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Guidance

Social care common inspection framework (SCCIF): adoption support agencies

Updated 5 April 2024

Applies to England

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Introduction

The social care common inspection framework (SCCIF) applies to inspections of:

- children's homes
- secure children's homes
- independent fostering agencies
- boarding schools and residential special schools
- voluntary adoption agencies
- adoption support agencies
- residential family centres
- residential holiday schemes for disabled children
- residential provision in further education colleges

The SCCIF means that:

- we apply the same judgement structure across the range of settings listed above
- the experiences and progress of children and other service users, wherever they live or receive help, are central to inspections
- there are key areas of evidence that we usually report on at each inspection

The SCCIF is not a 'one-size-fits-all' framework. When it's necessary, the SCCIF reflects and addresses the unique and distinct aspects of each type of setting. However, the evaluation criteria we use to make judgements and the accompanying guidance are, wherever possible, consistent across settings.

The inspection principles

[Ofsted's corporate strategy](#) outlines how we will carry out inspection and regulation that are:

- intelligent
- responsible
- focused

Our approach is further underpinned by the following 3 principles that apply to all social care inspections.

To focus on the things that matter most to children's lives

We have reached a general consensus with the main social care stakeholders that social care inspections should focus on the experiences and progress of children. We regularly ask children, and the adults who look after them, what matters most about children's experiences and progress.

Using this to guide us, we focus the criteria for our judgements on the difference that providers are making to children's lives. Adults can only support children well if they're given the time, resources and information they need to do this, so we also take account of the quality of the support that the adults who care for children receive.

To be consistent in our expectations of providers

It's important that professionals and members of the public can compare services that do similar things. We make this possible by being consistent in what we expect from providers.

We use the same judgement structure and the same evaluation criteria, wherever possible, irrespective of where children live or receive help.

Our inspection methods and published guidance only differ when there is a good reason. This includes taking a similar approach to deciding on the frequency of inspections.

To prioritise our work where improvement is needed most

We are committed to inspecting in a way that focuses our resources where they are needed most. If leaders and managers have shown that they can consistently deliver services for children well, we may decide to return less often or do a more proportionate inspection.

However, we always take into account the risk to children of not inspecting as frequently. We use a broad range of information to tell us whether standards are slipping. We are always able to go back to good and outstanding providers more quickly if we have concerns.

The focus of inspections

The SCCIF has a consistent and clear focus on evaluating the impact of care and support on the experiences and progress of children, largely through case tracking and sampling. This means that:

- inspectors spend less time looking at policies and procedures and more time looking at the impact of services on children's lives
- we give the minimum notice of inspection, so that we can see settings as they are on a day-to-day basis, and so that the time providers may spend preparing for inspection is reduced as much as possible
- we have set out as clearly as possible the details of the information required by inspectors to assist their inspection; this will enable providers to produce their best evidence whenever we give notice of inspection

Since the introduction of the [Adoption Support Agencies \(England\) \(Amendment\) Regulations](#) in December 2023, adoption support agencies are no longer required to register with Ofsted if:

- they are working under contract with an adoption agency
- they are providing adoption-related counselling services to adults aged 18 and over, other than counselling provided in the context of intermediary services

Inspections no longer consider practice that falls under these regulatory exemptions.

When applying this guidance, inspectors will take appropriate action to comply with Ofsted's duties under the Equality Act 2010.

How inspectors make judgements under the SCCIF

Judgement structure

Our judgement structure stems from our first principle of inspection – to focus on the things that matter most to children’s lives – and places the progress and experiences of children and other people who use children’s services at the core of inspections.

All SCCIF inspections follow the 4-point scale (outstanding, good, requires improvement to be good and inadequate) to make judgements on the overall experiences and progress of children, taking into account:

- how well children are helped and protected
- the effectiveness of leaders and managers

Inspections of adoption support agencies, voluntary adoption agencies and residential family centres also look at, as appropriate, the experiences of adult service users. In inspections of adoption support agencies, the term ‘other service users’ refers to adults who are accessing intermediary services only.

The judgement about how well children are helped and protected is a limiting judgement. This means that, if inspectors judge this area to be inadequate, then the ‘overall experiences and progress’ judgement will always be inadequate.

The judgement of the effectiveness of leaders and managers is a graded judgement. If inspectors judge this area to be inadequate, this is likely to lead to a judgement of inadequate, and certainly no more than requires improvement to be good, for ‘overall experiences and progress’.

Inspectors will make the limiting and graded judgements first so that they can take these into account for the ‘overall progress and experiences’ judgement.

How inspectors use the evaluation criteria

Inspectors will use the descriptions of what ‘good’ looks like as the benchmarks against which to grade and judge performance. The judgement, however, is not derived from a checklist. It is a professional evaluation of the effectiveness and impact of the care and support provided on the experiences and progress of children. Failure to meet all of the criteria for good will not automatically lead to a judgement of requires improvement to be good.

Some criteria will have less relevance than others in some settings because of the nature of the setting and the needs of the children.

Even when all the criteria are relevant, there is always a degree of professional judgement in weighing and balancing evidence against the evaluation criteria.

The inspector judges a setting to be good if they conclude that the evidence sits most appropriately with this finding. We call this the ‘best fit’.

The evaluation criteria for SCCIF inspections are broadly consistent across different types of setting but, where necessary, they have been adapted to reflect the varying and unique nature of each type of provision.

Required evidence

Inspectors look at several areas of required evidence for each judgement. Some areas are common to all SCCIF inspections, but others are specific to the specific type of provision. The areas of required evidence are set out in the bullet points at the beginning of the evaluation criteria for each judgement.

Evaluation criteria

Inspectors use the following criteria to make judgements, including benchmarks of what good looks like.

The overall experiences and progress of children and adults

Areas of required evidence are:

- the quality of individualised support provided and the influence and impact of the provider on the progress and experiences of children and other service users
- the quality of relationships between professionals and children, other service users and key individuals
- how well the views of children and other service users are understood and taken into account

Good

The experiences and progress of children and other service users are likely to be judged good if there is evidence of the following:

Children and other service users are enabled to build trusted and secure relationships with staff. Children and other service users view the help they receive positively.

Children and other service users, including those who communicate non-verbally, are supported to actively participate in day-to-day and more complex decisions about their lives, as appropriate. They are sensitively helped to understand where it may not be possible to act on their wishes and why other action is taken that is in their best interests.

Children and other service users know how to complain. The agency's complaints policy is easy to understand, accessible and focused on the needs of service users, who understand what has happened as a result of their complaint. Their complaints are treated seriously and are responded to clearly. Urgent action is taken and practice and/or services improve accordingly.

Any specific type or model of support delivered or commissioned by the agency is provided by staff who are suitably trained, experienced, qualified and supervised. The benefits of this to children and other service users are clearly evident. The support is reviewed regularly.

Children and other service users are helped to develop skills and strategies to manage their own conflicts and difficult feelings through developing positive relationships with staff.

Children and other service users are treated with dignity and respect. They experience help that is sensitive and responsive to their identity and family history, including age, disability, faith or belief, sex, gender identity, language, race and sexual orientation. Where relevant, the support helps them to develop a positive self-view and to increase their ability to form and sustain attachments and to build emotional resilience and a sense of their own identity. It also helps them to overcome any previous experiences of neglect and trauma.

The agency always places the well-being of individual children and other service users at the centre of its practice. Staff understand the potential impact of adoption on people's lives.

Adoption support, including intermediary services for adopters' own children, is sensitive to service users' individual circumstances and meets their needs. It is well organised and accessible and has a positive impact on their lives. Work promotes family stability and supports people to understand the impact of adoption on their lives and their family and, if appropriate, the potential outcomes of a search or a reunion with a member of their family.

Assessments are effective and the intended objectives of individual pieces of adoption support work are clear and agreed with service users and, if possible, with children. The outcomes of each piece of work are evaluated, recorded and understood.

Requires improvement to be good

The experiences and progress of children and other service users are likely to be judged requires improvement to be good if there is evidence of the following:

The agency is not yet delivering good support for children and other service users. The weaknesses identified need to be addressed to fully support children and other service users' progress and experiences and to mitigate risk in the medium and long term. However, there are no serious or widespread failures that result in children and other service users' welfare not being safeguarded and promoted.

Inadequate

The experiences and progress of children and other service users are likely to be judged inadequate if there is evidence of the following:

There are serious or widespread failures that mean children and other service users are not protected, or their welfare is not promoted or safeguarded, or their support and experiences are poor and they are not making progress.

