



*Making Social Care  
Better for People*

# inspection report

Local Authority Adoption Services

**Leicestershire County Council  
Adoption Service**

Eagle House (4th Floor)

11 Friar Lane

Leicester

Leicestershire

LE1 5RB

29th October 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**

Leicestershire County Council Adoption Service

**Headquarters Address**

County Hall, Glenfield, Leicestershire, LE3 8RL

**Adoption Service Manager**

Cath Sartoris

**Tel No:**

0116 232 3232

**Address**

County Hall, Glenfield, Leicestershire, LE3 8RL

**Fax No:**

0116 265 7440

**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**

<b>Date of Inspection Visit</b>		29th October 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>	Lynn Smith	
<b>Name of Inspector</b>	<b>3</b>	Kathy Mann	27098
<b>Name of Inspector</b>	<b>4</b>	Maureen Moore	104187
<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.		NA	
<b>Name of Specialist (e.g. Interpreter/Signer) (if applicable)</b>		NA	
<b>Name of Establishment Representative at the time of inspection</b>		NA	

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

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

## BRIEF DESCRIPTION OF THE SERVICES PROVIDED.

The adoption service is provided through a joint arrangement between Leicester City, Rutland and Leicestershire local authorities. The service is very much a shared and equally owned service by all three councils and, necessarily, the three reports detailing the findings of the inspections contain much comment, which is applicable to all three councils. Where separate findings are reported these appear only in the report to the individual council concerned.

The adoption service has been provided jointly since local government reorganisation and works to the satisfaction of the three agencies involved.

Leicestershire and Leicester City both provide a manager and a number of social work staff who work as a single staff team responsible for the provision of an adoption service to the three councils. Rutland contributes in financial terms.

Leicester City has its own adoption panel and agency decision maker. Rutland and Leicestershire share some panel members and panel arrangements but have effectively separate panels and separate agency decision-making processes.

In the general provision of the adoption services many of the underpinning policies and procedures are shared by all three councils.

Leicestershire County Council is the lead agency.

The Adoption Service is located in the centre of Leicester city. The building is well signed with an inviting reception area. The leaflets and documentation around the reception area cater for the different identities and cultures within Leicestershire.

The Team provide the following services:

- Recruitment of adoptive families
- Assessment and preparation
- Support for approved families awaiting a placement
- Running training and educational events.
- Support services for post adoption, to adoptive families and birth families.
- Facilitate direct and indirect contact.
- Counselling, information and advice in relation to the following:
  - Birth parents
  - Prospective adopters
  - Adults who have been adopted
  - Birth relatives of an adopted person.
  - Inter-country adoption
  - Non-agency adoptions

## 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.)

The adoption service in Leicestershire is part of an adoption service provided collaboratively by three local authorities working closely together. One inspection was carried out which addressed the provision of services within all three local authorities. Inspectors found that the adoption services provided were generally of a good quality and addressed the majority of standards well with only minor shortfalls.

#### **Statement of Purpose. Standard 1**

The Statement of Purpose addressed all information required in schedule 1 very well, however it was not, at the time of the inspection, formally approved by the Executive side of each of the councils. This has now taken place. The Statement of Purpose has been revised and updated for 2004 and will go to the executive side of the council in the near future.

The use of audiotapes and age appropriate literature evidences well how the agency considers children's needs.

#### **Securing and Promoting children's welfare. Standard 2**

The recruitment strategy addresses well the current recruitment needs of the whole area. The agency has achieved a high percentage of appropriate matches for children who need to be placed in sibling groups and children with adopters who reflect their ethnic origin, cultural background, religion and language.

#### **Prospective and Approved Adopters. Standards 3 to 6**

The adoption service produces several booklets in a variety of languages explaining eligibility criteria, information on the process of becoming an adopter and what the expectations are.

Within the Statement of Purpose the assessment process and timescales are clearly identified.

Adopters informed Inspectors that the assessment process was in-depth, thorough and at times felt it was intrusive, however they were informed before hand and did understand the need for such an approach.

The adopters spoken to informed Inspectors that they received full information on the matching, introduction and placement process. They feel well supported and are aware there is a wide range of services open to them.

#### **Birth Parents and Birth Families. Standards 7 to 9**

The Manager informed the Inspectors that adoption social workers met birth parents, which enabled them to gain information and progress plans. Evidence of this was viewed within the records. At the time of the inspection the council was negotiating with a voluntary agency to take on the support role for birth parents.

