child in placement was noted as being of a good standard. There were clear systems in place, informed by policies and procedures, which demonstrated a commitment to successful placements and adoptions.

## Birth parents and birth families.

Of the three standards in this section, one was met and two were almost met.

There was evidence available to demonstrate that the agency understands the lifelong implications of adoption and ensures that this is addressed as part of the support provided to birth parents. However, There is no policy or procedure in place to provide birth parents with a support worker who is independent of the child's social worker.

The agency makes every effort to encourage children's social workers to produce, with the assistance of birth relatives, a life-story book. The contact arrangements, particularly through the letterbox system, were of a high standard.

There were no formal systems or strategies in place to demonstrate the agency's approach to working with and supporting birth parents.

#### Adoption Panels & Agency Decisions.

All four of the standards in this section were met.

The agency had recently produced an Information Folder about the adoption panel, which is comprehensive and contains details of the policies, procedures and practice guidance for adoption panels. All applicants are encouraged to attend the adoption panel.

The constitution of the adoption panel met all legal requirements and was always a quorum when it met. Its members were a very experienced group of professional and independent people.

The functioning of the panel was of a high standard and the discussions and deliberations of the panel were thorough. The information that was provided for panel members was distributed in plenty of time and the general administration of information was efficient and well managed. The panel meets regularly and is able to undertake all of its business and responsibilities effectively.

Decisions are made promptly and in line with the National Adoption Standards and applicants are informed promptly.

## Fitness to provide or manage an agency.

Of the two standards in this section, one was met and one was not met.

The people involved in the management of the agency are very experienced and highly qualified professionals with extensive knowledge and backgrounds in children's services and adoption work.

The manager of the agency had not had an enhanced CRB disclosure, due to an administrative error.

## Provision & management of the adoption agency.

All three of the standards in this section were met.

This was a well-managed agency and there were clear lines of communication and accountability with sound working relationships between staff and managers. The staff team was fully informed of their responsibilities and duties, and it was evident that the service operated in a non-discriminatory way.

The Children's Service Division, which includes adoption services, has a Quality Assurance and Audit Strategy and has its own systems for monitoring its performance, including mechanisms for 'tracking' the progress of children within the system. Regular reports on the work of the agency are provided for the executive of the council.

The agency ensures that any specialist advice is sought and accessed where it is necessary. There are very good advisers in respect of legal and medical matters and an educational psychologist sits on the panel.

## Employment & management of staff.

Of the five standards in this section, four were met and one was almost met.

The workers employed by the agency are a very experienced and qualified group who demonstrated a high level of expertise and knowledge and they had a higher than average Post-Qualifying Award achievement. All workers are subject to enhanced CRB disclosures, which are renewed every three years but there was no system in place to verify the authenticity of written references.

This was found to be a well-managed agency although incomplete plans to realign the team were creating some confusion and frustration. However, the workers were clear about their roles and responsibilities and were happy with the levels of supervision, management and support. The administrative support was of a good standard although the agency would benefit from improved IT.

There were sufficient workers employed to undertake the range of duties and responsibilities that the agency carries out and there is a low staff turnover with many of the social workers having been in post for many years. The employment practices of the authority were noted as fair and enabled workers to have a degree of flexibility to encourage an appropriate worklife balance.

Workers had undertaken a range of training and development courses and seminars in the last year and It was clear that the agency places a high level of importance on the training and development of its staff.

#### Records.

Of the four standards in this section, one was met, two were almost met and one was not met.

The case records maintained by the agency were of an overall good standard, although there were no records of supervisor's decision, or auditing of contents. The approach to confidentiality was very good and the storage of records was satisfactory.

There are well-established practices in place to ensure that all relevant information is shared with other agencies and authorities in a timely and efficient way.

The authority has a case recording policy and guidance but it is not tailored to the particular needs of the adoption service; there are no systems to monitor case records. Storage and security of records was generally good.

Staff (personnel) files were found to be in general good order and well structured but they did not contain photographic evidence and there was no system in place to verify the authenticity of written references. Panel member's files were well maintained.

#### Premises.

The one standard in this section was almost met.

