

Statutory Guidance and Code of Practice

Adoption Services

This statutory guidance and code of practice relates to The Adoption Services (Services Providers and Responsible Individuals) and Local Authority Adoption Services (Wales) Regulations 2019

April 2019

The Adoption and Children Act 2002

The Social Services and Well-being (Wales) Act 2014

The Regulation and Inspection of Social Care (Wales) Act 2016

About this guidance and code of practice

Status

This document has been prepared for regulated adoption service providers and responsible individuals and local authorities in Wales. It applies from April 2019.

Chapters 1, 3 and 4 of this document constitute statutory guidance for **regulated adoption service providers and responsible individuals**, issued by the Welsh Ministers under section 29 of the Regulation and Inspection of Social Care (Wales) Act 2016 (the 2016 Act).

Chapters 2, 3, 5 and 6 of this document constitute a statutory code of practice for **local authorities (LAs)** on the exercise of their functions in respect of the provision of adoption services, issued by the Welsh Ministers under section 145 of the Social Services and Well-being (Wales) Act 2014 (the 2014 Act).

Regulated adoption service providers and responsible individuals

The Regulations made under the 2016 Act and this statutory guidance replace requirements previously put in place under the Care Standards Act 2000 and its associated National Minimum Standards.

This guidance sets out:

- how providers of regulated adoption services may comply with the requirements imposed by regulations made under section 27 of the 2016 Act, and
- how persons designated as a responsible individual for a regulated adoption service may comply with the requirements imposed by regulations made under section 28 of the 2016 Act.

These requirements are contained within Parts 3 and 5 to 13 of The Adoption Services (Service Providers and Responsible Individuals) and Local Authority Adoption Services (Wales) Regulations 2019 (“the Regulations”). These Regulations come into force in April 2019 and this guidance comes into effect at the same time.

Section 29(3) of the 2016 Act states that providers of regulated services and designated responsible individuals **must have regard to this guidance** in meeting requirements imposed by regulations under sections 27 and 28 of the Act.

This guidance is also relevant to those providers making an application for registration as a service provider under section 6 of the 2016 Act. Guidance about registration has been produced by the service regulator, Care Inspectorate Wales, as is available on its website.

Persons who wish to provide a regulated service must make an application for registration to Care Inspectorate Wales (‘CIW’) who carry out the Welsh Ministers’ functions as the service regulator. Prospective service providers and responsible individuals must demonstrate that they will be able to meet the requirements imposed by the 2016 Act and the Regulations and, once registered, that they will continue to meet them.

In order to grant an application to register, CIW must be satisfied that any prospective provider of regulated services can and will continue to meet the standards of service provision specified in regulations under section 27 of the 2016 Act. CIW must also be satisfied that persons designated as a responsible individual can and will continue to comply with the duties set out in regulations under section 28 of the Act.

CIW will use this guidance to inform its decisions to grant or refuse applications for registration as a service provider.

CIW will also use this guidance to inform decisions about the extent to which registered providers and responsible individuals are meeting those requirements.

Service providers are responsible for deciding how the requirements will be met, taking into account the needs of individuals using the service and the statement of purpose for the service.

Regulated service providers and designated responsible individuals must have regard to this guidance. If they do not follow this guidance, they must provide evidence that their chosen approach enables them to meet the requirements within Parts 3 and 5 to 13 of the Regulations.

Local authority adoption services

Section 9 of the Adoption and Children Act 2002 provides that the Welsh Ministers may make regulations in respect of the regulation and inspection of local authority functions relating to adoption. The requirements upon local authority adoption service providers and managers within the Regulations were made under this section. So far as practicable, the same or similar requirements have been imposed upon local authority adoption services providers as upon regulated adoption service providers in the Regulations. This is particularly true of the requirements in Parts 4 to 8 and 17 of the Regulations.

Chapters 2, 3, 5 and 6 of this document constitute a code of practice issued under section 145 of the 2014 Act. Section 145 gives the Welsh Ministers the power to issue codes on the exercise of social services functions. Local authorities, when exercising their social services functions in respect of adoption services, must act in accordance with the requirements contained in this code. Section 147 of the 2014 Act (departure from requirements in codes) does not apply to any requirements contained in this code, so this code must be followed in full.

Structure

This document is structured as follows:

- Chapter 1 - General requirements on adoption service providers – regulated adoption services
- Chapter 2 - General requirements on adoption service providers – local authority adoption services
- Chapter 3 - Requirements on adoption service providers – regulated adoption services **and** local authority adoption services

- Chapter 4 - Requirements on Responsible Individuals
- Chapter 5 - Requirements on the local authority adoption service managers
- Chapter 6 - Other requirements on the local authority adoption service providers

Each chapter in the document sets out the relevant Regulation on the left-hand side of the page, with the corresponding guidance / code of practice set out on the right-hand side.

It is important that regulated adoption service providers and responsible individuals, and local authority adoption services providers and managers, refer to the original text of each regulation as the first source of information about what the requirements are and how to meet them. This guidance and / or code of practice provides further explanation on how to meet the individual components of each regulation where further clarification and definition may be needed. Where the text of the regulation itself is self-explanatory, no further guidance is given.

The guidance / code on individual components of each regulation should not be considered exhaustive as there may be other ways that regulated adoption services providers and responsible individuals, and local authority adoption services providers and managers, can show that they meet each component of the regulation.

Enforcement – regulated adoption services providers

Parts 3 and 5 to 13 of the Regulations set out clear requirements which regulated adoption services providers and responsible individuals must adhere to. CIW, as the service regulator, can take enforcement action against any regulated service provider and responsible individual that does not adhere to these legal requirements.

Any enforcement action taken by CIW will be proportionate and will look at the impact on or risk to individuals using the regulated service.

Examples of enforcement action may include:

- imposing conditions to a service provider's registration;
- cancelling a service provider's registration;
- issuing an improvement notice;
- issuing a fixed penalty notice.

Further information on the offences which service providers and responsible individuals may commit if they do not comply with the requirements of the Act and these Regulations, and the different statutory and non-statutory enforcement actions that CIW may take in response, are set out within CIW's [Securing Improvement and Enforcement guidance](#) on their website.

List of key terms used within this guidance

Term	Meaning
The 2016 Act	The Regulation and Inspection of Social Care (Wales) Act 2016
The 2014 Act	The Social Services and Well-Being (Wales) Act 2014
The 2002 Act	The Adoption and Children Act 2002
Adoption service	A service provided in Wales by— (a) an adoption society within the meaning of the Adoption and Children Act 2002 (c.38) which is a voluntary organisation within the meaning of that Act, or (b) an adoption support agency within the meaning given by section 8 of that Act.
Area authority	The local authority in Wales ¹ or local authority in England for the area in which a child is placed, or is to be placed, where this is different from the placing authority;
Care and support	(a) the provision of support by an adoption society when making arrangements for the adoption of children ² ; or (b) the provision of adoption support services (by an adoption society or adoption support agency) which has the meaning given in section 2(6) of the 2002 Act and— a. regulation 3 of the 2019 Regulations when adoption support services are provided by a regulated adoption service; or b. regulation 3 of the Adoption Support Services (Local Authorities) (Wales) Regulations 2005 when provided by or on behalf of a local authority adoption service.
Care and support plan	A plan put in place by the local authority under section or section 83 of the 2014 Act
Child	A person who is aged under 18
Guardian	Has the meaning given to it in section 5 of the Children Act 1989
Local authority adoption service	The discharge by a local authority of the functions under the 2002 Act of making or participating in arrangements for the adoption of children or the provision of adoption support services as defined in section 2(6) of the 2002 Act
Personal outcomes	<ul style="list-style-type: none"> In relation to an adult, means the outcomes that the adult wishes to achieve;

¹ “local authority” means the council of a county or county borough in Wales as given in section 189 of the Act.

² The Adoption Agencies (Wales) Regulations 2005 (S.I. 2005/1313) requires an adoption agency to provide counselling and information for a child whom the agency is considering for adoption, the child’s parent or guardian, and the prospective adopter.

	<ul style="list-style-type: none"> • In relation to a child, means— <ul style="list-style-type: none"> (i) the outcomes that the child wishes to achieve; or (ii) the outcomes that any persons with parental responsibility wish to achieve in relation to the child
Placing authority	In relation to a child who is looked after by a local authority in Wales or local authority in England, that local authority
Representative	Any person having legal authority, or the consent of the individual to act on the individual's behalf
Responsible individual <i>(See section 21 of the 2016 Act for a full description)</i>	<p>Must be either:</p> <ul style="list-style-type: none"> • where the service provider is an individual, the service provider; • where the service provider is a partnership, one of the partners; • where the service provider is a body corporate, other than a local authority <ul style="list-style-type: none"> ○ a director or similar officer of the body; ○ in the case of a public limited company, a director or company secretary; ○ in the case of a body corporate whose affairs are managed by its members, a member of the body; • where the service provider is an unincorporated body, a member of the body; • where the service provider is a local authority, an officer of the local authority designated by the authority's director of social services; <p>and whom CIW are satisfied is a fit and proper person to be a responsible individual;</p> <p>and is designated by a service provider in respect of a place at, from or in relation to which the provider provides a regulated service;</p> <p>and is specified as such in the service provider's registration</p> <p>NB In certain circumstances (see Regulation 67, not covered in this guidance) the responsible individual may be designated by CIW (on behalf of the Welsh Ministers) and not the service provider.</p>
Service provider (or provider)	<p>Either:</p> <ul style="list-style-type: none"> • A person or organisation registered with CIW to provide a regulated adoption service (i.e. a regulated adoption service provider). • An adoption service provided by a Local Authority (i.e. a Local Authority adoption service provider) <p>OR</p> <ul style="list-style-type: none"> • Where the context indicates otherwise, BOTH a regulated adoption service provider AND Local Authority adoption service provider.

Staff	<ul style="list-style-type: none"> • Persons employed by the service provider to work at the service as an employee or worker (within the meaning of section 230 of the Employment Rights Act 1996); • Persons engaged by the service provider under a contract for services; • This does not include persons who are allowed to work as volunteers.
The individual	<p>Unless the context indicates otherwise the individual means-</p> <p>(a) where the service is provided by an adoption society—</p> <ul style="list-style-type: none"> (i) a child who may be adopted and any parent or guardian of that child; (ii) a person wishing to adopt a child; (iii) an adopted person and any parent, natural parent or former guardian of that person; or (iv) any other person who may be receiving adoption support services; (v) representatives of a person referred to in (iv); <p>(b) where the service is provided by an adoption support agency—</p> <ul style="list-style-type: none"> (i) any person receiving adoption support services; or (ii) representatives of any person receiving adoption support services. <p>(c) where the service is provided by a local authority adoption service—</p> <ul style="list-style-type: none"> (i) a child who may be adopted and any parent or guardian of that child; (ii) a person wishing to adopt a child; (iii) an adopted person and any parent, natural parent or former guardian of that person; or (iv) any other person who may be receiving adoption support services; (v) representatives of a person referred to in (iv); (vi) any person seeking an assessment of their need for the provision of adoption support services by the local authority.
The individual's needs	The person's care and support needs
The Regulations	The Adoption Services (Service Providers and Responsible Individuals) and Local Authority Adoption Services (Wales) Regulations 2019
The service regulator	Care Inspectorate Wales (CIW), acting on behalf of the Welsh Ministers in the exercise of their regulatory functions

The statement of purpose	<p>The statement of purpose for the place at, from or in relation to which the service is provided:</p> <p>(a) in the case of an adoption service provider, the document containing the information which must be provided in accordance with regulation 3(c) of and Schedule 2 to the 2017 Registration Regulations for the place from which the service is provided⁽³⁾, and</p> <p>(b) in the case of a local authority adoption service, the information which must be provided in accordance with Schedule 5 of the 2019 Regulations for the place from which the service is provided.</p>
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Useful links

The Regulation and Inspection of Social Care (Wales) Act 2016
<http://www.legislation.gov.uk/anaw/2016/2/contents/enacted>

The Social Services and Well-being (Wales) Act 2014
<http://www.legislation.gov.uk/anaw/2014/4/contents>

The Adoption and Children Act 2002
<http://www.legislation.gov.uk/ukpga/2002/38/contents>

Welsh Government: Well-being Statement for People Who Need Care and Support and Carers Who Need Support
<http://gov.wales/docs/dhss/publications/160831well-being-statementen.pdf>

Care Inspectorate Wales
<http://careinspectorate.wales/?lang=en>

Care Inspectorate Wales: Registration
<http://careinspectorate.wales/providingacareservice/?lang=en>

Social Care Wales
<https://www.socialcare.wales/>

Social Care Wales: Information and Learning Hub
<https://socialcare.wales/hub/home>

⁽³⁾ Regulation 3(c) of the Regulated Services (Registration) (Wales) Regulations 2017 (S.I. 2017/1098. (W.278)) requires a person who wants to provide an adoption service to provide a statement of purpose for each place from which the service is to be provided.

Chapter 1: General requirements on adoption service providers – regulated adoption services (Part 3 of the Regulations)

This chapter applies to regulated adoption service providers only. References in this chapter to service provider mean the ‘regulated adoption service provider’ and references to service mean the ‘adoption service’.

