inspection report

ADOPTION SERVICE

City of York Council Adoption Service

PO Box 402, George Hudson Street
York
YO1 6ZE

Lead Inspector
Linda Plummer

Announced Inspection
13th February 2007  10:00 am
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

**Reader Information**

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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

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<td><strong>Telephone number</strong></td>
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<tr>
<td><strong>Email address</strong></td>
<td><a href="mailto:mary.mckelvey@york.gov.uk">mary.mckelvey@york.gov.uk</a></td>
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<td><strong>Name of Nominated</strong></td>
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SERVICE INFORMATION

Conditions of registration:

Date of last inspection 28 July 2003 (National Care Standards Commission), with follow-up visit 1 November 2005 (Commission for Social Care Inspection)

Brief Description of the Service:

A Local Authority Adoption service, located within the Learning, Culture and Children’s Services Directorate, approving adopters, identifying children for adoption, making and supporting placements, and offering post adoption services to adoptive families, adopted adults and birth relatives. There are contracts with Doncaster Adoption & Family Welfare Society (DAFWS) for services to Inter Country adopters, and with After Adoption Yorkshire (AAY) for independent support to birth relatives and support to adoptive families. Very good working links have been established with the local Child and Adolescent Mental Health Service (CAMHS)
SUMMARY
This is an overview of what the inspector found during the inspection.

This announced Inspection took place over 4 days from 13 to 16 February 2007, followed by an Adoption Panel observation on 27 February and a telephone conversation with the Panel Chair on 2nd March.

Inspectors met with the Service Manager, Family Placement, her staff and immediate line management, Administrative Support staff, Child Care social workers, members of the Independent Reviewing Officers’ team, the Agency Decision Maker, the Councillor holding the position of Executive Member for Children’s Services, and the Vice- Chair of the Panel.

A selection of case files was read along with Panel Members’ Files and Personnel Files.

The building used by the Adoption Service was inspected, as were the Archives.

A range of literature was studied including Policy documents and recruitment material.

Visits or telephone calls were made to 4 sets of adopters, 2 recipients of adoption support services (Adopters) and 1 birth parent.

Questionnaires were sent to the following --
13 sets of adopters (6 returned); 13 birth parents (3 returned); 7 placing social workers (3 returned); 15 social workers, including adoption-service staff, (10 returned); 2 specialist advisors to the agency (both returned).
Selected quotes appear throughout the report.

The Inspectors would like to take this opportunity to formally record their thanks for the open, courteous and responsive manner in which all staff collaborated with this inspection.

A great deal of work had been put into the preparation and presentation of supporting documents, which was especially helpful in aiding the Inspectors’ task.

What the service does well:
Recruitment and Preparation of adopters is thorough and imaginatively creating a resource targeted to meet the needs of children waiting.
The Agency aims to create a pool of adopters from a broad range of backgrounds, in order to provide a non-discriminatory service for applicants.
and to have as much choice as possible when seeking to make placements. Inspectors interviewed a same-sex couple approved and waiting and a single man about to be matched.

Children’s ethnic, religious and cultural needs are matched with those of the adoptive families.

The expertise and commitment of staff is uniformly commendable, providing a reliable service working in the best interests of children.

Generally very happy with the Family Placement Team service commitment and hard work I know is put in by the team and their manager’ (social worker).

Quality Partnerships have been created with other agencies including within the local Consortium, enhancing choice and expertise available to service users.

Support to adopters is recognised as a crucial service and is offered through a variety of practical and counselling routes. 
All parties affected by adoption can make a direct referral to After Adoption Yorkshire.

The quality of legal and medical advice is high as evidenced by written reports and verbal contributions to Panel, plus other initiatives to enhance children’s placements.

There is informed ‘Corporate Parent’ commitment, with regular meetings and reports about activity and developments.

The Panel operates to a high level of competence under the expertise of the Chair and with multi-disciplinary input.

Timely decision-making for children is evidenced by the reports detailing the case-planning process.

Dedicated administrative support ensures a well-documented and effectively-run Panel.