The agency is conveniently located and has reasonably good offices. in respect of security of records and no disaster recovery plan	There were shortfalls

## 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 NA 2000 that the Commission considers the Local Authority's adoption service satisfies the regulatory requirements: Notice to the Local Authority under section 47(5) of the Care Standards Act 2000 NA 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: Report to the Secretary of State under section 47(4)(a) of the Care Standards Act NA 2000 of a failure by a Local Authority adoption service to satisfy regulatory requirements which is not considered substantial: Report to the Secretary of State under section 47(1) of the Care Standards Act NA 2000 of substantial failure to satisfy regulatory requirements by a Local Authority adoption service: The grounds for the above Report or Notice are: Not applicable.

-	ementation of relevant at fire	_	Requirements from Last Inspection spection	
Req	uirements fro	m last Inspe	ction visit fully actioned?	NA
If No	please list b	elow		
STAT	TUTORY REQ	UIREMENT	'S	
non-c	compliance wi	th the Care	addressed from the last inspection report which inc Standards Act 2000, the Adoption Agencies Regu on 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.

- 5	,			
No.	Regulation	Standard *	Requirement	
1	Reg.6 (2003)	LA15	The manager must have an enhanced CRB disclosure.	Immediate.
2	Reg.11 (2003)	LA28	Proof of identity, including a recent photograph, must be retained on personnel records.	Immediate.

## GOOD PRACTICE RECOMMENDATIONS FROM THIS INSPECTION

Identified below are areas addressed in the main body of the report which relate to the National Minimum Standards and are seen as good practice issues which should be considered for implementation by the Authority or Registered Person(s).

No.	Refer to Standard *	Recommendation Action
1	LA1	The agency should arrange for the Statement of Purpose to be formally approved by the executive of the Council.
2	LA3	The agency should include same sex couples in its eligibility criteria.
3	LA4	The agency should develop an effective evaluation and quality management system in respect of preparation groups and Forms F.
4	LA5	A formal system of asking adopters to inform the agency of the death of a child should be put in place.
5	LA7	Birth parents should be given the opportunity to read and comment on anything that is written about them.

6	LA7	Birth parents should have access to an independent support worker.	
7	LA7	A strategy for working with birth parents should be developed.	
8	LA19	A system for verifying the authenticity of references should be introduced.	
9	LA25	Records of supervisor's decisions should be kept on case files.	
10	LA27	A written policy on case recording, relevant to the adoption service, should be produced.	
11	LA27	A system to monitor case files and records should be introduced.	
12	LA27	Records of complaints should include all required information.	
13	LA28	A system should be introduced whereby the written references of staff to be employed are verified by telephone.	
14	LA29	The agency should have a disaster recovery plan available for inspection and records should be kept in a locked room.	

• 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	
<ul> <li>Directors of Social services</li> </ul>	YES
<ul> <li>Specialist advisor (s)</li> </ul>	YES
Tracking Individual welfare arrangements	YES
<ul> <li>Interview with children</li> </ul>	NO
<ul> <li>Interview with adopters and prospective adopters</li> </ul>	YES
<ul> <li>Interview with birth parents</li> </ul>	NO
<ul> <li>Interview with birth family members</li> </ul>	NO
<ul> <li>Contact with supervising social workers</li> </ul>	YES
<ul> <li>Examination of files</li> </ul>	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
<u> </u>	3/08/04
<u> </u>	09.00
Duration Of Inspection (hrs)	54
Number of Inspector days	6
Additional Inspection Questions:	NIA
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
the service at the time of inspection	
Total Number of staff employed (excluding managers)	12

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)

<sup>&</sup>quot;0" in the "Standard met?" box denotes standard not assessed on this occasion.

<sup>&</sup>quot;9" in the "Standard met?" box denotes standard not applicable on this occasion.

<sup>&</sup>quot;X" is used where a percentage value or numerical value is not applicable.

## **Statement of Purpose**

The intended outcome for the following standard is:

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

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

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

## **Key Findings and Evidence**

Standard met?

2

The Statement of Purpose is a well-written document that covers all the required elements of the National Minimum Standards (NMS) and is presented in a way that clearly outlines the agency's commitment to providing a service that aims to place children with families that can meet their needs. It explains all of the agency's functions and describes in detail the processes involved in adoption. In some respects the statement could be viewed as a little 'unwieldy', it is rather long and perhaps over-detailed in some areas making it difficult to judge who might be the target audience. The agency may wish to consider these issues when it next reviews the statement.

The executive of the council had not ratified the statement of purpose at the time of the inspection; this is disappointing given that the NMS and regulations had been in place for nearly a year and a half.

