



*Making Social Care  
Better for People*

# inspection report

Local Authority Adoption Services

**Brighton and Hove City Council  
Adoption Service**

253 Preston Road

Brighton

BN1 6SE

13th September 2004

## Commission for Social Care Inspection

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

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

### The role of CSCI is to:

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

## Inspection Methods & Findings

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

### The 4-point scale ranges from:

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

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

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

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

**ADOPTION SERVICE INFORMATION**

**Name of Local Authority**

Brighton and Hove City Council Adoption Service

**Headquarters Address**

253 Preston Road, Brighton, BN1 6SE

**Adoption Service Manager**

Sharon Donnelly

**Tel No:**

01273 295444

**Address**

253 Preston Road, Brighton, BN1 6SE

**Fax No:**

**Email Address**

**Certificate number of this adoption service**

**Date of last inspection**

NA

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

NA

<b>Date of Inspection Visit</b>		13th September 2004	<b>ID Code</b>
<b>Time of Inspection Visit</b>		02:00 pm	
<b>Name of Inspector</b>	<b>1</b>	Sally Woodget	113975
<b>Name of Inspector</b>	<b>2</b>	Maureen Moore	
<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>		Sharon Donnelly	

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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 **Brighton and Hove City 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.

Brighton & Hove's adoption service is not a stand-alone service but is a part of the larger team of Permanency and Adoption. Staff in the permanence and adoption team work with children and young people for whom long term fostering and/or adoption has been identified as their plan. This inspection has not included the long term fostering work as this is inspected under different regulations.

As well as the more traditional adoption service, Brighton & Hove have a concurrency team. This project has been set up to work with children aged 0-2 years where the prognosis of a return to birth families is considered as poor. In order to reduce the number of moves that children have in the care system, children are placed directly with foster-adopters and the concurrency team social workers work directly with the birth family in an agreed programme for the child to return to them, as well as working concurrently with the foster-adopters to pursue a plan of adoption should the rehabilitation fail.

The adoption service also have a new adoption support service which provides support, guidance and assistance to Birth families, adopters and children for whom adoption is the plan and children who have been placed for adoption. This team are experienced in carrying out attachment assessments on both children and adults.

Brighton & Hove also contract services from PAC to provide independent support and advocacy to birth parents adopted adults and adoptive families and with PACT to provide a service to overseas adopters.

Brighton & Hove underwent a serious case review in 2000 and have followed the recommendations from this review very seriously; as a result they have rigorous and robust assessment process for prospective adopters.

The service provides recruitment, assessment, preparation and training service for all prospective adopters and prepares and supports them to meet the needs of the wide range of children referred to them. The service is a member of Adoption South East Consortium, which broadens the choice of adoptive families available to children.

The adoption service is involved in a national research project which will explore the use of different behaviour management styles with adopted children

## **PART A SUMMARY OF INSPECTION FINDINGS**

### **INSPECTOR'S SUMMARY**

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

This service has been inspected for the first time against the National Minimum Standards introduced from the 1<sup>st</sup> April 2003. As a result, this report may contain a substantial number of recommendations and requirements. If so, the number of these should fall significantly at the next inspection. This inspection found however that the service was operating well and the number of developments, changes and additions that the service needed to make to comply fully with the Standards and Regulations were few. Inspectors found the strategic management of the service was strong and committed to promoting and safeguarding the welfare of children.

#### **Standard 1**

##### **Statement of Purpose**

##### **This standard was nearly met.**

The adoption agency have provided documents to a good standard but they still need to make a few additions to both the Statement of Purpose and Children's Guide to fully comply with the Regulations and Standards.

#### **Standard 2**

##### **Securing and Promoting Welfare**

##### **This standard was met**

The adoption agency provides a very child centred service, with staff working hard to ensure that children requiring a service were identified at an early stage.

#### **Standard 3-6**

##### **Prospective and Approved Adopters**

##### **Two of these standards were met and two were exceeded**

The process of assessment, preparation and training of adopters was thorough, detailed and investigative as well as sensitively handled. Adopters were positive about the service they received, and fully understood the reasons for vigilance. There was evidence of good social work practice, from experienced and skilled staff backed up by sound social work research.

#### **Standard 7-9**

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

##### **These three standards were met**

The adoption agency has set up social work support independent from the child's social worker based at a local family centre. It also operates a service level agreement with PAC to provide local surgeries for birth parents offering counselling services and advocacy. The new adoption support service is also set up to provide support to birth families regarding contact issues.

#### **Standards 10-13**

##### **Adoption Panels and Agency Decisions**



**One of these standards is not met, three are exceeded.**

The adoption service have a robust panel assisted by the Panel Advisor which is providing a positive, quality assurance function. Panels are managed sensitively and prospective adopters and children are invited, fully prepared and asked to complete evaluation sheets following the meeting. Arrangements are managed in a timely way and the agency decision maker is sensitive to the need to provide an agency decision promptly. Shortfalls have occurred in the process of taking up relevant checks and references on Panel members

**Standards 14-15**

**Fitness to Provide or Manage an Adoption Agency**

**One of these standards is exceeded one is not met**

Inspectors were impressed by the leadership, skills and experience of the senior managers in the adoption service, unfortunately the appropriate levels of checks and references were not evident on their personnel files.

**Standards 16-18**

**Provision and Management of the Adoption Agency**

**All of these standards were met**

The adoption service is managed effectively and efficiently, there were clear written procedures for monitoring and controlling its activities and it had appropriate access to specialist advisors and services appropriate to its needs.

**Standard 19-23**

**Employment and Management of Staff**

**Four of these standards were met one was nearly met**

Staff were organised in a way, which delivered an efficient and effective service. There was an adequate level of staff, and staff felt that Brighton & Hove was a fair employer. There are good quality training programmes available for staff to keep up to date. The shortfall occurs where personnel files do not evidence the appropriate levels of checks and references.

**Standards 25-28**

**Records**

**Three of these standards were met and one was not met.**

The adoption service ensures accurate and up to date records are kept on children.. The adoption service provides all relevant information to other adoption agencies and other parties, complying with data protection and the Children's Rights Act. There is a written policy on case recording and file storage, which complies with the regulations. The adoption service needs to address the need to take up appropriate status checks and references on all staff and panel members.

**Standards 29**

**Premises**

**This standard was met**

The adoption service is situated on 2 sites which is not ideal but the authority is actively looking for an appropriate alternative. The present arrangement is suitable for its purpose and function.