Parts 3 of the Regulations set out the way in which the service is provided, including:

- requirements in relation to the statement of purpose
- requirements to ensure the suitability of the service;
- arrangements for monitoring and improvement
- the making of notifications to the Welsh Ministers and other bodies
- the designation of a responsible individual
- requirements in relation to the financial sustainability of the service.
- promoting a culture of openness, honesty and candour at all levels and complying with standards of conduct and practice expected of social care workers

Regulation 5	Guidance
<p>Requirements in relation to the provision of the service</p> <p>5. The service provider must ensure that the service is provided with sufficient care, competence and skill, having regard to the statement of purpose.</p>	<ul style="list-style-type: none"> • Service providers have clear arrangements for the oversight and governance of the service in order to establish, develop and embed a culture which ensures that the best possible outcomes are achieved for individuals using the service and to meet the requirements of the Regulations. This includes but is not limited to: <ul style="list-style-type: none"> ○ policies and procedures to achieve the aims of the statement of purpose and place individuals at the centre of the service; ○ systems for assessment, monitoring and review which support evidence-based practice and support individuals to achieve their personal outcomes; ○ processes to ensure care and support is delivered consistently and reliably; ○ safe staffing arrangements, underpinned by professional development, to meet the care and support needs of individuals; ○ quality and audit systems to review progress and inform service development; ○ a proactive approach to equal opportunities and diversity; and ○ suitable and accessible premises.
Regulation 6	Guidance
<p>Requirements in relation to the statement of purpose</p> <p>6.—(1) The service provider must provide the service in accordance with the statement of purpose. (2) The service provider must—</p>	<ul style="list-style-type: none"> • The statement of purpose is fundamental to the service. It must: <ul style="list-style-type: none"> ○ accurately describe the service provided; ○ state where and how this service will be provided; and ○ state the arrangements to support the delivery of the service.

- (a) keep the statement of purpose under review; and
(b) where appropriate, revise the statement of purpose.
- (3) Unless paragraph (4) applies the service provider must notify the persons listed in paragraph (6) of any revision to be made to the statement of purpose at least 28 days before it is to take effect.
- (4) This paragraph applies in cases where it is necessary to revise the statement of purpose with immediate effect.
- (5) If paragraph (4) applies the service provider must without delay notify the persons listed in paragraph (6) of any revision made to the statement of purpose.
- (6) The persons who must be notified of any revision to the statement of purpose in accordance with paragraph (3) or (5) are—
- (a) the service regulator;
(b) individuals.
- (7) The service provider must provide the up to date statement of purpose to any person on request, unless it is not appropriate to do so or would be inconsistent with the well-being of an individual.

- It must include the information set out in The Regulated Services (Registration) (Wales) Regulations 20174.
- In preparing a statement of purpose, the provider takes account of any statement of purpose guidance on the service regulator’s website.
- A statement of purpose is provided for each place/location from which a service will be provided.
- Service providers review and update the statement of purpose at least annually or earlier if changes are being made to the service provided.
- Where there is an intention to change the service being provided, the statement of purpose is updated to reflect the change. The provider notifies those persons set out in regulation 6(6) 28 days prior to the changes being made. Examples of this include:
 - provision of additional specialist services;
 - changes to the normal staffing arrangements or levels as set out in the existing statement of purpose.
- Where there is an intention to change the service being provided with immediate effect, i.e. within the 28 days notification period (required by regulation 6(3)), for example in response to an urgent request, the provider:
 - notifies the service regulator immediately (and where practicable, prior to implementing the change); and
 - updates the statement of purpose to reflect the change without delay and provides a copy to the service regulator.

	<ul style="list-style-type: none"> • Where a change to the statement of purpose is proposed, the service provider satisfies the service regulator of their ability to deliver the proposals, for example, providing additional information or receiving a visit from the service regulator to the service (where appropriate). • Where the statement of purpose is updated a record is maintained of the version and date of amendment. • A copy of the statement of purpose is readily available to those listed in regulation 6(6).
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Regulation 7	Guidance
<p>Suitability of the service</p> <p>7.—(1) The service provider must not provide care and support for an individual unless the provider has determined that the adoption service is suitable to meet the individual’s needs for care and support and to enable the individual to achieve their personal outcomes in accordance with the statement of purpose.</p> <p>(2) The service provider must have in place a policy and procedures on commencement of the service.</p> <p>(3) The determination under paragraph (1) must take into account—</p> <ul style="list-style-type: none"> (a) any current and up-to-date plan; (b) any health or other relevant assessments; (c) the individual’s views, wishes and feelings; (d) any risks to the individual’s well-being; (e) any risks to the well-being of other individuals to whom care and support is provided; (f) the individual’s religious persuasion, racial origin, cultural and linguistic background, sexual orientation and gender identity; 	<ul style="list-style-type: none"> • Service providers have in place a policy and procedure on commencement of the service. This includes but is not limited to: <ul style="list-style-type: none"> ○ arrangements for confirming that the service can or cannot support individuals to achieve their personal outcomes; ○ who will be consulted as part of the process; ○ the information to be considered; ○ the assessment processes and who will undertake the assessment; ○ the circumstances where a service will not be provided; and ○ the arrangements for commencing the service. • A summary of the commencement procedure is included in the statement of purpose and the service provider’s written guide to the service (see regulation 24). • Before agreeing to provide a service the service provider makes an informed decision as to whether or not they can meet an individual’s care and support needs. In making this decision the

<p>(g) any reasonable adjustments which the service provider could make to enable the individual’s care and support needs to be met;</p> <p>(h) the service provider’s policy and procedures on commencement of the service.</p> <p>(4) In a case where the individual does not have a plan, the service provider must—</p> <p>(a) assess the individual’s care and support needs; and</p> <p>(b) identify their personal outcomes.</p> <p>(5) The assessment required by paragraph (4) must be carried out by a person who—</p> <p>(a) has the skills, knowledge and competence to carry out the assessment; and</p> <p>(b) has received training in the carrying out of assessments.</p> <p>(6) In making the determination in paragraph (1), the service provider must involve the individual, the placing authority (if applicable) and any representative. But the service provider is not required to involve a representative if—</p> <p>(a) the individual is an adult or a child aged 16 or over and the individual does not wish the representative to be involved, or</p> <p>(b) involving the representative would not be consistent with the individual’s well-being.</p> <p>(7) In this regulation “plan” may include—</p> <p>(a) an adoption support plan;</p> <p>(b) a care and support plan; or</p> <p>(c) an adoption placement plan⁽⁵⁾.</p>	<p>service provider:</p> <ul style="list-style-type: none"> ○ takes into account the requirements set out within regulation 7(3) or (4) as the case may be; ○ consults with the individual and the placing authority (if applicable) to determine what their views are; ○ obtains copies of and gives consideration to any existing care and support plan, adoption plan or adoption placement plan (where these exist); ○ considers any risks to the individuals or to others using the service; <ul style="list-style-type: none"> ● Service providers ensure there is relevant information and support for individuals to understand the choices available to them, in a format accessible to the individual and suitable to their age and level of understanding. ● Where the individual lacks the mental capacity to make specific decisions about their care and support and no lawful representative is appointed, their best interests should be established and acted upon in accordance with the Mental Capacity Act 2005. ● Information obtained is sufficient to enable smooth transition for the individual to receive the service. ● People making these decisions on behalf of the service provider have sufficient responsibility/standing (within the organisation) to make a decision as to whether the service can meet the individual’s needs. ● Where care and support is provided on an emergency basis, every effort should be made to secure as much information as
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⁵ An “adoption placement plan” has the meaning given in regulation 36(2) of the Adoption Agencies (wales) Regulations 2005 (S.I. 2005/1313)

	<p>possible (including relevant assessments) prior to provision to ensure that the service can meet the child’s needs.</p> <ul style="list-style-type: none"> • Where an individual does not have existing assessments and/or care and support plan, adoption support plan or adoption placement plan, an assessment must be undertaken prior to agreeing to provide a service. This assessment includes care and support needs, any specialist support required, communication, emotional, educational, social, cultural, religious and spiritual needs and should establish their personal outcomes and aspirations. • Where the service provision involves an adopted adult and their birth relatives, it is the wishes, feelings and the welfare and safety of the adopted adult which take precedence. • Individuals are made aware that they may be entitled to request an assessment of their needs for adoption support services from their local authority
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Regulation 8	Guidance
<p>Requirements in relation to monitoring and improvement</p> <p>8.—(1) The service provider must ensure that there are effective arrangements in place for monitoring, reviewing and improving the quality of care and support provided by the adoption service.</p> <p>(2) Those arrangements must include arrangements for seeking the views of—</p> <p>(a) individuals;</p> <p>(b) any representatives, unless this is not appropriate or would be inconsistent with that person’s well-being;</p> <p>(c) any local authority or local authority in England which has arranged for the provision of adoption support services by the</p>	<ul style="list-style-type: none"> • Service providers have systems and processes in place to monitor, review and improve the quality of care and support. This will include: <ul style="list-style-type: none"> ○ who is responsible for ensuring this is done; ○ how this will be done; ○ how often this takes place; and ○ arrangements for the responsible individual to report to the service provider. • The outcome of any review is analysed and reviewed by people with the appropriate knowledge, skills and competence to understand its significance and take action to secure improvement. Service providers seek professional/expert advice

adoption service;

(d) any person working for the purposes of the adoption service,
on the quality of care and support provided by the adoption service and how this can be improved.

(3) When making any decisions on plans for improvement of the quality of care and support provided by the adoption service, the service provider must—

(a) take into account the views of those persons consulted in accordance with paragraph (2); and

(b) have regard to the quality of care report prepared by the responsible individual in accordance with regulation 58 (quality of care review).

as needed and in a timely manner to help secure improvements.

- Service providers can demonstrate how they have:
 - analysed and responded to the information gathered;
 - used the information to make improvements.
- Service providers monitor progress against plans to improve the quality and safety of services, and take appropriate action immediately where progress is not achieved as expected.
- The systems and processes are continually reviewed to make sure they enable the service provider to identify where quality of services are being, or may be, compromised and to enable an appropriate timely response.
- As part of the quality review process, service providers:
 - encourage feedback;
 - regularly seek the views of individuals about the quality of care and support; and
 - are able to demonstrate they have done this and the nature of the feedback they have received.
- The methods used to engage with and gain the views of those listed in regulation 8(2) using the service are appropriate to their age, level of understanding and take into account their specific condition and/or any communication needs.
- Information collated through quality and audit systems is used to develop the quality of care review report in line with regulation 58(4).

Regulation 9	Guidance
<p>Notifications</p> <p>9.—(1) The service provider must notify the service regulator of the events specified in Part 1 of Schedule 1.</p> <p>(2) The service provider must notify the Local Health Board, or clinical commissioning group and the National Health Service Commissioning Board, of the events specified in Part 2 of Schedule 1.</p> <p>(3) In the case of an adoption service provided by an adoption society the service provider must notify—</p> <p>(a) the placing authority of the events specified in Part 3 of Schedule 1;</p> <p>(b) the area authority of the events specified in Part 4 of Schedule 1;</p> <p>(c) the Local Health Board, or clinical commissioning group and the National Health Service Commissioning Board, of the events specified in Part 4 of Schedule 1.</p> <p>(4) The notifications required by this regulation must include details of the event.</p> <p>(5) Unless otherwise stated, notifications must be made without delay and in writing.</p> <p>(6) Notifications must be made in such manner and in such form as may be required by the service regulator.</p> <p>(7) In this regulation Local Health Board, clinical commissioning group and the National Health Service Commissioning Board” means the Local Health Board, or the clinical commissioning group and the National Health Service Commissioning Board in whose area the child who has died or sustained serious injury in the course of receiving care and support was living at the time of the incident.</p>	<ul style="list-style-type: none"> • Service providers have appropriate arrangements in place for the notification of the events listed in Schedule 1 of the Regulations to be made to the relevant authority. • Notifications are made without delay, usually within 24 hours of the event occurring. • The following applies in relation to Schedule 1 (Part 1, 21). Service providers notify the relevant authorities of any incident of child sexual exploitation (CSE) or suspected child sexual exploitation. This includes but is not limited to: <ul style="list-style-type: none"> ○ where a child reports an incident that indicates they may be a victim of CSE, or ○ where there is reason to believe a child may be subject to CSE.

Regulation 10	Guidance
<p>Compliance with code of practice</p> <p>10. The service provider must adhere to the code of practice on the standards of conduct and practice expected of persons employing or seeking to employ social care workers, which is required to be published by Social Care Wales under section 112(1)(b) of the Act.</p>	<ul style="list-style-type: none"> • Service providers have a clear understanding of their role and responsibilities in relation to the Code of Practice for Employers of Social Care Staff (Social Care Wales publication).
Regulation 11	Guidance
<p>Requirements in relation to the responsible individual</p> <p>11.—(1) This regulation does not apply to a service provider who is an individual.</p> <p>(2) A service provider to whom this regulation applies must ensure that the person who is designated as the responsible individual—</p> <p>(a) is supported to carry out their duties effectively, and</p> <p>(b) undertakes appropriate training.</p> <p>(3) In the event that the service provider has reason to believe that the responsible individual has not complied with a requirement imposed by the regulations in Parts 9 to 13, the provider must—</p> <p>(a) take such action as is necessary to ensure that the requirement is complied with, and</p> <p>(b) notify the service regulator.</p> <p>(4) During any time when the responsible individual is unable to fulfil their duties, the service provider must ensure that there are arrangements in place for—</p> <p>(a) the effective management of the service,</p> <p>(b) the effective oversight of the service,</p> <p>(c) the compliance of the service with the requirements of these Regulations, and</p> <p>(d) monitoring, reviewing and improving the quality of the care and support provided by the service.</p> <p>(5) If the responsible individual is unable to fulfil their duties for a</p>	<ul style="list-style-type: none"> • Service providers have arrangements in place for regular formal discussion with, and support for, the responsible individual. • Service providers support the responsible individual to undertake training which enables them to carry out their role effectively and to meet the aims of the service as outlined in the statement of purpose and in line with practice guidance recommended by Social Care Wales. Training for responsible individuals includes that which covers: <ul style="list-style-type: none"> ○ legislative framework and requirements; ○ specific duties of a responsible individual; ○ service performance and quality management; and ○ shaping service culture, etc. • Where a responsible individual has failed to fulfil their role the service provider notifies the service regulator of any action taken and, where relevant, advises on the arrangements to designate a replacement. • If there is no responsible individual or the responsible individual is unable to fulfil their duties for any reason, for example they are absent from their role due to illness, the service provider ensures that the responsibility for oversight of the management of the service, as set out in Parts 9 to 13 of the Regulations, is

<p>period of more than 28 days, the service provider must—</p> <p>(a) notify the service regulator, and</p> <p>(b) inform the service regulator of the interim arrangements.</p>	met.
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Regulation 12	Guidance
<p>Requirements in relation to the responsible individual where the service provider is an individual</p> <p>12.—(1) This regulation applies where the service provider is an individual.</p> <p>(2) If this regulation applies, the individual must undertake appropriate training for the proper discharge of his or her duties as the responsible individual.</p> <p>(3) During any time when the individual is absent, he or she must ensure that there are arrangements in place for—</p> <p>(a) the effective management of the service,</p> <p>(b) the effective oversight of the service,</p> <p>(c) the compliance of the service with the requirements of the regulations in Parts 3 and 5 to 8, and</p> <p>(d) monitoring, reviewing and improving the quality of the care and support provided by the service.</p> <p>(4) If the individual is unable to fulfil their duties as a responsible individual for a period of more than 28 days, he or she must—</p> <p>(a) notify the service regulator, and</p> <p>(b) inform the service regulator of the interim arrangements.</p>	<ul style="list-style-type: none"> • The responsible individual undertakes training which enables them to carry out their role effectively and to meet the aims of the service as outlined in the statement of purpose and in line with practice guidance recommended by Social Care Wales. Training includes that which covers: <ul style="list-style-type: none"> ○ legislative framework and requirements; ○ specific duties of a responsible individual; ○ service performance and quality management; and ○ shaping service culture etc • If the responsible individual is unable to fulfil their duties for any reason, for example they are absent from their role due to illness, the responsible individual ensures arrangements are in place for the requirements in regulation 12(3) to be met.