Outstanding

The experiences and progress of children and other service users are likely to be judged outstanding if, in addition to meeting the requirements of a good judgement, there is evidence of the following:

Professional practice consistently exceeds the standard of good and results in sustained improvement to the lives of children and other service users even where children and other service users have complex or challenging needs. There is improvement for children and other service users because of the support provided by the agency. Staff are able to evidence the sustained benefit they have had in making a difference to the lives of children and adults with the most complex needs. There are examples of excellent practice that are worthy of wider dissemination.

Research-informed practice, some of which may be innovative, continues to develop from a strong and confident base, making an exceptional difference to the lives and experiences of children and other service users.

How well children and adults are helped and protected

Areas of required evidence are:

- how well risks are identified, understood and managed and whether the support provided helps children and other service users to become increasingly safe, taking account of their individual circumstances and previous experiences, where this is the focus of the work
- how well carers are prepared and supported to respond to children who may go missing or may be at risk of harm, including from exploitation, neglect, abuse, self-harm, bullying and radicalisation
- how well carers are prepared and supported to manage situations and behaviour and whether clear and consistent boundaries contribute to a feeling of well-being and security for children
- whether safeguarding arrangements to protect children meet all statutory and other government requirements, promote their welfare and prevent radicalisation and extremism

Good

The help and protection offered to children and other service users are likely to be judged good if there is evidence of the following:

Children and other service users receiving support feel protected and are protected from harm. There is a strong and proactive response from all those working with children and other service users that reduces the actual harm or the risk of harm to them, including from self-harm. Where relevant, that response includes regular and effective contact and planning with the child's allocated social worker and their family.

Children and other service users who use the service report that staff listen to them, take their concerns seriously and respond appropriately.

Careful recruitment and regular monitoring of staff prevent unsuitable people from being recruited and from having the opportunity to harm children or vulnerable service users, or to place them at risk. The recruitment and training of staff have a strong focus on keeping children and other service users safe. The relevant authorities are informed of any concerns.

Staff know and follow procedures for responding to concerns about the safety of a child or other service users. Where appropriate, child or adult protection concerns are immediately shared with the commissioning and/or host local authority and a record of that referral is retained.

There is evidence that staff follow up the outcome of the referral quickly and that appropriate action has been taken to protect children or other service users from further harm. Where the agency is not satisfied with the response from either the local authority where the setting is situated or the commissioning authority, it escalates its concerns appropriately, including by writing to the director of children's services (DCS) in the relevant local authority.

Allegations or suspicion of harm, including those relating to historic abuse, are shared with the appropriate agencies and are handled fairly, quickly and in accordance with statutory guidance. Children and vulnerable service users are supported and protected.

The agency has effective links with local authorities, designated officers and other key safeguarding agencies. There is good communication about safeguarding issues, such as any concerns relating to current or historical abuse. The agency has good relationships with relevant local voluntary sector organisations that may be able to offer specialist support to children or vulnerable adults in keeping themselves safe.

Effective adoption support ensures that adopters continue to understand the potential impact of abuse and neglect on their adopted child as they grow older.

Requires improvement to be good

The help and protection offered to children and other service users are likely to be judged requires improvement to be good if there is evidence of the following:

Children and other service users are not yet receiving good help and protection, but there are no serious failures to leave them harmed or at risk of harm.

Inadequate

The help and protection offered to children and other service users are likely to be inadequate if there is evidence of the following:

There are serious or widespread failures that leave children and other service users being harmed, at risk of harm or with their welfare not safeguarded.

Outstanding

The help and protection offered to children and other service users is likely to be judged outstanding if, in addition to the requirements of a good judgement, there is evidence of the following.

Professional practice results in sustained improvement to the lives of children and other service users.

Proactive and creative safeguarding practice means that all children and other service users, including the most vulnerable, have a strong sense of safety and well-being as a result of the support received.

Research-informed practice, some of which may be innovative, continues to develop from a strong and confident base, making an exceptional difference to the lives and experiences of children and other service users receiving support.

The effectiveness of leaders and managers

Areas of required evidence are:

- whether leaders and managers show an ambitious vision, have high expectations for what all children and other service users can achieve and ensure high standards of adoption support
- how well leaders and managers prioritise the needs of children and other service users
- the extent to which children and other service users make progress from their starting points as a result of the adoption support they receive
- whether leaders and managers provide the right supportive environment for staff through effective supervision and appraisal and high-quality induction and training programmes, tailored to the needs of the children and other service users receiving support
- how well leaders and managers know and understand the agency's strengths and weaknesses, to prevent shortfalls, identify weaknesses and take decisive and effective action
- whether the agency is achieving its stated aims and objectives
- the extent to which leaders and managers actively promote tolerance, equality and diversity

If an adoption support agency is an individual, the inspection will focus on the relevant parts of these grade descriptors. In most instances 'leaders and managers' or 'staff' can be replaced with the 'registered person'.

Good

The effectiveness of leaders and managers is likely to be judged good if there is evidence of the following:

The agency is managed effectively and efficiently by a permanent, suitably experienced and qualified registered manager or individual registered provider. Urgent action is taken to address any vacancy of the registered manager post.

The agency is properly staffed and resourced to meet the needs of service users. Staff are suitably vetted and qualified and are able to deliver high-quality services. Arrangements for recruitment and appraisals are robust.

Leaders and managers regularly monitor the quality of the services provided. They use learning from practice and feedback to improve the experiences of children and other service users. This includes, for example, direct testimony from children, other service users, parents, adopters and other professionals. They identify strengths and areas for improvement and implement development plans that continually improve the experiences of those receiving adoption support.

Robust action is taken to address all issues of concern, including any concerns or complaints from those receiving adoption support. Proper investigations are carried out. Effective action has been taken to address all requirements and recommendations from previous inspections.

Leaders and managers take steps to ensure that plans for those receiving adoption support comprehensively address their needs. The agency works proactively and positively with commissioners and partner organisations. Leaders and managers seek to build effective working relationships with social workers from commissioning authorities to secure positive outcomes for children and other service users.

Leaders and managers understand the plans for the children and other service users and drive the achievement of important milestones, goals and, where appropriate, permanence for children's futures.

Leaders and managers monitor the progress that services users make and can

demonstrate the positive impact that adoption support has had on their progress and life chances.

Managers and staff receive regular and effective supervision that is focused on children and other service users' experiences, needs, plans and feedback. Supervision is recorded effectively.

Staff and leaders receive effective support and challenge, including through team and management meetings, to ensure that the professional development of staff and leaders results in the right environment for good practice to thrive. The emotional impact on staff of the work is recognised and managed well by leaders and managers.

Training, development and induction activities are effective and focused on ensuring that staff meet the needs of all those receiving support. Activities are evaluated to ensure that they lead to effective practice. Leaders, managers and staff are up to date with current practice in their specialist area.

Staff work collaboratively to provide consistency and stability. There are clear responsibilities and accountabilities and staff have a sense of shared ownership about their practice. Staff report that they are well led and managed and there is other evidence to support this.

Leaders and managers' decisions about the help provided prioritise the safety and stability of the lives of children and other service users.

The statement of purpose and children's guide, which are kept under review, clearly set out the ethos and objectives of the agency.

The registered provider is financially viable and can deliver high-quality, stable adoption support to children and other service users.

Case records reflect the work that is carried out and clearly relate to the experiences of

children and other service users. The style and clarity of records increase the understanding that children and other service users have about their histories, background and experiences. The records are available to children and service users, who are able to see or contribute to them as they wish, with appropriate support.

All significant events that relate to the welfare and protection of children and vulnerable service users are notified by the registered person to the appropriate authorities. Necessary action is taken following the incident to ensure that the service user's needs are met and that the service user is safe and protected.

The culture of the agency is characterised by high expectations and aspirations for all service users. The ethos and objectives of the agency are demonstrated in practice.

Requires improvement to be good

The effectiveness of leaders and managers is likely to be judged requires improvement to be good if there is evidence of the following:

The characteristics of good leadership and management are not in place. Where there are weaknesses in practice, leaders and managers have identified the issues. They have plans in place to address them or they are less serious and there is capacity to take the necessary action.

Inadequate

The effectiveness of leaders and managers will be judged inadequate if there is evidence of the following:

The experiences, progress or protection of children and adult service users are inadequate, and leaders and managers do not know the strengths and weaknesses of the agency. They have been ineffective in prioritising, challenging and making improvements.

The agency fails to work effectively in partnership with others in the best interests of children and other service users.

The failure to appoint a manager after 26 weeks where there is no or limited evidence of attempts

to recruit/appoint, will usually lead to an inadequate judgement for leadership but never more than requires improvement. Also, the overall judgement is unlikely to be better than good.

If a manager fails to apply to be registered, once appointed for more than 12 weeks, then the judgement for leadership and management will usually be inadequate.

