



*Making Social Care  
Better for People*

# inspection report

Local Authority Adoption Services

## **Brent Council Adoption Service**

Triangle House, Children`s Services,

Placements

328-330 High Road

Wembley

Middlesex

HA9 6AZ

10th January 2005

## **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**

Brent Council Adoption Service

**Headquarters Address**

Triangle House, Children`s Services, Placements, 328-330 High Road, Wembley, Middlesex, HA9 6AZ

**Adoption Service Manager**

Ms Jan Fishwick

**Tel No:**

0208 937 4558

**Address**

Triangle House, Children`s Services, Placements, 328-330 High Road, Wembley, Middlesex, HA9 6AZ

**Fax No:**

020 8937 4036

**Email Address**

**Certificate number of this adoption service**

**Date of last inspection**

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

<b>Date of Inspection Visit</b>		10th January 2005	<b>ID Code</b>
<b>Time of Inspection Visit</b>		09:00 am	
<b>Name of Inspector</b>	<b>1</b>	Sean White	127556
<b>Name of Inspector</b>	<b>2</b>	Jayne Ivory	
<b>Name of Inspector</b>	<b>3</b>		
<b>Name of Inspector</b>	<b>4</b>		
<b>Name of Lay Assessor (if applicable)</b> 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.			
<b>Name of Specialist (e.g. Interpreter/Signer) (if applicable)</b>			
<b>Name of Establishment Representative at the time of inspection</b>			

## CONTENTS

**Introduction to Report and Inspection**  
**Inspection visits**  
**Description of the Adoption Service**

**Part A:**

**Inspector's Summary and Evaluation**  
**Reports and Notifications to the Local Authority and Secretary of State**  
**Implementation of Statutory Requirements from last Inspection**  
**Statutory Requirements from this Inspection**  
**Good Practice Recommendations from this Inspection**

**Part B:**

**Inspection Methods & Findings**  
**National Minimum Standards For Local Authority Adoption Services**

**Statement of purpose**

**Securing and promoting children's welfare**

**Prospective and approved adopters**

**Birth parents and Birth families**

**Adoption panels and Agency decisions**

**Fitness to provide or manage an adoption agency**

**Provision and management of the adoption agency**

**Employment and management of staff**

**Records**

**Fitness of premises**

**Part C: Lay Assessor's Summary (where applicable)**

**Part D: Provider's Response**

**D.1. Provider's comments**

**D.2. Action Plan**

**D.3. Provider's agreement**

## 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 Brent Council Adoption Service. The inspection findings relate to the National Minimum Standards for Local Authority Adoption Services published by the Secretary of State under sections 49 of the Care Standards Act 2000.

The Adoption Agencies Regulations 1983 and the Local Authority Adoption Service (England) Regulations 2003 are secondary legislation, with which a service provider must comply. Service providers are expected to comply fully with the National Minimum Standards. The National Minimum standards will form the basis for judgements by the 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.

The adoption agency of Brent Council is constituted by legislation and fulfils its legal responsibilities and duties within the requirements of statutes. It has a manager for the recruitment of adopters and placing of children and a separate manager for adoption support services. The agency is located centrally in Wembley, which is accessible by car and public transport. The agency recruits families who wish to either adopt children domestically or from overseas although applicants for inter-country adoption are rare. It has a current emphasis on recruiting adopters for children from diverse ethnic backgrounds, older children, sibling groups and children with particular needs.

The agency also undertakes adoption support responsibilities and birth records counselling.

## 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 summary is presented under the main headings of the National Minimum Standards.

#### **Statement of purpose.**

The one standard in this section was almost met.

There was a full and comprehensive statement of purpose in place that provided a detailed overview of the agency's operations, aims and objectives. It was well written, contained all required information and demonstrated a committed approach to adoption. The agency has published a children's guide to adoption (Your 12 step guide), written by the team, which gives clear information for children; there were, however, some omissions that need to be addressed.

#### **Securing and promoting children's welfare.**

The one standard in this section was met.

The agency's Permanency and Adoption Policy makes explicit a commitment to meeting the ethnic, religious and cultural needs of children; it also states a commitment to avoiding delays. The approach to recruiting adopters who are able to meet the diverse needs of children in the borough is through well-chosen media that target the appropriate population groups. Although this was found to be realistic and good practice it was felt that a more strategic approach to 'marketing' may bring better results.

There are mechanisms in place to monitor the progress of children awaiting adoption that aim to minimise undue delays.

#### **Prospective and approved adopters.**

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

The agency provides all people who have made an enquiry about adoption with an information pack. This pack is very comprehensive, welcomes people from all walks of life, makes clear that the agency does not discriminate on any grounds and gives clear information about the kind of people who are required to offer adoptive homes to children.



