DUNDEE CITY COUNCIL

- REPORT TO: CHILDREN AND FAMILIES SERVICES COMMITTEE 26 FEBRUARY 2018
- REPORT ON: CARE INSPECTORATE INSPECTION REPORTS ON ADOPTION AND FOSTERING SERVICES
- REPORT BY: EXECUTIVE DIRECTOR, CHILDREN AND FAMILIES SERVICES
- **REPORT NO: 70-2018**

1.0 PURPOSE OF REPORT

This report advises members of the outcome of the Fostering and Adoption Inspections undertaken by the Care Inspectorate in November 2017. The inspection reports were published in February 2018. They did not make any requirements or recommendations but they identified some areas for continuous improvement and this report outlines the actions being taken.

2.0 **RECOMMENDATIONS**

It is recommended that Committee:

- 2.1 Notes the summary of the two inspections outlined in this report, with the full reports attached as Appendices 1 and 2; and
- 2.2 Approves the actions in respect of the areas for continuous improvement as outlined in paragraph 4.6.

3.0 FINANCIAL IMPLICATIONS

None.

4.0 MAIN TEXT

4.1 The Care Inspectorate undertook announced and low intensity inspections of both the Fostering and Adoption Services during November 2017. The inspections focused on 2 categories of the Quality of Care and Support and the Quality of Management and Leadership. The key findings of the Care Inspectorate are outlined below:

Date	Quality of Care and Support	Quality of Environment	Quality of Staffing	Quality of Management and Leadership
20 November 2017	5 – Very Good	Not assessed	Not assessed	4 - Good
17 September 2015	4 – Good	Not Assessed	4 – Good	4 - Good

Adoption Service

- 4.2 The Adoption Service therefore maintained good performance in the Quality of Management and Leadership and improved its performance in respect of the Quality of Care and Support. Based on meetings with adopters, social workers, managers and adoption panel members, there were a range of positive findings relating to service development, expertise and involvement as follows:
 - Adopters reported feeling well supported through the process and that adopting
 was a positive experience, with some subsequently adopting more than once to
 enable sibling groups to remain together.

- Staff reported that they are encouraged to develop professional knowledge and new approaches. Evidence included robust assessments leading to good decisions made about prospective adopters. They were highly motivated.
- Panel members reported that Chairs are experienced and also highlighted their knowledge of child development and other relevant theories relating to attachment, separation and loss.
- 4.3 The Care Inspectorate did identify some areas for continuous improvement in both categories. There was a theme of driving ongoing improvement in communication and staff involvement both within the service and in respect of its links with the wider service. These should help to build on Very Good and Good practice and include:
 - Communicating reasons for delays in permanence decisions
 - Progressing a 'buddy scheme' for prospective adopters
 - Developing permanence work with less experienced Social Workers
 - The involvement of staff in any planning for possible building moves.

Fostering Service

Date	Quality of Care and Support	Quality of Environment	Quality of Staffing	Quality of Management and Leadership
20 November 2017	5 – Very Good	Not Assessed	Not	4 - Good
			Assessed	
4 September 2015	4 – Good	Not Assessed	5 – Very	4 - Good
			Good	

- 4.4 The Fostering Service therefore also maintained good performance in the Quality of Management and Leadership and improved its performance in the Quality of Care and Support. In addition to manager, social workers and foster carers, they also met with 16 children and young people and observed key meetings at which staff, carers and children and young people were present. Positive findings included:
 - Children and young people felt safe and protected from abuse, neglect and harm and their health and well-being needs were being met and maintained at a high level.
 - Children and young people were involved in making decisions about changes in their lives and are supported through good relationships with their carer.
 - Young people in foster care attend a participation group and feed their views into Champion's Board meetings to raise awareness of issues.
 - Foster carers felt that they are well supported by the service, that they work in partnership with their Social Worker and that they benefit from training and support
 - Foster carers continued to access training opportunities such as therapeutic play and brain development to enable them to have greater insight into behaviour
 - Foster carers told the inspectors that a Civic Reception in the City Chambers made them feel valued and proud.
- 4.5 The inspectors found that a quality assurance framework based on wellbeing indicators underpinned organisational learning and continuous improvement within the service. Good examples of internal communication and inter-agency work were also identified. Like the Adoption Service, the areas for improvement are seen to build on this and include:

- The service could work closer with Education and Community Education to enhance consistent support both within schools and the community.
- More overnight stays with children and young people and the carers before moving would be helpful in preparing everyone for a longer-term move.
- Trying to ensure children and young people always went on holiday with carers, rather than being in respite whilst they were away.
- A specific and targeted plan taking into account new Health and Care Standards was proposed as a way forward.

