

West Sussex CC (Social & Caring Services) Adoption Service

Inspection report for LA Adoption Agency

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About this inspection

The purpose of this inspection is to assure children and young people, parents, the public, local authorities and government of the quality and standard of the service provided. The inspection was carried out under the Care Standards Act 2000.

This report details the main strengths and any areas for improvement identified during the inspection. The judgements included in the report are made in relation to the outcomes for children set out in the Children Act 2004 and the relevant National Minimum Standards for the service.

The inspection judgements and what they mean

Outstanding:	this aspect of the provision is of exceptionally high quality
Good:	this aspect of the provision is strong
Satisfactory:	this aspect of the provision is sound
Inadequate:	this aspect of the provision is not good enough

Service information

Brief description of the service

West Sussex County Council 'Social and Caring Services' operate its own discrete adoption service. The aim of the adoption service is to achieve good outcomes for children, thereby maximising their life chances and choices. Their objective is to provide a secure and permanent family in a timely manner for every child for whom adoption is considered in his or her best interests by: maintaining a pool of motivated, committed, well-prepared adopters able to meet the needs of children through to adulthood; establishing a high standard of assessment and vetting of adoptive parents; maintaining a good quality system of support to adopters; the provision of appropriate supervision, support and training to adopters; providing a well organised adoption support service, which will provide ongoing support and guidance to adoptive parents once the child has been adopted; supporting adopters through short courses and support groups; maintaining a responsive financial support provision to adoptive parents; providing an efficient and responsive assessment and counselling service for children, adopters, birth relatives and adopted adults and providing appropriate and timely therapeutic support to adopted children and their families.

The adoption service is presently operating on two sites within West Sussex. The adoption team providing link work to area children's social workers, the assessment of adopters and involved in matching issues are based in Horsham. The adoption support team providing assessment of the support needs of children, birth families, adopted adults and adoptive families, are based in Bognor. The team manager is based in Horsham, and the service manager is based in the Worthing. The adoption panel meets in Bognor Regis.

Summary

The overall quality rating is good.

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

This inspection was a full, announced inspection, carried out by three inspectors over a period of five days. Key personnel were interviewed, documentary evidence was read and service users interviewed and surveyed for their views of the service.

The adoption agency provides an excellent service to children, birth parents, adopted adults and adopters. The recruitment, preparation, assessment and approval of adopters is extremely thorough and the adoption panel provides robust scrutiny of approvals and matches. Matching of children is well thought out and systems are in place to prevent drift. All staff are subject to sound recruitment and selection procedures.

Adoptive families are well supported, both financially and by the use of West

Sussex's own and other services. Birth families and adopted adults also receive a sensitive and supportive service from committed professionals although there is a awaiting list for this service. Life story work is given a high priority and children's heritage is promoted through a robust letterbox system.

The agency is well managed, both structurally and operationally, by committed, experienced, knowledgeable managers. Good monitoring is in place both from the executive side of the council and the managers; staff are well supported, supervised and receive good training to enable them to provide an excellent overall service.

Improvements since the last inspection

At the last inspection, the agency had two actions and 13 recommendations. The two actions have for the most part been complied with although they do require very slight amendment. Of the 13 recommendations all have been reviewed during the course of this inspection and again two require very slight amendment.

The transition following structural re-organisation of the West Sussex County Council's Children's Service towards a model of integrated services in line with the Children Act 2004 has resulted in substantial reconfiguration and movement of staff. This has on occasion impacted on the functioning of the adoption agency because of a shortage of social work staff who are experienced in adoption work and who meet the requirements of the restrictions on preparation of reports regulations. Consequently, the adoption team social workers and managers in the permanence service have dealt with additional demand in terms of advice, guidance and mentoring to support children's social workers.

A new Adoption Team Manager (the previous senior social work practitioner) was appointed on an acting basis in September 2007 and then confirmed in post in January 2008. However, the post of senior social work practitioner was not filled until June 2008 due to structural reorganisation. Recruitment to the consequent vacancy in the Adoption Team is due to take place Autumn 2008. The consequence of this is that the adoption team has not been staffed to capacity over the last 12 months.

However to address these issues suitably qualified free-lance social workers have been used as and when they have been available to ensure that the work of the adoption team has not been impeded. They have been successful in assessing and supporting a number of placements. Extra hours have been made available to existing team members to maximise capacity and in the permanence teams agency staff have been recruited as far as has been possible.

