

Glasgow City Council Adoption Service Adoption Service

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Type of inspection:
Announced (short notice)

Completed on:
2 October 2025

Service provided by:
Glasgow City Council

Service provider number:
SP2003003390

Service no:
CS2004082457

About the service

Glasgow City Council Adoption Service is an adoption agency which recruits and supports adoptive families. It is a local authority run service within the Glasgow Health and Social Care Partnership.

The service is provided by a team of supervising social workers who also work across the fostering and adult placement service which was inspected at the same time.

About the inspection

This was a short notice inspection which took place between 8 September and 3 October. The inspection was carried out by four 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 three caregiver families
- we had 37 responses to our pre-inspection survey
- We spoke with ten staff and management
- spoke with one child's social worker

Key messages

- Caregiver families were comprehensively assessed.
- Children's needs were well considered when joining caregiver families.
- Families for children supported planning for children in need of permanent substitute care.
- Transitions were well planned and best practice was becoming embedded.
- Formalised adoption procedures remains an area for development.

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?	5 - Very Good
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Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children/people, therefore we evaluated this key question as very good.

Caregiver families were comprehensively assessed, and the conclusions of assessments were evidence based and supported clear recommendations. Assessments were detailed and analytical with all statutory checks in place. The permanence panel provided robust quality assurance of assessments which ensured that the assessment process was thorough and all relevant information was considered. We did receive feedback that some assessments had taken a long time to complete, the service should ensure there is sufficient capacity in the team to ensure that assessments can be progressed within timescales.

Children had the opportunity to express their views through the my meeting model and an increased use of independent reviewing officers in chairing these will further enhance participation. Children had the opportunity to express their views via a digital app and the family connections assessment exploring family relationships was an example of child centred practice. When adoptive families requested support, they received an individualised response, one adopter told us, "They offer very good support that is evidence based and appropriate to our family's needs."

Permanence outcomes for children had been a focus of improvement activity. Families for Children had continued to be active in supporting social work teams and contributing to planning for children in need of permanent substitute care. We saw examples of good practice to reduce delay but overall outcomes remain mixed. Work is underway to review the wider system in relation to permanence planning across the health and social care partnership with the intention of reducing drift and delay in planning.

Decisions around matching were strongly informed by the needs of children and the capacity of caregiver families. Internal processes for linking and matching were robust with strong collaboration between the service and social work colleagues to ensure all relevant information was considered. Adopters gave positive

feedback about the support available from their allocated worker during this process.

Transitions for children between caregiver families were well planned and followed best practice principles. The service had engaged in a range of improvement activities in this area since the last inspection to provide guidance and training around transitions which had improved the consistency of practice. New procedures for adoption will further support practice development and are a priority for service development and these are in the process of being completed.

Areas for improvement

1. To provide clear practice standards to staff and improve permanence outcomes the service should publish up-to-date adoption procedures.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'As a child or young person supported needing permanent alternative care, I experience this without unnecessary delay'. (HSCS 1.16)

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To improve the quality of support available to caregiver families the service should continue to review staff training needs and their capacity to undertake direct interventions. This should include but is not limited to:

- a) Reviewing impact of tests of change regarding therapeutic training.
- b) Identifying learning needs for staff in relation to trauma-informed and therapeutic approaches arising from this review

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).

This area for improvement was made on 26 June 2024.

Action taken since then

Theraplay test of change is underway. Service is reviewing approach to learning and development for both staff and caregiver families to improve the quality of learning opportunities to improve knowledge of trauma informed approaches.

This area for improvement has been met.

Previous area for improvement 2

To improve permanence outcomes the provider should ensure that analysis of permanence practice informs continuous improvement and service development. This should include but is not limited to:

- a) Identifying patterns and trends in relation to permanence practice.
- b) Taking this learning to inform ongoing development of practice.

This is to ensure that practice is consistent with the Health and Social Care Standards which state that: 'I benefit from a culture of continuous improvement, with organisations having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 26 June 2024.

Action taken since then

We have evaluated this AFI as being met in the context of FFC's role within this and current oversight. We found that the service continues to take a proactive approach to supporting colleagues in the locality team with this (e.g. perm workshops) and saw evidence of positive collaborative working with area team colleagues (e.g. joint home visits). However, there is significant work required across the authority, including a full review of their processes, to ensure children are not subject to unnecessary drift and delay.

Work has been undertaken to develop consistency in locality permanence forums and improve roles of Independent Reviewing Officers.

This area for improvement has been met.

Previous area for improvement 3

To provide clear practice standards to staff and improve permanence outcomes the service should publish up-to-date adoption procedures.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'As a child or young person supported needing permanent alternative care, I experience this without unnecessary delay' (HSCS 1.16).

This area for improvement was made on 26 June 2024.

Action taken since then

Work on adoption procedures is ongoing but these are yet to be completed. Work is underway.

This area for improvement is not met.

Previous area for improvement 4

To ensure that children experience positive transitions between caregiver families, the service should ensure consistency with best practice principles. This should include but is not limited to:

- a) Ensuring transitions are planned at the appropriate time in relation to legal processes and other decision making forums.
- b) Ensuring that terminology and best practice principles are used consistently.

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 meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 26 June 2024.

Action taken since then

Training has been provided on models of transition and updated guidance is included within looked after children procedures. Staff aware of best practice principles and this has been a focus of recent team development.

This area for improvement has been met.

Previous area for improvement 5

To promote the safety and welfare of children and young people the provider should ensure that all complaints to the service are investigated within the timescales outlined in the complaints procedure and that there is clear learning and action progressed from the findings.

This is 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).

This area for improvement was made on 26 June 2024.

Action taken since then

New complaints process in place with central complaints team maintaining overview of complaints investigation.

This area for improvement has been met.

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?	5 - Very Good
1.4 Children, young people, adults and their caregiver families get the service that is right for them	5 - Very Good

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