The agency uses the BAAF publication 'Preparing to Adopt' as its base tool for running preparation groups, which are held about three times a year and are run over four days. Adopters reported that the groups were well managed, informative and gave them a good understanding of adoption. Applicants are sometimes invited to attend groups run by member agencies of the consortium but there is no harmonisation of content and process across the consortium, which may have an impact on consistency; the agency should explore means of gaining greater harmonisation.

The approach to assessment was found to be thorough; Forms F were noted as being well produced, and contained a realistic balance of information and analysis. The systems are sufficiently robust to ensure that only those people who can offer safe homes to children are approved but there were circumstances noted, however, where it was felt that better use of the panel should have been made to address circumstances where there were difficulties.

Approved adopters are provided with an 'Approved Adopters Pack' that contains a range of relevant and necessary information that prepares them for the processes of matching and introductions.

The arrangements made for introductions of children and adopters were found to be well coordinated in the main and required information about children was generally made available in a timely way. It was reported, however, that staff shortages and other factors in children's teams sometimes delayed the production of Forms E.

The arrangements for supporting adoption placements were of a very good standard. Assessing social workers remain the allocated supporter of families beyond approval, throughout introductions and placement, and thereafter for one year after the adoption order has been made. In addition, the adoption support service of the agency works alongside other agency workers to provide a full, coherent and holistic package of support.

#### **Birth Parents and Birth Families.**

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

Agency social workers, through their working relationships with the children's social workers, offer significant levels of support to birth parents and families. Working arrangements are put in place as soon as an agreed plan for adoption has been made and, although there is a cooperative approach to supporting birth parents, the adoption workers act as independent supporters of birth families. This occurs, however, by default rather than design and is an aspect of historic practice that would benefit from a more formal arrangement and structure. Every effort is made to gather all significant and important information from birth parents and families and, thereafter, to use this as a central aspect of a life-story book but there was mixed evidence in respect of life-story books being produced in a timely and appropriate way.

The support for birth families, including siblings and grandparents, is well established and a clear commitment was noted in respect of the agency's approach to this important aspect of its responsibilities.

#### **Adoption Panels and Agency decisions.**

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

The agency provides all Adoption Panel members with a Panel Members Pack. Whilst this provides important information about their duties and responsibilities, it does not include all the information required by the standard. There is no policy and procedure in place to inform the panel of its functions and how they should be implemented. This shortfall demonstrated some confusion in the agency, leaving it subject to being unable to address some of its responsibilities.

Applicants to adopt are routinely invited and encouraged to attend, although this is a

reasonably new practice - since January 2004. Approved adopters are also invited to attend matching panels.

The panel is constituted to the required standards and regulations and, following a period in the recent past when problems were experienced, always sits as a quorum.

The panel was seen to operate to a high standard; the independent chairperson provided effective leadership and skill in enabling it to address the business brought to it. As in all other aspects of the agency's work, diversity and inclusion were fundamental aspects of the underpinning philosophy and practice of the panel's operation. The panel has access to training opportunities and it was clear that they were well informed; there are no arrangements in place, however, for the panel to have an annual training day with workers from the agency and induction training for new members was somewhat limited in content and scope.

The decision maker does not receive the panel papers at the same time as members and does not review all the material that may be presented to panel; decisions, however, were made in a timely way.

The administrative arrangements for the adoption panel appear to work well. The team administrator prepares and collates the business to be presented to the panel and prepares the agenda. The minutes of the panel were accurate records of the business it addressed but the systems, which involve two different administrative sections, were somewhat cumbersome and would benefit from some 'streamlining'.

#### **Fitness to provide or manage an adoption agency.**

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

The manager is an experienced social worker with a relevant background in children's work and family placements; she is qualified and has recently achieved a management qualification. All workers, including managers, undergo an enhanced CRB check the results of which are known before anyone starts work. There were no systems in place to verify, by telephone, the provenance of written references.

#### **Provision & management of the adoption agency.**

The three standards in this section were almost met.

The management of the agency, particularly in respect of operations and practice, was of a good standard. The agency is not performing at its best, however, because of a limited approach to strategic planning. This was due, in some part, to the absence of a senior worker, but it was also felt to be under-managed in general because of a lack of senior personnel in the team. The agency is not as well served by policies and procedures: the manager was keen to develop this aspect of operational structure but has been frustrated by the demands on her time.

Although there are mechanisms for providing the executive of the council with information on the activities of the agency there was no clear policy in place on how this should be achieved.

The agency's legal adviser is a regular attendee at the adoption panel and the medical adviser is a member. The advice provided to the panel was of a good standard and enabled complex issues to be addressed by members. There were difficulties found, however, in respect of the very limited amount of time that the medical adviser has available to offer assistance to the adoption team.