4.6 Actions

In response to the areas for improvement identified for the Adoption and Fostering Services, a development day with all key staff, along with some foster carers and adopters, is planned for March 2018. A joint action plan, corresponding with Health and Care Standards, will be developed. In the interim, further actions involve:

- Work with Education Psychologists to assist social workers and Education staff to develop a shared understanding of the needs of Looked After Children.
- Support carers to promote their continuous care of children and young people with minimum disruption to placements.

4.7 Summary

The Care Inspectorate inspections of the Fostering and Adoption Services both highlighted further improvements since the last inspections took place. There were a range of high quality practices and no requirements or recommendations were made for either service. The areas for improvement will help build on developments and are either already being progressed, or will be progressed in collaboration with key parties following a joint planning event in March 2018.

5.0 POLICY IMPLICATIONS

- 5.1 This report has been screened for any policy implications in respect of Sustainable Development, Strategic Environmental Assessment, Anti-Poverty, Integrated Impact Assessment and Risk Management.
- 5.2 There are no major issues.

6.0 CONSULTATIONS

6.1 The Council Management Team has been consulted in the preparation of this report.

7.0 BACKGROUND PAPERS

7.1 None.

PAUL CLANCY EXECUTIVE DIRECTOR

7 February 2018



Dundee City Council - Fostering Service Fostering Service

Dudhope Castle Dudhope Park Barrack Road Dundee DD3 6HF

Telephone: 01382 436004

Type of inspection: Announced (short notice) Inspection completed on: 20 November 2017

Service provided by: Dundee City Council Service provider number: SP2003004034

Care service number: CS2005097782



About the service

Dundee City Council Fostering Service recruits, trains and supports foster carers and their families to provide emergency, temporary or permanent care for children and young people who require alternative family care.

The aims of the service are stated within the context of Dundee City Council's duties towards children and families. The team includes a senior manager, a team manager and supervising social workers. At the time of our visit the service was supporting 96 foster carers to look after 156 children and young people. Twelve foster carer assessments were ongoing.

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at <u>www.careinspectorate.com</u>

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

What people told us

Inspectors and a young inspection volunteer spoke with 16 children and young people who said:

"They treat you well, I like it a lot. They make me feel safe and happy. I can talk to my foster carer when I need help. Without foster care I don't know what would happen."

"Foster care in Dundee is good and has made my life better."

"Foster care has been good for me. I have a foster family that's really good and that has given me an opportunity to do something with my life."

"Weekly checks would be good, I've had foster carers in the past who only did it for the money."

"It's hard when you first move in with a family and you don't know the rules and you are expected to know them straight away. Especially when you have come from a family where there are different rules."

"Quick sudden change."

Foster carers told us:

"We discuss our thoughts with our resource worker and feel we are in harmony. No disagreements."

"We are very well support by our link worker and the fostering department, if we need any help or advice we feel very confident that the service will be there to support and listen to us. Our views are documented by our link worker and signed by all parties concerned."

"We are questioned about health and well being and education during our regular resource worker visits and at LAC meetings."

"We feel the service does not provide support to children about education directly and this is provided by us the foster carers."

Inspection report for Dundee City Council - Fostering Service page 2 of 11

"A wide variety of training is provided and we are notified and encouraged to attend. Support groups and conversations with resource worker help us."

"We are given training, provided with support groups. We can phone the foster duty line at the fostering department with any concerns and we get fantastic support from our link worker and the fostering department in general."

"There are workers for the child workers for ourselves, training to refresh or teach new skills, emails of activities planned for the children."

