



Making Social Care
Better for People

inspection report

Voluntary Adoption Agency

Parents and Children Together

7 Southern Court, South Street

Reading

Berks

RG1 4QS

8th March 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.

VOLUNTARY ADOPTION AGENCY INFORMATION

Name of Voluntary Adoption Agency

Parents and Children Together

Address

7 Southern Court, South Street, Reading, Berks, RG1
4QS

Tel No

0118 938 7600

Fax No

0118 959 4884

Email Address

info@pactcharity.org

Certificate Number of Voluntary Adoption Agency

F080000268

Name of Registered Provider:

Parents and Children Together (PACT)

Name of Manager:

Vacant

Linda Plummer (Interim Manager)

Is this service the principal office or a branch?

Is this a small principal office or branch?

Seven or less full-time equivalent social work staff, excluding manager.

Principal Office

Yes

Branch

No

Yes

Date of registration:

30th April 2003

Date of most recent certificate:

30th April 2003

Registration Conditions Apply?

NO

Date of last inspection:

NA

Date of Inspection Visit		8th March 2005	ID Code
Time of Inspection Visit		09:00 am	
Name of Inspector	1	Rosie Dancer	125017
Name of Inspector	2	Sean White	127556
Name of Inspector	3		
Name of Inspector	4		
Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the CSCI. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
Name of Specialist e.g. Interpreter/Signer (if applicable)			
Name of Establishment Representative at the time of the inspection		Ms Yvette Gayford and Ms Linda Plummer	

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INTRODUCTION TO REPORT AND INSPECTION

Voluntary Adoption Agencies which fall within the jurisdiction of the Commission for Social Care Inspection (CSCI) are subject to inspection, to establish if the service is meeting the National Minimum Standards for Voluntary Adoption Agencies and the requirements of the Care Standards Act 2000, the Adoption Act 1976 as amended, the Adoption Agencies Regulations 1983 as amended, and the Voluntary Adoption Agencies and Adoption Agencies (Miscellaneous Amendments) Regulations 2003.

This document summarises the inspection findings of the CSCI in respect of Parents and Children Together. The inspection findings relate to the National Minimum Standards for Voluntary Adoption Agencies published by the Secretary of State under section 23 of the Care Standards Act 2000.

The Adoption Agencies Regulations 1983 and the Voluntary Adoption Agencies and Adoption Agencies (Miscellaneous Amendments) 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 in relation to Voluntary Adoption Agencies regarding registration, the imposition and variation of registration conditions and any enforcement action.

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
- Required actions on the part of the provider
- Recommended good practice
- Summary of the findings
- Report of the Lay Assessor (where relevant)
- Provider's 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.

PACT (formerly known as Oxford Diocesan Council for Social Work) has been an adoption agency for some 50 years and was engaged in working directly with birth parents to place their infants for adoption until the mid-1990's. The agency's work then changed in focus to recruit, train assess and support prospective adopters to meet the needs of a wide range of children needing to be placed for adoption by local authorities.

In 1991 the agency first undertook home studies for those seeking to adopt from overseas, in agreement with local authorities, and became registered as a stand alone agency to undertake this work from 1998. In 1997 the agency was awarded the first of 2 Department of Health grants to promote the need for adoptive families from black and minority ethnic groups and to recruit families to adopt greater numbers of black children. In 2003, the agency's work in finding permanent families for children extended into long-term fostering and the agency became a registered fostering service for this purpose.

PACT's overall aims are to build and strengthen families through adoption, permanence and family support.

(Taken from PACT's statement of purpose.)

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 inspection was the first of PACT's Adoption Agency undertaken in relation to The Care Standards Act 2000 Part 111 and the National Minimum Standards introduced on 1st April 2003. The developments in adoption legislation and practice have initiated significant changes for those delivering an adoption service and with this in mind the inspectors are of the view that the evidence gathered during this inspection shows that PACT has kept abreast with legislation and standards.

Overall feedback from the adopters was positive, one adopter stated that they were:

"Extremely pleased and satisfied with the friendly, efficient and professional service.

Another stated:

" We found PACT to be the most professional, responsive, flexible and informed agency we have come across (3rd time adopters)

The inspectors were impressed with the enthusiasm shown by the trustees, managers and staff to further develop the service and hope that this report and its findings will assist them in this process.

There has not been a permanent manager in post since the Autumn of 2004; the inspectors were pleased to note that a manager had been appointed and was due to take up the post in early April 2005. Throughout this report the references to the manager relate to either the chief executive or the temporary manager in post.

The inspectors would like to thank the managers, staff and the adopters who took part in the inspection process for the hospitality shown to them during the time of the fieldwork.

Statement of Purpose (Standard 1)

This standard had minor shortfalls

The agency has a clear statement of purpose. The statement needs some minor amendments.

Securing and Promoting Welfare (Standard 2)

This standard was met

PACT targets recruitment at those people who are likely to be able to meet the needs of

children waiting in the care system for an adoptive placement.

PACT does not actively recruit adopters looking to adopt from another country.

Prospective and approved adopters (Standards 3-6)

The 4 standards assessed were fully met

PACT has developed separate information booklets for domestic and intercountry adopters; these were informative and well written.