At the time of the inspection the adoption agency needed to implement a clear strategy for working with and supporting birth parents including helping them to fulfil agreed plans for contact.

Since the inspection the service to birth parents has benefited from service level agreement



with an independent counselling service and from access to some additional posts recruited to assist birth parents and adopters maintain contact agreements.

No evidence was seen of birth parents having opportunities to comment on information that is written about them before it goes to panel or adopters. This has since been addressed in amended procedures for staff.

The adoption service provides a post-adoption post-box system for birth families to maintain contact with children placed for adoption.

Inspectors viewed the annual report of face-to face- post adoption contact, which informed the adoption service what the views were of adoptive families, children and birth families taking part. It enabled the service to address difficulties raised and learn from the experiences of the families.

### **Adoption Panels and Agency Decisions. Standards 10 to 13**

An Inspector viewed the policy for the adoption panel. It was to be read in conjunction with 'Effective Panels' produced by BAAF. The policy was clear and addressed all aspects of standard 10.2. Inspectors observed a panel meeting which was effectively chaired and appropriate discussion took place leading to informed recommendations.

The Inspectors observed adopters at the panel meeting. Before entering they were given a book with a photo of each of the panel member and a description of their role on the panel. Once in the meeting the Chair put them at ease and gave them an opportunity to ask questions.

The Inspectors viewed panel member's files and observed some members of the panel did not have completed Criminal Records Bureau checks.

Information viewed during the inspection states that the Agency Decision Maker makes the decision without delay after taking into account the recommendations from the panel. All panel papers are sent to the Agency Decision Maker prior to the panel and the Chair and the Panel Adviser meet within seven days after the panel sitting.

### **Fitness to Provide or Manage an Adoption Agency Standards 14 & 15**

The adoption agency is well run with a knowledgeable and skilled management team. The Manager meets all requirements in standard 14.2.

The staff team expressed confidence in the Manager and her leadership style.

The Manager needs a job description.

### **Provision and Management of the Adoption Agency. Standards 16 to 18**

The management team of the adoption agency is qualified and experienced in adoption work as well as management.

The adoption agency works very well at promoting and addressing the needs of the people they work with. The 'Black Cases Panel' looks at whether the package of services is right for children from black or minority ethnic backgrounds..

Staff informed Inspectors of the positive work they do in the Asian community and feel more Asian and Black workers are needed due to the need to expand on the knowledge they are gaining of the different languages and cultures that are within the Leicestershire area.

The adoption panel has councillors and independent panel members on it which assists it to independently scrutinise all assessments and judgements made about children being considered for adoption and those relating to prospective adoptive parents.

The adoption agency has access to a legal and medical adviser; both are suitably qualified and well thought of by the team. The medical adviser also sits on the panel.

Both the medical and the legal advisers require written protocols governing their engagement.

The Manager informed the Inspector that the agency has good access to education advisers

and CAMHS.

### **Employment and Management of Staff Standards 19 to 23**

Staff informed Inspectors that Leicestershire Council has sound employment practices. Each local authority has a recruitment policy and procedure for appointing staff. Staff files are maintained, however not all viewed were in line with schedule 3 of the NMS. Occasional Criminal Record Bureau checks and proof of identity were missing. Evidence Telephone enquiries made to each referee to verify written references needs to be on file. During interviews with the social workers Inspectors found the group to have a good understanding of the legal implications of children and adoption. Staff are directly managed by two experienced and qualified team managers. No social workers have obtained a PQ award; issues are unresolved as there is a view that there is a limited relevance of content to adoption. Social workers consider there is a lack of funding incentive for social workers once the award is achieved. Administration staff informed Inspectors of the issues they face with the joint working arrangements of the three local authorities. Leicester City and Leicestershire operate different computer systems, which requires an umbrella database to be in place. However, this acts as a useful tracking tool for Managers. Team Managers and social work staff informed Inspectors that they receive appropriate training to enhance their skills.

### **Records standards 25 to 28**

The adoption agency has separate, appropriate records in respect of each child, prospective and approved adopters. The adopters files viewed contained all relevant checks required for adopters and adults within the home. The policies and procedures viewed need to be up dated to include the Human Rights Act1998. Concerns were raised when Inspectors requested a file however; Managers were unable to locate it. A tracking system needs to be put in place so whereabouts of files are always known.

