

# Family Connections Team (Adoption Service) Adoption Service

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**Type of inspection:**  
Announced (short notice)

**Completed on:**  
11 October 2024

**Service provided by:**  
Clackmannanshire Council

**Service provider number:**  
SP2003002713

**Service no:**  
CS2004083967

## About the service

The Family Connections Team (Adoption Service) recruits and supports carers in the Clackmannanshire local authority area. The recruitment, assessment, development and support of adoptive families is undertaken by the same group of staff working with foster carers. This team is known as the Family Connections Team (Fostering) and they are also responsible for the assessment of Adult Placement carers for the purpose of Continuing Care. Inspections of these services took place at the same time and separate reports have been completed.

## About the inspection

This was a short notice inspection which took place between 23 September 2024 and 11 October 2024. 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 six people using the service
- spoke with six staff and management
- observed practice and daily life
- reviewed documents, observed panel and spoke with two external professionals.

We also received information as part of pre-inspection surveys completed by carers, staff and 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 experienced warm, affectionate and enduring relationships with caregiver families and extended family members that provided them with a sense of belonging and security.
- Relationships with adoptive families had improved with increased levels of contact and support groups now in place.
- Significant improvements had been made within the service. Many of these need time to embed.
- A range of guidance and procedural documentation had been developed since the last inspection, and these have the potential to improve consistency of practice.
- Service consultation with Adoption UK and co-production with adoptive families will inform future service developments.
- The service should continue to evaluate outcomes for children and young people in need of permanent alternative care.
- 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?	5 - Very 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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children and young people's experiences.

Children experienced warm, affectionate and enduring relationships with caregiver families and extended family members that provided them with a sense of belonging and security.

Care was seen to be individualised, and we saw positive examples of children and young people succeeding in education and leading fulfilling healthy lives.

Adoptive families reported improved relationships with staff which helped to support positive outcomes. A strengthened emphasis on engagement and consultation helped caregivers to feel valued and to know and fully exercise their rights. One adopter told us "the support I am getting is like night and day from this time last year".

Adoptive families had access to recently implemented support groups and family events were arranged to promote engagement with the service and build relationships. Work is being undertaken in conjunction with Adoption UK with an emphasis on consultation and co-production with adoptive families to inform future service developments. This helps build a sense of community and build relationships between caregivers.

Children and young people had access to external advocacy to ensure their views were heard. The service also had a clear participation strategy for care experienced young people and had undertaken work to reframe the language of care in line with The Promise.

Caregivers were aware of the impact of trauma on children's development and cared for them in a way that was sensitive to their needs. Children and young people living in adoptive families experienced individualised care, were achieving in education and had opportunities to lead fulfilling lives through engaging in community activities and enjoying holidays.

Children and young people living in adoptive families were supported to maintain important relationships including with birth families, siblings and previous carers. We saw positive examples of brothers and sisters living with each other in adoptive families. This meant that children maintained connections with people who were important to them.

The service had a robust approach to safeguarding.

Adoptive families had improved access to training, however, in order to support positive outcomes and experiences for children and young people, caregiver families would benefit from being provided with a dedicated suite of post-approval, pre-placement and post adoption training, which should include child protection and safer caring training. We will repeat the area for improvement made at the last inspection.

Children and young people's needs in relation to life story was well promoted by the service. A worker trained in therapeutic life story work was available to undertake specific pieces of individual work with children and young people. A worker in the team had also been trained in therapeutic interventions which enhanced the support available to caregiver families.

Children and young people experienced positive health outcomes as a result of the care they received. Children and young people's health needs were comprehensively assessed as part of permanence planning processes which informed the matching and linking of young people with prospective caregivers.

Caregiver assessments were comprehensive. Caregivers told us they felt comfortable during the assessment process and were enabled to be reflective and honest. The views of children and young people were considered as part of assessments relating to permanence planning.

At the last inspection, progress had been made in relation to permanence planning through a Resource Allocation group and tracking systems to review the progress of assessments for children living with caregiver families. These tracking systems were under review at the time of inspection, and we were not able to evidence progress in relation to improved permanence outcomes for children and young people. The area for improvement at the last inspection in relation to permanence planning will be repeated.

## How good is our leadership?

## 5 - Very Good

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

Significant improvements had been made since the last inspection and the service had evidenced a capacity to improve. A structured approach to service development through SMART (specific, measurable, achievable, relevant, and time-bound) action plans meant substantial progress had been made in relation to the previous action plan led by senior management. The plans provided evidence of progress and the vision for the services. Carers and staff were positive about the vision and commitment of management in improving outcomes.