Regulation 13	Guidance
<p>Requirements in relation to the financial sustainability of the service</p> <p>13.—(1) The service provider must take reasonable steps to ensure that the adoption service is financially sustainable for the purpose of achieving the aims and objectives set out in the statement of</p>	<ul style="list-style-type: none"> • Systems are in place to ensure financial planning, budget monitoring and financial control is carried out effectively. • Systems are in place to ensure financial stability and consumer protection in line with any national guidance and financial regulations.

<p>purpose.</p> <p>(2) The service provider must maintain appropriate and up to date accounts for the service.</p> <p>(3) The service provider must provide copies of the accounts to the Welsh Ministers within 28 days of being requested to do so.</p> <p>(4) The Welsh Ministers may require accounts to be certified by an accountant.</p>	<ul style="list-style-type: none"> • Service providers have the financial resources needed to provide, and continue to provide, the services described in the statement of purpose and in order to meet the requirements of the Regulations. • Service providers have appropriate insurance and suitable indemnity arrangements to cover potential liabilities arising from death, injury, or other causes, loss or damage to property, and other financial risks. • Where audited accounts are not available, annual accounts are completed by a qualified accountant for the purpose of regulation and inspection. • The accounts demonstrate that the service is financially viable and likely to have sufficient funding to continue to fulfil its statement of purpose.
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Regulation 14	Guidance
<p>Duty of candour</p> <p>14. The service provider must act in an open and transparent way with—</p> <p>(a) individuals receiving care and support;</p> <p>(b) any representatives of those individuals.</p>	<ul style="list-style-type: none"> • Service providers have policies and procedures in place to support a culture of openness and transparency, and which ensure that all staff are aware of and follow them. These are in line with, and take account of, Social Care Wales’ guidance on the professional duty of candour for social care professionals registered with Social Care Wales. • Service providers promote a culture of candour that includes: <ul style="list-style-type: none"> ○ being open, honest and engaging with those listed in regulation 14 (a) and (b); ○ providing information on any relevant incidents and the outcome of any investigations that have taken place; ○ offering an apology for what has happened, where it is appropriate to do so.

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| | <ul style="list-style-type: none">• Service providers take action to prevent and appropriately address bullying, victimisation and/or harassment in relation to the duty of candour, and investigate any instances where a board member, responsible individual or member of staff may have obstructed another in exercising their duty of candour.• Service providers have a system in place to identify and deal with possible breaches of the professional duty of candour by staff who are professionally registered, including the obstruction of another in their professional duty of candour. Action taken to address such breaches includes, where appropriate, a referral to the professional regulator or other relevant body. |
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Chapter 2: General requirements on adoption service providers – local authority adoption services (Part 4 of the Regulations)

This chapter applies to local authority adoption service providers only. References in this chapter to service provider mean the ‘local authority adoption service provider’ and references to service mean the ‘local authority adoption service’.

Part 4 of the Regulations sets out the way in which local authorities must provide their adoption services, including:

- requirements in relation to the statement of purpose
- arrangements for monitoring and improvement
- the appointment of an adoption services manager.

Regulation 15	Code of Practice
<p>Requirements in relation to the provision of the service</p> <p>15.The service provider must ensure that the adoption service is provided with sufficient care, competence and skill, having regard to the statement of purpose.</p>	<ul style="list-style-type: none"> • Service providers have clear arrangements for the oversight and governance of their adoption service in order to establish, develop and embed a culture which ensures that the best possible outcomes are achieved for individuals using the local authority adoption service and to meet the requirements of the Regulations. This includes but is not limited to: <ul style="list-style-type: none"> ○ policies and procedures to achieve the aims of the statement of purpose and place individuals at the centre of the local authority adoption service; ○ systems for assessment, monitoring and review which support evidence-based practice and support individuals to achieve their personal outcomes; ○ processes to ensure care and support is delivered consistently and reliably; ○ safe staffing arrangements, underpinned by professional development, to meet the care and support needs of individuals using local authority adoption services; ○ quality and audit systems to review progress and inform service development;

	<ul style="list-style-type: none"> ○ a proactive approach to equal opportunities and diversity; and ○ suitable and accessible premises
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Regulation 16	Code of Practice
<p>Content of statement of purpose</p> <p>16.The service provider must prepare a statement of purpose which contains the information listed in Schedule 5.</p>	<ul style="list-style-type: none"> ● The statement of purpose is fundamental to local authority adoption services. It must: <ul style="list-style-type: none"> ○ accurately describe the services provided, ○ state where and how these services will be provided, and ○ state the arrangements to support the delivery of the services. ● It must include the information set out in Schedule 5 to the Regulations. ● In preparing a statement of purpose, the local authority takes account of any statement of purpose guidance provided by the Welsh Government.

Regulation 17	Code of Practice
<p>Requirements in relation to statement of purpose</p> <p>17.—(1) The service provider must provide the adoption service in accordance with the statement of purpose.</p> <p>(2) The service provider must—</p> <p>(a) keep the statement of purpose under review, and</p> <p>(b) where appropriate, revise the statement of purpose.</p> <p>(3) Unless paragraph (4) applies, the service provider must notify the persons listed in paragraph (6) of any revision to be made to the statement of purpose at least 28 days before it is to take effect.</p> <p>(4) This paragraph applies in cases where it is necessary to revise the statement of purpose with immediate effect.</p> <p>(5) If paragraph (4) applies, the service provider must, without</p>	<ul style="list-style-type: none"> ● Service providers review and update the statement of purpose at least annually or earlier if changes are being made to the service provided. ● Where there is an intention to change the service being provided, the statement of purpose is updated to reflect the change. The service provider notifies those persons set out in regulation 17(6) 28 days prior to the changes being made. Examples of this include: <ul style="list-style-type: none"> ○ provision of additional specialist services; ○ changes to the normal staffing arrangements or levels as set out in the existing statement of purpose.

<p>delay, notify the persons listed in paragraph (6) of any revision made to the statement of purpose.</p> <p>(6) The persons who must be notified of any revision to the statement of purpose in accordance with paragraph (3) or (5) are—</p> <p>(a) the service regulator;</p> <p>(b) individuals;</p> <p>(7) The service provider must provide the up to date statement of purpose to any person on request, unless it is not appropriate to do so or would be inconsistent with the well-being of an individual.</p>	<ul style="list-style-type: none"> • Where there is an intention to change the local authority adoption service being provided with immediate effect, i.e. within the 28 days notification period (required by regulation 17(3)), the provider: <ul style="list-style-type: none"> ○ notifies the service regulator immediately (and where practicable, prior to implementing the change); and ○ updates the statement of purpose to reflect the change without delay and provides a copy to the service regulator. • Where a change to the statement of purpose is proposed, the service provider provides the service regulator additional information it may need to satisfy itself that it can provide the services proposed. • Where the statement of purpose is updated a record is maintained of the version and date of amendment. • A copy of the statement of purpose is readily available to those listed in regulation 17(6).
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Regulation 18	Code of Practice
<p>Requirements in relation to monitoring and improvement</p> <p>18.—(1) The service provider must ensure that there are effective arrangements in place for monitoring, reviewing and improving the quality of care and support provided by the adoption service.</p> <p>(2) Those arrangements must include arrangements for seeking the views of—</p> <p>(a) individuals;</p> <p>(b) any representatives, unless this is not appropriate or would be inconsistent with that person’s well-being;</p> <p>(c) any other local authority or local authority in England which</p>	<ul style="list-style-type: none"> • Service providers have systems and processes in place to monitor, review and improve the quality of their local authority adoption services. This will include: <ul style="list-style-type: none"> ○ who is responsible for ensuring this is done; ○ how this will be done; ○ how often this takes place; and ○ how the results will be fed back to and considered by local authority chief officers and elected members. • The outcome of any review is analysed and reviewed by people with the appropriate knowledge, skills and competence to understand its significance and take action to secure

has arranged for the provision of adoption support services by the service;

(d) any person working for the purposes of the service, in relation to the quality of care and support provided by the service and how this can be improved.

(3) When making any decisions on plans for improvement of the quality of care and support provided by the adoption service, the service provider must—

(a) take into account the views of those persons consulted in accordance with paragraph (2); and

(b) have regard to the quality of care report prepared by the manager in accordance with regulation 58 (quality of care review).

improvement. Local authority adoption services seek professional/expert advice as needed and in a timely manner to help secure improvements.

- Service providers can demonstrate how they have:
 - analysed and responded to the information gathered;
 - used the information to make improvements.
- Service providers monitor progress against plans to improve the quality and safety of services, and take appropriate action immediately where progress is not achieved as expected.
- The systems and processes are continually reviewed to make sure they enable the service provider to identify where quality of services are being, or may be, compromised and to enable an appropriate timely response.
- As part of the quality review process, service providers:
 - encourage feedback;
 - regularly seek the views of individuals about the quality of the local authority adoption services; and
 - are able to demonstrate they have done this and the nature of the feedback they have received.
- The methods used to engage with and gain the views of those listed in regulation 18(2) using the local authority adoption service are appropriate to their age, level of understanding and take into account their specific condition and/or any communication needs.
- Information collated through quality and audit systems is used to develop the quality of care review report in line with regulation 74(4).

Regulation 19	Code of Practice
<p>Requirements in relation to the local authority manager</p> <p>19.—(1) Each service provider must appoint one of its officers to be responsible for the management of the adoption service.</p> <p>(2) The service provider must immediately give notice in writing to the service regulator of—</p> <p>(a) the name of the person appointed as manager; and</p> <p>(b) the date on which the appointment is to take effect.</p> <p>(3) The service provider must notify the service regulator in writing if the person appointed under paragraph (1) ceases to manage the service.</p>	<ul style="list-style-type: none"> • Service providers give written notification to CIW without delay as required by the Regulation.

Regulation 20	Code of Practice
<p>Fitness requirements for appointment of manager</p> <p>20.—(1) The service provider must not appoint a person to manage the service unless that person is fit to do so.</p> <p>(2) For the purposes of paragraph (1), a person is not fit to manage the service unless the requirements of regulation 40(2) (fitness of staff) are met in respect of that person.</p>	<ul style="list-style-type: none"> • Service providers have suitable arrangements in place to ensure the manager is fit and is capable of running the service in line with its statement of purpose. This includes ensuring: <ul style="list-style-type: none"> ○ the manager is appropriately qualified ○ the manager is registered with Social Care Wales ○ the manager is experienced in delivering an adoption service ○ the vetting of prospective managers includes the relevant checks required by legislation to assure the chief officer that the person is fit and able to work with children.

Regulation 21	Code of Practice
<p>Requirements in relation to the manager</p> <p>21.—(1) A service provider must ensure that the person who is appointed as the manager—</p> <p>(a) is supported to carry out their duties effectively, and</p> <p>(b) undertakes appropriate training.</p> <p>(2) The service provider must ensure that the manager complies with the requirements of Part 17 (duties to be carried out by the local authority manager) of these Regulations.</p> <p>(3) In the event that the service provider has reason to believe that the manager has not complied with a requirement imposed by the regulations in 17, the service provider must take such action as is necessary to ensure that the requirement is complied with.</p> <p>(4) The service provider must put suitable arrangements in place to ensure that the service is managed effectively at any time when there is no manager appointed or when the manager is absent from the service.</p>	<ul style="list-style-type: none"> • Service providers have arrangements in place for regular formal discussion with, and support for, the manager. • Service providers support the manager to undertake training which enables them to carry out their role effectively and to meet the aims of the local authority adoption service as outlined in the statement of purpose and in line with practice guidance recommended by Social Care Wales. Training for responsible individuals includes that which covers: <ul style="list-style-type: none"> ○ legislative framework and requirements; ○ specific duties of a service manager; ○ service performance and quality management; and ○ shaping service culture, etc. • If there is no manager in place, or the manager is unable to fulfil their duties for any reason (for example, they are absent from their role due to illness), the service provider ensures that appropriate and robust arrangements are in place for the management of the local authority adoption service during the vacancy
Regulation 22	Guidance
<p>Duty of candour</p> <p>22. The service provider must act in an open and transparent way with—</p> <p>(a) individuals receiving care and support;</p> <p>(b) any representatives of those individuals.</p>	<ul style="list-style-type: none"> • Service providers have policies and procedures in place to support a culture of openness and transparency, and which ensure that all staff are aware of and follow them. These are in line with, and take account of, Social Care Wales’ guidance on the professional duty of candour for social care professionals registered with Social Care Wales. • Service providers promote a culture of candour that includes: <ul style="list-style-type: none"> ○ being open, honest and engaging with those listed in

regulation 22 (a) and (b);

- providing information on any relevant incidents and the outcome of any investigations that have taken place;
- offering an apology for what has happened, where it is appropriate to do so.