#### **Employment and management of staff.**

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

The authority has a comprehensive recruitment and selection procedure and guidance in

place but there is no written requirement for references to be verified by telephone. All social workers are suitably qualified and experienced in work with children in general and most have extensive experience of adoption and family placement. The workers demonstrated knowledge and understanding of the processes involved in adoption work, the underpinning legislation and practice skills. The management of day-to-day operations and practice was of a good standard. There were realistic organisational practices in place, workload monitoring was effective and the systems for the allocation of caseloads were well established.

Administration support is rather limited and would benefit from strengthening.

The agency is staffed to a realistic level to meet the demands of its responsibilities; there were no vacancies at the time of the inspection. All workers are suitably qualified and either have the relevant experience or, if recently recruited, undergo an induction programme.

The overall impression gained from workers was that they felt the organisation to be generally fair in its employment practices and that it was a good employer that supported its staff. The only detraction from this view was a perception (100% of staff concurred) with the rather bureaucratic systems for workers booking transport for essential visits and the time-consuming approach to expenses claims.

The agency has an active approach to training. There is an annual training plan in place that feeds into the department's corporate plan; training needs are identified through an annual appraisal system and monitored through the supervision process. The training undertaken by the team in recent times was relevant and added an appropriate dimension to the underpinning knowledge of the team.

### **Records.**

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

The case records for prospective/approved adopters had all the relevant information in place, contained some very good case recording and included contemporaneous records of all assessment visits. The files, however, were not well managed, were too bulky to find detailed information easily and were not managed by a cogent record keeping policy.

Children's files were similarly fulsome in the amount of information contained within them. There appeared to be some confusion, however, regarding the status of children's files; it was not known if they were 'adoption files', as required by the 1983 regulations, or not.

The agency had realistic and satisfactory systems in place to provide relevant and necessary information to other agencies, both within and external to the consortium. Confidentiality issues are well managed.

There was no discrete, agency policy and procedure on case file management or content; nevertheless, the general administration of the office and its work was well coordinated and organised.

In general the staff files were well kept and contained most of the required information, there were, however, some omissions. The records maintained in respect of adoption panel members require developing further to include all required information.

### **Fitness of premises.**

The one standard in this section was not met.

The premises used by the agency are conveniently located and accessible by public transport; car parking is very limited in the area. They are open for business during normal office hours.

The offices are reasonably comfortable and workers have their own desks and access to IT equipment; the overall administration and IT structures were satisfactory. The premises, however, have limited space for storage. Files are not all kept securely and in one instance a

large number of boxes of active files were being stored in a meeting room with only a draped curtain over them-adjacent to a ground floor window. Immediate remedial action to secure these files was discussed at the end of the inspection.

## 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**

<b>STATUTORY REQUIREMENTS</b>				
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 Sch 2. (2003 regs)	LA1	The children's guide must contain all required information.	01/04/05
2	Reg. 11 (2003 regs)	LA11	The agency must ensure there is evidence of CRB checks on all panel members before they start their duties.	01/04/05
3	Reg 11 (2003)	LA19	All written references must be verified by telephone.	01/04/05
4	Reg 7(2) (1983 regs)	LA25	A case record for all children must be set up as soon after a decision is reached that adoption is the plan for the child. The status of this file must be recognised and understood by all managers and workers.	01/04/05
5	Reg 11 (2003)	LA28	All required information must be maintained on personnel files for staff and panel members.	01/04/05
6	Reg 16 (2003) & Reg 14 (1983)	LA29	The premises must have facility for ensuring that confidential records are stored securely at all times and are protected from fire and water damage.	01/04/05

## 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 agency should make more use of the views of the panel and decision maker when considering terminating an assessment before completion.
2	LA5	The agency should endeavour to ensure that Forms E are prepared and produced in a timely way on every occasion they are required to avoid delays in matching.
3	LA7	The agency should endeavour to formalise the system that gives birth parents access to support independent of the child's social worker.
4	LA8	The agency should ensure that life-story books are produced in a timely way.
5	LA10	The agency should develop a coherent policy and procedure for the operation of the adoption panel.
6	LA11	The agency should ensure that an annual training event, to include workers and panel members, is scheduled.
7	LA13	The decision maker should receive all panel papers in time for her to be fully apprised of all the information available upon which decisions are made.
8	LA16	The agency should consider the appointment of at least one further senior worker to enable a more coherent management structure to be realised.
9	LA17	A procedure on providing the executive of the council with twice yearly information on the agency's work should be set up and implemented.
10	LA18	The agency should negotiate more availability for access to the medical adviser to support and advise the team.
11	LA20	The agency should consider expanding its administrative personnel.
12	LA22	The agency should assess if the authority's procedures for arranging travel etc. impact too much on the available time of the workers and the knock-on effect on agency efficiency.
13	LA27	The agency should develop a coherent file management and audit system.



