



Making Social Care  
Better for People

# inspection report

Local Authority Adoption Services

## **Borough of Poole Adoption Service**

Civic Centre

Poole

BH15 2RU

4th- 6th August 2003

## **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**

Borough of Poole Adoption Service

**Headquarters Address**

Civic Centre, Poole, BH15 2RU

**Adoption Service Manager**

Joyce Spiller

**Tel No:**

01202 633203

**Address**

Civic Centre, Poole, BH15 2RU

**Fax No:**

**Email Address**

**Certificate number of this adoption service**

**Date of last inspection**

N.A.

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

N.A.

<b>Date of Inspection Visit</b>		4th August 2003	<b>ID Code</b>
<b>Time of Inspection Visit</b>		10:00 am	
<b>Name of Inspector</b>	<b>1</b>	Vlasta Novak	127535
<b>Name of Inspector</b>	<b>2</b>	Mary Miller	072863
<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 NCSC. 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>			

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## INTRODUCTION TO REPORT AND INSPECTION

Local authority adoption services are subject to inspection by NCSC, 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 NCSC in respect of Borough of Poole 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 NCSC 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.

Borough of Poole Adoption Service

## BRIEF DESCRIPTION OF THE SERVICES PROVIDED.

The Borough of Poole is situated on the south coast of Dorset. It is a small unitary authority that provides a full range of services previously provided by Poole Borough Council and Dorset County Council.

The adoption service provided by the Borough is located in the social services fostering and adoption team. Joyce Spiller manages both the fostering and adoption service. There is a small team of two qualified social workers, one of whom is senior practitioner and a recently appointed social work assistant; a part time administrator supports the adoption team.

The adoption service provides:

- Recruitment of adopters.
- Training for prospective and approved adopters.
- Assessment of prospective adopters.
- Presentation of assessment reports to the adoption Panel.
- Adoption placements.
- Representation at two adoption consortiums.
- Post adoption support.
- Re assessment for 2<sup>nd</sup> time adopters.
- Inter-country adoption.
- Letterbox service.
- Initial interview for adopted people seeking their records.
- Assessment for step-parent adoptions.
- Review of Adoption and Residence Order allowances
- Advice and Attendance at Permanency Planning and Placement Agreement Meetings

## 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.)

A small team consisting of one senior practitioner, one social worker, one social work assistant and a half time administrator post provides the Borough of Poole adoptions service. The manager is responsible for both the adoption and fostering service provision.

The team is based in the offices occupied by the children and families services teams. The inspection found positive working relationships between the field social work teams and the adoption team. The adoption team has also developed good collaborative relationships with its neighbouring authorities and the two adoption consortiums in the south and southwest. The team strength lies in their ability to be flexible, innovative and creative which we find commendable.

The inspection found evidence of good planning and monitoring systems in place of permanency planning for children. Records showed more timely decision making and timescales improved with good structural arrangements in the form of meetings to progress adoption plans. Delays identified by field social workers tended to lie currently with the court process with lengthy waits for hearing dates.

#### **Statement of purpose**

The current statement of purpose does not meet the requirements of the NMS and Regulations. Poole does not currently have a purpose designed children's guide for adoption.

The Policies and procedures for the service require additions to be in line with the NMS and Regulations these are identified in the main body of the report.

#### **Securing and promoting welfare**

There is a clear strategy for recruitment of adopters; the service is on line to meet its target for 2003/4. The assessments showed good detailed evidenced documents with a competency based approach being introduced. Some areas of assessment have been identified for development.

Matching considerations placed the needs and wishes, welfare and safety of the child at the centre of the adoption process. Good practice and success are evident by there being only one disruption in the last five years.

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

The team demonstrate a high level of commitment to recruitment, training, assessment and support.

Adopter's feedback expressed some dissatisfaction about the initial response. They stated that their experiences afterwards were positive, they felt well prepared, trained and supported at all times by the team.

### **Birth parents and birth families**

The Borough offer services for birth families, which are commissioned from The South West Adoption Network.