### **Fitness of premises standard 29**

The main building for the Adoption team is well placed within the centre of Leicester. The building outside is well signed and very inviting. Evidence was viewed of secure facilities for records; also the Manager informed Inspectors that archiving is within a separate building also secure. Records are also backed up electronically.

## 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:

NO

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:

NO

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:

NO

### **The grounds for the above Report or Notice are:**

There are four regulatory requirements that need to be satisfied.

**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.**

## 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	11	LA11	The Agency must ensure that all panel members have up-to-date CRB checks which have been satisfactorily completed.	31 <sup>st</sup> Oct 2004
2	6 & 11 schedule 3	LA15	All Management and staff records must address all issues in schedule 3	31 <sup>st</sup> Oct 2004
3	17	LA27	Adoption complaints must be collated across the service	31 <sup>st</sup> Oct 2004

## 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	LA7	Birth parents should have access to an independent support worker.
2	LA7	A system should be in place, which evidences birth parents comments on information written about them.
3	LA9	The service should implement a clear strategy for working with birth parents
4	LA11	New members to panel should have relevant induction training including observation of panel.
5	LA14	The Manager should have a job description.
6	LA17	The Manager should establish clear written procedures for monitoring the adoption agency.
7	LA18	A written protocol should be established governing the roles of specialist advisers.
8	LA20	Sufficient electronic equipment should be provided to the adoption team.
9	LA26	The policies and procedures should be updated.
10	LA27	A file tracking system should be in place.

- 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	NO
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	NO
• 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
Date of Inspection	29/10/03
Time of Inspection	09.30
Duration Of Inspection (hrs)	38
Number of Inspector days	4
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)	15

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?

3

The Adoption service has a Statement of Purpose that explains the aims, objectives and services provided by the Adoption Team of Leicester City Social Care, Leicestershire Social Services and Rutland Social Services. The adoption service is provided through a joint arrangement between Leicestershire, Rutland and Leicester City authorities. Leicestershire and Leicester City provide the managers who are responsible for the adoption team and the staff who provide the range of adoption services. Rutland makes an agreed financial contribution. All three councils to share the service. Leicestershire County Council is the lead agency.

The Statement of Purpose was not approved at the time of the inspection but this has now happened. The Statement has been reviewed and updated for 2004.

The Statement of Purpose addressed the organisational structure very well and the experience and qualifications of the staff at the agency were of a high standard.

The Statement of Purpose states it is reviewed annually, however a date is required on the one viewed.

Team Managers informed Inspectors that the children's guide used is the BAAF publication. They also used an audiotape created by young people explaining parts of the children's guide. Guides for younger children are also used, including 'Nutmeg Goes To Court'.

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

YES

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

YES

Is there a children's guide to adoption?

YES

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

YES

## 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?

4

Inspectors viewed the recruitment strategy for 2003-2004, which addressed the current recruitment needs and the targets and objectives for the coming year. Evidence was viewed of a 95% match for children with adopters that reflect their ethnic origin, cultural background, religion and language in spite of an ethnically diverse population. Evidence was viewed of 100% match that allows children to live with brothers and sisters. Inspectors observed at panel, children's views in the matching process being presented by social workers. Recent assessments were also addressed. The following statistics refer to all 3 councils

### In the last 12 months:

How many children were identified as needing adoptive families?

37

How many children were matched with adopters?

62

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

47

How many children were placed with other services' adopters?

15

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?

X

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

95

%

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

5

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?

24

## Prospective and approved adopters

The intended outcome for the following set of standards is:

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

### Standard 3. (3.1 – 3.3 and 3.5 - 3.6)

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

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>The adoption service produces several booklets in a variety of languages explaining eligibility criteria, information on the process of becoming an adopter and what the expectations are.</p> <p>Adoptive parents informed Inspectors that they were told that if they were able to consider older children or sibling groups, children would be placed faster than if they wanted a younger child.</p> <p>The agency does publish a recruitment strategy within the annual report of the adoption service that prioritises the recruitment of adopters who can best meet the needs of local children requiring adoption. This document can be requested by contacting the adoption team.</p> <p>Adopters stated that the agency had very little written information about inter-country adoption, however the Manager and staff informed Inspectors that specific groups have been run for Inter-country adoptions.</p> <p>Within the leaflets support and preparation is addressed and this information is reiterated at the regularly held information evenings. Adopters confirmed they find it reassuring that support is there if they need it.</p> <p>Adopters interviewed and those who responded to the questionnaire had mixed views about the preparation group. One adopter commented on how the course ended on post-adoption depression and found this not helpful. The comments received by Inspectors ranged from very informative to somewhat patronising.</p> <p>Prospective adopters are made aware of the children for whom placements are needed both locally and nationally.</p>		