The service is managed by experienced and skilled team managers who are well supported by the permanence service manager who has managed the adoption service for eight years and has skill and expertise in this area of work. The additional development of the permanence service has created a supportive management team with three experienced team managers completing a strong and coherent management team. Retention of social workers in the adoption team has been

achieved and the adoption team has remained very stable over the last 12 months with only one part time member retiring.

Helping children to be healthy

The provision is not judged.

Protecting children from harm or neglect and helping them stay safe

The provision is good.

The agency demonstrates a clear understanding of the needs of children who require adoptive families. There is a written recruitment strategy which addresses how to meet those needs, the evidence provided indicates that the agency is successful in recruiting and approving adoptive families who are from many different backgrounds. However at present the agency does not have many adopters from ethnic backgrounds. If they do have a child with specific ethnic needs and there is no suitable match in house then the agency will, as a matter of urgency look outside and seek a match from the consortium. However over the past year West Sussex have had a number of children being relinquished for adoption by Polish nationals working and living in the county. A Polish social worker has been used to assist in interpreting and informing cultural references. All of the children are on the adoption register, as are the approved adopters.

Children generally do not wait too long for adoptive families, this is achieved by the use of inter-agency placements when West Sussex adopters are not suitable. There are formalised systems in place to enable the adoption team to have an awareness of the children who may require an adoptive family and thus undertake timely planning to prevent delay. Clear assessments take place to look at sibling attachments in order to make sound decisions about separating or placing children with their brothers and sisters. The evidence seen also shows that every effort is made to place children in families which meet their cultural, religious and ethnicity needs. However, in line with the principles of 'Achieving the Right Balance', children's plans are not delayed in order to find a perfect match.

There is a formal, thorough process for preparing, assessing and approving adopters. Interested parties receive an information pack and then follow this up by confirming their interest with the agency. A social worker will then undertake an initial interview with interested parties; the team then decides whether to take up the application and the applicants are then invited to take part in a preparation group. The course lasts for three and a half days, which is spread over three to four weeks, so as to reduce the intensity. All adoption preparation courses promote equality and diversity as an integral part of adopter preparation. All participants are asked to complete a feedback form, and this forms part of the documentation that is ultimately presented to the panel. Previous adopters and birth parents are closely involved in the programme. Prospective adopters almost always state on their feedback form that

the opportunity to talk with people who had gone through the process was the most valuable part of the preparation training. They were clear it was an integral part of the assessment and was well received by all adopters spoken to. If the agency's in house course is fully booked, prospective adopters can access courses run by their partners in the consortium, or use National Children's Homes (NCH)

The agency provides a separate course for second time adopters which lasts two days and focuses on issues that are most relevant for them including how their existing child(ren) will react to another child and how the family dynamics might change.

The agency makes every reasonable attempt to complete the assessment process within the eight month timeframe but there are times when this is not possible or practical. The agency does not have a laid down number of assessment visits it undertakes for prospective adopters. Although this will usually be between 10 and 12 it is very much dependant on specific need. The agency always ensures a second opinion visit is carried out for all prospective adopters. The agency have until recently been taking the formal application after the preparation group has finished. However they have recently amended practice to take the application at start of the process and before applicants start the preparation course. Several adopters commented on the length of time that the assessment process took. In some cases this was two years. They found this exceptionally draining, and were often left wondering just what 'extra' information they could provide.

The assessments are analytical and address the competencies needed for parenting an adoptive child. Adopters commented that their social workers are excellent, professional, supportive and easy to talk to. The full range of checks and references are taken up and a health and safety questionnaire is completed although it was noted that in one file this document was partially written in pencil. This process ensures as far as possible that the adoptive parents are appropriately safe to care for children.

Adopters spoken with said they had received a satisfactory amount of information about the matching process and subsequently the children they were being matched to. However some adopters were critical of the frequent changes of the child's social worker. On one occasion adopters had attended meetings to discuss matching, and found that the children had a new social worker who had not read the children's files. Clearly the reorganization of the department has meant that some social workers have left while others have been placed in new posts. However the agency has set up a permanence service, in which social workers specialise in working with children who need or who are placed in adoptive placements thus enabling the agency to develop a team in which specific skills in communication and direct work with children are valued and can be developed. The agency uses the services of a specialist independent social worker to give advice on specific diversity issues as it relates to matching.