Outstanding

The effectiveness of leaders and managers is likely to be judged outstanding if, in addition to meeting the requirements of a good judgement, there is evidence of the following:

Leaders and managers are inspirational, confident and ambitious for children and other service users.

Leaders and managers create a culture of high aspiration and positivity and have high expectations of their staff.

Leaders and managers lead by example and innovate and generate creative ideas to sustain the highest quality care for children and other service users.

Leaders and managers know their strengths and weaknesses well and can provide evidence of improvement over a sustained period.

Leaders and managers develop and maintain professional relationships between the agency and partner agencies to ensure the best possible care, experiences and futures for children and other service users.

Legal context

Under the [Education and Inspections Act 2006](#), Ofsted carries out its work in ways that encourage the services it inspects and regulates to:

- improve
- be user-focused

- be efficient and effective in the use of resources

Section 5(1A) of the [Care Standards Act 2000](#) provides that His Majesty's Chief Inspector (HMCI) is the registration authority for adoption support agencies and other establishments and agencies to which Part 2 of that Act applies.

The Care Standards Act sets out Ofsted's powers to regulate, inspect and enforce compliance with the statutory requirements and relevant regulations. The Adoption and Children Act 2002 defines an adoption support agency (section 8).

When inspecting adoption support agencies, Ofsted considers the knowledge and understanding gained from previous inspections, and the:

- [Care Standards Act 2000](#)
- [Adoption and Children Act 2002](#)
- relevant regulations and [adoption national minimum standards](#)
- [adoption statutory guidance](#)

How inspectors use national minimum standards

Adoption support agencies must meet the requirements of the regulations. If they do not, inspectors identify clearly what agencies must do by setting requirements or compliance or enforcement action.

The Department for Education (DfE) has published [national minimum standards \(NMS\)](#). If providers do not meet these, it may indicate a failure to meet the regulations.

Inspectors consider:

- the impact on children and other service users
- how it should influence the inspection judgement, which may result in requirements being imposed and/or enforcement action being taken

A failure to meet a regulation does not automatically lead to a judgement of requires improvement to be good.

Requirements may still be made when providers are judged to be good.

We use recommendations to indicate where practice can improve. These are always related to the relevant NMS and regulation/s.

Notice of inspection

Adoption support agencies are usually notified of an inspection 10 working days before the

inspection. If the adoption support agency is a single individual, they are notified 20 working days before the inspection.

We email the [letter of notice](#) to the agency. The lead inspector follows this up with a telephone call to the agency. The letter sets out practical arrangements for the inspection, including the information requirements. The inspector's follow-up telephone call (and other calls between the agency and inspector that may be necessary during the period of notice) provides the opportunity to discuss further the plans for the inspection, including the inspection timetable.

We ask agencies to give the inspector access to premises, records and space for the inspector to work. Inspectors may need some help to navigate the system if records are electronic. Agencies do not need to provide files in hard copy unless these are already used, although the inspector may ask for specific reports or documents to be printed.

Request for information at an inspection

When notification of an inspection is given, inspectors send by email to the provider:

- the [adoption support agencies inspection pre-inspection information form](#)
- the [adoption support agencies inspection: case list form](#)

The inspector agrees with the agency when the completed forms will be available. This information is requested under [section 31 of the Care Standards Act 2000](#). It supports the inspection process and informs the inspection findings. It may generate additional lines of enquiry.

Providers can download a copy of the forms and keep these updated in preparation for their inspection. They can send these to the inspector electronically during the inspection. Some of the information is stored by Ofsted for data analysis purposes. No personal data is stored.

The inspector will also provide a letter, which is for the provider/manager to email/send to all staff who work at the agency. It provides contact details of the inspector(s) should staff wish to contact them during the inspection.

Scheduling and the inspection team

Frequency of inspection

We inspect adoption support agencies at least once in each 3-year inspection cycle as set out in [\(His Majesty's Chief Inspector of Education, Children's Services and Skills \(Fees and Frequency of Inspections\) \(Children's Homes etc.\) Regulations 2015 \(SI 2015/551\)\)](#).

We operate a rolling 3-year programme of inspection for each adoption support agency. This

means that, rather than a static 3-year cycle where all agencies are inspected within each 3-year window, each agency will usually be inspected in the 3-year period following its individual inspection. The 3-year period begins on the 1 April in the year following its individual inspection. For example, for agencies inspected between April 2021 and March 2022, a new 3-year cycle begins on 1 April 2022.

We usually reinspect agencies that are inadequate within 6 to 12 months of their previous inspection. We usually return to inspect agencies that require improvement within 12 to 18 months.

We normally inspect an adoption support agency for the first time between 7 and 12 months from the date of its registration, unless no children or adults receive services from the agency.

Scheduling

The scheduling of inspections takes into account:

- legal requirements
- previous inspection findings
- complaints and concerns about the service
- questionnaire responses from children, foster carers, social workers and other stakeholders
- notifications
- monitoring reports given to Ofsted by adoption support agencies under [regulation 24 of The Adoption Support Agencies \(England\) and Adoption Agencies \(Miscellaneous Amendments\) Regulations 2005](#)

Where possible, the same inspectors will not inspect an agency for more than 3 consecutive inspection cycles. However, in certain instances, for example, if Ofsted is taking enforcement action, it may be important for continuity purposes to retain the same inspectors until the enforcement action has finished.

Length of inspection

For a full inspection of an adoption support agency, 1 inspector usually spends 2 days on site, which may be spread over 3 days. If an adoption support agency is a single person working from their home address, the time on site is likely to be reduced.

The inspector and the regulatory inspection manager (RIM) should determine how best to allocate resources for inspections. If it is necessary, the RIM should agree to either the inspector spending additional days on site or additional inspectors being deployed on the inspection.

Inspectors should determine whether:

- the amount of time on site should be reduced for inspections of small adoption support

agencies

- additional resources, such as more inspectors or more time, or both, should be deployed for inspections of larger agencies, for agencies with a wide geographical spread or where there are specific issues, such as a serious incident, to consider

Deferrals

While it is important that we carry out our planned inspections wherever possible, we understand that sometimes there may be reasons that this is not possible. A provider may request a deferral of an inspection during the initial notification phone call. We will decide whether to grant the deferral in line with our [deferral policy](#). We make these decisions on a case-by-case basis.

Timeframe

Day Full inspection activity

-	The notice of inspection is 10 working days before an inspection is due to begin, or 20 working days if the agency is a single individual.
1	Inspector preparation
2	Half a day on-site visit*
3	Site visit
4	Half a day on-site visit*
5 to 8	Report writing, inspection evidence and report submitted for quality assurance
22	Draft report sent to the registered provider within 18 working days from the end of the inspection. The provider then has up to 5 working days to send in comments on the draft report or submit a formal complaint
27	Provider returns the report with comments or submits a formal complaint within 5 working days
34	Final report sent to the registered provider within 30 working days of the end of the visit (longer if there has been a complaint)
39	The final report will be published on the Ofsted reports website 5 days after it is sent to the provider

* The 2 half days on site may be combined to 1 day, so 2 whole days are spent on site.

Figure 1: Ofsted's post-inspection and complaints procedure



[View this information in an accessible format.](#)

Preparing for an inspection

Analysis and planning

Inspectors are allocated 1 day to prepare for an inspection of an adoption support agency. They should use this time to review the information held by Ofsted and to ensure that the fieldwork is properly focused and used to best effect in collecting first-hand evidence.

Inspectors will look at the information that Ofsted already holds about the agency, including:

- previous inspection reports
- pre-inspection data submissions from the agency
- updated data and case lists submitted by the adoption support agency following notice of the inspection
- reports made under NMS 25 (not required for individual providers)
- completed questionnaires from children, their parents and other service users
- the up-to-date statement of purpose and children's guide
- concerns and complaints made to Ofsted
- notifications of significant events made to Ofsted
- any changes to registration, including change of manager
- the content of the provider's website
- any enforcement activity within the last inspection year

Some of this information is drawn together in the provider information portal and in the pre-inspection briefing.

The inspector should always familiarise themselves with relevant background and context information, such as the most recent inspection of the local authority where the agency is situated.

If we have received information that indicates potential non-compliance with regulatory requirements, we may use the information as a line of enquiry during the inspection. The inspector usually outlines the concern to the registered person(s) or person in charge of the adoption support agency at the beginning of the inspection. There may be circumstances where it is not appropriate to share all the information about a concern: for example, where the allegation is

about the registered person or person in charge themselves, or where sharing the information could compromise an investigation being carried out by another agency, such as the police.

The inspector analyses the evidence and information and records their planning notes on the inspection database.

The plan for the inspection should identify:

- lines of enquiry
- any areas of apparent weakness or significant strength
- areas where further evidence needs to be gathered

The focus of the inspection may change during its course as further evidence emerges.

