The provision and experience of adoption support services in Wales:

Perspectives from adoption agencies and adoptive parents.

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Table of Contents

List of tables and figures	3
Acknowledgements	5
Executive Summary Introduction	6 15
Background	15
Research aims	18
Methodology	18
Adoptive families research sample	21
Part 1: Structure of adoption support services in Wales	26
Current structure of adoption services	26
Structure of adoption support services following regionalisation	29
Welsh language provision	30
Summary	32
Part 2: Accessing support and assessing and reviewing adoption support needs	34
Number of families receiving adoption support	34
Accessing adoption support services	35
The referral process	35
The referral process – views from adoptive families	39
Timeframe between request and assessment	40
Point at which request for adoption support is made	41
Factors which influence the completion of quality assessments	43
Skills and expertise of social work staff	43
Having the right professionals involved	44
Use of the assessment framework	45
Accessing accurate background information	45
Adoptive family engagement in the assessment process	45
Quality of assessments – views of adoptive families	47
Number of families requesting assessments of need for adoption support	
and receiving support	48
Adoption support plans	50
Identified needs within the adoption support plan	51
Number of families who received support as outlined in the	
adoption support plan – the agency views	51

Number of families who received support as outlined in the	
adoption support plan – the adoptive families views	52
Reviewing adoption support plans	53
Data collected by each agency	56
Summary	59
Part 3: Provision of adoption support services in Wales	63
Overview of services and partnerships	64
Breakdown of adoption support services available	65
Children's needs which are not directly related to adoption	68
Services most often requested	69
Factors which delay or inhibit the provision of adoption support services	70
Insufficient multi-agency working	71
Lack of appropriate resourcing	71
CAMHS provision	71
Financial resourcing	75
Geography	76
Adoption support services received by adoptive families	77
Ratings of adoption support received	81
Adoptive families' perspectives on adoption support	82
What do adoptive parents think could be improved?	83
What support services do adoptive families want?	85
Summary	86
Part 4: Development of the National Adoption Service in Wales	90
Adoption agency perspectives	90
Views of adoptive families	92
Summary	93
Conclusion	94
Recommendations	94
References	96
Appendices:	
Appendix 1: Agency email Appendix 2: Agency survey	100 101
Appendix 2: Agency survey Appendix 3: Agency email for parents	101
Appendix 4: Parent email	112
Appendix 5: Parent survey	113
Appendix 6: Requests for adoption support	124

Appendix 7: Adoption support services provided

List of tables and figures

Table 1:	Local authority in which the adoptive family lives	22
Table 2:	Region in which adoptive family lives	22
Table 3:	Number of children adopted	23
Table 4:	Age of child when they were placed for adoption and age now	24
Table 5:	Number of families known to the adoption agency	34
Table 6:	Number of adoptive families by region	35
Table 7:	Who did adoptive families approach in the first instance?	39
Table 8:	Perceived appropriate timeframe for completion of the	
	assessment	41
Table 9:	Main causes of delay in completing the assessment	41
Table 10:	Point at which request for adoption support is made	42
Table11:	Adoptive parent rating of the quality of the assessment of	
	adoption support needs	48
Table 12:	Did the assessment result in you getting adoption support?	48
Table 13:	Number of adoptive families who requested an assessment of	
	need in 2013	49
Table 14:	Number of families that were offered additional support post	
	adoption order in 2013	49
Table 15:	Number of adoptive families that subsequently received support	
	in 2013	50
Table 16:	Average time post-order that request for adoption support	
	was made	50
Table 17:	Child's needs as identified by adoptive parent in the support plan	51
Table 18:	Number of adoptive families who received all of the support	52
Table 19:	Number of adoptive families who received part of the support	52
Table 20:	Number of adoptive families who received none of the support	52
Table 21:	Were the identified support services provided?	53
Table 22:	Data routinely collected by adoption agencies per region	57
Table 23:	Prescribed adoption support services	63
Table 24:	Adoption support services available	67
Table 25:	Reported needs not directly related to adoption	70
Table 26:	Adoption support services most often requested	71

Table 27:	Adoption support services received by adoptive families	79
Table 28:	Ratings of adoption support services received	81
Table 29:	Quality of adoption support received	82

Figure 1:	'Windscreen'	model of CAMHS	service pr	ovision in \	Nales	74

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Executive Summary

This study was commissioned and funded by the Welsh Assembly Government. Little has been known in Wales about how the post-adoption support needs of adoptive families are assessed across the country, what provision is made to meet these needs, and how adoptive families experience this process. The provision of detailed information regarding the structure, provision and management of post-adoption assessment and support services throughout Wales was therefore needed in order to inform the implementation of the National Adoption Service. Furthermore, it was important to understand more about adoptive parents' support needs and their experiences of post-adoption assessment and support in Wales in order to plan for support services which are appropriate to meet these needs.

Research Aims

- To map the current structure and provision of adoption support services throughout Wales.
- 2) To explore the views of Local Authorities and Voluntary Adoption Agencies regarding the availability and effectiveness of adoption support services, and how adoptive families' support needs can be appropriately met through the new National Adoption Service Framework.
- 3) To explore adoptive families' current experiences of assessment and provision of adoption support services in Wales, and their views about how their needs can most appropriately be met.

Methodology

The study was undertaken in three main parts; an online survey to all 10 local authority adoption agencies, the three existing regional collaboratives (North Wales, South East Wales and West Wales) and the 5 Voluntary Adoption Agencies operating in Wales. The survey addressed research aim 1. Follow-up telephone interview with each of these organisations were also undertaken, which addressed research aim 2. All 18 surveys and telephone interviews were completed, which represents a 100% response rate.

An on-line survey was also undertaken with adoptive families in Wales, which addressed research aim 3. The survey was aimed at adoptive families either pre- or post-adoption

order living in Wales with adopted child(ren) aged 18 or under. Those families who were currently being assessed or waiting to be matched with a child were excluded.

Surveys were completed electronically via the survey software Qualtrics. Results were exported and analysed on SPSS. The telephone interviews were fully transcribed, with the permission of respondents and thematic qualitative analysis undertaken.

Adoptive families sample

The sample included 91 adoptive families who had adopted a total of 147 children. These families included 58 male/female couples (64%), 11 male/male couples (12%), 5 female/female couples (6%), and 17 single adopters (19%). Forty-seven of the 91 adoptive families had adopted one child (52%), with 35 (38%) reporting the adoption of two children. Nine families had adopted 3 or more children (10%).

The majority of children were placed for adoption under the age of 5 (89%), were white (98%) and 17% were described as having a disability. 80% of the children had siblings, and almost half were placed apart from all of them.

Twenty-three families (25%) had at least one Welsh-speaking parent and 27 (30%) families had at least one Welsh-speaking child. Nine (10%) families with Welsh speaking children had adoptive parents who could not speak Welsh. This reflects a general pattern in Wales where many children attending Welsh medium schools do not have Welsh speaking parents.

Key findings

The structure of adoption support services in Wales

 There are no dedicated adoption support teams in Wales. Currently all local authority adoption agencies primarily operate a generic model whereby most staff are responsible for covering all aspects of adoption work including assessment, family finding and support. Two local authority adoption agencies and the three regional consortia have between 1-3 members of staff who dedicate part of their time to adoption support work. Just one regional consortium reported having a dedicated member of staff to co-ordinate letter-box contact.

- Operating a generic model meant that the time focused on adoption support was often limited, with priority being given to recruiting adopters and matching children with adoptive families. Adoption support was therefore in many ways seen as the 'poor relation'.
- Adoption support work was viewed as a highly skilled activity which provoked anxiety amongst workers as well as passion for the work. However, few adoption social workers have undertaken additional specialist training, particularly in relevant therapeutic approaches in working with trauma and attachment difficulties. The need for specialist training for *all* social workers involved with adoption was also highlighted, as concerns were present regarding the relative inexperience of many safeguarding children and families social workers and their level of adoption awareness, particularly in recognising the potential for support in the shorter and longer term.
- Over a third of adoptive families had at least one Welsh-speaking family member. Most adoption agencies reported low demand for Welsh medium services, but most had encountered occasional demand. Welsh language provision is vulnerable to staff turnover.

Accessing support, and assessing and reviewing adoption support needs

- 73% of requests for adoption support were made between 2 and 7 years following the Adoption Order.
- There were three different routes to assessment of need post adoption order, with routes 2 & 3 being the most frequent:
 - Requests coming direct to the adoption service, who then lead on the initial visit and complete the initial assessment, sometimes accompanied by colleagues from the intake and assessment team.
 - Requests coming direct to the adoption service which are then automatically signposted to the local authority's intake and assessment team if the request cannot be dealt with informally.
 - 3) Requests made directly to the local authority children's services intake and assessment teams.

- There was a somewhat arbitrary separation made between support needs which were deemed primarily adoption related and those which were deemed more universal. This affected both the route to assessment for adoptive families and the responses of the agencies.
- Referrals for services from safeguarding team social workers were seen to have a higher status which would result in the swifter provision of appropriate services. Safeguarding team social workers were also viewed as having more knowledge and expertise in relation to local services and resources. The relationship and interface between the childcare teams and the adoption service was therefore seen as crucial when assessing the support needs of adopters.
- Getting the right professionals involved was seen as central to the completion of high quality assessments of support needs. As well as the need for co-ordinated multi-agency responses to adoption support needs, access to consultation about the child and their family's needs at an early stage was also highly valued but was very limited and fragmented across Wales, particularly in relation to CAMHS.
- There was varying practice regarding the assessment frameworks used to conduct assessments for adoption support. Considerable variation in practice was also highlighted regarding reviewing adoption support plans. At the time of the adoption order being made, or just following it, some agencies but not all actively reviewed the adoption support plans.
- Some adoptive parents felt like they were failing if they approached agencies for help and support. An open-minded and proactive response to adoptive families from first point of contact onwards is therefore of fundamental importance in order to ensure that families do not feel judged or blamed for requesting additional support.
- In general adoption agencies and adopters report delays in completing assessments for support due to staff shortages and delays in accessing information from placing agencies. Not all families seek help at crisis point but some support needs become crises during the wait for assessment and services.

- Active reviewing of letterbox contact was done rarely. It was one of the support services most frequently requested by adoptive parents in our survey, but was one they found least beneficial often because they felt they were not receiving the support they needed. Many adoption agencies reported that this was a service they struggled to resource due to capacity issues.
- There were variations in the depth and quality of data collected in relation to adoption support. Information about the type of support, length of time adoptive families access support for and the characteristics of the adopted children and their families was particularly limited, with around half of the agencies not collecting this information. There was general acknowledgement that reporting systems need to be more robust and systematic nationally.

Provision of adoption support services in Wales

- A range of universal and targeted adoption support services were reported to be available in Wales from the adoption agencies. The most common support services included general support and advice, letterbox contact with birth parent/s, siblings, other relatives and previous foster carers as well as support for direct contact with birth parents. The local authority or placing voluntary adoption agency was the main provider of the majority of the available services, and they are working creatively within very limited resources to meet the needs of those affected by adoption. Active support with letterbox contact was particularly limited.
- Partnerships are also in place between a small number of adoption agencies and the two VAAs which focus on providing adoption support services (Adoption UK and After Adoption), including peer support groups, telephone help-lines, support to adopted young people, adoptive parenting courses, intermediary services and support to birth families. Access to these particular services is fragmented and inconsistent across Wales and dependent upon whether a partnership is in place with the adoption agency.
- Support services for birth parents were available from the adoption agencies and regional consortia across all five regions, either directly through the agency or in partnership with After Adoption (more rarely). Within the adoption agencies most

mentioned support from the adoption team social worker and specifically letterbox and birth parent counselling. However, many also commented that they struggled to provide a good service in these areas given capacity issues. This was also true for services to adopted adults.

- Support offered to adoptive families was reported as more often having to fit into existing provision rather than being responsive to need.
- Four of the 5 regions reported that families experience delays in receiving adoption support either 'often' or 'very often'. Significant under-resourcing and under-funding was stressed, as was the lack of a multi-agency joined up approach and the challenges of geography.
- Access to targeted and specialist services for adopted children and their families was seen as particularly challenging, especially in relation to providing appropriate support for complex emotional and behavioural difficulties and therapeutic parenting. There was concern about how narrow the criteria are in order to access CAMHS services in particular, and a desire for attachment and trauma related issues to have more priority.
- Adoption agencies and adoptive families want consideration to be given at national level to the development of specialist services in Wales to support adopted children and young people who have complex multi-dimensional needs.
- Of the 91 survey respondents, 34 (37%) listed their child(ren) as having a range of complex needs not directly related to adoption, which were primarily health and educational needs. Many adoptive parents in Wales are therefore managing a range of complex needs on a daily basis.
- The most common request for support from adoptive parents was that of therapeutic parenting / family intervention, followed by letterbox contact.

- 57 (63%) of adoptive families indicated that they had received adoption support. When asked to rate the adoption support received the majority described it as 'Excellent/Good' (33:58%), while 15 (26%) deemed it 'Extremely poor/Poor'.
- Adoptive parents want more counselling and therapeutic services to be available, more support in schools, more support groups.

