



Meeting of East Renfrewshire Health and Social Care Partnership	Performance and Audit Committee
Held on	26 March 2025
Agenda Item	11
Title	Adoption Service Inspection Report
<p>Summary</p> <p>This paper provides an overview of the report from our recent inspection of our Adoption Service, published by the Care Inspectorate in March 2025.</p>	
Presented by	Raymond Prior, Head of Children Services and Justice, Chief Social Work Officer
<p>Action Required</p> <p>Performance and Audit Committee members are asked to note and comment on the report.</p>	

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6. In preparation for the inspection, the Care Inspectorate reviewed previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.
7. The inspection of the fostering and adult placement / continuing care services took place at the same time and the findings of these inspections are provided in separate papers.

REPORT

8. East Renfrewshire Council's Adoption Service provides a service for children and young people, aged from birth to 18 years, and their families. The service recruits and supports adoptive parents to provide families for children, who have been assessed as unable to live with their birth parents or extended family members.
9. There had been no East Renfrewshire children placed with East Renfrewshire adopters during the timeframe of this inspection. East Renfrewshire adopters have been matched with children from out with the local authority. In these circumstances, post-adoption support is the responsibility of the child's placing local authority. Care inspectorate were impressed with the proactive and committed approach from the service when working with other placing local authorities.
10. The Inspection noted that:
 - Children living within adoptive families experienced a high standard of care. They benefitted from loving, trusting and secure relationships and stable home environments.
 - Adoptive families valued enduring and supportive relationships with their supervising social workers.
 - Adoptive families benefitted from an experienced and skilled staff team.
 - Adoptive parents received valuable support from the service to enable them to support children with indirect birth family contact and lifelong links.
 - The service worked collaboratively and proactively with children's social workers to ensure the timely progress of planning for children who required permanent care.
 - Good quality adoption support planning supported timely and appropriate interventions for adoptive families.

11. Whilst the inspection made no requirements, they noted one area for improvement:

Inspection Area	Area for Improvement	Health and Social Care Standard	Action
How well do we support people's wellbeing	<p>The service 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:</p> <p>a) ensure systems are in place for identification and panel review of dual registered prospective adopters</p> <p>b) ensure that all carers are supported through regular supervision and have access to relevant training</p> <p>c) ensure that the safety of children and young people is improved through unannounced visits</p> <p>d) individual safer caring plans are developed and reviewed regularly in response to changing need</p> <p>e) full carers' checks are monitored and kept up to date, including health and safety checks.</p>	I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11)	Prospective adopters who are seeking dual approval will be informed of duties that will require to be undertaken in line with fostering legislation. Staff team will undertake their role for dual approved adopters in the same manner they currently do for foster carers. (Commence 1 st Apr 25)

12. There were no complaints to this service since the last inspection.

CONCLUSIONS

13. East Renfrewshire Adoption service have maintained a standard that promotes stability and achieves a positive impact on children's outcomes.
14. The matching of children with prospective adopters is strong; this was informed by staff within the service's knowledge of the strengths and vulnerabilities of adoptive parents. This has ensured that the needs of the child remains at the centre.

15. The only area of improvement can be embedded immediately as it was noted by care inspectorate that in practice prospective adopters are receiving a high level of support and provision and therefore only require to formalise and record the targeted work under the same legislative framework as fostering service.

RECOMMENDATIONS

16. Members of the Performance and Audit Committee are asked to note the report.

REPORT AUTHOR AND PERSON TO CONTACT

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13 March 2025

East Renfrewshire Council Adoption Service Adoption Service

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Telephone: 0141 451 0725

Type of inspection:
Announced (short notice)

Completed on:
6 February 2025

Service provided by:
East Renfrewshire Council

Service provider number:
SP2003003372

Service no:
CS2004082369

About the service

East Renfrewshire Council's Adoption Service provides a service for children and young people, aged from birth to 18 years, and their families. The service recruits and supports adoptive parents to provide families for children, who have been assessed as unable to live with their birth parents or extended family members.

The service is delivered by a dedicated team of supervising social workers and management who work across both the fostering and adoption services. The team has a range of responsibilities including fostering and continuing care.