The children's guide is a well written document, available in several languages, that provides necessary and useful information for children who are to be, or have been, adopted. It is presented in an appropriate style and would be understandable to any child who has reasonable reading skills.

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?	NO	
Is there a children's guide to adoption?	YES	
Does the children's guide contain all of the information required by Standard 1.4?	YES	

## Securing and promoting children's welfare

The intended outcome for the following set of standards is:

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

**Standard 2 (2.1 - 2.3)** 

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

# Key Findings and EvidenceStandard met?3The Local Public Service Agreement (LPSA) outlines clear objectives for improving the

The Local Public Service Agreement (LPSA) outlines clear objectives for improving the recruitment of adopters by the agency and for reducing the numbers of children waiting for adoption, as well as indicating the targets for reducing the time that children are waiting for adoption. The targets include joint advertising with the Fostering Service, joint initiatives with the South London Consortium and the development of systems to produce early profiles of looked after children. Plans and objectives by the authority also address the targeting of carers from ethnic minorities and to develop support services as an aid to improving recruitment. The advertising and promotional material was viewed as 'eye-catching' and the logo, 'Every minute is important to a child', demonstrates a commitment to avoiding children waiting too long in the 'system'.

#### In the last 12 months:

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

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

How many sibling groups were matched in the last 12 months? How many allegations of abuse or neglect were made about adopters approved by this adoption service?

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

20	
20 17	
7 9 9	
9	
9	
9	
100	%
4	
0	
20	

## 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?

2

The agency provides a reasonably thorough and informative pack for people considering adopting a child or children. This includes its own leaflets and information sheets as well as material produced by the consortium and booklets purchased from BAAF. Whilst the Croydon material states that it welcomes applications from a wide range of people, it does not specifically state that it welcomes same sex couples, this omission could deter applicants; the consortium's information makes it explicit that some member agencies do accept applications from gay and lesbian couples. Nevertheless, this is a minor criticism and it was accepted that the information in the pack explains all about adoption, and the application, preparation and assessment processes - as well as the legal framework within which it exists. Information provided by adopters was positive and suggested that they were happy with the detail contained in the information pack, its relevance to them considering adoption and the reality of the kind of children requiring adoptive families.

The responses of the agency to enquiries, the sending-out of information packs and arrangements for initial interviews were all found to be managed speedily and efficiently.

Standard 4. (4.1 - 4.9)

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

## **Key Findings and Evidence**

Standard met?

2

The preparation and assessment processes were of a good standard overall and were undertaken by experienced and knowledgeable workers. The preparation course material was thorough and contained all relevant material to enable applicants to be fully informed about adoption, its processes and about the range of children requiring adoption. The agency had produced a comprehensive document that indicated forthcoming information days and included a timetable for, and all the material that is covered in, preparation days. Feedback from adopters said that the groups were informative, interesting and aimed at providing them with as much knowledge as possible. It was also said that the groups were inclusive, realistically encouraging and non-discriminatory.

The assessments, as demonstrated in Forms F, were noted, overall, as being thorough and undertaken in a way that evaluated applicant's abilities to meet the needs of children. Feedback from adopters indicated, in the main, that the assessment processes were undertaken sensitively, in an open and honest manner and that social workers endeavoured to consider their circumstances and abilities professionally and non-judgementally. It was also reported that applicants always felt fully informed on the progress of the assessments and what issues were to be explored in forthcoming sessions.

All required checks and references were taken up, including enhanced CRB disclosures.

There were some criticisms and observations made by adopters that included some preparation groups being less well managed than others, inaccurate or misleading information in Forms F (and poorly written ones) and long time-scales for completion of the assessment.

The agency should consider the consistency and quality of the forms F that it produces; there were errors found that should have been picked up by better quality control and some were found to be less analytical than others. Forms F that do not provide sufficient analysis of the details of people's lives, circumstances and abilities make it more difficult for panels and decision-makers to draw conclusions.

## 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?

2

The agency tries to ensure that all adopters have comprehensive information about the matching and placement process and that they are fully informed about the support services available. It was evident, through the details kept in records, that there is a committed approach to effective matching, including reducing timescales for children awaiting placement, and that in most cases this is achieved. The agency tries to encourage placing social workers to provide complete and up to date information about children prior to matching but there were some instances where it was noted that adopters were less than satisfied with the comprehensiveness of such information.