The team provide initial interview for adopted adults with on going counselling commissioned by Swan.

### **Adoption Panel and Agency decisions**

The adoption panel is properly constituted and meets monthly. Panel members confirmed that they have papers in advance and that minutes of the meetings are clear and informative.

Adopters had mixed feelings about attending panel but appreciated the prompt response of the panel's recommendation on the day and follow up from the agency decision maker.

The inspection found practice in place, which requires underwriting by polices, and procedures.

Panel training needs, regularly, to include valuing heritage, ethnicity and diversity for members who require support and encouragement to develop these concepts.

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

The manager is appropriately qualified and has many years professional child care experience.

The manager was not available during the inspection, the senior managers had appropriate measures in place to cover the absence but it is strongly recommended that this situation be monitored closely.

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

There are recruitment and selection procedures in place, which ensure appropriately qualified and experienced staff, are recruited.

Staff receive regular supervision and support and training.

The inspection found areas of practice, which had been given less priority due to pressure of work.

### **Records**

Appropriate records are maintained securely. The standard of recording varied, the inspection found a need for an audit system which would provide evidence of management endorsement of records, supervisory decisions and quality assurance of records.

### **Fitness of premises**

The offices are appropriately laid out, accessible and fully insured. They provide a resourced base for work and training for prospective and approved adopters.

## 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:

YES

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:**

There is no current Statement of Purpose. Regulation 2

There is no current Children's Guide. Regulation 3

There are no written records of telephone enquiries of personal references for staff. Regulation 6 & 11.

There is no documentary evidence of qualification on personnel files. Regulation 6 & 11

There are no individual files maintained for panel members. Regulation 11.

The written assessment reports do not contain sufficient account of and opinions on valuing diversity. Regulation 8 of The Adoption Regulations 1984.

**Implementation of Statutory Requirements from Last Inspection  
(Not relevant at first NCSC 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 National Care Standards Commission to monitor compliance with the above requirements.**

**Borough of Poole Adoption Service**

**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 and recommendations 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	2	LA1	A statement of purpose must be in line with the NMS 1, Regulation 2 (1) and must contain information listed in Schedule 1 of the regulations.  Provide a copy for the commission.	31 <sup>st</sup> December 2003
2	3	LA1	A Children's guide must be inline with NMS 1.4, Regulation 3 (1) and must contain information listed in Schedule 2 of the regulations.  Provide a copy for the commission.	31 <sup>st</sup> December 2003
3	6 & 11	LA15LA19	Manager and staff records must contain written record of telephone enquiries of references.  Manager and staff records must contain documentary evidence of relevant qualifications.  In line with regulations 6 & 11 and schedule 3.	From now on.

4	Reg.8 (g) of the Adoption Agency regulations 1984.	LA4	Form F assessment reports must provide further competency based evidence of parenting capacity and written exploration of applicant's values and opinions on valuing diversity.	From now on.
5	11	LA28	The agency must maintain an up to date file for each panel member.	From now on.

### 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	LA3	The agency should examine the organisation of response to initial enquiry and follow-up to prospective enquires, to ensure prompt action is taken and enquirers are informed of reasons for delay.
2	LA10	The panel policies and procedures should include those listed in NMS 10.2.
3	LA28LA11	The agency should provide induction training for new members within 10 weeks of becoming a member.  Panel members training should include valuing heritage and ethnicity.
4	LA14	Service manager should monitor and review the staffing levels of the adoption team to ensure sufficient staff continue to be available to meet the requirements of the service.
5	LA16	The agency should provide a written procedure that covers arrangements for the use of services provided by the Adoption Register for England.
6	LA17	The executive side of the council should receive a written report on the management and outcome of the service at least every six months.
7	LA18	The agency should provide a written protocol governing the role of specialist advisers.
8	LA27LA25	The agency should introduce a file audit system to provide evidence of management endorsement of records, supervisory decisions and quality assurance of records.

