

Leslie Ironside

35 Clermont Terrace, Brighton BN1 6SJ Inspected under the social care common inspection framework

Information about this adoption support agency

This adoption support agency is managed by an individual practitioner, Dr Leslie Ironside, who provides a service to adopters and their children within Brighton and the surrounding area and also from a second office, for adopters and children from the London area.

The aims of the service are to provide a support, therapeutic consultation, assessment and treatment service to adopted children and young people, their families and parents and to provide a consultation service to professionals working in the field of adoption.

Dr Ironside is a consultant child and adolescent psychotherapist who is a member of the Association of Child Psychotherapists and the British Psychoanalytic Council.

Inspection dates: 12 to 14 March 2018

Overall experience and progress of	outstanding
service users, taking into account:	
How well children, young people and adults are helped and protected	good
The effectiveness of leaders and managers	good

The adoption support agency provides highly effective services that consistently exceed the standards of good. The actions of the adoption support agency contribute to significantly improved outcomes and positive experiences for service users.

Date of last inspection: 26 February 2015

Overall judgement at last inspection: outstanding **Enforcement action since last inspection:** none



Key findings from this inspection

This adoption support agency is outstanding because:

- Children and their parents develop excellent relationships with the provider.
- Children who have never been able to talk to a professional grow to trust this provider very quickly and they engage in the therapy exceptionally well.
- The provider works with the children and families in the longer term when this is required. He puts the in-depth knowledge he has about the child and their family to exceptionally good use. For example, he uses his knowledge to strengthen the therapeutic relationships and to guide his work with the family.
- The consistently high quality of the work leads to extremely positive outcomes for children.
- Children begin to overcome their past experiences and grow and develop in their psychological and emotional health. The therapy helps children to develop the ability to look at their lives in a different way and to make changes to their behaviour.
- Children's self-esteem and confidence improve significantly.
- The provider's calm, sensitive and non-directive approach suits children and families that are in crisis.
- The work has been life-changing for children and their families. Home life is far more stable for children and their parents and the therapy has undoubtedly prevented some families from breaking down.
- The provider is the therapist of choice for many families.
- The provider is exceptionally skilled in his field and extremely knowledgeable about the needs of people affected by adoption needs.

The adoption support agency's areas for development:

- There are no records made of the clinical supervision the provider attends.
- Should a child wish to read his or her file, the case notes are not written in a way that would help them to understand how therapy has supported their progress.
- There are no arrangements for monitoring the work of the agency overall so that any areas of shortfall can be addressed.

Recommendations

■ A written record is kept detailing the time and date and length of each



supervision. The record is signed by the supervisor and the registered provider at the end of the supervision. (Adoption: national minimum standards July 2014 26.2)

In particular, ensure that there is an agreed record of each session.

- The agency has and implements a written policy that clarifies the purpose, format and content of information to be kept on the agency's files, on the child's and prospective adopters' case records. (Adoption: national minimum standards July 2014 27.1)
 - In particular, ensure that the policy details what information will be recorded about each session, to support the child's understanding of how the work has impacted on them should they wish to read the file in the future.
- The registered provider monitors the management and outcome of the services in order to be satisfied that the agency is effective and is achieving good outcomes for children and/or service users and that the agency is complying with the conditions of registration. (Adoption: national minimum standards July 2014 26.4)



Inspection judgement

Overall experiences and progress of service users: outstanding

Families report that they are very warmly welcomed to the service and made to feel at ease. Many of the children and families have worked with Dr Ironside over a number of years and have returned to him as new issues and difficulties have arisen. Children who have never engaged with professionals before are able to trust him and develop secure relationships. Children like his non-directive style. One parent said: 'His style does not make children feel they are being diagnosed.' Another parent said: 'Leslie has done many extraordinary things to help, including convincing my son that the therapy will be of great value to him.'

The provider is skilled and experienced in his field and provides the highest quality of therapy that has made a profound difference to many families' lives. He has a deep understanding of the impact that past trauma and abuse has on children and the complexities of adoption, and is highly sensitive to children's needs. He is exceptionally skilled at achieving a good balance between the needs of the children and the needs of their parents and this ensures that the needs of the family as a whole are met. A parent said: 'Leslie Ironside is a highly effective clinician.' Another said: 'He [the provider] is the reason we are still together as a family... he has been truly lifesaving.'

The provider is extremely flexible and makes himself available to his clients as and when they need him. For example, one young person who was travelling out of the county contacted him as she felt that she really needed his support. Dr Ironside set up sessions via video calls over the internet. She said how valuable this had been for her as it enabled her to continue with her time away from home and have a successful trip.

Children know that they have a private space to talk about their worries and that confidentiality will be maintained; they are, however, made aware of the limits of confidentially should a safeguarding matter arise. One young person said: `Leslie puts things so that they make sense and helps me to make sense of things. He helps me with solutions for dealing with issues and in every session I have learned something else about myself. I don't know where I would be without him.'