"We are given monthly home meetings from our link worker and six weekly meetings from the children's workers. We can phone any of the social workers with any concerns. We are given a diary to document any situations that may occur in our household with the child in our care."

"We feel the service given to us is very good. If there was more finance available to employ more workers that would reduce case load."

"There is great communication with foster carers and the fostering service is good at making you feel part of the fostering team. I don't always feel part of the child's team though; sometimes there are professional meetings or children's hearings which I don't get invited to, even though I am the one who knows the child the most."

"I feel listened to and valued."

Stakeholders told us:

"Panels ensure they are listening to family members who are present at panels, they are careful to read the case papers prior to panel and ask questions of family members and professionals at panel meetings. Occasionally children are present and speak at panels or their views have been sought beforehand and written submissions are part of the panel papers."

"Children are able to attend meetings, given space to speak and the social workers representing them can speak or advocate on their behalf."

"Birth families are invited to come into the Panel first so they do not have to wait too long. They are given time to speak or read from papers prepared by them and give their opinion of the recommendation for permanence for their child or children. They frequently bring a family member or advocate with them. They are advised that their views will be recorded and taken into consideration and that the Panel makes a recommendation not a decision."

"Business meetings are scheduled through the year at regular intervals for the Panels, separately and together. These have been cancelled recently."

Placing social workers told us:

"I have direct contact with the children being placed but I do not tend to attend resource panels, this would be the social worker involved. If information is passed on about the child this is not always able to be taken into account in terms of the needs of the child as it is often resource led."

> Inspection report for Dundee City Council - Fostering Service page 3 of 11

"With regards to foster care placements I work with the resource worker to ensure that the needs of the child / ren are met. Resource worker attends all LAAC reviews where possible, which ensures everyone is working together to ensure the best outcomes for the children."

"There is good communication between staff."

"My views are sought for relevant review panels, post placement reports and prior to placements being sought."

"The services social workers work closely with the foster carers to ensure that all of the children's needs are met in placement. This is done both prior to placing a child and also as part of day to day arrangements and regularly reviewed."

"Foster carers are proactive in ensuring health appointments are kept up-to-date."

"Foster carers are able to contact resource workers by phone. Resource workers visit placement. If there is a specific difficulty in placement I am able to contact resource workers to see what support they can offer."

"Foster carers will often feed back if they have had supervision or discussions with their social workers. They often voice the level of support they receive in relation to the child placed with them."

"I have regular contact with the social workers who support foster carers. In my experience they have been proactive in addressing any issues raised. This is a consistent theme with every child I've case held in local authority foster care placements."

"I am aware of foster carers having regular training and regular contact with their social workers."

"Foster carers need much more support in relation to the expectations of permanency and the reality that a child's needs at placing may not be the same a year or two into placement. Some foster carers also need a lot of support to understand that not every child can 'commit/invest' in their family and that they cannot 'give back' emotionally because of the trauma they have experienced."

"For children who have been placed on a short term basis with the plan to move onto permanent homes, the foster carers are encouraged to contribute and complete life story work for children. In my experience of placing and moving on children, this has been done by foster carers. The team are helpful in planning coordination and supporting foster carers through this process."

Self assessment

We did not ask the service to submit a self assessment.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

Inspection report for Dundee City Council - Fostering Service page 4 of 11

What the service does well

Children and young people and foster carers we spoke with confirmed that, overall, children felt safe and protected from abuse, neglect and harm where they were living and within the community. Young people and foster carers had identified people to support them with decision making and keeping safe.

Children and young people and foster carers were being well supported to maintain high levels of health and well being. Records we looked at and those we spoke with confirmed a focus on ensuring access to a range of medical and therapeutic supports were in place. One young person we spoke with was being supported by a mental health nurse and told us that talking things over was helping to manage emotions. Families were encouraged to maintain active lifestyles and children and young people told us about a wide range of hobbies and interests including going to a local skate park, playing musical instruments and swimming.

Social workers supervising foster carers kept records of their visits to the carer's home and the discussion they had. When we sampled these records we noted how detailed these were and with a clear focus on education and learning for both children and young people and carers. This was leading to greater school or college attendance and positive educational outcomes for young people. During the inspection we spoke with one child who had additional support from a private maths tutor. He told us that maths was now his favourite subject. Several young people told us they were attending or planning to apply for further or higher education courses or had clear career plans.

