



Self Assessment Form Adoption Services

Guidance Note

You are advised to use the accompanying guidance when completing the self assessment.

When you complete the self assessment, it is important that you take consideration of the National Care Standards. To help you to do this, you will find **examples** of sources of evidence and questions to ask about the service, matched to National Care sub Standards (in brackets) by clicking on the **help icon** next to the Quality Statement. Some examples may not apply to your service so it is important that you take time to look at these and use those most applicable. It is not meant to be used simply as a checklist. For some services there may be other legislation or best practice which will inform how you work. This is included under the heading 'Legislation and Best Practice Signposting' below:

NB: The term "service users and carers" is used throughout this document for ease of reference, but is also taken to include family members and other representatives e.g. guardians, advocates etc. The term "carer" is used to mean people who look after a partner, husband or wife, son or daughter, relative or friend with a disability or illness. Many carers live with the person they care for, but many look after someone who lives independently, in supported accommodation, in hospital, or in a care home.

Legislation and Best Practice Signposting

When completing the self-assessment you should be aware of the provisions of the Public Services Reform (Scotland) Act 2010 and associated regulations; and, where appropriate, the Regulation of Care (Scotland) Act 2001.

The Adoption and Children (Scotland) Act 2007

The Adoption Agencies (Scotland) Regulations 2009

The Adoption Support Services and Allowances (Scotland) Regulations 2009

The Adoption (Disclosure of Information and Medical Information about Natural Parents) (Scotland) Regulations 2009

Guidance on Looked After Children (Scotland) Regulations 2009 and the Adoption and Children (Scotland) Act 2007

Age of Legal Capacity Act (Scotland) Act 1991

The Inspection Focus Areas (IFAs)

Please see the SCSWIS website at www.scswis.com

Quality Theme 1: Quality of Care and Support

Quality Statement 1.1

We ensure that service users and carers participate in assessing and improving the quality of care and support provided by the service.

Sources of Evidence

- Participation strategy (32.3, 32.7, 32.8)
- Record of how service user and carer participation has led to service improvements (32.5, 32.8)

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

Please provide information about any other issues you feel are relevant when making the quality assessment.

Target action date

Please provide a target date by when you will complete any improvement actions you have mentioned above.

Service provider grading

Please provide a grade for your service under this Quality Statement. Please tick one box below.

- | | | |
|--|--|---|
| <input type="checkbox"/> 6 – Excellent | <input type="checkbox"/> 5 – Very good | <input type="checkbox"/> 4 – Good |
| <input type="checkbox"/> 3 – Adequate | <input type="checkbox"/> 2 – Weak | <input type="checkbox"/> 1 – Unsatisfactory |

Quality Statement 1.2

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Sources of Evidence

- All available families that can meet child's needs considered (2.3)
- Ethnic background, cultural and faith needs considered (2.1, 2.2, 27.1)
- Decisions are made based on good quality information about children's needs (5.1, 26.2, 27.2)
- Full birth history (as far as possible) provided (5.6)
- Written agreement – approval as adopter (25.1, 25.2)
- Written agreement contact with birth parents (17.1)
- Communication needs recorded and supported 3.3)
- Complaints procedure, supported by practice example and including access to advocacy (13.1 – 13.4, 32.6)
- Attend adoption panel if so wish (4.4, 27.4)
- Thorough response and full information on adoption provided to prospective adopters (18.1 – 18.6, 19.1 – 19.8)
- Consultation and support during introductions (29.1 -29.4)
- Written explanation provided if application not accepted (20.1, 20.3).
- Inter-country adoption preparation is offered (31.3, 31.8)
- Contact arrangements (7.1, 7.2, 14.7)
- Personal care plan & needs assessment (8.1, 8.3, 8.4, 8.6, 12.1, 17.2, 17.3, 17.5, 17.6)

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

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Target action date

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Service provider grading

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Quality Statement 1.3

We ensure that service user's health and wellbeing needs are met.

Sources of Evidence

- Information on children's health needs provided to adopters (2.3, 5.3, 21.2, 27.1, 29.2, 31.7)
- Health checks on adopters (1.2)
- Full and thorough assessment of adopter's suitability (1.1)
- Effective recording and information systems including child protection (32.7).

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

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Target action date

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Service provider grading

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Quality Statement 1.4

We use a range of communication methods to ensure we meet the needs of service users.