Services are provided to enable Birth Parent involvement and support, enhancing their contribution to the future well-being of the child.

Approved adopters with or without children placed were generally very pleased with the service – ‘We had no delays. We could not praise York high enough’;
Staff are regarded as ‘easy to contact and to talk to’;
‘The team at York have been 100% behind us through 5 years of the adoption process. We now have 2 daughters and couldn’t be happier’;
‘We have been very pleased with the way things have gone and especially with the outcome. All the staff that we have met have been very friendly and helpful’.

Specialist advisors to the agency commented –
‘(The agency) keeps the welfare of the child paramount. Children move, when needed, efficiently to adoptive placement’;
The quality of the agency’s adoption work is ‘excellent’ and the agency ‘considers the question of matching with care’.

What has improved since the last inspection?

The Medical Advisor carries out a comprehensive medical assessment on the child being placed for adoption, which actively involves the birth parents, achieving better information for adopters.

Adoption workers have been trained in the use of Attachment Style Interviews for applicants, giving another source of insight into their parenting capacities.

Preparation Courses have been increased in frequency through collaboration with North Yorkshire CC making for speedier assessments.

One year’s membership of Adoption UK is provided for newly approved adopters offering additional sources of support.

All adopters (York-approved and other Local Authority-approved but living within the City boundary) are invited to adoption support events with the aim of enhancing placement stability.

Panel Procedures have been introduced to offer uniformity and transparency of process.

The DfES model for assessing eligibility for financial support is employed.

The Children’s Guide to adoption is customised for each child, reflecting their developmental stage and communication skills, making the information more accessible and meaningful.
What they could do better:

Panel members’ files need to be improved both in presentation and content.

Personnel files also need attention as examination confirmed that all staff were appropriately qualified but failed to find evidence of telephone verification of references.

The Inspector was also unable to find an up to date CRB check in the Personnel File for the ADM.

The access route to adoption support for adopters might be more ‘user-friendly’ if it were direct to the Adoption Service rather than through the Council’s general Referral and Assessment team. It is acknowledged by the Inspector that this would require additional staffing in the Adoption Service.

Staffing levels are inadequate, placing unsustainable demands on staff.

Not only is the development referred to above concerning adoption support, prevented, but also delay in assessment of adopters is occurring.

This could tarnish the Agency’s reputation, thereby adversely affecting its ability to recruit and, by slowing down numbers of adopters coming through the system, create delays for children waiting.

Applicants caught by the staff shortage reported –
‘Unfortunately my assessment hasn’t begun. I am disappointed by the delay but understand it is due to staff shortages’;
‘We do now feel frustrated…. nobody has yet been allocated our case…. we went on (the) course months ago’;
‘We have become disillusioned with the service provided by the council…. the staff shortage has still not been resolved…our first expression of interest was some 10-12 months ago and we feel we are going backwards not forwards’. This couple felt strongly that personal contact (rather than a letter) to explain delay would have been preferable. ‘In particular, first letter was received on a Saturday when it was impossible to speak to anybody. It may not have been deliberate but that was how it felt’

The Agency’s Adoption Service Policies and Procedures, including the provisions for access to information and intermediary services, need to be updated to reflect new legislation.

Questionnaires returned by adopters indicated variable knowledge of the Independent Review Mechanism, the National Adoption Register and the Complaints process.
Guidance and requirements for addressing allegations against adopters and matters of historical abuse are missing from the current draft of new safeguarding Policies and Procedures.

The Agency might wish to consider introducing a reminder system into the letterbox arrangements. This would help to avoid contacts ‘drifting’ and would highlight if addresses or other circumstances had changed or if participants needed more assistance to meet their commitments.

In the light of new legislation concerning a right to an intermediary service for birth relatives whose adopted children have reached 18, the Agency might consider a pro-active approach to those adopters with children aged 17, to offer information and support.