During our visit, some foster carers attended an information session provided by members of the foster care team on therapeutic play and a session with a specialist consultant on attachment and brain development. This was done do promote greater insight into the behaviour of children who have experienced separation, loss and trauma to enable more compassionate and secure relationships.

Throughout our visit we noted the strong emphasis placed on secure relationships. Foster carers told us that they were better supported to maintain close relationships with children and young people because of the excellent relationships they had with their own social worker. We noted there had been a decrease in unplanned placement endings over the last year and that young people and carers were being encouraged to maintain placements beyond a young person's 18th birthday. When we spoke to young people and carers about this, they told us this had reduced anxiety about moving on before the young person felt ready to do so.

The service had created several opportunities for fun experiences for children, young people and carers. We heard about a number of planned occasions to celebrate achievements, including a civic reception in the city chambers for long serving foster carers. Foster carers told us this made them feel more valued and proud and that they and the children and young people they cared for also enjoyed the experience. Some group sessions were centred around fun activities including arts and craft or outdoor walks. This included time for the sons and daughters of foster carers who told the service how much they appreciated the opportunity to meet with other children from caring families.

We found that children and young people were involved in making decisions about changes in their lives, both through the very good relationships with their carers and some also did this as a group. We noted particular strength in responding to children's views of needing less contact with professionals when they were permanently placed and had established secure relationships with their fostering family.

A young inspector visited the young people's participation group and heard that young people were keen to raise awareness of how children were sometimes treated differently in school or within their communities by children who had never experienced being looked after.

> Inspection report for Dundee City Council - Fostering Service page 5 of 11

They wanted to raise awareness of this to support looked after children to feel more equal among their friends. The young people planned to continue this conversation with managers and leaders of the service at a Champions Board meeting.

Children and young people and foster carers were encouraged to take up opportunities to take on responsible roles in their own lives and within the service. For example, young people and carers had been more consistently involved in recruitment of social workers for the fostering team. They were also routinely involved in recruitment and preparation work and in supporting newly approved carers.

All of our discussion with carers, staff members and managers confirmed a strong, stable and rights based culture within the service. We found a growing confidence by managers in driving forward policy and practice developments to ensure safety, well being and improved outcomes for all. For example, the service had developed a draft plan to develop the service to offer continuing care for young people from age 18 to 21 years and was raising awareness of this with carers and young people. Opportunities were being created for more collaborative working with neighbouring Local Authorities. There were plans to recruit a panel coordinator in partnership with Angus Council and training plans for foster carers and staff were also open across the Tayside Collaborative.

A quality assurance framework based on well being indicators and underpinned by regular management and development meetings within the service and with key stakeholders supported organisational learning and continuous improvement. We saw that quality relationships with multiagency partners also directly benefited children and young people and carers at an individual and care planning level. We saw good examples of this working in the panels we observed and in another example where medical advisers were able to offer assistance to individual staff and carers to enable carers and families to support each other during a very difficult time.

Management meetings were also being used for effective communication across the whole family placement service, including the adoption and permanence teams. Staff members told us how valuable it was that all teams were located in the same building and two of those teams were in the same room. Every staff member we spoke with confirmed the committed and knowledgeable approach of the management team which was leading to sustained motivation and commitment from the team.

We noted that action had been taken to meet the recommendations made at our last inspection and that progress was continuing in relation to improvement areas.

Taking all of the above and some areas for improvement into account, we assessed quality of care and support as very good and quality of management and leadership as good.

What the service could do better

A group of young people we spoke with wanted to raise awareness of continued lack of understanding of their circumstances from children who had not experienced being looked after. There was experience of being treated differently by peers in school and in communities. We suggested that the service could work more closely with partners in education and community education to support the group more in their awareness raising.

Some young people talked about experiencing a lack of preparation for being placed with carers. A couple told us they had seen photographs of carers before moving to live with them and said this was not good enough; they suggested children should have more overnight stays with carers before moving.