PACT is a member of a consortium of adoption agencies and prioritises adopters wishing to adopt children from the care system.

Intercountry adopters self refer to PACT and are subject to the same processes of preparation, assessment and approval as carried out for domestic adopters.

The inspectors viewed a sample of case files and were impressed with the quality of assessment reports.

A number of adopters reported that they had found the preparation groups useful and informative; some had not found the venue they attended convenient and PACT was seeking extra venues to address this.

PACT has developed a risk assessment format which is completed as a part of the matching process; this format is a useful tool which provides clear information about areas of strengths and potential weaknesses.

PACT has developed a range of support services for adopters.

Birth Parents and birth families (Standards 7-9)

The 1 standard assessed was fully met.

PACT has a limited remit in enabling families to contribute to the maintenance of the child's heritage but nonetheless fully prepares and supports adopters in providing the child with clear information about his or her life story.

Adoption Panels and Agency Decisions (Standards 10-13)

3 standards assessed were fully met; 1 standard had minor shortfalls.

The written policies and procedures in respect of the adoption panel need some additions to fully meet the standard.

Prospective adopters are routinely invited to attend the panel.

The panel observed as part of the inspection process was properly constituted and was effectively conducted.

There was not a formal process of induction for panel members and the inspectors have recommended that such a process is developed.

Panel members are provided with relevant training.

Panel minutes were accurate and clearly stated the reasons for conclusions reached, and

recommendations made.

The decision making process is timely and effective.

The PACT panel does not hear best interest cases in respect of children or hold matching panels; these are the responsibility of the child's local authority.

Fitness to provide or manage an adoption agency (Standards 14,15)
2 of the 2 standards assessed were fully met.

PACT had been without a permanent manager since August 2004. In the intervening period two interim part time managers had been appointed, both were appropriately qualified and experienced to manage the fostering service. A new permanent manager was to start work in April 2005.

While the shortfall in terms of management cover had begun to have a minor impact on some areas of the agency's function such as file auditing and developmental work the inspectors were impressed at the way in which the agency had been able to minimise disruption to the day to day business.

Provision and management of the adoption agency (Standards 16-18)
3 of the 3 standards assessed were fully met

The inspectors were of the view that despite a shortfall in management cover the agency had continued to operate effectively.

There are a number of systems in place in respect of monitoring and controlling the work of the agency; these appear to work effectively.

PACT has access to a range of specialist advisors and is a member of a number of external agencies and organisations.

Employment and management of staff (Standards 19-23)
2 standards assessed were fully met; 3 standards had minor shortfalls

The recruitment procedures need to be expanded to include clear information about the processes involved.

The social workers were suitably qualified and experienced and the evidence gathered showed them to be highly skilled in their role. The inspectors did not meet with sessional workers but viewed examples of work they had undertaken and the quality was consistent with those workers employed on a permanent basis.

The inspectors identified some issues that the new manager will need to address. These are:

- Ensuring all annual appraisals are up to date
- Establish a file audit system
- Establish a caseload management system
- Developing a formal plan of training to include issues such as child protection
- Ensure that the disciplinary procedure is amended to meet regulations
- Ensure that the complaints procedures are amended and that staff receive training in the procedures

Complaints (Standard 24)

This standard had minor shortfalls

Complaints procedure needs to be developed to include information about how a child/person on behalf of a child can make a complaint and how to contact CSCI.

Records (Standards 25-28)

1 standard assessed was fully met, 2 standards had minor shortfalls, 1 standard had major shortfalls

PACT has written policy and procedural instructions to cover maintaining the confidentiality and secure safe keeping of both paper and electronic case files and their indexes.

The sample of adopters and children's files viewed were overall of a good standard.

Some minor issues in respect of files were noted as needing attention, these are:

- A risk assessment in respect of the risk of files from water damage needs to be carried out
- A formal system of recording supervisors decisions on files should be established
- Written agreements in respect to confidentiality issues as detailed in standard 26.2 need to be developed

There is a system in place for dealing with and keeping records of complaints.

The inspectors viewed a random sample of personnel files for members of staff and members of the adoption panel. None of the files viewed fully met the regulations and a requirement and recommendation have been made in respect of these issues.

Fitness of Premises (Standard 29)

This standard was met

The premises used at the time of the inspection were being shared with the training department and space was limited. PACT had purchased another building and when alterations are complete this should provide ample accommodation.

The building was alarmed and accessed via a secure entrance system.

Financial Requirements (Standards 30-31)

2 of the 2 standards assessed were met

The agency had good systems in place in respect of financial control, monitoring and reporting.

The accounts are externally audited on an annual basis.



Implementation of Statutory Requirements from Last Inspection

Requirements from last Inspection visit fully actioned?

NA

If No please list below the findings of this inspection on any Requirements that have not been actioned

STATUTORY REQUIREMENTS

Identified below are areas not addressed from the last inspection report which indicate a non-compliance with the Care Standards Act 2000, the Adoption Agencies Regulations 1983 and the Voluntary Adoption Agencies and Adoption Agencies (Miscellaneous Amendments) 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.

COMPLIANCE WITH CONDITIONS OF REGISTRATION (IF APPLICABLE)

Providers and managers of Voluntary Adoption Agencies must comply with statutory conditions of their registration. The conditions applying to this registration are listed below, with the inspector's assessment of compliance from the evidence at the time of this inspection.