All adopters are expected to produce family information for children where a placement is expected to happen.

There was no system in place to formally request adopters to agree to notify the agency of the death of a child and whether a birth parent can be informed.

Does the local authority have written procedures for the use of the Adoption Register?

YES

Standard 6 (6.1 - 6.7)

Adoptive parents are helped and supported to provide stable and permanent homes for the children placed with them.

## **Key findings and evidence**

Standard met?

3

The support offered and provided to adopters who have a child in placement was noted as being of a good standard. There were clear systems in place, informed by policies and procedures, which demonstrated a commitment to successful placements and adoptions. The feedback from adopters on the levels of support available and given was very positive and it was clear from case records that practices in this area are pursued with a conscientious approach to effective placements.

The agency was in the midst of a re-alignment of the team structure at the time of the inspection, the plan being to split the team into two - a pre adoption and post adoption team, each managed separately. This was having some negative impact on the team's ability to focus on support work because no timescales were set and workers were uncertain as to their future viz a viz which team they may be attached to. Nevertheless, this did not appear to be having any impact on the quality of the support being provided but it needs to be a consideration of the agency's managers to ensure that it doesn't.

Number of adopter applications started in the last 12 months	18	
Number of adopters approved in the last 12 months	12	
Number of children matched with the local authority's adopters in the last 12 months	17	
Number of adopters approved but not matched	7	
Number of adopters referred to the Adoption Register	9	
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

The child-care team undertakes work with birth parents up until an Adoption Order is made and there was evidence available to demonstrate that the agency understands the lifelong implications of adoption and ensures that this is addressed as part of the support provided. Every effort is made to develop working relationships with birth parents to enable realistic plans to be made and put into action. This would include eliciting the views of birth parents and recording this information on children's files; this would include information about contact arrangements. Although efforts are made, in some circumstances, to give birth parents the opportunity to read and comment upon anything that is written about them, there is no formal system in place to ensure that this is done and recorded on file; the agency acknowledges this and plans to develop a protocol.

There is no policy or procedure in place to provide birth parents with a support worker who is independent of the child's social worker.

## Standard 8 (8,1 - 8.2)

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

## **Key Findings and Evidence**

Standard met?

3

The agency makes every effort to encourage children's social workers to produce, with the assistance of birth relatives, a life-story book that includes key information about children's histories and heritage. Although this is achieved to some extent in most cases there was evidence to show that such information is not always produced in a timely way. It is accepted that the adoption service does not have any control over this matter but the children's services department should ensure that there is a consistent approach to developing children's life-story work to enable them and their adopters to understand their backgrounds. The contact arrangements, particularly through the letterbox system, were of a high standard, and well organised and managed.

## **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

There were no formal systems or strategies in place to demonstrate the agency's approach to working with and supporting birth parents and families although some work is undertaken through the post adoption support networks and an intermediary service. Nevertheless, the agency is aware of this developmental need and is actively addressing it.

## **Adoption Panels and Agency decisions**

The intended outcomes for the following set of standards are:

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

Standard 10 (10.1 – 10.3)

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

## **Key Findings and Evidence**

Standard met?

3

The agency had recently produced an Information Folder about the adoption panel. It provides a range of information for different readerships, including social workers, applicants and panel members.

This document, which is comprehensive, contains details of the policies, procedures and practice guidance for adoption panels; it also includes information on the members of the panel, the business it undertakes, the legal framework and a copy of the latest Annual Report. This was viewed as a very useful document that would enable a wide readership to be able to understand the underpinning aspects of adoption panels as well as their importance in fulfilling legal and practice obligations in respect of meeting children's needs. All applicants are encouraged to attend the adoption panel, and although there were some comments made about the daunting aspect of attending (with some suggestions that more preparation would prove helpful), the general consensus was that they were pleased with the principle of attending a panel that was, in the main, a positive experience.

## Standard 11 (11.1 - 11.4)

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

## **Key Findings and Evidence**

Standard met?

3

The constitution of the adoption panel met all legal requirements. Its members were a very experienced group of professional and independent people whose backgrounds and antecedents - which are detailed in brief CVs in the Information Folder described in the previous standard – were very relevant to their responsibilities. The panel minutes showed that there is always a quorum when the panel sits.