- Service providers take action to prevent and appropriately address bullying, victimisation and/or harassment in relation to the duty of candour, and investigate any instances where elected members, senior officers (of the local authority) or other members of staff may have obstructed another in exercising their duty of candour.
- Service providers have a system in place to identify and deal with possible breaches of the professional duty of candour by staff who are professionally registered, including the obstruction of another in their professional duty of candour. Action taken to address such breaches includes, where appropriate, a referral to the professional regulator or other relevant body.

Chapter 3: Requirements on adoption service providers – regulated adoption services and local authority adoption services (Parts 5 to 8 of the Regulations)

This chapter applies to regulated adoption service providers and local authority adoption service providers.

Parts 5 to 8 of the Regulations sets out the way in which service providers provide their adoption services in respect to:

- General requirements relating to safeguarding, the provision of information, meeting the language and communication needs of an individual and treating individuals with respect and sensitivity. This also sets out the requirement to keep records.
- The terms and conditions of the service.
- Policies, procedures and other standards an adoption service provider must have in place.
- Requirements relating to premises, facilities and equipment.
- Staffing, including the deployment of sufficient numbers of staff and the fitness of individuals working at the service provider. This also includes requirements relating to supporting and developing staff, providing information to staff and the operation of a suitable disciplinary procedure.

General Requirements (Part 5)

Regulation 23	Guidance / Code of Practice
<p>Safeguarding - overarching requirement</p> <p>23.— The service provider must provide the service in a way which ensures that individuals are safe and are protected from abuse, neglect and improper treatment.</p>	<ul style="list-style-type: none"> • When they begin using the service, individuals are given information about safeguarding, how to raise a concern and support is available to enable them to do so. • Staff and individuals can access up to date safeguarding policy and procedures. • Staff receive training relevant to their role at induction to understand safeguarding and protecting vulnerable individuals. • Staff training is ongoing at regular intervals in line with local safeguarding recommendations.

	<ul style="list-style-type: none"> • Staff are aware of their individual responsibilities for raising concerns to ensure the safety and well-being of individuals. • Service providers make provision to support staff raising safeguarding concerns (whistleblowing). • Service providers work in partnership with other relevant professionals and agencies and manage risk to individuals using the service. • Records of safeguarding referrals and outcomes are maintained to enable oversight and scrutiny of safeguarding within the service. Protection of vulnerable individuals must be overseen by the manager and responsible individual and within the governance structure with arrangements for oversight at board level / chief officer level. • The service provider ensures outcomes arising from any safeguarding referral is communicated to the individual in a method appropriate to their age, level of understanding and takes into account their specific condition and any communication needs.
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Regulation 24	Guidance / Code of Practice
<p>Information about the service</p> <p>24.—(1) The service provider must prepare a written guide to the service.</p> <p>(2) The guide must be—</p> <p>(a) dated, reviewed at least annually and updated as necessary;</p> <p>(b) in an appropriate language, style, presentation and format, having regard to the statement of purpose for the adoption service;</p> <p>(c) given to any individual who is receiving care and support;</p>	<ul style="list-style-type: none"> • A written guide is available to those listed in regulation 24(2)(c), and 24(2)(d) if appropriate, which provides information about the service. • The guide is in plain language and in a format that reflects the needs, age and level of understanding for whom the service is intended. The guide is made available in formats and media accessible and appropriate to the audience. For example, preferred and appropriate language, large print, audio,

(d) made available to others on request, unless this is not appropriate or would be inconsistent with the well-being of an individual.

(3) The guide must contain information about—

(a) how to raise a concern or make a complaint;

(b) the availability of advocacy services.

(4) The service provider must ensure that an individual receives such support as is necessary to enable the individual to understand the information contained in the guide.

computerised and visual aids. When required it is explained in the individual's preferred method of communication.

- Where required individuals are supported to understand the contents of the guide and what it means for them.
- The guide sets out the areas required by regulation 24(3) and in addition includes the following:
 - arrangements for welcoming and supporting individuals, and the involvement of carers where relevant;
 - the ethos, culture and priorities of the service including summary of statement of purpose;
 - information on the adoption process and related timescales, where relevant;
 - information on the process for seeking adoption support, where appropriate;
 - information about foster to adopt;
 - how to access the most recent inspection report completed by the service regulator;
 - key staff who will be supporting the individual;
 - how to contact the responsible individual or the local authority adoption services manager;
 - service users right to make representations and the support available if needed;
 - the complaints procedure and how to make a complaint;
 - contact details and role of the Public Service Ombudsman for Wales, service regulator, Children's Commissioner (as appropriate);
 - information about the entitlement for looked after children to access independent advocacy services;
 - arrangements for contributing views in the running of the service;
 - fees – range, any additional fees or costs payable by the individual, method of payment, notice of increase;

	<ul style="list-style-type: none"> ○ terms and conditions including circumstances in which the service may cease to be provided and notice periods; and ○ how individuals can access their own records.
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Regulation 25	Guidance / Code of Practice
<p>Service agreement</p> <p>25.—(1) The service provider must ensure that every individual who receives care and support is given a signed copy of any agreement relating to—</p> <ul style="list-style-type: none"> (a) the care and support provided to the individual; (b) any other services provided to the individual. <p>(2) The service provider must ensure that the individual receives such support as is necessary to enable the individual to understand the information contained in any such agreement.</p>	<ul style="list-style-type: none"> ● Individuals using the service are given a copy of any agreement with, where appropriate: <ul style="list-style-type: none"> ○ information about the costs payable by the individual; other costs covered by the placing authority; and terms and conditions of the service including termination of contracts and notice period, so that they can make decisions about their care and support; and ○ the information which details the individual service to be provided. ● Service providers give individuals a written estimate of the weekly costs of the care and support payable by the individual, in a format accessible to the individual and suitable to their age and level of understanding. This includes details of any likely additional costs.

Regulation 26	Guidance / Code of Practice
<p>Information</p> <p>26.—(1) The service provider must ensure that an individual has the information they need to make or participate in assessments, plans and day to day decisions about the way care and support is provided to them and how they are supported to achieve their personal outcomes.</p> <p>(2) Information provided must be available in the appropriate language, style, presentation and format, having regard to—</p> <ul style="list-style-type: none"> (a) the nature of the service as described in the statement of 	<ul style="list-style-type: none"> ● Service providers ensure that individuals are able to make decisions about their lives and are supported where necessary to do this. ● Individuals are offered the opportunity and are enabled to contribute their views about the day to day running of the service. ● Service providers put in place arrangements to enable individuals to access relevant advocacy services or self

<p>purpose;</p> <p>(b) the level of the individual’s understanding and ability to communicate;</p> <p>(c) in the case of a child, the child’s age.</p> <p>(3) The service provider must ensure that the individual receives such support as is necessary to enable them to understand the information provided.</p>	<p>advocacy groups (if they wish) and support for their communication needs so individuals are able to make decisions about their lives.</p> <ul style="list-style-type: none"> • Service providers put in place arrangements to enable individuals to understand the information provided. • Where information is available about children who need families locally, this is provided promptly and in a clear and accurate way.
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Regulation 27	Guidance / Code of Practice
<p>Language and communication</p> <p>27.—(1) The service provider must take reasonable steps to meet the language needs of an individual.</p> <p>(2) The service provider must put arrangements in place to ensure that an individual is provided with access to such aids and equipment as may be necessary to facilitate the individual’s communication with others.</p>	<ul style="list-style-type: none"> • Service providers have arrangements in place to assist individuals with their specific communication and language needs in line with the statement of purpose. Where necessary this will include putting in place measures to ensure that individuals can communicate meaningfully. This includes: <ul style="list-style-type: none"> ○ the individual’s language of need and choice; ○ additional means of communication such as Picture Exchange Communication System (PECS), Treatment and Education of Autistic and Communication related handicapped Children (TEACCH), Makaton, British Sign Language (BSL) where appropriate. • Service providers identify an individual’s communication needs as part of their determination as to whether the service can meet their needs. • Individuals can understand staff when they communicate with them. <p>Service providers ensure that aids and equipment required to</p>

	<p>support individual's communication needs are in place, accessible, maintained and that staff know how to use them.</p> <ul style="list-style-type: none"> • Service providers deliver, or work towards, actively offering a service in the Welsh language to individuals whose first language is Welsh.
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Regulation 28	Guidance / Code of Practice
<p>Respect and sensitivity</p> <p>28.—(1) The service provider must ensure that individuals are treated with respect and sensitivity.</p> <p>(2) This includes, but is not limited to—</p> <p>(a) respecting the individual's privacy and dignity;</p> <p>(b) respecting the individual's rights to confidentiality;</p> <p>(c) promoting the individual's autonomy and independence;</p> <p>(d) having regard to any relevant protected characteristics (as defined in section 4 of the Equality Act 2010) of the individual.</p>	<ul style="list-style-type: none"> • Service providers ensure that individuals are: <ul style="list-style-type: none"> ○ listened to, and communicated with, in a courteous and respectful manner with their care and support being the main focus of staff's attention; and ○ treated with respect and feel valued. • Service providers ensure that systems are in place to respond promptly to the requests of and work with individuals who have been affected by adoption, at all times being respectful of their ethnic origin, religion, culture, language, sexuality, gender and disability and their experience and understanding of adoption.

Regulation 29	Guidance / Code of Practice
<p>Standards of care and support – overarching requirements</p> <p>29.—(1) The service provider must ensure that care and support is provided in a way which protects, promotes and maintains the safety and well-being of individuals.</p> <p>(2) The service provider must ensure that care and support is provided in way which—</p> <p>(a) maintains good personal and professional relationships with individuals and staff; and</p> <p>(b) encourages and assists staff to maintain good personal and professional relationships with individuals.</p>	<ul style="list-style-type: none"> • The service provider's approach to standards of care and support is clearly set out in the statement of purpose. • Achievement of personal outcomes is supported by policies and procedures. • Policies and procedures are in line with any current legislation and national guidance; and reflect evidence-based practice. • Service providers ensure the service is responsive and proactive in identifying and mitigating risks.

- Service providers ensure medical advice and professional help for an individual is sought (where appropriate) or a referral to commissioners is made in a timely manner.
- Service providers ensure care and support is delivered in a dignified and respectful manner in which staff have meaningful interactions and positive and caring attitudes towards individuals.
- Service providers ensure care and support is provided in keeping with any care and support plan, adoption plan and/or adoption placement plan, that it meets the individual's needs and it supports them to achieve their personal outcomes in relation to their:
 - physical, mental and emotional well being;
 - cultural, religious, social or spiritual preferences;
 - education, training and recreation needs;
 - family and personal relationships;
 - control over everyday life and where relevant participation in work;
 - intellectual, emotional and behavioural development;
 - rights and entitlements, in particular with regard to the United Nations Convention on the Rights of the Child
 - protection from abuse and neglect.

Examples of this include:

- Children are introduced to their prospective adopters sensitively and with careful and considered planning that promotes attachment. When unplanned circumstances require children to move on from one setting to another , then the welfare and well-being of children remain paramount and agency staff act at all times with this in mind.

	<ul style="list-style-type: none"> • Children and adult service users are supported to manage their own conflicts and difficult feelings • Children and adult service users develop positive relationships with adopters and staff. There are clear, consistent and appropriate boundaries for children. • Children have appropriate, carefully assessed, supported contact (direct and/or indirect) with their birth relatives, including their brothers and sisters, and other people who are important to them, such as previous carers, where this is in their best interests. • Ongoing appropriate adoption support ensures that adopters and prospective adopters continue to understand the potential impact of abuse and neglect on their adopted child's behaviour as they grow older and equips them to provide stable and secure attachments • Service providers have arrangements in place to provide support to adopters and prospective adopters and to children where there are difficulties in the provision of care and support.
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Regulation 30	Guidance / Code of Practice
<p>Conflicts of interest</p> <p>30. The service provider must have effective arrangements in place to identify, record and manage potential conflicts of interest.</p>	<ul style="list-style-type: none"> • Service providers maintain appropriate systems and take all reasonable steps to make sure actual or perceived conflicts of interests are identified, prevented and recorded in an open way.

Regulation 31	Guidance / Code of Practice
<p>Records</p> <p>31.—(1) The service provider must keep and maintain the records</p>	<ul style="list-style-type: none"> • There is a policy and procedure for the recording and management of records. This includes, but is not limited to: <ul style="list-style-type: none"> • the purpose, format, confidentiality and contents of files,

specified in Schedule 3.