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Condition	Compliance	
Comments		

Lead Inspector	<u>Rosie Dancer</u>	Signature	_____
Second Inspector	<u>Sean White</u>	Signature	_____
Regulation Manager	<u>Helen Norry</u>	Signature	_____
Date	_____		

STATUTORY REQUIREMENTS IDENTIFIED DURING THIS INSPECTION

Action Plan: The Registered provider and manager are 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 Voluntary Adoption Agencies and the Adoption Agencies (Miscellaneous Amendments) Regulations 2003 or the National Minimum Standards for Voluntary Adoption Agencies. The Registered Persons are required to comply within the given time scales in order to comply with the Regulatory Requirements for Voluntary Adoption Agencies.

No.	Regulation	Standard *	Requirement	
1	VAAS Regs 2003 Regulation 3 (1)	VA1	The manager must ensure that the statement of purpose is updated and amended as necessary.	By 29/04/05
2	VAAS 2003 Regulation 16 (1) (b)	VA20	The manager must ensure that the disciplinary procedure is amended to include a clear statement that failure to report an incident of suspected or actual abuse of a child to an appropriate person are grounds on which disciplinary proceedings may be instituted.	By 29/04/05
3	VAAS 2003 Regulation 11	VA24	The manager must ensure that the complaints procedure is amended to include all issues in regulation 11.	By 29/04/05
4	VAAS 2003 Regulation 14(3)(d) and 17(1)	VA28	The manager must ensure that all required information in respect of staff members as detailed in schedules 2 and 3 is obtained.	By 29/04/05

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 Registered Persons.

No.	Refer to Standard *	Recommendation Action
1	VA5	The manager should ensure that it is recorded if adopters are prepared to inform the service if an adoptive child dies in childhood or soon after.
2	VA11	The inspectors recommend that the manager consider introducing a more formal induction process for panel members
3	VA10	The manager should ensure that the panel policy and procedures should be updated to include reference to all issues identified in standard 10.2.
4	VA19	The manager should make arrangements to ensure that CRB disclosure certificates for any members of staff employed following this inspection are retained until the next CSCI inspection.
5	VA19	The manager should ensure that the recruitment policy/procedure documents include details of the interview, selection and appointment processes.
6	VA20	The inspectors recommend that the manager introduce a caseload management system.
7	VA20	The manager should ensure that all social workers have had an annual appraisal within the last 12 months.
8	VA20	The manager should re-establish the file audit system as soon as is possible.
9	VA23	The manager should ensure that the development of a formal programme of training is finalised.
10	VA24	<p>The complaints procedure needs to include information about:</p> <ul style="list-style-type: none"> • How a child or person on behalf of a child can make a complaint • How to contact the CSCI. • How to contact the Children’s Rights Director for England and Wales. <p>The inspectors recommend that when the procedure has been amended to comply with regulation staff are provided with updated training as detailed in standard 24.6.</p>
11	VA25	The manager should ensure that decisions made during staff supervision sessions are files on the respective case files.
12	VA25	The manager should carry out a risk assessment in respect to the storage of case files to determine if the risk from water damage is acceptable.
13	VA26	The manager should introduce written agreements in respect to confidentiality issues as detailed in standard 26.2

14	VA28	<p>The manager should ensure that:</p> <ul style="list-style-type: none"> • When a call has been made to a referee to verify their reference this should be recorded on the personnel file • Referees are asked to authenticate their reference via an official stamp or some such other method • The level of CRB check undertaken for individual staff is recorded
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* Note: You may refer to the relevant standard in the remainder of the report by omitting the 2-letter prefix e.g. VA10 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	NO
Checks with other organisations and Individuals	
• Directors of Social Services	YES
• Specialist advisor (s)	YES
Tracking Individual welfare arrangements	YES
• Interview with children	NO
• 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
Additional Inspection Questions	
Certificate of registration was displayed at the time of the inspection	YES
Certificate of registration accurately reflected the situation in the service at the time of inspection	YES
Total No. of staff employed (excluding managers)	6.63
Date of Inspection	08/03/05
Time of Inspection	9.00
Duration Of Inspection (hrs)	66
Number of inspector days	9

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 - 1.3(partial) and 1.5 – 1.7)

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

Key Findings and Evidence

Standard met?

2

The agency has a clear statement of purpose which provides a good description of the work the agency carries out. The statement does need some minor amendments and should include the address of the CSCI adoption head office.

The agency is able to provide an in house interpreting service where English is not the first language in four ethnic minority languages and would seek to provide an external service where other languages or other formats are required.

The policies and procedures viewed by the inspectors were in line with the statement of purpose.

Copies of the statement are readily available to social workers and others on request.

**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 trustees or management committee?

YES

Is there a children's guide to adoption?

NA

Does the children's guide contain all of the information required by Standard 1.4?

NA

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

As a voluntary agency PACT places children for other local authorities and therefore has not developed a formal plan for recruitment. PACT keeps well informed through the consortia about the needs of children waiting for an adoptive placement and aims to recruit a wide range of adopters.