Over the last year, the adoption service had been afforded significant attention leading to an overall improvement. An initial scoping exercise means that the service had an improved understanding of who their adoptive families are. An Interim Adoption Strategy had been agreed and a range of policy and guidance documents had been developed. In addition, there are now two staff members dedicated to the adoption team. Whilst many of these developments are very recent, we have confidence that the leadership team have the passion and skills to embed practice and develop further.

Children's outcomes were being improved through the implementation of a new policy regarding unplanned endings, which evidenced the overview of unplanned endings which highlights learning and actions to be taken forward. We were encouraged to hear that the service sought support from an independent professional to inform learning and development for one specific situation.

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

Quality assurance systems had improved since the last inspection, ensuring key elements of practice to safeguard welfare were undertaken. The manager had developed a range of guidance and procedural documentation. This had created a foundation for continuous improvement and now needs time to embed.

The service development plan outlined plans to work with Adoption UK to further scope service requirements and there is a clear commitment to consultation and co-production with adoptive families being used to ensure future service development to meet the needs of children and their families.

We received positive feedback in relation to the leaders. Over the last year, there has been a clear focus on improvement and developing the vision for service and staff had been involved in shaping and driving some of this change. We are confident that leaders will now progress to consultation and co-production with caregiver families to inform future service improvements.

The inclusive and enabling leadership of the service allows caregiver families and staff to nurture relationships with the people they care for.

## How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children and young people's experiences.

Staff had begun to form trusting relationships with caregiver families. Staffing had been strengthened with an addition of two new staff to focus mainly on the adoption service. This increased capacity meant the service was able to provide consistent support to caregiver families.

Staff were well-supported by management who were available for informal supervision. Formal supervision did not always occur within timescales but was seen as useful and supportive by the staff team. A new model of group supervision was also in place with one session having taken place with the aim of improving consistency of practice in the team.

Staff had personal development plans in place to support ongoing learning and constructive conversations reviewed progress on these goals. Staff had also attended development sessions to review the work of the team, and they were positive about the overall vision for the service.

The role of the team in relation to permanence planning and family finding had been more clearly defined.

Staff had access to a range of training and learning opportunities including external training. The service plans to implement a Readiness for Practice programme which will further enhance training and learning opportunities for staff. The requirement made at the last inspection has been met, however, we will be making an area for improvement about the need for Readiness to Practice being linked to adoption specific skills and knowledge (see area for improvement 1).

## Areas for improvement

1. To fully support children, young people and their caregivers, the service should ensure that all relevant staff have access to and complete training specific to the needs of those in their care. Readiness for Practice training linked to adoption specific skills and knowledge would be supportive of staff development in promoting improved outcomes for young people.

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) and "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?****4 - Good**

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on children and young people's experiences.

Child and caregiver assessments were completed timeously and were of a very good standard. They included both narrative accounts and an evaluation of strengths and vulnerabilities. This sound knowledge of caregivers' skills and capacity helped ensure successful matching between caregivers and children.

Children and young people were supported to express their views in relation to care planning. Meetings were conducted in a child-friendly manner and children and young people had the opportunity to express their views using digital technology. Access to independent advocacy further supported the ability of children and young people to participate in care planning.

We were confident that children and young people experienced an individualised approach to safer caring which ensured their needs were met in caregiver families. The positive developments seen in relation to safer caring in the fostering service provided assurances that such issues would be prioritised within the adoption service with children experiencing an individualised approach to safer caring to ensure their needs were met in caregiver families.

Staff within the service engaged well with children in caregiving households and had developed relationships with both children and their caregivers. Information was shared appropriately with children and caregivers were offered support to fulfil this responsibility, when required.

Children and young people were supported through the development of, and implementation of, good quality care plans and robust assessments which were subject to regular multi-agency review. This supported a responsive, holistic and flexible approach as children and young people's circumstances and needs change. Staff from the adoption team contributed to planning for children through participation in statutory review meetings.

The addition of a social worker within the team, with a designated role for post adoption support, had strengthened the service and allows the adoption support guidance and procedures to be embedded into practice.

Following a scoping exercise, the service had a clearer picture of adoptive families requiring post adoption support, letterbox support and those who receive post adoption allowances.