Inspection report for Dundee City Council - Fostering Service page 6 of 11

One young person told us that being sent to respite soon after being placed with foster carers while they went on holiday for two weeks was a "negative" experience which led to feelings of not being wanted or cared for. We discussed this with the service who explained they expected carers to take children on holiday with them and would continue to support this to happen as much as possible.

One foster carer commented there could be better communication and planning between education and social work services to ensure the right decisions were made in relation to secondary school placements for children at the earliest stage possible. Some foster carers told us that although they were now experiencing excellent relationships with their social workers, there had been some difficulties previously. This had led some to consider if they wanted to continue fostering or to feeling unhappy about decisions not having been explained to them fully. We reminded the service of the need to ensure carers can feel at ease raising concerns with managers at any time, so that carers continue to feel valued and listened to.

Panel members told us they had experienced some loss of momentum in induction and business meetings for panel members. We acknowledged the current period of change for the service which planned to jointly recruit a panel coordinator, together with Angus Council and encouraged the service to ensure planned induction ongoing supervision and appraisal practices for panel members and panel chairs to ensure effective quality assurance.

Panel members highlighted that short term secondment to other panels, opportunity to attend conferences and training events and increasing the pool of independent panel members would strengthen knowledge, experience and objectivity in panel processes.

As well as commenting on clear strengths within the service, social workers suggested the team could share more information with other teams about how foster carers are trained and supported to work with children on issues of trauma and loss. They also suggested more support could be offered to foster carers to build on relationships with children's families.

When we looked at development plans we saw that although relevant improvement work had been identified at team and management levels, this work could be more effectively supported by specific and measurable planning. We suggested that developing improvement action plans to be more specific in terms of timing and step changes would support a more targeted improvement focus for the work of the team. We asked the service to consider how they could incorporate the new health and care standards in this work.

During our inspection visit we were aware that the provider was planning to make a change to the service address. This was leading to some anxiety for staff members working in the service and for all stakeholders in relation to uncertainty about ongoing venues for panels and for meetings. We encouraged managers to ensure children and young people, foster carers and staff members were involved in planning any future moves from an early stage. We suggested that staff views about proximity of teams for the purposes of effective cross team working should be listened to and taken into account in planned office moves.



Number of requirements: 0

Inspection report for Dundee City Council - Fostering Service page 7 of 11

Recommendations

Number of recommendations: 0

Complaints

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

Inspection report for Dundee City Council - Fostering Service page 8 of 11

Inspection and grading history

Date	Туре	Gradings	
4 Sep 2015	Announced (short notice)	Care and support	4 - Good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	4 - Good
3 Apr 2015	Re-grade	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
14 Aug 2014	Unannounced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
20 May 2014	Re-grade	Care and support	1 - Unsatisfactory
		Environment	Not assessed
		Staffing	2 - Weak
		Management and leadership	1 - Unsatisfactory
5 Sep 2013	Announced (short notice)	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
17 Nov 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
20 Jan 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed

Inspection report for Dundee City Council - Fostering Service page 9 of 11

Date	Туре	Gradings	
28 Jan 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good 4 - Good

Inspection report for Dundee City Council - Fostering Service page 10 of 11

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

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਦਾਂ ਦਿਚ ਉਪਲਬਧ ਹੈ।

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> Inspection report for Dundee City Council - Fostering Service page 11 of 11



Dundee City Council - Adoption Service Adoption Service

Dudhope Castle Dudhope Park Barrack Road Dundee DD3 6HF

Telephone: 01382 436000

Type of inspection: Announced (short notice) Inspection completed on: 20 November 2017

Service provided by: Dundee City Council Service provider number: SP2003004034

Care service number: CS2004082550



About the service

Dundee City council provides an adoption service for children, young people and their families who are assessed as being in need of this service. 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.

Within the year January 2016 and January 2017 the agency had approved 7 new adoptive households. Twenty-six of the 29 children approved for adoption had moved to new families and 14 adopted of those had been adopted. On average, children were being referred to the Adoption Register within four weeks of registration at Panel.