The Agency has itself identified, in addition, the following areas where it wishes to see developments –
Provide a comprehensive medical assessment for a child when first accommodated;
Obtain assessments of attachment needs via CAMHS for children with plans for adoption;
Employ the ‘In my Shoes’ computer programme to better understand the impact of a child’s early experiences of family life – in particular for younger children and those with communication difficulties (part of a development project with BAAF);
Consider inviting adopters to the Matching Panel;
Review how adoption support needs are assessed and met;
Continue the development of electronic record-keeping in line with the confidentiality requirements of an adoption service. (The need, however, to ensure all staff feel supported in this development is perhaps exemplified by one response to the questionnaire -- ‘Be honest about the severity of the constraints imposed by inappropriate electronic and ‘goal setting’ systems’)

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. The summary of this inspection report can be made available in other formats on request.
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)
- Adopters 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)
- The agency safeguards and promotes the welfare of its service users (NMS 32)

The Commission considers Standards 2, 4, 5, 10, 11, 12, 13, 15, 19, 24 and 32 the key standards to be inspected.

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

2, 4, 5, 10, 11, 12, 13, 15, 19 and 32.

Quality in this outcome area is good with the Agency preparing its adopters thoroughly, and using a range of sources to make appropriate placements. The Panel functioning is robust and has children’s well-being as its focus.

EVIDENCE:

Knowledge of the children waiting across the region is gained through the Consortium and applicants prioritised accordingly.

Given the staffing level in the Adoption team, the numbers of adopters approved (in last 12 months – 7, of which 2 were 2nd time adopters and 1 was a previous foster carer) and of children placed (13 in last 12 months), demonstrates consistent activity.
Consortium membership has been used to make placements and to move applicants efficiently through the assessment process (4 of the 8 matches in the last 12 months; joint Preparation Groups).

One social worker respondent to the questionnaires reported, however, – ‘I think children in York receive a good service’ (but) ‘it can be difficult to identify suitable placements through the Consortium...perhaps York could use other local Consortiums’;

The National Adoption Register has been used to enable the best use of resources (6 approved adopters and 3 children referred in last 12 months; 1 match)

The ethnicity and religious needs of the children placed in the last 12 months have matched those of the adopters chosen, recognising the value of positive recognition and re-enforcement of the child’s heritage to their future well-being.

Children’s Guides to adoption are customised for each child and age-appropriate, enhancing their value to the individual child needing placement.

The Agency has a Children’s Rights Worker, demonstrating the commitment to hearing children’s voices and seeking to meet their needs.

Children were being matched, by and large without delay (of 13 matches brought to Panel in the last 12 months, 10 were within 6 months of the Panel where the plan for adoption was confirmed) and children’s cases were being presented to panel within 3 months (or more quickly) of adoption being identified as the care plan, thus avoiding the damage to the child’s emotional functioning which can come from uncertainty and ‘drift’.

(The Agency) ‘Provides a good all round service to children we are involved with from Family Support through to Child Protection and LAC’. (social worker survey)

There is a Contract with Doncaster Adoption and Family Welfare Society for Inter-Country Adoption assessments, which ensures that the Agency meets its statutory obligations to those residents wishing to adopt from overseas.

The Preparation Course for domestic adopters is comprehensive. It is evaluated by facilitators (a review is held after each Course) and participants (who consistently rate the experience highly, as evidenced in survey returns – see quote below) and is continually updated to ensure its relevance to the adoption task. This is then a contributory factor in ensuring the Agency provides well-prepared adoptive families for the children waiting.
meeting adoptive parents on the course was probably one of the best parts...it was excellent.... packed full of information and very thought provoking’.

Adopters’ assessment reports showed evidence of assessment being based on parenting capacity and potential and a competency approach was employed. Relevant checks were taken up as part of the Agency’s efforts to ensure safe care for children eg all ex-partners are approached; employment references are taken up.

However, the Health & Safety checklist included in the adopters’ assessment should have questions about ownership/storage of guns, weapons etc. Assessments were being completed within 6 months of the Home Study commencing, but the agency had adopted the practice of accepting an application form after attendance at a Preparation Course, when ACA 2002 Guidance Chapter 3 requires this to be done before.

