



*Making Social Care
Better for People*

inspection report

ADOPTION SERVICE

London Borough of Lewisham Adoption Service

**Children's Social Care
Fostering and Adoption
First Floor, Laurence House
1 Catford Road
London
SE6 4RU**

Lead Inspector
Sue Nott

Announced Inspection
25th September 2006 09:00

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Adoption*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

Every Child Matters, outlined the government's vision for children's services and formed the basis of the Children Act 2004. It provides a framework for inspection so that children's services should be judged on their contribution to the outcomes considered essential to wellbeing in childhood and later life. Those outcomes are:

- Being healthy
- Staying safe
- Enjoying and achieving
- Making a contribution; and
- Achieving economic wellbeing.

In response, the Commission for Social Care Inspection has re-ordered the national minimum standards for children's services under the five outcomes, for reporting purposes. A further section has been created under 'Management' to cover those issues that will potentially impact on all the outcomes above.

Copies of *Every Child Matters* and *The Children Act 2004* are available from The Stationery Office as above.

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SERVICE INFORMATION

Name of service	London Borough of Lewisham Adoption Service
Address	Children's Social Care Fostering and Adoption First Floor, Laurence House 1 Catford Road London SE6 4RU
Telephone number	
Fax number	
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	London Borough of Lewisham
Name of registered manager (if applicable)	Rosie Sauvage
Type of registration	Local Auth Adoption Service

SERVICE INFORMATION

Conditions of registration:

N/A

Date of last inspection 21st – 23rd January 2004

Brief Description of the Service:

This inspection was part of the adoption and fostering joint inspection. This report relates to Lewisham adoption service, but the inspection included joint planning and some joint interviews.

Since the last full inspection, there had been major restructurings in the children's directorate, which involved radical changes at management level. The adoption service is now located within Children's Social Care in the Directorate for Children and Young People. The current structure (from April 2005) placed both fostering and adoption services, including business support, under the lead of one Service Manager, directly accountable to the Director of Social Care. The director is the designated decision maker for the fostering and adoption panels.

The Service Manager manages the Fostering and Adoption Service supported by six team managers. There are two adoption teams and one adoption support team within the service, sharing a total of twelve full time equivalent posts, as a number of staff work part time.

One of the team managers carries out the role of advisor to the adoption and permanence panel, and the adoption support manager is the adoption support services advisor (ASSA); two administrators support the work of the teams. There is close liaison between the team and marketing officers in the authority.

The adoption, & adoption support service operates from premises located away from the rest of children's services. Plans to move to the central offices are still to be achieved.

The agency provides a comprehensive adoption service which includes: placing children in need of adoptive families; recruiting, preparing, and assessing adoptive families; providing assessments for post adoption support to adoptive children and families; counselling and support to birth parents and families; and assistance and counselling to adopted adults who wish to see their birth records. Intermediary services for adopted adults and birth family members, and contact arrangements for children, both indirect and direct are also provided.

The teams also takes on case responsibility for the children from the time the care order is obtained, and deal with non-agency and inter country adoptions, and special guardianship cases.

Lewisham is a member of the South East London Adoption Consortium, and works closely with other authorities to effect suitable placements for children. Interagency placements have been used on a regular basis to prevent delay for children needing adoptive families.

The agency has established partnerships with other services to provide consultancy and support services, including the South East Post Adoption Network.

SUMMARY

This is an overview of what the inspector found during the inspection.

This is the second full inspection of the adoption service provided by the London Borough of Lewisham under the National Minimum Standards.

Two inspectors spent four days in the agency and interviewed adoption social workers, adoption support workers, managers and business support staff. The panel chair, the agency decision maker, an elected member, plus six sets of adopters and a birth mother were also interviewed. The lead inspector observed the panel on a separate day.

Supporting documents were provided by the agency, and read by the lead inspector prior to the inspection fieldwork, and a selection of files, including personnel and panel member files, adopter's and children's files were examined during the course of the inspection.

Questionnaires were received from eighteen prospective and approved adopters, two placing social workers, two birth families, and three professional advisors to the agency.

The inspectors would like to thank the managers and staff for their cooperation, assistance and courtesy during the inspection, and the hard work they put into organising both the pre-inspection material and the programme, which greatly helped to facilitate the inspection process.