The agency targets minority ethnic groups through the black families project and devises an annual programme for information evenings and preparation groups. The agency carries out advertising campaigns at key local community events, community services such as GP surgeries and libraries. There is a worker who has a day a fortnight allocated to carry out the co-ordination of recruitment.

PACT is actively involved in the matching process where they have been approached by a local authority in respect of one of their adopters. PACT ensures that all relevant information is fully assessed during this process. The inspectors noted an example whereby the information provided by the local authority about a child was inadequate and the PACT social worker ensured that further information was obtained.

Inter-country Specific

In respect of inter-country adoption the agency does not proactively recruit adopters. A booklet with general information about adopting from other countries is provided to enquirers.

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

25

Domestic

8 Inter-country

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

96.2

%

28.6% inter-country

Domestic

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

9

3 inter-country

Domestic

How many allegations of abuse or neglect were made, in the last 12 months, about adopters approved by the agency?

0

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 – 3.6)

Plans for recruitment will specify that people who are interested in becoming adoptive parents will be welcomed without prejudice, will be given clear written information about the preparation, assessment and approval procedure and that they will be treated fairly, openly and with respect throughout the adoption process.

Key Findings and Evidence	Standard met?	3
<p>The agency has a clear eligibility criteria and this is contained within the information booklets sent to enquirers.</p> <p>From reading the booklets provided the inspectors concluded that the agency provides good quality information about the adoption processes.</p> <p>Some of the questionnaires completed by adopters, who were at various stages of the process, indicated that where they had been unclear about the written information provided social workers met with them to clarify any issues.</p> <p>The agency uses information meetings and the duty system to prioritise any prospective adopters who may meet the needs of children known to be waiting for a placement. For these prospective adopters a speedy initial interview is offered.</p> <p>There are separate preparation groups for inter-country and domestic adopters and the agency operates a buddy scheme for any approved adopters who feel this would be useful to them. This scheme involves couples who have adopted offering prospective adopters advice and support.</p> <p><u>Inter-country Specific</u></p> <p>For inter country adoption, which is a complex processes, the written information provides readers with up to date basic information about the processes and makes it clear that adopters need to carry out their own research into the country of their choice. The inter-country booklet provides adopters with various contact numbers to enable them to begin their research.</p> <p>The content of the preparation groups emphasise the specific issues for children being adopted from outside the UK and there is also a focus on the child's need to know and understand about his or her heritage.</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**

There are separate preparation groups held for inter-country and domestic adopters. These groups are run at regular intervals throughout the year and at a number of venues. The inspectors noted that some questionnaires completed by adopters showed that for some, the venue of the preparation group had been inconvenient. The agency had identified this as having been an issue for some adopters and at the time of the inspection were actively seeking additional venues.

The responses to the questionnaires and from the adopters interviewed about the preparation process were overall positive. Comments received included:

- “Preparation sessions were professional and well thought out” (Intercountry adopter)
- “Good preparation course” (Domestic adopter)
- “Preparation was thorough” (Domestic adopter)
- “Preparation groups were well planned and the social workers were professional and sensitive.”(Inter-country adopter)

There is a system of annual review of the effectiveness of preparation carried out.

There is a thorough assessment process carried out in respect of adopter’s capacity to look after children throughout childhood.

The home study assessment follows the BAAF Form F assessment. The inspectors viewed four files and read a number of the Form F assessment reports. The inspectors were of the view that the Form F reports viewed were of excellent quality. The reports evidenced that a thorough and consistent approach was taken to the home study assessments and detailed analysis of information gathered had occurred in each case sampled.

Status, health and CRB checks references and other enquires had been taken up in each case sampled.

Responses from adopters questionnaires about how well they felt they had been kept informed were as follows:

- Nine felt they had always been kept informed
- Eight felt they were usually kept informed
- Four felt they were sometimes kept informed
- None felt they had never been kept informed

The inspectors noted that in all eight of the domestic adopters questionnaires the response had been that they felt they had always been kept informed, the remaining responses relate to inter-country adopters. The inspectors noted evidence to show that, on occasions, it had been the case that other agencies had failed to respond to PACT and therefore PACT had been unable to update adopters.

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

As PACT is not placing agency reliance has to be placed on other agencies providing accurate, up to date and full written information on the needs and background of a child being considered for matching with a PACT domestic adopter. The inspectors noted a very thorough approach taken by PACT in respect of assessing the quality of information provided about a specific child and identifying any gaps. The inspectors noted that PACT actively seek further information where required and would not progress a match when information is inadequate.

PACT has in place systems to:

- Ask adoptive parents whether they are prepared to update the adoption agency as to if the child is alive on an annual basis. The inspectors have recommended that the wording be revised to ask if adopters are prepared to inform the agency in the event of their child dying
- Explain the importance of the birth family having this information
- Pass the information on to birth families if appropriate.

The manager informed the inspectors that adopters make an album of information about themselves for the child. The inspectors did not view an example on this occasion but were informed by an adopter that she had prepared a booklet of information about herself prior to her children coming to live with her.

As part of the matching procedure social workers complete with adopters a comprehensive risk assessment; the inspectors viewed this as a useful tool in identifying areas of potential difficulties.

Does the VAA have written procedures for the use of the Adoption Register?