Development of the National Adoption Service

- Adoption agencies in Wales were positive about the potential opportunities afforded to adoption support services with the development of the National Adoption Service. In particular, they felt that adoption support could finally achieve the priority needed in order to meet the on-going and complex support needs of adopted children and their families. However, there were also concerns that this may not happen and that adoption support would continue to be the 'poor relation' to recruiting adopters and family finding.
- Increasing the visibility and status of adoption support was seen as a vehicle through which to increase the number of prospective adopters in Wales, and reducing inequities of access to service provision was emphasised, particularly given the challenges of geography in Wales.
- The importance of shared ownership of adoption support services across social services, health and education both politically, strategically and operationally was stressed.
- The role of the voluntary sector within the national adoption service remains uncertain and will need further clarification.
- Significant concerns were raised regarding the lack of financial investment in adoption support services to date and the consequences of this for adopted children and their families.

- 66% of adoptive parents thought that the National Adoption Service was a positive development, primarily because they hoped it would ensure a consistent support service across Wales.
- Adoptive parents also feared that regionalisation would make adoption support services impersonal, and they would wish the national service to reflect geographical differences, especially in regard to small rural communities.

Recommendations

- Support should be given to increased access to and provision of specialist training for all social workers involved in the adoption of children.
- 2) Strong consideration should be given to the development of dedicated adoption support teams in each region.
- 3) Welsh language provision within the regions should be reviewed, and plans developed to lessen vulnerability to staff turnover.
- 4) The process through which families request adoption support needs to be streamlined within and across the regions.
- 5) Visibility of information about adoption support services within each region should be significantly increased so that all parties affected by adoption can easily access appropriate information. One route would be via the National Adoption Service's website <u>www.adopt-wales.co.uk</u>, with available services within the 5 regions clearly delineated.
- 6) The framework for the assessment of adoption support needs should be reviewed, and a consistent approach developed within and across regions.
- 7) A consistent approach for reviewing adoption support plans should be implemented across the regions. In particular, adoption agencies should ensure that adoption support plans are not only reviewed prior to the adoption order being granted, but that they are actively involved in this process.

- 8) The regions should continue to work with the Welsh Government regarding the level, type and quality of data which is collected regarding adoption support provision.
- 9) The development of a specialist multi-disciplinary service in Wales which aims to meet the needs of those adopted children with complex multi-dimensional needs resulting from trauma, and the experience of abuse and neglect should be given strong consideration.
- 10) Investment is needed in adoption support services nationally in order to ensure high quality provision that meets needs rather than fits in with existing resources, and promotes equity of access across Wales.
- 11) The role of the voluntary sector in Wales regarding adoption support should continue to be developed.

Introduction

Background

Adoption is currently high on the political agenda in Wales, with root and branch reform well underway. The National Adoption Service has been developed in Wales with the aim of tackling delay for children through increasing the number of adoptive families available, and ensuring that there is equity across the country in terms of the assessment process for adopters and the assessment/ provision of post-adoption support. These developments are underpinned by legislative reform through the Social Care and Well-Being (Wales) Act, 2014.

Norman et al's (2012) systematic review of the outcomes of children who have experienced physical and emotional abuse and/ or neglect highlights that they are a population at risk of poor developmental outcomes. Most children adopted from the care system in the UK will have experienced abuse and neglect (72%; Selwyn et al, 2014b). Although adoption can provide a positive environment in which to recover developmentally (Palacios and Brodzinsky, 2010), significant concerns remain regarding the high levels of children's needs, and the availability of appropriate services to meet these needs.

The provision of a range of adoption support services appropriate to need has been linked to greater stability in adoptive placements (Barth and Berry, 1988; Smith and Howard, 1994; Brooks et al, 2002; Houston and Kramer, 2008), a greater willingness to adopt children from foster care (Evans B. Donaldson Institute, 2010), increased parental satisfaction (Rushton and Monck, 2009) and improved understanding of adoption and adopted children (Dhami et al, 2007). Lowe and Murch et al's (1999) study of children who were older at placement found that families were reporting significant difficulties accessing adoption support services, with inconsistent provision across England. Biehal et al's (2010) longitudinal study of belonging and permanence for children who were adopted from care and fostered on a long-term basis found that levels of emotional, behavioural and education needs were similar across both groups. The adopted children were not faring better on these measures than those in stable foster carer placements and generally had less support. They concluded that given the high levels of need longitudinally, increased support would be needed for these children and their families. These findings have been mirrored by Groze (1996) and Selwyn (2014a) who concluded that many adopted children continue to have considerable support needs throughout childhood and adolescence.

Support services for birth families have been highlighted as of considerable importance in supporting birth families adjust to the loss of their child and assist them with direct and indirect (letterbox) contact arrangements (Neil et al, 2010, 2011). Counselling and intermediary services for adopted adults support them with identity issues and provide important mediation during the process of reunion (Howe and Feast, 2000; Triseliotis et al, 2005). Support services therefore need to be in place which reflect the life-long impact of adoption on all parties and are responsive to a range of needs.

The perspectives of adoption social workers and managers on adoption support have been less researched to date. Ryan et al's (2009) USA study advocated for dedicated adoption support teams who could develop the expertise required to meet the needs of adoptive families. Increased training and greater inter-agency collaboration was also highlighted, alongside the importance of championing adoption support services politically and strategically in order to achieve sufficient resourcing. The study also emphasised the importance of 'normalising' adoption support in terms of helping families to recognise that a range of challenges are normal and to be expected. This finding has been echoed in the UK (Holmes et al, 2013; Selwyn et al, 2014a)

Two studies have recently been undertaken in England (Selwyn et al, 2014a) and Wales (Selwyn et al, 2014b) regarding adoption disruption. Both studies reported low disruption rates (2.6% in Wales and 3.2% in England). However, as Selwyn et al (2014a: 29) state, 'the overall disruption rate is ... quite a crude figure and gives no indication of which factors increase the relative risk of disruption'. In England the factor most strongly associated with disruption post-adoption order was the child's age: teenagers aged 11-16 years were ten times more likely to experience an adoption disruption than children under 4 years of age. Other significant factors were the age at placement and the time between placement and adoption order. In Wales, 'older age at placement, a higher number of moves in care before being placed for adoption and a lengthier time period between placement and the Adoption Order' were all predictors of adoption disruption (Selwyn et al, 2014b: 6). The Welsh study did not find an association between the child's age and risk of disruption. However, caution was advised here due to the small sample size in Wales compared to England. The study also mirrored the English findings in terms of teenagers being the most vulnerable group to adoption disruption, and the need for services specifically targeting this age group was emphasised.

Although the disruption rates are very low in England and Wales, the English study (Selwyn et al, 2014a) painted a picture of committed adoptive parents struggling to manage very complex and concerning behaviour as a result of trauma and the long-term impact of abuse and neglect in their birth families. Particular issues highlighted included the high incidence of child to parent violence, the presence of criminal activity in the community, inappropriate sexualised behaviour and significant mental health difficulties, often without appropriate support to meet both the adoptive parents' needs and their child's complex needs. The Welsh Government has commissioned similar research to be undertaken in Wales. Comparisons will therefore be able to be made between the experiences of adoptive families in Wales and England.

At present little is known in Wales about how the post-adoption support needs of adoptive families are assessed across the country, what provision is made to meet these needs, and how adoptive families experience this process. A survey of Adoption Support Services Advisors in Wales was undertaken in July 2012 by Adoption UK. Key findings included the presence of considerable regional variation regarding the provision of post-adoption support services, and the need for targeted and expert therapeutic support for children who had experienced early trauma, abuse and neglect and multiple placement moves. However, awareness of the needs of adopted children was seen to have improved, including within schools. Adoption UK also undertook a survey of adoptive parents in Wales in 2009 which found that less than 50% of adoptive families in their sample (68 families) were aware of the assessment process regarding the assessment of support needs post-adoption.

The provision of detailed information regarding the structure, provision and management of post-adoption assessment and support services throughout Wales is now needed in order to inform the implementation of the National Adoption Service. Furthermore, adoptive parents' support needs and experiences of post-adoption assessment and support would benefit from being systematically explored.

In 2012 the Children and Young Person's Committee in the National Assembly for Wales conducted an Adoption Inquiry. The report was published in November 2012. The committee took evidence from a large number of providers and adoption experts and around 60 adoptive families, including young people, provided written or verbal evidence about their experiences. The committee urged the Welsh Government to establish a

National Adoption Service that would tackle some of the regional inconsistencies in provision. It was recognised that services ranged from excellent to poor. Considerable gaps were reported in adoption support services, in particular CAMHS and therapeutic services, parenting services and life story work. It was recommended that adopters have a statutory right to support services.

In England, there is also considerable focus on tackling the causes and consequences of delay in relation to children being adopted (Department for Education, 2012) as well as considering the structure and provision of adoption support services (Department for Education, 2012, 2014), underpinned by legislative reform through the Children and Families Act (2014). The Childhood Wellbeing Centre undertook a rapid response survey in 2013 which considered the structure and provision of post-adoption support services in England (Holmes et al, 2013). They surveyed local authority adoption agencies only, and did not include the voluntary adoption agencies in their survey. The present study aimed to use key elements of the English survey to explore the structure and provision of post-adoption support services. Unlike the study conducted in England, we additionally surveyed voluntary adoption agencies.

Research Aims

- To map the current structure and provision of adoption support services throughout Wales.
- 5) To explore the views of Local Authorities and Voluntary Adoption Agencies regarding the availability and effectiveness of adoption support services, and how adoptive families' support needs can be appropriately met through the new National Adoption Service Framework.
- 6) To explore adoptive families' current experiences of assessment and provision of adoption support services in Wales, and their views about how their needs can most appropriately be met.

Methodology

The study was undertaken in three main parts; an online survey to all 22 local authorities and 5 Voluntary Adoption Agencies in Wales (27 agencies in total), a telephone interview

with each of these organisations, and an online survey distributed to adoptive parents living in Wales.

In January 2014 the online survey for adoption agencies (Appendix 1 & 2) was emailed to the Head of Children's Services in all 22 local authorities in Wales and the existing contacts (known to the research team) from the 5 Voluntary Adoption Agencies. Each of the 27 contacts was invited to nominate a member of staff best suited to complete the survey on behalf of the area or organisation. A combination of Heads of Service, Service Managers and Adoption Team Managers completed the survey and undertook the telephone interviews.

Taking into account the North Wales Adoption Team which consists of the six local authorities in North Wales (Wrexham, Flintshire, Gwynedd, Conwy, Denbighshire and Ynys Mon), the South East Wales Adoption Team which consists of three local authorities (Blaenau Gwent, Monmouth and Torfaen) and the West Wales Adoption Team (Carmarthenshire, Ceredigion and Pembrokeshire), 18 surveys and telephone interviews were aimed to be completed.

The aim of the survey was to address the following research questions:

- How are adoption support services structured? What services are provided in-house, and what is provided by other agencies or sub-contracted to other providers?
- 2) How are adoption support needs assessed? What are the similarities and differences between different agencies?
- 3) What are the main barriers and causes of delay in providing services to meet identified needs?
- 4) What do adoption agencies perceive to be the facilitators in the provision of adoption support services?
- 5) What management information system data do adoption agencies routinely collect and collate regarding requests for, and provision of, adoption support services?

The recent rapid response survey in England for the Department for Education (Holmes et al, 2013), was used as a basis for design. The survey in this study was adapted for the Welsh context in collaboration with an advisory group of representatives from adoption agencies, Welsh Government and adopters, but enough similarity was retained with the English study to allow for comparisons where appropriate. Permission to draw on the English survey

questions was granted by the study authors and the Department for Education. The survey consisted of 25 questions in 5 sections (Service structure, Data collection, Requests for adoption support, Provision of adoption support and Partnerships).

Each of the 18 adoption agency contacts received email reminders until a member of staff was nominated. On receipt of a named representative, emails were sent each week reminding them of the survey deadline and urging them to complete the survey. The final response rate for the survey was 100%. This contrasts with the English rapid response survey of adoption support which achieved a 44% response rate.

On receipt of the completed survey, each representative was contacted to thank them for submitting the survey and requesting a suitable time to conduct a telephone interview. The aim of the interview was to address the following research question:

6. What are the views of adoption agencies regarding the strengths and limitations of existing adoption support, and what (if any) actions do they think could be taken under the new National Adoption Service in order to improve provision to meet the needs of adopted children and their families?

The interview focused on the availability and quality of data relating to the assessment, provision and uptake of adoption support, experiences of assessing and providing adoption support services in Wales and Welsh language provision. The response rate was 100%. All 18interviews were transcribed for analysis.

The third component of the research was an online survey (Appendix 4) for adoptive parents living in Wales. The survey addressed the following research question:

7. What are the views and experiences of adoptive parents regarding assessments for adoption support and the provision of services? What are their views regarding the barriers and facilitators to accessing effective adoption support in their area? How do they think their support needs and the support needs of their adopted children can best be met?

Adoptive Families Research Sample

An online survey (Appendix 5) was distributed to adoptive parents via the 22 local authorities and four voluntary Adoption Agencies on the 5th February. In order to access as many adoptive parents as possible 26 organisations were asked to forward an email written by the research team (Appendix 4) to their adoptive parents, and the survey link was advertised on Twitter.