What the service does well:

Staff working for Lewisham's adoption service were motivated and committed to achieving the best outcomes for children, and aimed to ensure that they secured the most suitable placements for children needing adoptive families. The strategic and operational management of the service ensured that adoption was being given a high profile, and that workers had a clear sense of the priorities of the service. There was a culture of encouraging improvements in the service delivery, and managers and staff were very child focused and responding proactively, where shortfalls had already been identified.

Appropriate information management systems had been developed, and there were early identification systems for children needing permanence. These tracked the progress of children where a review decision for permanence had been made, and identified any reasons for delay in achieving this plan.

Strategies to recruit more adoptive families were in place, with a good range of publicity materials, and ongoing liaison with the marketing communications team.

The agency was welcoming to prospective adopters, and although some inter country adopters had experienced delay in the early stages of their contact, there was evidence that this had improved greatly with the reorganisation of the roles and responsibilities of team managers.

Adopters' feedback indicated that there was good preparation and a careful and thorough assessment process, which was child focused. Comments included: "The adoption preparation classes and home study has been a very positive process for us"; workers were "very honest about the problems involved"; "Very thorough and no delays".

Assessment reports of prospective adopters were of a good standard, well written and thorough, and provided analysis of the likely parenting qualities of applicants. All necessary checks were completed on prospective adopters.

The service endeavoured to place children with the most appropriate adopters, and there was a good structure in place to assist workers in making appropriate matches, with careful consideration of the cultural, religious and ethnic needs of the children. Adopters were given full information on the children including a full medical summary. There was also evidence that sensitive work was carried out with children both prior to placement, and in adoption support.

The adoption support service was evolving and expanding. An experienced team manager had responsibility for the adoption support work undertaken in the team, which included long-term work with adopters and their families. Individual packages of support were also negotiated with other professionals and agencies where necessary. Adopters with children in placement were appropriately supported, and access to advice was always available. Adopters were aware of the support available.

Birth Records counselling was well planned, and sensitively carried out.

The adoption panel was administered efficiently, and was facilitated by the previous Medical Adviser to panel. It was thorough and child focused in the process of assessing and reviewing prospective adopters', monitoring the quality of assessments, and considering appropriate matches.

The agency decision maker operates within good timescales. He discussed the papers, recommendations and any comments from the chair with the service manager if he needed further clarification, when making his decisions.

The agency had access to sound legal and medical advice, and to a range of local resources and services.

Managers were experienced and provided good leadership, support and communication. Supervision sessions were regular, and staff confirmed that manager and supervisors were knowledgeable, approachable and supportive.

Social workers were enthusiastic, and had a good range of experience and skills. The adoption teams worked closely with their colleagues, and there was evidence that communication and working relationships across the teams was generally good. A placing social worker commented of the adoption team: "Communication was very good. The social worker was easy to work with, and very flexible and professional in her approach. She was also very knowledgeable and committed to the process, the family and the children".

The adoption service was supported by dedicated and hard working business support (including secretariat), working together towards progressing the agenda for improvement of the council.

Elected members took their responsibility as corporate parents seriously.

What has improved since the last inspection?

There were twelve requirements made following the first inspection of the adoption agency in 2004. A clear action plan was produced following this, and progress and improvements had been made by the time of a follow up inspection in September 2005. The number of requirements had reduced to one, with three recommendations. Improvements included:

- An improved children's guide.
- More independent members of panel, to meet new legislative requirements.
- A written protocol for panel members had been produced.
- All adoption work was completed by appropriately trained and supervised staff, as social work assistants were no longer employed by the teams.
- There was a reduced use of sessional and agency staff
- All adopters were now provided with the complaints procedure.
- The organisation of the service to inter country adopters had greatly improved.
- The adoption support service had developed and expanded.
- Panel member files had improved.
- Reception had been redecorated and minor repairs had been carried out.

What they could do better:

The agency was aware that it needed to attract more families who could match the needs of the children in the borough requiring adoptive families, particularly for young sibling groups, children of black and dual heritage backgrounds, as well as for older children with complex needs.

A clear recruitment plan had been developed to broaden the range of adopters for the children who need families, and this should continue to be developed and extended.

A new structure for business support services had been in place for less than a month, and a manager post was in the process of being advertised. This change in structure had been discussed for some time, causing anxiety for some staff, and needed to be fully operational as soon as possible.

It was recognised that Information Management systems needed to be updated to provide better quality information to the service.