YES

Standard 6 (6.1 – 6.7)

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

Key findings and evidence**Standard met?**

3

Prospective adopters, whether they are domestic or inter-country adopters, are well prepared for a child coming to live with them. There is written information available from an early stage about the likely needs of children who have been through the care system or who have been born in another country. The preparation groups provide further information about these issues. During the home study process social workers further reinforce the messages from the preparation groups and where necessary help adopters further develop their understanding of such issues.

PACT has a range of systems in place in respect of offering support to adopters be they adopting from this or another country.

Examples of the support available include:

- A post adoption website
- Individual support from the social worker
- Buddy arrangements
- A Newsletter
- An Annual Picnic
- Post Approval Workshops covering such issues as contact and life story work
- Post adoption work – social work support which is task centred & time limited.
- The FACTS Service– a team of senior professionals working in Education, Health and Social Work who can provide consultation, 'signposting' and some direct work for families experiencing difficulties. Domestic adopters can access this service free of charge, for inter-country adopters a charge may be made.
- Adoptive father's workshops
- Providing information about self-help groups and national organisations

The agency has a clear procedure in the event of difficulties occurring in the placement which are aimed at avoiding a disruption. In the event of a disruption occurring there is clear guidance in place, which details actions to be taken, and expresses the importance of an inter-agency approach. There had no disruptions of placements with PACT adopters in the twelve months preceding the inspection.

Number of adopter applications started in the last 12 months

12

DOMESTIC

48 Inter-country

Number of adopters approved in the last 12 months <u>38 Inter-country</u>	14	<u>DOMESTIC</u>
Number of children matched with the agency's adopters in the last 12 months <u>30 Inter-country</u>	26	<u>DOMESTIC</u>
Number of adopters approved but not matched <u>31 Inter-country</u>	7	<u>DOMESTIC</u>
Number of adopters referred to the Adoption Register	14	<u>DOMESTIC</u>
How many placements disrupted, between placement And adoption, in the last 12 months?	0	

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 – 7.3 and 7.5)

The service to birth parents recognises the lifelong implications of adoption.

Key Findings and Evidence

Standard met?

9

This standard is not relevant to this agency.

Standard 8 (8,1 – 8.2)

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

Key Findings and Evidence**Standard met?****3**

PACT has a limited remit in enabling families to contribute to the maintenance of the child's heritage but nonetheless fully prepares and supports adopters in providing the child with clear information about his or her life story. The ways in which PACT supports adopters include:

- Helping adopters develop a good level of understanding about the importance of adopted children maintaining their heritage and links to their birth family where appropriate.
- Helping adopters to develop knowledge about the ways in which the work can be achieved
- Arranging and supporting adopters in meeting with birth parents and birth family members as a one off meeting
- Working with social workers in ensuring that life story work is carried out with the child in accordance with his or her (the child's) level of understanding
- Working with placing social workers to ensure that complete, good quality and appropriate information is available for the child, such as life story books
- Occasionally PACT has managed the direct contact arrangements for children with members of their birth family although at the time of the inspection there were no such arrangements in place
- For inter-country adopters the inspectors noted that the preparation assessment and approval processes reinforced the importance of children adopted from other cultures being enabled to develop a positive sense of their birth culture and country and helping adopters to think about the ways in which this could be best achieved.

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?****9**

This standard is not relevant to this agency.

Adoption Panels and Agency decisions

The intended outcomes for the following set of standards are:

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

Standard 10 (10.1 – 10.3)

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

Key Findings and Evidence	Standard met?	2
<p>There are written policies and procedures in place in respect of the adoption panel. These were in draft at the time of the inspection and need some additions to meet all points in standard 10.2. The inspectors discussed this with the panel chair; he had identified the shortfalls prior to the inspection and was discussing the changes required with the agency.</p> <p>Prospective adopters are given the opportunity to attend the panel to which their case is being presented.</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?	3
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The inspectors viewed the panel papers for the three months preceding the inspection and one inspector observed the panel hearing held on 9th March 2005. The panels had been properly constituted and from the evidence gathered the inspectors concluded that the individual panel members had suitable qualities and experience in adoption issues.

The overseas adoption manager is usually in attendance at panel to advise on any specific issues which arise in respect to inter-country adoptions.

New panel members are required to observe a panel prior to sitting on panel as a full panel member.

CRB checks are taken up in respect of panel members and members are required to sign a confidentiality agreement.

Panel members are provided with an induction, usually an ‘on the job’ coaching session, with the panel advisor. The inspectors have recommend that the manager look at introducing a more formal induction process for panel members

Panel members are provided with training in adoption matters, including inter-country matters and legal aspects of both domestic and inter-country adoption. Some of the training sessions include the adoption staff.

Does the adoption panel membership meet all of the statutory requirements?	YES
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Standard 12 (12.1 – 12.3)
Adoption panels are efficiently organised and conducted and are convened regularly to avoid delays in the consideration of prospective adopters and matching children and adopters.

Key Findings and Evidence	Standard met?	3
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The panel observed by one of the inspectors was noted as being efficiently organised and conducted and the members of the panel had been provided with the papers 10 days before the panel hearing. It was clear to the inspector that the panel members had scrutinised the papers in advance of the hearing and she noted that each panel member was well prepared.