### Standard 4. (4.1 – 4.9)

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

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>3</b>
<p>Within the Statement of Purpose the assessment process and timescales are clearly identified, however during interviews and record viewing, Inspectors did note that several adopters did experience delays. The Statement of Purpose does not address adoption from another country.</p> <p>Adopters informed Inspectors that the assessment process was in-depth, thorough and at times intrusive, however they were informed before hand and did understand the need for it. All adopters attend the preparation groups and found one of the most positive things to be meeting others in the same situation and being able to voice concerns and questions without feeling inadequate.</p>		

The Manager informed Inspectors that at present, the preparation for adopters is being reviewed.

Adopters are informed very early on in the process of the references, medicals and checks that need to take place. This information is also found in the leaflet given when they first enquire.

**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

The adopters spoken to informed Inspectors that they received full information on the matching, introduction and placement process. BAAF form E's are sent with full and up-to-date information on the child and social workers for the child also visit.

The Managers stated that where it has been agreed, adopters are required to do annual updates on the young people placed with them to send to their birth families. Reminder letters are sent out if delays occur. The adopters also agree to inform the agency if the young person no longer lives with them.

Inspectors viewed a family book, which informed the prospective adopted child of the new family. The agency needs to support all adopters to create a family book appropriate to the age of the child being adopted.

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

YES

**Standard 6 (6.1 – 6.7)**

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

**Key findings and evidence****Standard met?**

3

Adopters spoken to say they feel well supported and are aware there is a wide range of services open to them.

Adopters stated the preparation groups prepared them well for the arrival of the young person.

The importance of birth family information and self-identity of the child were discussed with adopters who informed the Inspectors that they continue the life story work and safe keep information and photos for the young person.

The preparation training addresses aspects of discrimination and the importance of maintaining a child's heritage.

Inspectors viewed disruption files and were informed by the Managers that the service is keen to learn and amend practice in the light of disruption meeting findings.

An adopter informed the Inspector that they were invited to go to the disruption meeting of a young person that they were looking to adopt. They found the experience very informative.

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

44

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

43

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

47

**Number of adopters approved but not matched**

29

<b>Number of adopters referred to the Adoption Register</b>	43
<b>How many placements disrupted, between placement and adoption, in the last 12 months?</b>	6

## Birth Parents and Birth Families

The intended outcomes for the following set of standards are:

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

### Standard 7 (7.1 – 7.5)

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

Key Findings and Evidence	Standard met?	3
<p>The Managers informed the Inspectors that adoption social workers met birth parents, which enables them to gain information and progress plans. Evidence of this was viewed within the records. At the time of the inspection the council was negotiating with FSU with a view to that agency taking on the support role for birth parents.</p> <p>No evidence was seen of birth parents having opportunities to comment on information that is written about them before it goes to panel or adopters.</p> <p><b>See recommendation number 1 &amp; 2</b></p> <p>Since the inspection a service level agreement has been reached with PICS, an independent counselling group who will provide individual and group counselling for birth parents. A leaflet is available to signpost birth parents to the support group.</p> <p>Instructions to social workers completing Form E assessments is to be amended to ensure that wherever possible information about birth parents is shared with them.</p>		

### Standard 8 (8.1 – 8.2)

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

Key Findings and Evidence	Standard met?	3
<p>The adoption service provides a post-adoption post-box system for birth families to maintain contact with children placed for adoption. Through training adopters discuss the importance of maintaining this contact. The agency does not send reminder letters to the birth family. Birth families are encouraged by the social worker to contribute to the form E and provide information for the life-story work. Evidence was viewed of birth parents wishes being made known at panel and within the records viewed.</p> <p>Inspectors viewed the annual report of face-to face- post adoption contact, which informed the adoption service what the views were of adoption families, children and birth families taking part. It enabled the service to address difficulties raised and learn from the experiences of the families.</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**

At the time of the inspection the adoption agency was in negotiations with an independent support service to enhance support groups. The agency has also identified a need to look at a support group for birth fathers.