The inspection of the fostering and adult placement continuing care service took place at the same time as this inspection and the findings of these inspections are provided in separate reports.

About the inspection

This was a short notice inspection which took place between 13 January 2025 and 6 February 2025. 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 two adoptive parents
- spoke with five staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

We also reviewed MS survey responses from one adoptive family, five staff members and 12 external professionals.

The provider of this service is a corporate parent, with statutory responsibilities to look after and accommodate children. This may mean that the duty to care for children and young people on an emergency basis, or with highly complex needs, is their highest safeguarding priority.

In these circumstances our expectations, focus on outcomes and evaluations remain identical to those of all other providers. We may, however, provide some additional narrative in the body of the report to reflect the impact of these duties, should it be relevant to this particular service.

Key messages

Children living within adoptive families experienced a high standard of care. They benefitted from loving, trusting and secure relationships and stable home environments.

Adoptive families valued enduring and supportive relationships with their supervising social workers.

Adoptive families benefitted from an experienced and skilled staff team.

Adoptive parents received valuable support from the service to enable them to support children with indirect birth family contact and lifelong links.

Prospective adoptive parents who were initially assessed and approved as 'dual' caregivers (for caregivers who foster a child with the plan to adopt) were not reviewed and supported in line with fostering legislation and guidance.

The service worked collaboratively and proactively with children's social workers to ensure the timely progress of planning for children who required permanent care.

Good quality adoption support planning supported timely and appropriate interventions for adoptive families.

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
How well is our care and support planned?	5 - Very Good

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, therefore we evaluated this key question as very good.

Children had loving and secure relationships with their adoptive parents and this instilled a sense of belonging, trust and security. We saw children thriving as a result of nurturing and enabling care that was attuned to their needs. Children were fully accepted and embraced by their adoptive families.

Adoptive parents were knowledgeable, child-centred and therapeutic in their parenting approaches. Children benefited from adoptive parents who were able to strongly advocate for their needs and work in partnership with others to ensure that these needs were understood and met.

Children were involved in their care and their rights were prioritised and promoted. We saw a strong ethos and commitment towards children's rights across the local authority.

Adoptive families valued enduring and supportive relationships with staff within the service. These relationships supported adoptive parents to continue to grow and thrive, even when experiencing difficulties. This resulted in children experiencing care that was responsive and attuned to their early life experiences and attachments.

The service understood the importance of preserving links between children and their birth families and where possible, keeping children together with their brothers and sisters. Tailored and individualised support was provided to adoptive parents by the service in relation to maintaining indirect 'letterbox' contact with birth parents. This helps to ensure that children have an understanding of these relationships and a stronger sense of self.

We were particularly impressed by the practice of social workers across the authority to involve, support and sustain meaningful links with birth parents, at every stage of the child's journey to adoption and beyond. One external professional commented, "It is beautiful how they keep birth parents with them."

Children benefitted from a holistic approach to education and educational supports were shaped by individual need and experiences. Children were supported to overcome barriers and achieve their potential. We saw positive working relationships with education services and the service was an important contributor to transition planning and educational reviews. This enabled educational staff to better understand and respond to the needs of adopted children.

A wide range of good quality learning opportunities were available for all caregivers and staff across the service. The service commission specific specialist training from Barnardos for adopters when there is an identified need. We highlighted to the service the need to ensure adequate service overview of adopter and staff training as it is unclear what the overall uptake of this has been and how this is reviewed.

The service initially approve adopters as 'dual' caregivers until a child's adoption has been legally finalised, this means that prospective adopters are initially supported as fostering caregivers until this point. We considered the need and statutory duty of the service to formally support these caregivers as fostering caregivers until an adoption order is granted. We were aware that these types of caregivers have not been reviewed or supported in line with fostering regulations. While we did not see any negative outcomes, we have asked the service to ensure that all dual approved caregivers are reviewed and that all relevant safer caring plans and checks are considered (see area for improvement 1). This is to ensure that 'pre-adoptive' caregivers have a clear understanding from the outset about the care needs of children and are supported to ensure safety and the best possible outcomes for children.