When considering children's starting points, some have made remarkable progress. A parent said that their child is 'making great strides in talking about his feelings and understanding and managing them more creatively.' The provider has worked closely with children, their parents and educationalists to ensure that children have the right support to help them to achieve in their education. One adoptive parent said that the ongoing therapeutic support provided by Leslie Ironside had been exemplary. The parent said that the provider had also 'offered invaluable consultative support to our son's school, which has been instrumental in enabling the school to maintain its support for him through some very challenging situations.'



As children work through their psychological and emotional difficulties, they begin to understand that their behaviour has consequences and that their destiny is in their own hands. They learn to make choices that are more appropriate. Some children have succeeded in beginning to manage their acute and debilitating social anxiety, for example through trying to do things more independently and in successfully holding down part-time employment. Children are beginning to develop skills that will help them be more successful in their future lives.

Parents develop excellent working relationships with the provider. One parent said: 'I feel that he [Dr Ironside] holds us in mind as a family at all times; this is very comforting.' Another spoke about how she sees the provider as a 'lifeline'. A third spoke about how the therapy has given them hope for the future.

Parents are supported to understand how and why their child behaves as they do and to develop strategies so that they can cope with situations more effectively. An adopter spoke about how they had struggled to help their child to manage his behaviour for years with no support. She went on to say that since attending therapy sessions, they have been able to develop strategies to support their child to manage his frustrations more effectively. Another parent said that she was far more able to deal with issues and had learned to look after herself better. She said: 'The biggest shift has been me being able to step off the cycle of toxicity and develop the tools, language and confidence to step away from the situation.'

The provider has also been a strong advocate for parents and their children. For example, he has helped local authority social workers to develop their understanding of what would be best for the children and the parents in one case. Many parents said that without the support from the provider, their family would have broken down.

How well children, young people and adults are helped and protected: good

Children trust and confide in the provider and discuss their deepest fears and worries. Young people feel confident to speak openly with him. The provider is very skilled at helping parents to understand how their child's past life has affected their emotional and psychological well-being and in supporting them to think about ways they can support their child to move on from these experiences. The provider has been instrumental in helping parents to develop the emotional strength and strategies they need to support a child who has complex needs safely and more effectively.

The provider has strong working relationships with other agencies and professionals in relation to child protection. For example, he provides some of the staff in a local authority who are working on issues of concern around child sexual exploitation with clinical supervision.



The provider has received and presented training in safeguarding children within the past 12 months. He has developed a safeguarding policy and procedure for the agency that includes information about how he would deal with a disclosure of historical abuse. There have been no safeguarding issues reported to him, so these procedures have not been used in practice. However, where the provider has had concerns about a child he has dealt with this sensitively and in conjunction with the local authority.

The effectiveness of leaders and managers: good

The statement of purpose and children's guide, which are kept under review, clearly set out the ethos and objectives of the agency. The provider ensures that these are met to a high standard.

The provider has aspirations for the children and families he works with. He is described as being extremely encouraging and helping people to find solutions to problems. He uses metaphors to help clients connect their thoughts and emotions. A parent said that she finds this especially useful to fall back on in times of high stress.

The agency is sufficiently resourced and financially viable. The individual therapy is continually monitored to ensure that it addresses the needs of the child and their family at any point in time. However, the systems for monitoring and evaluating the service overall are underdeveloped.

The provider works effectively with commissioners, parents and professionals. A representative from the local authority said that the provider is 'really efficient, reliable and responsive to the local authority [and client's] needs; the agency is very well run.' Some parents said that Dr Ironside is their provider of choice, either because they had used him in the past, they had seen him giving talks to adoptive families or through recommendation from other families who have used him.

The provider has regular individual clinical supervision with a person qualified to do this and group supervision with his peers. He says that both of these are useful in supporting him in his work. However, no records are kept of these clinical supervision sessions.

The provider takes his responsibility for professional development seriously. He not only attends training to support his practice but arranges, though his company, training to other professionals working with children and families. He also acts as a clinical supervisor to others.

Decisions about the help provided give priority to the safety and stability of the lives of children and other service users.

Case records reflect the work that is undertaken and relate to the experiences of children, but the style and clarity of records would not be useful for children wishing to read their file to increase their understanding of their time in therapy.



Information about this inspection

During this inspection, inspectors looked closely at the experiences and progress of children, young people and adults. Inspectors considered the quality of work and the differences made to the lives of children, young people and adults. They watched how professional staff work with children, young people, adults and each other and discussed the effectiveness of the help provided. Wherever possible, they talked to children, young people, adults and their families. In addition, inspectors have tried to understand what the adoption support agency knows about how well it is performing and what difference it is making for the children, young people and adults whom it is trying to help.

This inspection was carried out under the Care Standards Act 2000, using the 'Social care common inspection framework', to assess the effectiveness of the adoption support agency, how it meets the core functions as set out in legislation, and to consider how well it complies with the Adoption Support Agencies (England) and Adoption Agencies (Miscellaneous Amendments) Regulations 2005 and the national minimum standards.



Adoption support agency details

Unique reference number: SC067414

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Responsible individual: Dr Leslie Ironside

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Inspector

Rosie Dancer, social care inspector





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