Questionnaires

Each year, Ofsted uses [online questionnaires](#) to gather a range of views about different types of setting. Where relevant, this includes the views of:

- children
- parents and carers
- staff
- other service users
- any other interested parties

We send links to the questionnaires annually to each provider by email and ask them to distribute those links on our behalf. The responses are submitted directly to Ofsted.

We share responses with the inspector for the service or setting and use them to inform the planning and scheduling of inspections.

Where there are no responses for a service or setting, this also forms a line of enquiry for the inspection.

Notifications and reports made under national minimum standard 25

Inspectors must regularly review notifications and reports under [NMS 25](#). Inspectors must focus on both the content and quality of the reports as part of their evaluation of how well the agency monitors its impact on the experiences of service users.

Information from any of these sources may lead to:

- further activity, such as speaking to the registered manager and/or individual registered provider or other stakeholders

- inspections being rescheduled based on either identified concerns within reports and/or notifications; or on a failure to submit reports or notifications
- lines of enquiry for the next inspection; emerging lines of enquiry must be noted in the inspection database and inform pre-inspection planning

Notifications

Registered persons (providers and managers) must notify Ofsted without delay about specific events and incidents as set out in [regulation 24\(1\) of the Adoption Support Agencies \(England\) and Adoption Agencies \(Miscellaneous Amendments\) Regulations 2005](#). [Schedule 4](#) lists the specific events.

[Online forms and further guidance](#) about notifications are available. Agencies should always seek advice from their link inspector about individual cases if they are uncertain.

If the inspector identifies issues that give them cause for concern about the welfare of children, they should ask for evidence that shows what has been done to help and protect the child.

If notifications are incomplete, the inspector should always contact the agency or ask for more information.

Whenever there are concerns about the safety or welfare of a child or other service user, the inspector must contact the agency's manager. Ofsted must be fully aware of what is being done by the agency and other relevant parties, such as the host authority and police, to promote and safeguard the welfare of the child or service user.

Managers and staff should take into account the appropriate parts of the statutory guidance outlined in [Working together to safeguard children](#).

If the inspector identifies any concern that relates to another adoption agency or a local authority, they must notify the responsible individual/DCS of the concern immediately so that they can review the situation. We will also consider this information when planning any forthcoming local authority/adoption agency inspection.

If the inspector identifies any concerns related to another agency, local authority or regulated service, they will share the information with the relevant regulator. Where Ofsted is the relevant inspectorate, we will consider this information when planning forthcoming inspections.

Reports made under national minimum standard 25

NMS 25.6 states that the executive side of the adoption support agency's trustees, board members or management committee members should:

- receive written reports on the management, outcomes and financial state of the agency every 6 months
- monitor the management and outcomes of the services in order to satisfy themselves that the service is effective and is achieving good outcomes for children and service users
- satisfy themselves that the agency complies with the conditions of registration

We ask for these reports to be submitted to Ofsted once a year based on data for the year 1 April to 31 March.

Individual providers do not need to make reports under this standard.

As part of the pre-inspection preparation, inspectors consider the NMS 25 reports and any emerging lines of enquiry are included in the inspection plan.

Reports can also be emailed to enquiries@ofsted.gov.uk. They must include Ofsted's unique reference number (URN) and the date on which the visit occurred.

The on-site inspection

Inspectors will plan for inspections to be on site. However, agencies' ways of working (for example, staff working from home and/or offices being temporarily closed) are likely to lead to some off-site inspection activity. This may include conversations with staff, children and other service users. Inspectors will prioritise carrying out inspections on site wherever possible.

The timing and the proportion of off-site and on-site activity are determined by the agency's working arrangements and by the information we already hold about the agency. Whatever the working arrangements may be, inspectors will arrange face-to-face meetings when this is necessary to secure the best evidence.

The start of the inspection

At the heart of our inspections is a constructive, respectful and empathetic dialogue between inspectors and providers.

At the start of all SCCIF inspections, the inspector confirms their identity by producing their Ofsted inspector identification. They do not need to carry paper copies of Disclosure and Barring Service (DBS) checks.

The inspector always meets with the registered manager/person in charge at the beginning of the inspection to:

- outline the plan for the inspection
- arrange to interview the registered manager or individual registered provider during the course of the inspection; if the registered manager is unavailable and the registered provider is also unavailable to attend the inspection, the provider should identify a suitable representative
- outline any lines of enquiry for the inspection
- provide the opportunity for the agency to share any current information or personal issues relating to any children, other service users or staff members that the inspector needs to be aware of during the inspection
- ensure that Ofsted holds the correct details on the inspection database, including email address and contact telephone numbers for the agency
- arrange the approximate time that verbal feedback at the end of the inspection will be given and

who is to receive this; feedback is normally given to the registered manager or individual registered provider; a senior member of staff linked to the agency may also attend at the discretion of the inspector if agreed in advance

- check the registered manager's/person in charge's welfare, and whether any steps need to be taken to ensure their well-being. The inspector should ascertain how to contact whoever is responsible for the registered manager's/person in charge's welfare on a day-to-day basis, so that they can pass on well-being concerns when appropriate and necessary
- provide an opportunity to raise any issues or concerns, or to seek clarification about the inspection, and explain how the provider can raise any matters during the inspection itself
- provide an opportunity for the registered manager to discuss and/or give us information on potential equalities duties, including reasonable adjustments for individuals

Inspectors will agree a process for keeping managers informed of progress throughout the inspection. This will normally mean regular meetings with managers to enable them to raise concerns or seek clarification. Inspectors will inform managers if there is evidence that the service may be judged inadequate. They will emphasise that final judgements are not made until the feedback meeting at the end of the inspection.

If the inspection has been prompted by our receiving information about a concern or allegations, the inspector should explain to the registered manager or person in charge of the agency the nature of that information. This is so that the manager is fully aware of the concerns. This also provides an opportunity for the manager to provide additional information and for the inspector to be as open with them about the information as possible. If the information is from a whistle-blower or from someone who wishes to remain anonymous, then the inspector must take the utmost care to ensure that the person's identity is not revealed.

Case tracking and sampling

Evaluating the experiences and progress of children and other service users is a core inspection activity. This is largely based on evidence from case tracking and sampling.

For tracked cases, inspectors take an in-depth look at the quality of the help and protection that individual children and other service users have experienced. For sampled cases, inspectors look at elements of practice within individual cases, usually to follow lines of enquiry.

We consider it very important that children and other service users experience high-quality help and care and make progress.

We take into account individuals' starting points and circumstances during inspections. We recognise that even slight progress in a particular aspect of their lives may represent a significant improvement for some children and other service users. We also recognise that for some service users, because of their experiences of trauma, abuse or neglect, progress is not always straightforward. Progress in one area may result in deterioration in another as they work through the impact of their past experiences.

Children and other service users' overall experiences and progress are, in part, a result of how well they are helped and protected and the effectiveness of leaders and managers. Inspectors

consider the 'help and protection' and 'leadership and management' judgements first so that they can take these into account when reaching the 'overall experiences and progress' judgement.

Inspectors track the experiences and progress of at least 4 children and/or other service users across the range of the adoption support agency's work. This can be reduced to 2 in an adoption support agency that has worked with fewer than 10 children and/or other service users or increased to at least 6 in larger agencies.

Inspectors also sample elements of other cases to follow specific lines of enquiry.

The size of the agency and the nature of any line of enquiries determine how many cases are sampled.

Tracked and sampled cases should be selected by the inspector from the case list provided.

Case files (either electronic or paper-based) are usually discussed with the allocated social worker (unless on leave), using their knowledge of the case, file structure and recording systems. In the absence of the allocated worker, a suitable colleague will be asked to assist.

Case records are only one aspect of tracking children and other service users' journeys. Inspectors increase their understanding of service users' experiences through evidence from other sources, such as observation of practice and discussions with individuals involved.

Inspectors examine, discuss and evaluate cases in line with the evaluation criteria. Inspectors will seek evidence that the agency has had a positive impact on the experiences and progress of service users and that managers and staff know they are making a difference to the lives to children and other service users.

The detail of activities carried out and discussions held varies depending on the lines of enquiry for each individual inspection.

Inspectors must record the initials of children, professionals or carers who have been tracked, sampled and/or interviewed as part of an inspection within the evidence base.

Listening and talking to children

The views and experiences of children and other service users provide important evidence of their experiences and progress.

Inspectors assess how well the agency consults with children and other service users. The views gathered by the agency are taken into account as part of the inspection evidence.

Inspectors always try to meet with children and other service users during the inspection. Inspectors may make alternative arrangements, such as telephone calls at a pre-arranged time. Sometimes, inspectors will spend time observing activities and situations where children or other service users are present rather than engaging in direct communication with them. This is to limit any stress caused to children and other service users. These approaches will be discussed throughout the inspection as necessary.