- 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	NO
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	4/8/03
Time of Inspection	10.00AM
Duration Of Inspection (hrs)	64
Number of Inspector days	6
Additional Inspection Questions:	
Certificate of Registration was displayed at time of inspection	NA
The certificate of registration accurately reflected the situation in the service at the time of inspection	NA
Total Number of staff employed (excluding managers)	4

The following pages summarise the key findings and evidence from this inspection, together with the NCSC 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?

1

A statement of purpose is required that is in line with NMS 1.1 & 1.2 and contains the matters listed in Schedule 1 of The Local Authority Adoption Service (England) Regulations 2003.

The executive side of the council formally approves the statement of purpose, and the agency reviews, updates and modifies it where necessary at least annually.

The commission should be provided with a copy of the statement of purpose by December 31 2003 and notified of any revision within 28 days.

A children's guide is required that is in line with NMS 1.4 & 1.5 and contains the matters listed in Schedule 2 of The Local Authority Adoption Service (England) Regulations 2003.

The commission should be provided with a copy of the children's guide by December 31 2003 and notified of any revision within 28 days.

The agency should ensure that the policies and procedures and written guidance to staff accurately reflect the statement of purpose and that all those working in the service are aware of the contents of the statement of purpose and a copy is readily available.

Has the Statement of Purpose been reviewed annually?  
(Record N/A if the information is not available)

NA

Has the Statement been formally approved by the executive side of the council?

NA

Is there a children's guide to adoption?

NO

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

NO

## Securing and promoting children's welfare

The intended outcome for the following set of standards is:

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

**Standard 2 (2.1 - 2.3)**

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

**Key Findings and Evidence**

**Standard met?**

**3**

The business plan for adoption services (2003-4) provides a written plan to recruit sufficient adopters to meet the needs of the range of children waiting for adoption locally. Staff interviewed confirmed its implementation.

Recruitment of adopters is targeted to maximise the opportunity to meet the needs of children.

Staff explained that Poole has a predominantly white population; therefore they use the two consortiums, National Adoption Register and national advertisements to find families for children with needs arising from their ethnicity, which may not be met in the Poole area.

Examination of data provided, panel minutes and children's records showed siblings are placed together unless one family would not meet their individual assessed needs.

Children's views and feelings are found recorded on their form E reports and written reports to Panel.

Children seen when visiting adopters explained that they had been consulted about their prospective adopters and described information and introductions they had with their potential adoptive parents.

**In the last 12 months:**

**How many children were identified as needing adoptive families?**

17

**How many children were matched with adopters?**

14

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

10

**How many children were placed with other services' adopters?**

5

**How many children were referred to the Adoption Register?**

X

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

13

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

X

%

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

4

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

0

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

X

## Prospective and approved adopters

The intended outcome for the following set of standards is:

- The adoption agency recruits and supports sufficient adopters from diverse backgrounds, who can offer children a stable and permanent home to achieve a successful and lasting placement.

Standard 3. (3.1 – 3.3 and 3.5 - 3.6)

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

**Key Findings and Evidence**

**Standard met?**

**2**

There are appropriate written policies and procedures for the recruitment of adopters and information for inter-country adopters.

Written criteria and information on becoming an adoptive parent is provided for prospective adopters and bi-monthly information meetings where experienced adopters are available to talk to people.

Feedback from adopters indicates some disappointment at the length of time to get started and their experience of mixed initial response. Feedback also indicates a high number of people not understanding how they can make a complaint.

It is strongly recommended that the agency re-examine the organisation of the response process for initial enquiries, to exclude delay. If delay is unavoidable then introduce simple ways of keeping applicants informed about the delays and timescales.

Adopters interviewed considered they were well informed about the process of becoming an approved adopter and children who needed families locally.

The inspection found the agency would prioritise prospective adopters who are most likely to meet the needs of children waiting, training can be provided by neighbouring authorities to avoid delay and assessment reports 'fast tracked'.