## 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	The Local Authority Adoption Services Reg2003  Reg 2.1 Sch 1	LA1	The Statement of Purpose must contain details about the relevant qualifications and experience of the manager and the staff employed by the authority for the purpose of the adoption service. It must also contain details of the system in place to monitor and evaluate the provision of services. It must also contain a summary of the complaints procedures established in accordance with Section 26(3) of the Children Act 1989 (a) and the Complaints Procedures Directions 1990 (b) including information about timescales and stages in the process for investigating complaints.	28/2/05
2	The Local Authority Adoption Services Reg2003  Reg 3(1)	LA1	The Children's Guide must contain a summary of the Statement of Purpose	28/2/05

3	The Local Authority Adoption Services Reg2003 Reg 11(3)(d) Reg 15(1)	LA11	The adoption service must ensure that no member of the panel be allowed to begin work until all relevant status checks as outlined in the schedules have been satisfactorily completed.	28/2/05
4	The Local Authority Adoption Services Reg2003 Reg 6 (2)(i) Sch 3	LA15	The adoption service must ensure that references and checks required under Schedule 3 are satisfactorily completed and that this can be evidenced on the personnel file.	28/2/05
5	The Local Authority Adoption Services Reg2003 Reg. 11(3)(d) Sch 3. Reg 15(1) Sch 4	LA28	The adoption service must ensure that references and checks required under Schedules 3 and 4 are satisfactory undertaken for all members of staff and members of the adoption panel, prior to their commencement in work.	28/2/05

### 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	LA19	The adoption service should ensure that all CRB disclosures are fully recorded on the personnel file before the document is destroyed including the disclosure number and date.

- 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	13/9/04
Time of Inspection	14:00
Duration Of Inspection (hrs)	65
Number of Inspector days	6.5
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)	17

The following pages summarise the key findings and evidence from this inspection, together with the CSCI assessment of the extent to which the National Minimum Standards have been met. The following scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

The scale ranges from:

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

"0" in the "Standard met?" box denotes standard not assessed on this occasion.

"9" in the "Standard met?" box denotes standard not applicable on this occasion.

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



## Statement of Purpose

The intended outcome for the following standard is:

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

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

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

Key Findings and Evidence	Standard met?	2
<p>The adoption service's statement of purpose is comprehensive, accessible and detailed. The aims and objectives accurately reflect the facilities and services provided. It does however; need to provide further details about the relevant qualifications and experience of the staff employed by the authority for the purposes of the adoption service and the relevant qualifications and experience of the manager. The Statement of Purpose does include information on the Adoption and Permanence Panel, which is one of their key quality mechanisms in relation to adoption work. This section of the statement also includes information about the Development Officer who acts as Professional Advisor to the Permanence Panel. It does not include information on the other systems that are in place to monitor and evaluate the provision of services overall, to ensure that the services provided by the adoption service are effective and the quality of these services are of an appropriate standard, this needs to be added. The Statement of Purpose also needs to include a summary of the complaints procedure established in accordance with Section 26(3) of the Children Act 1989(a) and the Complaints Procedure Directions 1990(b) including information about timescales and the stages in the process. The omissions mentioned in this standard are a requirement under Regulation 2(1) Schedule 1.</p>		
<p>The Statement of Purpose is given to all staff, within the Adoption Practice Handbook, prospective adopters, and is made available on request to children who may be adopted, their parents and guardians. Inspectors have suggested that more informal, shortened version of the Statement of Purpose may be more accessible to 'lay' interested parties. The Brighton &amp; Hove Committee endorsed the Statement of Purpose in June 2004 and it is intended that it will be reviewed annually.</p>		
<p>The adoption service have contributed to the BAAF Children's Guide to Adoption, and have supplemented it by adding stickers in the back of the book.. The guide must also contain a summary of the Statement of Purpose as required by Schedule 2 regulation 3(1). The document can be translated into different languages as required, and inspectors were assured that it could also be produced in different formats to meet the needs of different groups of children for example, Moon or Braille etc...</p>		
<p>The service uses a children's services publication 'Dennis Duckling' and the Nutmeg and Tia range of books from BAAF, to assist in explaining adoption to very young children. The service also provides a guide for children attending Panel that assists in explaining the local process of adoption.</p>		

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

Brighton and Hove Adoption Service have a comprehensive, analytical and detailed recruitment strategy written in May 2004, which identifies the number of children requiring adoption and highlights their particular needs. As a result of the research completed and outlined in the strategy, Brighton and Hove have identified a need to recruit more adopters for sibling groups, for children of black and minority ethnic origin, and for babies who can be placed directly. An action plan has been drawn up which includes the recruitment of a specialist social worker whose job it will be to liaise with the ethnic minority groups locally. The Adoption Service has also continued to seek advice from a local marketing consultancy to ensure the efficacy of its advertising strategy.

The Brighton and Hove Adoption Agency is also a member of 'Adoption South East' a consortium of 6 local authority adoption services, in order to ensure that they can offer a wider range and choice of adopters to meet the needs of the wide range of children needing a service. The consortium advertises widely within its area and ensures that the adoption agenda is kept in the public arena via newspaper articles especially during Adoption week.

Brighton and Hove Adoption Social Workers and Concurrency Social Workers are expected to follow the agency's family finding procedures to ensure that children are matched with adopters who best meet their needs. A Permanence planning meeting which will address the marketing and family finding criteria is held and chaired by a Practice Manager in the Permanence Team and is attended by all relevant parties in the process who know the child well, including the child's present foster carers, field social workers with case responsibility, their manager and the child's guardian (if there is one). A social worker from the permanence team is then allocated the role of family finder. The profile of the child, identifying their specific needs and the profiles of families who may be able to meet this child's needs are then discussed at a matching meeting. A report will be completed on the proposed match, which is then considered at the Adoption Panel. The match takes into account a child's ethnic background and seriously considers keeping sibling groups together if this meets their individual needs.

One adopter felt that there was little information was provided to adopters who may be matched or have a placement of a child who has a sibling, or to the children who are siblings where adoption is the plan, to provide evidence of clear assessment and decision making where decisions have been made to separate them and the reasons for this. The manager informed the inspector that training had been organised for staff on this issue recently and that careful consideration was always given to whether siblings should be separated and decisions were documented in the Form E. As the agency has a full information policy it is expected that the prospective adopter would have access to such information before a placement is made. However in the light of the information provided to inspectors it is

advised that the agency revisit this issue to ensure that all parties are assisted to fully understand the reasons for the decision making where siblings are separated.