(2) The service provider must—

- (a) ensure that records are accurate and up to date;
- (b) keep all records securely;
- (c) make arrangements for the records to continue to be kept securely in the event the service closes;
- (d) make the records available to the service regulator on request;
- (e) retain records relating to adults for 15 years from the date of the last entry;
- (f) retain records relating to children for 75 years from the date of the last entry, unless the records are returned to the placing authority in accordance with sub-paragraph (d);
- (g) ensure that a person who receives care and support from the service—
 - (i) can have access to their records; and
 - (ii) are made aware they can access their records.

including secure storage and access to case files in line with regulations

- arrangements for authorising access to the adoption case records, and for authorising the disclosure of adoption information;
- the circumstances where it might wish to make records or information available, both within and outside the adoption service, for the purposes of its functions as an adoption service;
- how staff should deal with requests for such access or disclosure and who are empowered to authorise them;
- the requirement that before the service provider may make case records or information available, a written agreement must be obtained from the person to whom the service provider wishes to disclose the case records or information that they will keep them confidential. This requirement does not cover the child or adopter but does cover anyone else within or outside the service provider, i.e. the service providers own members and employees, and members of its adoption panel.
- Staff are aware of the policy and have a clear understanding of the procedures for recording and managing records. This includes training in information security and action to be taken where personal information is compromised.
- Service providers maintain all the records required for the protection of individuals and the effective running of the service as specified by Schedule 3 of the Regulations.
- All records are secure, up to date and in good order. They are prepared, maintained and used in accordance with the data protection legislation and other statutory requirements and are kept for the required length of time as set out in regulation

	<p>31(2)(e) &(f).</p> <ul style="list-style-type: none"> • Records are stored securely including electronic records which are password protected. • Individuals and staff are given access to any records and information about them held by service providers in accordance with current legal requirements. • The service provider provides all relevant information from its case files, in a timely way, to other regulated adoption services and local authority adoption services with whom it is working to effect the provision of care and support for a child.
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Policies, procedures and other standards (Part 6)

Regulation 32	Guidance / Code of Practice
<p>Requirements to provide the service in accordance with policies and procedures</p> <p>32.—(1) The service provider must ensure that the following policies and procedures are in place for the service—</p> <ul style="list-style-type: none"> (a) commencement of the service (regulation 7) (a) safeguarding (regulation 33) (b) complaints (regulation 34) (c) whistleblowing (regulation 35) (d) supporting and developing staff (regulation 41) (e) staff discipline (regulation 43) <p>(2) The service provider must also have such other policies and procedures in place as are reasonably necessary to support the aims and objectives of the adoption service set out in the statement of purpose.</p>	<ul style="list-style-type: none"> • Service providers have the policies and procedures in place as required by the Regulations. • Policies and procedures are proportionate to the service being provided in accordance with the statement of purpose. • Policies and procedures: <ul style="list-style-type: none"> ○ are aligned to any current legislation and national guidance; ○ provide guidance for staff to ensure that services are provided in line with the statement of purpose; and ○ set expectations to inform individuals about how the service is provided. • Policies, procedures and practices are reviewed and updated in

<p>(3) The service provider must ensure that the content of the policies and procedures which are required to be in place by virtue of paragraphs (1) to (2) is—</p> <p>(a) appropriate to the needs of individuals for whom care and support is provided;</p> <p>(b) consistent with the statement of purpose; and</p> <p>(c) kept up to date.</p> <p>(4) The service provider must ensure that the adoption service is provided in accordance with those policies and procedures.</p>	<p>light of changes to practice, changing legislation and best practice recommendations.</p> <ul style="list-style-type: none"> • Staff and individuals using the service have the opportunity to be involved in developing policies and procedures. • Where changes are made to the statement of purpose the policies and procedures are reviewed and updated to reflect the changes. • Service providers ensure staff have access to, and knowledge and understanding of, the policies and procedures which support them in their role. • All policies and procedures are available on request to the individuals who use the service, their representatives and where appropriate the relevant placing authority and commissioner. • Policies and procedures are in a format accessible to the individual and support is provided to assist individuals' understanding of these. • Systems for monitoring and improvement include those which ensure the service is being run in accordance with the policies and procedures.
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Regulation 33	Guidance / Code of Practice
<p>Safeguarding policies and procedures</p> <p>33.—(1) The service provider must have policies and procedures in place—</p> <p>(a) for the prevention of abuse, neglect and improper treatment, and</p>	<ul style="list-style-type: none"> • There is a safeguarding policy and procedure in place. • Policies and procedures are aligned to current legislation, national guidance and All-Wales / local safeguarding procedures.

<p>(b) for responding to any allegation or evidence of abuse, neglect or improper treatment.</p> <p>(2) In this regulation, such policies and procedures are referred to as safeguarding policies and procedures.</p> <p>(3) The service provider must ensure that their safeguarding policies and procedures are operated effectively.</p> <p>(4) In particular, where there is an allegation or evidence of abuse, neglect or improper treatment, the service provider must—</p> <p>(a) act in accordance with their safeguarding policies and procedures;</p> <p>(b) take immediate action to ensure the safety of all children for whom care and support is provided;</p> <p>(c) make appropriate referrals to other agencies; and</p> <p>(d) keep a record of any evidence or the substance of any allegation, any action taken and any referrals made.</p>	<ul style="list-style-type: none"> • The safeguarding policy and procedures include the individual roles and responsibilities of staff or others working at the service in receiving and reporting allegations of abuse, neglect or improper treatment or suspected abuse, neglect or improper treatment. This will include instruction for staff on actions to be taken and mechanisms for referral to the local authority and other relevant partners and agencies. • Service providers ensure that service users are informed of their right to Independent Professional Advocacy under the 2014 Act.
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Regulation 34	Guidance / Code of Practice
<p>Complaints policy and procedure</p> <p>34.—(1) The service provider must have a complaints policy in place and ensure that the adoption service is operated in accordance with that policy.</p> <p>(2) The service provider must have effective arrangements in place for dealing with complaints including arrangements for—</p> <p>(a) identifying and investigating complaints,</p> <p>(b) giving an appropriate response to a person who makes a complaint, if it is reasonably practicable to contact that person;</p> <p>(c) ensuring that appropriate action is taken following an investigation, and</p> <p>(d) keeping records relating to the matters in sub-paragraphs (a) to (c).</p> <p>(3) The service provider must provide a summary of complaints, responses and any subsequent action taken to the service</p>	<ul style="list-style-type: none"> • Service providers have an accessible complaints policy which includes an informal resolution stage and explains – <ul style="list-style-type: none"> • who can make a complaint and in relation to what • who to approach to discuss a concern/complaint • how individuals can be supported to make a complaint • information about accessing independent advocacy, where available • how complaints will be dealt with • the stages and timescales for the process • how to escalate a concern/complaint to the commissioning authority, Children’s Commissioner, and/or Public Service Ombudsman for Wales and/or service regulator. • The policy and procedures are in an easy to read format, well

regulator within 28 days of being requested to do so.

(4) The service provider must—

- (a) analyse information relating to complaints and concerns; and
- (b) having regard to that analysis, identify any areas for improvement.

publicised, readily available and accessible to individuals using the service, their families, significant others, visitors, staff and others working at the service.

- Individuals are able to make their complaint in writing or verbally to staff and these should be acknowledged unless complaints are made anonymously.
- Staff are aware and understand the complaints policy and procedures.
- Service providers have effective arrangements in place to deal with complaints.
- Service providers ensure any representation or complaint is acknowledged, addressed promptly and the complainant is kept informed of progress.
- A written report is provided to the complainant setting out the outcome of the complaint and any action to be taken.
- Consent must be gained and confidentiality maintained during the complaints process unless there are professional or statutory obligations which would not make this possible, such as those in relation to safeguarding.
- Individuals do not suffer discrimination, disadvantage, or the withdrawal or reduction of a service as a result of making representations or complaints.
- Systems are in place to make sure that all complaints are investigated in accordance with the timescales set out in the service provider's complaints policy. This includes the following:
 - undertaking a review to establish the level of

	<p>investigation and immediate action required, including referral to appropriate authorities for investigation. This may include the service regulator or local authority safeguarding teams.</p> <ul style="list-style-type: none"> ○ where areas for improvement or service failures are identified, acting upon these immediately. ● Staff and others involved in the investigation of complaints have the right level of knowledge and skill to do this. ● Records of complaints are maintained and monitored to identify trends and areas of risk which may require action. ● Actions taken in response to complaints are reported on as part of the governance arrangements for the service.
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Regulation 35	Guidance / Code of Practice
<p>Whistleblowing</p> <p>35.—(1) The service provider must ensure that all persons working at the service (including any person allowed to work as a volunteer) are able to raise concerns about matters that may adversely affect the health, safety or well-being of persons for whom the service is provided.</p> <p>(2) These arrangements must include—</p> <p>(a) having a whistleblowing policy in place and acting in accordance with that policy; and</p> <p>(b) establishing arrangements to enable and support people working at the service to raise such concerns.</p> <p>(3) The service provider must ensure that the arrangements required under this regulation are operated effectively.</p> <p>(4) When a concern is raised, the service provider must ensure that—</p>	<ul style="list-style-type: none"> ● There is a whistleblowing policy in place. This includes: <ul style="list-style-type: none"> ○ the procedure for raising a concern; ○ the safeguards in place for staff who raise a concern; and ○ how concerns will be investigated. ● Staff are aware of, and have had training in, how to raise concerns and there are mechanisms and support available to enable them to do this. ● Consent and confidentiality are maintained during the investigation process unless there are professional or statutory obligations which would not make this possible, such as those in relation to safeguarding. ● Staff and individuals using the service do not suffer discrimination or disadvantage as a result of making their

<p>(a) the concern is investigated, (b) appropriate steps are taken following an investigation, and (c) a record is kept relating to the matters in sub-paragraphs (a) to (b).</p>	<p>concerns known.</p> <ul style="list-style-type: none"> Records of concerns are maintained and monitored to identify trends and areas of risk which may require action. Actions taken as a response to whistleblowing are subject to reporting within governance arrangements.
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Premises, facilities and equipment (Part 7)

Regulations 36	Guidance / Code of Practice
<p>Overarching requirement</p> <p>36. The service provider must ensure that the premises, facilities and equipment are suitable for the adoption service, having regard to the statement of purpose for the service.</p>	<ul style="list-style-type: none"> The location, design and size of the premises are suitable for the service described in the statement of purpose.
Regulation 37	Guidance / Code of Practice
<p>Adequacy of premises</p> <p>37. The service provider must ensure that the premises used for the operation of the adoption service have adequate facilities for—</p> <p>(a) the supervision of staff; (b) the secure storage of records.</p>	<ul style="list-style-type: none"> Service providers have a suitable space within the premises, such as a shared meeting room, to provide privacy for the supervision of staff. Records are stored securely in line with legislative requirements.
Regulation 38	Guidance / Code of Practice
<p>Facilities and equipment</p> <p>38. The service provider must ensure that the facilities and equipment used for the provision of the service are—</p>	<ul style="list-style-type: none"> Facilities, fittings, adaptations and equipment are available to achieve the aims and objectives of the statement of purpose. Equipment is used for its intended purpose and solely for the

<p>(a) suitable and safe for the purpose for which they are intended to be used;</p> <p>(b) used in a safe way;</p> <p>(c) properly maintained;</p> <p>(d) kept clean to a standard which is appropriate for the purpose for which they are being used;</p> <p>(e) stored appropriately.</p>	<p>individual for whom is it provided.</p> <ul style="list-style-type: none"> • Staff and others who operate the equipment are trained to use it appropriately prior to use. • Individuals using the service are consulted about the facilities, services and equipment provided by the service on their behalf and, where possible, individual choices and preferences are respected and acted upon.
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Staffing (Part 8)

Regulation 39	Guidance / Code of Practice
<p>Staffing - overarching requirements</p> <p>39.—(1) The service provider must ensure that at all times a sufficient number of suitably qualified, trained, skilled, competent and experienced staff are deployed to work at the adoption service, having regard to—</p> <p>(a) the statement of purpose for the service;</p> <p>(b) the care and support needs of individuals;</p> <p>(c) the need to support individuals to achieve their personal outcomes;</p> <p>(d) the need to safeguard and promote the health and welfare of children; and</p> <p>(e) the requirements of these Regulations.</p>	<ul style="list-style-type: none"> • Service providers have a demonstrable, measurable and systematic approach to determine the number of staff and range of skills/qualifications required for the reliable provision of care and support to meet individuals’ needs and support them to achieve their personal outcomes. This considers, but is not limited to: <ul style="list-style-type: none"> ○ the statement of purpose; ○ the care and support needs of individuals • Staffing levels and skill mix are reviewed continuously and adapted to respond to the changing needs. • Arrangements are in place to cover staff sickness or absence to ensure care and support needs are supported appropriately.

