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Dear Keith

SUNDERLAND CITY COUNCIL ADOPTION DIAGNOSTIC ASSESSMENT

Firstly, we thank you and your team for inviting Core Assets Consultancy and Resourcing and the British Agencies for Adoption and Fostering (BAAF) to undertake an adoption diagnostic assessment in Sunderland and for making us feel so welcome.

Management Summary

Sunderland City Council is an authority that has much to be proud of in its adoption practice, especially its commitment to finding families for those children in its care that many local authorities might not consider ‘adoptable’. It is rightly concerned about the timeliness of adoption overall, but particularly whether permanence is considered at an early enough stage. Given that timescales in this year have not seen significant improvement, the Council is seeking a new perspective on what might be the causes of delay and what service improvements might be effective in ‘turning the curve’.

It does seem to be the case that bringing forward questions about how a child’s long term future might be secured into the very early stages of engagement with a family (even in the first 24 hours was suggested at the workshop) could help to embed permanence into the culture of your planning for children. One particular area to develop near to the front end of the process would be Family Meetings (not necessarily a full-blown Family Group Conference model) so that the resources and potential of the child’s birth family are understood, non-viable options are ruled out and possible carers fully assessed at an early stage.

There are other stages at which delay could be addressed, especially by using a wider range of family finding techniques to improve the chances of harder to place children (those who are older, are to be placed with siblings or have a disability) being matched and placed with adopters more quickly.

After falling below the thresholds in the 2012 Adoption Scorecard, Sunderland started its own analysis, has had confirmation of much good practice from the Ofsted inspection of adoption and is now keen





to use the adoption diagnostic assessment to further pick up the pace in securing permanent futures for children.

Introduction and Purpose of the Diagnostic Assessment

In 2012 the Children's Improvement Board (CIB) commissioned Outcomes UK (now Core Assets) and BAAF to develop and deliver a diagnostic assessment of local authority adoption services. Originally the focus was local authorities whose 2012 Adoption Scorecard results gave rise to concern regarding timescales for placing children for adoption.

Although Sunderland, on the basis of the statistical data in the Scorecard, could have been part of this first tranche, you were able to demonstrate to the Department for Education (DfE) that the high percentage of children adopted from care, including older children, sibling groups and children with disabilities accounted for the higher than average time it takes for children to be placed in adoptive families.

The current phase of adoption diagnostic assessments is being conducted in local authorities where the Council has invited a team in to undertake a diagnostic assessment using the same methodology. The process is designed to be collaborative, to fully engage staff, to provide support and challenge, to add value to any action or improvement planning, and maximise learning.

In Sunderland there has been a sustained commitment to placing children considered 'harder to place' with adoptive families, and this is reflected in your 3 year average figure for 2009 – 2012, which shows that 22% of children leaving care were adopted, compared with the England average of 12%. This translates into 100 children provided with the security of an adoptive family within that period.

This record, combined with the very low disruption rate for adoptions, 2 in the last 4 years, and effective family finding, is impressive. Sunderland's adoption practice was confirmed as sound by Ofsted when it inspected the City Council's adoption service in February 2013. The overall effectiveness was judged to be 'good' and the quality of the service was deemed to be 'outstanding'.

However, Sunderland is still concerned about the length of time it takes between a child entering care and being placed for adoption (the 'whole journey' time), and in addition to its position against the England average, is mindful that on several adoption measures it does not perform as well as either the rest of the North East or its statistical neighbour authorities.

Furthermore, your recent data (MALAP Performance report Q4 2012/3) shows that although some measures have improved, others have declined for 2012/13 making it unlikely that targets for improved timeliness will be met for some considerable time.



The senior management team in Sunderland, having undertaken a full and accurate analysis of its performance, recognised that in order to achieve its ambition of more children being offered the security of adoption more quickly, some elements of practice would need to change, and therefore sought an adoption diagnostic assessment.

The primary focus of the diagnostic assessment was to concentrate on the start of the permanence / adoption process with a subsidiary aim of challenging the whole journey timescales in order to identify where delay arises. The Council is committed to examining its overall practice in permanence planning i.e. the range of permanent placement options, including but not limited to adoption.

Marion Davis, Core Assets Consultant, and Hedi Argent, BAAF Consultant, undertook the Adoption Diagnostic Assessment from 22 to 26 April 2013.