Whilst many of the children involved in the adoption process are too young to indicate their views and wishes, the inspectors were pleased to see a number of very positive contributions being made by older children in their plans for adoption.

Whilst there were not so many approved concurrency adopters and therefore not a wide range to choose from, as there are for traditional adopters. Inspectors were assured however that if there was not an appropriate match for a child referred to the concurrency team then the case would be transferred to the adoption team for a match with an appropriate “traditional” adopter. Inspectors felt that the service had a child centred and child sensitive approach which was very positive to observe.

**In the last 12 months:**

<b>How many children were identified as needing adoptive families?</b>	38	
<b>How many children were matched with adopters?</b>	30	
<b>How many children were placed with the service’s own adopters?</b>	25	
<b>How many children were placed with other services’ adopters?</b>	5	
<b>How many children were referred to the Adoption Register?</b>	15	
<b>In the last 12 months, how many children were matched with families which reflected their ethnic origin, cultural background, religion and language?</b>	29	
<b>What percentage of children matched with the adoption service’s adopters does this represent?</b>	97	%
<b>How many sibling groups were matched in the last 12 months?</b>	5	
<b>How many allegations of abuse or neglect were made about adopters approved by this adoption service?</b>	0	
<b>On the date this form was completed, how many children were waiting for a match to be identified?</b>	22	

## 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>Brighton and Hove adoption service has a comprehensive recruitment pack for prospective adopters. Inspectors were informed that a web site for the service is currently being created and should be operational by October 2004. Applicants are welcomed without prejudice and a copy of the written eligibility criteria contained in the recruitment pack evidences this approach.</p> <p>Inspectors were told that Brighton and Hove Adoption Service are currently negotiating with a voluntary adoption agency, to undertake the preparation, assessment and approval of inter-country adopters as they have few overseas adoption applications and recognise the need to provide a specialist and dedicated service for these applicants. A member of the adoption team will be responsible for handling enquiries from such applicants and managing the arrangement with the voluntary organisation.</p> <p>Inspectors saw evidence that Brighton and Hove adoption service were 'fast tracking' those prospective adopters who were more likely to meet the needs of children waiting.</p> <p>The recruitment pack provides information about the process of adoption including the preparation, training and support services available. All the preparation courses include the opportunity for prospective adopters to meet others who have adopted children.</p> <p>Initial assessment visits are carried out prior to the preparation and training course at which point the social worker will inform the prospective adopters of the range of children needing adoption. Information about the concurrency route to adoption is also given at this stage and further leaflets on this form of adoption provided. As the need for concurrency carers is outlined in the agencies recruitment strategy those applicants would be taken up quickly through the preparation, training and assessment process.</p> <p>As already stated Brighton and Hove adoption agency are members of Adoption South East and this family placement consortium have a reciprocal arrangement to ensure that children and families can be matched expediently. Adopters understand that their details will be referred to the Consortium 3 weeks following their approval at Panel if a match has not been made during this time.</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?**

**4**

Following the Serious Case Review all policies in relation to the assessment of adopters were thoroughly reviewed and the present assessment structure and process reflects these changes. Social workers in the adoption and concurrency teams carry out comprehensive, detailed, analytical and evaluative assessments clearly identifying the applicant's strength, competencies and any areas of weakness. Six referees are required, and ex partners and birth children of previous relationships approached and interviewed. A practice guidance file is given to all assessing social workers, which includes details of tools to be used during the assessment process. A full chronology of the prospective adopters lives, a genogram, an ecomap, attitudinal and experimental exercises, adult attachment interviews are examples of the tools used by assessing social workers. A second opinion visit is undertaken by the practice manager supervising the assessing social worker, the purpose of which is to highlight issues from the assessment. The professional advisors role is to quality assure all documents going before the Adoption Panel for consideration, which ensures further scrutiny to the assessment process.

Preparation groups are set up for prospective adopters and a separate preparation group is organised for concurrency foster/adopters to deal specifically with the pertinent issues of concurrency planning. The traditional adopters course includes sessions on trauma and loss, identity, contact, attachment, resilience, medical issues and post adoption support. The course takes place over 4 days and is held locally in Brighton in the Departmental Learning Development Centre.

One adopter commented that the preparation course did not cover enough on introductions to children and inspectors noted that this wasn't included in the preparation programme. All other returned questionnaires revealed that adopters felt that the preparation was "excellent", "informative" and "honest"

The concurrency foster/adopters preparation group included information sessions on the processes of concurrency, and included a birth parent's perspective, health and development issues, child protection; adoptive parents experience of concurrency, and adopted persons perspective, life story work, as well as other sessions mentioned earlier.

The attendees evaluate all preparation groups, and their comments are used to inform and modify future courses.

The preparation groups fit within the framework of equal opportunities and anti-discriminatory practice, and adopters were happy with the time and venue of the groups.

Foster carers, who wish to adopt a child they are already caring for, are encouraged to attend the relevant preparation groups. Concurrency cares are assessed as foster carers and adoptive parents at the same time to carry out their specific role and to be able to have children placed directly with them.

Health and safety checklists are completed as are Dog questionnaires, to ensure assessors are satisfied that the home environment is a safe one, for any child placed

The applicant's capacity to look after a child in a safe and responsible way is integral to the

assessment process, and inspectors were satisfied that this was being thoroughly addressed.

Where applicants have a positive disclosure on their Criminal Record Bureau, this is discussed fully at the Departmental Managers meeting, and the discussion and outcome are fully recorded and documented.

Prospective adopters were happy that they were kept fully informed throughout the process of assessment and were very complimentary about the service that they had received

**Standard 5 (5.1 – 5.4)**

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

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

3

Approved adopters are given a Post Approval Pack which includes information about the matching and introduction process, it also contains a range of comprehensive and useful information both local and national, regarding support services available for adopters and their adopted child.

Inspectors found that the agency had a full information policy and were providing all key documents on the child to adopters to enable them to make an informed decision. Adopters usually meet with the current caregivers to the child to find out about the day-to-day needs of the child. Recently the agency has started to hold 'Child Appreciation Days' to obtain and provide as much information as possible from all the professionals involved in the child's life to assist adopters and to obtain a record for the child. Inspectors saw a video to evidence this arrangement. However one case tracked by inspectors indicated a lack of information provided to an adopter prior to placement. This occurred due to a turnover of social work staff, their manager and health professional around the same time. It is advised that the practice managers are vigilant in ensuring that all information is recorded about a child in a 'closure summary' or equivalent, prior to a member of staff leaving, or by ensuring that a 'child appreciation day' is held to ensure vital information about a child's needs and history is not lost.