The agency has an appropriately constituted adoption panel which is underpinned by a comprehensive set of policies and procedures. There is a well-established pattern

of adopter attendance and both staff and adopters confirmed that they were for the most part made to feel welcome and asked appropriate questions. Adopters said that their social worker prepared them well for the panel so it was not quite as daunting an experience as it could be. The adoption panel is chaired by an experienced, independent person who has proven abilities in this area. Panel members have a good range of personal and professional experience. All panel members have appropriate checks in place and have undertaken induction, training and appraisal. They are well prepared for the panel, having read the papers in advance, pick up relevant issues and ask appropriate questions. There are good mechanisms for the feedback of any issues of concern to the agency. This promotes robust recommendations which inform the decision-making.

The panel meets regularly, with the facility to hold extra panels if necessary, and there is no evidence that children's plans are delayed though the inability to obtain a panel date. They are well-administered, papers are sent out in good time to enable panel members to read them and be prepared, the minutes are full and reflect the discussion and the reasons. However the chair of the adoption panel highlighted a number of issues in his annual report. He reported that the panel has seen a higher number of children where there has been a substantial delay or where aspects of the planning were open to challenge. In addition the impact of the restructure leading to staff leaving, resulted in a skills gap as well as a resource gap; thus the panel saw a higher number of children with substantial delay. These issues will undoubtedly present a challenge to the agency and panel during the next 12 months.

The agency decision is made in a timely way, based on the availability of full information. However on some files inspected there was no evidence as to how this information is conveyed to adopters and to birth parents alike.

The agency is managed and staffed by appropriately qualified, suitable people. Recruitment practices are for the most part robust and all the necessary checks are carried out. However it was noted that not all files contained evidence of qualifications and one administrator did not have a Criminal Records Bureau (CRB) check on file.

The adoption team demonstrates that they are knowledgeable, experienced, committed and hard-working but are not complacent. They are keen to improve the service and their own professional development.

The agency has West Sussex safeguarding procedures in place which make reference to historical abuse. In addition guidance is available on child protection conferences; safer working practice; family group conferences and family meetings. The adoption team confirmed that they receive regular training in child protection and had a course specifically tailored for them.

Helping children achieve well and enjoy what they do

The provision is good.

West Sussex Adoption Agency provides its own adoption support service. There is a small but dedicated team who work closely with the adoption team. One of the adoption support senior practitioners takes lead responsibility for managing the letterbox service. This service is provided until the young person reaches the age of 18 but in many cases the team will carry on providing additional support. The team are also responsible for organising direct contact which in most cases is supervised by support workers who receive appropriate training from the senior practitioners.

The team is also involved in the preparation groups for adopters and discusses the impact of contact with prospective adopters. In addition they run adoption support groups throughout the county which is very time consuming and can be difficult to organise given the size of the county. A highly successful new year's party was held for children and their parents in January of this year. In addition a three day course for adopted teenagers proved to be very successful and plans are being made to hold a similar course next year. The team are also planning to set up a birth parents support group as referrals are increasing as awareness of this service increases.

The team has developed very good links with the educational psychologist who visits schools and meets with teachers to discuss the possible problems adopted children might have. In addition the team liaises closely with the National Organisation for Counselling Adoptees and Parents (NORCAP), Child and Adolescent Mental Health Services (CAMHS) and Post Adoption Centre (PAC).

The team has excellent administrative support, although this is inadequate in terms of hours allocated to the service. They are concerned that they may at some point have to receive administrative services from a general pool, and thus lose the specialist knowledge their long serving adoption support administrator has. In addition the team is in need of appropriate information technology systems and a suitable database to support the work that they do.

The team has a very high volume of work. More and more families are seeking support, and once a service is started it is often not a simple matter to just close the case. The team has a waiting list for all of the services it offers. The agency has appointed an assistant care manager (adoption & fostering support). She works with black and minority ethnic children on their racial and cultural identity.

The adoption support social workers are very complimentary about their team manager, who has been acting in the post for two years, but has recently had half of her work time 'reduced' to senior practitioner hours – in the same team that she manages. This is a very unusual arrangement and it is questionable if this is the best use of her skills. The team feel that the manager is accessible, supportive, skilled and caring. However they feel that their own professional development is not adequately catered for. This is largely due to the fact that the Post Qualifying childcare award is not relative to the adoption work that they do. They wish to be enabled to attend

courses run by British Agencies for Adoption and Fostering (BAAF) which are specific to adoption.

Adopters spoken to were very complimentary about the service received post adoption. The children had benefited from having just one social worker (prior to this they had had frequent changes), and the adopters had always found their social worker supportive. They stated that if and when they asked for support, it was provided without delay, and had always been beneficial.