What people told us

Adopters told us:

"I have been very well supported through the (adoption) process and well prepared for what we have faced."

"Both the child's social worker and our worker (in the adoption service) have been a good source of support and guidance."

"We have had a positive experience of adoption with Dundee and although we have not sought further support we feel confident about being able to return to the team if we need to."

Staff members told us:

"(we are) always encouraged to develop knowledge/think of new ways to approach issues."

"Rhe team is really supportive of each other."

"The relationships we build with prospective adopters are key."

Panel members told us:

"I have knowledge of child development and relevant psychological theories e.g. attachment and trauma and experience of working with children who have had traumatic episodes in their lives including bereavement, neglect, abuse."

Inspection report for Dundee City Council - Adoption Service page 2 of 8

"We listen to family members who are present at panels, read the case papers prior to panel and ask questions of family members and professionals at panel meetings. Occasionally children are present and speak at panels or their views have been sought beforehand and written submissions are part of the panel papers."

"I have recently changed from Fostering Panel to Adoption Panel so have not done a great deal of training particular to this panel but I have received and read papers relating to recent court rulings, an adoption allowances fact sheet and other papers. I also received training which involved a review of research and literature pertaining to the impact of various circumstances on children's lives such as parental alcohol/drug misuse, domestic violence etc. In addition to this I have asked questions and received answers from chairs and other panel members."

"Panel papers are available in good time and a range of people with different skills and experience is represented on each panel. There is opportunity to discuss questions we want to ask prior to the panel and experienced chairs who can help less experienced panel members with relevant information. Regular recruitment so that there is adequate numbers of panel members means that panels meet consistently."

Self assessment

We did not ask the service to submit a self assessment.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

What the service does well

Overall we found very good outcomes for children and young people and for adopters.

People we spoke with told us about the love and nurturing experienced by children and young people and about significant improvements for children in relation to their safety, health, achievements and the close bonds they had created with adoptive parents. We were satisfied that this reflected the majority of the work of the service.

Most adopters we spoke with were very positive about their experience of the service and some adopters had chosen to return to the service. This had led to more siblings being placed together in adoptive placements.

Adopters we spoke with were very positive about their relationships with staff and the service as a whole and all of the staff spoke in great detail about the adopters they were supporting and the children they had been matched with. These strong and consistent relationships between adopters and staff meant that linking and matching was underpinned by a clear knowledge of the needs and strengths of adoptive families and that children placed in families were more likely to experience quality family life.

> Inspection report for Dundee City Council - Adoption Service _____page 3 of 8

When we sampled the experiences of a small number of children we saw some examples of where the length of time taken to achieve permanence and the negative experience of prolonged contact arrangements had impacted on well being for children and carer families. We also found a perception that at times, efforts of services were not always child focussed but more on meeting the needs of adults. However, adopters told us they were confident that the service had done all they could and had also prepared them for the circumstances they experienced.

We were impressed by the commitment of staff and managers to ensure work was underpinned by theory and best practice. For example, staff were engaged in developing the research required in the sector to learn from national activities including the effectiveness of activity days and adoption exchange days. Staff confirmed they were supported to take forward ideas for developing new ways of working and the service had supported two members of the team to see how 'Theraplay' could be used and implemented within the service.

When we looked at records we saw that assessments were of a consistently high quality. Rigorous analysis of information gathered was being carried out, leading to good decisions being made about prospective adopters. This included some decisions not to progress assessments or to put assessments on hold until all information had been considered. We noted that having an identified member of staff focussed on linking and matching processes was a particular strength of the service, which kept children at the centre of taking plans forward.

Every member of staff we spoke with during the inspection was confident in outlining the positive outcomes for children they had been involved with in matching with prospective adopters and the work that staff do in partnership with the allocated social worker was a key element of this. We found strong evidence of this working well and of senior staff and managers supporting the resolution of more complex issues. For example, where very difficult decisions had to be made in relation to a child living with prospective adopters, we found clear records of the staff involved dealing with this sensitively and clearly from the point of what would be in the best interests of the child.