There was evidence that the quality of Child Placement Reports was inconsistent. A project worker had already been appointed to assist with the mentoring of workers to improve the quality of the information provided.

Some returned questionnaires from adopters reported delays at different stages of the process, and changes in social workers. However, most of these also reported improvements, with a more reliable and consistent service now being provided. This needs to be maintained.

There was little evidence of formal, regular auditing on files examined, as the auditing tool only covered children's files. However, there had been a recent review of the case audit system and amendments have been made, which included the increased involvement of senior managers in file auditing across the division.

Personnel files needed to be reorganised to make the information easier to find. The recording of the details of received CRB's should be improved.

Plans to move from the current premises had been slow in coming to fruition. Inspectors were reassured that this would be affected within the next six months.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office.

DETAILS OF INSPECTOR FINDINGS

CONTENTS

Being Healthy - There are no NMS that map to this outcome

Staying Safe

Enjoying and Achieving

Making a Positive Contribution

Achieving Economic Wellbeing - There are no NMS that map to this outcome

Management

Scoring of Outcomes

Statutory Requirements identified during the inspection

Staying Safe

The intended outcomes for these standards are:

- The agency matches children with adopters (NMS 2)
- The agency assesses and prepares adopters (NMS 4)
- Adoptors are given information about matching (NMS 5)
- The functions of the adoption panel are as specified (NMS 10)
- The constitution and membership of adoption panels are as specified (NMS 11)
- Adoption panels are timely (NMS 12)
- Adoption agency decision is made without delay and appropriately (NMS 13)
- The manager is suitable to carry on or manage an adoption agency (NMS 15)
- Staff are suitable to work with children (NMS 19)
- The agency has a robust complaints procedure (NMS 24 Voluntary Adoption Agency only)

JUDGEMENT – we looked at outcomes for the following standard(s):

2,4,5,10,11,12,13,15 and 19

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

The agency provides a service that is aimed at the best possible outcomes for children. The quality and delivery of the service has consistently improved since the last full inspection.

EVIDENCE:

The managers and workers in Lewisham's adoption service demonstrated a commitment, supported in practice, to ensuring that the needs of children placed for adoption were at the centre of their work.

There was a recruitment strategy in place, but this needed further work to provide a clearer analysis of need and current provision, in order to prove more effective in practice, and to include more detail of specific future plans.

The agency was aware that further work was necessary to increase resources for the placement of young sibling groups, older children with complex needs, and children from black and minority ethnic backgrounds. Plans for recruitment to be better targeted both within the team were being developed to better

achieve this. Lewisham is a member of the South East London Adoption Consortium, which was working well, and was proving helpful in sharing resources. The agency prioritises families who best meet the needs of children waiting in their borough.

The quality of Child Placement Reports seen was variable. The reports are essential in ensuring clear and accurate information is available for the child in the future, but some seen lacked accuracy and good chronological accounts of information. There was a need to ensure a consistency in the quality of the reports produced, and the agency had already taken steps to address this by appointing a project worker to oversee the writing of these reports, and assist workers who were not experienced in producing these documents.

The service now works closely with the marketing communications team. Clear information concerning the adoption process was given to adopters. Material already produced was of a good standard.

There was a thorough preparation and assessment process, which was regularly reviewed. There was evidence that all statutory checks were obtained, although the memo recording receipt seen on files needed to be clearer, and include disclosure number, date received, and date signed off by manager. The memo had, however, recently been amended to include all relevant information, and would be used in future. Workers should ensure that adopters CV's provide details of the months of employment as well as years, or clear evidence that gaps in CV's had been discussed.

The team runs information meetings every six to eight weeks to link in with three planned sets of preparation groups a year. "I left an answer phone message and received an invitation to an information meeting in the return post", commented one adopter.

The preparation groups had recently been extended to four days, with the extra day facilitated by adoption support staff, and covering areas relating to post placement and building relationships with children. Feedback received from adopters through questionnaires and interviews reflected a positive initial response to enquiries by workers, and satisfaction with the content, and quality of presentation of the preparation groups; "The preparation days were excellent". Applicants can also join groups ran by members of the consortia to avoid delay.

A number of good quality Form F's were seen, which were analytical, thorough and clearly summed up applicants strengths, and issues of concerns. Adopters were positive about this part of the process; "We were immediately put at ease. The social worker's informal and friendly disposition made us feel comfortable and reassured that all the personnel information we were to divulge was not going to be as traumatic as we had anticipated", and foster

carers who were adopting wrote "our treatment throughout the process was conducted in a most sensitive and informative manner".