**Standard 4. (4.1 – 4.9)**

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

**Key Findings and Evidence**

**Standard met?**

**2**

The preparation programmed examined showed a comprehensive training course within a framework of equal opportunities and anti-discriminatory practice. The agency uses experienced carers, child psychologist and a lawyer to provide input to sessions.

Adopters interviewed stated that they felt it was an excellent preparation course, which covered, the kind of children needing families, the assessment and legal process. They were able to describe topics covered, which addressed sensitive issues and potential demands and challenges for adopters.

Assessments examined showed good detailed evidenced documents, with competency based assessment being introduced. The section dedicated to valuing diversity would benefit from further exploration with prospective adopters to provide evidence of adopters value base and acceptance of difference in others such as sexuality, lifestyle and disability. All the required references and checks are undertaken and recorded appropriately.

It is required that further use of competency assessment be introduced when exploring parenting capacity.

It is required that reports comment further on adopter's ability to value difference in others in particular exploring how they will manage diversity in the child/ren they adopt such as sexual orientation and family background.

<b>Standard 5 (5.1 – 5.4)</b> 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.		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	3
<p>There is a clear written policy and procedure for matching, introduction and placement process. Adopters described how they are informed of this process during training and their experience of receiving information about children in the BAAF form E format.</p> <p>Adopters considered that they were given ample time to read material and make informed decisions.</p> <p>There is a written agreement between Poole Borough and adopters, which requires adopters to notify the borough of the Childs welfare annually.</p> <p>Adopters prepare photos, videos and information; this is shared with children before the initial meeting. Material examined showed a range of information tailored to the Childs age and understanding.</p>		
<b>Does the local authority have written procedures for the use of the Adoption Register?</b>	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**

Adopters described formal and informal networks of support provided by the authority. They include group meetings, training events, social functions and access to South West Adoption Network and other professionals. Adopters also valued the informal links they made during the initial training and assessment period.

Poole uses an external advisor for intercountry adoptions.

The preparation training course includes session on keeping information for children and levels of contact that may be required.

Training includes addressing racism and understanding cultural needs.

The inspection found one disruption during the last 5 years. Record of the disruption meeting held shortly afterwards, showed appropriate support prior and after the disruption to both the adopters and children.

**Number of adopter applications started in the last 12 months**

4

**Number of adopters approved in the last 12 months**

12

**Number of children matched with the local authority's adopters in the last 12 months**

10

**Number of adopters approved but not matched**

6

**Number of adopters referred to the Adoption Register**

8

**How many placements disrupted, between placement and adoption, in the last 12 months?**

1

## Birth Parents and Birth Families

The intended outcomes for the following set of standards are:

- **Birth parents are entitled to services that recognise the lifelong implications of adoption. They will be treated fairly, openly and with respect throughout the adoption process.**

### Standard 7 (7.1 – 7.5)

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

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>There is a written policy and procedure for working with birth parents. Social workers interviewed described their experiences of including birth parents in concurrent planning for children and the tensions this can create.</p> <p>Details of birth parents views about adoption and contact are recorded on the Form E. This written information is not always made available to birth parents prior to it being passed to the panel or adopters.</p> <p>Birth parents have access to the South West Adoption Network and can be referred by the authority if they request.</p> <p>Birth parents have access to support groups run by Dorset and Bournemouth authorities and are invited to attend an annual social event organised by Poole.</p>		

### Standard 8 (8.1 – 8.2)

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

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>Children have life story work undertaken by their social worker. The adopters visited confirmed that children had comprehensive written record and memorabilia in an appropriate form. Children spoken to informally showed books and photographs of their early life prior to adoption.</p> <p>The authority maintains letter box exchange of information for birth parents and children. Comments received during the inspection indicate an expected improvement in this service with the recent appointment of a social work assistant.</p>		

**Standard 9 (9.1)**

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

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

3

The support arrangements are the same as those identified in Standard 7.

Poole has a contract with South West Adoption Network to provide support to birth parents and birth families.

Birth parents have access to support groups run by Dorset and Bournemouth authorities and are invited to attend an annual social event organised by Poole.