Regulation 40	Guidance / Code of Practice
<p>Fitness of staff</p> <p>40.—(1) The service provider must not—</p> <p>(a) employ a person under a contract of employment to work at the service unless that person is fit to do so;</p> <p>(b) allow a volunteer to work at the service unless that person is fit to do so;</p> <p>(c) allow any other person to work at the adoption service in a position in which he or she may in the course of his or her duties have regular contact with individuals who are receiving care and support or with other persons who are vulnerable unless that person is fit to do so.</p> <p>(2) For the purposes of paragraph (1), a person is not fit to work at the adoption service unless—</p> <p>(a) the person is of suitable integrity and good character;</p> <p>(b) the person has the qualifications, skills, competence and experience necessary for the work he or she is to perform;</p> <p>(c) the person is able by reason of their health, after reasonable adjustments are made, of properly performing the tasks which are intrinsic to the work for which he or she is employed or engaged;</p> <p>(d) the person has provided full and satisfactory information or documentation, as the case may be, in respect of each of the matters specified in Part 1 of Schedule 2 and this information or documentation is available at the service for inspection by the service regulator;</p> <p>(e) where the person is employed by the service provider to manage the service, the person is registered as a social care manager with Social Care Wales.</p> <p>(3) The certificate referred to in paragraphs 2 and 3 of Schedule 2 (referred to in this regulation as a DBS certificate) must be applied for by, or on behalf of the service provider, for the purpose of assessing the suitability of a person for the post referred to in paragraph (1). But this requirement does not apply if the person</p>	<ul style="list-style-type: none"> • Service providers have rigorous selection and vetting systems in place to enable them to make a decision on the appointment or refusal of all staff and volunteers. This includes the information set out in schedule 1 of the Regulations. This also includes checking the veracity of references and employment. • Where agency staff are deployed service providers ensure that they are subject to the same checks as permanently employed staff and have evidence to demonstrate the checks have been undertaken. This may include confirmation and checklists supplied by any agency. • Positive consideration is given to involving individuals using the service in the recruitment of new staff. • Service providers have a process in place to check that staff have appropriate and current registration with a professional regulator where required or, where applicable, an accredited voluntary register. • Having considered all the information available service providers should determine whether the person has the necessary skills, qualifications and fitness of character to undertake the role for which they are employed/deployed. • Service providers ensure any person who is not required to register with SCW but who will be involved with individuals who receive care and support has been checked in line with the requirements set out within regulation 40(2)(a)-(d). • Where staff no longer meet the required fitness criteria set out in regulation 40(2), service providers take appropriate and

<p>working at the service is registered with the Disclosure and Barring Service update service (referred to in this regulation as the DBS update service).</p> <p>(4) Where a person being considered for a post referred to in paragraph (1) is registered with the DBS update service, the service provider must check the person’s DBS certificate status for the purpose of assessing the suitability of that person for that post.</p> <p>(5) Where a person appointed to a post referred to in paragraph (1) is registered with the DBS update service, the service provider must check the person’s DBS certificate status at least annually.</p> <p>(6) Where a person appointed to a post referred to in paragraph (1) is not registered with the DBS update service, the service provider must apply for a new DBS certificate in respect of that person within three years of the issue of the certificate applied for in accordance with paragraph (3) and thereafter further such applications must be made at least every three years.</p> <p>(7) If any person working at the adoption service is no longer fit to work at the service as a result of one or more of the requirements in paragraph (2) not being met, the service provider must—</p> <p>(a) take necessary and proportionate action to ensure that the relevant requirements are complied with;</p> <p>(b) where appropriate, inform—</p> <p>(i) the relevant regulatory or professional body;</p> <p>(ii) the Disclosure and Barring Service.</p>	<p>timely action. For example this may include:</p> <ul style="list-style-type: none"> ○ coaching and mentoring; ○ providing additional training and supervision; ○ the use of disciplinary procedures. <ul style="list-style-type: none"> ● Service providers ensure staff comply with the requirements of their professional codes of practice and, where appropriate, providers make referrals to the relevant professional bodies for staff whose fitness to practice is brought into question. ● Where there are concerns that a member of staff has abused an individual or placed an individual at risk of abuse, the Disclosure and Barring Service and any relevant professional registration body are notified by the service provider without delay.
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Regulation 41	Guidance / Code of Practice
<p>Supporting and developing staff</p> <p>41.—(1) The service provider must have a policy in place for the support and development of staff.</p> <p>(2) The service provider must ensure that any person working at the service (including a person allowed to work as a volunteer)—</p> <p>(a) receives an induction appropriate to their role;</p> <p>(b) is made aware of his or her own responsibilities and those of</p>	<ul style="list-style-type: none"> ● Service providers ensure they have an induction programme that equips all new staff to be confident in their roles and practice. Staff understand their role and responsibility. ● Social care workers complete the relevant induction programme required by Social Care Wales within the defined timescale alongside any service-specific areas.

other staff;

(c) receives appropriate supervision and appraisal;

(d) receives core training appropriate to the work to be performed by them;

(e) receives specialist training as appropriate;

(f) receives support and assistance to obtain such further training as is appropriate to the work they perform.

(3) The service provider must ensure that any person employed to work at the adoption service as a manager is supported to maintain their registration with Social Care Wales.

- Staff have access to copies of any relevant codes of professional practice and practice guidance, including any set out by Social Care Wales. The standards specified in these codes and practice guidance are actively promoted.
- Where agency staff are deployed an introduction to the service is provided which includes, but is not limited to:
 - the statement of purpose;
 - core policies and procedures; and
 - management arrangements.
- Staff receive supervision in their role to help them reflect on their practice and to make sure their professional competence is maintained. This includes feedback about their performance from individuals using the service.
- Staff meet for one to one supervision with their line manager or equivalent officer, or a more senior member of staff, on a monthly basis.
- All staff have an annual appraisal which provides feedback on their performance and identifies areas for training and development in order to support them in their role.
- Staff are supported to undertake training, learning and development to enable them to fulfil the requirements of their role.
- Staff are supported to undertake training, learning and development to enable them to fulfil the requirements of their role and meet the needs of individuals using the service.
- Service providers undertake an annual (or sooner if required) training needs analysis to ensure that staff have the relevant

	<p>skills and competence to meet the needs of individuals in accordance with the statement of purpose for the service.</p> <ul style="list-style-type: none"> • Service providers maintain a written record of all training and supervision, both required and completed. • Service providers support all staff to complete, where appropriate: <ul style="list-style-type: none"> ○ core training; ○ necessary qualifications that would enable them to continue to perform their role; ○ training and activities required for continuing professional development; ○ other training deemed appropriate by the service provider; ○ core and specialist training identified by Social Care Wales as consistent with their role.
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Regulation 42	Guidance / Code of Practice
<p>Information for staff</p> <p>42.—(1) The service provider must ensure that all persons working at the adoption service (including any person allowed to work as a volunteer) are provided with information about the service and the way it is provided.</p> <p>(2) The service provider must ensure that there are arrangements in place to make staff aware of any codes of practice about the standards of conduct expected of social care workers, which is required to be published by Social Care Wales under section 112(1)(a) of the Act.</p>	<ul style="list-style-type: none"> • Service providers compile and make available information for staff in line with the statement of purpose. This includes information about the following matters— <ul style="list-style-type: none"> ○ ethos and culture; ○ the conduct expected of staff or other workers; ○ the roles and responsibilities of staff or other workers; ○ policies and procedures; ○ record keeping requirements; ○ confidentiality and data protection requirements; ○ disciplinary procedures; ○ arrangements for reporting concerns; ○ arrangements for lone working. • Service providers ensure staff have access to and understand

	<p>up-to-date copies of all relevant policies, procedures and codes of practice. They ensure staff have read these during the induction period and test staff members' understanding through supervision and performance reviews.</p> <ul style="list-style-type: none"> • Service providers ensure staff undertake their duties in line with the requirements of the policies and procedures. • All staff are provided with a written job description which states clearly their responsibilities, the duties currently expected of them and their line of accountability. • Regular staff meetings (a minimum of six meetings per year) take place, are recorded and appropriate actions are taken as a result.
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Regulation 43	Guidance / Code of Practice
<p>Disciplinary procedures</p> <p>43.—(1) The service provider must put in place and operate a disciplinary procedure.</p> <p>(2) The disciplinary procedure must include—</p> <p>(a) provision for the suspension, and the taking of action short of suspension, of an employee, in the interests of the safety or well-being of people using the service;</p> <p>(b) provision that a failure on the part of an employee to report an incident of abuse, or suspected abuse, to an appropriate person, is grounds on which disciplinary proceedings may be instituted.</p> <p>(3) For the purpose of paragraph (2)(b), an appropriate person is—</p> <p>(a) the service provider;</p> <p>(b) the responsible individual;</p> <p>(c) an officer of the service regulator ;</p>	<ul style="list-style-type: none"> • Service providers have a disciplinary procedure, in line with employment law, to deal with employee performance and conduct. This includes: <ul style="list-style-type: none"> ○ information about what is acceptable and unacceptable behaviour and what action will be taken if there are concerns about staff behaviour. ○ the arrangements for a member of staff to be suspended (or transferred to other duties) pending consideration or investigation of an allegation of abuse or serious concern relating to the safety or well-being of individuals. • Where the service provider is undertaking a disciplinary procedure against any employee and the employee leaves during the disciplinary process the service provider completes the process and agrees a sanction for the employee. Where the sanction is dismissal or, where the sanction does not result in

- (d) an officer of the local authority for the area where the service is provided;
- (e) in the case of an incident of abuse or suspected abuse of a child, an officer of the National Society for the Prevention of Cruelty to Children; or
- (f) a police officer, as the case may be.

dismissal but the misconduct is of a concerning nature and the employee is registered with Social Care Wales, the service provider notifies Social Care Wales of their decision.

- Service providers ensure staff are aware of and understand the disciplinary procedures and any grievance procedures.
- A written report of any disciplinary investigations and action taken is kept on the employee's file in line with established organisational policies/procedures and data protection requirements.

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Chapter 4: Requirements on Responsible Individuals (Parts 9 to 13 of the Regulations)

This chapter applies to regulated adoption service providers only. The duties of local authority adoption service managers are set out in Chapter 5 of this document.

Parts 9 to 13 of the Regulations set out requirements to ensure that a designated person at an appropriately senior level (the responsible individual) holds accountability, for both service quality and compliance. The Regulations place specific requirements upon the responsible individual (RI) and will enable the service regulator to take action not only against the regulated adoption service provider but also against the RI in the event that regulatory requirements are breached.

The responsible individual is responsible for **overseeing** management of the service and for providing assurance that the service is safe, well run and complies with regulations. The responsible individual is responsible for ensuring the service has a manager, sufficient resources and support. The responsible individual is not responsible for the day to day management of the service (unless they are also the manager); this rests with the manager.

Requirements on responsible individuals for ensuring effective management of the service (Part 9)

Regulation 44	Guidance
<p>Supervision of the management of the service</p> <p>44. The responsible individual must supervise the management of the adoption service which includes taking the steps described in regulations 34 (complaints policy and procedure), 50 (arrangements when manager is absent) and 51 (visits).</p>	<ul style="list-style-type: none">• The responsible individual follows the service provider's prescribed systems and processes to enable proper oversight of the management, quality, safety and effectiveness of the service. This includes, but is not limited to, ensuring the service:<ul style="list-style-type: none">○ focuses on individuals' well-being and personal outcomes;○ listens to individuals;○ responds positively to any concerns or complaints;○ does not place individuals at unnecessary risk;○ achieves best possible outcomes for individuals;○ fulfils the statement of purpose;○ has adequate numbers of staff who are trained, competent and skilled to undertake their role; and○ has sufficient resources, facilities and equipment.

	<ul style="list-style-type: none"> • The responsible individual has systems in place to review and assess the way in which the manager implements actions from the findings of internal quality assurance and external inspection reports, within required timescales. • There are clear lines of accountability, delegation and responsibility set out in writing between the responsible individual and the manager (unless the manager is also the responsible individual). • Arrangements are in place for the manager to have direct access to the responsible individual in addition to the opportunity to meet formally as part of the responsible individual's quality reviews (unless the manager is also the responsible individual). • Arrangements are in place to ensure that the manager is supported by supervision and training, and has opportunities to gain skills for professional development that will support them in their role.
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Regulation 45	Guidance
<p>Duty to appoint a manager</p> <p>45.—(1) The responsible individual must appoint a person to manage the adoption service. But this requirement does not apply if the conditions in paragraph (2) or (3) apply.</p> <p>(2) Where the service provider is an individual, the conditions are—</p> <p>(a) the service provider is an individual;</p> <p>(b) the service provider proposes to manage the service;</p> <p>(c) the service provider is fit to manage the service;</p> <p>(d) the service provider is registered as a manager with Social Care Wales; and</p>	<ul style="list-style-type: none"> • The responsible individual ensures a manager who is registered with Social Care Wales is appointed and in place to manage the delivery of the service on a day to day basis. • The responsible individual takes responsibility and accountability for the appointment of the manager regardless of whether they are directly involved in the recruitment process. • The responsible individual is assured that the person appointed as the manager for the service has the appropriate knowledge, skills and competence to manage the service safely and

<p>(e) the service regulator agrees to the service provider managing the service.</p> <p>(3) Where the service provider is a partnership, body corporate or unincorporated body, the conditions are—</p> <p>(a) the service provider proposes that the individual designated as the responsible individual for the service is to be appointed to manage the service;</p> <p>(b) that individual is fit to manage the service;</p> <p>(c) that individual is registered as a manager with Social Care Wales; and</p> <p>(d) the service regulator agrees to that individual managing the service.</p> <p>(4) For the purposes of paragraph (2)(b), the service provider is not fit to manage the service unless the requirements of regulation 40(2) (fitness of staff) are met in respect of the service provider.</p> <p>(5) The duty in paragraph (1) is not discharged if the person appointed to manage the service is absent for a period of more than three months.</p>	<p>reliably.</p> <ul style="list-style-type: none"> • The responsible individual demonstrates that the appointment of the manager has been undertaken with due diligence and in line with the requirements of regulation 40 (fitness of staff). • Where a manager is absent for a period more than three months, the service provider ensures there is an appropriately qualified, experienced and competent manager, registered with Social Care Wales in place to manage the service.
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Regulation 46	Guidance
<p>Fitness requirements for appointment of manager</p> <p>46.—(1) The responsible individual must not appoint a person to manage the adoption service unless that person is fit to do so.</p> <p>(2) For the purposes of paragraph (1), a person is not fit to manage the service unless the requirements of regulation 40(2) (fitness of staff) are met in respect of that person.</p>	<ul style="list-style-type: none"> • The responsible individual has suitable arrangements in place to ensure the manager is fit and is capable of running the service in line with its statement of purpose. This includes ensuring: <ul style="list-style-type: none"> ○ the manager is appropriately qualified; ○ the manager is registered with Social Care Wales; ○ the manager is experienced in managing an adoption service; ○ the vetting of prospective managers includes the relevant checks required by regulations to assure the responsible individual that the person is fit and able to work with vulnerable individuals.