Adopters are asked to sign an adopter agreement form, which ensures their agreement to; notify the adoption agency if an adopted child dies and to pass on information to both families if they wish to have it. This document records the adoptive parents decision, was kept on their adoption file, and was evidenced by inspectors.

Adopters are asked to produce child friendly information about their home and family for the child prior to the introductions. Inspectors saw excellent evidence of this in the form of a storybook specifically focussed on the needs and ability of the individual child to be placed. This is evidence of particularly creative, and sensitive piece of work carried out by agency adopters supported and encouraged by the adoption agency staff.

**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?**

**4**

Brighton and Hove Adoption Service have recently set up a dedicated adoption support team as part of the Permanence and Adoption Team managed by the Adoption Support Services Advisor. The service had developed an Adoption Support Responsibilities and Action Plan for 2004-05, which outlines and identifies the work of the team. Skilled specialist practitioners including an adoption support teacher staff the adoption support team. Inspectors were informed that the adoption support teacher has run a support group for teaching assistants that are working with adopted children with attachment difficulties, which is innovative and positive. She has also produced a guidance document for teaching staff on attachment issues.

It is planned that the social worker who assessed the adopter will continue to support them following their approval and also following the placement of a child. Support groups have also been set up for approved adopters and for those who have had placements, which encourage informal support arrangements amongst the group as well as offering structured sessions and continued training. Brighton and Hove also contract with P.A.C. the Post Adoption Centre, London, to provide surgeries locally for adopters and birth families, a telephone advice line, as well as local training courses/workshops for both these groups. The P.A.C. training for June 2004-April 2005 includes sessions on 'parenting teenagers', 'supporting your adopted child in school' and 'parents as healers'.

The Post Approval Handbook, as already stated, contains a wealth of useful information on local and national groups and agencies who offer assistance and help on a variety of matters relating to adoption, including financial matters such as adoption leave, support and advice services such as P.A.C., B.A.A.F. and Adoption UK.

An adoption support plan is drawn up and submitted with the marketing material to the Panel, and is reviewed at regular intervals.

In the event that adoptive families and the child in placement need more specific help and guidance the dedicated support team can offer this service.

There is also a close liaison with the local CAMHS with an agreement that adopted children and their families will be fast tracked for therapeutic services. The Head of Service also attends the CAMHS monthly referral meetings.

The adoption support team staff can advise adoptive parents on the needs of their adopted child, can facilitate letter box contact or supervise and support direct contact meetings with birth families. They will also offer specialist help in relation to the therapeutic needs of the child and assist where an adoption disruption has occurred or is in danger of occurring. The team are well placed to offer these specialist services as the staff are very experienced in working with children with attachment difficulties and hold qualifications in counselling. One member of staff is a trained teacher who can offer assistance to adopted children and their families who are having difficulty at school.

The adoption service also have a service level agreement with P.A.C.T. 'Parents and Children Together' (as already mentioned) in relation to inter-county adoption work, however once a child is in place the welfare supervision and support to the adopters will remain with the Brighton and Hove Adoption Services.

Inspectors witnessed good support services being provided to adopters throughout the assessment, approval, introductions and placement processes. Questionnaires from adopters indicated that they were happy with the level of support that they received. Inspectors found evidence from one adopter that suggested that they needed to be more mindful of the support needs of adopters who may live some distance from the agency. Inspectors were assured however that support services, including private therapists could be funded through the CAMHS fast track service and that other arrangements were in place across the consortium. Staff should however consider linking quickly with local adoption support services to prevent the possible isolation for adopters and ensure that practical services are available locally to assist with issues such as schooling, socialisation and behaviour for those adopters who live outside the consortium area..

The adoption agency informs the adopter of the need to keep safe any information provided by birth families, this happens during the training and preparation courses, reiterated via the home assessment and is highlighted in the prospective adopter agreement form.

Inspectors saw some good evidence of life story work going on, however it was noted that training for doing life story work and the time factor for busy children's social workers did mean that there was some inconsistency in this area. The service is aware of this and intends to ensure training for field social work staff in this area.

Prospective adopters are encouraged to develop strategies to help their child address issues of racism, and this is covered in the preparation course and via the home assessment. The service intends to produce a handbook for adopters of children placed trans-racially.

The service addresses the issue of helping the child to develop a positive self-identity through the ongoing training courses and workshops provided by the adoption support team.

The adoption service managers stressed to the inspectors that they operate a 'no blame' attitude when placements disrupt. There are clear procedures for staff managing disruption issues contained in the Adoption Handbook, which evidence this approach. There has been one disruption in Brighton and Hove in the last 12 months and clearly lessons were learnt following the discussion of all the issues and action taken to remedy any mistakes, and inform future practice. Adopters involved in any disruption are fully informed and consulted throughout the process.

<b>Number of adopter applications started in the last 12 months</b>	30	
<b>Number of adopters approved in the last 12 months</b>	27	
<b>Number of children matched with the local authority's adopters in the last 12 months</b>	25	
<b>Number of adopters approved but not matched</b>	11	
<b>Number of adopters referred to the Adoption Register</b>	34	
<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.**

**Key Findings and Evidence**

**Standard met?**

**3**

Brighton and Hove's adoption service are sensitive to the needs of birth parents. In particular, due to the work of the Concurrency Team, issues relating to birth parents needs for support and advocacy are kept in the foreground of the adoption service. There was very good evidence of support, advocacy and counselling and practical help offered to the birth parents of children placed with concurrency carers. Social work staff and the community family worker in this team gave numerous examples of the continued work they were undertaking with birth families, for example; assisting with housing issues, debt counselling, and liaising with the appropriate professionals to advocate on their behalf. Inspectors were informed that birth family members had found the process helpful and had reported feeling more positive about the plans for adoption going ahead when rehabilitation was no longer an option, because of the process they had been through. Unfortunately only 1 birth parent responded to the questionnaire and this response cannot be taken as representative.

Birth parents are able to access an independent support worker in a local family centre, and are also given information about the service available from P.A.C. who hold local surgeries on a regular basis. The new adoption support service also have a remit to; provide counselling for birth relatives, advise birth parents on what steps they can take where it has been decided that their child will be adopted; work with birth parents to agree a contact plan for the child and facilitate meetings to resolve problems in relation to contact arrangements. The adoption support service are fully aware that the take-up of services from birth parents is low, and that their work in this area which they have only recently taken responsibility for is still in its early stages and requires a great deal of work and innovative strategies to achieve their goals.