## Adoption Panels and Agency decisions

The intended outcomes for the following set of standards are:

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

### Standard 10 (10.1 – 10.3)

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

Key Findings and Evidence	Standard met?	2
<p>The current policies and procedures do not include all those identified in NMS 10.2.</p> <p>It is recommended that the Adoption Panel procedures be updated to be in line with those listed in NMS 10.2.</p> <p>It is evident from interviews conducted with the panel chair and members, minutes examined and observation that business is conducted appropriately, and that although some written procedures are not in place appropriate action is taken.</p> <p>There is a written protocol for the attendance of prospective adopters at the panel. All are invited to attend.</p> <p>Adopters stated that they were well prepared for attending panel and felt supported by the assessing social worker. Opinions varied about the validity of attending, not quite understanding what this achieved other than a token meeting with questions they felt had already been asked. Some expressed discomfort with appearing in front of so many strangers in such a 'formal setting'.</p> <p>Adopters did appreciate being given verbal confirmation of the panel's recommendation to the agency on the day they attended, and confirmed that this was followed up by a written decision by the agency within one week.</p>		

**Standard 11 (11.1 – 11.4)**

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

**Key Findings and Evidence**

**Standard met?**

2

The adoption panel membership is properly constituted with membership in line with the regulations. Current members showed individuals with suitable qualities and experience.

Observation of the panel meeting demonstrated good practice in considering the reports, matching and up dates of recent adoption placements. The open debate produced informed and agreed outcomes.

From the observations of the panel and discussion with the panel chair there is a need for regular training with regard to ethnicity and valuing heritage, in particular for members not necessarily from a social work or care background.

It is recommended that valuing heritage and ethnicity is included in the next training event provided for panel.

Examination of panel member's records showed current CRB, references and checks satisfactorily completed, but the current form of filing keeps all records together in one folder and contains details of members now left.

It is recommended a separate record be maintained for each current panel member.

There is a formal induction process which involves meeting with the Panel Chair or Panel Adviser to go through the Adoption Panel members handbook and to observe a Panel prior to becoming a full Panel member. Following this there are opportunities to attend national and regional training events, an annual training day for Panel members and training provided at the end of Panel meetings.

Panel member's records showed signed agreements between members and Poole, which stated the expectations of a panel member and confidentiality.

Panel members interviewed described various training events for the panel including legislation, policy and practice, Attachment Theory and trans-racial placements.

**Is the panel a joint panel with other local authorities?**

NO

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

YES

**Standard 12 (12.1 – 12.3)**

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

**Key Findings and Evidence**

**Standard met?**

**3**

The panel meets monthly, minutes for the last years meetings showed a standard format summarising discussion and recommendations made. The programmed for the rest of the year showed monthly planned meetings.

Panel members and social workers stated that they received papers normally within five days of the panel meeting.

A written record of the agencies decision maker's comments and decision showed further consideration of the matters and subsequent recommendations for action and prompt response to adopters.

**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**

A written record of the agencies decision maker's comments and decision showed further professional consideration of the matters surrounding each case and any subsequent recommendations for action.

Social workers explained that they inform children of panel decision in person. The parent/guardian is sent a letter tailored to the individual circumstances.

Prospective adopters are informed verbally on the day of panel recommendations and within a week of the agency decision by letter.

## Fitness to provide or manage an adoption agency

The intended outcomes for the following set of standards are:

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

Standard 14 (14.1 – 14.3 and 14.5 – 14.6)

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

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

### Key Findings and Evidence

Standard met?

3

Joyce Spiller is the manager of the adoption service. In the last five years she has held the post of manager for adoption and fostering service provided by Poole.

Joyce is professional qualified; CQSW and NVQ level 4 Certificate in Management.

At the time of the inspection Joyce was not available for interview.

The inspection found that there is sound overall management of the service with other members of staff providing anecdotal evidence of supervision and team meetings. The two social work members of the team interviewed stated that they were able to access the manager for informal supervision at any time. Caseloads are allocated by agreement and particular cases kept to provide continuity.