The overall picture of the adoption support team is that it is a very good service, highly spoken of by adopters although limited by resources – hence the length of the waiting list.

Children placed for adoption receive a very good service from CAMHS and the looked after adopted children team which has a multi-disciplinary team, including specialist workers, for looked after children. This team can provide a prompt response to referrals they receive, work in partnership with social workers in both the adoption team and the children's teams, provide consultation to adopters, staff and support groups. An educational psychologist who specialises in work with adopted children in schools offers a range of support services to children and their parents and provides training in schools to enable children to fulfil their maximum educational potential. In addition this specialist team provides workshops for both prospective adopters and adoption social workers. Adopters commented that they worked well together and felt it was a 'joined up' service.

The agency provides good financial support packages to its adopters to enable placements to be made and to continue. This includes ongoing financial support to enable an adopter to remain at home for longer than anticipated to meet the needs of the child. This also allows the adopters to buy in other services to assist and support them with the task of parenting an adoptive child with challenging needs.

Legal and medical advice is of a good standard; the medical adviser is extremely good at speaking with adoptive parents to enable them to consider the medical implications of caring for an adoptive child. The legal adviser specialises in adoption and gives useful updates to staff and the adoption panel on case law. Both these advisers are an invaluable asset to the overall processes of adoption and adoption support.

The adoption team are all very experienced. They offer a very professional service that is tailored to meet individual needs. Staff describe the agency as a 'bespoke service' and feel that they have a very good knowledge and understanding of their adopters. They will also make observation visits to the children put forward as a match so that they can get to know the children even slightly and will also attend their looked after children reviews.

The adoption team operates a duty system for three hours each day. Staff share the workload through a duty system. This provides the team with their all important first contact with potential adopters.

Every effort is made to recruit adopters to meet the needs of the children who are currently waiting to be adopted. The adoption team advised that they have good links with the children's social workers. Each of them acts as a link worker to one of the teams across the county, so are kept up to date about the children for whom adoption is the plan.

Currently there is approximately a three month waiting list for adoption support services.

The agency has a small, specialist multi-disciplinary team of mental health professionals who offer an excellent service. This is a joint service between CAMHS and the Children's Department. The level and complexity of their work is ever increasing and they would welcome an increase in staffing to fully meet the needs of the service. The team have a service level agreement that no referral will wait more than 13 weeks for an appointment. However although they are able to meet this target, and offer an appointment, this is only to make an initial assessment of the situation. There then follows a two to three month waiting list before actual therapeutic service starts. In reality therefore it can often be five to six months before intervention takes place. The team also offers consultation to staff who need to complete life story work, and is about to pilot some early intervention techniques based on therapy, with the adoption team. This project will be overseen by CAMHS.

The team feels that the key issue is to start a therapeutic service at an early stage, and in this way hopefully forestall any later issues.

The staff advise that they feel well supported in terms of management support and supervision, but let down in terms of venues where they can carry out their work. Not all areas of the county have a suitable venue or space for therapy.

Helping children make a positive contribution

The provision is good.

The agency works with birth parents to enable effective plans to be made and implemented for their children. Birth parents are invited to all planning and review meetings prior to adoption placements. There is evidence to show that the agency involves birth parents in planning for their child and their views are recorded on the child permanence report. In addition the agency uses a form to record the views of birth mothers and those seen during the course of the inspection were fully completed.

Birth parents' views about adoption and contact are clearly recorded wherever possible. However as the majority of birth parents are involved in contested care proceedings at the time when the adoption pack paperwork is completed, they often do not wish to record their views.

Birth parents have access to social work support through the adoption support service or if they prefer they can obtain confidential advice and counselling through the contract the agency has with the post adoption centre. In addition the agency has a great deal of information that is available for birth parents including 'If Your Child Is Being Adopted' Information form NORCAP and a leaflet on 'Contact Arrangements in Permanent Placements' with some questions to ask.

All children have a life story book. Consultation for children's social workers around life story work is provided by the adoption support CAMHS looked after adopted children specialist worker. The adoption team and specialist worker have a range of age appropriate books, toys and activities for direct work with children. Cameras and laptops are available for use with children.

There is evidence to show that children are provided with up to date information about the birth family by the maintenance of the post box system and documented by the post box contact arrangements paperwork. The agency currently is involved in administering over 450 letterbox contacts.

The permanence service is fully committed to developing this work and is supported by experienced managers and specialist social worker.