Inspectors evidenced that birth parents views were fully recorded on the form E's and in the court documents by the child's social worker, scrutiny of this process was evidenced through the work of the Professional Advisor and the Adoption Panel.

<b>Standard 8 (8,1 – 8.2)</b>		
<b>Birth parents and birth families are enabled to contribute to the maintenance of their child's heritage.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>As stated already birth families views are clearly recorded in the form E on the child in the court documents, and it is the role of the child's social worker to obtain as much information as possible about birth families for the child.</p> <p>The social work resource officer in the adoption support team has been given the clear responsibility for facilitating and supporting direct contact arrangements post adoption. A social worker in the team, also has the lead responsibility for the letterbox scheme, and it is intended that this will include being in contact with birth families to assist them to write letters where necessary</p>		

<b>Standard 9 (9.1)</b>		
<b>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.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>As already stated the adoption agency does have a clear strategy for working with birth parents which includes the service level agreement with P.A.C., the independent worker in the family centre and through the intended service provision from the adoption support team. Birth parents are given information about these services by their child's social worker as well as a leaflet on the local Natural Parents Network Group.</p> <p>The child's support plan includes a section on support services to be provided to birth parents in relation to contact which identifies the particular needs of birth families and who will be responsible for providing the service to them in this area.</p>		

## 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>4</b>
<p>The Brighton and Hove Adoption Service have a permanence and adoption panel that considers; prospective long-term foster carer applications, plans for children, concurrency carers (who are considered as foster carers and adopters) applications, prospective adopter applications and children's plans for adoption.</p> <p>The panel has a detailed and thorough constitution and terms of reference, which includes all the matters laid out in Standard 10.2 namely a policy and procedure for; dealing with ineffective or disruptive behaviour or attitudes; decision making when panel members are not in agreement and receiving progress reports on individual cases.</p> <p>Brighton and Hove Adoption Service invite prospective adopters to the panel meeting as a matter of course, they also invite, where appropriate, children to the Panel, and there are policies and procedures that cover their attendances in the document referred to. Inspectors saw evidence of children being welcomed to the meeting, being allowed to fully participate, and the whole process being carried out in a sensitive and supportive manner suitable to the needs of the individual child's needs which was very commendable.</p> <p>Brighton and Hove Adoption Service have produced two booklets, one for applicants and one for children and young people to inform them about the Panel and what happens at the meeting. This is commendable and sensitive practice.</p> <p>An information sheet on Panel members with their photographs is available to attendees of the panel in the waiting room for them to peruse prior to the Panel meeting, which is a thoughtful and sensitive approach. All attendees are asked to complete feedback forms on their attendance at Panel. These completed forms are evaluated by the professional Advisor and summarised information given to Panel members to enable discussion about making any necessary changes to their format or style.</p>		

**Standard 11 (11.1 – 11.4)**

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

**Key Findings and Evidence**

**Standard met?**

1

The adoption agency have as already stated has its own 'Constitution and Terms of Reference'. All Panel members have an opportunity to observe the Panel meeting and are given an induction pack and the B.A.A.F. booklet on the role of the Panel. The Panel Chair informed inspectors that any further training for new members depended on that individual member's background and experience.

All Panel members have signed a confidentiality agreement. Unfortunately not all the relevant status checks have been undertaken on the Panel members as outlined in Regulation 11 (3) (d) and 15 under Schedules 3 and 4,( this includes Panel members who had started since the adoption regulations came into force in April 2003), for example all Panel members files did not contain proof of identity including a photograph, documentary evidence of qualifications, full employment history, references and training undertaken. In one case the information did not include whether the returned CRB check was clear or not. This is a requirement under the Local Authority Adoption Agency Regulations and is the reason for the low scoring in this standard.

The adoption agency has systems in place to ensure that each Panel member is given an induction, that there is an annual joint training day with adoption agency staff and that they have access to appropriate training and skills development. The adoption agency's Professional Advisor is a key figure in ensuring these systems are adhered to, and is able to obtain the co-operation and support of all the other advisors to the Panel, legal, medical and educational to ensure panel members are kept abreast of relevant changes in legislation, regulation and guidance. Panel members also receive training in inter-country adoption via a panel member who has expertise in this area

A team development plan for the Adoption Panel has been drawn up and identifies training given and planned during 2003-04. All panel members will be introduced to an appraisal scheme, which will identify individual learning and development needs of each panel member.

**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.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>4</b>
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The adoption agency's panel meets fortnightly for a whole day, to ensure that the volume of work can be managed in a timely way. Inspectors were assured that consideration would be given to convening an extra Panel if this was necessary to prevent delay to planning for children's needs. A Panel administrator is employed specifically to deal with all the work in collecting and collating all the information required and planning the Panel meetings, which makes this an efficient and effective service. Members of the Panel receive all the necessary information in advance of the Panel and this is handled in a confidential manner.

The Panel minutes reflect the practice of the Chair's in clearly summarising the positive aspects of any applicant or match as well as any areas of difficulty or potential risk.

**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>4</b>
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The agency decision maker is a Senior Officer in the Children's Services, who receives all the information on applications, children and potential matches. Following the Panel meeting, minutes of the panels discussion and their recommendation are also sent to the Agency decision maker. The professional advisor meets with the Agency decision maker to clarify any issues and the agency's decision is relayed immediately to the workers and the applicants.

The adoption agency's panel will make a recommendation, which is immediately conveyed, to the applicants by the Panel Chair. It is made clear that this is only a recommendation and needs to be considered by the agency decision maker prior to the final decision. Inspectors observed where a child was attending panel that a special arrangement was made with the agency decision maker to convey a recommendation immediately to ensure that there was no delay in the final decision being made and given to the child. This evidences how much the child is put at the centre of the process and was very laudable

The decision maker will then write to the applicants and birth families confirming the decision within 7 working days of the Panel meeting. Inspectors were able to establish that this was occurring.



