

Dundee City Council - Adoption Service

Adoption Service

Dudhope Castle
Dudhope Park
Barrack Road
Dundee
DD3 6HF

Telephone: 01382 436 000

Type of inspection:
Announced (short notice)

Completed on:
18 November 2022

Service provided by:
Dundee City Council

Service provider number:
SP2003004034

Service no:
CS2004082550

About the service

Dundee City Council provides a Fostering, Adoption and Adult Placement service for children and young people who are assessed as in need of alternative family care.

The functions of an adoption service are detailed in the Adoption and Children (Scotland) Act 2007 as being to:

- assess children who may be adopted
- assess prospective adopters
- place children for adoption
- provide information about adoption and
- provide adoption support services.

Social workers in the area teams and in the permanence team have responsibility for assessing children's needs for adoption and share responsibility for placing children for adoption. The family placement team carry out the remaining duties of the Local Authority Adoption Agency.

As the findings in this inspection are based on a sample of children and young people, inspectors cannot assure the quality of experience for every single child receiving a service.

Inspections of the Fostering and Continuing Care services have been undertaken and separate reports have been completed.

About the inspection

This was an announced inspection which took place between 24 October 2022 and 18 November 2022. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with two people using the service
- spoke with nine staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- Children experienced nurturing and meaningful care with limited moves between caregiving families as permanency options were explored and agreed timely.
- Although there had been a high turnover of staff, adopters were well supported and felt valued by their worker.
- Swifter implementation of action was required to protect children and young people's safety and wellbeing which had been compromised from a lack of training and safer caring documentation.
- There had been no formal training offered to adoptive families following their approval at panel. This included a lack of child and adult protection training.
- Quality assurance and monitoring systems were inconsistent and did not track outcomes for children and young people.
- Adoption Support Plans were not inconsistently utilised. Those in place, lacked a SMART (specific, measurable, achievable, relevant and time-bound) and holistic approach.
- There was no system in place for reviewing Adoption Support Plans.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
How good is our leadership?	2 - Weak
How well is our care and support planned?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

An evaluation of adequate has been award to this key question. A number of strengths in the service which just outweighed the weaknesses identified. As the weaknesses were relating to the welfare of children and young people, we have made a requirement and areas for improvement.

Relationships were meaningful, where children experienced nurturing care. Children did not experience multiple moves but where moves did occur, relationships prioritised between foster carers and adopters to support understanding, attachment and identity.

Adoptive families were well supported and valued by staff. However, the high turnover of staff over the last two years had resulted in some families experiencing a lack of continuity in their support and having to reinvest into new relationships which can lead to disengagement with a service.

Children received individualised care with age and stage appropriate choice. Families advocated well on behalf of children to promote best outcomes. Developmental opportunities were promoted by the service and children were encouraged to develop links with their community from a young age. There was positive promotion of health needs for individual children and active sharing of appropriate information. Likewise, mental health services were promoted within the service and valued support from workers to promote positive mental health within the family home. The medical advisor role was well used, with attendance in Adoption and Permanence Panel and individual meetings with adopters. Healthy living was encouraged during assessment, approval and post approval processes.

The complexity of brother and sister relationships were well understood and family time was supported where appropriate and meaningful for each child. Letter box contact was facilitated by one member of staff who had a good overview of the process.

Transitions were managed well with creativity to best support the process. One adoptive parent explained "transition was so well organised. Everyday was planned precisely and with good reason. It was so well thought out". However, it was unclear how adoptive families were supported to understand the fostering legislation and regulations in which some families begin the adoption process. Further support and development in this area is required to best safeguard children and their families. An Adoption Handbook should be developed which would support adopters' understanding of the frameworks and systems for which they could be caring for children as part of the adoption journey.

There had been limited child protection training and no adult protection training offered to adopters and staff. Children were kept physically and emotionally safe. However, in the absence of sufficient safer caring documentation it was unclear how families were supported to understand and manage risks. Incident reporting from adopters should be appropriately and proportionately responded to with correct child protection procedures.

An Initial Case Review within another service resulted in a comprehensive action plan, which had been formalised and was being implemented. Although progress was being made, there should be more urgency in implementation of the action plan. The service should strive to be part of a child-safe organisation. See Requirement 1.

Along with the gap in child and adult protection training, there had been a general absence of training available to adoptive families over the past two years. See Area for Improvement 1. During the inspection, a worker was identified to be responsible for leading on carer training which would be available to all adoptive families. This is a positive step forward to ensure developing and evaluating a training package for all caregiving families.

Although there was an organisation wide commitment to The Promise, this needs to be promoted further within the service and should be evident in practice guidance and documentation. There should be further focus on integrated practice with other children's services. A more collaborative approach with locality teams ensures holistic family support which will improve outcomes for children and young people.

Birth children were included in assessments of adoptive families with one adoptive parent saying "[my child] was really involved and felt part of it". This contributed to positive matching for the child and this family. However, quality of assessments lacked analysis with little evidence of assessment tools being utilised. There was a relatively new staff team and training had not been delivered to the staff team for undertaking assessment of adoptive families. A review of the process of assessments to understand the impact on families would be beneficial to service development and improvement. See Area for Improvement

2.

Children requiring permanent care was progressed timeously, and delays noted were out with the control of the service. Matching processes were well managed, with strengths and vulnerabilities identified so appropriate support could be considered.