- 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	NO
• Interview with birth family members	NO
• Contact with supervising social workers	YES
• Examination of files	YES
Individual interview with manager	YES
Information from provider	YES
Individual interviews with key staff	YES
Group discussion with staff	YES
Interview with panel chair	YES
Observation of adoption panel	YES
Inspection of policy/practice documents	YES
Inspection of records (personnel, adopter, child, complaints, allegations)	YES
Date of Inspection	10/01/05
Time of Inspection	09.00
Duration Of Inspection (hrs)	50
Number of Inspector days	6
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)	6

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

There was a full and comprehensive statement of purpose in place that provided a detailed overview of the agency's operations, aims and objectives. It was well written, contained all required information and demonstrated a committed approach to adoption in a way that showed an understanding of all the issues involved in this specialised area of children's services. It is an appropriately constructed document that itemises the aims and objectives of the services for children, for adopters and for birth parents – plus adoption support. The statement offers a clear outline of the service's work and functions and is a useful tool for the staff as well as being an informative document for anyone interested in Brent's adoption service. There was some confusion amongst some workers in the authority about the location and availability of the statement; the manager should endeavour to ensure that all relevant people have easy access to it.

The agency has published a children's guide to adoption (Your 12 step guide), written by the team (and assisted by children), which gives clear information for children who are at a developmental stage to either read it or have it read and explained to them; this guide also contains an additional insert that has questions and answers. In addition there is a guide for children where non-verbal communication is necessary. Translations into other languages can be arranged. The children's guide, however, did not contain all the information required by NMS and regulations, including how to complain and access to an independent advocate; it should, therefore be re-drafted to include any omissions.

**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?**

NO

## 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 agency's Permanency and Adoption Policy makes specific reference to the NMS in respect of securing the most appropriate match between children and adopters. It makes explicit a commitment to meeting the ethnic, religious and cultural needs of children; it also states a commitment to avoiding delays. A Looked After Children Permanency Procedure and Twin Track Planning Procedure, that give step-by-step guidance on the planning process and practice, supplement this.

The approach to recruiting adopters who are able to meet the diverse needs of children in the borough is through well-chosen media that target the appropriate population groups. Although this was found to be realistic and good practice it was felt that a more strategic approach to 'marketing' may bring better results than the current reactive/responsive model. It was evident that the agency takes into account the views and wishes of children (wherever their level of understanding permits) when planning for adoption; the adoption panel demonstrated a clear commitment to this principle during the inspection.

There are mechanisms in place to monitor the progress of children awaiting adoption that aim to minimise undue delays, including a six-weekly Permanency Planning Meeting and Case Tracking - although the systems are somewhat disparate. There would be benefits from a more coordinated system of monitoring children's progress, or lack of.

#### In the last 12 months:

How many children were identified as needing adoptive families?

21

How many children were matched with adopters?

6

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

6

How many children were placed with other services' adopters?

3

How many children were referred to the Adoption Register?

4

In the last 12 months, how many children were matched with families which reflected their ethnic origin, cultural background, religion and language?

3

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

30

%

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

0

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

1

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

9

## 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.

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>The agency provides all people who have made an enquiry about adoption with an information pack. This pack is very comprehensive, welcomes people from all walks of life, makes clear that the agency does not discriminate on any grounds and gives clear information about the kind of people who are required to offer adoptive homes to children. It includes a 'frequently asked questions' leaflet, information about the kind of children likely to require adoption and an explanation of the assessment and approval process (although the main booklet states 'If the panel approves you...' which is a misleading, and incorrect, statement).</p> <p>The agency makes clear who is eligible to become an adopter and the pack states that the priority for adoption are children who live in the borough; it also makes clear that the priorities are to place children from African/African Caribbean and dual/multi ethnic backgrounds. Additional information provided for the inspection by the agency demonstrated an active approach to valuing diversity and promoting anti-discriminatory practice and attitudes, which informs of the commitment to meeting ethnic, religious and cultural needs.</p> <p>The process for responding to enquiries was timely; information packs were sent out to interested (and appropriate) people quickly and initial interviews organised as soon as possible. Prioritisation of prospective applicants begins at the point of enquiry with agency social workers operating a 'gate-keeping' system by skilfully encouraging potential applicants and diverting inappropriate referrals.</p>	<p>3</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?****3**

The agency uses the BAAF publication 'Preparing to Adopt' as its base tool for running preparation groups, which are held about three times a year and are run over four days. Adopters reported that the groups were well managed, informative and gave them a good understanding of adoption, its processes and what to expect in the assessment. In order to ensure that prospective adopters, particularly those who have been prioritised have the opportunity to attend a preparation course when Brent does not have one imminent there are arrangements with other consortium member agencies for them to attend an alternative. It was reported, however, that each consortium member agency runs groups independently and differently – some, for instance, are only three days. In order for Brent to feel confident that their prospective adopters have had as full a preparation as it expects it should endeavour to negotiate with member agencies a system of harmonisation of preparation to ensure consistency. Those attending preparation groups are expected to complete an evaluation form; information drawn from these informs the agency's future planning. As already indicated in this report, this authority has a clear commitment to diversity and inclusion that is firmly embedded in all of its policies, procedures and practices; the recruitment and preparation of prospective adopters is undertaken within this.