Sources of Evidence

- Necessary checks are undertaken (1.2, 24.3)
- Communication needs recorded and supported (3.3, 13.2, 18.3)
- Expressing your views (3.1, 3.2, 4.1, 4.2)
- Complaints procedure, supported by practice example and including access to advocacy (9.4, 9.5, 13.3, 15.2, 32.6)
- People are consulted during introductions (29.1 – 29.4)
- Introductory pack/information provision (6.1, 8.3, 10.1 – 10.4, 11.1, 13.3, 16.1, 16.2, 18.1- 18.6, 19.1, 19.3, 19.4, 19.5, 19.7, 19.8, 20.1, 20.2, 20.3)
- Written agreement at point of placement (17.1)
- Access to Inspection Report (32.8)
- Personal care plan & needs assessment (8.1, 8.3, 8.4, 8.6, 12.1, 17.2, 17.3, 17.5, 17.6)

Service provider evidence of strengths

Areas of improvement identified by the service provider:

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Quality Statement 1.5

We respond to service users' care and support needs using person centred values.

Sources of Evidence

- Thorough assessment of adopters (1.1, 1.2, 25.6)
- Report to the adoption panel within 12 weeks of review (2.1)
- Information and response to prospective adopters (18.1 -18.6, 19.1 – 19.8)
- Preparation and assessment of adopters (21.1 – 21.6, 22.1- 22.7, 23.1, 31.3, 31.4, 31.5, 31.6)
- Necessary checks – Disclosure, Medical (1.2, 24.3)
- Assessment of young people's needs/suitable family (2.1, 2.2, 2.3,25.2, 26.1, 27.1, 28.2)
- Evidence of views taken into account – adoption, contact with birth families (3.1,3.2, 3.4, 7.1, 7.2, 14.1 – 14.7, 17.1 – 17.3, 27.3, 27.4)
- Agency treats all service users with respect/provides full information to birth parents (13. 1 – 13.4)
- Specialist equipment provided (3.3)
- Interpreting staff support with communication needs (3.3)
- Information regarding reconsidering applications (20.2).

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

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Quality Statement 1.6

People who use, or would like to use the service, and those who are ceasing the service, are fully informed as to what the service provides

Sources of Evidence

- Introductory/Information Pack (16,19.1,19.3, 20.2, 20.3)
- Prospective adopters have full information re health needs, special equipment required etc. (5.3)
- Full information about adoption (18.1 – 18.6)
- Thorough response to enquiries (19.1 – 19.8)
- Quality information:
 - Support systems – birth families (13.1 – 13.4, 14.3)
 - Support systems adoptees (10.1 – 10.4, 11.1 – 11.5, 12.1 – 12.3)
- Help and advice when needed about counselling, mediation, direct and indirect contact (15.1 – 15.4)
- Written agreement (17.1, 25.1, 25.2)
- Website publications (18.1, 19.4)
- Information about a new family is provided to children who are being adopted (4.3)
- Decisions made are based on good quality information (5.1, 5.2)
- Full genetic history provided (where possible) (5.6)
- Policies and procedures re panel, matching process, financial issues etc (24, 26, 28)
- Inter-country adoption information is made available (31.1, 31.2).

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

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Quality Theme 2: Quality of Environment

This Quality Theme is not applicable to this service type.

Quality Theme 3: Quality of Staffing

Quality Statement 3.1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Sources of Evidence

- Participation strategy (32.5, 32.8)
- Service user questionnaires, minutes of consultation meetings etc.(32.5)
- Recruitment and retention policies (32.0)
- Training plans (32.2)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

- Do you have a participation strategy which reflects the way in which you engage with service users and carers? (32.5, 32.8)
- How has the service user and carer participation led to service improvements in respect of staffing? (32.8)
- How does your service take into account the views of service users about staffing in your service (e.g. questionnaires, group or individual consultation meetings)? (32.5)
- To what extent do you involve service users and carers in the recruitment and selection of staff? (32.1, 32.5)
- To what extent do you involve service users and carers in the development of staff training plans? (32.2)
- How do you take the views of carers into account in determining the strengths and areas of development of the service in respect of staffing? (32.5)
- What recent service improvements have you made, in respect of staffing, as a result of taking into account service users and carers' views? (32.8)
- How has service user/carer feedback helped to grade this Quality Theme related to staffing?