The adoption agency needed to implement a clear strategy for working with and supporting birth parents including helping them to fulfil agreed plans for contact.

**See recommendation number 3**

Leicester City Looked after Children Service has recently appointed three Placement Support Workers who will be available to the adoption service to assist adopters and birth parents in maintaining contact agreements. All direct contact arrangements between children and their birth relatives are reviewed on an annual basis.



## 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?	4
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An Inspector viewed the policy for the adoption panel. It was to be read in conjunction with 'Effective Panels' BAAF. The policy was clear and addressed all aspects of standard 10.2. The Inspectors observed adopters at the panel meeting. Before entering they were given a book with a photo of the panel member and a description of their role on the panel. Once in the meeting the Chair put them at ease and gave them an opportunity to ask questions.

### Standard 11 (11.1 – 11.4)

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

Key Findings and Evidence	Standard met?	1
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Adoption panel members are involved in an annual training day. Also time is made to share relevant issues at panel meetings.  
 Panel member records were seen. Some members of the panel do not yet have Criminal Records Bureau checks.  
 Inspectors viewed a protocol for new members joining. This document addresses confidentiality agreements and CRB checks. All panel members are given 'Effective Panels' guidance on regulations- a BAAF publication along with information specific to Leicestershire and Rutland Adoption Panels. The annual training day was identified, however no observation of a panel was addressed or induction training specified.  
 Panel Members do not receive specific training on inter-country adoptions, however the Manager informed inspectors that the legal Adviser does address any legal issues.  
 The inspector observed the panel was properly constituted and members brought a range of appropriate experience and expertise to panel deliberations.

**See requirement number 1**

**See recommendation number 4**

**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

Panels are held regularly and all paper work sent out a week in advance. The Inspector observed the minutes of the last panel meeting being read out and confirmed by the members of the panel.

Rutland business was included as and when it arose though there were no cases from Rutland at the time of the inspection.

The panel was efficiently conducted.

**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

Information viewed during the inspection states that the Agency Decision Maker makes the decision without delay after taking into account the recommendations from the panel. All panel papers are sent to the Agency Decision Maker prior to the panel meeting and the Chair and the Panel Adviser meet after the panel sitting within seven days.

Inspectors observed social workers informing adopters of the recommendations. The Agency Decision Maker sends a letter with the final decision. Adoptions spoken to informed Inspectors that they do receive a letter after they have been to panel.

## 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?	2
<p>The adoption agency is well run with a knowledgeable and skilled management team. The Manager meets all requirements in standard 14.2. The staff team expressed confidence in the Manager and her leadership style. The Inspectors did not view a job description for the Managers. <b>See recommendation number 5</b></p>		
<p>Does the manager have Management NVQ4 or equivalent?</p>	YES	
<p>Does the manager have at least 2 years experience of working in a childcare setting in last 5 years?</p>	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
<p>The staff team is made up of managers and staff recruited by Leicestershire and Leicester City. None of the staff are recruited by Rutland. The Leicestershire Manager informed Inspectors that she does have a Criminal Records Bureau check along with all her staff.</p>		

## Provision and management of the adoption agency

The intended outcomes for the following set of standards are:

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

Standard 16 (16.1 – 16.7)

The adoption agency is managed effectively and efficiently.

**Key Findings and Evidence**

**Standard met?**

4

The management team of the adoption agency are qualified and experienced in adoption work as well as management. The agency has a clear deputy in the absence of the Manager.

Social work staff informed Inspectors that all the managers are approachable and operate an open door policy.

The adoption agency need to evidence they have informed managers and staff of their responsibility to declare any possible conflicts of interest.

The adoption agency work very well at promoting and addressing the needs of the people they work with. The 'Black Cases Panel' looks at whether the package of services is right for black and minority ethnic children and their families.

Staff informed Inspectors of the positive work they do in the Asian community and feel more Asian and Black workers are needed due to the need to expand the knowledge they are gaining of the different languages and cultures that are within the Leicestershire area.

The adoption agency places all children who have a best interest decision in favour of adoption on the National Adoption Register unless there is a local match. Prospective adopters are referred after nine months unless a decision is made to refer them earlier.