The agency has a contract with Daybreak a voluntary agency to facilitate family group conferences to assist in the implementation of the public law outline and birth parents' views are recorded as part of that process.

Adoption support team workers work with individual birth parents following adoption and additionally to fulfil agreed plans for contact as seen in file recording. This may involve direct contact when additional staff support birth parents and also supervise contact.

The feedback gained from one particular birth parent was very positive. The birth parent felt that the adoption support team had been very supportive of her. This support had enabled contact to progress from indirect to direct contact. In addition the birth parent was also provided with a counselling service.

The agency would like to establish a local support group for birth parents.

Unfortunately this has not proved possible not only due to the geographical nature of West Sussex but also due to the demands on the adoption support team.

Achieving economic wellbeing

The provision is not judged.

Organisation

The organisation is good.

The statement of purpose and underpinning policies and procedures provide a clear framework for the operation of the agency and are child-focussed. There is a children's guide which is aimed at a child who is able to read independently and understand the reality of adoption. This guide, combined with other resources available, enable children's social workers to have appropriate tools for working with children to help them understand adoption and move on to their new families.

However although the children's guide meets the requirements of the standards, a guide appropriate for younger children with age appropriate graphics would be an advantage. The complaints process within the children's guide was not very clear as

it stated that if a child was unhappy they can contact the Children's Rights Director, however the information on how to contact him is available from the child's social worker.

The written information sent to enquirers is clear and gives transparency to the adoption process. The agency sends a written information pack with eligibility criteria within 24 hours of receiving an initial enquiry. Following an expression of interest the prospective adopters will receive a visit from an experienced adoption social worker who will provide information as to the process of assessment and the profile of the children requiring placement at that time. Recruitment is generally targeted on prospective adopters who are most likely to meet the needs of children needing a placement and prospective adopters who will meet their needs are accorded priority on the next available preparation course. Therefore, although the list of potential adoptive parents is prioritised for each and every preparation course and assessment, the aim of the agency is always to keep potential adopters' wait for assessment to a minimum. Equality and diversity requirements are reflected in the agency's adoption information leaflet, the adopter recruitment policy and all documents published on the adoption section of the West Sussex website.

The adoption handbook and website have been updated to reflect the agency's practice which is that prospective adopters are welcomed regardless of age, disability, race, gender, marital status, sexuality, religion and culture. In press releases and interviews relating to national adoption week the particular needs of children from minority ethnic and religious groups are always emphasised. Recent applications and placements from adoptive parents of dual heritage, same sex male and female couples and disabled carers have been taken forward. Single applicants and unmarried applicants are routinely part of the group of approved adopters in West Sussex.

On the preparation courses applicants are always given the opportunity to talk to other adoptive parents who have adopted children. Clear and accurate information is given about children who need families locally, through the consortium, through the national adoption register and through inter-agency placements generally.

The agency is well managed at all levels by people who demonstrate commitment, knowledge, skill, experience and enthusiasm to provide a good service for children. Management arrangements are clear; roles and responsibilities are well-defined, lines of accountability are well-established, mechanisms for communication are effective and staff are well supported. However staff did feel that the recent major reorganization had impacted on the overall service and been handled badly by the local authority. This had clearly had an impact on staff moral; has led to a loss of skilled staff and has introduced a two tier salary system which has led to the adoption managers feeling somewhat undervalued. Managers spoken to felt that the reorganisation did not take into account the high level of need of looked after children or the complexity of cases and the high demands for a service. The local authority does not receive reports from the agency every six months instead it produces an annual report at present.

West Sussex County Council has recently set up permanence teams. These teams are only a year old and have been set up to work with any child up to the age of 14 who is subject to a care order and whose plan is permanence. These teams are still in their infancy and when fully developed should begin to offer a more focussed and specialist service for children which would include doing direct work with them such as life story books and later life letters. The agency does not at present hold 'Life Appreciation Days' This is an area that staff would like to develop given they have completed the relevant training.

All staff receive regular and effective supervision from their managers. The adoption team, who are all very experienced, have good peer support and opportunities for external consultation when they are undertaking specialised pieces of work for complex cases, which shows a commitment to supporting staff and to ensuring work is carried out to a good, professional standard. Training needs are highlighted through the appraisal system and access to training is good. External training is more difficult to access because of the cost, but the manager is committed to supporting her staff in accessing this where possible. The administrative support is very good, although adoption social workers have some concerns that may lose the specific adoption administrator and be provided with a generic one instead. Such comments were also received from the adoption support team.