Many of the experiences of children and other service users take place after the normal school, college or work day and it is essential that inspectors are able to speak to people at this time. Inspectors should involve children and other service users in inspection activity where possible. Opportunities to gather the views and experiences of children and other service users include:

- meeting service users at pre-arranged times
- phone calls to service users
- attending service user groups that may run during the inspection

Communication methods

Inspectors should bear in mind the limits of verbal consultation with some children or other service users, particularly those who are disabled or have complex healthcare needs, and they should take this into account in their evaluation. In these cases, they would expect to see the agency using appropriate alternative means of gathering children's views and providing them with feedback about the impact of their consultation.

Inspectors must take into account the specific communication needs of individual children. For some children, the inspectors may request the assistance of staff, carers or an independent person who know and understand the individual's preferred means of communication, particularly if this is unique to the service user. It may also be appropriate for inspectors to spend time observing children and other service users, and how they interact with staff, professionals and their environment.

Inspectors can request the services of an interpreter to join the inspection. This is helpful when the children or other service users are fluent in British Sign Language. Inspectors request this service through the inspection support team and give 2 weeks' notice where possible.

Children or other service users, including those with limited or no verbal communication, may wish to share their views in a letter to the inspector.

Practice when gathering the views of children or other service users

Inspectors demonstrate safe and sensitive practice by:

- telling staff and carers when and where conversations with children and other service users are taking place and who is involved
- being sensitive to the fact that some service users, including children, may not want to be involved in the inspection
- explaining to children and other service users that they will not include comments that will identify them in the inspection report or in feedback to staff, without their permission
- ensuring that staff are aware of any arranged meetings between inspectors and service users and that children or other service users may leave the meeting at any time
- where appropriate, explaining to service users that information suggesting that they, another child or another service user is at risk of harm will be passed by the inspector to an appropriate person able to take necessary action about that concern

Inspectors respect the privacy and confidentiality of personal information at all times. They always involve agency staff and parents in any decisions about children's involvement in the inspection. Inspectors will also involve staff in decisions about involving other service users in the inspection

process.

Observing activities

Inspectors can use the agency's previously scheduled activities as opportunities for observing and following lines of enquiry. These activities could include:

- staff meetings
- meetings between agency staff and service users
- support groups

Inspectors always try to strike a balance between the time it takes to observe an activity and the significance of the likely evidence to be gained.

Gathering views of other professionals

Inspectors may consult with professionals to inform the inspection findings where applicable. This is usually through a telephone call during the inspection and may not take place on site. These opportunities are likely to be limited, as the agency will be working with families that have self-referred.

Inspectors ask the agency for the relevant contact details.

Inspectors should always take account of privacy and confidentiality when talking to stakeholders on the telephone during the inspection.

Discussions with managers and staff

Individual interviews are held with the registered manager or individual registered provider and, where relevant, a number of other staff. The number of staff interviewed depends on the size of the adoption agency, but will include a sample of staff working at the agency at the time of inspection.

The inspector always asks to interview the responsible individual where:

- there is no manager in post
- there are concerns about the quality of care and support, or the effectiveness of monitoring arrangements, or the quality of leadership and management of the scheme
- evidence indicates that the agency is failing to protect children
- there are concerns about staffing, the premises or resources to manage and run the provision

The interview with the registered manager or individual registered provider usually covers:

- issues that have arisen from pre-inspection information or emerging lines of inquiry
- how the manager involves children and other service users
- follow-up on progress in response to previous requirements and recommendations
- the plans for future development of the adoption support agency
- the arrangements for supervision received by the manager, including for an individual provider
- any further evidence the manager may wish to highlight with the inspector

During the inspection, the inspector shares emerging findings about the agency's strengths and weaknesses with the manager so that they fully understand emerging issues.

The inspector usually meets with the manager at the end of day 1 to share emerging findings. The inspector will normally set out for the manager what they intend to consider later in the inspection. The manager then has the opportunity to prepare and direct the inspector to any specific information or evidence required.

To help managers understand how the inspection is progressing, and to continue the constructive professional dialogue where meetings are held to keep them informed of emerging findings, the manager can be accompanied by a colleague, where appropriate. This will allow them to raise any issues or concerns or to seek clarification, including related to the conduct of the inspection.

If the registered manager is not present, inspectors will agree a process with the responsible individual (if available) for keeping other people informed of progress throughout the inspection.

Shortfalls that could have an immediate impact on the safety of staff or children are brought to the attention of the manager as soon as the inspector has identified the problem.

Inspectors should be ready to alter arrangements if staff have to attend to the needs of service users.

In most cases inspectors will want to have confidential conversations with staff and will usually ask to speak to them alone so that staff members can express their views freely. However, individuals may ask to have a colleague present to support them if they prefer.

If inspectors see that a staff member is upset or distressed at any point during the inspection, inspectors will respond sensitively. Where appropriate, inspectors will consider suitable adjustments to enable the staff member to continue. Where appropriate, inspectors will inform those responsible for the person's well-being. The inspector will also contact their manager/regional duty manager to take advice.

There may be exceptional occasions when we need to consider pausing an inspection. We will consider these on a case-by-case basis according to our [published guidance on pausing inspections](#)

Assessing financial viability

The adoption support agency regulations state that the 'registered provider must carry on the agency in such manner as is likely to ensure that it will be financially viable for the purpose of achieving the aims and objectives set out in its statement of purpose' (Regulation 25(1) of [The Adoption Support Agencies \(England\) and Adoption Agencies \(Miscellaneous Amendments\) Regulations 2005](#)).

Inspectors are only expected to carry out a lay person's assessment of the financial information. Where, during the course of a routine inspection, the inspector has concerns about the financial viability of a provider if, for example, there is insufficient staff providing contracted support, they should follow the guidance set out in the [social care registration handbook](#).

The financial information Ofsted can request ranges from professionally produced business plans to a collection of accounts and balance sheets (Regulation 20(2) of [The Adoption Support Agencies \(England\) and Adoption Agencies \(Miscellaneous Amendments\) Regulations 2005](#)).

Examining records, policies and procedures

The adoption support agency's statement of purpose and, where relevant, children's guide should be available on their website and form part of the pre-inspection data. We should also hold copies in our database because agencies are required to submit these documents to Ofsted whenever they are changed.

Inspectors do not routinely examine all policies and procedures. Inspectors examine documents when they may inform a line of enquiry for that individual inspection.

Inspectors focus on the impact of documents such as risk assessments and how they work in practice, rather than the format. What matters is that they are fit for purpose and provide enough information to all relevant people so that they can provide support safely and appropriately.

The inspector may ask to look at the personnel records of anyone working for the purposes of the agency, which can be maintained in checklist or spreadsheet format. The information available for inspection should reflect schedule 2 of [The Adoption Support Agencies \(England\) and Adoption Agencies \(Miscellaneous Amendments\) Regulations 2005 \(SI 2005/2750\)](#). The inspector may sample more detailed personnel records if information contained within any spreadsheet is not enough or if particular evidence is needed to pursue a line of enquiry.

If recruitment records are not maintained at the premises where the inspector is based for the inspection, the provider should arrange for any files required to be made available on site.

Where the agency uses the [DBS update service](#) to check the status of an individual's DBS certificate, the agency should be able to demonstrate how it manages and records details of any check it carries out. If any lines of enquiry require additional information, then the inspector may request that a small sample of full personnel records are made available at the inspection visit.

Where members of staff are subject to transfer of undertakings (protection of employment) (TUPE) arrangements, we recognise that the new employer is reliant on the previous employer for all recruitment records relating to those staff and in some instances may not be able to access all the information, including documents required by the regulations. If this is the case, we still expect the

new employer to hold enough relevant information to make sure staff are suitable, including DBS checks or vetting records. If there are any gaps in requirements, the new employer should have taken steps to assure themselves that the person is suitable to work in their role. This should include reference to employment records such as appraisals.

Finding evidence of possible offences

If, during the course of the inspection, the inspector thinks that an offence may have been committed, they should contact a social care compliance inspector or RIM immediately to take advice and discuss whether the inspection (or monitoring visit) should continue.

If, during the course of the inspection, the inspector finds evidence of an unregistered children's home or any other unregistered provision being operated elsewhere, they should record the details, including the provider's name, the address and any other evidence that indicates there is an unregistered service operating. The inspector should inform the provider/manager that they have recorded this information and will pass this on to their regional team to investigate.

The inspector should make it clear that any information they gather on unregistered provision being operated elsewhere will not form any part in determining the outcome of the inspection or inspection judgement.

Further guidance is available in the [social care enforcement handbook](#).