Children's health and wellbeing was actively supported and prioritised. This included appropriate access to community health services or specialist resources when required. Adoptive parents worked very effectively with other professionals to ensure that the, sometimes complex, needs of children were met.

Adoptive parents had access to good quality support and learning in preserving their part in their child's life story and in sharing this information sensitively and creatively with their child, at different stages of their life. This supports children to have better lifelong understanding of their history and, in turn, a positive sense of identity.

The service's assessments of adopters were of a consistently high standard. These were comprehensive, evidence based and contained an appropriate balance of strengths, vulnerabilities and analysis.

The assessment process was collaborative and transparent and based on positive working relationships between prospective adopters and their supervising social workers.

We saw that the views of children and their adoptive parents were central to reviews and planning. The needs and views of children were well represented in decision-making forums and we saw the role of relationship-based practice in helping to overcome any barriers. Processes were underpinned by the principles of partnership working and there was strong evidence of close collaborative multi-agency working within the 'team around the child'. We were impressed by the strength of collaborative working relationships and networks within East Renfrewshire and also with other local authorities who have placed children with East Renfrewshire adopters. One external professional commented, "the processes were always efficient...they are really invested and proactive."

Children who were in need of permanent alternative care, including adoption, had their assessments and plans completed without delay. This promoted stability and had a positive impact on children's outcomes. This was greatly aided by the strength of relationships and practice between the service and the children's social work practice team.

The matching of children with prospective adopters was strong and this was informed by staff within the service's knowledge of the strengths and vulnerabilities of adoptive parents. This ensured that the needs of the child always remained at the centre.

Areas for improvement

1. The service 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) ensure systems are in place for identification and panel review of dual registered prospective adopters
- b) ensure that all carers are supported through regular supervision and have access to relevant training
- c) ensure that the safety of children and young people is improved through unannounced visits
- d) individual safer caring plans are developed and reviewed regularly in response to changing need
- e) full carers checks are monitored and kept up to date, including health and safety checks.

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).

How well is our care and support planned?

5- Very Good

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

Children were leading positive, healthy and enjoyable lives through the implementation of high-quality planning. Care and support are enhanced by the involvement of adoptive parents and the wider service.

The service had a key role in contributing to multi-agency planning for children. Children's views were consistently sought and represented in decision-making forums. Supervising social workers and adoptive parents were effective partners in review processes and helped to ensure that children's voices were central to these plans. The service worked effectively with external local authorities on occasions when a child from another authority was placed with East Renfrewshire adoptive parents. Children and their families benefited from the involvement of a wider range of professionals and specialist support when this was required.

There had been no East Renfrewshire children placed with East Renfrewshire adopters during the timeframe of this inspection. East Renfrewshire adopters have been matched with children from outwith the local authority. In these circumstances, post-adoption support is the responsibility of the child's placing local authority. We were impressed with the proactive and committed approach from the service when working with other placing local authorities. We saw a high level of collaborative and creative work that ensured coordination of supports. Professional confidence, knowledge and networking was evident and utilised to good effect. We have confidence, based on existing practice, that post adoption support planning would be robust for those adopters that the service has responsibility over and that the support would be provided on a needs-led basis.

The service had a protocol in place with the social work practice team that provides early assessment and support for children, young people and their adoptive families, who approach the service for post-adoption support. We saw flexible, creative and individualised support provided to families under these circumstances and who were new to the service. This recognises and responds to the need to support families to nurture children throughout their lives and overcome difficulties that may emerge at different life stages.

Children within pre-adoptive (dual approved) households did not have safer caring plans or appropriate risk assessments when this was needed. We did see good practice and positive outcomes however these were not supported by individualised safer caring approaches. The safety and well-being of children could be enhanced by high quality and individualised safer caring plans that reflect the specific needs of children within pre-adoptive families. These would support early identification of concerns and strategies to manage these (safer caring is considered under area of improvement 1 in Key Question 1).

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
1.1 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	5 - Very Good
1.4 Children, young people, adults and their caregiver families get the service that is right for them	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and care planning reflects the outcomes and wishes of children, young people and adults	5 - Very Good

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