Methodology

- Set- up discussions held with Meg Boustead, Head of Safeguarding
- A range of reports and performance data was provided in advance, enabling the Consultants to undertake analysis and develop provisional lines of enquiry that required further testing
- Whilst they were on site, additional data was provided to the Consultants, updated by the Council and at the request of the Consultants where there were gaps
- A meeting was held with the senior management team on Day 1, enabling the Council to provide further local context about such matters as the recent re-structuring of teams and illness of significant staff members, and to share its own analysis of the issues, particularly causes of delay
- There was emphasis throughout the week on an open and transparent approach. In order to ensure there were 'no surprises', the diagnostic team held 'keeping in touch' meeting at the end of days 2, 3 and 4 so that senior managers were briefed and practicalities could be well managed. The Director of Children's Services and Head of Safeguarding were adamant that they wanted an honest assessment and told us they had asked staff to 'tell it like it is'
- The site visit encompassed a range of individual interviews with the Director of Children's Services, the Head of Safeguarding, the Independent Chair of the Sunderland Safeguarding Children Board, the Adoption Panel Chair (by phone), Senior Solicitor of the City Council, the Senior Family Court Judge, and the CAFCASS Service Manager. A number of focus groups were held comprising the Fostering Service, the Adoption Service, Referral and Assessment Team, Child Protection Managers and practitioners, and independent reviewing officers (IROs). We also had the opportunity to observe a 'Children Waiting' and a matching meeting.



- From a list provided by the Council, the diagnostic team randomly selected five case files for examination. These covered reviews and assessments, including pre-birth, of children at various stages of the adoption journey, and included siblings.
- The diagnostic team presented its key findings to senior managers and the Lead Member on the final day, and contributed to an initial action planning session which the Council will build on to inform future improvements.

Diagnostic Assessment Findings

The PowerPoint presentation delivered on 26 April 2013 followed the five report headings used below

OUTCOMES FOR CHILDREN, BIRTH PARENTS AND ADOPTERS

‘We believe that it is better to aim for adoption for as many children as possible, and accept that for a proportion of these children adoption will not be achievable, than not have the aspiration and deny the possibility of adoption for the wider cohort’ (Sunderland’s Adoption Story).

This quote captures the strength evident in Sunderland’s striving for positive outcomes for children through adoption, and in some cases other forms of permanence.

Elected members have committed additional funding for children’s services and the lead member strongly supports the approach of ‘going the extra mile’ to place those children for adoption which other agencies might not consider adoptable.

Adopters’ feedback seen by the diagnostic assessment team confirms that a welcoming and professional response is given to enquirers, and this approach persists throughout the process of application, assessment, approval, matching and after adoption support. The Adoption Panel is viewed positively by the Permanence and Adoption Teams and the Panel is mindful not to add any unnecessary delay.

There is undoubtedly a general and strong commitment to stable and secure outcomes for children in Sunderland, but the review team questioned whether a culture of early permanency planning is as embedded as it needs to be. The lack of a written policy for permanence, and outdated permanency procedures, do not give a sufficiently articulated message or guidance to staff in this area of practice.

The review team did not find any mention of permanence or adoption as the destination for a child within case record documents such as the core assessment. Early social work assessments focused on



what needed to be done to keep a child safe, but we did not see any initial analysis of the risk to a child's emotional safety if permanence was not achieved within a reasonable timeframe (for the child).

It may be that in some cases, repeated concerns or referrals to Children's Social Care are seen in isolation rather than considered cumulatively. It is our hypothesis that at the stage of early planning for children, staff may focus on their specific part of the task, and give insufficient attention to the child's **whole** journey.

VISION, STRATEGY AND LEADERSHIP

Senior managers are very much engaged in articulating the need to improve outcomes for children through permanence. There is evidence of openness to learning from others' success (e.g. dialogue with South Tyneside, a close comparator whose Scorecard shows 'whole journey' times of 147 fewer days and 184 days fewer from placement order to match. It is also the only LA in the statistical neighbours group which places a higher percentage of looked after children for adoption.) We also encountered a great readiness from staff to welcome ideas for improvement.

At a strategic level, comprehensive performance data is collated, shared with member and multi-agency forums such as the Corporate Parenting Panel and Sunderland Safeguarding Children Board (SSCB).

An overarching strategy for permanence would give strong support to the commitment outlined above, as would clear, updated procedures and a greater sense of urgency in implementing improvement plans e.g. the Adoption Inspection Action Plan.

WORKING TOGETHER

The review team witnessed supportive working between teams within the LA, e.g. the Fostering Team and Adoption Team work collaboratively when foster carers express an interest in adopting a child already placed with them, and the Permanence Team and Adoption Team are jointly focused on speeding up plans for children who wait.