The survey was designed with reference to Adoption UK's 'Adoptive Parents in Wales' (2009) survey, with the permission of Adoption UK. The aim of this survey was to gain the views and experiences of adoptive parents regarding adoption support from a sample of 80 adoptive families. The survey was aimed at adoptive families either pre- or post-adoptive order living in Wales with adopted child(ren) aged 18 or under. Those families who were currently being assessed or waiting to be matched with a child were excluded.

Two weeks after the initial email requesting that the 26 organisations contact their adopters (Appendix 3), the response rate was low. In order to address this, representatives were asked during the telephone interview whether they had forwarded the email to adoptive parents. In doing so it became clear that not all local authorities kept a list of adopter email addresses. The research team approached one of the Voluntary Adoption Agencies for advice on how to proceed. The Agency Manager responded by contacting all their adoptive families urging them to complete the survey so that adoptive families were represented in this research. Of the 114 surveys submitted, 23 were excluded as not meeting the inclusion criteria, leaving a response rate of 91 adoptive families. This led to a final response rate comfortably higher than the target of 80 adoptive families. However, given that this was a self-selecting survey we acknowledge that the responses may not be representative of adoptive families in Wales.

The sample included 91 adoptive families who had adopted a total of 147 children. These families included 58 male/female couples (64%), 11 male/male couples (12%), 5 female/female couples (6%), and 17 single adopters (19%).

Local authority

The adoptive families came from 19 of the 22 Local Authorities in Wales (Table 1). The majority of children placed were from Wales (78:86%). Of these, 16 (18%) were placed to families living in the same local authority and 62 (68%) were placed in other Welsh

authorities. The remaining 5 (6%) consisted of families with children placed from Scotland and International adoptions. Adopters living in Cardiff and the Vale of Glamorgan are significantly over-represented in the sample.

Local Authority	Respondent
Anglesey	1
Blaenau Gwent	1
Bridgend	2
Caerphilly	7
Cardiff	18
Carmarthenshire	3
Ceredigion	1
Conwy	5
Denbighshire	3
Flintshire	0
Gwynedd	3
Merthyr Tydfil	4
Monmouth	4
Neath Port Talbot	0
Newport	4
North Wales	1
Pembrokeshire	4
Powys	2
Rhondda Cynon Taff	6
Swansea	4
Torfaen	2
Vale of Glamorgan	16
Wrexham	0
TOTAL	91

Table 1: Local Authority in which the adoptive family lives.

Region	Number	%
Vale, Valleys and Cardiff	44	48
North Wales	13	14
South East Wales	18	20
West & Mid Wales	10	11
Western Bay	6	7
Total	91	100

Table 2: Region in which the adoptive family lives

Welsh Language

Language use in the adoptive families mirrors patterns in the general population. Census results from 2011 found that 19% of the general population is Welsh-speaking, with higher rates among 3-15 year olds than the adult population.

Thirty three (36%) of the 91 families had at least one member of the family who could speak Welsh. Of the 91 adopters who completed the survey, 17 (19%) spoke Welsh and 13 (14%) had a partner who could speak Welsh. Two of the Welsh-speaking families were single adopters. Table 5 shows which adoptive parents could speak Welsh. Hence, 6 (8%) of families had both parents were Welsh-speaking. The results showed that 36 (24%) of the 147 children spoke Welsh. Twenty-three families (25%) had at least one Welsh-speaking parent and 27 (30%) families had at least one Welsh-speaking child. Nine (10%) families with Welsh speaking children were living with adoptive parents who could not speak Welsh. This reflects a general pattern in Wales where many children attending Welsh medium schools do not have Welsh speaking parents.

Three respondents reported 'other languages' were spoken in the home apart from English or Welsh. These have not been reported to help preserve the anonymity of the families.

Forty-seven of the 91 adoptive families had adopted one child (52%), with 35 (38%) reporting the adoption of two children. The results showed two families who had adopted four or more children (Table 3).

Children	Number adopted	Percentage
1 child	47	52
2 children	35	38
3 children	7	8
4+ children	2	2

Ages of children

The majority of children were placed for adoption under the age of 5 (131:89%). When asked how old the adopted children were now, ages ranged from under 1 to 18 years. Most of the adopted children appear to be under 10 years (Table 4).

Age	Age when placed (number placed at this age)	Age now (number in each age group now)*
less than 1 year	21	3
1 year	48	7
2 years	18	11
3 years	21	14
4 years	12	14
5 Years	11	13
6 years	6	11
7 years	5	12
8 years	3	12
9 years	1	7
10 years	0	4
11 years	1	5
12 years	-	4
13 years	-	6
14 years	-	2
15 years	-	5
16 years	-	4
17 years	-	7
18 years	-	5

*Data for one child is missing

Table 4: Age of child when they were placed for adoption and age now

Siblings

Eighty of the children (88%) had birth siblings. As data was not supplied for 1 of these children, details can only be provided for 79. Hence, 13 children had been placed for adoption together with all their siblings (17%), 36 were placed apart from all their siblings (45%), and 30 were placed with some of their siblings and apart from others (38%). This is similar to existing research which states that around 80% of adopted children have siblings, but most have at least one sibling from whom they are separated (Rushton et al, 2001; Kosonen, 1996).

Ethnicity

Of those who responded to this item, the majority described themselves (89:98%) and their partners as white (73:80%). The majority of children were described as white (132:90%). Eleven children (7%) were described as mixed race. The remaining data (4 children) is not reported to help preserve the anonymity of the families.

Disability

Respondents stated that 25 of the 147 children adopted had a disability. Further information about the range of health and educational support needs of these children is given in part 2 of this report.

Analysis

Surveys were completed electronically via the survey software Qualtrics. Results were exported and analysed on SPSS. The telephone interviews were fully transcribed, with the permission of respondents and thematic qualitative analysis undertaken. This analysis was largely deductive, with themes responding to the survey questions and original research brief from Welsh Government. Where numbers allow, some analysis was undertaken according to the five new regional consortia within the National Adoption Service.

Part 1: Structure of adoption support services in Wales

We were asked by the Welsh Government to investigate how adoption support services were structured throughout Wales. Local authority and voluntary adoption agencies were therefore asked about how their adoption support services were structured and staffed, and their vision for the future following regionalisation. Demand for Welsh language provision and how these language needs are met was also explored. We also asked what support services are currently provided in-house, what are provided by other agencies or subcontracted to other providers, and how adoption support is funded. This is reported in part 3 of the report.

Current structure of adoption services

The 10 local authority adoption agencies, 3 regional consortia and 2 voluntary adoption agencies (St David's and Barnardos) who provide the full range of adoption services reported how many staff in their agency were currently responsible for supporting the delivery of post adoption support. The data highlighted that all local authority adoption agencies primarily operate a generic model whereby most staff are responsible for covering all aspects of adoption work including assessment, family finding and support. Just two local authority adoption agencies noted that they had one member of staff specifically allocated to providing adoption support services, both on a part-time basis. Of the three existing regional consortia, one has three social workers dedicated to supporting children into adoptive placements, one has a part-time post dedicated to adoption support and one operates on a primarily generic model, although they noted that one worker has part of their time specifically identified for adoption support work. One regional consortium noted that they have a complex needs team who continues to work with children in adoptive placements up to the adoption order being granted. Due to significant variation in reporting it has not been possible to provide further information regarding the percentage of staff time dedicated to adoption support. Only one regional consortium reported having a dedicated member of staff to co-ordinate letter-box contact plus an administrator, compared to 90% of local authority teams in England (n=22) who responded to a recent survey (Holmes et al, 2013). There are therefore no dedicated adoption support teams in Wales currently. This is in contrast to England where distinct adoption support teams are more common (Holmes et al, 2013; Selwyn et al, 2014).

Two of the five voluntary agencies who provide adoption services in Wales specifically provide adoption support services only (After Adoption and Adoption UK), while two provide the full range of assessment, family finding and support services in Wales (St David's Children Society and Barnardos). The latter two adoption agencies also operate a generic model whereby all staff are responsible for covering all aspects of adoption work. BAAF Cymru is a registered adoption support agency, and has four members of staff who dedicate on average 15% of their time annually to adoption support work.

Analysis of the interview data highlighted that operating a generic model meant that the time focused on adoption support was often limited, with priority being given to recruiting adopters and matching children with adoptive families. Adoption support was therefore in many ways seen as the 'poor relation':

'At the moment it feels like [adoption support] cases aren't always a priority, as if you are home-finding for a child that takes priority' (local authority adoption agency)

One local authority who had a member of staff dedicated to adoption support noted that this level of resourcing was not sufficient, and other staff members also needed to respond to need:

"Other members of staff will take it up but obviously they are juggling other aspects of adoption work like assessments, family finding, support for new adoptive families, court work ... so it is spread very thin".

For that minority of agencies who have workers focused on adoption support, there was vulnerability present in relation to losing members of staff, particularly if they were the only staff member primarily undertaking this work. Losing valuable expertise was highlighted, particularly with regard to knowledge of multi-agency resources: *'[staff member] is an expert in resources ... so we're losing a key person to our service'.*

Issues of having to cover large geographical distances were also noted by two of the regional consortia, with one stating that in order to provide support to adoptive families their workers *'could almost write a day off getting there and providing support'*. This will be

an increasing issue once all local authority adoption agencies move into providing services on a regional basis, as each region will cover a considerable geographical area.

The adoption agencies highlighted the stability of their staff teams and their staff's commitment to all aspects of the adoption work, making comments such as *'it's a very dedicated team'* and *'they try to pull all the stops out to reflect the needs of the child and the family'*. However, five local authority adoption agencies also made specific comments regarding the complexity and demands of adoption support work on their staff, and their willingness to undertake the work:

'Adoption support scares some practitioners ... It can be a messy area of social work and sometimes people don't quite want to get involved. They would rather just assess adopters or do family finding because it's the 'nice' side of adoption. Adoption support can be quite difficult and sometimes people back away from that'. (local authority adoption agency)

These agencies noted that adoption support work can be demanding and demoralising, particularly at times of crisis for the adoptive family, and will often involve liaison with a number of different agencies on a 'child in need' basis and more rarely through child protection procedures, which in particular was seen as provoking considerable anxiety. The skills, interests and expertise of the adoption social workers were seen as crucial here, with agencies making comments such as 'it's an area that not all social workers enjoy', 'some social workers are passionate about adoption support' and 'it depends whether you've got someone on the team.....with the expertise to do it'.

Increased access to specialist training was seen as a major route through which to increase the confidence and capability of adoption social workers. The lack of access to in-depth training in Wales which specifically focuses on the complex long-term needs of children adopted from care was striking. Only two local authority adoption agencies stated that a small number of their workers had undertaken specialist courses, in these cases in theraplay. The skills gained through this training were seen as invaluable in increasing the social workers' confidence and expertise in attachment-related issues in particular, and assisted them in their day-to-day work supporting adoptive families. This was echoed in the National Assembly for Wales' (2012) 'Inquiry into Adoption'. The new Continuing Professional Education and Learning (CPEL) model for post-qualifying social work education in Wales could provide opportunities for the recognition of additional specialist training, alongside making greater use of existing provision through the voluntary sector and specialist therapy training providers.

The need for specialist training for *all* social workers involved with adoption was also highlighted, as concerns were present regarding the relative inexperience of many safeguarding children and families social workers and their level of adoption awareness, particularly in recognising the potential for support in the shorter and longer term. There was a view from the adoption agencies that at the time of matching and placement the children's social workers underestimated the impact of trauma following abuse and neglect on children's development, which resulted in support needs not being fully recognised and addressed within adoption support plans.

Recommendation 1: Support should be given to increased access to and provision of specialist training for *all* social workers involved in the adoption of children.

Structure of adoption support services following regionalisation:

There were mixed views regarding the future structure of adoption support provision following regionalisation. All adoption agencies reported a desire for greater prominence to be given to adoption support services, but the mechanisms through which this could be achieved were varied. Six adoption agencies (which included two regional consortia) specifically supported the development of specialist adoption support teams within each region. Their view was that this would increase the quantity and quality of service provision as well as reduce inequality of access across Wales. The two other agencies who provided comments stated that increasing all staff's expertise in adoption support would be of more benefit than providing dedicated adoption support teams.

One regional consortium reported that for the last four years they have had three social workers dedicated to preparing children and supporting them into their adoptive families. Prior to this they operated on a generic model and stated: *'we did feel in the end that*

[adoptive families] were not receiving the best service as a result of that ... people were working with one or two families but they were not developing the skills and expertise'.

Having social workers (either individually or collectively) dedicated to adoption support was seen as beneficial on a number of levels, particularly in terms of increased capacity to undertake adoption support work, increasing skills and expertise, developing knowledge of local resources and building constructive relationships with service providers.

Regionalisation of adoption services provides an opportunity for the National Adoption Service to consider how adoption support services can be structured across the country, including the role of the voluntary sector here. However, whilst regionalisation can be viewed as a mechanism to ensure equity of access to adoption support, it will be vital for the five regions to develop a response to this which not only responds to local need but also represents equity across the country for all parties affected by adoption.

Recommendation 2: Strong consideration should be given to the development of dedicated adoption support teams in each region.

Welsh language provision.

