

Moray Adoption Service Adoption Service

The Moray Council
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Type of inspection:
Announced (short notice)

Completed on:
6 July 2023

Service provided by:
The Moray Council

Service provider number:
SP2003001892

Service no:
CS2004082047

About the service

Moray Adoption Service is a local authority adoption agency which recruits and supports adoptive families for children in need of permanent substitute care. The service is provided by a dedicated team of social workers.

About the inspection

This was a short notice inspection which took place between 19 June and 6 July. 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 one person using the service and spoke with three staff and management, observed practice and daily life, reviewed documents spoke with visiting professionals. We also received five responses to a survey sent to adopters in advance of the inspection.

Key messages

- Children were supported to maintain meaningful relationships with extended family members and were involved in the wider community.
- Young people required further support to maintain meaningful contact with siblings.
- Caregivers valued relationships with their social workers and we assessed that staff were skilled at supporting them.
- High quality tracking and monitoring systems had been out in place since the last inspection, and these have the potential to improve consistency of practice.
- A number of children and young people experienced delays in moving to their 'forever families'. Tracking processes are now in place and at the next inspection we will review the impact of these on outcomes for children and young people.
- Improvements in post adoption support had been made since the last inspection.

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?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How well is our care and support planned?	4 - Good

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

How well do we support people's wellbeing?

4 - Good

We have graded this key question as good, where there are a number of which taken together outweigh areas for improvement.

Adoptive families reported positive relationships with staff in the service which helped to support positive outcomes. One adopter told us "my social worker is very responsive and knowledgeable". Adopters felt comfortable during the assessment process to be open and honest, we saw examples of post adoption support delivered sensitively, supporting a child at their pace to understand their life story. Flexibility and choice for adoptive families had been promoted by the pilot of self directed support but this is still in its early stages and has not been widely used in the service.

Children and young people living in adoptive families were supported to maintain important relationships including siblings and previous carers. We saw examples of letter exchange with family being managed well and how, through life story work, connections with family were safely promoted by the service.

Children and young people living in adoptive families experienced individualised care, were achieving in education and had opportunities to lead fulfilling lives. Adoptive families were aware of their responsibilities as dual approved foster carers and the service had a robust approach to safeguarding. Adoptive families had access to training to help them to keep children safe, including online safety.

Children and young people's needs in relation to life story was well promoted by the service. The adoption team have led on life story training for carers and staff across the service, to support a new departmental life story policy which aims to ensure consistency in approach across children's social and placement services. This work is in its early stages and we look forward to seeing the impact at future inspections.

Adoptive families benefitted from access to a wide range of training and learning opportunities provided through the service including online training and courses provided by external providers. This included training in relation to Dyadic Developmental Practice, a trauma informed model of practice to support children to develop positive attachments. A training calendar was in place that outlined learning opportunities throughout the year. Adoptive families also had access to drop in sessions and family events were arranged to promote engagement with the service and build relationships.

Adoptive families were robustly assessed and there were clear processes for identifying appropriate matches. Staff in the adoption team had a role in family finding for children identified as in need of adoption, with referrals made at an early point to reduce drift and delay. Transitions for children moving to adoptive families were well planned based on individual need, with staff having a strong understanding of the theory base informing practice.

At the last inspection we found significant drift and delay in permanence planning and lack of service overview of this which negatively impacted on outcomes. Improved tracking arrangements are now in place across placement services, involving children's social work managers and independent reviewing officers. We need to see how these new tracking arrangements will impact on outcomes and continue to improve permanence planning for children and young people. This will form an area for improvement in this inspection (see area for improvement 1).

Areas for improvement

1. To support long term stability for children and young people, the service should ensure tracking systems in place are used to robustly monitor and evidence improved outcomes.

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 needing permanent alternative care, I experience this without unnecessary delay' (HSCS 1.16).

How good is our leadership?

4 - Good

We have graded this key question as good, where there are a number of strengths which taken together outweigh areas for improvement.

We saw significant improvements in quality assurance systems had been made since the last inspection, ensuring key elements of practice to safeguard welfare were undertaken. A new policy team with a role to review complaints has brought extra capacity to develop procedures and to embed a learning culture from

all aspects of service delivery. The service manager has embedded a range of quality assurance processes to inform ongoing development which has created a foundation for continuous improvement.

We assess there was now a more consistent overview of key processes, such as carer checks, foster carer reviews, unannounced visit and safer caring plans. We discussed with the service that they should progress similar tracking of incidents, accidents and allegations which we are confident will be progressed. These changes are at the early stage, however, we are confident that there is now an increased capacity for improvement and development.