Implications of the Equality Act

The [Equality Act 2010](#) came into effect on 1 October 2010. The Act makes it unlawful for an employer to ask a potential employee questions about their health or disability before they are offered employment, whether on a conditional or unconditional basis.

Social care providers must comply with both the Equality Act and the remit-specific regulations that require them to employ people who are fit, both physically and mentally, for the work.

To comply with both laws, providers may give conditional offers of employment to potential employees after the recruitment process, subject to appropriate medical and health checks.

There are a number of exemptions to the provisions in the Act. If a provider believes that an exemption applies to its recruitment of staff, it should take its own legal advice on the matter.

Inspectors will assess whether providers have a rigorous recruitment and vetting process in place, including ensuring that their employees are mentally and physically fit before they begin work as part of their inspection.

How inspectors record the evidence

Inspectors must analyse the information they gather on inspection and use their professional judgement to assess the impact on the experiences and progress of children and other service users.

Inspectors' evidence should be clear, evaluative and sufficient to support the judgements.

The evidence should tell the story of the experiences and progress of children and other service users, as appropriate. Evidence should not include information that could identify individuals unless it is necessary to protect a child or to support further action. In these instances, inspectors can use individuals' initials.

Inspectors can record direct quotes from children, other service users and other interested parties in evidence to support judgements.

The record should clearly indicate the source of the evidence (for example, whether the evidence is from observation, a written record or a face-to-face interview). If evidence comes from an interview, the record must indicate the time of the interview and the interviewee's job title or relationship to the child.

Throughout the inspection, inspectors maintain a record of their evidence. Electronic evidence is recorded within the inspection database. Summarised evidence must be sufficient to support the judgements and any recommendations or requirements. Inspectors must ensure that the provider understands the evidence that the judgements are based on and any requirements that stem from the judgements.

After the summarised evidence has been placed in the inspection database, inspectors should not destroy any duplicate handwritten evidence until after the inspection report is published. In some circumstances, inspectors will be required to keep any handwritten notes they have made for longer. This may be necessary, for example, when legal action or a complaint about the judgement is being considered.

All handwritten evidence should be legible and dated. Handwritten evidence that has not been summarised forms part of the inspection evidence base and should therefore be scanned and added into the database within 5 working days of the end of the on-site visit.

Evidence may be scrutinised for quality assurance and will be considered in the event of any complaint.

End of the inspection and feedback

The inspector will give verbal feedback of the main findings and provisional judgements. This feedback will usually be given to the registered manager or individual registered provider (as appropriate). Additional senior staff may also attend, if agreed in advance with the inspector.

If the feedback is likely to be challenging or is likely to raise sensitive issues, the inspector will be sympathetic to the implications of this feedback. The inspector will discuss with the provider which

other people should attend to ensure the necessary support is given. Attendance at the feedback meeting is voluntary and any attendee may leave at any time.

In some circumstances, an inspector may need extra time after the inspection fieldwork to take advice before giving feedback. The day of feedback is counted as the last day of the inspection.

The inspector should:

- cover the main findings of the inspection, including both strengths and weaknesses
- clearly communicate the likely judgements
- indicate likely recommendations, with clear reference to the relevant NMS or quality standard (where relevant), providing a clear direction for improvement
- use the grade descriptors and the evidence to clearly indicate how the judgements have been reached
- ensure that the provider has the opportunity to raise any issues or concerns, or to seek clarification about the inspection, and can contact Ofsted on the working day after the end of the inspection, if necessary
- confirm [when the draft report](#) will be sent to the manager for comments

Inspectors will not provide a written summary of the inspection or written feedback in advance of the inspection report being sent. Providers may choose to take their own notes at feedback.

Managers may share the provisional inspection outcome and findings with whoever they deem appropriate. Provisional inspection outcomes may also be shared, in confidence, with others who are not involved with the setting. This may include colleagues, family members, medical advisers and/or their wider support group. However, the information should not be made public.

Making requirements and recommendations

Requirements

Inspectors impose requirements when there has been a breach of a regulation.

When imposing a requirement, inspectors must ensure that there is sufficient evidence to support the breach and that they are able to show that this is having an impact, or is likely to have an impact, on children and other service users' experiences and progress. They must weigh up and balance evidence from more than one source to support making a requirement.

The requirement should refer to the specific regulation and should be detailed enough for the registered person to be clear about what they need to do to correct the breach of regulation and a date by which they should achieve this.

In deciding whether to impose a requirement, the inspector must assess the extent of the impact, or potential impact, on the experiences and progress of children and whether the matter could be

dealt with more appropriately by making a recommendation.

The inspector will always impose requirements where there are significant concerns for the welfare, safety and quality of care for children and other service users.

Sometimes, the registered person needs to take action to meet a requirement that they can complete quickly. Inspectors can impose a requirement with a date that is likely to be before the registered person will receive their inspection report. Here, the inspector must be clear at the inspection feedback what the requirement and its deadline is.

Recommendations

Inspectors make recommendations when necessary to improve practice.

In making a recommendation, inspectors should refer to the NMS for adoption support agencies. They should always give enough detail for the manager in charge to be clear what they need to do. The relevant part of NMS should be summarised. Inspectors may also make recommendations in relation to other relevant statutory guidance such as:

- [Working together to safeguard children](#)
- [Statutory guidance for children who run away or go missing from home or care](#)

If, during an inspection, the registered person rectifies a minor administrative error that has minimal impact on the experiences and progress of children and other service users, an inspector may not need to make a requirement or recommendation about that matter. However, they may refer to it in the leadership and management section of the report.

Where the registered person has failed to comply with a requirement within the timescale set by the inspector, we consider carefully whether it is necessary to take any enforcement action to address the breach and the associated risks to children and other service users. Enforcement action may include, but is not limited to, issuing a compliance notice.

If the agency has not acted on recommendations made at a previous inspection, the inspector considers carefully the impact of this on children and other service users and may impose a requirement.

Compliance notices and enforcement action

Ofsted's compliance powers are set out in the [Care Standards Act 2000](#) and associated regulations. The [social care enforcement policy](#) has the details.

We serve a compliance notice following an inspection if:

- we consider that this is the most appropriate way to promote the welfare of children or other service users, or we believe that they are at risk of harm or being harmed or

- a registered provider has failed to comply with a requirement made at an inspection and we consider that this is the most appropriate way to deal with this concern

Inadequate judgements: next steps

When an adoption support agency is judged inadequate for the 'overall experiences and progress of children and adults' at a full inspection, this leads to a post-inspection debrief as soon as possible, and then a case review. The timing of the case review should be proportionate to the risk and certainly no later than 5 working days following the inspection.

The inspector and their manager have the post-inspection debrief. It provides an opportunity for them to discuss the inspection and the quality of the evidence, and to consider a recommendation for further action to take to the case review. The recommendation of further action should include the scheduling of future inspections and/or compliance action. The [social care enforcement policy](#) has detailed information about the enforcement options available and the arrangements for following up enforcement activity.

The case review considers the recommended future action and allows the manager to decide what action to take.

We usually carry out a full inspection of agencies that have been judged as inadequate within 6 to 12 months of the previous inspection. The timing and nature of subsequent inspection and monitoring visits following an inadequate judgement, however, are set on a case-by-case basis.

If the concerns are serious, we are likely to return to carry out a monitoring visit to check that the manager or individual registered provider have taken sufficient steps to safeguard and protect the welfare of children. Any monitoring visit usually results in a published report, although RIMs can decide not to publish monitoring reports in exceptional circumstances.

An inspection visit takes place sooner if:

- any further significant concerns arise during this period
- it is necessary to make statutory requirements to safeguard and protect the welfare of children

Feedback to local authorities

Whenever children or other service users are at immediate risk, inspectors must follow Ofsted's safeguarding policy. In addition, whenever an adoption support agency is judged inadequate at inspection, the inspector must alert any local authority or regional adoption agency currently commissioning adoption support services from the adoption support agency. The inspector must also notify the local authority where the agency is based because it has a duty to safeguard the welfare of all children living in its area.

The region sends an email to the directors of children's services in the relevant local authorities after the case review when we have decided what further action to take. We follow this email up

with a telephone call to ensure receipt. When there are a large number of placing authorities, the region should discuss arrangements for contacting them with relevant managers. The inspector should also ensure that the email to local authorities is forwarded to the agency.

The inspector gives feedback to the relevant local authorities in line with feedback given to the provider and that will appear in the report. This must include a summary of the main concerns so that relevant local authorities understand these and can make their own decisions. The inspector must make clear that the agency has not at this point had an opportunity to challenge the findings.

The details of the email and any phone calls must be recorded on the inspection database for future reference and the email or letter should be shared with the provider.