As was reported in the demographic information, 33 (36%) of the 91 families had at least one member of the family who could speak Welsh. Only 4 (4%) of the 17 Welsh-speakers who completed the survey stated that they would prefer adoption support to be delivered in the medium of Welsh. Of these, 3 stated that this was for the child's benefit. Only 8 (9%) stated that they did not want adoption support to be delivered in Welsh with the vast majority of respondents leaving this item blank (74:81%) or having no preference (5:6%).

Most adoption agencies reported low demand for Welsh medium services, but most had encountered occasional demand. Nine of the 18 adoption agencies reported an ability to provide in-house services through the medium of Welsh and most, but not all, of the rest had either spot purchased Welsh language provision or were confident that they could do so. One consortium (North Wales) reported having 5 or 6 members of staff who were fluent in Welsh, with most other agencies relying on one or two members of staff. This means that provision is vulnerable to staff turnover:

No, not in this team. We had a Welsh speaker in the team and she moved to another team. When she was in the team if an application came in with people speaking Welsh as a first language then I would allocate to her and she would undertake it mostly through Welsh but of course everything else the report and all her supervisions and the file was in English, she had to write it up in English (local authority adoption team).

Gwynedd conduct their adoption panel through the medium of Welsh and the consortium is able to respond to requests for assessments and support in Welsh. Four local authorities in south Wales reported that they can provide assessments and other services through the medium of Welsh, with one noting that this is also a service that is provided to birth parents if needed. Generally, attitudes to providing services through the medium of Welsh were very positive from adoption agency respondents. *'I've never been asked to provide in Welsh but I'm absolutely sure that if we needed to we would find a provider that could.*' One noted that they had not previously been able to provide services in Welsh but would now be able to under the new regional collaboration. Only one local authority expressed the view that they would use interpreters rather than purchase or provide Welsh language provision directly:

We don't really have much call for it really. We've had some issues of Welsh language applicants but not ongoing, it's not really an issue for us we'd have, if they were insistent we'd have to use an interpreter. We don't have any Welsh speaking staff (local authority adoption team).

There is considerable potential to develop Welsh medium adoption support services, considering the proportion of Welsh spoken in the homes of the survey respondents and the opportunities for pooling staff language skills through the regional consortia. This development would fit with the Welsh Government strategy for health and social care services *More Than Just Words* (2012).

Recommendation 3: Welsh language provision within the regions should be reviewed, and plans developed to lessen vulnerability to staff turnover.

Summary

- There are no dedicated adoption support teams in Wales. This is in contrast to England where distinct adoption support teams are more common. Currently all local authority adoption agencies primarily operate a generic model whereby most staff are responsible for covering all aspects of adoption work including assessment, family finding and support. Two local authority adoption agencies and the three regional consortia have between 1-3 members of staff who dedicate part of their time to adoption support work.
- Just one regional consortium reported having a dedicated member of staff to coordinate letter-box contact.
- Operating a generic model meant that the time focused on adoption support was often limited, with priority being given to recruiting adopters and matching children with adoptive families. Adoption support was therefore in many ways seen as the 'poor relation'.
- Adoption teams reported having very stable staff groups who were highly committed to adoption work.
- Adoption support work was viewed as a highly skilled activity which provoked anxiety amongst workers as well as passion for the work.
- Few adoption social workers have undertaken additional specialist training, particularly in relevant therapeutic approaches in working with trauma and attachment difficulties.

- The need for specialist training for *all* social workers involved with adoption was also highlighted, as concerns were present regarding the relative inexperience of many safeguarding children and families social workers and their level of adoption awareness, particularly in recognising the potential for support in the shorter and longer term.
- Over a third of adoptive families responding to our survey had at least one Welshspeaking family member. Most adoption agencies reported low demand for Welsh medium services, but most had encountered occasional demand. Eight of the 17 adoption agencies reported an ability to provide in-house services through the medium of Welsh and most, but not all, of the rest had either spot purchased Welsh language provision or were confident that they could do so.
- Welsh language provision is vulnerable to staff turnover.

Part 2: Accessing support, and assessing and reviewing adoption support needs

We were asked to consider how adoption support services are accessed, how adoption agencies currently assess and review support needs, and what the similarities and differences were between different agencies. Adoption agencies and adoptive parents were asked about these issues. We were also asked to consider the types of information adoption agencies collect in relation to the numbers of adoptive families *requesting* an assessment for adoption support, and those who were subsequently *offered* and *received* support for the time period 1^{st} January 2013 – 31^{st} December 2013. This section of the report draws heavily on the reported findings of the English survey (Holmes et al, 2013) in order to draw comparisons between England and Wales where possible.

Number of families receiving adoption support

Local Authorities were asked to provide figures for the number of adoptive families known to them during the time period 1^{st} January $2013 - 31^{st}$ December 2013. The number of adoptive families known to each local authority/ regional consortia ranged from 25 to 166 (see table 5), and these figures have also been amalgamated into the new regions (table 6).

Local Authority	No. of families known to LA*
Bridgend	40
Caerphilly	40
Cardiff	44
Merthyr Tydfil	25
Neath Port Talbot	44
Newport	30
North Wales Adoption Team	166
Powys	34
RCT	100*
South East Wales Adoption Team	191
Swansea	51
Vale of Glamorgan	44
West Wales Adoption Team	80*

Table 5: Number of families known to the adoption agency (* indicates estimate provided)

Region	No. of families known to LA*
Vale, Valleys and Cardiff	213*
North Wales	166
South East Wales	261
West & Mid Wales	114*
Western Bay	135

Table 6: Number of adoptive families by region (* indicates estimate provided)

The local authorities included adoptive families who had children placed with them prior to an adoption order being granted and those who had on-going support packages post adoption order. However, they also stressed that families who took part in their universal support services such as adoption support groups, activity days and accessing telephone support would not have been included. This support was reported as being provided on a more ad hoc on-demand basis and a formal record was not usually taken of these types of support. This is understandable given the informal nature of this support and the wish of many adoptive families to normalise their family life.

The local authorities also highlighted that adoptive families may be known to other social work teams outside the adoption service and they would not necessarily be aware of these families unless they were working jointly. For example, children who had needs which were not deemed to be directly related to adoption (such as complex health needs or education support needs) could be receiving services from a children with disabilities team or a child in need team without their knowledge. These figures should therefore be treated with caution and are likely to be an under-representation of adopted children and their families known to local authorities.

Accessing adoption support services

The referral process

Seven local authority adoption agencies, three regional consortia and one VAA reported on their existing referral processes through which adoptive families can access support services. All agencies highlighted that following a child's placement with their adoptive family, support continues to be available through the adoption agency and the child's social worker until the adoption order is granted. The adoption support provided was reported to be responsive to need, and designed to ensure as smooth a transition as possible for the child and their adoptive family until the adoption order is granted.
At the point of the adoption order being granted, unless there is a package of on-going support such as significant financial allowances which require on-going review or the provision of therapy, the adoption agencies generally reported that the case is normally closed. This reflects the findings of Sturgess and Selwyn (2007) and Selwyn et al (2014). Support services post-adoption order, apart from the low level universal support available to all adoptive families from their agencies, can therefore be seen in many ways to be reactive rather than pro-active. Adoptive families can understandably wish to disengage from social services in order to normalise their family life (Selwyn et al, 2014). However, the *accessibility* of support which can respond to a range of needs therefore becomes crucial, particularly as nearly three-quarters of the adoptive parents surveyed attempted to access support services between 2-7 years post adoption order.

Subsequent requests for support from adoptive families are currently dealt with in a number of different ways, and seven local authority adoption agencies and the three regional consortia shared their practice during the interviews. Three routes to assessment were apparent from these agencies:

1) If the referral comes direct to the adoption service they will carry out an initial visit and complete the initial assessment, sometimes accompanied by colleagues from the intake and assessment team if the request cannot be dealt with informally through the provision of information or signposting to universal adoption support provision. If the support needs identified are primarily in relation to adoption then the adoption service will hold the case, sometimes co-worked by colleagues from children's services if other more general support needs are also identified. In these cases the core assessment will be undertaken by the adoption service. This approach was adopted in a minority of cases. Several adoption agencies did however note that if adopters were aware of adoption services they would usually approach them in the first instance.

2) Requests which come in to the adoption service are automatically signposted to the local authority's intake and assessment team if the request cannot be dealt with informally through the provision of information or signposting to universal adoption support provision.

3) Requests for adoption support are made directly to the local authority children's services intake and assessment teams. Adoption teams may or may not be aware of these referrals

and subsequent services offered, particularly if support needs are not assessed as being directly related to adoption.

For the latter two referral routes, which were the most common routes, an initial assessment will be led by the intake and assessment team, and if adoption support needs are apparent at time of referral then the adoption service will often, but not always, accompany the intake and assessment social worker on the initial visit. If there are child protection concerns identified or the support needs meet the threshold criteria and are primarily able to be met by children in need provisions then the intake and assessment team will usually carry out initial and core assessments, with a secondary allocation to the adoption service in order to meet needs specifically related to adoption. If the support needs are assessed as being primarily adoption related a variety of practice was reported. Some intake and assessment teams will close the case at the point of completing the initial assessment and not continue to a core assessment, other intake and assessment teams will complete the core assessment, and in some but not all cases the adoption service will complete the core assessment.

One issue here is the somewhat arbitrary separation that is made between support needs which are deemed primarily adoption related and those which are deemed more universal, as the reality is somewhat more complex. The adoption agency responses highlighted their understanding of the complex and multi-faceted issues which can present for adopted children and their families and the need for a co-ordinated multi-agency response, particularly in cases where adoptive placements are in difficulty and/ or at risk of breaking down (although this did not always happen). However, the managers were often less sure that their colleagues in the intake and assessment teams had this understanding. In particular, the perceived inexperience and/ or lack of expertise of many of these social workers with regard to adoption issues was highlighted, as was the interpretation of the threshold criteria for access to services. They therefore felt that there was often a lack of understanding about how the needs of adopted children and their families can be met. Several of the adoption agencies tried to ensure they conducted the initial assessments jointly as a result of this:

'We would usually joint visit with them because a lot of social workers in intake and assessment teams are relatively inexperienced and are not particularly adoption aware'. (local authority adoption agency)

'If it would meet their threshold then we would co-work it with them. If it didn't meet their threshold ... we could pick the case up'. (local authority adoption agency)

Selwyn et al's (2014a) recent study of adoption disruption in England raised this issue. In particular, the sometimes punitive responses by safeguarding teams towards adoptive parents who were facing substantial difficulties were highlighted. A number of adoptive families in this study had felt judged or blamed by frontline social workers when they approached social services for support, and this is discussed further elsewhere in this report. Given the significant concerns raised by adoption service managers and some adoptive parents in this study, increasing joint working of cases, particularly when there are safeguarding issues, should therefore be considered across Wales.

Most of the adoption agencies highlighted that the intake and assessment team social workers had in their view more knowledge and expertise in relation to local services and resources. It was also felt that they had more established relationships with colleagues in the relevant services locally, particularly within health and education services:

'The reason we co-work the case is because actually the safeguarding are more geared up to access a range of support services and statutory services than we are.....our safeguarding colleagues run the case in terms of ensuring that all partner agencies are actively involved in putting in support for the family and we then advise on the adoption-related issues. (local authority adoption agency)

There was a perception from several, but not all, adoption agencies that referrals from safeguarding team social workers had a higher status and would result in the swifter provision of appropriate services. This was felt to be as a result of a lack of understanding from partner agencies regarding the wide diversity of support needs of adopted children and their families, and a view that any provision related to adoption should therefore be met by the adoption service:

'It is very challenging to get access to community resources if you are an adoption social worker, yet for the safeguarding team it is much easier' (local authority adoption agency)

'If an adoptive family has been labelled as needing adoption support this can be a barrier from partner agencies in terms of providing what is required from mainstream agencies' (local authority adoption agency) As well as the need for co-ordinated multi-agency responses to adoption support needs, access to consultation about the child and their family's needs at an early stage was also highly valued. Only a small number of adoption agencies had regular access to consultation from clinical and educational psychology colleagues or play therapists, but in each case this was highly valued. There was no mention of regular access to CAMHS teams for consultation purposes. Access to other health professionals, including medical advisors, was also highly valued particularly where complex and over-lapping health needs were present. However, provision of consultation from health, education and psychological services is very patchy and in no way consistent across Wales. Access to regular consultation would also provide focus about which services are most appropriate to meet children and their families' needs in the short and longer term. The challenge however will be having services available which meet these needs, and which families across Wales can readily access. The development of a National Adoption Service in Wales provides an opportunity to address these issues, but it is clear that investment will need to be made in order to meet need. This is explored further in part 3 of this report.

The referral process – views from adoptive families

Within the adoptive parent survey, forty-seven families (52%) had requested adoption support, 38 (42%) had not and 6 (6%) did not answer. The majority (Table 7) requested this from the adoption agency in the first instance (29:63%).

Agency	Number	%
Adoption Team (LA or VAA)	30	63%
Children's Social Work Team	14	29%
GP	1	2%
Other	2	6%
Health visitor	1	
Not stated	1	
Total	47	100%

Table 7: Who did adoptive families approach in the first instance?