The panel has appropriate and regular training opportunities, including joint sessions with the adoption workers, and new members undergo induction training, which includes observing at least one panel before joining. All required checks are undertaken, including CRB disclosures; the records maintained in respect of members were good.

The panel is kept informed of current thinking in adoption matters, legal and practice issues, and general information relevant to its functions through training, business meetings and the substantial expertise of the chair and advisers; there is also a member of the panel who is an inter-country adopter.

Is the panel a joint panel with other local authorities?

NO

Does the adoption panel membership meet all of the statutory requirements?

YES

**Standard 12 (12.1 – 12.3)** 

Adoption panels are efficiently organised and conducted and are convened regularly to avoid delays in the consideration of prospective adopters and matching children and adopters.

## **Key Findings and Evidence**

Standard met?

3

The functioning of the panel was of a high standard. The chairperson ensured that business was conducted efficiently with a clear focus being kept on ensuring that children's needs were at the centre of deliberations. The discussions and deliberations of the panel were thorough and it was evident that all members, particularly the chairperson, were well informed and had digested the contents of all of the papers and the legal advice that was offered to the panel was impressive. The information that was provided for panel members was distributed in plenty of time and the general administration of information was efficient and well managed. Panel minutes were, in the main, of a satisfactory standard although some inconsistencies were noted that could be overcome by the panel secretaries having some formal training in minute taking. The panel meets regularly and is able to undertake all of its business and responsibilities effectively. The location is, generally speaking, convenient and appropriate although the venue is rather formal and could be intimidating; it was also evident that there are sometimes occasions when lack of waiting space means that applicants can 'stack up', which can compromise the need for privacy.

Standard 13 (13.1 – 13.3)

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

## **Key Findings and Evidence**

Standard met?

3

The decision-maker receives all panel papers at the same time as they are distributed to panel members, this enables her to be in receipt of all relevant information and be fully informed in advance of the deliberations and recommendations of the panel. Decisions are made promptly and in line with the National Adoption Standards and applicants are informed promptly.

## Fitness to provide or manage an adoption agency

The intended outcomes for the following set of standards are:

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

Standard 14 (14.1 – 14.3 and 14.5 – 14.6)

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

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

## **Key Findings and Evidence**

Standard met?

3

The people involved in the management of the agency are very experienced and highly qualified professionals with extensive knowledge and backgrounds in children's services and adoption work. It was clear that the organisational and operational management of the service was well structured and focused on a forward-looking, developmental model of service improvement. The manager of the agency had a comprehensive job description that outlined his duties and responsibilities clearly.

## Does the manager have Management NVQ4 or equivalent?

YES

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?

1

It was discovered during the course of, and as a result of the investigations of, the inspection that the manager of the agency had not had an enhanced CRB disclosure. This was, it was discovered, as a result of an administrative oversight and a flawed system of designating CRB counter-signatories; this had created an oversight that had remained, hitherto, undetected. Whilst it is acknowledged that this was a genuine oversight, and not due to complacency, it is important that the agency/department ensures that appropriate procedures are put in place to avoid this happening in the future. The agency and personnel section took immediate steps to correct this shortfall.

## 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

This was a well-managed agency. Although the statement of purpose was only in draft, unapproved form it was evident that the service is run in accordance with the principles and standards that it has set. There were clear lines of communication and accountability, satisfactory arrangements for the absence of the manager and sound working relationships between staff and managers.

It was clear that the staff team was fully informed of their responsibilities and duties, and it was evident that the service operated in a non-discriminatory way with all workers being clear about issues in respect of culture, ethnicity and minorities. The agency only employs workers that have experience in children's services and adoption.

There are procedures in place for referring to the local consortium and the National Register.

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

8

Number of the above complaints which were substantiated

1

Standard 17 (17.1 – 17.3)

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

## **Key Findings and Evidence**

Standard met?

3

The Children's Service Division, which includes adoption services, has a Quality Assurance and Audit Strategy. This document informs manager's of their responsibilities and practices in relation to maintaining an overview of the work for which they are accountable. The agency has its own systems for monitoring its performance, including mechanisms for 'tracking' the progress of children within the system and ensuring satisfactory practice in respect of the recruitment and approval of adopters. A team manager has developed a case load monitoring system that is maintained on a spreadsheet.

The agency managers have good relationships with elected members of the council and it was evident that some members take great interest in the work of the agency; the elected member who sits on the adoption panel was clearly passionate about the importance of adoption for children.