The approach to assessment was found to be thorough; Forms F were noted as being well produced, and contained a realistic balance of information/biography/analysis for the panel to reach a judgement upon which they could make a recommendation. Although the agency makes every effort to give applicants the opportunity to demonstrate their ability, competence and appropriateness – sometimes in circumstances that may require more effort than is usually the case, the systems are sufficiently robust to ensure that only those people who can offer safe homes to children are approved. There were circumstances noted, however, where it was felt that better use of the panel should have been made to address circumstances where there were difficulties. It is not normal practice in the agency, for instance, to refer potential 'counselling out' to the panel for advice or recommendation; the agency should review this.

Reports from adopters were, in the main, complementary about the skills, sensitivity and knowledge of the social workers and the way they undertook their assessments.

All required checks were undertaken.

**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

Approved adopters are provided with an 'Approved Adopters Pack' that contains a range of relevant and necessary information that prepares them for the processes of matching and introductions.

The arrangements made for introductions of children and adopters were found to be well coordinated in the main and required information about children was generally made available in a timely way. It was reported, however, that staff shortages and other factors in children's teams sometimes delayed the production of Forms E; this had a delaying influence on effecting matches in some cases. The authority should endeavour to ensure that there are systems in place to minimise such incidents. Similarly, it was reported that recent changes to the way that children's medicals were being arranged were also having an impact on the efficiency of the matching and placement process.

The agency did not provide evidence on case files of adopters having been asked to inform the agency in the event of a child's death whilst in placement; this should be incorporated, in writing, on decisions made when placing a child.

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

NO



**Standard 6 (6.1 – 6.7)**  
**Adoptive parents are helped and supported to provide stable and permanent homes for the children placed with them.**

<b>Key findings and evidence</b>	<b>Standard met?</b>	<b>4</b>
----------------------------------	----------------------	----------

This area was a particularly strong aspect of the agency’s work. The arrangements for supporting adoption placements were of a very good standard. Assessing social workers remain the allocated supporter of families beyond approval, throughout introductions and placement, and thereafter for one year after the adoption order has been made. In addition, the adoption support service of the agency works alongside other agency workers to provide a full, coherent and holistic package of support that families can call upon at any time. Close working relationships with children’s social workers adds a further dimension of effective support for placements.

There was clear evidence, both in written documentation on case files and in discussions with key people that the agency has a positive commitment to ensuring that adopters fully understand their responsibilities in promoting children’s sense of identity, their understanding of their heritage and countering racism and discrimination.

<b>Number of adopter applications started in the last 12 months</b>	11	
<b>Number of adopters approved in the last 12 months</b>	15	
<b>Number of children matched with the local authority’s adopters in the last 12 months</b>	6	
<b>Number of adopters approved but not matched</b>	9	
<b>Number of adopters referred to the Adoption Register</b>	4	
<b>How many placements disrupted, between placement and adoption, in the last 12 months?</b>	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.

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
<p>Agency social workers, through their working relationships with the children’s social workers, offer significant levels of support to birth parents and families. Working arrangements are put in place as soon as an agreed plan for adoption has been made and, although there is a cooperative approach to supporting birth parents, the adoption workers act as independent supporters of birth families. This occurs, however, by default rather than design and is an aspect of historic practice that would benefit from a more formal arrangement and structure. Family group meetings are held, to which birth parents are encouraged to attend to enable them to play a part in the planning for their children.</p> <p>Case records showed clear evidence that birth parents had been consulted about plans for their child and arrangements for contact were similarly explored and recorded. There was no evidence found, however, of birth parents being given the opportunity to read and comment on what was written about them.</p>		

### Standard 8 (8.1 – 8.2)

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

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
<p>Every effort is made to gather all significant and important information from birth parents and families and, thereafter, to use this as a central aspect of a life-story book. There was mixed evidence in respect of life-story books being produced in a timely and appropriate way; whilst some reports said that full and comprehensive books had been put together and provided at an appropriate time, other evidence pointed to delays and confusion about responsibilities for undertaking the task.</p>		

**Standard 9 (9.1)**

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

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

3

The support for birth families, including siblings and grandparents, is well established and a clear commitment was noted in respect of the agency's approach to this important aspect of its responsibilities. The agency is a member of the Post Adoption Centre and this, as well as newsletters, offers of counselling through an independent social worker provides a range of services that the families can use as they wish.

The contact arrangements are well established and carefully managed by the Post Adoption Team workers. Agency social workers are involved in supervised face-to-face contact.

A range of advice leaflets and publications are maintained and distributed by the Post Adoption Service but improvements would be made if they were more widely publicised.