This underlines the views of the adoption agencies that where adoption services are known about by adoptive families the adoption team will usually be their first point of contact. However, most local authorities operate a system of referral through their intake and assessment teams for support requests which go outside the remit of their universal service provision following the adoption order. This suggests that further work needs to be completed by adoption agencies regarding the coherence of their referral processes (including an emphasis on joint working) and the visibility of this information for adopters who wish to access support services.

Recommendation 4: The process through which families request adoption support needs to be streamlined within and across the regions.

Recommendation 5: Visibility of information about adoption support services within each region should be significantly increased so that all parties affected by adoption can easily access appropriate information. One route would be via the National Adoption Service's website <u>www.adopt-wales.co.uk</u>, with available services within the 5 regions clearly delineated.

Timeframe between request and assessment

As reported above, the 10 local authority adoption agencies and 3 regional consortia generally operated a system whereby requests for an assessment of need were first dealt with through the 'front door' by the Intake and Assessment Team. Hence, all referrals were reported to have an initial assessment completed within 7 days. If a core assessment was subsequently undertaken, there was variation in the timescales for completion. For the North Wales Adoption Service, it was not possible to give a timeframe as all assessments were undertaken by the receiving local authority. For the remaining 4 regions, 3 reported a timeframe of between the 7 days initial assessment and 2 months as the length of time between a request for assessment and completion of the core assessment. The third gave a shorter range of between 7 days and 1 month. This finding is in contrast with that from England where three fifths of authorities (n=9) reported that completion occurred within two weeks or less (Holmes et al, 2013). However, given the very short time-frame in which assessments only, although this was not explicitly stated. A clear comparison here between Wales and England is therefore not possible.

The majority of adoption agencies thought that a period of up to 4 weeks was an appropriate time frame for the completion of an assessment for adoption support. Some

reiterated the statutory timescales for core assessments, deeming these to be an adequate timeframe. These data are shown in Table 8.

	Appropriate timeframe for the completion of an assessment					
	2 weeks	4 weeks	6 weeks	2 months	Total	
Adoption agency respondents	2	9	1	1	13	

Table 8: Perceived appropriate time frame for completion of the assessment

Following the results above, 3 regions are not completing assessments within the timeframe they deem to be appropriate. When asked what the main causes of delay were, the majority (9) cited staff availability to complete the assessment (Table 9). This was followed by the difficulties encountered in accessing background information from the authority that placed the child (5). Workload pressures were highlighted as the main factor which inhibited the completion of assessments in the English survey (Holmes et al, 2013).

Reason	Number	%
Staff availability	9	47
Accessing background information from placing agencies	5	26
Willingness of other agencies to contribute e.g. Education, CAMHS	2	11
Family availability	1	5
Collating information from all sources	1	5
Family in crisis may hinder the identification of the issues	1	5
Total	19	99

Table 9: Main causes of delay in completing the assessment

In the adoptive parent survey, 12 of the 47 families who had requested adoption support (26%) had also requested a formal assessment of need. 58% (7) had made this request more than two years ago.

Most assessments of need were reported by adoptive parents to be conducted between 5-7 weeks (7:64%) after the request, although two were conducted between 3 and 4 weeks (18%) and two (18%) more than 7 weeks after the request (missing data = 1). This highlights that only two families reported receiving an assessment within one month of making the request. Although the timescales confirm the experiences of the local authority adoption

agencies and regional consortia, they are well outside the levels of timeliness which adoption agencies wish to achieve.

Of the five adoptive parents who provided the reasons they were given for the delay in carrying out the assessment, three reported that this was due to staffing problems, and two referred to problems with paperwork. These reasons reflect some of the reasons given above by the adoption agencies. Only 1 of the 10 families who commented felt that there was an appropriate timeframe between the request and the assessment of need for support being carried out.

Point at which request for adoption support is made

We decided to ask adoptive parents themselves rather than the adoption agencies about the point at which they requested adoption support. We received 12 responses to the question, outlined in table 10 below:

Point at which request for adoption support is made	Number	%
When difficulties first emerge	5	42%
Response to advice from	3	25%
partner organisation		
At crisis point	4	33%
Total	12	100%

Table 10: Point at which request for adoption support is made

This contrasts with the findings from the English survey (Holmes et al, 2013) which stated that adoption agencies perceived the point at which adoptive families most often accessed support was at crisis point. There are a number of possible explanations for this. Most felt that getting an assessment of need was either difficult or very difficult (8:68%) with 4 (33%) stating that it was neither difficult nor easy. Two sets of adoptive parents commented specifically that the situation had to be *perceived* by the agency to be at crisis point before an assessment was completed:

'We had to really say we were at crisis point and at risk from our son before anything happened. It then all happened very fast'.

'...when issues came to crisis I requested assistance; 6 months later we were assessed, and 6 months after this we were agreed to go forward for therapy.'

Furthermore, four of the eight adoptive families who were not at crisis point at the time of request described deteriorating situations whilst they were waiting for the assessment of need:

'...things eventually deteriorated so much that our first adopted chid became voluntarily accommodated'

'...our family was in meltdown, our son went into short-term foster care, I had a breakdown..., our other children were affected and upset – it was a bloody nightmare!'

'I was on my own struggling to hold us all together and felt I hardly had the emotional energy left to be form-filling and fighting for help for me and the children'.

The National Assembly for Wales Inquiry into Adoption (2012: 71) stated that *'The Committee is of the view that many families are accessing post-adoption support at crisis point rather than accessing quality on-going support'*. These findings, although limited here by small numbers of adopters responding to this issue, suggest an alternative explanation in relation to when adoptive families access support. Two-thirds (n=8) of the adoptive families asked for an assessment of need *prior* to reaching crisis point, sometimes on advice of a partner agency, but they may have felt they had to say the situation was at crisis point in order to access an assessment, or cope with a deteriorating situation whilst waiting for an assessment.

Factors which influence the completion of quality assessments

Skills and expertise of social work staff

Adoption agencies highlighted that they had very dedicated workers who were committed to ensuring the best outcomes for adopted children and their families. However, they also noted that while a minority of adoption staff were highly trained and skilled in adoption support work others were not, although there was a willingness to learn. One local authority adoption agency noted: *'it will take time to develop the team so everybody can respond appropriately to adoption needs'*. As detailed earlier in this report, the adoption agencies also noted however that adoption support work can provoke anxiety due to its complexity and the lack of specialist training provided, and some staff were less willing to take it on.

Several adoption agencies reported that the lack of adoption knowledge in frontline social work teams was concerning, particularly in relation to the long-term impact of abuse and neglect on children which may not show itself until several years after placement, including the potential for emotional and behavioural difficulties (Neil et al, 2012, Selwyn et al. 2014), the different approaches to parenting which may be required and therefore the need for on-going support services for adopters from a variety of sources:

'The assessment is quite a skill to unpick ... and I think some of the safeguarding social workers don't have the resources to do that'. (local authority adoption agency)

The relationship and interface between the childcare teams and the adoption service was also seen as crucial when assessing the support needs of adopters. Several adoption agencies commented that they have worked hard over a number of years to develop productive relationships with their childcare teams because the combination of adoption awareness and safeguarding/ resources awareness works well in assessing needs and resources available to meet need for adoption support.

Having the right professionals involved

Another important factor which influenced the quality of assessments was ensuring the right professionals were involved in the assessment process. In particular, services within health (including CAMHS) and education were highlighted:

'There is a cross-over to child protection, to education, to health' (local authority adoption agency)

'It's having the right people involved to know what you are starting with. In essence, you can't identify how best to move forward until you understand what the presenting situation is'. (local authority adoption agency)

Access to relevant professionals during the assessment process was not just about gaining access to services; the importance of consultation and advice that relevant experts can offer was highlighted. One adoption agency stated that they have a service level contract with a play therapist whose advice was seen as invaluable. Another commented on the proactive relationship they have with their medical advisor who provided very useful advice regarding health issues and signposts to relevant services. A small number of adoption agencies had access to in-house psychology teams. One local authority adoption agency had access to specialist social workers within the authority who used to work within their CAMHS services

and were available for consultation and more rarely direct work with adoptive families. Most adoption agencies commented on the lack of access to advice from CAMHS professionals when undertaking assessments. Here, CAMHS was particularly related to the need for access to specialist consultation when considering particularly complex emotional and behavioural needs of adopted children, and how these needs can be met.

Use of the assessment framework

There was varying practice regarding the assessment frameworks used to conduct assessments for adoption support. Statutory guidance produced by the Welsh Government in 2005 emphasised that the assessment of adoption support needs should have a life-span approach and be conducted within the ecological framework which is used for the Framework for Assessment of Children in Need and their Families. The guidance is extremely detailed and fits with the domains of core assessment, with an adoption focus. However, the extent to which this is used in practice appears to be variable. Some adoption agencies have developed specific assessment forms for adoption support which reflect the practice guidance, although the extent to which these are used in their childcare teams is unclear. One local authority adoption agency reported using a form developed in England which was described as 'more user friendly and more suited to post-adoption', while others commented that their childcare teams use the standard initial and core assessments. In these cases assessment quality was seen as variable and reflective of the level of adoption awareness of the social worker. The development of the National Adoption Service in Wales provides an opportunity to revisit the frameworks through which adoption support needs are assessed. It may be a good moment to collate good practice in order to develop a model of assessment (including associated forms and practice guidance) which each of the regions could adopt in order to provide a format which focuses on the needs of the children and their adoptive families as well as ensuring equity within and across regions.

Recommendation 6: The framework for the assessment of adoption support needs should be reviewed, and a consistent approach developed within and across regions.

Accessing accurate background information

Accessing accurate information from placing authorities such as original assessments of the child and support plans was highlighted as a particular issue when conducting assessments, particularly in terms of the time it can take to access this information about children adopted several years previously:

'The challenge is about being able to get enough background information ... sometimes that information is held by the placing authority. Finding it, getting access to it is sometimes impossible and if you've got a family in crisis today, you might take 3-6 weeks to get the information from the placing authority, if not longer'. (local authority adoption agency)

As several adoption agencies highlighted, where there are issues surrounding life story work and later life letters which are concerned with the child/ young person's identity then accurate background information will be vital in order to inform the work undertaken.

Adoptive family engagement the assessment process

The final area which was felt to impact on the quality of assessments was the feelings of the families themselves regarding the assessment process and their subsequent levels of engagement. Several local authority and voluntary adoption agencies commented on this, noting that adoptive parents often feel like they are failing if they approach agencies for help and support. One adoption agency stated 'I think that some of them do feel a sense of failure or embarrassment'. Another commented 'some adopters find it quite daunting and difficult', with one other noting that some adopters struggled to cope with the idea that their child was having difficulties.

In the adoptive parent survey, those who had requested adoption support services reported a range of responses from the social work teams. Of the 47 who had requested support, 46 gave further details. Of these, 27 reported receiving support and the majority (22:81%) were happy with the support they had received. For example the support was described as *'Prompt and efficient', 'Very kind and efficient' and 'They have been very supportive and timely'*. Eighteen of the 47 (38%) respondents reported that they not received support. Four adoptive parents felt that social workers had deemed them to be the problem from the outset, with one respondent stating *'They denied the children's difficulties and blamed us'*. Two respondents felt that they had not been taken seriously, and the remaining 12 reported that they were either told that there was no support available or they did not receive a response:

'They offered to look into the matter but we then had to chase up and nothing had been done'

'I ended up taking on the issues myself, finding the answers and dealing with them without any support'.

'We discussed the issues we had but no support was put in place for us'.

An open-minded and proactive response to adoptive families from first point of contact onwards is therefore of fundamental importance in order to ensure that families do not feel judged or blamed for requesting additional support. This could also link to what Ryan et al (2009) refer to as 'normalising' the need for adoption support services.

In a similar vein, the voluntary adoption agencies and smaller local authority adoption agencies appeared to keep in closer touch with their adoptive families in terms of sending regular newsletters and promoting their universal services. This would seem to be a helpful method to contribute to normalising adoption support through regular communication. As one voluntary adoption agency noted:

'Most of the time, there is someone in this organisation who will have known or will have worked with the family or will have seen them through support groups or whatever, and we try to be as responsive as possible'.

Quality of assessments - views of adoptive families

Within the adoptive parent survey ratings of the quality of the assessment (Table 11) appeared split between 'Extremely poor/poor' (5:45%) and 'Adequate/good' (6:54%), although it should be noted that only 11 responded to this question:

Rating	Number who responded	%
Extremely poor	2	18
Poor	3	27
Adequate	3	27
Good	3	27
Excellent	0	0
Total	11	100

Table 11: Adoptive parent ratings of the quality of the assessment of adoption support needs

This suggests a divide between those who were offered support following a formal assessment of need: 'We were lucky I think. A package of theraplay, therapeutic life-story work and re-parenting strategies were offered', and those who were not: 'The assessment DID identify needs but we were always under the impression that there wasn't money or insufficient practitioners around to meet the identified need'. Hence, only 4 of the 11 (36%) reported that in their view they had received all the recommended adoption support following a formal assessment of need (Table 12). This figure is very similar to Adoption UKs survey of adoptive parents England and their access to support services (Pennington, 2012), where 31% (n=455) reported receiving all the recommended adoption support.