Panel minutes were accurate and clearly stated the reasons for conclusions reached, and recommendations made.

Standard 13 (13.1 – 13.3)

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

Key Findings and Evidence**Standard met?**

3

The decision making process seemed timely and effective. The decision maker receives and reads all of the panel papers in advance of the hearing.

The decision maker attends the majority of panel hearings. This could be seen as an advantage in that it allows for decisions to be based first hand knowledge of the issues raised and resulting discussions. However there is the potential for her presence to have an influence on the panel discussion. The inspector who viewed the panel hearing on the 9th March 2005 did not note evidence to suggest that this may have been the case on this occasion but the inspectors have suggested that this is kept under review.

The adopters are told verbally of the panel recommendation, usually by the social worker on the same day; the decision maker makes her decision and a letter confirming this is sent to the adopters within 7 days.

The PACT panel does not hear best interest cases in respect of children or hold matching panels; these are the responsibility of the child's local authority.

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 – 14.6)

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 adoption service had been without a permanent manager since August 2004. In the intervening period PACT had appointed two interim part time managers, both were appropriately qualified and experienced to manage the fostering service.

There is a clear job description in place in respect of the role of the manager of the adoption agency; the inspectors suggest that this and all other job descriptions would benefit from being clearly dated.

As from the 1/04/05 a new manager will be in post and the inspectors note that she is suitably qualified and experienced in adoption issues.

While the shortfall in terms of management cover had begun to have a minor impact on some areas of the agency's function such as file auditing and developmental work the inspectors were impressed at the way in which the agency has minimised disruption to the day to day business.

Does the manager have Management NVQ4 or equivalent? (relates to the new manager who commences employment on 1/04/05)

YES

Does the manager have at least 2 years experience of working in a childcare setting in last 5 years? (relates to the new manager who commences employment on 1/04/05)

YES

Standard 15 (15.1 – 15.4)

Any person carrying on or managing the adoption agency are suitable people to run a voluntary organisation or business concerned with safeguarding and promoting the welfare of children.

Key Findings and Evidence

Standard met?

3

At the time of the inspection the manager managing the adoption agency on an interim basis had been subject to a satisfactory CRB check and references had been obtained.

The inspectors noted that while it had been stated by the manager that references were followed up by telephone enquiries this was not being evidenced on file. This issue has been made a recommendation under standard 28.

Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

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

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

Key Findings and Evidence

Standard met?

3

The inspectors were of the view that despite a shortfall in management cover the agency had continued to operate effectively.

From the evidence seen during the inspection the inspectors concluded that PACT operates in accordance with the statement of purpose.

There were clear arrangements in place in the event of the manager not being available and due to the part time nature of the locum managers' employment these arrangements were well established and were known to all staff.

Managers and staff were aware of their responsibility to declare any conflicts of interest. The manager informed the inspectors that the written information in respect to this was being revised.

The inspectors were satisfied by the evidence noted during the inspection that social workers had a good level of understanding about and respect for differences in terms of race, culture religion, sexuality, gender and disability. These areas of difference are explicit in the risk assessment carried out as a part of the matching process for domestic adoptions.

All approved domestic adopters are referred to the Adoption Register for England and Wales.

Number of statutory notifications made to CSCI in last 12 months:

0

Death of a child placed for adoption by the agency.

0

Referral to Secretary of State of a person working for the agency. (s2(1) of Protection of Children Act 1999)

0

Serious illness or accident of a child.

0

Serious complaint about an approved prospective adopter (no child placed).

0

Serious complaint about an approved prospective adopter (child placed by agency).

0

Serious complaint about an approved prospective adopter (child placed by another agency).

0

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

There are a number of systems in place in respect of monitoring and controlling the work of the agency which involve service users, the two adoption panels, the adoption and fostering consultative committee, staff members, and the board of trustees.

A detailed business plan is produced on a three yearly basis and progress of the plan is subject to regular monitoring through the various committees in place.

Interagency agreements are used and inter-country adopters are provided with details of the charges made by the adoption service through the BAAF form H1. Charges to inter-country adopters are subject to periodical review and are adjusted in line with raising costs to the agency.

There is clear information in respect to charges for the use of the FACTS service provided on enquiry.

The executive side of the agency are provided with reports from the adoption and fostering consultative committee on a quarterly basis. At least two trustees are involved in the adoption panel and trustees are fully involved in the various committees.

The trustees are provided with copies of all inspection reports.

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

Monthly?	<input type="checkbox"/>
Quarterly?	<input checked="" type="checkbox"/>
Less than Quarterly?	<input type="checkbox"/>

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

PACT has access to a range of specialist advisors.

The Medical advisor is a consultant paediatrician and is available for consultation. She is able to access other specialist medical advice as required.

The legal advisor is a solicitor advocate and is available for consultation by staff and panel. While he does not routinely attend panel he will attend when a case with legal complexities is being heard.

There were written protocols in place in respect of the medical and legal advisors.

PACT is a member of a number of external agencies and organisations including BAAF, the overseas adoption helpline, adoption UK, natural parents network and NORCAP.

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
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There are written recruitment procedures in place. These need to be expanded to include clear information about the interview, selection and appointment processes.