## 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?	4
<p>The manager of the adoption and fostering service has the relevant social work and management qualifications with considerable experience in managing children’s services and in particular family placement work. The manager of the adoption and permanence team also has appropriate qualifications and management experience with many years working in ‘family placement’ work. Inspectors advise that a management qualification would be advisable for this post. Both these managers were instrumental in setting up the concurrency team, which was the first of its kind with a local authority setting. Both managers have the management skills and financial expertise to manage the work efficiently and effectively. Following the serious case review, all the recommendations have been actioned to create a well-structured department with more than adequate levels of accountability and scrutiny.</p> <p>Both managers clearly exercise effective leadership of the staff and operation and provide good role models for staff to aspire to. There are four practice managers each with specific duties relating to the adoption services; one takes responsibility for family finding, one for adoption support; one for concurrency work and one for recruitment duty and assessment. Each of these practice managers also has direct responsibility for supervising social work staff. All have clear written job descriptions, which set out their duties, responsibilities and levels of delegation.</p> <p>There was evidence that practice managers were seeking appropriate management course that reflected their work close to practice issues. The inspectors understand from the Head of Children’s Services in Brighton and Hove, that the authority will undertake a commitment to this training for them. Staff expressed a view that the management structure including the role of the professional advisor who is employed at a service manager level, was helpful and accessible and that roles and responsibilities were clear.</p> <p>Inspectors expressed some concern that the role of practice managers in the fieldwork setting was not so clear, with many practice managers carrying a caseload as well as supervisory responsibilities for staff. It is advised that the Head of Children’s Services review this situation, and ensures that there is clarity of roles and clear management oversight to ensure that examples such as the one mentioned in Standard 5 are not overlooked.</p>		

<b>Does the manager have Management NVQ4 or equivalent?</b>	YES	
<b>Does the manager have at least 2 years experience of working in a childcare setting in last 5 years?</b>	YES	

<b>Standard 15 (15.1 – 15.4)</b> <b>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.</b>		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>1</b>
<p>Human resources files were inspected and a number of omissions were found. There was a lack of: documentary evidence of qualifications, proof to identity (which should also include a photograph), references and in one case employment history. Most members of staff (these were the managers files mentioned in Standard 14), had been working in Brighton and Hove for many years and prior to the adoption agency regulations which came out in April 2003, however one member of staff had been internally appointed since this date and this file also had the same omissions.</p> <p>All files need to evidence that staff are fit to manage an adoption service by ensuring that full and satisfactory information is available in relation to them in respect of each of the matters listed in Schedule 3. Regulation 6 (2) (c). This is a requirement and is the reason for the low score in this standard.</p> <p>All the managers had a satisfactory enhanced disclosure from the CRB, and inspectors were informed that these were renewed every 3 years.</p> <p>Inspectors were also informed that the Human Resources department were now undertaking telephone enquiries to verify written references but were unable to evidence this as most staff had been appointed prior to the regulations.</p>		

## Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

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

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

**Key Findings and Evidence**

**Standard met?**

3

Inspectors evidenced that all staff members interviewed were fully aware of the statement of purpose and that they felt that it reflected their service delivery. Inspectors were informed that clear arrangements were in place to identify the person in charge when the manager was absent, and that leave is co-ordinated between the Head of Service and Service Managers. As already stated there are clear roles for all the different managers and well-established lines of communication and accountability. Staff reported that the structure was open, accessible and supportive.

The adoption agency endeavours to ensure that all staff who work with children, prospective and approved adopters and birth parents take into account their racial origin, religion, culture and language. The service have recently undertaken a race equality impact assessment and have gathered information about their present service delivery in relation to this client group. Clear goals and action plans have been drawn up which include the recruitment of a Recruitment and Publicity Officer to work within the fostering team and whose role will be to raise awareness amongst ethnic minority groups about fostering and adoption. This process has also been helpful in raising awareness of staff and to ensure the equal opportunities are continually evaluated and reviewed.

The adoption agency has clear written procedures for the use of the Adoption Register in the Adoption and permanence practice handbook. It is advised that information on the use of this register is also made available to adopters in their Post Approval Pack.

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

0

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

X

**Standard 17 (17.1 – 17.3)**

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

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

3

Brighton and Hove adoption agency produce an annual report and the Panel Chair also produces an annual report, these are submitted to the Children, Families and Schools sub-committee for scrutiny. Inspectors were informed that regular reports are presented to the management team in relation to the profile of children waiting for a placement, and to inform them of the recruitment of adopters. The Children, Families and Schools department hold monthly review board meetings with lead members from the sub committee. These meetings are used to brief members of key operational and practice issues and developments of the Adoption Service.

There is clear information, which outlines the cost of inter-country adoption assessments, and protocols are in place for charging for placements with Adoption South East the family placement consortium.

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

Monthly?

YES

Quarterly?

Less than Quarterly?

**Standard 18 (18.1 – 18.5)**

The adoption agency has access to specialist advisers and services appropriate to its needs.

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

3

The adoption agency has good liaison and co-operation with their legal, medical and educational advisors who, inspectors noted, were committed to their work with the adoption service.

The medical advisor is Vice Chair of the adoption panel and also contributes to the preparation and training groups for adopters. The legal advisor is a senior lawyer for Brighton and Hove Local Authority and attends every panel. Inspectors evidenced the legal advisor having a considerable and appropriate input on the Panel and were informed that she contributes actively to training within the adoption service and has played a key role in establishing the concurrency team.

Staff in the adoption service reported that they had access to these advisors, and that there were clear lines of communication with the professional services in Brighton and Hove. Staff are able to use the services of CAMHS, the Looked After Children's educational services, and have access to advice and support via 'Adoption South East' Consortium, NORWOOD, PACT, P.A.C. and the Overseas Adoption Helpline.

The written protocol governing the role of the specialist advisors is addressed in the Panels Constitution and Terms of Reference (details of status checks required on Panel Members has already been mentioned in Standard 11).

## 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

Inspectors were informed that all practice managers and service managers who are involved in the recruitment and selection of staff have had training in this area.

All staff reported that they had been interviewed as part of the selection process, but unfortunately, whilst managers stated they had kept internal notes and records and passed these to Human Resources, there were not stored in the individual applicant/staff member human resources files for inspectors to evidence this practice. Inspectors were unable to evidence the practice of taking up telephone enquires to verify written references as outlined in Standard 19.3. However managers pointed out that as most staff had been appointed prior to the Regulations, Inspectors would not have found this. Inspectors were assured however that the Adoption Service had fully discussed the need for this check with the Human Resources department and that a pro forma document now existed on which to record this telephone check (as already discussed in Standard 15).

All human resources files indicated that CRB checks had been undertaken and when appropriate renewed regularly. In one case however, a CRB disclosure number was not included in the file. HR needs to ensure that its administration systems are robust enough to maintain accuracy in this area.