Adoption support	Number	%
Yes, we received ALL of the recommended adoption support	4	36
Yes, but we only received PART of the recommended adoption support	2	18
Support was recommended but we did not receive it	2	18
Other:	3	27
It is in progress	1	
I have only been assessed for financial support	1	
The assessment didn't adequately address our needs. It appeared as though [local authority] were just going through the motions	1	

Table 12: Did the assessment result in you receiving adoption support?

Number of families requesting assessments of need for adoption support, and receiving support

We asked all the local authority adoption agencies and two voluntary adoption agencies who provide the full range of adoption services to provide a breakdown regarding the types of information they collected in relation to the numbers of adoptive families *requesting an assessment for adoption support*, and those who were subsequently *offered* and *received* support for the time period 1^{st} January 2013 – 31^{st} December 2013. Fourteen agencies responded to this item (13 local authority adoption agencies/ regional consortia and one VAA), and all encountered difficulties in obtaining this information. This was due to a variety of reasons including the lack of systems to record such data and the manner in which requests for adoption support are dealt with in local authorities. It was acknowledged that the adoption agencies tend to operate on the April-March financial year timeframe, yet this did not seem to account for the difficulties encountered. In order to address these issues, each authority was asked to provide an estimate if actual figures were not available. Appendix 6 presents the information obtained.

Twelve of the 13 local authority adoption agencies and regional consortia reported the number of families requesting an Assessment of Need for adoption support in 2013 (Table 13). This ranged from 1 to 56 families. Just over half of authorities reported 10 or less requests. This result is similar to England (Holmes et al, 2013), where a range of 2 to 91 was reported with 62% of authorities receiving requests from 10 or less families.

	The number of adoptive families who requested an assessment of need.					
	10 or less 11 to 50 51 to 100 101 to 150 151+ Total					
Survey respondents	7	4	1	0	0	12

Table 13: Number of adoptive families who requested an assessment of need in 2013.

Eleven authorities reported offering support additional to the adoption support plan to a range of 1 and 50 families. These data are shown in Table 14. Of these, 64% of authorities offered additional support to 10 families or less. For England, a wider range of between 1 and 559 was reported where three quarters of offers were made to 50 or less families. Hence 25% of authorities offered support to 101 or more adoptive families (Holmes et al, 2013).

	The number of families that were offered additional support, post						
		adoption order.					
	10 or less	10 or less 11 to 50 51 to 100 101 to 150 151+ Total					
Survey respondents	7	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					

Table 14: Number of families that were offered additional support, post adoption order in 2013.

Fifty families or less subsequently received support from the 11 authorities who provided this data (Table 15). Slightly more than half of authorities subsequently offered additional

support to 10 families or less. Again for England, higher numbers of families received support with a range of between 1 and 599. Just over three quarters of authorities (10) were providing post adoption support to 50 families or less (Holmes et al, 2013).

	The number of adoptive families that subsequently received adoption						
	support.						
	10 or less	11 to 50	51 to 100	101 to 150	151+	Total	
Survey respondents	6	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					

Table 15: Number of adoptive families that subsequently received adoption support in 2013

Eleven of the 13 authorities reported a range of between 1 and 10+ years as the average time that families requested adoption support (Table 16). Seventy-three per cent of requests were made between 2 and 7 years following the Adoption Order.

	Average time post-order that the request was made.					
	1 year or 2-4 years 5-7 years 8-10 10+years Total					
	less			years		
Survey respondents	1	4	4	1	1	11

Table 16: Average time post-order that request for adoption support was made.

The average length of time adoptive families accessed adoption support services was highly variable. A range of between 1 month to 2 years and 4 months was reported across 8 authorities.

Adoption support plans

Adoption support plans are formal plans which set out a child's needs when they are placed with their adoptive family, and the support services which will be put in place to meet those needs. They were introduced through the Adoption and Children Act (2002), and came into force in 2005.

Within the adoptive parent survey it was viewed as highly likely that families who adopted children prior to 2005 would not have had a formal adoption support plan. The survey therefore filtered out these families by directing them to the next section of the survey. Seventy-seven (85%) of the 91 adoptive families had adopted children after 2005. These families were asked to complete the section on adoption support plans basing their responses on the last child adopted. Fifty of the 77 families (65%) reported having an adoption support plan when they were placed. 19 families reported not knowing whether

such a plan was in place (25%) and 8 families thought there was not an adoption support plan (10%).

Identified needs within the Adoption Support Plan

Forty-seven of the 50 adoptive parents who had an adoption support plan responded to the question asking 'what were the child's needs as identified in the adoption support plan?', and were asked to provide what the primary identified need was. Responses varied (Table 17) with 'general support' being the most frequent need identified (34%). Here, support was identified as being required to meet the child's needs consistent with their age and stage of development, to support the child with the transition to the adopted home, register with education and health, attend medical appointments and to support in-direct (letterbox) contact with birth parents and/or siblings.

Adoption support plan	Number
General support	
(e.g. to support child with the transition to an adoptive home, meet the child's	16
needs, letterbox contact)	
Attachment needs	5
Health needs	5
Education support	3
Family therapy	2
Maintaining direct contact	2
CAMHS	1
Play therapy	1
Cannot remember	6
Nothing	6
Total	47

Table 17: Child's needs as identified by adoptive parents in the adoption support plan

Number of families who received support as outlined in the adoption support plan – The agency views

Of the 7 local authorities who supplied this information, only two local authorities reported that all of the families known to them received, in their view, all of the support outlined in the adoption support plan. The number of families reported to be receiving all of the support ranged from 18 to 116 (Table 18). Most of the authorities reported offering all of the support to 50 families or less. As a percentage of the total number of families reported

to be known to the 7 local authorities, between 18% and 88% of families received all of the support outlined.

	The number of adoptive families who received <i>all</i> the support outlined in						
		the adoption support plan.					
	10 or less 11 to 50 51 to 100 101 to 150 151+ Total						
Survey respondents	0	5	1	1	0	7	

Table 18: Number of adoptive families who received all of the support

Only 3 authorities reported on adoptive families who had received part of the support, with this ranging from 4 to 38 families (Table 19). As a percentage of the total families known to each of the 3 authorities this gives a range of between 2% and 95% of families receiving part of the support outlined.

	The number of adoptive families who received <i>part</i> the support outlined								
		in the adoption support plan.							
	10 or less	10 or less 11 to 50 51 to 100 101 to 150 151+ Total							
Survey respondents	1	1 2 0 0 3							

Table 19: Number of adoptive families who receive part of the support

Two authorities reported families who did not receive any of the support outlined (Table 20). This ranged from 5% to 7% of families known to the authority.

	The number of adoptive families who received <i>none</i> of the support								
	outlined in the adoption support plan.								
	10 or less	10 or less 11 to 50 51 to 100 101 to 150 151+ Total							
Survey respondents	2	2 0 0 0 0 2							

Table 20: Number of adoptive families who receive none of the support

Number of families who received support as outlined in the adoption support plan – The adoptive families views

In the adoptive parent survey just over half of families who responded (22:54%) reported that they had received all of the identified adoption support in the adoption support plan (Table 21). Of the 19 (45%) who felt they did not, 5 (12%) reported receiving part of the support whilst 3 (7%) stated that they did not receive any of the identified support and 1 family (2%) chose not to go ahead with it. Of the remainder, 8 families reported that the adoption support plan had not identified any on-going support needs and 2 families provided additional reasons why the support has not gone ahead as planned.

Identified support service	Number	%
Yes, we received ALL of the identified adoption support	22	54
Yes, but we only received PART of the identified adoption support	5	12
Support was recommended but we did not receive it	3	7
Support was recommended but we chose not to go ahead with it	1	2
Other, please give details:	10	24
No support identified	8	
Social work visits limited to 4 a year so life story work incomplete	1	
Social worker absent on sick leave	1	
Total	41	99

Missing data = 6

Table 21: Were the identified support services provided?

Reviewing adoption support plans

The Adoption Support Regulations (Wales) 2005 and the guidance which accompanies them (Welsh Government, 2005) emphasises that reviews of adoption support plans should not be 'overly burdensome or intrusive' (2005: 20) and should be flexible, reflecting the level of service and/ or financial support which is being provided to the adoptive family. The guidance stresses that best practice would indicate reviews should take place at least every six months for longer term packages of support (apart from financial support), and this would provide an opportunity to assess the effectiveness of the support provided.

The adoption agencies are currently undertaking a wide range of practices in relation to reviewing adoption support plans. Some review adoption support plans annually, others when a specific package is coming to an end, and many others highlighted that they review on an ad hoc basis at present and/ or have no clear system in place:

'It's an area of weakness to be honest ... We don't have a robust reviewing mechanism at the moment'. (local authority adoption agency)

'Some of our support plans are structured in such a way that there's a timetabled review. For instance if we've engaged a therapist, then we set a timed review after six sessions'. (local authority adoption agency)

Those agencies who identified weaknesses in their review processes were proactively considering how to address this.

There was a particular variation in practice regarding whether or not the adoption support plan was reviewed around the time the adoption order was granted, and who reviewed the plan. Some adoption agencies were proactive at this time and took the opportunity to review support with families either just prior to the adoption order or shortly after it was granted. Other were not involved in the review process prior to the order, leaving this to children's services:

'We review adoption support plans automatically once the adoption order has been granted before we close the case. We normally do a visit to the family and review the adoption support plan with them at that point'. (voluntary adoption agency)

'The support plan at the point of placement is reviewed by the Looked After Children's Team. They are not routinely reviewed just at the point of the Adoption Order but if there are issues we are aware of then we are relying on the district social workers to make sure the care plan is up-to-date before the order is made and that we are aware of anything we are being committed to so we know we need to be staying involved'. (local authority adoption agency)

Several adoption agencies highlighted that adoptive families are sometimes reluctant to engage in the review process:

'Sometimes people don't want us to review which is always a bit of a disappointment, because they feel they've got a service and when that service comes to an end they don't want us to review because they feel that the problem has gone away and then a year or two later we're back to the same position sometimes'. (Regional consortium)

Although it is very understandable that families may wish to step back from support services once they feel the situation has improved, engaging in the review process would provide the opportunity to consider not only the effectiveness of the support service received but also plan for contingencies if the family experiences difficulties again.

From the 50 adoptive families who had an adoption support plan, 46 responded to the item asking whether the plan had been reviewed. Of these, only 15 (33%) reported that the plan had been reviewed meaning that 31 (68%) of adoption support plans were not reported as having been reviewed. However, from the survey responses it was not possible to establish whether the support services identified in the adoption support plans were such that they would have required a review.

It was also not possible from these responses to gain an overall view of how often reviews took place. Only three responses gave any indication, with one family receiving two reviews in four months, one every six months whilst another suggested that they occurred annually. Two respondents seemed unsure as to whether the plan had been reviewed, '[t]he plan was probably reviewed but there was never much emphasis placed on it'. Five reviews were described as pending.

Three adoptive parents were particularly unhappy with the level of support they received in relation to the adoption support plan, and they reported having to fight hard through formal channels to try and get the levels of support they felt they needed:

It's [adoption support plan] been re-written three times and the judge issued proceedings against the local authority due to their lack of support.

We were told by social services ... that we would receive all the support we needed. We asked for their support ... but sadly we received no response. In fact we had to raise the case ourselves through a formal complaint with the Health Board. We felt rather let down by ... Adoption Services. We have not used them since because we feel they are clearly under resourced to handle any support unless it is a critical case.

Regionalisation will provide an opportunity for each of the regions to consider their reviewing process for adoption support plans. We recommend that the lead agencies within each region also consult with one another to ensure that there are not significant differences in their policies and procedures in order to ensure equity across Wales.

It would also be appropriate for all adoption agencies to ensure that adoption support plans are not only reviewed prior to the adoption order being granted, but that they are actively involved in this process. However, the quality of the adoption support plan is crucial here and relies on the skills and expertise of the children's social workers and the adoption social workers to be able to recognise the short and long-term developmental impact and needs of adopted children resulting from experiencing trauma and abuse/ neglect. Without this, adoption support plans run the risk of being 'tokenistic and vague' (Selwyn et al, 2014a). Appropriate services also need to be in place to respond to those needs, and as part 3 explores, support services in Wales are significantly lacking and under-funded, particularly in relation to the complex multi-dimensional needs of children who have a high level of support needs. Recommendation 7: A consistent approach for reviewing adoption support plans should be implemented across the regions. In particular, adoption agencies should ensure that adoption support plans are not only reviewed prior to the adoption order being granted, but that they are actively involved in this process.

Data collected by each agency

Within the survey 17 agencies (which includes the two VAAs whose sole focus is adoption support services) were asked whether they routinely collected information about the characteristics of the adopted children receiving adoption support. Specifically, each agency was asked whether they collected data on age, ethnicity, sibling group, emotional/behaviour difficulties and development delay. Seven local authorities/ regional consortia and two voluntary adoption agencies responded to this item. Three local authorities collated information on all the listed characteristics above. Nearly all the agencies collected information on age, ethnicity and sibling group. Fewer collected information regarding emotional/behavioural difficulties and developmental delay.