Placing social workers made the following comments in questionnaires – ‘The assessment of the prospective adopters was very good and gave an accurate picture of their personality, strengths etc’; ‘The Form F was one of the best I have read. It described the family well and addressed any outstanding issues/concerns raised’; ‘In my experience, this authority does work hard to take children’s views into account’.

Approved Adopters interviewed were very satisfied with quality of service.

An example was seen of an ‘adopters’ book’ about themselves, prepared for a child, which was thoughtful, attractive and child-focussed, capable of providing a child with a useful introduction to the new family.

There have been 3 disruptions in the last 12 months. Examination of the files showed thorough consideration had taken place at Panel and the decision-making seemed sound; one concerned a child who had waited 2 years for a match and another a child separated from her sibling. Disruption meetings had been held or were planned and Panel received feedback.

The Agency benefits from a robust Panel.

There is an expert Chair, with considerable experience in the practice, theory and regulation of adoption; Reviews are undertaken, by the Chair and the Agency Advisor, as per regulation on Panel members; training is provided for Panel, including jointly with Agency staff; the quality of specialist advice is very high; the Panel minutes reflect clear recommendations and this is followed by speedy decision making; links exist between Panel and Agency staff concerning policy and practice development.
There is a Panel Handbook for all members and BAAF’s Effective Panels is distributed.

A Booklet is provided for applicants attending Panel and there is a careful process for supporting them in this, with the aim of making the experience meaningful for applicants and Panel members alike. Adopters’ feedback confirmed that they had felt as well-prepared as possible and had appreciated the opportunity to attend Panel.

There is effective minute taking and an efficient process for sending out Panel papers. Members receive papers a week prior to the Panel date. Panel meets every 3 weeks and extra meetings would be arranged if necessary to avoid delay.

There is an appropriate gender mix, but the Panel is all-white. The Panel papers were sent out in a sturdy, especially-designed and sealed, envelope but this, in itself, did make the package conspicuous and the papers were not anonymised, thus presenting some questions concerning confidentiality.

There are regular meetings between the Panel chair and managers but no Annual Panel Report.

The Service Manager’s current workload can limit her ability to Quality Assure reports coming to Panel.

One social worker respondent did express reservations about the Panel – ‘Improve Panel – recent experiences of SW staff indicate that the discussion is heavily influenced by the chair and representations made by SW staff has been minimised’;

The Agency Decision Maker (ADM) is an Assistant Director in the Children and Families Service and has been in York for 6 years.

He receives and read all the Panel papers and approves of the recent legislative development that provides for Panel to make a recommendation and give advice.

He has observed a Panel and found the Panel members to be well-prepared and was impressed with the contribution of the Agency Advisor (Service Manager).

He finds the Panel processes to be efficiently conducted. The minutes for instance are with him within 2 days so there are no problems in achieving the regulatory timescales for decision-making and notification.
Inspectors did query the practice whereby the letter confirming approval or match goes to adopters from the ADM, but the notifications to birth parents go from a social worker. Staff explained that this was a conscious decision, aiming to be less ‘formal’ and ‘distant’ for birth parents, and allowing for the social worker to hand-deliver the letter. Inspectors appreciated this reasoning but offered the alternative view that it could seem as if the birth parents did not merit the same degree of senior personnel attention as adopters were receiving.

There was a file example where the letter from a social worker had gone out, outside the required timescale.

The ADM meets twice a year with the Legal Advisor, the Medical Advisor, the Agency Advisor, Panel Chair and the Group Manager. The group use this opportunity to take stock, reflect on panel activity, membership, training etc. He undertakes the annual review of the Panel Chair alongside the Agency Advisor.

He may pick up on practice issues that reflect on wider standards within the agency but in general expects his Team and Group Managers to gate-keep the quality of work being presented to Panel, on his behalf. Because he manages the managers he is able to make a direct approach in cases of concern. As well as systems for addressing poor practice the agency does have a commendation system for good work, which can aide staff morale.

He has never disagreed with a Panel recommendation.

He did meet with applicants who had been recommended for rejection by Panel – a recommendation he had endorsed.