Requirements

1. By 28th February 2023, to ensure the safety and wellbeing of children and young people and the provision of high-quality care and support, the provider must ensure risks are recognised, identified and effective mechanisms are in place to manage and report risks. To do this, the provider must, as a minimum:

- Provide child and adult protection training to caregiver families and staff.
- Ensure risk assessment policies and procedures provide clear guidance and risk assessment documentation, for identifying, reporting and managing risks.
- Develop a robust and responsive system to monitor and review risks.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14) and 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

Areas for improvement

1. To enable adoptive families to fully support the needs of children in their care, the provider should improve availability of training to all families. This should include, but not be limited to, trauma informed practice and attachment training.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

2. To enable thorough assessment of adoptive families and timely matching the needs of children with a family's strength and vulnerability, a review of the process of assessment should be undertaken to understand the impact on families. This should include, but not be limited to, training to all staff within the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meetings my needs and is right for me' (1.19) and 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

How good is our leadership?

2 - Weak

An evaluation of weak was graded to this key question. Although a number of strengths were identified, these were compromised by significant weakness. We have made a requirement and area for improvement, as these weaknesses had potential to negatively impact outcomes for children and young people.

The Adoption and Permanency Panel process was clear and well managed. Panel chairs were very experienced and had been in the role for a substantial period which meant they had a good overview of the organisation. Although panel members received individual appraisals there had been limited training available for panel members in the last two years. See Area for Improvement 3.

The panel process maintained a good oversight of children, young people and families, particularly in relation to the maintaining oversight of permanency planning to identify any drift and delay for children and young people.

The Agency Decision Makers were experienced and had a clear understanding of their role and function. Templates and agendas for panel and reviews were thorough and comprehensive.

The approach to quality assurance and monitoring did not occur in a holistic and systemic manner. There were some systems in place to monitor service delivery however these were not robust nor comprehensive. Due to the risk of repetition of concerns, clarity of management responsibility and oversight of quality assurance systems will form a requirement. See Requirement 2.

Organisational improvement planning was not well communicated with multiple staff members lacking understanding around changes, decisions and the vision for the services. One member of staff explained "there has been a lot of service change which have not always been done with consultation or with a rationale about what the vision is for the service, how this will help or how people will help to form this". This resulted in staff experiencing low morale and would impact their ability to process and support improvements.

Themes from panels were collated and detailed in business reports. There was a process for managing feedback from adoptive families and panel members through the panel process however it was unclear how this feedback was responded to beyond this forum. One adoptive parent told us that following the submission of feedback they "didn't receive any feedback from this or how our views would be used".

The Adoption Service did not have a specific service development plan. An Initial Case Review within another service resulted in a comprehensive action plan for which learning applied to the Adoption Service. Although actions were identified leads and timescales were not always clear. Action plans would benefit from a SMART approach to ensure swift action by named individuals. This is necessary to protect the wellbeing and safety of children and young people in their adoptive families. We are mindful that improvement plans have been proactively sought with the leadership team requesting the Association for Fostering, Kinship and Adoption (AFKA) Scotland to review internal processes and practices.

Requirements

1. By 28th February 2023, to ensure quality care and support is received by all children, young people and their families, the provider must develop a culture of continuous improvement by implementing robust quality assurance of practice. To do this, the provider must as a minimum:
 - a. Ensure that records and practices are in place to evidence the effectiveness of the service in meeting the

needs of young people.

b. Ensure a robust audit system is in place and promote a shared responsibility in quality assurance processes to identify area for improvement.

This is to comply with Regulation 4(1)(a) (Welfare of Users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (4.19) and 'I use a service and organisation that are well led and managed' (4.23).

Areas for improvement

1. To enable the panel members to make informed and balanced decisions in the welfare of children, young people and their families, the provider should ensure suitable training and support is available to all panel members.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I use a service and organisation that are well led and managed' (HSCS 4.23).

How well is our care and support planned?

3 - Adequate

A number of strengths were identified in the service which just outweighed the weaknesses identified. A grade of adequate has been awarded to this key question and a requirement has been made, as the weaknesses identified were relating to the welfare of children and young people.

Adoption support plans were not consistently in place and some did not fully reflect relevant and up-to-date information. Support plans were completed by the individual worker with little evidence of input from other key professionals involved with the family. It was not possible to track progression and outcomes, nor was it clear what strategies and interventions were used by workers to support the children and their families. Children and young people require clear narratives within all documentation relating to their care, should they wish to view this in later years to aid their understanding of their journeys.

Support plans should have a SMART approach which identify current and future support needs. There was no review process identified for the support offered from the service. A lack of timely review of the support plans will result in a static document that does not reflect accurate approaches to the child's care and support needs. See Requirement 3.

There was a dedicated worker responsible for post adoption support, which resulted in consistent support available to families following the legal process. Post adoption support is necessary to best support families but without appropriate plans in place, it is not possible to measure the effectiveness of interventions.

There was no manager oversight in terms of the support plans meaning there was no scrutiny on what support was being provided to families in comparison to their level of need. However, regular discussions between workers and the manager regarding family level of needs were evidenced to review ongoing contact and support needs.

Requirements

1. By 28th February 2023, the provider should ensure that adoption support planning documentation for children and young people takes a SMART approach (specific, measurable, achievable, relevant and time-bound). To do this the provider must, at a minimum, ensure:

- Assessed needs are accompanied with detailed action points.
- Professional involvement to support progression of action points is clearly recorded.
- Delay and drift in progressing action points are addressed and recorded.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My personal plan (sometimes referred to as my care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15) and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 Children, young people, adults and their caregiver families experience compassion, dignity and respect	4 - Good
1.2 Children, young people and adults get the most out of life	3 - Adequate
1.3 Children, young people and adults' health and wellbeing benefits from the care and support they experience	4 - Good
1.4 Children, young people, adults and their caregiver families get the service that is right for them	4 - Good
How good is our leadership?	2 - Weak
2.2 Quality assurance and improvement are led well	2 - Weak
How well is our care and support planned?	3 - Adequate
5.1 Assessment and care planning reflects the outcomes and wishes of children, young people and adults	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.