The service had developed adoption support guidance and procedures which adhered to adoption legislation and best practice guidance, and which provided clarity around timescales for post adoption reviews. The service also had a financial framework they will use to assess and review post adoption allowances. We heard that these reviews would take place soon.

Post adoption support plans were in place at the time of matching and reviewed when adoption orders were granted. The service was at the early stages of implementing a range of post adoption support options and makes efforts to keep families engaged through the provision of social media campaigns, email contact with families and invitations to training, support groups and events such as the Halloween party.

Adoptive families had improved access to responsive post adoption support. Since the last inspection, efforts had been made to establish knowledge of all adoptive families in the local authority with a view to reaching out to them to explain their rights to post adoption support.

We saw evidence of improved engagement with adoptive families.

We were provided with evidence of a small number of post adoption support plans and reviews which led us to conclude that children and their families were now receiving much more responsive, tailored and timely interventions.

Management overview relating to areas such as the management of birth family time, letterbox contact and provision of later life letters had significantly improved meaning that children and young people's life experiences can be improved through the recording and sharing of important information.

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

### Requirements

#### Requirement 1

By 16 February 2024, the provider must improve the quality of support offered to caregiver families in the service. To do this the provider must as a minimum:

- a) Undertake work to repair working relationships and restore the confidence of caregiver families in the service.
- b) Ensure that caregiver families receive a responsive service that includes regular home visits to support them in their caring role.

This is to comply with Regulation 4(1)(a) and (d) (Welfare of users) 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 13 October 2023.**

#### Action taken on previous requirement

We have seen evidence of work being undertaken to improve and strengthen working relationships with families. From the sample of families we reviewed and spoke to we were assured that the service is now at the early stages of providing a more consistent support service to families.

**Met - outwith timescales**



## Requirement 2

By 16 February 2024, the provider must ensure the early identification of vulnerabilities within caring households and timeous implementation of supports in order to mitigate risks which contribute to poor outcomes. To do this the provider must as a minimum:

- a) Review the support needs of adoptive families.
- b) Establish regular supervision of dual approved adopters.
- c) Establish regular adopter support provision.

This is to comply with Regulation 24(6)(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 which state that: "I am confident that people respond promptly, including when I ask for help" (HSCS 3.17) and "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 13 October 2023.**

### Action taken on previous requirement

The service provided evidence of improved identification of the families who may require support within the authority. They have considered and begun a process of providing regular support provision to families. Staffing has been increased to ensure capacity to provide regular supervision and support. This is at the early stages and we will review the consolidation of this at the next inspection.

### Met - outwith timescales

## Requirement 3

By 16 February 2024, the provider must develop a clear strategic vision for the adoption service that adheres to guidance and legislation. To do this the provider must as a minimum:

- a) Review the needs and capacity of the adoption service.
- b) Implement a clear strategic vision for the service based on the outcome of the review.
- c) Ensure that the service has robust policies and procedures in place to ensure the delivery of this strategic vision.

This is to comply with Regulation 24(6)(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 which state that: "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

**This requirement was made on 13 October 2023.**

## Action taken on previous requirement

The service now has in place an Interim Adoption Strategy position which adheres to guidance and legislation. The service has in place guidance and procedures which reflect the core tasks of the service during this interim period. We are confident that continued consultation and analysis work with Adoption UK will ensure that a longer term strategic vision will be developed.

## Met - outwith timescales

### Requirement 4

By 16 February 2024, the provider must promote positive outcomes for children by ensuring that staff have the skills and knowledge required to practice effectively in the adoption service. To do this the provider must as a minimum:

- a) Devising a training strategy for staff, including individualised training plans which ensure that staff have access to training in adoption specific skills and knowledge.
- b) Clarifying the role of the family placement team in promoting positive outcomes for children in need of permanent substitute care.

This is to ensure that practice is consistent with the Health and Social Care Standards which state: "I experience high quality care and support based on relevant evidence, guidance and good practice" (HSCS 4.11).

**This requirement was made on 13 October 2023.**

## Action taken on previous requirement

The service has a range of training available to staff. Informal and formal supervision and annual appraisal are used to inform individual training needs. Roles within the family placement team have been clarified and strengthened in relation to family finding for children in need of permanent substitute care. This requirement has been met, however, we will be making an area for improvement about the need to further enhance the training pathway available to staff linked to adoption specific skills and knowledge.