The post-holder’s position as Chair of the Long-term Fostering Panel means he is well-placed to have an overview of planning for children.

The Service Manager has been in post since September 2001 – her personnel file did not have evidence of references and therefore no evidence of telephone verification. The CRB check was at enhanced level and up to date.

There have been no complaints received by the adoption service in the last 12 months.

There have been no allegations concerning child protection issues made in respect of adopters in the last 12 months.

Safeguarding procedures are currently being updated and the Manager’s attention was drawn to the omission of any reference to the procedure to be followed when an allegation is made against an adopter.
These also need to refer to allegations of historical abuse.

(The previous procedures had been perfectly clear on these points) Case supervision decisions and evidence of file audit were not routinely found in the case files examined. (But see also Management section of Report)
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)
- Services are tailored to meet the needs of people affected by adoption (NMS 33)

The Commission considers Standards 6 and 33 the key standards to be inspected.

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

6, 18 and 33

Quality in this outcome area is excellent with a variety of resources and specialist expertise, both internal and external to the Agency, being offered to enhance placement stability.

EVIDENCE:

The Agency takes a pro-active approach in offering support to adopters with children placed, living in the City boundaries, whether York or Other Local Authority-approved, with the intention of sustaining placements to the benefit of children.

Adopters will be informed during assessment of the services available through AAY and about the Agency’s support group.

Training opportunities are also made available although the adopter(s) may have to self-fund.

Recipients of adoption support interviewed were pleased with the service received.

There are Contracts with After Adoption Yorkshire (AAY) & Doncaster Adoption and Family Welfare Service (for Inter-Country Adoption) – feedback is routinely received and the contracts reviewed annually. The last available copy
on file, however, of a contract with DAFWS expired in March 2005 and the manager will attend to this.

There are well-established links with the Child and Adolescent Mental Health Service (CAMHS) offering additional support to adoptive families, enhancing the family-life experience of both parents and children.

All of the children placed in last 12 months (13) have an Adoption Support Plan in place, aiming to effect and maintain secure placements.

Staff expressed strong commitment to ensuring adopters understand and value the importance of heritage to the child placed with them. However, cases examined by the Inspectors found examples of name changes for children on adoption.

Staff fully understood the importance of support following disruption and looked to learn from these events for maintaining future placements. One of the Independent Reviewing Officer team would be used to chair a Disruption Meeting.

The agency did not use Life Appreciation Days, as a placement planning aid, and might wish to explore this concept.

The quality of legal and medical advice available was very good.

When unable to attend Panel, the Legal Advisor provided a full written report on the case(s) to be heard. This enabled informed case-planning.

The role of the Medical Advisor was exemplary and her initiative in undertaking children’s medicals and in interviewing birth parents for their medical information had reaped demonstrable rewards in better quality and fuller medical information available to be passed on with, and for, the child to adopters.

The Vice-Chair of the Panel had an education background and could therefore offer this area of expertise as necessary.

The Agency had taken a considered decision when seeking new Panel members to bring in people with specialist knowledge eg a CAMHS employee and a worker from a local drugs agency, reflecting both the likely future needs of children placed for adoption and possible past influences.

The Adoption Service can refer to Children’s Services Policies and Procedures on ensuring information is conveyed to service users openly and with due regard for any special needs.
Feedback on their experience of service provision is routinely sought from service users. Birth relatives and children and young people will be invited to use the Child Care review process. Those entering the adoption process have their views sought via verbal feedback to staff and evaluation forms.
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)
- Service users receive good quality services based on their needs (NMS 34)

The Commission considers Standards 7, 8, 9 and 34 the key standards to be inspected.

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

7, 8, 9 & 34

Quality in this outcome area is good with independent services available for birth relatives and observable staff commitment to valuing the child’s heritage and to supporting adopters with this task.

EVIDENCE:

An Independent service to Birth Relatives is provided through a contract with After Adoption Yorkshire (AAY). This is routinely monitored and feedback received.

There is evidence from previous minutes and Panel observation that due emphasis is laced on the value of heritage.