The Manager informed the Inspector that the agency has not had a successful match from the National Adoption Register yet.

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

1

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

X

Standard 17 (17.1 – 17.3)

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

**Key Findings and Evidence**

**Standard met?**

2

The Statement of Purpose identifies the ways the adoption service monitor the quality of the service, however no written procedures were seen. The elected Members of the council receive a six monthly report on the adoption services achievements.

The adoption panel has Elected Members from Leicestershire that sit on it together with independent members which enables it to independently scrutinise all assessments and judgements made about children being considered for adoption and those relating to prospective adoptive parents.

**See recommendation number 6**

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

<b>Monthly?</b>	
<b>Quarterly?</b>	
<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.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
<p>The adoption agency has access to a legal and medical adviser; both are suitably qualified and well thought of by the team. The medical adviser also sits on the panel. Both the medical and the legal advisers require written protocols governing their engagement. Regular Medical Liaison meetings take place between the adoption team managers, the Medical Advisor and the Community Paediatrician conducting the pre-adoption medicals to ensure effective engagement between the two services. The Manager informed the Inspector that the agency has good access to education advisers and CAMHS.</p> <p><b>See recommendation number 7</b></p>		

## 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?**

1

Each local authority involved in the shared adoption service has its own recruitment policy and procedure for appointing staff.  
 Staff files for Leicestershire staff are maintained, however not all viewed were in line with schedule 3 of the NMS. Occasional Criminal Record Bureau checks and proof of identity were missing.  
 Staff records need to address all issues in schedule 3 and evidence telephone enquires made to each referee to verify written references.  
 The Statement of Purpose evidences that all Managers and social work staff hold a professional qualification in social work and are experienced social workers. The exception is one post-adoption worker who works directly with a qualified social worker.  
 During interviews with the social workers Inspectors found the group to have a good understanding of the legal implications of adoption for children.  
 Children's needs, behaviours, rights and equality were discussed and the group once again gave a clear understanding of these issues. The group expressed a good in-depth knowledge of all aspects of adoption, however they did feel with new legislation being implemented, further training is needed.  
 The adoption agency has access to three local authorities professional staff who are able to provide specialist advice.  
 Inspectors interviewed the post-adoption workers and found both to have a great knowledge and understanding of the adoption process.  
 No social workers have obtained a PQ award; issues are unresolved as there is a view that there is a limited relevance of content to adoption. Social workers also considered there was a lack of funding incentive for social workers once the award is achieved.  
**See requirement number 2**

**Do all of the adoption service's social workers have DipSW or equivalent?**

YES

**What % of the adoption service's social workers have a PQ award?**

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?**

**2**

Staff are directly managed by two experienced and qualified team managers. One employed by Leicestershire and one by Leicester City but jointly responsible for the staff and the work of the team.

During interviews with the staff groups, Inspectors were informed that both complement each other well and are very approachable. Staff stated they are clear about their responsibilities and feel no confusion over the roles of each manager from the two local authorities. The staff feel well supported within the adoption team, however sometimes issues do arise within each local authority which challenge the joint working practice of the adoption team and may prove difficult to resolve in terms of agreeing responsibility.

Some staff informed Inspectors that they considered that workloads were not formally managed and they considered that managers did not always consult with staff regarding the difficulty of cases allocated. Social work caseloads are monitored periodically as part of the Joint Arrangement Monitoring Exercise. This is designed to establish the funding contribution from each authority to the joint arrangement. However, the information obtained gives clear detail as to the workload of individual social workers. The team managers meet weekly, monitor workloads and allocate new work. All allocations are discussed with individual workers.

Supervision is individual and group, where cases can be discussed.

The team managers monitor assessments and approvals of adopters.

Administration staff informed Inspectors of the issues they face with the joint working arrangements of the three local authorities. Leicester City and Leicestershire operate different computer systems. This creates an additional workload, as all information has to be duplicated onto an additional "umbrella" database so both authorities have access to information about adopters and young people. The umbrella database additionally acts as a case tracking device. It was felt that not enough computers are available for all of the staff. Leicester City Council was investing in additional computer hardware for the adoption team. This investment has increased PC access on the adoption team in excess of the corporate standard of one PC between 2 social workers. In addition, there are laptop PCs to maximise flexibility of access and use of computerised systems.