<p>Regulation 47</p>	<p>Guidance</p>
<p>Restrictions on appointment manager for more than one service</p> <p>47.(1) The responsible individual must not appoint a person to manage more than one adoption service, unless paragraph (2) applies.</p> <p>(2) This paragraph applies if—</p> <p>(a) the service provider has applied to the service regulator for permission to appoint a manager for more than one service, and</p> <p>(b) the service regulator is satisfied that the proposed management arrangements—</p> <p>(i) will not have an adverse impact on the provision of the service; and</p> <p>(ii) will provide reliable and effective oversight of each service.</p>	<ul style="list-style-type: none"> • Where a manager is appointed to manage more than one service, this is agreed in advance with the service regulator.
<p>Regulation 48</p>	<p>Guidance</p>
<p>Duty to report the appointment of manager to service provider</p> <p>48. On the appointment of a manager in accordance with regulation 45(1), the responsible individual must give notice to the service provider of—</p> <p>(a) the name of the person appointed, and</p> <p>(b) the date on which the appointment is to take effect.</p>	<ul style="list-style-type: none"> • The responsible individual has suitable arrangements in place to: <ul style="list-style-type: none"> ○ inform the service provider of the details of the appointment of the manager; ○ provide the information specified by the Regulations concerning the individual; and ○ notify the service regulator and Social Care Wales when a new manager is appointed.
<p>Regulation 49</p>	
<p>Duty to report appointment of manager to Social Care Wales and the service regulator</p> <p>49.—(1) On the appointment of a manager in accordance with regulation 45(1), the responsible individual must give notice to Social Care Wales and the service regulator of—</p>	

- (a) the name, date of birth and Social Care Wales registration number of the person appointed, and
 - (b) the date on which the appointment is to take effect.
- (2) In a case where the service provider is an individual and the service regulator has agreed to the service provider managing the service, the service provider must give notice to Social Care Wales of—
- (a) the name, date of birth and Social Care Wales registration number of the service provider, and
 - (b) the date from which the service provider is to manage the service.

Regulation 50	Guidance
<p>Arrangements when manager is absent</p> <p>50.—(1) The responsible individual must put suitable arrangements in place to ensure that the adoption service is managed effectively at any time when there is no manager or when the manager is not present at the service.</p> <p>(2) If there is no manager or the manager is not present at the service for a period of more than 28 days, the responsible individual must—</p> <ul style="list-style-type: none"> (a) notify the service provider and the service regulator, and (b) inform them of the arrangements which have been put in place for the effective management of the service. 	<ul style="list-style-type: none"> • The responsible individual has structures in place which ensure that where the manager is not available or is absent for any reason there is an effective and competent deputising system to provide leadership on a day-to-day basis which: <ul style="list-style-type: none"> ○ continues to support individuals to achieve their personal outcomes; ○ maintains the safety, quality and effectiveness of the service; ○ ensures minimal disruption to individuals receiving the service; ○ ensures compliance with regulations; and ○ maintains staff professional development. • Where the manager, registered with Social Care Wales, is unavailable or absent for any reason for more than 28 days the responsible individual will inform the service regulator in writing and without delay of the reason for the absence and the arrangements for cover.

Regulation 51	Guidance
<p>Visits</p> <p>51.—(1) The responsible individual must—</p> <ul style="list-style-type: none"> (a) visit the premises from which the adoption service is 	<ul style="list-style-type: none"> • The responsible individual visits the service in person to monitor the performance of the service in relation to its statement of purpose and to inform the oversight and quality review. The visit includes the following:

<p>provided;</p> <p>(b) meet with members of staff who are employed to provide an adoption service from each place in respect of which the responsible individual is designated, and</p> <p>(c) meet with individuals for whom an adoption service is being provided from each such place.</p> <p>(2) The frequency of such visits and meetings is to be determined by the responsible individual having regard to the statement of purpose but must be at least every three months.</p>	<ul style="list-style-type: none"> ○ talking to, with consent and in private, individuals using the service and their representatives (if applicable) and staff. ○ inspecting the premises of the service provider, a selection of records of events and any complaints records. <ul style="list-style-type: none"> ● The responsible individual ensures systems are in place to provide evidence that visits are logged and documented.
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Requirements on responsible individuals for ensuring effective oversight of the service (Part 10)

Regulation 52	Guidance
<p>Oversight of adequate resources</p> <p>52.—(1) The responsible individual must report to the service provider on the adequacy of the resources available to provide the adoption service in accordance with the requirements of these Regulations.</p> <p>(2) Such reports must be made on a quarterly basis.</p> <p>(3) But this requirement does not apply where the service provider is an individual.</p>	<ul style="list-style-type: none"> ● The responsible individual has systems and processes in place that provide information about the service and any areas that may need closer observation/consideration and/or improvement. This includes, but is not limited to: <ul style="list-style-type: none"> ○ staff turnover; ○ staff sickness levels; ○ complaints; ○ safeguarding issues; ○ inspection reports by the service regulator, ○ inspection outcomes and or reports from Health and Safety Executive (HSE) and fire service. ● The responsible individual has suitable arrangements in place to alert the service provider immediately where the service is: <ul style="list-style-type: none"> ○ not complying with policies and procedures; ○ failing or unable to meet or address issues raised in inspection reports; and ○ providing a service not included in the statement of purpose.

Regulation 53	Guidance
<p>Other reports to the service provider</p> <p>53.(1) The responsible individual must, without delay, report to the service provider—</p> <p>(a) any concerns about the management or provision of the service;</p> <p>(b) any significant changes to the way the service is managed or provided;</p> <p>(c) any concerns that the service is not being provided in accordance with the statement of purpose for the service.</p> <p>(2) But this requirement does not apply where the service provider is an individual.</p>	<ul style="list-style-type: none"> • The responsible individual ensures suitable arrangements are in place to report to the service provider in line with the requirements of regulations 53 and 58(4). • The responsible individual has a system in place to submit reports to the service provider that accurately reflect overall service quality and performance. This includes arrangements for the responsible individual to feed back and communicate any urgent matters requiring immediate action. This includes, but is not limited to: <ul style="list-style-type: none"> ○ sudden or unexplained death of individuals using the service; ○ financial irregularities; ○ significant concerns raised by the service regulator or commissioners; and ○ any event, which affects staff availability.
Regulation 54	Guidance
<p>Engagement with individuals and others</p> <p>54.—(1) The responsible individual must put suitable arrangements in place for obtaining the views of—</p> <p>(a) individuals;</p> <p>(b) any local authority or local authority in England which has arranged for the provision of care and support by the adoption service;</p> <p>(c) persons working for the purposes of the adoption service, on the quality of care and support provided and how this can be improved.</p> <p>(2) The responsible individual must report the views obtained so that these views can be taken into account by the service provider</p>	<ul style="list-style-type: none"> • The responsible individual has suitable arrangements in place to enable feedback on all aspects of service provision and ensure that these arrangements are accessible to, and inclusive of, all those listed under regulation 54(1). • The responsible individual ensures the methods used to engage with and gain the views of individuals using the service are appropriate to their age, level of understanding and take into account any specific condition or communication need. • The responsible individual has positive relationships with, and is accessible to, people outside the service. This includes but is not limited to:

<p>when making any decisions on plans for improvement of the quality of care and support provided by the service.</p>	<ul style="list-style-type: none"> ○ Families or nominated representatives; ○ Commissioners; ○ placing authorities; ○ regulators; ○ professional bodies.
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Requirements on responsible individuals for ensuring compliance of the service (Part 11)

Regulation 55	Guidance
<p>Duty to ensure there are systems in place to record incidents and complaints</p> <p>55. The responsible individual must ensure that there are effective systems in place to record incidents, complaints and matters on which notifications must be made in accordance with regulations 9 (notification: service providers) and 62 (notifications: responsible individual).</p>	<ul style="list-style-type: none"> ● The responsible individual ensures there are suitable arrangements in place for the recording of the matters set out in regulations 9 and 62. ● The responsible individual has systems and processes in place to ensure that any records made are kept, legible and accurate.
Regulation 56	Guidance
<p>Duty to ensure there are systems in place for keeping of records</p> <p>56. The responsible individual must ensure that there are effective systems in place in relation to the keeping of records, which include systems for ensuring the accuracy and completeness of records which are required to be kept by regulation 31 (records).</p>	<ul style="list-style-type: none"> ● Where records are stored electronically, they are secure and staff have individual access codes which provide a clear audit trail which shows who has made entries and amendments.
Regulation 57	Guidance
<p>Duty to ensure policies and procedures are up to date</p> <p>57. The responsible individual must put suitable arrangements in</p>	<ul style="list-style-type: none"> ● The responsible individual ensures suitable arrangements are in place to review policies and procedures in line with regulation 32.

<p>place to ensure that the service provider’s policies and procedures are kept up to date, having regard to the statement of purpose.</p>	<ul style="list-style-type: none"> • The responsible individual ensures suitable arrangements are in place to ensure staff have access to, and knowledge and understanding of, the policies and procedures which support them in their role in achieving the best possible outcomes for individuals.
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Requirements on responsible individuals for monitoring, reviewing and improving the quality of the regulated service (Part 12)

Regulation 58	Guidance
<p>Quality of care review</p> <p>58.—(1) The responsible individual must put suitable arrangements in place to establish and maintain a system for monitoring, reviewing and improving the quality of care and support provided by the adoption service.</p> <p>(2) The system established under paragraph (1) must make provision for the quality of care and support to be reviewed as often as required but at least every 6 months.</p> <p>(3) As part of any review undertaken, the responsible individual must make arrangements for—</p> <p>(a) considering the outcome of the engagement with individuals and others, as required by regulation 54 (engagement with individuals and others);</p> <p>(b) analysing the aggregate data on incidents, notifiable incidents, safeguarding matters, whistleblowing, concerns and complaints;</p> <p>(c) reviewing any action taken in relation to complaints;</p> <p>(d) considering the outcome of any audit of the accuracy and completeness of records.</p> <p>(4) On completion of a review of the quality of care and support in</p>	<ul style="list-style-type: none"> • The responsible individual has suitable arrangements in place to assess, monitor and improve the quality and safety of the service. This includes, but is not limited to: <ul style="list-style-type: none"> ○ the collation and analysis of feedback from those listed under regulation 54(1); ○ issues and lessons learned in the analysis of complaints and safeguarding matters; ○ patterns and trends identified through the analysis of notifications, safeguarding matters, whistleblowing concerns and complaints; ○ the outcome of any inspection reports from regulators; ○ the outcome of visits to monitor the service by the responsible individual; and ○ audits of records. • The responsible individual ensures that the audit systems and processes for monitoring and reviewing the service give assurance that a high quality service is provided. • The responsible individual has suitable arrangements in place to ensure systems and processes are continually reviewed to

<p>accordance with this regulation, the responsible individual must prepare a report to the service provider which must include—</p> <p>(a) an assessment of the standard of care and support provided, and</p> <p>(b) recommendations for the improvement of the service.</p> <p>(5) But the requirement in paragraph (4) does not apply where the service provider is an individual.</p>	<p>enable the responsible individual to identify where the quality of services is being, or may be, compromised, and to respond appropriately without delay.</p> <ul style="list-style-type: none"> • The responsible individual has suitable arrangements in place to ensure all feedback is listened to, recorded and responded to as appropriate. • The responsible individual has suitable arrangements in place to ensure areas of learning from complaints, safeguarding and whistleblowing are shared with staff to improve the service and encourage safe, compassionate care practices. • The responsible individual ensures information is analysed and that recommendations are made to the service provider of how and where the quality and safety of the service can be improved. The report, which includes the information that has informed it (relating to those areas set out above) will inform or form part of the statement of compliance to be included in the service provider’s annual return.
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Regulation 59	Guidance
<p>Statement of compliance with the requirements as to standards of care and support</p> <p>59.—(1) The responsible individual must prepare the statement required to be included in the annual return under section 10(2)(b) of the Act, in so far as it relates to the place or places in respect of which the responsible individual has been designated.</p> <p>(2) When preparing the statement, the responsible individual must have regard to the assessment of the standard of care and support which is contained in a report prepared in accordance with regulation 58(4)(quality of care review).</p>	<ul style="list-style-type: none"> • The responsible individual has prepared and is accountable for the quality and accuracy of the information provided in the statement of compliance and service provider’s annual return.

Other requirements on responsible individuals (Part 13)

Regulation 60	Guidance
<p>Support for staff raising concerns</p> <p>60. The responsible individual must ensure that the provider's whistleblowing policy is being complied with and that the arrangements to enable and support people working at the service to raise such concerns are being operated effectively.</p>	<ul style="list-style-type: none"> • The responsible individual ensures suitable arrangements are in place for: <ul style="list-style-type: none"> ○ staff and individuals are aware of and understand the whistleblowing policy; ○ staff to understand there is zero tolerance for poor care or lack of concern for the well-being of individuals and that they are encouraged and supported to report issues; and ○ ensuring staff understand that concerns are welcomed and sought out, not ignored.
Regulation 61	Guidance
<p>Duty of candour</p> <p>61. The responsible individual must act in an open and transparent way with—</p> <ul style="list-style-type: none"> (a) individuals who are receiving care and support; and (b) any representatives of those individuals. 	
Regulation 62	Guidance
<p>Notifications</p> <p>62.—(1) The responsible individual must notify the service regulator of the events specified in Schedule 4</p> <p>(2) The notifications required by paragraph (1) must include details of the event.</p> <p>(3) Unless otherwise stated, notifications must be made without delay and in writing.</p> <p>(4) Notifications must be made in such manner and in such form as may be required by the service regulator.</p>	<ul style="list-style-type: none"> • The responsible individual has suitable arrangements in place to notify the service regulator of events specified in Schedule 4 of the Regulations

Chapter 5: Requirements on the local authority adoption service managers (Part 17 of the Regulations)

This chapter applies to local authority adoption service providers only. The duties of responsible individuals (RIs) for regulated adoption service providers are covered in chapter 4 of this document.