Birth parent views are actively sought for inclusion in the Child Permanence Report and for input into a Life Story Book

An example provided of a Life Story Book was commendable for the comprehensive and thorough approach that had obviously been taken by the author. The Inspector did have some concerns that the story was a complex one, involving many people and some of the information/connections were possibly difficult for an adult to follow and may therefore have been potentially confusing, rather than explanatory, for a child. Nonetheless, in terms of
providing a rich and full picture of the child’s place in his/her birth family, it was a valuable document.

Should siblings be placed separately, adopters would be sought who would actively promote contact and they would be given support in maintaining this.

There is direct access to AAY for service users without requiring an assessment of need for adoption support services.

A well-administered Letterbox System provides support for indirect and direct contact (practical, financial). There are over 100 arrangements, each one involving at least 2 parties. The agency produces literature explaining the post box system and the AAY service for all parties affected. A possible development to further enhance an already good service might be the introduction (as staff time allows) of a ‘reminder’ system for the letterbox arrangements.

New legislation has introduced the right to an intermediary service for birth relatives and the agency could build on its existing links with adoptive parents and birth relatives (through the letterbox system) to prepare now for post-18 developments.

The Adoption Support Service functions are split between the Service Manager as the nominated ASSA with financial authority and the adoption worker who provides the front line advice and sign-posting to appropriate services. Requests for an assessment for adoption support are routed throu the agency’s general referral and assessment team, albeit with the involvement of the adoption worker. The staff concerned felt confident that relationships with child care colleagues and the latter’s appreciation of the ‘adoption dimension’ ensured a responsive service, but in the view of the Inspector this is a potential weakness and could present an obstacle to a truly ‘user-focussed’ service. The agency may wish to consider routinely gathering feedback from service users to inform their position on this issue.

The small number of birth relative surveys returned gave a mixed picture of user satisfaction -- Birth mother 1 -- ‘If it was not too late, I would be going back to court. They did not give us enough time’; Birth parent 2 -- ‘The staff treated the respondent ‘with respect’, were ‘usually’ easy to contact, offered support, and ‘always’ gave the respondent enough information about what was happening; Birth mother 3 (who also spoke to an Inspector) -- ‘Mixed feelings’ as to whether the agency took account of her special needs and as to whether the staff were helpful, but the family’s particular racial and cultural needs were ‘always’ recognised .... ‘they treat (my child) fairly’; the agency could ‘be more
helpful in explaining and supporting families especially through such a difficult
time for families and provide more information and listen more’.
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)

The Commission considers Standards 1, 3, 16, 21, 25 and 27 the key standards to be inspected.

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

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

Quality in this outcome area is adequate reflecting the concerns about staffing levels and files for panel members and employees. The Agency otherwise has many strengths in the quality of staff at all levels in the organisation, service conditions, and records maintenance.

This judgement has been made using available evidence including a visit to this service.
EVIDENCE:

The Statement of Purpose is well structured, comprehensive and clearly written. It is available electronically on the Agency’s intranet for staff information and on its website for public access.

An updated document was presented to Panel in February 2007. The Agency might consider highlighting the adoption service staffing group within the overall organisational chart and providing a glossary of social work qualifications eg CQSW.

Some inaccuracies re legislation concerning time scales and some omissions eg reference to contacting a previous partner when undertaking an assessment, have been drawn to the Manager’s attention.

The CSCI office address used in the Statement should be Manchester.

The Statement of Purpose refers to welcoming applicants to adopt and contains information about the assessment process. This is dealt with in more detail in the enquirers’ and ‘expression of interest’ packs provided to those pursuing an interest in adopting.

The Agency produces age-specific Children’s Guides, customised for the child in question – an example seen for a young child was clear and easy to follow, but omitted an address for the Commission and gave an incorrect telephone number, plus there were no details for the Children’s Rights Director.

The Agency is developing the use of a computer programme called ‘In My Shoes’ in conjunction with BAAF, which aims to gather information offering more insight into the impact of children’s family experiences, which can then be used to better inform adopters with whom the children are placed.