Feedback from inter country adopters suggested the system had improved. "The initial contact was not encouraging, and the department seemed chaotic. After a new manager took over, things became more organised" reported one. There was evidence of workers finding out information on countries they were not familiar with – "Lewisham adoption service has been very friendly, kind, helpful and supportive of my case from the beginning. My case is not one they have dealt with before, but they have made a lot of effort to inform themselves and me".

Some questionnaires received from adopters commented about the length of time the overall process had taken, including allocation of social worker, and changes in social worker. "We had a change of social worker 3 months in, which put us back. We had to start from the beginning with our new one", and one commented that staff were "pessimistic and negative" to begin with. However, managers clearly monitored adopters' feedback to ensure any dissatisfaction with the service was addressed, and there had been considerable improvement in all areas of service delivery, and the majority of comments were positive, including: "We were guided through each stage and kept informed"; "The support of the team has been marvellous, supportive and appropriate", and "Very thorough and no delays".

There was evidence of appropriate matching, helped by the completion of thorough assessments of the needs of the individual children prior to starting the family finding process, and sensitive direct work with children to help them understand the reasons for their adoption. There was a good awareness, understanding and knowledge amongst staff in matters of diversity, including the ethnicity, cultural and religious needs of children. Efforts were made to address these, and were integral to the agency's practice, policies and procedures.

The consortium had been a useful resource for families, and appropriate and timely referrals were made to the Adoption register.

A number of good matching reports were seen, which were thorough and detailed. Separate matching reports were not produced for individual children in sibling groups on files examined, but managers reported that this practice had been rectified. Adopters reported that they were given full information about the child being considered for matching, including full written medical summaries, and face to face discussion with the Medical Adviser, as required.

The adoption and permanence panel was held fortnightly. The membership met the new regulations, and there was an independent chair, who had previously been an independent member, and vice chair to panel. The panel adviser is one of the adoption team managers. There was sufficient time

provided for sensitive, child focused discussion, at the panel observed. Paperwork, on one case, was limited on background information, and was deferred for further information to be gained. The medical adviser had not received the most up to date information on two cases, but did have enough to inform the panel appropriately. Medical issues rather dominated the discussion, and the panel should ensure that all aspects of the child's needs, and issues for applicants are fully considered.

The structure of panel discussion, and the format provided for the recording of the minutes could be improved to ensure that all areas are sufficiently covered and recorded. The agenda and minutes are in general committee format, and could better record what recommendations are sought, and what recommendations are made. Panel members were not always introduced to applicants and workers joining the panel at the panel observed.

Quality assurance issues on work presented to panel were being taken up, and fed back to the agency, through six monthly meetings with the panel chair, director and service manager. There were appropriate working policies and procedures concerning panel. Written protocols governing the role of specialist advisers had been completed since the last full inspection. Panel feedback forms were given to adopters attending panel.

An induction programme was provided for new panel members, and an appraisal system had been introduced. Annual panel training had taken place, which included training on the new legislation, and sessions on Safeguarding Children, and inter country adoption. Panel members were also invited to an all day conference on "Supporting adopted children in school",

The decision maker was provided with the minutes of the panel meeting and decision sheets within five working days. The panel adviser also provides a summary of the case, and any issues of concern are discussed, and a decision made within appropriate timescales. There was evidence on files that decisions were made and letters confirming these decisions were sent out within the required seven days. Adopters confirmed that they were contacted for an oral decision to be conveyed within the two days as stipulated in guidance.

There was a process for monitoring the timescales of cases being presented to panel, and regular reports were provided to panel, as a further monitoring tool, to ensure plans for children were being appropriately progressed. The agency's policy also states that disruption meetings should be held, and the appropriate reports taken back to panel for discussion. In a case discussed at the panel observed, the disruption report had taken a year to be presented to panel. This should have been provided sooner.

The manager was suitably experienced and qualified, and has completed a Post Graduate Certificate in Supervision and Mentorship. It is recommended that the team managers also consider completing management training.

Telephone enquiries, to verify references, were being carried out for new staff.