Children's outcomes were being improved through the implementation of a new policy regarding unplanned endings, which evidences there is an overview of unplanned endings which highlights learning and actions to be taken forward.

The Fostering and Adoption Panel and Agency Decision Maker provides scrutiny to carer review and applications for approval for adoptive families and were able to challenge assessments presented to them. We heard that here is a high level of communication between the independent chair, the Agency Decision Maker and panel co-ordinator. Panel members are well supported through regular supervision and appraisal and have access to a range of learning and development opportunities.

Staff in the fostering and adoption team have told us that they are experiencing delays in decision making and are feeling that the managers do not understand the service. They described a sense of detachment from senior managers and there were some negative comments in our survey relating to management culture. Staff in the team expressed that seniors in the service lack autonomy which can impact on outcomes. It is anticipated that having a team manager in post will improve the speed of decision making.

We were encouraged to see that a lot of attention and action has been taken to support the quality assurance improvements needed within the service. Whilst these are positive developments, many are very recent and, therefore, we are unable to confidently report that outcomes have improved as a result. The concerns expressed by staff relating to a negative view of the management culture do give us cause for concern. We will review both of these at the next inspection.

How good is our staff team?

4 - Good

We have graded this key question as good, where there are a number of strengths which taken together outweigh areas for improvement.

We received positive feedback from adopters in relation to the knowledge and competence of workers within the team. Staffing had been stable since the last inspection, which provided consistency of support to caregiver families. Staff in the team were experienced and knowledgeable with a passion for their area of practice. Staff were able to use their knowledge to promote development across the local authority, through leading on training for life story work across the local authority to improve how children and young people are supported to understand their life story.

Staff in the team had received consistent supervision, but there had been gaps in support in the past year where supervision had not taken place regularly. Staff also had access to an annual appraisal which identified learning and development needs. Staff had access to range of training, including external training offered by the fostering network.

Morale in the team was high and staff felt supported by colleagues and their line manager. Staff had felt a

disconnect with senior management in the service and this has been discussed in key question 2.2. At the time of the inspection the post of team manager was vacant, which reduced management capacity and support to staff with senior managers providing cover alongside their existing workload.

A buddy system was in place for new staff joining the service with clear induction procedures. Greater clarity in policies and procedures had supported the integration of new staff and had improved consistency of practice.

How well is our care and support planned?

4 - Good

We have graded this key question as good, where there are a number of strengths which taken together outweigh areas for improvement.

Adoptive families had access to responsive post adoption support. Since the last inspection, all adoptive families had been contacted to explain their rights to post adoption support. The service also held information sessions and were running regular drop ins and social events for adoptive families. The service had developed a new template for post adoption support and adoptive families had access to a range of training opportunities post approval to support them in their parenting role. We saw evidence of improved engagement with adoptive families, one adopter told us "After we adopted our child, we felt quite isolated, this seems to have changed in recent years, and I find lots of communication coming out from the team inviting us to meet ups and training".

Staff were skilled in delivering post adoption support and we saw examples of children benefitting from creative bespoke packages of support. The service is reflecting on how Self Directed Support can be used to promote positive outcomes for adoptive families. We did receive some feedback from adopters who were not aware of post adoption support plans and the service should continue to engage with families to ensure that all adoptive families know how to access support.

Individualised safer caring plans were in place for children living with adopters who were dual approved as foster carers and these were regularly reviewed. Staff from the adoption team contributed to planning for children through participation in statutory review meetings.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 30 June 2022, the provider must ensure that clear systems are in place to monitor outcomes for children in need of permanent substitute care.

To do this the provider must as a minimum:

a) ensure robust tracking arrangements are in place for children at all stages of their care journey and that drift and delay is addressed at each stage of the process

b) ensure a robust approach is taken to family finding when children are identified as needing permanent care to ensure that their care needs can be best met.

This is to comply with Regulation 4(1)(a) of the The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011(SSI 2011/210).

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 needing permanent alternative care, I experience this without unnecessary delay' (HSCS 1.16).

This requirement was made on 18 March 2022.

Action taken on previous requirement

The service now has in place a Permanence tracker. Whilst this is at the early stages of implementation, we were of the view that this will support the tracking of children at all stages of their journey and that drift and delay will be addressed at each stage of the process. We have made a formal area for improvement asking the service to monitor and evidence improved outcomes for the next inspection.