The Agency recruits on the basis of the needs of children waiting in the region and nationally.

The Agency refers children and approved adopters without delay to the National Adoption Register and the local Consortium. A sense of urgency was reported in the approach to the planning process – especially for young children. Family placement staff may attend Child Care Reviews and the IROs who chair these were regarded as particularly tenacious in ensuring progress on the child’s case.
The frequent use of Inter-Agency placements held the potential for both positive and negative experiences as staff could learn from encountering variety in social work approaches but also might experience differences in standards.

The Consortium was thought to work well overall and money was certainly not a barrier to making the best placement.

The Agency has a contract with Doncaster Adoption and Family Welfare Service to provide a service to City of York residents wishing to adopt from overseas. This contract is regularly reviewed and activity reports received.

The Service Manager has 25 years experience in social work and has professional and managerial qualifications. She has a clear job description and exercises competent and well-respected leadership, displaying an exceptional degree of commitment to the task.

The Agency’s small size and ‘flat’ management structure is experienced by staff as aiding communication laterally and vertically. One perceived disadvantage was a lack of career structure.

Immediate line Managers are on-site and regarded as approachable.

Supervision and appraisal processes were all found to be in order.

Staff (practitioners and management) in the adoption service are appropriately qualified. Child Care social workers who present cases to Panel concerning children are all qualified as per Regulation to write the Child Permanence Report.

There is competent administrative support within the Family Placement Service, which extends to advice and guidance for children’s social workers when presenting to Panel.

Advice and assistance from other disciplines eg legal and medical input is well-developed.

The Councillor who holds Executive responsibility for Children’s Services brings knowledge from other related arenas to her assessment of the adoption service. She believes the City produces good outcomes for children as evidenced by the 6-monthly reports of activity which come to the Council’s Advisory Panel (This is cross-party and includes community and multi-disciplinary representation) and the regular (monthly) briefings held with senior managers.

Staff can access relevant policies via the Agency’s Intranet.

The Council as a whole has clear policies and procedures re eg equal opportunities, whistle blowing.

Staff have received refresher training from the Children’s Complaints Manager.
The example provided of the Employee Induction Pack had a front page dated 2004 and the individual pages were not dated, so it was not possible to know with confidence that all the information was completely up to date, but overall it would be a useful document, once these issues were addressed.

Social workers responding to questionnaires indicated that (by and large – some difficulties reported) they had access to training, specialist advice as needed and knew how and where to find agency policies and procedures

The Adoption service is inadequately staffed. The Service Manager has, effectively, 3 jobs – managing the adoption service (including adoption support), managing the fostering team and operating as Advisor to the Panel – and despite her best efforts and commendable commitment, this heavy workload must impact on service delivery. There is only one social worker undertaking assessments and providing adoption support. Some delays were building in progressing applications. (There is a 0.5 vacancy)

One questionnaire returned commented ‘(Need) more staff particularly to meet the growing demands on adoption support’.

The Agency is regarded as a fair and competent employer and staff reported that they were ‘proud to work for York’, believing that the outcomes for children were good and that the service was successful in finding adopters.

Training opportunities are provided, although it is sometimes difficult to prioritise.

‘Often not enough time to attend training due to workload – whilst allowed to go, in reality, training is often not a priority due to other commitments’. Some staff felt ready for more specific/advanced topics.

Staff did feel pressures from the volume of work, exacerbated recently by sickness and vacant posts.

‘caseloads are heavy; doesn’t always feel that we have the time and space to do a quality job’.

However, the Manager, and in turn, her staff, felt generally well-supported within the structure.

Recruitment, induction and managerial support were all rated highly in social worker survey returns – ‘I feel completely supported by my manager and also feel that she is realistic about workloads’.

The case files themselves were commendably sturdy and generally well-presented and structured, with a Contents sheet and dividers. There was
evidence that recommendations from an SSI Inspection report had been followed concerning the necessary contents of an Adoption Case Record. The service is moving to an electronic file system. Supervision discussions are recorded on the electronic case record.