## 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.

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
<p>The agency provides all Adoption Panel members with a Panel Members Pack. Whilst this provides important information about their duties and responsibilities, it does not include all the information required by the standard. There is no policy and procedure in place to inform the panel of its functions and how they should be implemented. This shortfall demonstrated some confusion in the agency, leaving it subject to being unable to address some of its responsibilities. For instance, there was no established protocol for recruiting new members and although there was a greater degree of certainty about the appointment of a chairperson, it was not contained in any written procedure. Other functions were not available in writing, which include, emergency procedures, means of providing feedback on quality issues and decision-making where there was disagreement. It is important that the agency address this issue as a matter of some urgency to enable it to feel confident and comfortable that the panel works within an agreed framework for the benefit of the business brought before it.</p> <p>Applicants to adopt are routinely invited and encouraged to attend, although this is a reasonably new practice - since January 2004. Approved adopters are also invited to attend matching panels.</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.

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	2
----------------------------------	----------------------	---

The panel is constituted to the required standards and regulations and, following a period in the recent past when problems were experienced, always sits as a quorum. Attendance, required to be 75%, is generally achieved. There is now a mechanism in place set up to predict quoracy, in that there is a standing item on the agenda that addresses the future availability of members. The panel was seen to operate to a high standard; the independent chairperson provided effective leadership and skill in enabling it to address the business brought to it. As in all other aspects of the agency’s work, diversity and inclusion were fundamental aspects of the underpinning philosophy and practice of the panel’s operation. The membership of the panel, despite the somewhat ad-hoc arrangements for recruitment and appointment, was culturally and ethnically diverse in and members demonstrated insight into and knowledge of adoption matters in particular and children’s issues in general. Their approach was enthusiastic and relevant.

The panel has access to training opportunities and it was clear that they were well informed; there are no arrangements in place, however, for the panel to have an annual training day with workers from the agency and induction training for new members was somewhat limited in content and scope.

Panel member’s files did not provide full evidence of CRB checks having been undertaken or confidentiality agreements having been signed. Records in respect of panel members require some attention and improvement.

<b>Is the panel a joint panel with other local authorities?</b>	NO	
-----------------------------------------------------------------	----	--

<b>Does the adoption panel membership meet all of the statutory requirements?</b>	NO	
-----------------------------------------------------------------------------------	----	--

**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.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
----------------------------------	----------------------	----------

The administrative arrangements for the adoption panel appear to work well. The team administrator prepares and collates the business to be presented to the panel and prepares the agenda. She then forwards all the papers to 'Democratic Services' whose responsibility it is to duplicate and distribute the material to members; copies are not sent to the decision maker. This operation provides members with all necessary information in a timely way to enable them to read and digest the contents in time before the panel sits. It was considered somewhat inefficient to involve the administration sections of two different parts of the authority in the undertaking these important duties.

Panel meeting minutes, which are written and produced by democratic services and forwarded to the agency's administrator following approval by the chairperson, were found to be accurate reflections of panel business and enabled the reader to make an realistic analysis of discussions and recommendations reached. As in the previous paragraph, however, two administrative systems being involved in this process seems cumbersome and unnecessary.

**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.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
----------------------------------	----------------------	----------

The decision maker does not receive the panel papers at the same time as members and does not review all the material that may be presented to panel. Although, as outlined in the previous section, the minutes are fulsome and thorough, it is not felt that this is sufficient information for the decision maker to form a final judgement on the approval of adopters or matches with children.

The production of minutes by 'Democratic Services', which are then forwarded to the agency's administrator, who then completes a recommendations sheet and then forwards this to the decision maker, (with the minutes) seems to be a rather inefficient and tortuous system; it also has the potential to create more delays than is necessary. Indeed, it was said that it takes up to seven days before the decision maker receives any information on a case presented to the panel and up to three weeks for a decision to be made.

## 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 manager is an experienced social worker with a relevant background in children's work and family placements; she is a qualified social worker and has recently achieved a management qualification. The manager's job description outlines clearly the responsibilities of the post, and the person specification and required competencies demonstrate a full picture of the role.

**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?**

2

All workers, including managers, undergo an enhanced CRB check the results of which are known before anyone starts work. There were no systems in place to verify, by telephone, the provenance of written references.

There were systems in place in the Human Resources section to ensure that CRBs are checked every three years.

## Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

- The adoption agency is organised and managed efficiently, delivering a good quality service and avoiding confusion and conflicts of role.

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

**Key Findings and Evidence**

**Standard met?**

2

The management of the agency, particularly in respect of operations and practice, was of a good standard. There were clear lines of communication and all workers, regardless of their position in the organisation, were clear about their roles and responsibilities - and to whom they were accountable. The clear and simple structure of the department enabled this to be achieved.

The agency is not performing at its best, however, because of a limited approach to strategic planning. This was due, in some part, to the absence of a senior worker, but it was also felt to be under-managed in general. It will continue to be difficult to undertake the responsibilities of day-to-day management and the need for a more strategic approach to planning and development within the confines of the current team structure. It was clear that the management workload was too great to be undertaken within this structure and that a further senior practitioner would provide the day to day support freeing the team manager to develop the service.