Strengths in relation to management and leadership were helping the service to sustain some progress and negate some significant. Management meetings were being used for effective communication across the whole family placement service including the adoption and permanence teams. Staff members told us how valuable it was that all teams were located in the same building and two of those teams were in the same room. Every staff member we spoke with confirmed the committed and knowledgeable approach of the management team which was leading to sustained motivation and commitment from the team.

It was clear from discussions with staff that they felt that they were very involved in the running of the service and identifying and taking forward areas for further development and improvement. Staff felt influential and, in turn, the senior staff actively supported leadership within the team. This included support for professional development opportunities both specific to interests for example in 'Theraplay' or more generally for increased general knowledge within the service such as securing children's futures.

Senior management also recognised and respected the knowledge of team members and team leaders and investment in improvements had included providing staff with the resources needed to deliver quality in specific areas such as filming and IT equipment for involvement in exchange days, for making best use of 'Link maker'. Importantly, this investment was supporting linking and matching by enabling both children and adopters in getting to know each other sooner.

Inspection report for Dundee City Council - Adoption Service page 4 of 8

We found a strong leadership culture within the team and leaders were being encouraged at every level. We found examples of the team contributing to national developments within the adoption field, for example within exchange days and activity days. We were also impressed by the rigour applied to learning from the small numbers of disrupted placements experienced and could hear from the practitioners involved the ongoing impact of this disruption and the learning taken from it.

We noted that action had been taken to meet the recommendations made at our last inspection and that progress was continuing in relation to improvement areas.

Taking all of the above and areas for improvement into account, we assessed quality of care and support as very good and quality of management and leadership as good.

What the service could do better

Some staff and prospective adopters told us they were concerned that some planning was more focused on the adults in the children's life than of the children's needs. Although we did not see any information relating to this view contained within the records we looked at, we reflected that it may be a perception developed from frustrating experiences of delayed decisions. For example, when birth parents had not received a Children's Hearing report, this meant that a panel decision was deferred by a number of weeks. We also heard of last minute interventions where members of the extended family had come forward to offer a placement even where they had been previously discounted for soundly assessed reasons. We discussed this with the managers of the service and suggested they consider how to ensure that such examples are not perceived by others as a complacency about the impact of delay on children and adoptive families.

Staff and managers told us about a couple of development ideas which we considered to be positive but which had not yet been taken forward. For example, buddying up adopters, particularly where there were delays and difficult experiences being identified. We noted that this additional and targeted support for prospective adopters and adopters would support emotional well being and perhaps lead to better longer term support networks.

We also heard of an initiative to support social workers across the organisation who have limited experience in permanence as part of their workload, support from the permanence team was on offer as a one to one consultation. We felt that this was an idea which could be progressed further and consider whether practitioners from the adoption service would also be well placed to help improve the knowledge of the processes and potential timescales. We especially thought that there was a strong argument to establish these links to ensure that work with birth families through the process can also be underpinned by some experience of this, either from the permanence team or the adoption service.

When we looked at development plans we saw that although relevant improvement work had been identified at team and management levels, this work could be more effectively supported by specific and measurable planning. We suggested that developing improvement action plans to be more specific in terms of timing and step changes would support a more targeted improvement focus for the work of the team. We asked the service to consider how they could incorporate the new health and care standards in this work.

During our inspection visit we were aware that the provider was planning to make a change to the service address. This was leading to some anxiety for staff members working in the service and for all stakeholders in relation to uncertainty about on going venues for panels and for meetings. We encouraged managers to ensure children and young people, foster carers and staff members were involved in planning any future moves from an early stage. We suggested that staff views about proximity of teams for the purposes of effective cross team working should be listened to and taken into account in planned office moves.

> Inspection report for Dundee City Council - Adoption Service page 5 of 8

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Complaints

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

Inspection report for Dundee City Council - Adoption Service page 6 of 8

Inspection and grading history

Date	Туре	Gradings	
4 Sep 2015	Announced (short notice)	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
14 Aug 2014	Announced (short notice)	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
5 Sep 2013	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
17 Nov 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
20 Jan 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
28 Jan 2009	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good

Inspection report for Dundee City Council - Adoption Service page 7 of 8

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Inspection report for Dundee City Council - Adoption Service page 8 of 8