Some cases were begun as paper records and transferred to electronic recording. There did not appear to be a system for annotating the paper file to inform the reader that other recording existed electronically. Regular file audits is the expectation.

Policies and Procedures for the service outline the process for access to records and for the creation of separate files should there be a complaint or allegation.

There was variable quality to Personnel files –
Agency Decision Maker & Assistant Director – appointed 2000 – no photo, no CRB check apparent;
No files seen had photos;
One file contained a memo with information relating to other staff; this same file held no references and another held no evidence of telephone verification of references;
Otherwise, files did contain evidence of GSCC registration and enhanced CRB check.

Panel members’ files were not considered to be adequate –
Chair – no letter of appointment; no references; no photograph; no proof of qualification; no proof of induction/panel observation.
Vice-Chair – no CV; no references; no photograph.
Independent member – needs enhanced level CRB
Councillor – no photograph; no CV; no references; CRB check should be enhanced level
Medical Advisor – hospital CRB used –these are not ‘portable’; it was not clear if evidence of qualifications had been obtained
As an overall requirement, the Inspector would wish to have seen a separate folder for each person.

The premises are, by and large, suitable, although the office used by the Adoption and Fostering team was rather cramped.

There is a burglar alarm, a Fire Alarm and Fire doors (most on automatic closure) and the system is tested regularly. One door (not of the automatic closure design) was propped open and should not have been.

The disabled toilet was being used for storage of various items, which would have precluded its use by anyone in a wheelchair. This was immediately rectified on being brought to the attention of the office manager, but may need checking periodically as the lack of storage space, which may have contributed to this occurrence, could still be a pressure.
Files were kept in lockable cabinets and the keys in a lockable cupboard. The building is a Victorian house with all the limits on meeting modern disability-friendly expectations that that implies.

There are plans to relocate within the next 2/3 years and the building has been identified and is currently being prepared.

This is likely to mean that maintenance and repair costs will be curtailed – there is cosmetic damage to the seating and wall in one of the interview/meeting rooms, which gives a slightly scruffy appearance. On reflection, since the filling of the sofa has been exposed, this should perhaps be tested for fire safety.

The Conference Room used for Panel does not have an Induction Hearing Loop. The telephone system has a mini-com provision.

The Archives are currently in a temporary location, which will shortly be improved.

The Agency has a Disaster Recovery Plan.

Financial processes are covered by the whole Council audit procedures. The Agency is moving to an electronic file system and is fully mindful of the extra security arrangements needing to be in place to maintain the confidentiality of adoption placements.

All staff are covered by the Council’s public liability and professional indemnity insurance.
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

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<th>BEING HEALTHY</th>
<th>MAKING A POSITIVE CONTRIBUTION</th>
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<tr>
<td><strong>Standard No</strong></td>
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Are there any outstanding requirements from the last inspection? No

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**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.

<table>
<thead>
<tr>
<th>No.</th>
<th>Standard</th>
<th>Regulation</th>
<th>Requirement</th>
<th>Timescale for action</th>
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<tbody>
<tr>
<td>1</td>
<td>AD28</td>
<td>Reg 6,11 &amp; 15 and Schedules 3 and 4 - The Local Authority Adoption Service (England) Regs 2003</td>
<td>Comprehensive and up to date Personnel files must be maintained for staff and Panel members</td>
<td>30/06/07</td>
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<tr>
<td>2</td>
<td>AD32</td>
<td>Reg 9 – The LA Regs 2003 as above</td>
<td>The Agency must have a detailed written child protection policy which includes provision for responding to allegations of abuse by adopters and to allegations of historical abuse</td>
<td>30/06/07</td>
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<td>3</td>
<td>AD21</td>
<td>Reg 10 – The LA Regs as above</td>
<td>The Agency should review staffing levels to ensure that there is an adequate number of sufficiently experienced and qualified staff to meet the needs of the adoption agency</td>
<td>30/06/07</td>
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</table>
# RECOMMENDATIONS

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

<table>
<thead>
<tr>
<th>No.</th>
<th>Refer to Standard</th>
<th>Good Practice Recommendations</th>
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