Enjoying and Achieving

The intended outcomes for these standards are:

- The adoption agency provides support for adoptive parents (NMS 6)
- The agency has access to specialist advisers as appropriate (NMS 18)

JUDGEMENT – we looked at outcomes for the following standard(s):

6 and 18

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

The adoption agency is developing a cohesive approach to a range of support services for adoptive parents within the borough to ensure appropriate placements are made and maintained.

EVIDENCE:

The agency is continuing to develop its adoption support services. Managers were aware that take up of future services could increase, and there is a need to monitor the take up against their capacity to provide the range of responsibilities it carries in line with new legislation. There was a separate team, which undertook responsibility for adoption support.

There were good links with the local CAMHS, and one member of the team was a joint appointment, and worked for both agencies. There was no waiting list for this service, and members of the team sometimes worked jointly with CAMHS staff. Two of the team members had also completed Theraplay training. The provision of specialist educational provision for children in adoptive families in the borough had not been problematic. A conference was held in 2005 on adoption and education, and one family who had attended spoke very positively about this.

Adopters receive a regular newsletter, and for the past three years, a number of Lewisham adopters had attended the Adoption UK course, a "Piece of Cake". Adopters interviewed had also been invited to the agency's annual fun day, and workshops. Adopters pay their own membership of Adoption UK. The South East London Post Adoption Consortium run two groups a year for

adopted teenagers. These are planned around therapeutic activities. It also runs a bi-monthly group for adult adoptees.

There was positive feedback from adopters and staff on the quality of medical advice available to adopters. Adopters receive written summaries on the health of their children. The medical adviser will meet with adopters, and seek out extra information when necessary.

Adopters felt that the agency had provided them with good support and advice to enable them to develop their parenting roles, and help to manage any difficulties they were experiencing.

Staff and managers said they generally received a good service from the agency's legal advisers, and that advice is clear and helpful.

The quality of adoption support plans improving as workers gained more knowledge and experience of the likely issues, and those seen were well thought through.

Social workers in the Post adoption team operate the letterbox service, provide birth records counselling, and manage all contact agreement arrangements. All of the letterbox cases were allocated to provide continuity for service users. There was a waiting time of about four weeks for allocation of a worker to carry out birth records counselling at the time of inspection, due to a combination of annual leave over the summer period, and a member of staff being on long term sick leave.

Other specialist advice is sought from appropriate sources when needed, including education, special needs, or consultants on cultural and religious issues.

The agency is a member of the Inter-country Adoption Centre, but carries out most of their intercountry adoptions assessments itself.

Making a Positive Contribution

The intended outcomes for these standards are:

- Birth parents and birth families are involved in adoption plans (NMS 7)
- Birth parents and birth families are involved in maintaining the child's heritage (NMS 8)
- The Adoption agency supports birth parents and families (NMS 9)

JUDGEMENT – we looked at outcomes for the following standard(s):

7,8,and 9

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

The agency demonstrated its commitment to supporting birth parents and involving them in their child's adoption through appropriate policies and procedures, and some thoughtful work and initiatives.

EVIDENCE:

Two birth family questionnaires were returned. A birth mother was interviewed.

Although there was a lack of clear evidence of significant interaction between the agency and birth parents in some paperwork being presented to panel, there was evidence of a more proactive approach to engaging birth families when the adoption team took over the case responsibility. The birth mother interviewed had been appropriately offered counselling and supported with contact arrangements. Adoption team members spoke enthusiastically of their efforts to involve birth families in the process and in gathering information for the child on their family background. Access to independent counselling is available through two local voluntary agencies, and workers should continue their efforts to publicise this service and encourage families to use this resource, particularly as one returned questionnaire from a grandmother wrote that "no information was given", and "I had no say in this matter".

The agency's policies and procedures are clear about the need to maintain a child's heritage. It was also evident, from discussion with staff, that workers view life story work as important, and examples of thorough, sensitive work with children was seen. The importance of gathering information about the

child, and helping the child to understand the reasons for being placed in a new family was prioritised within the competing demands of the adoption social worker's role.

A range of leaflets giving information for birth parents were available at the time of inspection. These included information on adoption support services, and Lewisham's letterbox system.

There had been improvements in the organisation of the letterbox service, and as already discussed, all cases were now allocated to a named worker to ensure continuity for the service users. The birth mother and families interviewed indicated that they were well supported in providing and receiving information, and trusted that the system set up to exchange information would continue to take place as arranged.