We contact placing authorities to follow HMCI's powers detailed in paragraph 8 of schedule 13 of the Education and Inspections Act 2006, 'to provide assistance to other public authorities in the exercise of the placing authorities' functions'.

The inspection report

The report should be succinct and evaluative. Inspectors' analysis must include clear evidence for their professional judgements.

In most instances, the inspection judgement sections of the report should be no more than 5 to 8 short paragraphs, each usually only 2 or 3 sentences long. Reports for agencies that have several weaknesses or that have been judged outstanding may require more detailed explanations for the judgements. Inspectors should ensure that the reports are long enough to say what needs to be said and no longer.

Content of the SCCIF report

Section of report	Details
Information about this service	Brief contextual information about the service
Date and judgement of last inspection	The date and overall judgement of the last inspection
Enforcement action since the last inspection (registered providers only)	A brief summary of any enforcement activity we have taken since the last inspection
Inspection judgements	The judgements made and accompanying text
Areas for improvement	Any recommendations and statutory requirements (when relevant)

Information about this inspection

What we have looked at and information about the legal basis for the inspection

Service details

Information on the provider running the service

Quality assurance and arrangements for publishing the report

The inspector is responsible for the quality of the report. The inspector will check the completed draft report carefully before submitting to their manager for pre-publication quality checks before it is shared with the provider.

Any proposed change of judgement from the provisional judgement given at verbal feedback during the inspection will be discussed by the appropriate managers within Ofsted. On these rare occasions, the inspector must inform the provider of the revised judgements and give reasons for the changes before the provider receives the draft report.

We will send the draft inspection report to the provider within 18 working days of the end of the inspection.

The provider will have 5 working days to comment on the draft report, process and findings.

We will consider all comments and we will respond to the comments when we share the final report with the provider. This will be within a maximum of 30 working days after the inspection.

We expect managers to share the inspection outcome and findings with whoever they deem appropriate.

Following the inspection, we will ask providers for feedback about the inspection through a post-inspection survey. This is sent to the provider when it receives the final inspection report. We will use feedback from providers to improve the quality of inspections.

Conduct during inspections

Ofsted's [code of conduct](#) sets out the expectations for both inspectors and providers. At the start of the inspection (usually during the preparatory conversations) the lead inspector will explain these expectations and will ask providers to read the code. Inspectors will work constructively with providers and staff, demonstrating professionalism, courtesy, empathy and respect at all times.

Concerns or complaints about an inspection

Concerns

Most of Ofsted's work is carried out smoothly and without incident. If concerns do arise during an inspection, they should be raised with the inspector as soon as possible during the inspection visit. This provides an opportunity to resolve the matter before the inspection is completed. Any concerns raised, and actions taken, will be recorded in the inspection evidence.

If, during the inspection, the provider is unable to resolve the matter with the inspector, they should contact the inspector's RIM for further discussion.

If an issue remains unresolved, the provider can contact Ofsted on the working day after the end of the inspection. This will be an opportunity for the provider to raise informal concerns about the inspection process or outcomes, ask about next steps or highlight information that they feel was not fully considered during the inspection. This will be directed to a RIM who is independent of the inspection to discuss and to resolve, where appropriate, at the earliest opportunity.

Providers also have another opportunity to raise concerns about the draft inspection report, process and findings when they receive the draft report.

Complaints

If it is not possible to resolve concerns during the inspection, shortly after the inspection or through submitting comments in response to the draft report, the provider may wish to lodge a formal complaint when it receives the final report. The inspector will ensure that the provider is informed that it is able to make a formal complaint, and that [information about how to complain](#) is available on GOV.UK.

Monitoring visits

Monitoring visits are carried out according to the general principles of the SCCIF.

Monitoring visits are usually carried out for any of the following reasons:

- to follow up concerns
- following an inadequate inspection
- to monitor compliance with a notice

Timing and frequency

The decision to carry out a monitoring visit is usually taken at a case review. The frequency of

monitoring visits is decided on a case-by-case basis and may be as frequent as weekly if that is what is needed. Timing and frequency are determined by any dates included in compliance notices and the nature of the concerns.

Monitoring visits will usually take place following enforcement action or may take place after an inadequate inspection judgement. Monitoring visits are usually unannounced.

Monitoring compliance notices

When we have issued a compliance notice, we will carry out a monitoring visit or inspection to assess compliance with the notice. This will be within 5 working days of the date set in the notice for compliance with the requirement. A registered person must fully comply with the requirement within the timeframe specified. Partial action will not be sufficient, although we may take it into account in deciding the next steps.

If we have served multiple compliance notices with different completion dates, we will schedule follow-up visits for each completion date. These visits can be combined if the dates are close together and if we do not exceed 5 working days from the date of any notice.

We will decide whether the monitoring visit will be announced or unannounced on a case-by-case basis. The decision will usually be made as part of the case review, in which we should explore how best to gather evidence to assess compliance with a notice. When we decide that there should be a notice period, this should always be as short as is practically possible.

During a monitoring visit, inspectors must:

- check that there any risks to children or vulnerable adults have been addressed
- check that the requirements for any compliance notices of which the completion timescales have passed have been met

Inspectors may also find evidence that a registered person is failing to meet requirements other than those specified in our compliance notice(s). They should discuss this with the provider and make any requirements or recommendations they consider necessary to remedy the problem.

If the case review decision is that the compliance notice has been met, we confirm this in the monitoring or inspection report. We then consider whether to close the compliance case.

If the case review decision is that a compliance notice has not been met, the case review must consider what further action we will take. Failure to comply is a ground for cancellation. If a provider fails to comply with a notice, we should either take steps to cancel its registration or issue a further notice. Although an offence has been committed under section 22A(4) of the Care Standards Act 2000, the case review must consider whether pursuing prosecution is the most appropriate action.

If the registered person has complied with the requirements set out in the notice but we observe a different failure during a visit, this does not constitute a failure to comply with the notice. The case review should consider whether this breach can be resolved by a requirement or a further compliance notice.

Monitoring for any other reason

The inspector must notify either the registered provider or registered manager of the purpose of the visit or inspection when they arrive on site.

We inform them that we are looking at a concern, and of any information we have that suggests non-compliance. They can then provide additional information. If we relay our concerns to the person in charge instead of the registered person, we ask and record how they will inform the registered person of what we have said.

We will share as much information about the concerns as possible. We may not do so if there is an allegation about an individual linked to the setting or where sharing the information could compromise another agency's investigation. We will always follow our whistle-blowing policy.

If the information is from a whistle-blower or from someone who wishes to remain anonymous, then we must take the utmost care to ensure that the person's identity is not revealed. We may tell the registered person(s) or person in charge the information came from a whistle-blower or someone who wishes to remain anonymous, but we should give them as much information as possible in the interests of openness. However, inspectors should avoid giving information, for example names, dates, time periods and locations, that might lead the registered person or person in charge to identify the source of the information. Information that is not relevant to the concern should not be provided.

The inspector should not confirm, deny or comment on any attempt by the registered person or person in charge to guess the name or other personal details of the source of the information. The inspector should be clear with the manager that they cannot comment in this regard.

Inspectors will summarise the information at appropriate times during the inspection or visit. They will share this with the registered person or person in charge. This allows the registered person to consider matters as they emerge. Inspectors will ensure that they fully understand and note any responses correctly. This also helps the registered person to consider any other evidence they wish us to know about.

We will use all the information we have gathered to determine whether the registered person:

- is complying with the relevant requirements
- is meeting statutory requirements and remains suitable for registration
- has committed an offence

Monitoring with other statutory agencies

Ofsted is committed to cooperation and joint working with other agencies. Generally, we do not carry out joint visits unless there is good reason to do so. If an inspector believes that a joint visit is required, then they should make representations in favour of the visit, with support from their

RIM, to their regional director.

Regional directors should seek a view from the Ofsted legal services team before authorising any joint visit. When carrying out a visit at the same time as another agency, both parties must be clear about their respective roles at the visit. This must be discussed in advance with the representative of the other agency. The inspector must explain to the registered provider, at the outset of the visit with another agency, the respective roles of Ofsted and the other agency or agencies.

In any visit with another agency, our responsibility is to determine whether the provider continues to meet the requirements for registration. The inspector must gather their own evidence to help them reach that decision. The inspector must not take evidence on behalf of the other party or use their evidence instead of collecting our own.

Finding further concerns during monitoring visits

If it becomes clear that there are new or further issues of concern, or that in tackling the actions from the last inspection the provider has let other aspects slip so that children or vulnerable service users are at risk of harm or are not making sufficient progress, then the inspector should decide what further action needs to be taken. This includes new requirements, recommendations, compliance notices or other enforcement action such as restriction of accommodation or imposing of conditions.