## Met - outwith timescales

### Requirement 5

By 16 February 2024, 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 13 October 2023.**

#### Action taken on previous requirement

The service now has in place an Interim Adoption Strategy outlining the approach to providing post adoption support services. New dedicated staff working in the adoption service are aware of their roles and are supporting families to understand their rights. The service has in place policies and procedures which reflect the support services available during this interim period. We are confident that continued work with Adoption UK will ensure that a longer term strategic vision will be developed.

**Met - outwith timescales**

### Requirement 6

By 16 February 2024, the provider must adopt a strategic approach to ensuring families are supported. To do this, the provider must as a minimum ensure:

- a) Families are supported with birth family time.
- b) Letterbox contact is robustly co-ordinated and monitored.
- c) The provision of later life letters is prioritised.

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 13 October 2023.**

#### Action taken on previous requirement

The service now has clear guidance and procedures in place to support families with birth family time and letterbox contact. This is a newly established procedure and will be reviewed at the next inspection. We saw evidence of the service raising awareness of and securing later life letters for young people.

**Met - outwith 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 ensure adopters have up-to-date knowledge to support them in their caring role, the service should clarify and improve the range of learning opportunities. This should include but is not limited to:

- a) Provide caregiver families with a dedicated suite of post-approval, pre-placement and post adoption training.
- b) Ensure management oversight of access to core training.
- c) Developing a consistent model of practice to inform caregiver training needs.

This is to ensure that practice is consistent with the Health and Social Care Standards which state that: "My care and support meets my needs and is right for me" (HSCS 1.19).

**This area for improvement was made on 13 October 2023.**

#### Action taken since then

The service has improved their training offered to adoptive families, however, there is not yet a dedicated suite of post-approval, pre-placement and post adoption training. The service development plan indicates that this will be fully considered as part of the work being undertaken in collaboration with Adoption UK.

This area for improvement has not been met.

#### Previous area for improvement 2

To improve the quality of life story work for children and young people, the service should develop a clear implementation plan to improve practice. This should include but is not limited to:

- a) Planning how therapeutic life story work will be utilised within the service.
- b) A clear plan for implementing use of technological solutions for storage of photos/videos of children and young people which helps to form their life story.

This is to ensure that practice is consistent with the Health and Social Care Standards which state that: "I am supported to be emotionally resilient, have a strong sense of my own identity and wellbeing and address any experiences of trauma and neglect" (HSCS 1.29).

**This area for improvement was made on 13 October 2023.**

#### Action taken since then

The service has taken steps to ensure that the staff member trained in life story has a caseload which ensures that this is a key focus of their work and the support available to children and young people. The service has progressed the implementation of the use of a technological solution for the storage of photos/

videos and we are confident that whilst this is at the early stage there is a commitment to embed this in to the day-to-day care of children and young people.

This area for improvement has been met.

### Previous area for improvement 3

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

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

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

**This area for improvement was made on 13 October 2023.**

#### Action taken since then

During this inspection we have not been provided with any evidence which has allowed us to evaluate any progress made in relation to permanence practice. Trackers are still in development and therefore we have concluded that the identification of patterns and trends and future learning has not yet been undertaken.

This area for improvement has not been met.

### Previous area for improvement 4

To ensure transitions for children are well-managed, the service should review its practice. This should include but is not limited to:

- a) Reviewing how transitions are planned and managed.
- b) Ensuring that transitions follow best practice principles.

This is to ensure that practice is consistent with the Health and Social Care Standards which state: "I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11).

**This area for improvement was made on 13 October 2023.**

#### Action taken since then

The service have developed transitions guidance for children and young people moving to permanent destinations. This follows best practice principles and we are confident that it clarifies the roles and responsibilities for staff involved in transitions.

This area for improvement has been met.

## Previous area for improvement 5

To ensure that children and their caregivers receive appropriate support, the service should progress the review of all adoption allowances as a matter of priority and ensure there is a system of regular review implemented.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "My care and support meets my needs and is right for me" (HSCS 1.19).

**This area for improvement was made on 13 October 2023.**

### Action taken since then

The service has developed guidance on the assessment and payment of adoption allowances and plans to start reviews of all payments imminently. We are confident that this will be progressed.

This area for improvement has been met.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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	4 - Good
1.2 Children, young people and adults get the most out of life	4 - 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?	5 - Very Good
2.2 Quality assurance and improvement are led well	5 - Very 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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