## The London Borough of Croydon Adoption Service

Inspection report for LA Adoption Agency

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<tr>
<th><strong>Unique reference number</strong></th>
<th>SC059610</th>
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<tr>
<td><strong>Inspection date</strong></td>
<td>05/07/2007</td>
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<tr>
<td><strong>Inspector</strong></td>
<td>Rosemary Dancer / Sean White</td>
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<td><strong>Type of inspection</strong></td>
<td>Key</td>
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<thead>
<tr>
<th><strong>Setting address</strong></th>
<th>London Borough of Croydon, Social Services Department, Taberner House, Park Lane, CROYDON, CR9 2BA</th>
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<tbody>
<tr>
<td><strong>Telephone number</strong></td>
<td>020 8686 4433</td>
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<td><strong>Email</strong></td>
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<td><strong>Registered person</strong></td>
<td>Croydon London Borough Council</td>
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<td><strong>Registered manager</strong></td>
<td>Geoffrey Horner</td>
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<td><strong>Responsible individual</strong></td>
<td>Peter Wylie</td>
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<tr>
<td><strong>Date of last inspection</strong></td>
<td>18/08/2007</td>
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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

The adoption agency of the London Borough of Croydon undertakes all statutory work associated with adoption services. These include:
- Recruitment, preparation, assessment and approval of adoptive families, both domestic and overseas.
- Matching children with suitable families.
- Placement support.
- Post adoption support.
- Support for adopted adults, including birth records counselling.
- Support for birth relatives.

Summary

The overall quality rating is inadequate - notice of action to improve.

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

There are some satisfactory and even good pieces of work being carried out by the workers. The social workers are committed and keen to develop the services further but have been trying to do so without the benefit of clear planning at a strategic level. As a result some aspects of service delivery are piecemeal and overall less than adequate. Serious shortfalls have been identified in some safeguarding practices.

Changes in the organisational and management arrangements and difficulties in the recruitment of staff have undoubtedly impacted on the effectiveness of this agency. It is recognised that now the adoption teams are fully staffed and the new manager is in place the service has the potential and capacity to develop and improve. The manager and his staff showed a commitment to do this.

Improvements since the last inspection

Following the last key inspection three years ago there were two requirements (actions) made. Both of these have been addressed as follows:
- A photograph and proof of identity are being retained within the personnel records in respect of permanent members of staff.
- The manager has an in-date enhanced Criminal Records Bureau (CRB) disclosure.

There were also 14 recommendations made; of these, five have been fully addressed as follows:
- The Statement of Purpose is formally approved by the executive of the Council.
- The agency includes same sex couples in its eligibility criteria.
- The agency has developed an effective evaluation and quality management system in respect of preparation groups.
- The agency has introduced a system asking the adopters to inform the agency
should the child die.
A system for verifying the authenticity of references has been introduced.

Twenty four recommendations have been made as a result of this inspection; nine of these are recommendations which remain fully or partially outstanding from the last key inspection.

**Helping children to be healthy**

The provision is not judged.

There are no standards for adoption services mapped to this outcome area.

**Protecting children from harm or neglect and helping them stay safe**

The provision is inadequate.

There is not a formal written recruitment plan which underpins the recruitment of suitable adopters to meet the needs of children waiting for a placement.

The systems for the referral of children to the pre-adoption team are not always effective in informing the team in a timely way about individual children who may have a plan for adoption; this can lead to delays for some children.

While a more co-ordinated and focused approach to recruitment is required, recent recruitment activity for black families has reaped some good rewards with potential applicants expressing interest in finding out more about adoption. The pre-adoption team is keen to expand on these types of activities.

The agency has links to other authorities via its membership of the local consortium and children can be placed with other members agency adopters, but the use of the adoption register for England and Wales in widening the placement choice for children is not being maximised.

The adoption policy and procedure document does not detail the expectations the agency has of its social workers and other professionals in regard to matching. There was some evidence that careful matching takes place in some cases. However, the poor quality of some Children’s Permanence Reports (CPRs) impacts on the effectiveness of the matching processes for some children. The quality assurance system for these reports is not robust enough.

The agency is routinely holding the placement planning meeting before the panel has heard the match; this is not good practice as it is contrary to government guidance and pre-empts both the panel recommendation and the agency decision.

The agency is efficient in responding to enquirers' initial contact. Enquirers who are looking to adopt a child from this country (domestic adopters) and adopters who wish to adopt a child from another country, Inter-Country Adopters (ICA), are
provided with good information about adoption. Applicants reported that the information sessions and initial visits are informative, useful and held in a timely way.

The preparation groups for domestic adopters which are run three times a year are of a good quality. Adopters described the sessions as thought provoking and informative. It was further reported that the practical arrangements for the sessions were good.

The Pre-Adoption Practice Manager has oversight of the quality of the content and delivery of the preparation sessions and prospective adopters have an opportunity to feedback their views about the course.

ICA adopters attend preparation sessions run by a voluntary agency which focus on the specific issues in adopting a child from abroad. The reports from adopters about these sessions were positive.