Management

The intended outcomes for these standards are:

- There is a clear written statement of the aims and objectives of the adoption agency and the adoption agency ensures that it meets those aims and objectives (NMS 1)
- The agency provides clear written information for prospective adopters (NMS 3)
- The manager has skills to carry on or manage the adoption agency (NMS 14)
- The adoption agency is managed effectively and efficiently (NMS 16)
- The agency is monitored and controlled as specified (NMS 17)
- The staff are organised and managed effectively (NMS 20)
- The agency has sufficient staff with the right skills / experience (NMS 21)
- The agency is a fair and competent employer (NMS 22)
- The agency provides training for staff (NMS 23)
- Case records for children and prospective / approved adopters are comprehensive and accurate (NMS 25)
- The agency provides access to records as appropriate (NMS 26)
- The agency's administrative records processes are appropriate (NMS 27)
- The agency maintains personnel files for members of staff and members of adoption panels (NMS 28)
- The premises used by the adoption agency are suitable for purpose (NMS 29)
- The adoption agency is financially viable (NMS 30, Voluntary Adoption Agency only)
- The adoption agency has robust financial processes (NMS 31)

JUDGEMENT – we looked at outcomes for the following standard(s):

1,3,14,16,17,20,21,22,23,25,26,27,28,and 29

Quality in this outcome area is good. This judgement has been made using available evidence, including a visit to this service.

The agency has very good leadership, and management at all levels. Clear progress has been made in the organisation, efficiency and delivery of the service.

EVIDENCE:

The Statement of Purpose had been improved, and was clear and informative. The new version had been reviewed by the Adoption and Permanence panel in August 2006, but had not been formally approved by the Cabinet. This should be done. It is also recommended that with the next review, the information on monitoring the service is further developed, and that an organisational structure chart is included. Although details of CSCI's address and phone number are included, there is no explanation of the reason why. This should be addressed.

There was a suitable Children's Guide, which was under review to take account of changes in legislation. Details of CSCI should be updated, as the guide still refers to NCSC. The guide is bright and attractive, and includes details on how to make a complaint, how to contact the Commission's Children's Rights Director, and how to access an independent advocate.

Policies and procedures had been updated to reflect the changes in legislation, and are operational and available electronically to staff.

A good range of information about the adoption process was provided to prospective adopters, and interviews with adopters and questionnaires received confirmed this.

The adoption service has been restructured over recent years, which had provided extra posts and the establishment of a separate post adoption team. The service manager and other adoption team managers were appropriately qualified and experienced. Lines of accountability were much clearer than at the previous full inspection. The service manager for Looked After Children deputised at service manager level in the manager's absence. In addition, the three team managers provided effective day to day cover.

Appropriate tracking systems for monitoring children's progress through the adoption process were in place, with fortnightly permanency planning meetings which considered all children before their second looked after review, thus ensuring early identification of cases where adoption is likely to be the identified care plan. The children are then tracked by an adoption social worker until the case is transferred to the adoption team. The system to track the progress of prospective adopters was also operating well.

The authority had retained a suitably skilled and experienced staff group in the adoption team over recent years. The situation generally in Children's Social Care had improved, and greater stability in the workforce was having a positive impact on the quality of work and service delivery. The ratio of agency workers was now low, and there was stability at management level.

Staff indicated that they were kept well informed by their managers, who listened, and were approachable. There were regular team and management meetings to promote good communication throughout the service and regular supervision of all social work staff and managers. Staff in the adoption team felt they worked in a supportive setting where they valued sharing ideas and skills with colleagues. Newer workers felt they had been protected, and had received a reasonable induction into the service. Staff had regular appraisals.

The service manager said that the service had worked hard to form positive working relationships with all services responsible for looked after children. The corporate training programme was available to all managers and had been used well. A management workshop was held for the service in 2006 to address all areas of development; a management team development day was held recently with fostering and adoption managers.

There was a strong sense of a child focused agency, with senior managers, and elected members, working together and using their different roles to enhance the service for children needing adoptive families. There was a clear vision, a sound strategy and evidence of positive outcomes for children.

The energy, commitment and enthusiasm of staff was evident. There was clear strategic management to ensure performance, and the capacity to maintain what had been achieved and to address remaining challenges. The service manager's own assessment of the service demonstrated a clear analysis of the strengths and areas for improvement. Team managers considered the service manager to have given them explicit guidelines on safeguarding, to be skilled at helping with capabilities procedures, supportive, but also appropriately challenging and setting clear expectations.