Inspectors noted that some staff had been allowed to begin work prior to the receipt of their CRB checks being received. The explanation of this was due to the backlog of CRB checks at the CRB offices during 2003. A risk assessment document had been completed on each member of staff that this delay affected, and managers signed to authorise that no unsupervised contact with children would be allowed until the checks had been returned and were satisfactory. In these cases the CRB check arrived with 3 weeks of commencement of work. Managers assured inspectors that this practice was no longer necessary, or allowed to continue.

All social workers in the adoption and concurrency teams are fully qualified social workers, and the staff team include a number of social workers with many years experience and background in adoption and family placement work. The adoption service is committed to training for their staff and a large number of the team are studying for the PQ awards and are at various stages in the process. Inspectors were impressed by the knowledge and skills of staff in the adoption services, and of how the service supports staff to keep up to date on social work practice and legal issues pertinent to their job descriptions. Inspectors have seen the service's training programme and team development plan as well as individual

staff's training records to evidence this. All staff undertaking assessments and adopters have been trained specifically in assessment in this field of work.

The adoption support practice manager takes a lead role in the area of birth record counselling and ensures staff undertaking this work develop the experience and skills in this area via training and group discussion of practice issues on a regular basis.

Work with birth parents is undertaken by an experienced social worker and a counsellor in a local family centre as already stated in Standard 7.

<b>Do all of the adoption service's social workers have DipSW or equivalent?</b>	YES	
<b>What % of the adoption service's social workers have a PQ award?</b>	64	%

**Standard 20 (20.1 – 20.12)**  
**Staff are organised and managed in a way which delivers an efficient and effective service.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	3
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Inspectors were impressed by experienced, dedicated and skilled management team (as described in Standard 16) and particularly with the non-operational management role, Professional Advisor, with an explicit quality assurance role. This post was clearly having the desired affect and was driving up the standards of report writing, ensuring accuracy and timeliness. This position also carried responsibility for policy and practice development, and will ensure the service keeps up to date with all the new changes in legislation due in the adoption arena.

Social work staff are supervised regularly by practice managers and their workload monitored using a caseload weighting system. All staff reported the caseload weighting system to be helpful in identifying priorities and prevented being overworked and stressed. The service manager supervises and monitors the workloads of practice managers and oversees the caseload weighting system for their staff. Again all staff reported feeling valued and supported by their managers at all levels in the service. All staff had agreed a contract with their manager, which governed the practice of supervision sessions.

The service had effective structures and systems in place to ensure assessments and approvals of adopters are managed and implemented effectively, and adopters reported that they were also sensitively handled to meet their specific needs.

The service reported having some difficulties with the lack of adequate administrative support in the recent past, it was felt that this had now been rectified, and the new administrative systems were beginning to impact on the efficiency of the overall work especially in relation to referrals.

The adoption service has access to a range of advice needed to provide a good service for

children as reported in Standard 18.

All staff reported having a job description and inspectors were provided with copies of these in the inspection material. Staff also reported having seen the Statement of purpose and having access to all policies and procedures and staff conditions of service

**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.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	3
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Inspectors were informed that the staffing levels were kept constantly under review. The service had recently expanded to take account of the new adoption support responsibilities and there are plans (as already stated) to recruit a dedicated recruitment and publicity officer for black and minority ethnic adopters to meet the needs of looked after children in Brighton and Hove.

It was noted that the concurrency team had a number of staff leave around the same time causing some difficulties in continuity and skills base in this very specialised area of work and in such a small team the impact was significant. However this has now been rectified and the staff team are up to complement. Inspectors were informed that the number of referrals to this team has increased significantly due to the local 'baby boom' and not all babies who may fit the criteria for a concurrency placement can be placed via this route. The Assistant Director for Social Care Services had responded by increasing the number of social workers with responsibility for carrying out pre-birth assessments in the hospital team, as a way of managing the need caused by this demographic change. Clearly the growth of staffing levels in the concurrency team needs to be kept under review to enable the service to respond to any increase of referrals.

The adoption service have a number of freelance social work staff who are experienced in adoption and concurrency work on whom they can call on if a shortfall occurs in their staffing levels. Inspectors were assured that the service manager would monitor these staff closely. Brighton and Hove council offer a 'generous' relocation grant to new staff which inspectors were informed has resulted in better recruitment of staff and has assisted staffing levels in fieldwork teams. A number of policies exist to retain staff and staff commented on the very good training, support and supervision and sensitive packages for staff with specific needs.

<b>Total number of social work staff of the adoption service</b>	11	<b>Number of staff who have left the adoption service in the past 12 months</b>	1
<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?**

**3**

All staff interviewed as part of the inspection process reported feeling fully supported and properly supervised by an effective, approachable, accessible and open management team. Good training opportunities were apparent, and all staff were aware of policies, procedures including the whistle blowing policy which is available on the corporate intranet.

**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**

Standards 19 and 20 have already covered some issues on training. Inspectors have evidenced a good quality-training programme available for staff in the adoption service to develop and enhance their individual skills and to help them keep up to date with professional and legal developments.

Each staff member has an individual training and development plan, which reflects their individual needs and the skills they need to develop to provide a better service for adopters and children referred.

Training that has been delivered or planned includes: supervising child care practice, making good assessments, understanding the impact of caring for neglected and abused children, current advances on attachment research, “theraplay” training, working with families with learning disabilities, birth relative initiated contact, letterbox workshop, disruption meetings, and “story stem” narratives. (This is not the complete list). All new staff are given a thorough induction training and there is an appraisal system which identifies individual training needs (as already stated).

Staff are asked to complete evaluation forms following all training events, and discuss the effectiveness of each course attended at their supervision session.

The team plan includes objectives to ensure that the adoption service staff, children’s fieldwork staff and Panel members are kept informed of changes in practice and policy in relation to the implementation of the new Adoption and Children’s Act and has identified the professional advisor to the Panel to take the lead in this area.

The adoption team development plan identifies specific areas of development required and how these will be addressed i.e.: via team training events or inviting in individual speakers or trainers to talk to the staff group, with dates as to when these should be achieved.



## 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?	3
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Inspectors were pleased with the comprehensive and accurate case records maintained for each child and prospective and approved adopters. The adoption agency has a written policy and procedural instructions on the treatment of adoption information and records, which include cover arrangements for maintaining confidentiality.

Inspectors visited the site where closed adoption files are archived and were impressed with the arrangements for the retrieval of information. Archives were moved to this site from a previous site some years ago following a flood, inspectors were impressed to hear that records were saved and not one was lost. There are smoke detectors that are linked to the Fire Brigade. However, whilst these files were securely stored inspectors were not convinced that the containers were sufficiently fire proof.