The agency is accepting formal applications to adopt after applicants have attended the preparation sessions; this is contrary to regulations and government guidelines.

Assessment reports of adopters are of a variable quality. Some are of a satisfactory standard and judgements are evidenced. However, some assessments viewed were not evidence based; did not clearly evidence the applicants' strengths and failed to identify areas for development. In addition some lacked a detailed analysis of information.

A range of checks to determine the applicants' suitability are carried out. Some minor shortfalls were identified, in one case an employer's reference had not been sought and in some assessments the applicants' employment history did not include the start and finish months. Additionally the recording of the details about Criminal Record Bureau (CRB) checks was not always full enough to evidence that the check has been at the enhanced level.

The agency has developed policies and procedures in respect of the panel. These do not include the arrangements for panel to perform its monitoring role or the system for it to receive progress reports about cases it has heard.

The constitution of panel met regulation. Panel members are conscientious in their respective roles. The quality assurance process in respect of the assessments presented to panel is inadequate and as a result some incomplete assessments are presented to panel. This can mean that the time allocated to hear a case is insufficient and delays in cases being heard causes inconvenience to attending applicants and social workers. There also are on occasion delays in cases being tabled due to panel agendas being full.

Overall the administration of the panel was efficient and effective; the panel minutes are not consistent in recording the detail of the discussions and the reasons for the recommendations. When a case involves a sibling group separate minutes are not made for each child.
Decision making is generally made in a timely way but one occasion was noted whereby the timescales were exceeded. This was in respect both of the decision making and informing the relevant people in writing of the decision. It was noted that the previous decision maker had deferred a decision, this is an action which is not available for the decision maker to take.

The Nominated Manager has an up to date CRB in place and is suitably qualified and experienced to carry out his role. Personnel files for permanent staff were satisfactory. The contents of personnel files for independent workers were inadequate and in one case a file could not be located.

While the practice in recruiting permanent staff members was generally robust, the written policies and procedures do not follow good practice in safeguarding children, for example they do not detail which checks must be carried out.

The agency follows the London safeguarding procedures and has developed internal procedures to compliment these. However, in one case poor management of a case had left two children at risk.

**Helping children achieve well and enjoy what they do**

The provision is satisfactory.

There is an adoption support team in place which is providing a range of support services to families. It was clear that the workers are skilled and dedicated in their role. A number of adopters commended their support worker. However, the service is not underpinned by a clear strategic plan.

There are plans which are being developed by the workers to further develop the support services. The arrangements for monitoring the quality and effectiveness of the support service are underdeveloped. Social workers identified that the systems for referral to the support service are not sufficiently robust and this can lead to support not being provided in a timely way.

Adoptive parents are clear about the need for adoptees to understand their history. Information for adoptees about their background is developed in different formats. One format is the CPR discussed in the staying safe section of this report another is via lifestory work and books. There are some difficulties in completing some lifestory work. For some social workers capacity to do this work is an issue and for others it is an issue of confidence and training carrying out this complex piece of work.

The agency has access to specialist advice including medical and legal advice. The medical adviser meets with adopters to discuss a child's health needs and prognosis where appropriate.

There are no protocols in place in respect of advisers and in respect of the medical adviser one should be developed.
The agency provides support services to a range of people touched by adoption. Birth records counselling and intermediary services are provided to adoptees requesting a service and a dedicated worker operates the letterbox exchange.

**Helping children make a positive contribution**

The provision is inadequate.

The agency recognises the need to develop the service to birth families. Currently the agency does not offer birth parents a support service which is independent from the child's social worker. Children's social workers try hard to involve birth parents in the planning for their child and try to seek their views. Success is limited due to the inevitable conflict relationship between a worker and a birth family who are contesting the plans for adoption.

The post adoption team has developed some written information for birth families about adoption and are planning to establish a service to birth parents.

**Achieving economic wellbeing**

The provision is not judged.

There are no standards for adoption services mapped to this outcome area.

**Organisation**

The organisation is inadequate.

The agency has a Statement of Purpose (SOP) in place that requires some minor amendments.

The agency has developed a guide for children about adoption; this is geared to the older and more able age range and would not be accessible to a younger or less able child.

The agency has developed policies and procedure documents which cover most of the processes in adoption work with the exception of the expectations around the matching processes. This has been addressed in the staying safe section of this report.

The quality of information provided to adopters is good; adopters confirmed that they had found the written information useful.

Workload management and allocation is appropriately organised in the adoption teams; staffing issues in some children's teams was reported as impacting on the ability of workers to carry out some adoption tasks such as lifestory work.
The Nominated Manager was appointed less than a month before the inspection. He is suitably qualified and experienced in adoption matters. The self assessment document completed identified the majority of the shortfalls reported on.