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

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Target action date

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Service provider grading

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Quality Statement 3.2

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Sources of Evidence

- Recruitment and retention policies (32.1)
- Staff files (32.7)
- Adult and child protection policies (1.1, 32.1, 32.2, 32.10)
- Induction programme (32.2)
- Disclosure Scotland and/or PVG scheme checks (32.1)
- Checks with professional bodies (e.g. SSSC, NMC, GMC) (32.1)
- Staffing arrangements including rotas (32.4)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

- Do you operate an effective, safe and transparent recruitment and retention policy and procedures? (32.1)
- Do you have an equal opportunities policy which you monitor to ensure equality and fairness for staff including race, religion, ethnicity, disability and gender? (32.2, 32.3)
- Do your staff files reflect that you have followed robust procedures and the appropriate checks have been undertaken (e.g. Disclosure Scotland and/or PVG scheme checks, SSSC, GMC, NMC) for all staff grades and volunteers? (32.7)
- Have you recruited staff in appropriate numbers and skill mix to meet the aims and objectives of the service and the needs of service users? (32.2)
- Are your staff registered with the relevant professional body (e.g. SSSC, GMC, NMC)? (32.1)
- Do your staff undergo a comprehensive induction programme? What does this cover? (32.2)
- How does your service promote an open and transparent environment such that your staff are confident in reporting poor practice? Do your staff view feedback with defensiveness or as an opportunity? (32.4)
- How do you ensure that your staff have a good knowledge of your adult and child protection policies and a clear understanding of their roles and responsibilities in respect of adult and child protection? (1.1, 32.1, 32.2, 32.10)

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

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Service provider grading

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Quality Statement 3.3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Sources of Evidence

- Policies and procedures e.g. recruitment, whistleblowing, service user protection (32.1, 32.4, 32.10)
- Induction programme (32.2)
- Staff development strategy/Annual Training plan (32.2)
- Staff records including professional development, education and training (32.2)
- Records of communication with staff, service users and carers, other agencies (5.3, 5.4, 22.1, 30.4, 31.7)
- Exit interviews (32.2)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

- What relevant policies do you have in place to support this Quality Statement e.g. recruitment, whistleblowing, confidentiality, protection of vulnerable adults and child protection? How do you ensure that staff are aware of these policies and procedures and can implement them appropriately? (1.1, 32.1, 32.2, 32.4, 32.10)
- How does individual staff development link into your staff development strategy, e.g. framework for staff supervision, continuous professional development, education and training programmes which ensures that staff are adequately trained to meet the needs of the service users? Do your staff records reflect this (32.2, 32.4)
- How do your staff work to relevant professional Codes of Practice (e.g. SSSC, NMC, GMC)? (32.2)
- How do you ensure that your staff are aware of the National Care Standards, research and best practice and how do they use these to inform their, and others', day to day practice? (5.5, 32.2, 32.3)
- Do you ensure that staff work in effective teams which deliver good outcomes for service users? (32.3)
- Can your staff demonstrate a knowledge of the needs of the service users and do they plan service users' care accordingly? (5.5, 9.1 – 9.7, 32.3)
- How do your staffing arrangements promote continuity of care? (32.4)
- Are your staff clear about lines of communication and accountability? e.g. would staff state that engagement with management and other staff is positive? What is the communication network across departments and between management and other staff? (32.4)
- What mechanisms are in place which support your staff to liaise appropriately with other professionals and agencies? (5.3, 5.4, 22.1, 30.4, 31.7)
- Does your service/organisation have an open and transparent environment such that your staff are confident in reporting poor practice? (32.4, 32.10)
- Do your policies and practice support staff retention? (32.4)

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

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Target action date

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Service provider grading

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Quality Statement 3.4

We ensure that everyone working in the service has an ethos of respect towards service users and each other.

Sources of Evidence

- Policies and procedures (32.4)
- Participation strategy, minutes of meetings etc. (32.5, 32.8)
- Staff training records (32.2)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

- How do you ensure that there are clear procedures for setting standards of conduct, care and welfare? (32.2, 32.10)
- How would your staff demonstrate that they have a good knowledge of the National Care Standards (NCS) and the principles including how these have had a direct impact on their work with service users? (5.5, 32.2, 32.3)
- How do your policies and procedures reflect the NCS and principles? (5.5, 32.3)
- Staff and carers can describe a culture of the service which reflects good values and your staff can be observed putting these values into practice, interacting positively with service users and being responsive to service users' needs? (3.1 – 3.5, 4.1, 32.0)
- Are your staff trained in the promotion of the principles of equality and diversity and what evidence do you have that they operate in accordance with these principles? (32.2, 32.3)
- How do your staff encourage service users to express their views and ask questions? (32.5)
- What opportunities do you provide for both your staff and service users have the opportunity to discuss matters in confidence? (3.4, 32.4)
- If asked, would your service users report that staff are respectful and caring and treat them with dignity? (4.1, 4.2)