The IRT is moving towards becoming a MASH (Multi-Agency Safeguarding Hub) with Health and Police and this is an opportunity to enhance multi-agency working to include engaging the whole system (i.e. not just the LA) in considering permanence for every child at an early stage in their plan.

LSCBs are another means to engage partners, and SSCB has given detailed attention to the Adoption Scorecard and its implications.



Collaborative work with Barnardo's is underway and their recent report provides useful analysis and constructive proposals for change. In particular the opportunities for concurrent planning look promising.

Joint work with Gateshead and South Tyneside has begun, and the family finding opportunities presented sub-regionally could speed up matching for some harder to place children.

There is a good working relationship between the Court, CAFCASS and the LA. The Newcastle Court has historically operated with significantly longer than average timescales, which has been a cause of delay for some children's plans. Completion of care cases has recently fallen from 54 to 46 weeks but there is still much to be done to complete within 26 weeks. Fewer 'expert' assessments are now being required, but the review team was informed of cases where expert witness availability is still delaying final court decisions. We were also told about the delay in completing and reporting health assessments, which has in some instances, had a deleterious impact on being able to finalise plans pre-proceedings. A number of staff suggested that involving the Permanence Team at an earlier stage would be conducive to avoiding delay.

MANAGING RESOURCES

There are several examples of good practice that impact positively on the use of resources.

- The restructuring has streamlined the way in which child care teams are organised resulting in fewer changes of social worker for the child and family.
- The attention given to careful matching and to support after adoption has a positive impact in minimising disruptions.
- A worker in the Adoption Team dedicated to working with birth parents ensures that all parties to adoption receive an appropriate service.
- The effectiveness and persistence of family finding means that Sunderland incurs comparatively low expenditure on external placements.

On the other hand it appears that in some instances a lack of attention to accurate and comprehensive information gathering may slow work down at the early stages (e.g. in the LA's preparation for court.) Tools such as genograms could be developed more and some files seen suggest a need for more detailed management oversight.



There is a perception that aspects of the IT system and some document formats do not actively support practice and are not likely to be user-friendly to adopted people returning later in life to access information. We understand that revision of some of these tools is underway.

In some parts of the system workloads are high and teams, such as the Adoption Team and the IROs, sometimes struggle to meet the timescales they aspire to because of limited capacity.

The lack of a Family Group Conferencing (FCG) model is a gap in service provision, which the diagnostic assessment team suggests should be addressed. Family meetings (which need not be resource intensive) have the potential to bring family members together to jointly consider family solutions including family and friends options for permanency. This can avoid the need to undertake multiple viability assessments (up to 15 or 20 were noted in case files) which can be very time consuming and can result in a complex and delayed route to recommendations to court. (The Barnardo's report also recommends action regarding FGCs.)

Sunderland has a time-limited opportunity in 2013/14 to realise the benefits from the Adoption Grant and this needs to be targeted at areas where it will have most effect, including joint investment with consortium LAs.

SERVICE DELIVERY, WORKFORCE DEVELOPMENT AND EFFECTIVE PRACTICE

The stability of social work staffing in Sunderland has improved greatly over the last 2 years and newly qualified social workers (NQSWs) have received training on permanence. It may be beneficial for training to be more widely delivered, particularly covering the early stages of engagement with families to ensure that the various options for providing security and stability through permanence are understood, and that attention remains firmly on the child's needs, timescale and outcomes for the whole of his or her life.

Sunderland may wish to use a succession planning approach to identify Adoption or Permanence 'Champions' for the Council.

Despite high workloads morale appears high and staff want to do the best they can for the children they work with. Monitoring of the quality and timeliness of casework is addressed by IROs, and the 'Children Waiting' spread sheet and meeting provide a comprehensive method of tracking children's progress from the decision that a child should be adopted to an adoption order being granted. From reading the minutes of the Permanence Monitoring Group however we are not sure that this process is as effective as it could be; too many cases are noted as 'Awaiting Update'.



On the family finding and matching front there is some excellent practice, but also room for development of additional tools and techniques. 'Opening Minds' events are an innovative way of introducing children to prospective adopters at an early stage and allowing adopters to respond to individual children. It has led to a number of matches but it could be enhanced by all children being featured in videos as well as still photography. Further contact between children who are 'stuck' in the system and potential adopters could be introduced through Activity Days and Adoption Parties (the latter is being considered) and these might be organised jointly with other adoption agencies such as those in the consortium.