The managers of the adoption agency all have extensive knowledge and experience of local authority childcare and adoption practice. Managers have the management skills and financial expertise to manage the work efficiently and effectively and in a professional manner as evidenced in meetings and discussions during the course of the inspection.

The adoption agency as part of the permanence service has a business plan detailing the objectives for the year. These are monitored throughout the year against national targets. The adoption agency publishes its adoption plan on the West Sussex County Council Website. The adoption panel chair, professional advisor and service manager meet at least annually with the agency decision maker. The panel chair contributes to the adoption report.

The adoption team, which provides a wide range of services to adoptive families, including post adoption support, is relatively small given the volume of work. The quality of the service they provide is excellent but there are some delays in allocating social workers to undertake assessments on potential adopters and services to birth families could be developed further. The staff are committed and enthusiastic in wanting to improve and develop their service, but at the moment, do not have any time to do this. They are extremely well valued by the children's social workers, who describe them as very helpful, accessible and always at the end of a telephone to provide advice when needed.

The adoption agency needs to ensure that comprehensive and accurate case records are maintained for each child, prospective and approved adopters. Children's files inspected at random were missing a great deal of documentation such as confirmation of adoption order; confirmation of panel decision; confirmation of

matching, copies of child's permanence report. It was also difficult to ascertain dates of key stages in the adoption process such as when the birth family were informed that adoption was the plan of action and when reviews took place. Prior to the inspection the agency carried out an audit on 17 files, however on reviewing these files it was noted that there was a great deal of information missing from these files including an adoption application form, a contact statement, photographs of applicants, information from employer, second opinion report and team manager's signature. Of these 17 files, eight related to adopters who had children placed. Information missing from these files included child's permanence report, minutes of panel recommendation and matching report. The overall conclusion gained is that although the agency had carried out its own internal audit it appeared not to have learned from the outcome. Some of the children's files were missing letters from the agency decision maker including letters to birth parents. It was also noted that that one health and safety assessment had been partially completed in pencil.

Personnel files for the most part demonstrate a rigorous approach to the recruitment and selection of staff. However one administrator; who is responsible for all letterbox contact didn't have a CRB and qualifications and identification are not countersigned, but overall, a robust recruitment process was evident. Likewise, files on panel members contain all the required information.

The county council provides office premises that meet health and safety requirements to which staff have access during office hours and are accessible by private & public transport. Secure filing is provided on each site, which is alarmed and or has security staff on the premises. IT and administrative support services are provided corporately and data is backed up according to industry standards. Adoption records are sent to the Modern Records Centre (Archive) which has industry standard storage facilities designed to keep the most sensitive data and documents safe and protected from environmental risks.

The promotion of equality and diversity is good. The efforts to recruit a diverse range of adopters is impressive and creative wherever possible, the staff team is seen to promote diversity and there is a strong approach throughout the council to promote inclusion.

What must be done to secure future improvement?

Statutory Requirements

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, the Adoption Agencies Regulations 2005 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

Std.	Action	Due date
12	ensure that birth parents receive the agency decision in writing,	30/01/2009

	both in relation to the child's approval for adoption and the match (Adoption Agencies Regulations 2005 Regulation 19 and 33). Staying Safe Standard 13	
25	ensure the contents of a child's adoption file meet the requirements of the legislation (Adoption Agencies Regulations 2005, regulations 12 and 15). Standard 25	30/01/2009
19	undertake CRB checks on administrative staff (Local Authority Adoption Service (England) Regulations 2003, Regulation 11 and Schedule 3) Standard 19	31/12/2008

Recommendations

To improve the quality and standards of care further the registered person should take account of the following recommendation(s):

- ensure that the executive side of the Council receive a 6 monthly report on the management and outcomes of the adoption agency (National Minimum Standard 17)
- develop a Children's Guide which meets the needs of younger children who are placed for adoption (National Minimum Standard 1).
- ensure that the agency has an adequate level of clerical and administrative support including a dedicated panel administrator. (National Minimum Standard 1)
- ensure there is an adequate number of sufficiently experienced and qualified staff to meet the needs of the adoption agency given the waiting list particularly for adoption support services. (National Minimum Standard 21)
- consider the introduction of Life Appreciation Days so that adopters are given accurate, up-to-date and full information to help them understand the needs and background of the child and an opportunity to discuss this with all those involved in the life of the child. (National Minimum Standard 5)