The Statement of Purpose had not at the time of the inspection, been given to all staff members.

**See recommendation numbers 8 & 9**

**Standard 21 (21.1 – 21.4)**  
**There is an adequate number of sufficiently experienced and qualified staff to meet the needs of the adoption agency and they are appropriately supported and assisted in providing a service.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	3
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During the inspection the Managers informed Inspectors that the agency does have sufficient staff, however the Managers have identified a need for increased adoption support. At present Leicestershire employs two post adoption workers. Leicester City have agreed to fund two more post adoption workers to strengthen this area of work which the agency undertakes.

Staff informed Inspectors that Leicestershire staff have undergone job evaluations. This has created a situation where Leicester City staff have substantially lower pay and conditions for the same job. This does create a feeling for some of being undervalued and can create a divide within the agency. However, Leicester City Council adheres to national conditions of pay and cannot control the pay and conditions of those staff employed by Leicestershire County Council.

<b>Total number of social work staff of the adoption service</b>	6	<b>Number of staff who have left the adoption service in the past 12 months</b>	X
<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.**

<b>Key Findings and Evidence</b>	<b>Standard met?</b>	3
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Staff informed Inspectors that Leicestershire Council has sound employment practices. Staff were aware of the whistle blowing policy.



**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

Team Managers and social work staff informed Inspectors that they receive appropriate training to enhance their skills. The agencies budget does restrict training as Inspectors were informed specialist courses are usually at some distance way and very expensive. Staff express a keen knowledge to gain a better understanding on the new legislation. Staff informed Inspectors that appraisals, training and staff development are addressed during supervision.

**Records**

The intended outcome for the following set of standards is:

- All appropriate records are maintained securely, kept and are accessible when required.

**Standard 25 (25.1 – 25.5)**

The adoption agency ensures comprehensive and accurate case records are maintained for each child, prospective and approved adopter with whom the agency has worked.

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

3

The adoption agency has separate, appropriate records in respect of each child, prospective and approved adopters.

The computerised system is password protected.

Confidential information about the placement of children with adopters is not openly available to all users of the social services information system.

The adopters files viewed contained all relevant checks required for adopters and adults within the home.

**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

The agency use leaflets from the Department of Health as well as their own to explain access to records and the Data Protection Act 1998. The policies and procedures viewed need to be up dated to include the Human Rights Act1998. A separate policy is in place giving information on birth records counselling in Leicester, Leicestershire and Rutland. The Adoption panel members and staff sign a confidentiality clause.

**See recommendation number 9**

**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?**

1

The records viewed were of a suitable standard. Assessment visits need to be recorded in a consistent way.

There is team and corporate guidance on case recording standards.

Concerns were raised when Inspectors requested a file however; Managers were unable to locate it. A tracking system needs to be put in place so whereabouts of files are always known.

Case files were securely stored and closed files were kept in the corporate secure storage facility.

Monitoring is done in several different ways, feedback from service users through evaluation proformas, the adoption panel, annual reports and manager monitoring. Evidence was viewed in records of Team Managers monitoring. The umbrella database acts as a case tracking tool.

Each of the three local authorities has a complaints procedure, however the adoption agency must bring together all adoption complaints and consider them as a whole.

**See requirement number 3**

**See recommendation number 10**

**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?**

3

Personnel files are maintained for staff and panel members.

## 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 main building for the Adoption team is well placed within the centre of Leicester. The building outside is well signed and very inviting. The reception area is pleasant and holds ample leaflets and information in several different languages for people to pick up and take away. Staff informed Inspectors that parking is an issues as well as the lack of a suitable interview room for prospective adopters, adopters or birth family. Evidence was viewed of secure facilities for records; also the Manager informed Inspectors that archiving is within a separate building, which is also secure. Records are also backed up electronically. Staff informed the inspectors about issues such as the provision of stationary in which each authority operates differently however, the staff work together for one joint team.

**PART C**

**LAY ASSESSOR'S SUMMARY**

**(where applicable)**

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

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

We would welcome comments on the content of this report relating to the Inspection conducted on 29th October 2003 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"/> YES
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 29 March 2004, 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 Leicestershire County Council Adoption Service confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the statutory requirements made and will seek to comply with these.**

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

**Or**

**D.3.2 I \_\_\_\_\_ of \_\_\_\_\_ 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.