More effective use of communications and marketing skills could be explored using multi-media in a creative way to feature specific groups of harder to place children in a targeted recruitment strategy. The children's profiles that the diagnostic assessment team saw sometimes contained too much jargon and could be improved by bringing out the unique characteristics of the individual child featured.

The preparing of prospective adopters for specific children rather than for categories of children can lead to the Panel approving and matching them at the same time, thus reducing delay for children.

The different aims and objectives of 'twin tracking', 'concurrent planning' and 'foster to adopt' need to be more fully understood with the latter leading to dual approval of applicants as foster carers and adopters enabling earlier placements for children.

A recurring theme in this adoption diagnostic assessment was the strong and conflicting views expressed about the purpose and suitability of Permanence Decision Reviews (PDRs) as the mechanism for confirming a decision for permanence, with a number of individuals stating these to be a significant cause of delay. The format, chairing and recording of these decisions and their link to LAC reviews needs urgent resolution.

Response by the LA to the findings of the Adoption Diagnostic Assessment

During the course of the week feedback was given to senior managers regarding our hypotheses and findings. Some themes, such as the need to consider permanence at a much earlier stage in contact and assessment, were readily agreed, but others, if not a surprise, did require further working through following the presentation.

The Power Point presentation at the end of the week gave rise to a variety of questions geared to fully understanding and learning from our analysis, and it provoked an animated and considered debate at the Action Planning workshop that followed.



The presentation included a slide that listed 9 'Ideas and Opportunities' which were:

- Family Group Conferencing – Family Meetings
- Review PDRs
- Targeted Recruitment Campaigns
- Update Procedures
- Embed Permanence in Early Assessments
- Activity Days
- Adoption Parties
- Improve Profiling of Children
- Develop 'Foster to Adopt'

The workshop was constructed by Sunderland around 3 topics - PDRs, Family Meetings and Targeted Recruitment, but with a primary focus on the need to achieve a change of 'mindset'.

What was meant by this was finding ways to ensure that the culture of the organisation not only embeds permanence in practice, but that from the outset of engagement with children and families there is a culture that focuses attention on questions such as 'Where will this child be going?' and 'What would be the best long term outcome for him or her?'

The discussion about FGCs / Family Meetings was creative, with ideas about involving the Fostering Team, recognising that workers in children's centres have expertise and that it is vital to focus on and listen to the people who matter to the child rather than adhering to the paraphernalia of more complex FGC models.

The workshop was not intended to generate a comprehensive Action Plan but to make an important start by senior managers committing to and describing a culture shift around the need of every child to have a sense of security and stability through permanency. It was agreed that this should have a higher profile right across the work of Sunderland's Children's Services.

There will be further consideration of how the Action Plan from the Ofsted Inspection and the findings of the adoption diagnostic assessment are synthesised and accelerated.

Conclusion and Recommendations

It is clear that in Sunderland there is commitment from senior management, members and from front line staff not only to secure better futures for children, but also to find ways of getting there more quickly.



Prior to the adoption diagnostic assessment, the LA had identified that there were some issues about awareness of permanence at an early stage, that the local court was not concluding cases quickly enough and that they needed to incorporate more innovative approaches into the latter stages of planning to speed up matching.

Whilst it is a convincing argument to point to the high percentage of older children, siblings and children with disabilities who are successfully adopted in Sunderland, the Adoption Scorecard data puts the local authority in a highly visible position, and because of the three year averaging, improving timeliness of adoption overall is a tough task. The authority understands the scale of the challenge and that something of a culture shift is required as well as attention to some details of practice, policy and procedure. Simply doing more of the same things or doing them faster is unlikely to yield the results you seek.

At the moment, having come through the safeguarding and adoption inspections and having the Adoption Grant to spend, there are real opportunities to be grasped. These include harnessing the creativity and willingness of staff to improve, considering how the inspection recommendations, especially about enhancing user engagement, can be dovetailed with the adoption diagnostic findings. Part of the solution will be to be more outward-facing, working with partners, neighbouring LAs and voluntary adoption agencies (VAAs), using sector-led learning and research evidence to support your improvement and maximise progress.

We are sure that Sunderland will not wish to compromise its performance on the high percentage of adoptions from care, but will embrace the challenge of achieving improved timeliness for placing children, assessing adopters and finding matches by developing innovative practice as well as preserving established high standards.

We wish you every success with that improvement journey.

Yours sincerely

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