There are arrangements for storing of records such as health, status and CRB checks that have been obtained for prospective and approved adopters, and their outcomes. CRB originals are held by the Head of Child Protection for Brighton and Hove and the date and disclosure number is kept on the applicants file.

Decisions by supervisors are recorded on the case files in the recording section and inspectors saw evidence of this. Inspectors were informed that 4 days per year were put aside for a case file audit with the adoption services, and a regular system of auditing files by the management team is ongoing.

### 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
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The adoption agency follows its own operational guidelines about the treatment of Adoption Information and Records, when providing relevant information from its case records to other adoption agencies. In some cases where appropriate, the agency sought leave from the court to provide some of the legal information.

The operational instructions includes the requirements of the Data Protection Act and the Human Rights Act and sets out how staff should deal with requests for access or disclosure and details of what constitutes exempted data.

Brighton and Hove operate an open access policy and a leaflet is provided to all adopters in the Post Approval Pack.

The adoption agency also have a policy and procedure 'Birth Relative Initiated Contact' to assist staff in dealing with enquiries from birth parents wishing to find out information about their adopted children and arrange contact with them.

**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.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
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This report has already referred to the policies, which establish the purpose, format, confidentiality and contents of case files including information on access. Inspectors were informed that separate records were kept for complaints and allegations.

Inspectors saw the new proforma documents to be used for auditing the case files of adopters, concurrency carers and children, and heard that case files were audited regularly at supervision and during the 4 annual audit days.

Inspectors were pleased with the standard of recording in the case files, which were legible, clearly expressed, non-stigmatising and signed and dated.

**Standard 28 (28.1 – 28.2)**

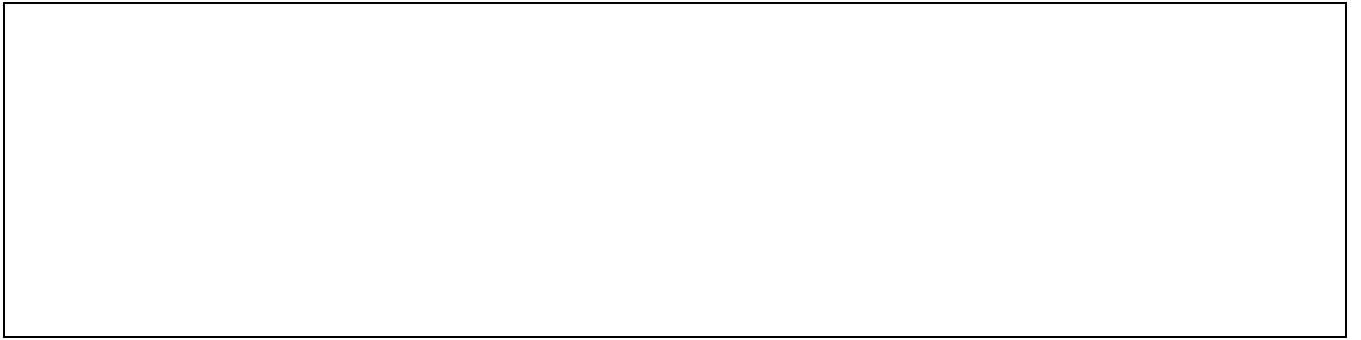
**Up-to-date, comprehensive personnel files are maintained for each member of staff and member of the adoption panel.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>1</b>
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Inspectors looked at the Human Resources files of staff working for the adoption service and were concerned that they lacked information required by the regulations. Many of the staff working for the adoption service have been working for Brighton and Hove for many years and prior to the local authority reorganisation were employees for East Sussex, inspectors were concerned that as employees changed their job within the organisation or obtained promotion that references were not appropriately undertaken and checks taken up.

Inspectors were concerned that files lacked: documentary evidence of qualifications, proof of identity including a photograph, full employment history and references. Inspectors were informed that the human Resources department do hold a number of electronic records on employees including a database with photographs, which are used for ID purposes and a separate database for CRB checks however inspectors were not informed about these at the time of the inspection.. However a number of items are still outstanding. This is a requirement and therefore reflects the low score on this standard.

Files of Panel members are also required to meet Regulation 11 (3)(d) Schedule 3 and Regulation 15 (1) Schedule 4 and again inspectors found that these files lacked: documentary evidence of qualifications, references, proof of identity including a photograph, employment history.



## 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?**

3

Brighton and Hove's main adoption service and the concurrency team is based in a large building in Brighton. This building houses the majority of staff employed within the fostering and adoption service. Rooms are available in the basement for contact with birth parents. These were in use at the time of the inspectors visit, but inspectors were informed that they had been furnished and decorated in a comfortable and pleasant manner and that birth families had access to a small kitchen to make drinks and snacks.

Emphasis and confidentiality issues was noted by inspectors, and social workers were especially sensitive to this issue when adopters were bringing children placed with them for contact with their birth families. The main adoption and permanence team and that of the concurrency team are situated in different parts of the building and are seen as quite separate, although inspectors were informed that communications is good and information shared regularly. The new adoption support team are based in a separate building in Hove and this has caused some operational difficulties in working together with other team members. The managers are fully aware of the concerns about accommodation and are actively working for a solution to this.

Inspectors checked the premises at both sites and found the Brighton site to be secure with a swipe entry card system in place the building is fully alarmed. The site at Hove was not so secure, but inspectors were assured that an alarm system was being fitted the following week.

All computers used by the adoption service are protected by a password system and a list of passwords is kept for access in emergencies following the recommendations of the recent serious case review.

There is a letterbox database, which inspectors found to be very secure with the password known only to the staff that operate the system.

Insurance on both buildings is organised corporately, and inspectors were informed that there was a disaster recovery plan in place.

**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 13<sup>TH</sup> September 2004 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 1<sup>st</sup> February 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"/> NO
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 Sharon Donnelly of Brighton and Hove City Council 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**                      Sharon Donnelly  
**Signature**                      \_\_\_\_\_  
**Designation**                    Head of Service, Fostering & Adoption  
**Date**                                18.01.05

**Or**

**D.3.2 I \_\_\_\_\_ of \_\_\_\_\_ am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:**

**Print Name**                      \_\_\_\_\_  
**Signature**                      \_\_\_\_\_  
**Designation**                    \_\_\_\_\_  
**Date**                                \_\_\_\_\_

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



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