Regular reports on the work of the agency are provided for the executive of the council.

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

Monthly?
Quarterly?
YES
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

The agency ensures that any specialist advice is sought and accessed where it is necessary in the best interests of children; an educational psychologist sits on the adoption panel. There is an experienced legal Adviser that attends most panels – her contribution was noted as being of a very knowledgeable standard – and who provides any consultation that is required by the service. The medical adviser who sits on the panel has a wealth of experience and provides an invaluable service to the panel and the agency in general.

## **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 workers employed by the agency are a very experienced and qualified group who demonstrated a high level of expertise and knowledge in respect of children's services in general and adoption in particular. They were able to show that they understood and were familiar with the legal processes associated with adoption, current practice and thinking, and Government guidance. Birth records counselling is undertaken by experienced and trained staff. There is a higher than average Post-Qualifying Award achievement.

The agency has, in the main, good recruitment and selection procedures with all candidates being subject to a thorough process; there was no system in place, however, to verify the authenticity of written references. All workers are subject to enhanced CRB disclosures, which are renewed every three years.

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

YES

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

61

%

Standard 20 (20.1 – 20.12)

Staff are organised and managed in a way which delivers an efficient and effective service.

## **Key Findings and Evidence**

Standard met?

3

The agency was mid-way through a realignment of its service into two teams - pre & post adoption. Only one team leader had been appointed, however, and the workers were not aware of which team to which they would be allocated. This team leader, in the interim, was undertaking most of the responsibilities of leading the whole (current) team, a task, it is felt, that is too wide-ranging and onerous for one individual. The agency is encouraged to complete the realignment as quickly as possible to ensure that the service develops as it is planned, and to avoid confusion and disillusionment within the workforce.

Having said all of the above, this was found to be a well-managed agency. The structures and systems that were in place ensure that there is appropriate emphasis placed on recruiting sufficient and able adopters to meet the needs of children waiting to be adopted. The workers were clear about their roles and responsibilities in the (as at the time of the inspection) team structure and were happy with the levels of work and means of allocating cases, and with the workload management systems. Supervision occurs regularly and it was noted that all workers felt appropriately managed and supported.

The administrative support for social workers was of a satisfactory standard but the IT infrastructure was somewhat limited and would benefit from expansion and improvement. Inquiries from the public about adoption matters were handled efficiently and promptly and comments received said that the agency had a courteous and welcoming manner.

All staff had access to the agency's policies and procedures but had not had sight of the statement of purpose which, at the time of the inspection, had not been approved and/or circulated; the staff said that they had not been involved in the development or drafting of the statement.

## **Standard 21 (21.1 – 21.4)**

There is an adequate number of sufficiently experienced and qualified staff to meet the needs of the adoption agency and they are appropriately supported and assisted in providing a service.

## **Key Findings and Evidence**

Standard met?

3

There were sufficient workers employed to undertake the range of duties and responsibilities that the agency carries out. It was found to be a well balanced team and this should improve further when the realignment of the service is completed.

The practices in relation to staff care were noted as being realistic and encouraged workers to feel committed to the team and the agency; there is a low staff turnover and many of the social workers have been in post for many years.

Total number of social work staff of the adoption service

13

Number of staff who have left the adoption service in the past 12 months

1

Number of social work posts vacant In the adoption service.

0

Standard 22 (22.1 and 22.3)

The adoption agency is a fair and competent employer, with sound employment practices and good support for its staff.

## **Key Findings and Evidence**

Standard met?

3

The employment practices of the authority were noted as fair and enabled workers to have a degree of flexibility to encourage an appropriate work-life balance; this was said to be important by the staff. There was suitable grievance, disciplinary and whistle-blowing policies in place that workers were aware of (either by being issued with personal copies or having immediate access to in the workplace/intranet). Workers have access to counselling and staff support services should they wish to avail themselves of such a service.

Standard 23 (23.1 – 23.6)

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

## **Key Findings and Evidence**

Standard met?

3

Workers had undertaken a range of training and development courses and seminars in the last year including practice matters and updates on legal issues in relation to children's issues in general and adoption matters in particular. In addition to Post Qualifying training, workers have pursued courses on the Adoption & Children Act, Dfes Workshops on Adoptions & Assessment, Legal Updates and Adoption Panels to name a small selection. It was clear that the agency places a high level of importance on the training and development of its workers and the evidence demonstrated that a rolling programme of training is a priority for both managers and the team.