It is routine practice for each member of staff to be checked through the CRB process prior to beginning employment. The disclosure certificates for any members of staff employed following this inspection should be retained until the next CSCI inspection.

There is a system in place to ensure that CRB checks are updated every 3 years. The inspectors were informed that the effectiveness of this system at the time of the inspection had been reduced due to two members of staff sharing the personnel database. This was however in the process of being addressed at the time of the inspection.

All social work staff employed within the agency are suitably qualified and experienced in adoption work.

There is a system for social workers to obtain the post qualifying childcare award; at the time of the inspection 12.5% of social work staff had completed the award to level 1. A further member of staff was in the process of undertaking the award at level 1.

All social workers had and a good understanding of and were highly skilled in:

- The legislation in respect of adoption
- Assessment processes
- Child development and the impact of abuse and loss
- Communication
- Promoting equality, diversity and the rights of individuals
- Working with other agencies

The inspectors have commented on the excellent quality of the assessment work carried out by the social workers in standard 4.

Birth records counselling is provided by workers experienced and trained in this type of counselling and the workers showed a good understanding about, the impact reunions can have on all parties, and the legislation governing access to birth records.

The manager informed the inspectors that the specialist advisors involved in work with the agency were all professionally qualified in their respective fields and had a good understanding of adoption issues.

The agency does not employ unqualified staff to carry out social work functions.

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

YES

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

12.5

%

Standard 20 (20.1 – 20.12)

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

Key Findings and Evidence

Standard met?

2

The inspectors were of the view that despite the absence of a full time permanent manager staff had been overall managed effectively. The inspectors were confident that the new manager would implement the requirements and recommendations of this report speedily when she commences in post at the beginning of April 2005.

For the adoption service the level of delegation and responsibility were clearly defined and the inspector noted that each social worker employed within the team had lead responsibility for an area of work.

The social workers reported to the inspectors that they felt that their caseloads were manageable and that they received a good level of support on a formal and informal basis. The manager informed the inspectors that a formal system for the management of workloads was being investigated. With the recent increase in business and proposed future developments the inspectors recommend that a system compatible with the work of the agency be introduced as soon as is possible.

The inspectors noted that for some social workers annual appraisals were overdue. The manager informed the inspectors that this would be one of the first issues to be addressed by the new manager when she commences employment.

While there was a system of case file auditing in the absence of a permanent manager the system had slipped. The new manager needs to re-establish the system as soon as is possible.

Staff reported that they are supported in undertaking relevant ongoing development and that professional development issues are discussed as part of the annual appraisal system and reviewed during supervision sessions.

The level of clerical support and equipment was viewed as adequate at the time of the inspection by the social workers and the administration staff.

There is a duty system in place on each working day from 10.00 – 1.00.

All social workers employed by PACT have made applications to the GSCC for registration as social workers.

There is a staff handbook provided to staff which contains the relevant policies and procedures in terms of employment issues. The inspectors noted that the disciplinary procedure required the addition of a statement to inform staff that the failure to report an incident of suspected or actual abuse of a child to an appropriate person are grounds on which disciplinary proceedings may be instituted.

Standard 21 (21.1 – 21.4)			
There is an adequate number of sufficiently experienced and qualified staff to meet the needs of the adoption agency and they are appropriately supported and assisted in providing a service.			
Key Findings and Evidence	Standard met?	3	
<p>The inspectors were pleased to note that the starting date for the new full time manager was within four weeks of this inspection.</p> <p>The inspectors were of the view that with the manager in post the agency will be adequately staffed by a qualified and experienced staff team.</p> <p>There are systems in place to review the staffing levels on an ongoing basis.</p> <p>There is a bank of qualified and experienced social workers who carry out inter-country adoption assessments on a case-by-case basis. This system allows for the agency to take a flexible approach to business and for any staffing shortfalls in the adoption team to be covered effectively.</p> <p>There are adequate retention policies in place. The inspectors noted that staff retention was good.</p>			
Total number of social work staff of the agency PLUS 21 SESSIONAL WORKERS	13	Number of staff who have left the agency in the past 12 months	3
		Including 2 managers	
Number of social work posts vacant	.5		

Standard 22 (22.1 – 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
<p>PACT holds the Investors in People Award.</p> <p>Staff with whom the inspectors spoke felt that PACT was a fair and competent employer.</p> <p>PACT has appropriate arrangements in respect of insurance cover.</p> <p>There is a written whistle blowing policy in place.</p>		

Standard 23 (23.1 – 23.6)

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

Key Findings and Evidence

Standard met?

2

Training needs are identified through the annual appraisal system and reviewed on an ongoing basis through supervision sessions. The majority of appraisals were up to date; the inspectors were informed that the new manager will ensure that any outstanding appraisals will be carried out as a priority.

The manager provided the inspectors with a record of training for the social workers during the 12 months preceding the inspection.

The manager informed the inspectors that due to the shortfalls in the management arrangements the development of a formal plan of training had not been achieved. The inspectors have recommended that the training plan should ensure that issues such as child protection training are provided on a rolling basis.

Staff reported to the inspectors that they were able to access external training relevant to their role.

Standard 24 (24.1 – 24.9)
Complaints are resolved quickly and handled in a sensitive, thorough and non-biased manner.