The absence of the manager has impacted upon the team work allocation. The senior practitioner explained that she is undertaking management tasks, which necessitates prioritisation of the team workload.

It is evident that this is a small but effective team who work closely in partnership. The senior managers have identified that the increased demands upon the adoption service will require review of resources/staffing.

It is recommended that regular review of resource and staffing be a commitment by the department to ensure the efficiency of this service, not only to address the growth of the service but more urgently any long term absence of the manager.

There are clear lines of responsibility in the service and the job description for the manager sets out the duties and responsibilities.

Does the manager have Management NVQ4 or equivalent?

YES

Does the manager have at least 2 years experience of working in a childcare setting in last 5 years?

YES

**Standard 15 (15.1 – 15.4)**

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

**Key Findings and Evidence**

**Standard met?**

**2**

The manager has been in post since June 1997.

Examination of the H.R. file showed no written record of telephone enquiries to referees. The manager has an enhanced CRB check which has been renewed during the last year.

It is required that written evidence is maintained on individuals H.R. files of telephone enquiries to referees.

## Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

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

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

Key Findings and Evidence	Standard met?	2
<p>The service does not have a current statement of purpose in line with the NMS, but staff interviewed were clear about their roles and the purpose of the agency.</p> <p>Clear arrangements are in place when the manager is absent, the current situation demonstrates the effectiveness of these. The senior practitioner deals with operational issues and the principal officer (services management) deals with delegated functions and budget management.</p> <p>The principal officer explained that she is acting as team manager for the service when require but is able to leave the day to day management of the service to the senior practitioner.</p> <p>The senior practitioner explained that due to the size of the service she has knowledge of all cases and is able to delegate work effectively.</p> <p>Diversity training is in place across the service and is undertaken by all staff. 'Team Champions' are to be nominated to assist/encourage staff in understanding of race, culture and diversity issues.</p> <p>There is no written procedure covering the arrangements for the use of service provided by the adoption register for England and Wales. It is evident from speaking to social workers and examining files that the service actively uses the adoption registered.</p> <p>It is recommended that a clear and concise written procedure be added to the policies and procedures manual.</p>		
<p><b>Number of complaints received by the adoption service in the last 12 months</b></p>		1
<p><b>Number of the above complaints which were substantiated</b></p>		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?**

**2**

The policies and procedures manual shows appropriate systems and strategies in place for monitoring and controlling the activities of the agency.

The adoption panel chair explained the panel role of quality assurance monitoring assessment reports.

The senior management group receives quarterly statistical bulletins of the adoption service activities and performance.

There is a report from the adoption panel, which is currently presented annually to committee.

It is recommended that the executive side of the council receive written reports on the management and outcomes of the adoption service every six months in line with NMS 17.3.

The views of adopters and children are sought as part of the reviewing process of care planning and feedback.

Details of charges for services are sent with supporting documents in the case of inter-agency placements.

There is a written policy and guidance on adoptions allowances, purchasers of services are given written statement of allowances paid to adopters on and individual basis.

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

<b>Monthly?</b>	NO
<b>Quarterly?</b>	NO
<b>Less than Quarterly?</b>	YES

**Standard 18 (18.1 – 18.5)**

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

**Key Findings and Evidence**

**Standard met?**

**2**

The current panel membership includes three specialist advisers, one medical advisor, one psychotherapist and one legal advisor.

The medical advisor is currently a community consultant paediatrician.

The legal advisor is the borough solicitor who is also available for consultation by staff.

Advice on race and culture issues is obtained via Dorset Race Equality Council, DEED, and BAAF. Specialist consultation is also commissioned for individual cases.

There is no written protocol governing the role of specialist advisers. They are suitably qualified and registered by the appropriate professional bodies.

It is recommended that a written protocol is produced governing the role of specialist advisers in line with NMS 18.5.

## Borough of Poole Adoption Service 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

All the adoption staff H.R. files examined showed appropriate recruitment and selection procedures are followed. There are some omissions in records to meet the NMS and regulations.