Table 22 shows what data each region routinely collects. All local authority adoption agencies responded to this item (n=13), which has been reported regionally. For the 5 regions, 3 collected all the data and 1 the majority. One region (North Wales) only collected half. Nearly all (12) agencies collected information regarding both the number of adoptive families that are *offered* additional support, in addition to the support outlined in the adoption support plan, *post* adoption order, and the number of adoptive families that subsequently *receive* additional adoption support in addition to the support outlined in the adoption support plan *post* adoption order. Data regarding the length of time adoptive families access support for was particularly limited, with around half of the agencies not collecting this information.

	North Wales	South East Wales	West & Mid Wales	Wester n Bay	Vale, Valleys and Cardiff	Total
The number of adoptive families and young people that request an assessment of need for adoption support, in addition to the support outlined in the adoption support plan, post adoption order.	0	1	1	1	1	4
The number of adoptive families and young people that request an assessment of need for adoption support, in addition to the support outlined in the adoption support plan, pre adoption order.	0	1	1	1	1	4
The number of adoptive families that are offered additional support, in addition to the support outlined in the adoption support plan, post adoption order.	1	1	1	1	1	5
The number of adoptive families that are offered additional support, in addition to the support outlined in the adoption support plan, pre adoption order.	1	1	0	1	1	4
The number of adoptive families that subsequently receive additional adoption support in addition to the support outlined in the adoption support plan post adoption order.	1	1	1	1	1	5
The number of adoptive families that subsequently receive additional adoption support in addition to the support outlined in the adoption support plan pre adoption order.	0	1	1	1	1	4
The number of adoptive families receiving each specific type of adoption support.	1	1	1	1	1	5
The length of time adoptive families' access adoption support.	0	1	1	1	1	4
TOTAL	4	8	7	8	8	

Table 22: Data routinely collected by adoption agency per region

Six of 13 agencies reported that this information was used for service planning, design and delivery as well as for matching purposes. The survey and interview data highlighted that there were variations regarding data recording in relation adoption support across local authorities within the same region and between regions. There was general acknowledgement that reporting systems needed to be more robust and systematic. A variety of reasons were given for the lack of data collection. Of significance was what agencies 'counted' as adoption support. Their service provision (outlined in more detail in part 3 of this report) which was universally available to adopters was not usually counted in these figures. This includes attendance at adoption support groups, post-adoption training and provision of advice and information. This is in line with the Adoption Support Services (Local Authorities) (Wales) Regulations (2005) and highlights the flexible and accessible nature of these services, although it is therefore impossible to quantify the take-up of these universal services.

The adoption agencies reported that current management information systems do not routinely collect information about the type of support requested, assessed and provided outside adoption support plans. This is particularly so if a child has been placed from outside the local authority area some years ago, where access to assessed support needs (with or without a formal adoption support plan) is not readily available and was reported to be difficult to access from the placing local authority, with lengthy delays frequently reported. Most of the agencies also reported that they do not currently have a distinction between support requested, assessed and offered additional to identified support needs pre and post-adoption order.

The mechanisms through which the information collected was recorded also varied between agencies. Some recorded it on their management information system while others recorded requests for adoption support, the outcome of the assessment and what support is offered/ received on case files only. Others did a combination of the two. One local authority also noted that recording was also affected by whether the adoptive family was already allocated to a worker. If this was the case, then new requests for adoption support, unless assessed for services which had a financial element such as therapeutic services or respite, would not be 'counted' as new adoption support cases:

'We haven't been good at keeping clear statistics in terms of adoption support'

'Currently there are no specific systems in place that can provide the data outlined [in the survey] that is specific to adoption support'

'New files are opened when requests come in post order and these record the request, the offer/assessment and what support is received. This information is kept on the file rather than put into a data collection system. We don't accumulate this data apart from recording the names and files opened, dates of open and close but this would not accurately depict the amount of time that the case involved.

Some had difficulties in collating data across different systems as in the case of the West Wales Adoption Service which has already amalgamated three of the four local authorities for the proposed region:

'We try to collate this information but as each of the 3 local authorities involved have different databases, the availability of such information is dependent on staff keeping an accurate record'.

The lack of systematic data collection and recording within and between the regions was also reflected in the English survey on adoption support (Holmes et al, 2013). They found that data was particularly limited regarding the type of support provided, the duration of support and the characteristics of families receiving adoption support.

Systematic data collection across the regions in Wales will be of central importance within the National Adoption Service in order to provide adoption support services which respond to local need. Agreements will therefore need to be made at a national level regarding the type of information collected, how it is recorded and the methods through which the information is reported.

Recommendation 8: The regions should continue to work with the Welsh Government regarding the level, type and quality of data which is collected regarding adoption support provision.

Summary

- In 2013 the number of adoptive families known to each local authority adoption agency ranged from 25 to approximately 100, with the numbers known to the existing regional collaboratives ranging from approximately 80 to 191.
- 73% of requests for adoption support were made between 2 and 7 years following the Adoption Order.
- There were three different routes to assessment of need post adoption order, with routes 2 & 3 being the most frequent:

1) Requests coming direct to the adoption service, who then lead on the initial visit and complete the initial assessment, sometimes accompanied by colleagues from the intake and assessment team.

2) Requests coming direct to the adoption service which are then automatically signposted to the local authority's intake and assessment team if the request cannot be dealt with informally.

3) Requests made directly to the local authority children's services intake and assessment teams.

- There was a somewhat arbitrary separation made between support needs which were deemed primarily adoption related and those which were deemed more universal. This affected both the route to assessment for adoptive families and the responses of the agencies.
- Referrals for services from safeguarding team social workers were seen to have a higher status which would result in the swifter provision of appropriate services. Safeguarding team social workers were also viewed as having more knowledge and expertise in relation to local services and resources. The relationship and interface between the childcare teams and the adoption service was also seen as crucial when assessing the support needs of adopters.
- Getting the right professionals involved was seen as central to the completion of high quality assessments of support needs. As well as the need for co-ordinated multi-agency responses to adoption support needs, access to consultation about the child and their family's needs at an early stage was also highly valued but was very limited and fragmented across Wales, particularly in relation to CAMHS.
- There was varying practice regarding the assessment frameworks used to conduct assessments for adoption support.
- Accessing accurate information from placing authorities such as original assessments of the child and support plans was highlighted as a particular issue when conducting assessments, particularly in terms of the time it can take to access this information about children adopted several years previously.
- Some adoptive parents felt like they were failing if they approached agencies for help and support. An open-minded and proactive response to adoptive families from first point of contact onwards is therefore of fundamental importance in order to ensure that families do not feel judged or blamed for requesting additional support.

- In general adoption agencies and adopters report delays in completing assessments for support due to staff shortages and delays in accessing information from placing agencies. Not all families seek help at crisis point but some support needs become crises during the wait for assessment and services.
- Of 77 adopters who had adopted children after 2005, 65% reported having an adoption support plan when they were placed and 54% of these reported that they received all support outlined in the plan.
- Adoptive parents reported that 'general support' was the most frequent support need identified in adoption support plans, which includes letterbox contact, supporting the child with the transition to the adoptive home and general support to meet the child's needs.
- A considerable variation in practice was highlighted regarding reviewing adoption support plans. At the time of the adoption order being made, or just following it, some agencies but not all actively reviewed the adoption support plans.
- Active reviewing of letterbox contact was done rarely. It was one of the support services most frequently requested by adoptive parents in our survey, but was one they found least beneficial often because they felt they were not receiving the support they needed. Many adoption agencies reported that this was a service they struggled to resource due to capacity issues.
- Eleven authorities reported offering support additional to the adoption support plan to a range of 1 and 50 families. The average length of time adoptive families accessed adoption support services was highly variable, with a range of between 1 month to 2 years and 4 months reported across 8 authorities.
- Forty-seven adopters reported that they had requested support after adoption. Of these, 27 reported receiving support and the majority (81%) were happy with the support they had received. 18 (38%) reported that they did not receive support. The quality of assessments were reported as ranging from very good to very poor.

• There were variations in the depth and quality of data collected in relation to adoption support. Information about the type of support, length of time adoptive families access support for and the characteristics of the adopted children and their families was particularly limited, with around half of the agencies not collecting this information. There was general acknowledgement that reporting systems need to be more robust and systematic nationally.

Part 3: Provision of adoption support services in Wales

The Adoption Support Services (Local Authorities) (Wales) Regulations (2005) clearly identify the services which local authority adoption agencies may provide for those entitled to have a service. The regulations and associated practice guidance (Welsh Government, 2005) emphasise a life-span approach to adoption support and stress the importance of multiagency working in the assessment and provision of services. The services prescribed in the regulations are outlined in Table 23, alongside which member of the adoptive kinship network is entitled to be assessed for each service (Department for Education, 2014).

Person being assessed	Services fo	or which th	ey are	e entitled to	o be asse	ssed	
	Services to enable discussion of matters relating to adoption	Assistance in relation to arrangements for contact	Therapeutic services	Services to ensure the continuation of adoptive relationship	Services to assist in cases of disruption	Counselling, advice and information	Financial support
Agency adoptive child	•	•	•	•	•	•	
Adoptive parent of an agency adoptive child	•	•		•	•	•	•
Child of adoptive parent				٠	•	•	
Birth parents or guardians of an agency adoptive child	•	•				•	
A relative (or someone with whom the local authority consider the child to have a beneficial relationship) of agency adoptive child		•				•	
Intercountry adoptive child			•	•	•	•	
Intercountry adoptive parent				•	•	•	
Birth sibling of an adoptive child		•				•	
Non-agency adoptive children, their parents and guardians						•	
Prospective adopters						•	
Adopted adults, their parent, birth parent and former guardians						•	
A relative (or someone with whom the local authority consider the child to have a beneficial relationship) of a non-agency adoptive child						•	

Table 23: Prescribed adoption support services

Overview of services and partnerships

A range of adoption support services in Wales were reported to be available. These ranged from services universally available to support adoptive families, those targeted to address specific issues for adopted children, adoptive parents, birth families and adopted adults, and specialist support to address more complex issues.

All local authority adoption agencies, regional consortia and the two voluntary adoption agencies who provide the full range of adoption services offer a number of universally available services to adoptive families. Examples given were regular support groups for adopters, family fun days where adopters and their children had opportunities to spend time together, a range of post-adoption training sessions (examples from some agencies included working with attachment and behavioural issues and sessions for wider family members), giving adopters access to existing foster carer training events and lending libraries for adopters. Targeted support services for adopters in relation to financial support and support with in-direct contact (letterbox contact) were also highlighted, and more rarely support with direct contact arrangements.

The two voluntary adoption agencies in Wales who focus purely on adoption support offer a range of services from peer support groups for adopters to more targeted interventions such as an adoptive parenting programme (Safebase), work with birth families, a peer support group for adopted young people (TalkAdoption Wales) and counselling for adopted adults. In addition, BAAF Cymru provide support to adoption agencies in relation to chairing adoption disruption meetings (2-3 per year) if commissioned, plus providing telephone advice and guidance to professionals and members of the public. They also hold the adoption register for Wales. Enquiries which come in to BAAF Cymru regarding intermediary and birth records counselling dealt with via the website services are www.adoptionsearchreunion.org.uk, which is a UK-wide information, support and signposting service.

The local authority adoption agencies and regional consortia also offered services as per the adoption regulations in Wales to the other parties affected by adoption, namely birth families and adopted adults. Some local authorities have been very creative in how they approach engaging birth families, with one providing a regular monthly drop-in service. Several agencies reported struggling to prioritise this work in the light of other demands

placed on the service, particularly in relation to counselling services for adopted adults. Two adoption agencies reported offering services to birth families and intermediary services in partnership with the voluntary sector. Four adoption agencies reported having partnership arrangements with a voluntary agency who provides peer support for adoptive families. One local authority reported having a partnership agreement with an independent play therapist. Several local authorities reported commissioning specialist services when required, normally therapeutic services, for individual adoptive families. Partnership working was viewed in somewhat narrow terms however, with only one local authority detailing their working arrangements with education and health.

There were several reported benefits of partnership working with voluntary adoption agencies, who were perceived to have particular expertise in adoption support. These included giving adopters and adopted children access to informal peer support networks, giving birth families access to independent support away from the agency who placed their child for adoption, providing potential for more consistent service provision, particularly in relation to counselling for adopted adults and services to birth families, and freeing up time in the agency for what were perceived as the core tasks of recruitment and family finding. One local authority adoption agency also commented on the cost effectiveness of these services being provided by the voluntary sector:

'We are a small local authority so numbers are small, it is therefore more cost effective to access many of the above services from organisations with specialism and expertise in the field of adoption'.

'Enables [local authority] to concentrate on their core business of recruiting, assessing and training adopters in order to provide families for LAC children'.

Breakdown of adoption support services available

The 13 local authority adoption agencies were asked to indicate which adoption support services were available in their local authority and who the main provider was (Table 24). It should be noted that this section identifies *which* services are available. It *does not* provide any information about how often the service is used or the number of families currently accessing the support. Where several providers offer services, such as adopter support groups, only the main provider is listed.

All of the listed support services were offered in at least 11 of the 13 agency areas. The most common support services available included general support and advice, letterbox contact

with birth parent/s, siblings, other relatives and previous foster carers as well as support for direct contact with birth parents. In line with the findings from England (Holmes et al, 2013), letterbox contact and direct contact with birth parent/s, siblings, other relatives and foster carers was mostly undertaken by the local authority adoption teams in Wales.