Key Findings and Evidence	Standard met?	2
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There is a complaints procedure in place. For adopters this is contained within the information booklet and clearly explains the process.

The complaints procedure needs to be extended to include information about how a child or person on behalf of a child can make a complaint and the details of how to contact the CSCI. The inspectors also recommend that the manager consider including details of how to contact the Children’s Rights Director for England and Wales.

The manager informed the inspectors that staff had been trained in the complaints procedure but that training had not occurred since the procedure had been updated. The inspectors recommend that when the procedure has been amended to comply with regulation staff are provided with training as detailed in standard 24.6.

The inspectors viewed the records of complaints, which met the standard.

Number of complaints made by, or on behalf of a child, in the last year?	0
Number of the above complaints which were substantiated	0

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
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PACT has written policy and procedural instructions to cover maintaining the confidentiality and secure safe keeping of both paper and electronic case files and their indexes.

The inspectors viewed the archiving arrangements , as it was not clear if the storage for the archived material was water resistant the inspectors have recommended that a risk assessment be carried out to identify the level of risk and appropriate action be taken should the risk be deemed unacceptable.

The required checks are carried out in respect to adopters and other adults living in the home.

There is no formal system for recording decisions made by supervisors on file and the inspectors have recommended that a system be introduced.

The sample of files viewed were overall of a good standard. The inspectors noted that there were two formats for the index checklist, one seemed of more use than the other. It was noted on one file that an adopters date of birth had been recorded incorrectly and the manager agreed to ensure this was corrected.

Standard 26 (26.1 – 26.2)

The adoption agency provides all relevant information from its case files, in a timely way, to other adoption agencies and local authorities with whom it is working to effect the placement of a child.

Key Findings and Evidence	Standard met?	2
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PACT has clear procedures in place in respect of access to records.

Written agreements in respect to confidentiality issues as detailed in standard 26.2 need to be developed.

Standard 27 (27.1 – 27.6)

There is a written policy on case recording which establishes the purpose, format, confidentiality and contents of files, including secure storage and access to case files in line with regulations.

Key Findings and Evidence**Standard met?**

3

There were written policies in place in respect of case recording. Clear arrangements are in place in respect of secure storage and access to case files.

Separate records are kept for staff employed and in respect of complaints, compliments and child protection issues.

As discussed in standard 20 an effective system for case audit needs to be established. The quality of panel papers, including the Form F's are monitored by the panel.

Paper and electronic records are securely stored.

There is a system in place for dealing with and keeping records of complaints.

Standard 28 (28.1 – 28.2)

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

Key Findings and Evidence**Standard met?**

1

The inspectors viewed a random sample of personnel files for members of staff and members of the adoption panel. None of the files viewed fully met the regulations and a requirement has been made in respect of this.

The inspectors also made the following observations:

- While the inspectors were informed that references are verified via a telephone call to the referee there was no evidence on individual files to show this had occurred.
- The questionnaire forms which referees complete are not authenticated by the referees
- The forms placed on file to show that a CRB check has been carried out do not record the level of check made.

The inspectors have recommended that the manager consider addressing the above issues.

There is a system in place for ensuring that CRB checks are updated every 3 years.

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

The premises used at the time of the inspection were being shared with the training department and space was limited. However PACT had purchased neighbouring premises which were being adapted to provide additional rooms for the panel, training events and office space. The alterations were nearly complete at the time of the inspection. This extra space will provide ample accommodation.

The IT systems seemed efficient and there was secure storage for records.

The building was alarmed and accessed via a secure entrance system. All visitors are required to sign in and out of the building.

PACT has appropriate insurance cover.

PACT had developed a clear disaster recovery plan which included the safeguarding/backup of records.

Financial Requirements

The intended outcome for the following set of standards is:

- The Voluntary Adoption Agency is non-profit making and is financially viable.

Standard 30 (30.1 - 30.2)

The adoption agency ensures it is financially viable at all times and has sufficient financial resources to fulfil its obligations.

Key Findings and Evidence

Standard met?

3

The inspectors noted within their knowledge of such matters that the agency had good systems in place in respect of financial control, monitoring and reporting.

Standard 31 (31.1 – 31.5)

The financial processes/systems are properly operated and maintained in accordance with sound and appropriate accounting standards and practice.

Key Findings and Evidence

Standard met?

3

The accounts are externally audited on an annual basis.

Financial staff have clear job descriptions and receive regular supervision and annual appraisal.

It is planned that in 2005 there will be an upgrade to the accounting system and the financial procedures will be subject to review as part of this process.

The trustees receive written information on the financial state of the agency at each trustees meeting.

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PART C

LAY ASSESSOR'S SUMMARY

(where applicable)

Lay Assessor _____ **Signature** _____
Date _____

D.1 Registered Person'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 8th March 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

YES

Comments were received from the provider

YES

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

YES

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

YES

Note:

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

D.2 Please provide the Commission with a written Action Plan by 6th May 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

YES

Action plan was received at the point of publication

YES

Action plan covers all the statutory requirements in a timely fashion

YES

Action plan did not cover all the statutory requirements and required further discussion

NO

Provider has declined to provide an action plan

NO

Other: <enter details here>

Public reports

It should be noted that all CSCI inspection reports are public documents.

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