Service provider evidence of strengths

Areas of improvement identified by the service provider:

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Quality Theme 4: Quality of Management and Leadership

Quality Statement 4.1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Sources of Evidence

- Participation strategy (32.3, 32.7, 32.8)
- Service user questionnaires, minutes of consultation meetings etc. (32.5, 32.8)
- Corporate plan/annual report/statement of aims and objectives (32.8)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

- Do you have a participation strategy which reflects the way in which you engage with service users and carers? (32.2, 32.7, 32.8)
- How has service user and carer participation influenced the strategic direction of your service? (32.5, 32.8)
- How do you take into account the views of service users in respect of development of the strategic direction of your service (e.g. questionnaires, group or individual consultation meetings)? (32.5, 32.8)
- How have you involved service users in undertaking this self assessment process? (32.5)

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

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Quality Statement 4.2

We involve our workforce in determining the direction and future objectives of the service.

Sources of Evidence

- Communication records with staff (e.g. minutes of team meetings, staff questionnaires) (32.3, 32.8)
- Staff supervision/appraisal records (32.4)
- Staff professional development and training records (32.2, 32.4)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

- Are your staff knowledgeable about the strategic plan, and aims and objectives of the service, and are consulted when aims and objectives are developed? How are staff offered the opportunity to influence the strategic direction of your service? (32.3)
- How would staff describe the culture of leadership and management in your service? (32.4)
- How do you encourage your staff to bring new ideas and learning into the service? (32.3)
- Do you consult your staff about how their time and skills are deployed in the service? What influence do your staff have on staffing/staff management issues? (32.4)
- How do you promote an effective learning culture for your service/organisation, including providing access to resources to enable staff to keep up to date about the care sector in which your service operates (e.g. websites, journals, magazines and reports)? (32.2, 32.3)

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

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Quality Statement 4.3

To encourage good quality care, we promote leadership values throughout our workforce.

Sources of Evidence

- Training records (32.2)
- Appraisal/supervision records (32.10)
- Staff surveys (32.10)
- Corporate plan/annual report/statement of aims and objectives (32.0)

NB References to "Managers" means owners, managers, a board etc. as appropriate.

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

- Is it clearly defined who is responsible for planning within your service and updating your service's strategic aims and objectives, including updating policies, staff management structure and staff training to deliver new strategic developments? (32.0)
- How do you ensure that your staff understand the aims and objectives contained in your corporate plan/annual report/statement of aims and objectives, and are they committed to them? (32.8)
- Do your managers have aims and objectives which clearly define their leadership responsibilities? (32.10, 32.11)
- Do your staff demonstrate effective leadership qualities and communication skills which foster effective working relationships between staff and service users? (32.4)
- How do you motivate your managers and staff to become leaders? What evidence do you have that you have achieved this outcome? (32.2, 32.4)
- What systems do you have in place to support staff to develop their leadership skills and management of change?(32.2)
- Do you make leadership training accessible to all staff? (32.2)
- What evidence do you have that staff success is recognised and celebrated? (32.10)
- Do you promote staff autonomy and decision making in a supportive environment? (32.4)
- How do the leadership values in your service ensure that staff are continually striving towards achieving high quality evidence-based relationship centred care? (32.3)

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

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Quality Statement 4.4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Sources of Evidence

- Corporate plan/annual report/statement of aims and objectives (32.8)
- Quality assessment policies, methods and records of reviews and updates (32.3)
- Quality assurance models (32.3)
- Best value review (32.8)
- Self evaluation process (32.8)
- Records of consultation with stakeholders including service users and carers (32.5)
- Quality Assurance Awards (32.0)
- Complaints procedure including access to advocacy (32.6)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

- How do you assure quality in your service? (32.0)
- What quality assurance models do you use/participate in(e.g. Scottish Government Self Evaluation document "How good is our team", Investors in People, scrutiny from external bodies) (32.8)?
- How often do you review the quality systems you have in place? (32.8)
- How are service users involved with your quality assurance and self evaluation process? (32.5)
- What methods have you developed to encourage feedback from stakeholders e.g. service users and carers, social workers and external regulators and agencies? (32.5, 32.8)
- What action have you taken in response to feedback from service users and carers and other stakeholders and how has this improved the service? (32.8)
- Have you developed, submitted and implemented an action plan to take account of any requirements and recommendations from regulatory activity? (32.3)
- How does quality assurance inform staff supervision? (32.4)
- Do you make notifications to stakeholders, SCSWIS, SSSC and other professional bodies? (32.7)

Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues

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