It is required that a written record of telephone enquiries is kept also identified in NMS 15.

It is required that documentary evidence of any relevant qualification is kept in respect of anyone managing or working for the adoption service in line with schedule 3 of the regulations.

Current CRB checks are in place for all members of the adoption service staff.

All the adoption social work staff are qualified and have a good understanding and many years experience of adoption. They demonstrate significant experience and understanding of legislation, child development, and assessment and communication skills. The evidence is found from adopters stated experience of recruitment, training and assessment as well as the written form F assessment reports.

One social worker will complete PQ1 by October 2003 one will commence in January 2004.

Section 51 counselling is undertaken by the adoption S.W. in the first instance and later in conjunction with South West Adoption Network.

All other professional staff hold relevant qualifications and have a good understanding of adoption. This is demonstrated in the recorded minutes of panel discussion and direct observation of the adoption panel.

The senior practitioner supervises the social work assistant.

Birth parents do not currently have an identified support worker. Birth parents are referred to South West Adoption Network for support.

<b>Do all of the adoption service's social workers have DipSW or equivalent?</b>	YES	
Borough of Poole Adoption Service		
<b>What % of the adoption service's social workers have a PQ award?</b>	0%	%

**Standard 20 (20.1 – 20.12)**

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

**Key Findings and Evidence**

**Standard met?**

**3**

The current team is small and work is allocated between the two qualified social workers (one senior practitioner) and the newly appointed social work assistant.

The manager holds relevant qualifications and has several years experience in a management role.

Due to the size of the team and volume of work staff explained that work is prioritised, workload management is monitored in supervision.

Feedback from adopters indicate that the time from initial enquiry to training, assessment and approval can be lengthy this is an area which will need to be closely monitored by the manager.

The team have good established networks with other L.A. and collaborate on providing training to address the need for waiting between the two courses provided annually by Poole.

Formal recorded supervision is held on a monthly basis.

Staff described on-going training provided, but stated occasionally work priorities would overrule attendance.

The administrative service for the team has recently been increased to one half time worker. The feedback from carers indicate some disappointment to initial enquiry and waiting to begin the process (as identified in NMS3) this is an area to be addressed as soon as possible.

The staff stated that they have copies of documents listed in NMS 20.12 and job descriptions that reflect their duties and responsibilities

**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

Service information and statistics indicate that the team are currently well placed to meet 2003/4 targets for recruitment of adopters and placement of children.

Comments from prospective adopters and social work colleagues indicate that they believe team are currently working at capacity. As previously mentioned this situation needs monitoring closely to ensure that there is sufficient staff to meet the needs of the adoption agency.

A social work assistant has recently been appointed to meet the new legislative requirements re adoption support.

Social work bank staff have been used in the past to undertake assessments at times of peak demand.

Staff stated that they receive regular supervision, training and feel supported. They described some incidents when training opportunities have been missed to due to prioritising work commitment.

<b>Total number of social work staff of the adoption service</b>	2	<b>Number of staff who have left the adoption service in the past 12 months</b>	0
<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

Comments from staff interviewed indicate that they felt supported and valued by the managers and the Borough. They identified the size of the department as being beneficial in providing direct lines of communication and developing close working relationships.

Staff described a system for annual assessment of their development needs (EDI); they had mixed experience of the regularity of this being undertaken.

There are a range of employee support services in place, counselling and access to Borough of Poole chaplain.

There is a written whistle blowing policy in place included in the staff handbook.

**Standard 23 (23.1 – 23.6)**

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

**Key Findings and Evidence**

**Standard met?**

**3**

The training programme does not address all staff training needs due to viability and cost effectiveness due to the size of the staff group, this shortfall is addressed by staff individually identifying training opportunities from national organisations such as BAAF and social work press.

New members of staff described appropriate induction programmes tailored to their post. The Borough offers NVQ training for unqualified staff and DipSW secondments through the open university.

Staff explained that they will 'cascade' training information they have received at team meetings.