If the inspector is concerned or unsure about any aspect of the visit, they can contact their RIM or a social care compliance inspector.

Feedback at the end of the monitoring visit

The inspector must summarise the information at appropriate times during the visit and share this with the provider or manager. The inspector should consider other matters as they emerge, pursue other lines of questioning and ensure that they have fully understood and noted the responses correctly.

The inspector will provide verbal feedback to the provider at the end of the visit. The inspector should:

- explain the decisions clearly and with examples
- explain the options for further action, non-statutory and statutory, if there is evidence that the provider is failing or has failed to meet statutory requirements – or the conditions of its registration – which may result in enforcement action
- ensure that what they say to the provider is fully consistent with the evidence
- be proportionate and fair, in line with our enforcement policy

Monitoring visit reports

Ofsted will publish all monitoring reports on its [reports website](#). In exceptional circumstances, a regional director may decide not to publish a monitoring visit report.

At the beginning of the report, inspectors should provide a concise, clear explanation of the issues that we monitored at the visit. This explanation should accurately reflect the message given to the manager/person-in-charge when we announced the visit. We should set out when we last visited the agency and for what purpose, for example whether it was an assurance inspection or full inspection.

The report must:

- set out the reason(s) for and purpose of the visit (if the visit is to follow up enforcement activity, the letter should clearly set this out, for example, 'This agency is subject to a restriction of accommodation order. We are concerned that... In order to evaluate the progress the agency has made in addressing these concerns, we carried out a monitoring visit on....'; where the visit relates to compliance notices, there should be a short summary of the number of notices and an overview of the areas for concern)
- outline any significant developments and clearly explain the action the provider has taken to address the requirements and the impact
- evaluate where progress has been made and where progress has not been made
- clearly state the impact of continued concerns on children and adult service users, alongside any action that Ofsted will be taking to notify local authorities or to protect children and other service users
- set out clearly where and what further action is needed
- set out why a new judgement has been made or the reasons why the judgement will not be changed, if appropriate

Inspectors must use clear language to indicate the level of concern, for example, 'this visit has raised serious concerns about care and practice in [the agency]'.

Inspectors can clearly state that the provider is likely to be subject to further enforcement action where this is the case. The details of intended action cannot be included as this may prejudice any action we are likely to take and could be seen to impede the provider's right of appeal, when relevant.

Review of the monitoring report and evidence base

The monitoring visit report and evidence base will be reviewed by the inspector's manager before the draft report is sent to the provider for comment. This is to ensure that they accurately reflect the improvements made and that the evidence base supports any further enforcement action we may wish to take.

The draft monitoring report is then shared with the provider and finalised using the same process and timescales as a standard inspection report (see the ['Quality assurance and arrangements for](#)

[publishing the report' section](#)).

Checks on responsible individuals

Regulation 7 of the [Adoption Support Agencies \(England\) and Adoption Agencies \(Miscellaneous Amendments\) Regulations 2005](#) requires adoption support agencies to have a responsible individual.

A provider must demonstrate to Ofsted that the responsible individual they appoint is able to meet the requirements of regulation. Our inspectors scrutinise the steps providers have taken to determine that a responsible individual who has been appointed to a registered establishment or agency is fit to supervise its management.

For further information, see [Changes to children's social care services that are registered and/or inspected by Ofsted](#).

Agencies with no registered manager

The [Care Standards Act 2000](#) requires any person who carries on or manages an adoption support agency to be registered with Ofsted. It is a criminal offence to operate or manage an adoption support agency without registering with Ofsted (section 11 of the Care Standards Act 2000).

Regulations 26 and 27 of the [Adoption Support Agencies \(England\) and Adoption Agencies \(Miscellaneous Amendments\) Regulations \(2005\)](#) require the provider to notify Ofsted if the manager is to be absent for 28 days or more, or if they leave. Providers must do this at least one month before a known absence of the manager and, in an emergency, within 1 week of a registered manager being absent for 28 days.

Any failure to notify Ofsted of the absence or change of a manager, or failure to put in place satisfactory management arrangements, will be taken into account when planning and carrying out inspections. For more information, see [Changes to children's social care services that are registered and/or inspected by Ofsted](#).

Actions may include, but are not limited to, bringing the date of the inspection forward, and using this information in our judgement about the leadership and management of the agency. If a provider fails to notify Ofsted of a change of manager, this may also influence our assessment of its fitness to manage. For more information about what regulatory action Ofsted can take, you should refer to the [social care enforcement policy](#).

Incomplete inspections

We will apply [Ofsted's policy on incomplete inspections](#) where appropriate.

Safeguarding and child protection concerns

If serious issues of concern arise during the inspection, such as a failure to follow child protection procedures or if a child or other service user is discovered to be at immediate risk of harm, the inspector must notify the responsible individual (where relevant) or the person in charge as soon as possible. If that may compromise a child or other service user's safety, the inspector must ensure that the appropriate authorities are notified immediately.

Inspectors should always follow Ofsted's [safeguarding policy](#).

Inspectors should contact their manager or regional social care compliance inspector if they need advice. The inspector ensures that the referral is made to the relevant local authority children's services and the child's allocated social worker and/or the relevant local authority adults' services and, where appropriate, the the vulnerable service user's allocated social worker. You can find further guidance in [Safeguarding concerns: guidance for inspectors](#). If the concerns relate to allegations against staff, they are referred to the designated officer.

Inspectors must ensure that concerns about the safety and welfare of a child are communicated immediately to the DCS for the responsible placing local authority, where this is relevant. A record that this has been done must be kept. The regional Senior His Majesty's Inspector should follow up the action that has been taken by the local authority.

The 'Prevent' duty

Extremism is unlikely to be a routine line of enquiry during SCCIF inspections. Inspectors should, however, be alert to signs of risks of extremism, such as literature, posters, videos or DVDs, or regular visitors to the setting where the purpose of their visit is not clear. Initial enquiries about the possibility of extremism must be directed to the manager or person in charge.

Inspectors should note the detail of any relevant concerns or referrals made by the registered manager or individual registered provider and how effective the multi-agency response has been. The DfE has published [advice for schools and childcare providers on the 'Prevent' duty](#), and inspectors should note where this applies to the type of setting inspected.

Inspectors can contact their RIM, who may seek specialist advice. If inspectors are unable to contact their RIM and remain concerned, they should follow [Ofsted's safeguarding policy](#).

Female genital mutilation: the duty to notify police

Since 31 October 2015, when [section 74 of the Serious Crime Act 2015](#) inserted new section 5B into the [Female Genital Mutilation Act 2003](#), specified regulated professionals (including social workers) must report to the police any cases of female genital mutilation in girls under 18 that they come across in their work.

The duty applies where the professional either:

- is informed by the girl that an act of female genital mutilation has been carried out on her
- observes physical signs that appear to show an act of female genital mutilation has carried out and has no reason to believe that the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth

If a child discloses information regarding female genital mutilation to an inspector, the inspector should follow [Ofsted's safeguarding guidance for inspectors](#).

Reporting concerns about the administration and management of controlled drugs

Providers must report incidents related to controlled drugs (including loss or theft) to their local NHS controlled drugs accountable officer at NHS England. They should also report incidents to the police, if necessary.

If inspectors become aware of an incident related to controlled drugs that the provider has not reported to the appropriate authority, they should convene a case review to consider next steps. Actions may include the Ofsted region making the referral. This action is in addition to any regulatory action or recommendations made because of the concern. Inspectors should make a referral even when there are no requirements or recommendations to be made.

Use of personal data

As part of our inspection activities under the SCCIF, we may gather personal data that is necessary to help us evaluate children's social care services.

Our [personal information charter](#) sets out the standards you can expect from Ofsted when we collect, hold or use personal information, and that we will follow all applicable data protection legislation in how we treat personal information.

Our [privacy notice for social care](#) sets out in more detail what data we collect and our powers to do so, what we do with it, how long we keep it for and people's rights under data protection legislation.

Annex for figures

Ofsted's post-inspection and complaints procedure

Steps	Description
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Step 1	The provider should raise any concerns during an inspection with the lead inspector in the first instance
Step 2	If an issue remains unresolved, the provider can ring Ofsted during the inspection or on the working day after
Step 3	We will normally send a draft report to the provider within 18 working days of the end of the inspection
Step 4	Within 5 working days of us sending a draft report, the provider can raise minor points about the report or submit a formal complaint
Step 5a	We will consider minor points of clarity or factual accuracy quickly so that the report can be published promptly
Step 5b	We will respond to any formal complaint before we finalise and send the report to the provider
Step 6	We will normally send the final report to the provider within 30 working days of the end of the inspection (longer if there has been a complaint). The report will be published on our website 5 working days later

[See Figure 1.](#)

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