Met - within timescales

Requirement 2

By 30 June 2022, the provider must ensure that there is a clear identification of a caregiver family's ability to meet the needs of a child before the child joins this family.

To do this the provider must as a minimum:

- a) have clear a clear referral process which outlines the needs of children needing alternative care from caregiver families
- b) identify carer strengths and vulnerabilities in relation to meeting the needs of a specific child and outlining any additional support required to ensure that children's needs are fully met
- c) ensure planning meetings take place when children join caregiver families to review children's needs
- d) ensure panel members have full information for matching panels including minutes of linking meetings.

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).

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 requirement was made on 18 March 2022.

Action taken on previous requirement

The service has made progress in relation to this requirement, however, further action is needed to ensure that positive outcomes are supported by good matching processes. This will form a formal area for improvement for the Moray Fostering Service which has been inspected alongside this service.

Met - within timescales

Requirement 3

By 30 June 2022, the provider must ensure that all dual registered foster carer/adopters are supported in line with fostering legislation and best practice.

To do this the provider must as a minimum:

- a) undertake foster care agreements in line with best practice guidance and statutory requirements
- b) ensure systems are in place for identification and panel review of dual registered prospective adopters
- c) ensure that all carers are supported through regular supervision and have access to relevant training
- d) ensure that the safety of children and young people is improved through unannounced visits
- e) Individual safer caring plans are developed and reviewed regularly in response to changing need
- f) full carers checks are monitored and kept up to date.

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).

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

'I receive high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This requirement was made on 18 March 2022.

Action taken on previous requirement

Improved procedures for supporting adoptive families dual approved as foster carers in place.

Met - within timescales

Requirement 4

By 30 June 2022, the provider must ensure that all children and young people are cared for in safe and well-matched adoptive families. To do this, the provider must as a minimum:

- a) ensure that Panel members are all provided with relevant documentation to inform the matching of young people with their adoptive families.

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).

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 requirement was made on 18 March 2022.

Action taken on previous requirement

Change in business process, panel members now in receipt of full paperwork for panels.

Met - within timescales

Requirement 5

By 30 June 2022, the provider must ensure that all staff are fully trained and supported effectively to provide consistent support to caregiver families.

To do this the provider must as a minimum ensure:

- a) there is a clear induction process for new staff joining the service
- b) there is a clear training plan for all staff
- c) all staff have regular access to annual appraisal
- d) there is continuity of supervisory relationships for all staff
- e) exit interviews are undertaken and information analysed to understand reasons for staff turnover so that this can be addressed.

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).

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 requirement was made on 18 March 2022.

Action taken on previous requirement

We saw that the service now had in place a range of training opportunities for staff. These evidenced a high level of training completed and available for the staff team. New staff had received a full induction and they reported feeling supported when joining the service. Regular supervision was in place with annual appraisal. This was ensuring consistent support to fostering families.

Met - within timescales

Requirement 6

By 30 June 2022, the provider must adopt a strategic approach to providing post adoption support services.

To do this, the provider must as a minimum ensure:

- a) all adoptive families have an adoption support plan in place and that this is reviewed in line with legislation and good practice guidance
- b) ensure that staff are fully aware of their roles and adopters are aware of their rights in relation to the development of adoption support plans.

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).

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

'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty' (HSCS 3.18).

This requirement was made on 18 March 2022.

Action taken on previous requirement

Improved approve to post adoption support evidenced during inspection.

Met - within timescales

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 promote long term positive relationships between brothers and sisters, the provider should have a plan to facilitate family time between sibling groups who live in different fostering families. This should include but not be limited to a review of the needs for family time for sibling groups in different fostering families, with a plan to facilitate appropriate ongoing relationships between brothers and sisters.

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

'I am supported to manage my relationships with my family, friends or partner in a way that suits my wellbeing' (HSCS 2.18).

This area for improvement was made on 18 March 2022.

Action taken since then

We saw limited evidence of improvements in relation to this area for improvement. This area for improvement will be repeated for the fostering service that was inspected alongside the adoption service.

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?	4 - Good
1.1 Children, young people, adults and their caregiver families experience compassion, dignity and respect	5 - Very Good
1.2 Children, young people and adults get the most out of life	5 - Very Good
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?	4 - Good
2.2 Quality assurance and improvement are led well	4 - Good
How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to support children, young people, adults and their caregiver families	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and care planning reflects the outcomes and wishes of children, young people and adults	4 - Good

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