Social work and adoption staff have recently presented a training event to colleagues, which addressed current legislation and casework relevant to their jobs.

The annual adoption service business plan includes a training plan it reflects the policies and legal obligations of the agency.

Borough of Poole Adoption Service

## 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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Separate files are maintained for children and prospective and approved adopters.

Case records are stored in separate locked file cupboards. There is a written policy and procedure regarding storage, confidentiality and access.

Access to records on computer are password protected and backed up by the IT system. Access to records outside of the adoption team is by written request only and is overseen by the Children's service manager.

Records of references, health checks and CRB checks for prospective adopters are in line with the requirements of the regulations.

Case records examined showed up to date records. Running records were not always signed by social workers in the case of children's files. Children's files are congruent with the looked after children system.

It is recommended that a system of file audit be introduced to provide evidence of management endorsement of the records, supervisory decisions and quality assurance of records.

**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

Information is exchange at the linking stage of the process to enable adopter's social workers and children's social workers to make informed decisions.

Adopters described their experience of having full information on children and being assisted by adoption social workers to gather further details.

Adopters also described visits by the Childs social worker to gather further information and details.

**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 is a written policy on case recording in an appropriate format to meet the requirements of the NMS.

Individual personnel records are maintained for all salaried staff.

Customer Relations Manager maintains records of complaints. There has been one complaint made during the last twelve months. Examination of this record showed appropriate recording and investigation.

As previously mentioned in NMS 25 a more robust system to monitor the quality and adequacy of records is required.

Records are found to be stored securely and policy on access is contained in the policies and procedures manual.

**Standard 28 (28.1 – 28.2)**

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

**Key Findings and Evidence**

**Standard met?**

**2**

Up to date, comprehensive files are maintained for each member of the adoption service staff. All of these files were examined; there are some omissions in their content, which have already been identified in the report in findings for NMS 15 &19.

It is required that adoption panel member's files are maintained in line with regulation 11 (3) (d) and schedule 3 ( as identified in NMS11).

Qualifications and training database for all staff is held centrally.

CRB checks and references are held centrally by H.R. services.

The 'Respond' database holds details of all complaints against staff.

Details of disciplinary action are held by H.R. service.

## 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
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The adoption service team is co-located with the fostering team. They occupy offices in the Borough property designated to house children and families services.

The offices are accessible for all staff are appropriately secured and checks on visitors are logged.

The premises provide facilities for information evenings, preparation and on-going training events.

Adoption records in Care First system have access permission restrictions upon them.

Adoption offices are fire and intruder alarmed.

All records held securely in locked cabinets.

The IT system is protected by 'Firewall' to prevent illegal access. Communications and IT are covered by IT services recovery plan.

Borough of Poole insurance covers premises and contents.

**PART C**

**LAY ASSESSOR'S SUMMARY**

**(where applicable)**

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

**Date** \_\_\_\_\_

**Lead Inspector** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**PART D**

**PROVIDER'S RESPONSE**

**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 4<sup>th</sup> – 6<sup>th</sup> August 2003 of the Borough of Poole Adoption services and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary	<input type="checkbox"/>
Comments were received from the provider	<input type="checkbox"/>
Provider comments/factual amendments were incorporated into the final inspection report	<input type="checkbox"/>
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 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"/>
Action plan was received at the point of publication	<input type="checkbox"/>
Action plan covers all the statutory requirements in a timely fashion	<input type="checkbox"/>
Action plan did not cover all the statutory requirements and required further discussion	<input type="checkbox"/>
Provider has declined to provide an action plan	<input type="checkbox"/>
Other: <enter details here>	<input type="checkbox"/>

**Public reports**

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

**D.3 PROVIDER'S AGREEMENT**

**Local authority manager's statement of agreement/comments: Please complete the relevant section that applies.**

**D.3.1 I \_\_\_\_\_ of Borough of Poole Adoption Service confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the statutory requirements made and will seek to comply with these.**

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

**Or**

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

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

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

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