The agency is not as well served by policies and procedures: the manager was keen to develop this aspect of operational structure but has been frustrated by the demands on her time. There needs to be a better opportunity to develop the strategic direction of the agency and to produce greater structure in policies and procedures; there is no procedural clarity, for instance, on the use of the national register.

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

3

**Number of the above complaints which were substantiated**

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.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
----------------------------------	----------------------	----------

Although there are mechanisms for providing the executive of the council with information on the activities of the agency there was no clear policy in place on how this should be achieved, what information should be presented and what the overall outcomes of the service's business are. A clear procedure should be developed that would ensure the executive is regularly updated with sufficient information for it to be satisfied that the agency is operating to an acceptable standard.

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

<b>Monthly?</b>	
<b>Quarterly?</b>	YES
<b>Less than Quarterly?</b>	

**Standard 18 (18.1 – 18.5)**  
**The adoption agency has access to specialist advisers and services appropriate to its needs.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
----------------------------------	----------------------	----------

The agency's legal adviser is a regular attendee at the adoption panel and the medical adviser is a member. The advice provided to the panel was of a good standard and enabled complex issues to be addressed by members.

There were difficulties found, however, in respect of the very limited amount of time that the medical adviser has available to offer assistance to the adoption team. It was reported that it was often very difficult to gain access to the services of the medical adviser because of pressing commitments elsewhere. It is important, to safeguard and promote the health of children that effective medical advice is easily and readily available to the team; arrangements should be made to ensure that this is achieved.

## 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 authority has a comprehensive recruitment and selection procedure and guidance in place that provides thorough, step-by-step advice on required practice for anyone involved in appointing staff. This procedure meets almost all the expectations of this standard except that there is no written requirement for references to be verified by telephone; this requirement should be incorporated into the procedure to ensure that the provenance of references can be guaranteed.

All social workers are suitably qualified and experienced in work with children in general and most have extensive experience of adoption and family placement. The workers demonstrated knowledge and understanding of the processes involved in adoption work, the underpinning legislation and demonstrated skills in practice. Questionnaire respondents were generally positive about the experiences they had had with social workers from the agency.

Birth records counselling is undertaken by a trained worker; it was noted, however, that if she is absent for any reason, this part of the service does not have any formal contingency in place.

**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?**

33

%

<b>Standard 20 (20.1 – 20.12)</b> <b>Staff are organised and managed in a way which delivers an efficient and effective service.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
<p>The management of day-to-day operations and practice was of a good standard. There were realistic organisational practices in place, workload monitoring was effective and the systems for the allocation of caseloads were well established - and acknowledged as equitable by the team.</p> <p>As indicated previously, however, more depth could be brought to the overall management of the service if there were more people in senior positions who could offer support and guidance. Nevertheless, the manager ensures that there is a system of regular supervision in place (weekly for new, inexperienced workers) and the records, which are typed and placed on case files, demonstrated a thorough approach to monitoring and directing realistic practice.</p> <p>The administrative support to the team is undertaken by one worker; although it was found that the quality of the support was of a high standard, the availability of only one administrator was felt to be somewhat inadequate for a service of this size. It was acknowledged, however, that additional administrative support can be provided to cover absences.</p>		

<b>Standard 21 (21.1 – 21.4)</b> <b>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.</b>			
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>	
<p>The agency is staffed to a realistic level to meet the demands of its responsibilities; there were no vacancies at the time of the inspection. All workers are suitably qualified and either have the relevant experience or, if recently recruited, undergo an induction programme that equips them with the requisite understanding to develop their skills. There is only one senior worker employed in the team; this is thought to be inadequate given the range of work the service undertakes.</p> <p>The agency has a good track record of retaining workers, informed by the recruitment and retention policy. Workers enjoy flexible working hours, can work from home and are supported in their work-life balance.</p> <p>One issue that has a negative impact on the work of the agency is the high turnover of staff in children's teams. Clearly, retention policies are having less of an impact on these teams which leads to inconsistencies in the relationship that the agency has with children's social workers and the negative impact that can be experienced when children are being placed with adopters.</p>			
<b>Total number of social work staff of the adoption service</b>	6	<b>Number of staff who have left the adoption service in the past 12 months</b>	2
<b>Number of social work posts vacant In the adoption service.</b>	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?**

2

The overall impression gained from workers was that they felt the organisation to be generally fair in its employment practices and that it was a good employer that supported its staff. The only detraction from this view was a perception (100% of staff concurred) with the rather bureaucratic systems for workers booking transport for essential visits and the time-consuming approach to expenses claims. It was felt that more efficient use of workers' time could be achieved if there were less restrictions on non-essential 'duties'.