All staff were qualified, and 23 % of current adoption social work staff had achieved a PQ qualification. Staff felt their personal development was encouraged, and good training was offered, although pressure of work sometimes impacted on their ability to attend. The sharing of ideas and training offered through the South London Adoption Consortium, was thought to be helpful and relevant to the development of their own work. Team managers said their own access to training was excellent.

The agency had all relevant staffing policies.

Those case records examined were on the whole well organised and structured. Managers should ensure that any photographs kept on children's adoption files should be identified and dated. There was evidence on files of supervisor's decisions being recorded, but evidence of file audits taking place was more variable. The auditing tool in place was created to cover children's files, and did not fit adoptive parents files. There was a monthly audit of one case per worker, but this system was about to change to include participation

by senior management. The IT system in place had an appropriate back up system in operation.

Complaints from service users were dealt with appropriately, and were dealt with within appropriate timescales.

Staff files held most of the information required, but should be reorganised to make the information easier to find. Panel member were well organised, and were maintained by the panel minute taker, who responded promptly to suggestions regarding updating the accompanying letter requesting references. The standardised memo from Human Resources confirming CRB's, should include the disclosure no., whether enhanced, the date received, full name, address and date of birth of applicant to ensure there is no confusion, and a management signature.

The adoption archives are located off site close to Lewisham's Civic Centre; the recall of files was operated efficiently. The building is staffed during office hours, and is linked to a security system during the evenings and weekends. Smoke detectors are fitted. Records were kept securely, and with due regard for confidentiality. Staff working in the archives were not aware if a written risk assessment had been carried out relating specifically to the adoption archives, but there was a draft Business Continuity plan in place.

There were plans to change the working environment of the adoption team, within the next six months by locating them to the central premises of the local authority, where they would join the fostering teams and the Looked After Children's service. The adoption panel and training events were already held at other venues. The current premises were considered fit for purpose, but it is hoped that the move to the main offices be completed as soon as possible as this change had been planned since the last inspection. Staff were concerned that the new offices would continue to be welcoming and accessible, particularly to birth families.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Adoption have been met and uses the following scale.

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

"X" in the standard met box denotes standard not assessed on this occasion
 "N/A" in the standard met box denotes standard not applicable

BEING HEALTHY	
<i>Standard No</i>	<i>Score</i>
No NMS are mapped to this outcome	

MAKING A POSITIVE CONTRIBUTION	
<i>Standard No</i>	<i>Score</i>
7	3
8	3
9	3

STAYING SAFE	
<i>Standard No</i>	<i>Score</i>
2	3
4	3
5	3
10	3
11	3
12	3
13	3
15	3
19	3
24	3

ACHIEVING ECONOMIC WELLBEING	
<i>Standard No</i>	<i>Score</i>
No NMS are mapped to this outcome	

ENJOYING AND ACHIEVING	
<i>Standard No</i>	<i>Score</i>
6	3
18	3

MANAGEMENT	
<i>Standard No</i>	<i>Score</i>
1	3
3	3
14	3
16	3
17	3
20	3
21	3
22	3
23	3
25	3
26	3
27	3
28	2
29	3
30	N/A
31	N/A

Are there any outstanding requirements from the last inspection?

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Voluntary Adoption and the Adoption Agencies Regulations 2003 or Local Authority Adoption Service Regulations 2003 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1.	AD1	The Statement of Purpose should be formally approved by the Cabinet following a review. It is also recommended that the information on monitoring the service is further developed, and that an organisational structure chart is included with the next review. Although details of the Commission for Social Care Inspection address and phone number are included, there is no explanation of the reason why. This should be addressed.
2	AD2	There was a recruitment strategy in place, but this needed further work to provide a clearer analysis of need and current provision, in order to prove more effective in practice, and to include more detail of specific future plans.
3	AD4	Workers should ensure that adopters CV's provide details of the months of employment as well as years, or clear

		evidence that gaps in CV's have been discussed.
4	AD12	The panel should ensure that all aspects of the child's needs, and issues for applicants are fully considered, and that medical issues do not dominate the discussion.
5	AD20	The level of business support should continue to be monitored following the reorganisation to ensure it enables staff to undertake their work in an efficient and effective manner.
6	AD27	Managers should ensure that any photographs kept on children's adoption files should be identified and dated.
7	AD28	Staff files held most of the information required, but should be reorganised to make the information easier to find.

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