## Records

## The intended outcome for the following set of standards is:

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

Standard 25 (25.1 - 25.5)

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

## **Key Findings and Evidence**

Standard met?

2

The case records maintained by the agency were of an overall good standard; they were well ordered, contained most required information and were accessible. One matter worth particular mention was the agency's approach to confidentiality: there was a system in place to ensure that all readers of files – including inspectors – read and signed a confidentiality agreement. The authority produced a Recording Policy & Guidance for the inspection but it was aimed at children's files and did not specifically address the particular needs of the adoption service; nevertheless, there were some matters contained in this document that are relevant but were not routinely followed. Although the records were noted as being very thorough, well written and included all necessary checks, references and CRB disclosures, there was no system in place to routinely audit/monitor the contents and quality. More importantly, there were no records of supervisor's decisions kept on case files. These shortfalls are policy items in the authorities document and the agency should endeavour to comply with them to be able to meet the NMS.

Electronically stored records were accessible through a password protected system and were backed-up continuously. Manually stored records were kept in secure cabinets in the main office; they were not kept in a lockable, separate room. These records were maintained in very poor quality paper slings, many of which were torn or broken, leading to files falling through or becoming detached from their proper place; this could lead to items being lost or torn and should be attended to. The archived records were kept in secure storage, which had protection from fire and flood.

## 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?

3

There are well-established practices in place to ensure that all relevant information is shared with other agencies and authorities in a timely and efficient way. The draft Adoption Procedures indicate clearly the processes involved and the protection and confidentiality issues that have to be followed. As indicated elsewhere in this report, the agency is strong on confidentiality and all necessary precautions are pursued.

## 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

As stated in standard 25 (above) the authority has a case recording policy and guidance but it is not tailored to the particular needs of the adoption service and there are no systems in place to evidence the monitoring and auditing of files/records. Although the storage, security and confidentiality systems are robust, the means of storage of files in use are flimsy and liable to damage. Complaints records are kept and were generally well maintained but there was evidence of poor recording/omissions in at least one instance; more rigour needs to be employed when independent workers are used to investigate matters on behalf of the agency.

## 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?

1

Staff files were maintained in the personnel section of the authority; they were found to be in general good order and well structured but they did not contain photographic evidence and there was no system in place to verify the authenticity of written references.

The files maintained in respect of adoption panel members were well ordered and contained all relevant information.

## **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 agency is located in the main council offices in the centre of Croydon, they are accessible during normal office hours and have disabled access. The offices used by the adoption service are reasonably comfortable and are fit for the purpose of running an agency. The administrative systems are well managed but the efficiency of the service would be improved by better IT systems. Records are kept in secure cabinets, but these are located in the main office, not in a lockable room. The general security of the whole premises was of a satisfactory standard. The agency could not locate, at the time of the inspection, a disaster recovery plan that included provision for premises and safeguarding of records; assurances were given, however, after the fieldwork was completed, that the Council has such a plan.

PART C	LAY ASSESSOR'S SUMMARY			
	(where applicable)			
Lay Assessor	Signature			
Date				

PART D PROVIDER 3 RESPONSE	PART	D	PROVIDER'S	<b>RESPONSE</b>
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# 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 18<sup>th</sup> 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:

Comments were received from the provider  YES	dments to the report were necessary	ES
<u> </u>	nents were received from the provider	ES
Provider comments/factual amendments were incorporated into the final inspection report	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	ES
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	ncorporated into the final inspection report. The inspector believes	ES

#### 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 27<sup>th</sup> October 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=""></enter>	

## **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	confirm that the conte of the facts relating to	of London Borough of Croydon ontents of this report are a fair and accurate representation g to the inspection conducted on the above date(s) and that attutory requirements made and will seek to comply with		
	Print Name			
	Signature			
	Designation			
	Date			
Or				
D.3.2	unable to confirm that	of London Borough of Croydon am m that the contents of this report are a fair and accurate of the facts relating to the inspection conducted on the above ollowing reasons:		
	Print Name			
	i iliit ivallic	<del></del>		
	Signature			

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.

## **Commission for Social Care Inspection**

33 Greycoat Street London SW1P 2QF

Telephone: 020 7979 2000

Fax: 020 7979 2111

National Enquiry Line: 0845 015 0120

www.csci.org.uk

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