There were realistic grievance and whistle-blowing policies and procedures in place that encourage staff to have a voice in the organisation and to protect them in complex and difficult situations.

**Standard 23 (23.1 – 23.6)**

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

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

3

The agency has an active approach to training. There is an annual training plan in place that feeds into the department's corporate plan; training needs are identified through an annual appraisal system and monitored through the supervision process. The training undertaken by the team in recent times was relevant and added an appropriate dimension to the underpinning knowledge of the team.

There is also training undertaken with and through the consortium. The department has a rolling programme of induction training for new recruits and this is expanded through service specific induction. As already mentioned, new appointees with limited experience receive very regular and frequent supervision – this is an integral aspect of the induction process that enables workers to be suitably inducted within a training and developmental model.

## 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 for prospective/approved adopters had all the relevant information in place, contained some very good case recording and included contemporaneous records of all assessment visits. The files, however, were not well managed, were too bulky to find detailed information easily and were not managed by a cogent record keeping policy. Much of the contents of the files were duplicated, which added considerably to their unmanageable bulk – many adopters had at least two and possibly more files for a single application. This in turn created an increasingly problematic storage issue (see section 29, below). Although there was some evidence found of file monitoring/auditing, the overall conclusion was that this is an area for development. The absence of a clear file management system makes realistic auditing very difficult; it would, therefore, as indicated above, be necessary for a policy and procedure – dedicated to the adoption service – to be developed.

Children's files were similarly fulsome in the amount of information contained within them. There appeared to be some confusion, however, regarding the status of children's files; it was not known if they were 'adoption files', as required by the 1983 regulations, or not. There was also no clear protocol for what should be contained on them and, therefore, no realistic auditing tool to ensure their contents and quality.

### 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
---------------------------	---------------	---

The agency had realistic and satisfactory systems in place to provide relevant and necessary information to other agencies, both within and external to the consortium. There was a satisfactory confidentiality policy and procedure in place and all managers and workers were aware of the systems and how to ensure they worked effectively and efficiently.

<b>Standard 27 (27.1 – 27.6)</b>		
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.		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
There was no discrete, agency policy and procedure on case file management or content; there is a corporate system in place but this does not provide for a suitable system in the adoption service. Nevertheless, the general administration of the office and its work was well coordinated and organised, except – as noted already – the serious lack of effective storage for confidential files.		

<b>Standard 28 (28.1 – 28.2)</b>		
Up-to-date, comprehensive personnel files are maintained for each member of staff and member of the adoption panel.		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
In general the staff files were well kept and contained most of the required information. There were some omissions, however, that require addressing. In some files there was no evidence of proof of qualification, no recent photograph and no system in place to verify the provenance of written references. The records maintained in respect of adoption panel members require developing further to include all required 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?	1
---------------------------	---------------	---

The premises used by the agency are conveniently located and accessible by public transport; car parking is very limited in the area. They are open for business during normal office hours.

The offices are reasonably comfortable and workers have their own desks and access to IT equipment; the overall administration and IT structures were satisfactory. The premises, however, have limited space for storage. Files are not all kept securely and in one instance a large number of boxes of active files were being stored in a meeting room with only a draped curtain over them-adjacent to a ground floor window. Immediate remedial action to secure these files was discussed at the end of the inspection.

**PART C**

**LAY ASSESSOR'S SUMMARY**

**(where applicable)**

**Lay Assessor** \_\_\_\_\_ **Signature** \_\_\_\_\_  
**Date** \_\_\_\_\_



**D.1 Local authority manager's comments/confirmation relating to the content and accuracy of the report for the above inspection.**

We would welcome comments on the content of this report relating to the Inspection conducted on 10<sup>th</sup> January 2005 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	<input type="checkbox"/> YES
Comments were received from the provider	<input type="checkbox"/> YES
Provider comments/factual amendments were incorporated into the final inspection report	<input type="checkbox"/> 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	<input type="checkbox"/>

**Note:**

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

**D.2 Please provide the Commission with a written Action Plan by 15th March 2005, which indicates how statutory requirements and recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.**

**Status of the Provider's Action Plan at time of publication of the final inspection report:**

Action plan was required	<input type="checkbox"/> YES
Action plan was received at the point of publication	<input type="checkbox"/> YES
Action plan covers all the statutory requirements in a timely fashion	<input type="checkbox"/> YES
Action plan did not cover all the statutory requirements and required further discussion	<input type="checkbox"/>
Provider has declined to provide an action plan	<input type="checkbox"/> NO
Other: <enter details here>	<input type="checkbox"/>

**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 Brent Council 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 \_\_\_\_\_ confirm 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.

**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](http://www.csci.org.uk)

S0000058592.V200540.R01

© This report may only be used in its entirety. Extracts may not be used or reproduced without the express permission of the Commission for Social Care Inspection



The paper used in this document is supplied from a sustainable source