Part 17 of the Regulations describes the responsibilities which must be carried out by the manager employed by the local authority adoption service. These include responsibilities relating to the oversight of the adequacy of resources, making reports to the local authority adoption service provider, ensuring that there are systems in place to record complaints and for the keeping of records, and ensuring that policies and procedures are kept up to date. The adoption service manager must put suitable arrangements in place for engaging with individuals and staff, and is responsible for arranging quality of care reviews.

Regulation 68	Code of Practice
<p>Oversight of adequacy of resources</p> <p>68.—(1) The manager must report to the service provider on the adequacy of the resources available to provide the service in accordance with the requirements of these Regulations. (2) Such reports must be made on a quarterly basis.</p>	<ul style="list-style-type: none"> • The local authority adoption service manager has systems and processes in place that provide information about the local authority adoption service and any areas that may need closer observation/consideration and/or improvement. This includes, but is not limited to: <ul style="list-style-type: none"> ○ staff turnover; ○ staff sickness levels; ○ complaints; ○ safeguarding issues; ○ inspection reports by CIW, ○ inspection outcomes and/or reports from Health and Safety Executive (HSE) and fire service. • The local authority adoption service manager has suitable arrangements in place to alert the head of service and other relevant senior officers (of the local authority) immediately where the service is: <ul style="list-style-type: none"> ○ not complying with policies and procedures; ○ failing or unable to meet or address issues raised in inspection reports; and

- providing a service not included in the statement of purpose.

Regulation 69	Code of Practice
<p>Other reports to the local authority</p> <p>69. The manager must, without delay, report to the service provider—</p> <p>(a) any concerns about the provision of the adoption service,</p> <p>(b) any significant changes to the way the service is managed or provided, and</p> <p>(c) any concerns that the service is not being provided in accordance with the statement of purpose for the service.</p>	<ul style="list-style-type: none"> ● The local authority adoption service manager ensures suitable arrangements are in place to report to the head of service and other senior officers (of the local authority) in line with the requirements of regulations 69 and 74(4). ● The local authority adoption service manager has a system in place for the submission of reports to the head of service and other senior officers (of the local authority) that accurately reflect overall service quality and performance. This includes arrangements for the service manager to feed back and communicate any urgent matters requiring immediate action. This includes, but is not limited to: <ul style="list-style-type: none"> ○ sudden or unexplained death of individuals using the service; ○ financial irregularities; ○ significant concerns raised by the service regulator or commissioners; and ○ any event, which affects staff availability.
Regulation 70	Code of Practice
<p>Engagement with individuals and others</p> <p>70.—(1) The manager must put suitable arrangements in place for obtaining the views of—</p> <p>(a) individuals;</p> <p>(b) staff employed by the adoption service; and</p> <p>(c) any other local authority or local authority in England , on the quality of care and support provided and how this can be improved.</p>	<ul style="list-style-type: none"> ● The local authority adoption service manager has suitable arrangements in place to enable feedback on all aspects of service provision and ensure that these arrangements are accessible to, and inclusive of, all those listed under regulation 70(1). ● The local authority adoption service manager ensures the methods used to engage with and gain the views of individuals using the service are appropriate to their age, level of

<p>(2) The manager must report on the views obtained so that these views can be taken into account by the service provider when making any decisions on plans for improvement of the quality of care and support provided by the service.</p>	<p>understanding and take into account any specific condition or communication need.</p> <ul style="list-style-type: none"> • The local authority adoption service manager has positive relationships with, and is accessible to, people outside the service. This includes but is not limited to: <ul style="list-style-type: none"> ○ families or nominated representatives; ○ commissioners; ○ regulated adoption service providers; ○ regulators; ○ professional bodies.
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Regulation 71	Code of Practice
<p>Duty to ensure there are systems in place to record complaints</p> <p>71. The manager must ensure that there are effective systems in place to record complaints.</p>	<ul style="list-style-type: none"> • The local authority adoption service manager is aware of, promotes and complies with the complaints procedure in Regulation 34. • The service manager has systems and processes in place to ensure that any records made are kept, legible and accurate.

Regulation 72	Code of Practice
<p>Duty to ensure there are systems in place for keeping of records</p> <p>72. The manager must ensure that there are effective systems in place in relation to the records which must be kept in accordance with regulation 31, which include systems for ensuring the accuracy and completeness of records.</p>	<ul style="list-style-type: none"> • Where records are stored electronically, they are secure and staff have individual access codes which provide a clear audit trail which shows who has made entries and amendments.

<p>Regulation 73</p>	<p>Code of Practice</p>
<p>Duty to ensure policies and procedures are up to date</p> <p>73. The manager must put suitable arrangements in place to ensure that the service provider’s policies and procedures are kept up to date, having regard to the statement of purpose for the adoption service.</p>	<ul style="list-style-type: none"> • The local authority adoption service manager ensures suitable arrangements are in place to review policies and procedures in line with regulation 32. • The service manager ensures suitable arrangements are in place to enable staff to have access to, and knowledge and understanding of, the policies and procedures which support them in their role in achieving the best possible outcomes for individuals.
<p>Regulation 74</p>	<p>Code of Practice</p>
<p>Quality of care review</p> <p>74.—(1) The manager must put suitable arrangements in place to establish and maintain a system for monitoring, reviewing and improving the quality of care and support provided by the adoption service.</p> <p>(2) The system established under paragraph (1) must make provision for the quality of care and support to be reviewed as often as required but at least every 6 months.</p> <p>(3) As part of any review undertaken, the manager must make arrangements for—</p> <p>(a) considering the outcome of the engagement with individuals and others, as required by regulation 70 (engagement with individuals and others);</p> <p>(b) analysing the aggregated data on incidents, notifiable incidents, safeguarding matters, whistleblowing, concerns and complaints;</p> <p>(c) reviewing any action taken in relation to complaints;</p> <p>(d) considering the outcome of any audit of the accuracy and completeness of records.</p> <p>(4) On completion of a review of the quality of care and support in</p>	<ul style="list-style-type: none"> • The local authority adoption service manager has suitable arrangements in place to assess, monitor and improve the quality and safety of the service. This includes, but is not limited to: <ul style="list-style-type: none"> ○ the collation and analysis of feedback from those listed under regulation 70(1); ○ issues and lessons learned in the analysis of complaints and safeguarding matters; ○ patterns and trends identified through the analysis of notifications, safeguarding matters, whistleblowing concerns and complaints; ○ the outcome of any inspection reports from CIW; ○ the outcome of visits to monitor the service; ○ audits of records. • The local authority adoption service manager ensures that the audit systems and processes for monitoring and reviewing the local authority adoption service give assurance that a high quality service is provided. • The local authority adoption service manager has suitable

<p>accordance with this regulation, the manager must prepare a report to the service provider which must include—</p> <p>(a) an assessment of the standard of care and support provided, and</p> <p>(b) recommendations for the improvement of the service .</p>	<p>arrangements in place to ensure all feedback is listened to, recorded and responded to as appropriate.</p> <ul style="list-style-type: none"> • The local authority adoption service manager has suitable arrangements in place to ensure areas of learning from complaints, safeguarding and whistleblowing are shared with staff to improve the service and encourage safe, compassionate care practices. • The local authority adoption service manager ensures information is analysed and that recommendations are made to the head of service and other senior officers (of the local authority) of how and where the quality and safety of the local authority adoption service can be improved.
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<p>Regulation 75</p>	<p>Code of Practice</p>
<p>Support for raising concerns</p> <p>75. The manager must ensure that the services provider’s whistleblowing policy is being complied with and that the arrangements to enable and support people working at the service to raise such concerns are being operated effectively.</p>	<ul style="list-style-type: none"> • The local authority adoption service manager ensures suitable arrangements are in place for: <ul style="list-style-type: none"> ○ staff and individuals are aware of and understand the whistleblowing policy; ○ staff to understand there is zero tolerance for poor care or lack of concern for the well-being of individuals and that they are encouraged and supported to report issues; and ○ ensuring staff and individuals understand that concerns are welcomed and sought out, not ignored.

<p>Regulation 76</p>	<p>Code of Practice</p>
<p>Duty of candour</p> <p>76. The manager must act in an open and transparent way with—</p> <p>(a) individuals who are receiving care and support; and</p> <p>(b) any representatives of those individuals.</p>	

Chapter 6: Other requirements on the local authority adoption service providers (Part 18 of the Regulations)

This chapter applies to local authority adoption services only.

Part 18 of the Regulations sets out the way in which local authority adoption service providers provide their adoption services in respect to birth parents and prospective and approved adopters. It also sets out the requirements for opening a child's case record.

Regulation 77	Code of Practice
<p>Requirement to open a child's case record</p> <p>77.—(1) The service provider must set up a case record (“the child's case record”) in respect of each child and place on it—</p> <p>(a) any information and reports obtained by the local authority in respect of the child;</p> <p>(b) the child's permanence report;</p> <p>(c) any written record of any proceedings of an adoption panel under regulation 18 of the Adoption Agencies (Wales) Regulations 2005, its recommendation as to whether or not a child should be placed for adoption and the reasons for its recommendation and any advice given by the panel to an adoption agency;</p> <p>(d) any record of an adoption agency's decision and any notification of that decision under regulation 19 of the Adoption Agencies (Wales) Regulations 2005;</p> <p>(e) details of any consent by a parent or guardian of a child to placement for adoption under section 19 of the 2002 Act (placing children with parental consent);</p> <p>(f) details of any consent by a parent or guardian of a child to the making of a future adoption order under section 20 of the 2002 Act (advance consent to adoption);</p> <p>(g) any form or notice withdrawing consent under section 19 or 20 of the 2002 Act or notice given under section 20(4)(a) or (b) of the 2002 Act;</p>	<ul style="list-style-type: none"> • Service providers ensure suitable arrangements are in place to set up case records in line with regulation 77. • Adoption agencies have suitable arrangements in place to ensure all case records set up in accordance with these regulations are kept for at least 100 years from the date of the adoption order (in line with Regulations 12 or 22 of the Adoption Agencies (Wales) Regulations 2005).

<p>(h) a copy of any placement order in respect of the child; and (i) any other documents or information obtained by the local authority which it considers should be included in the case record.</p>	
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Regulation 78	Code of Practice
<p>Birth parents</p> <p>78.—(1) The service provider where it considers that adoption is the preferred option for a child, or where a child is relinquished, must provide birth parents with—</p> <p>(a) a counselling service;</p> <p>(b) as much information in relation to the child as the natural parents may reasonably require, and which the local authority is able to give;</p> <p>(c) an explanation and written information in respect of the following matters—</p> <p>(i) the procedure in respect of both placement for adoption and adoption, including the Adoption Register for Wales and any other relevant national adoption register and;</p> <p>(ii) the legal implications of—</p> <p>(aa) giving consent to placement for adoption under section 19 of the 2002 Act (placing children with parental consent);</p> <p>(bb) giving consent to the making of a future adoption order under section 20 of the 2002 Act; (advance consent to adoption);</p> <p>(cc) a placement order();</p> <p>(dd) adoption.</p> <p>(2) The service provider where it considers that adoption is the preferred option for a child, or where a child is relinquished, must ascertain the wishes and feelings of the natural parents and guardian of the child and of any other significant person the service provider considers relevant in relation to—</p> <p>(a) the matters set out in section 1(4)(f)(ii) and (iii) of the 2002 Act (matters the agency must have regard to);</p>	<ul style="list-style-type: none"> • Service providers have arrangements in place for working with and supporting birth parents and birth families (including siblings) both before and after adoption. This includes providing information about local and national support groups and services and helping birth parents to fulfil agreed plans for contact.

<p>(b) the placement of the child for adoption and their adoption, including any wishes and feelings about the child's religious and cultural upbringing;</p> <p>(c) contact with the child if the local authority is authorised to place the child for adoption or the child is adopted.</p> <p>(3) This paragraph applies where the father of the child or woman who is a parent of the child by virtue of section 43 of the Human Fertilisation and Embryology Act 2008 does not have parental responsibility for the child and that person's identity is known to the local authority.</p> <p>(4) Where paragraph (3) applies and the service provider is satisfied it is appropriate to do so the service provider must ascertain so far as possible whether the father or woman who is a parent by virtue of section 43 of the Human Fertilisation and Embryology Act 2008—</p> <p>(a) wishes to acquire parental responsibility for the child under section 4 or 4ZA of the Children Act 1989; or</p> <p>(b) intends to apply for a child arrangements order with respect to the child under section 8 of the Children Act 1989, or where the child is subject to a care order, an order under section 34 of the Children Act 1989 (parental contact with children in care).</p>	
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Regulation 79	Code of Practice
<p>Prospective and approved adopters</p> <p>79. The service provider must—</p> <p>(a) have written plans on its strategy to recruit sufficient number of adopters;</p> <p>(b) have comprehensive plans for preparation and approval processes for adopters contained within its policies and procedures;</p> <p>(c) provide prospective adopters with written information about the adoption process including information about—</p> <p>(i) the policy and procedures in respect of the adoption</p>	<ul style="list-style-type: none"> • Service providers have written plans for the implementation and evaluation of effective strategies to recruit sufficient adopters to meet the needs of the range of children waiting for adoption locally • Service providers have clear written information about the matching, introduction and placement process, as well as any support to facilitate this that prospective or approved adopters may need.

process;

(ii) arrangements for the assessment of and the provision of care and support;

(iii) the Adoption Register for Wales and any other relevant national adoption register;

(iv) local and regional arrangements.

(d) provide assistance where disruption of a placement has occurred or is in danger of occurring, which includes the use of mediation and meetings.

- Service providers make available the written eligibility criteria, information on becoming an adoptive parent and what is expected of adopters.
- Service providers have arrangements in place for when the placement or adoption disrupts and provide support for those effected.

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