There have been some significant changes in the structure of the adoption service and some longstanding members of staff have retired including the previous adoption manager. There have also been some difficulties recruiting social work staff to the adoption and children's teams. Further changes are taking place including a move towards more remote working and a move to the building of all children's services teams. The disruption, the interim management arrangements and the high level of temporary staff has impacted adversely on the service, especially in terms of strategic planning and the development of services.

The arrangements for monitoring and controlling the agency are not effective in all areas of the adoption work; these have been identified in the preceding sections of this report. The executive side of the council are not receiving a minimum of two written reports on the management and outcomes of the agency.

The staff reported receiving good support from their immediate managers, such as regular supervision. In respect to more senior managers staff reported that the lines of communication are less open.

The adoption teams are adequately resourced. Vacancies in the children's teams have led to delays in progressing some children's cases. This indicates that vacancies in teams are not being effectively managed. In respect to administrative staff all staff reported shortfalls in the amount of administrative support available.

Most staff reported good access to training opportunities and these include internal and external training. This inspection has identified some areas of unmet need in respect to training which has been reported on in the relevant sections of this report. The induction process is not effective and this results in staff not being adequately equipped to carry out their role.

The case files need attention. There was no evidence of management oversight of the quality and content of files for adopters or children. There were key documents missing from some files, for example, on a child's file there was no evidence of children looked after statutory reviews and on an adopter's file adoption panel minutes were not on file.

There are clear arrangements in place in respect of access to records; practice in this area is good.

Current records are appropriately stored and the arrangements for the storage of archived files are satisfactory. However, there are no arrangements for back-up of paper files.

Records of complaints made are kept; the outcomes of complaints investigations are not being recorded.
Some personnel files did not evidence that a robust recruitment process had taken place; a requirement has been made under the staying safe section of this report.

There are identified premises from which the agency conducts its business. The premises are not accessible to people with some mobility difficulties. The agency has secure electronic systems which are backed up on a daily basis. The agency does not have a disaster recovery plan.

**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.

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<th>Std.</th>
<th>Action</th>
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<tr>
<td>4</td>
<td>ensure that the application to adopt is made before the formal preparation and assessment process commences. Regulations 22 &amp; 24 Adoption Agency Regulations 2005.</td>
<td>31/08/2007</td>
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<td>9</td>
<td>produce a clear strategic plan for the services provided to birth parents. Regulation 14 Adoption Agency Regulations 2005.</td>
<td>30/08/2007</td>
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<tr>
<td>19</td>
<td>ensure that all members of staff working for the purposes of the adoption agency have undergone all statutory checks prior to commencing employment. Regulation 11 Local Authority Adoption Service Regulations 2003.</td>
<td>31/08/2007</td>
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<td>28</td>
<td>take steps to place on staff personnel files and adoption panel members' files, all required information. Regulations 6, 11 &amp; 15: Schedules 3 &amp; 4 Local Authority Adoption Service Regulations 2003.</td>
<td>31/08/2007</td>
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<td>1</td>
<td>investigate why the safeguarding procedures were not fully implemented in one case and establish a failsafe system to ensure this can never occur again. Regulation 9 Adoption Agency Regulations 2003</td>
<td>31/08/2007</td>
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<tr>
<td>25</td>
<td>arrange for all required information to be placed on adopter's case files. Regulation 22 Adoption Agency Regulations 2005.</td>
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**Recommendations**

To improve the quality and standards of care further the registered person should take account of the following recommendation(s):
- develop a written recruitment strategy and systems to monitor its adequacy.
- develop clear written procedures for the use of the adoption register for adopters and children.
- develop clear systems for tracking permanence plans and for referral of cases at each stage of the process.
- develop clear procedures in respect to the matching of children with adopters which follow good practice.
- ensure the CPR's are fit for purpose.
- ensure that placement planning meetings are held at an appropriate stage in the process.
- be consistent in taking an evidence based and analytical approach to carrying out the assessment of adopters.
- obtain applicants' months of employment on the employment histories of adopters and record full details about their CRB checks.
- develop a robust quality assurance system in respect of all assessments carried out.
- develop the panel policies, procedures and practice in its monitoring role
- ensure that cases are not delayed by lack of space in the panel agenda and that applicants are not kept waiting for excessive lengths of time when attending panel.
- ensure the panel minutes consistently record the detail of the panel discussions, are clear about the reasons for the recommendations made and ensure that separate minutes are made when cases involving sibling groups are being considered.
- tighten up the decision making process.
- ensure the staff recruitment and selection procedures follow good practice in safeguarding children.
- produce a clear strategic plan in respect to the development and monitoring of the adoption support service, including the systems for referral for a service.
- monitor the timeliness and quality of lifestory work.
- develop protocols for all relevant specialist advisers.
- develop a guide to adoption for younger or less able children.
- provide the executive with a minimum of two written reports a year.
- ensure that each part of the adoption service is adequately resourced in respect of staff and that vacancies are effectively managed.
- ensure that all staff are provided with good quality induction which is relevant to their role.
- develop a back-up system for paper files.
- keep a record of the outcomes in respect of any complaints made about the adoption service.
- develop a disaster recovery plan.