The local authority adoption agency was the main provider of the majority of the available services. Hence, for the 21 support services the 13 agencies reported it as the main provider 183 times. This was followed by the adoption support agencies (Adoption UK and After Adoption) which were indicated 27 times and the local authority children's services (26). Health did not provide any of the listed support services apart from CAMHS. Ten or less of the services were provided by Voluntary Adoption Agencies, Education, CAMHS and private providers. Whilst the majority of the local authorities provided at least 19 of the 21 of the listed services available. There were no significant differences per region apart from the use of CAMHS, and this is discussed separately.

Adoption support provided	LA Adoption Agency	LA Children's Services	Voluntary adoption agency (St David's, Barnardos)	Adoption support agency (Adoption UK /After Adoption)	Education	CAMHS	Private provider	Other provider	Total
Pastoral support within educational setting	2	0	0	0	10	0	0	0	12
Parenting programmes (general)	2	9	1	0	0	0	0	1	13
Parenting programmes (Adopters)	4	2	0	2	0	0	0	3	11
Therapeutic parenting /family intervention	6	0	0	1	0	2	0	3	12
Other counselling/mental health/ therapeutic services for children and young people	1	1	0	0	0	6	3	0	11
General advice and information	12	0	0	0	0	0	0	1	13
Peer support groups for adopters	10	0	0	3	0	0	0	0	13
Peer support groups for young people	2	1	1	6	0	0	1	1	12
Services for birth parents related to adoption	12	0	0	0	0	0	0	1	13
Letterbox contact with birth parent/s	11	0	0	0	0	0	0	1	12
Letterbox contact with birth siblings	12	0	0	0	0	0	0	1	13
Letterbox contact with other relatives	12	0	0	0	0	0	0	1	13
Letterbox contact with previous foster carers	12	0	0	0	0	0	0	1	13
Support (excluding financial support) for direct (face-to-face) contact arrangements	12	0	0	0	0	0	0	1	13

with birth parent									
Support (excluding financial support) for direct (face-to-face) contact arrangements	11	0	0	0	0	0	0	1	12
with siblings									
Support (excluding financial support) for direct (face-to-face) contact arrangements with other relatives	11	0	0	0	0	0	0	2	13
Support (excluding financial support) for direct (face-to-face) contact arrangements with previous foster carers	9	1	0	0	0	0	0	2	12
Financial assistance to support direct contact arrangements	9	2	0	0	0	0	0	0	11
Short breaks (i.e. respite care)	3	7	0	0	0	0	0	0	10
Services to assist in case of disruption	12	0	0	0	0	0	0	0	12
Financial support (general)	10	3	0	0	0	0	0	0	13

Table 24: Adoption support services available n=13

When asked about support services which specifically target financial issues, 4 of the 5 regions reported that they offered adoption allowances. In addition, 3 of the 4 regions had access to either a Welfare Rights Team or Income Maximisation Team which worked with families to identify whether they were entitled to any benefits or allowances. One of the 5 regions did not have any support services available which targeted financial issues.

Support services for birth parents were available across all five regions. Most mentioned support from the adoption team social worker and specifically letterbox and birth parent counselling. However, many also commented that they struggled to provide a good service in these areas given capacity issues. In addition, 2 of the 5 regions used Voluntary Adoption Agencies as a means of providing an intermediary support service for adopted adults and also to provide birth parents with support. There was a strong commitment to engaging

birth families in support and also recognition that birth parents often require support at various points:

'Birth parent counselling can be re-visited as required by the birth parent as each parent comes to terms with the loss of their child at different times often dependent on their personal circumstances'.

There was also an acknowledgement by several adoption agencies that they are struggling to provide intermediary services in-house:

'Some areas such as the intermediary service ... doesn't get the same level of service I'm afraid'. (Regional consortium)

This study did not actively seek the views of adopted adults and birth families regarding the provision of adoption support services to meet their needs given the rapid response required and the challenges of finding and accessing these groups of service users. However, further work would be beneficial here in order to provide a fully rounded picture of adoption support provision for all parties affected by adoption in Wales.

Children's needs which are not directly related to adoption

We asked adoptive families to outline what needs their children had which were not directly related to adoption. Of the 91 survey respondents, 34 (37%) listed their child(ren) as having 44 needs not related to adoption. These were primarily health needs as well as some specific educational needs (Table 25). Statistics relating to the numbers of children with disabilities and health needs and their characteristics are not collected in Wales and England. It is therefore not possible to comment on whether the levels and types of health needs in this survey reflect the health needs of adopted children with disabilities across Wales as a whole.

Needs	Number
Physical health needs (such as asthma,	18
orthodontic issues, visual and hearing difficulties,	
mobility issues, chronic health conditions)	
Learning disability (including developmental	3
delay)	
Combination of physical and learning disabilites	2
Autistic spectrum disorders	3
Mental health needs (including ADHD and	8
conduct disorder)	
Specific educational needs (including dyslexia	4
and dyspraxia)	
Consequences of parental drug/ alcohol use	3
(including foetal alcohol syndrome)	
Speech and language needs	3
Total	44

Table 25: Reported needs not directly related to adoption

Many adoptive parents in Wales are therefore managing a range of complex health and educational needs on a daily basis. In order to meet these needs, the families reported involvement from range of professionals including audiologists, occupational therapists, opticians, paediatricians, physiotherapists and speech therapists. For specific educational needs, the families reported receiving support from services which included private nursery provision, nursery nurse support and educational psychology input. Social work teams who support children and families affected by disability were also reported to have provided support. In total, 21 of the 25 families who provided further information had received support to meet these additional needs. Of the 4 who had not, two had provided the support themselves and two stated that their children, who had psychological needs, had declined the support offered.

Services most often requested

The 15 agencies (10 local authorities, 3 regional consortia and 2 voluntary adoption agencies offering a full range of adoption services) were asked to rank which support services were most often requested by families (Table 26). The most common request was that of therapeutic parenting / family intervention, followed by letterbox contact. Frequent requests were also noted in relation to CAMHS services. None of the agencies reported requests for support for direct contact, short breaks and parenting programmes specifically

for adoption. Reasons were not given for this, but it may be due in part to levels of awareness of these services.

Type of support	Rank
Therapeutic parenting /family intervention	10
Letterbox (in-direct) contact	8
Other counselling/mental health/therapeutic services for children and young people	6
General advice and information	6
Child and Adolescent Mental Health Services (CAMHS)	5
Financial support (excluding financial support for direct contact arrangements)	4
Educational support services	2
Services to enable discussion related to adoption, e.g. support groups	2
Pastoral support within educational setting	1
Parenting programmes (general)	1
Services to assist in case of disruption	1
Parenting programmes (adopters)	0
Support for direct (face-to-face) contact arrangements	0
Short breaks (i.e. respite care)	0

Table 26: Adoption support services most often requested.

Factors which delay or inhibit the provision of adoption support services

Four of the 5 regions reported that families experience delays in receiving adoption support either 'often' or 'very often'. The region that did not reported that delays were experienced 'occasionally'. Further examination of these results showed that only one local authority from the 13 stated that families 'rarely' experienced a delay.

Within the interviews the factors which inhibit or delay the provision of adoption support services were explored. The primary reasons given were a lack of access to resources (both services and financial), alongside a lack of a robust multi-agency approach and geographical constraints. Each of these will be explored more fully below.
Insufficient multi-agency working

The lack of a multi-agency joined up approach was highlighted. Although several agencies reported constructive and productive relationships with colleagues in Health and Education, most stated that partnership working was limited and more effort was needed by all parties:

'We aren't engaging other partners effectively – Health, Education, universal services, other key players' (Regional consortium)

'Better networking is needed between Health, Education and Social Services' (local authority adoption agency)

Informal partnerships were often based on relationships which built up locally, and while this was seen as very positive it also relied on relationships at service level rather than strategic partnerships. Furthermore, there were concerns that the impact of regionalisation makes partnership working more challenging regionally, as one existing regional consortium highlighted:

'I suppose that some of the advantages of local relationships ... because you tend to know your local colleagues and you tend to twist people's arms or use some of their time and resources ... gets trickier on a regional basis'

The adoption agencies were however generally very positive about the potential for increased multi-agency working following regionalisation. The pooling of existing resources was seen as particularly beneficial, as well as the scope to develop a broader range of services and expertise in adoption support:

'If you pool [resources] together you've got the opportunity to put on something much better than what we're providing now'. (local authority adoption agency)

Lack of appropriate resourcing

All local authority, regional consortia and the two voluntary adoption agencies offering the full range of adoption services commented on the difficulties they had gaining access to appropriate support services. The complexities of accessing universal services for children in need and the reasons for this have already been explored in part 2. Access to targeted and specialist services for adopted children and their families was seen as particularly challenging, especially in relation to providing appropriate support for complex emotional and behavioural difficulties and therapeutic parenting. This often led to delays in providing

services, and in some cases meant that no appropriate service was provided. This is suggestive of services being provided on the basis of what is available rather than what is needed, and several adoption agencies (although not all) commented specifically that this was the case:

I would say that we don't always come up with the best package. We come up with the best within our resources. It's a matter of balancing what people's expectations are and what the realistic world is'. (Regional consortium)

• CAMHS provision

Eight adoption agencies representing a wide geographical area in Wales specifically commented on the difficulties they have accessing CAMHS services, particularly for adopted children and young people with a range of complex emotional and behavioural needs related to trauma and attachment:

'We don't have access directly to a psychologist. CAMHS doesn't help us. The excuse every time is don't medicalise the problem. They won't take on attachment issues'. (local authority adoption agency)

The lack of a CAMHS service which prioritises the complex emotional and behavioural difficulties of adopted children and support adoptive families was the most significant concern from the adoption agencies in terms of resources. In the absence of this resource in Wales some local authorities were paying for assessment and therapeutic work from private providers. However, more often there was recognition that this type of work was needed but there were no financial resources available to pay for it. Adoption agencies were therefore working very hard to try and meet the needs of adopted children and their families within existing resources, which they acknowledged were not enough and often did not match the needs which were presented. One adoption agency commented that '*1 think we are letting young people down*'.

For those agencies that were able to access CAMHS support, most reported that the services were often lacking psychological, family therapy and play therapy services, and there was a view that many CAMHS practitioners were limited in their understanding of adoption issues:

'Accessing CAMHS is absolutely ridiculous, and even when families do access CAMHS those professionals' understanding of the issues of adoption is hugely lacking' (local authority adoption agency)

There was concern too about how narrow the criteria were in order to access services, and a desire for attachment and trauma related issues to have more priority.

Following the implementation of the mental health strategy for Wales 'Together for Mental Health' (2012) the Welsh Government's (2013) report 'Professional Advice for Service Planners' outlines the continuum of CAMHS services in Wales, from universal provision, through primary care (Tier 2), secondary care (Tier 2/3) and tertiary care (Tier 4), which the guidance illustrates in the 'windscreen' model below:



Fig. 1 'Windscreen' model of CAMHS service provision in Wales

Secondary care services within CAMHS are specified within this guidance as being for 'those with persistent, severe, pervasive and complex mental health needs' (2013: 16). It goes on to state that:

'there are a range of circumstances that put children and young people at particular risk, including:

- Abuse: physical abuse, emotional abuse, sexual abuse, neglect.
- Developmental Problems: adjustment to chronic illness, adjustment to disability/acquired injury.
- Adverse Social Circumstances: Being a 'Looked After Child', being in the Youth Justice system, parental drug/alcohol misuse, domestic violence, parental mental or physical health problems, and young carers.
- Life Events: family change and disruption, reaction to trauma/significant life events, bereavement'. (2013:16).

Although the guidance does make reference to adopted children and young people as a priority group, they are not explicitly specified in the above priority criteria. The issues cited above will be common to many children adopted from the care system, particularly those who are older at time of placement. Most children adopted from care have experienced abuse and neglect within their birth families (nearly three-quarters; Selwyn et al, 2014), will have experienced a range of adverse social circumstances, including their looked-after status, and will have experienced family change/ disruption alongside being exposed to trauma and loss through the experience of moving from their birth family to foster care and then to adoption. There is a strong case therefore for adopted children to be explicitly included within the above priority criteria, as looked-after children are.

There is an important role here too for the development of effective preventative and early intervention CAMHS services which adopted children and their families can access at an early stage. However, for those adopted children and their families who experience significant difficulties, explicitly including adopted children within the secondary care referral criteria will then provide a mechanism for meeting CAMHS referral criteria. Although this will not be a guarantee of receiving appropriate service provision, it would be a step in the right direction.

Selwyn et al (2014a) reported that many adoptive parents in their study were trying to manage very complex and difficult circumstances within the home, many of which were seen as a result of the long-term effects of trauma and the abuse and neglect their children experienced within their birth families. These problems included child to parent violence, inappropriate sexualised behaviour and significant attachment issues. Although few adoptions break down completely, the lack of specialist support for the adoptive families in difficulty was stark. Increasing access to a range of relevant professionals with expertise in working with adoption issues, particularly around trauma and attachment, was strongly recommended in order to provide sufficient support for adopted children/ young people and their families, and may reduce the risk of adoptions disrupting. Selwyn and colleagues will be reporting on the second part of the Wales adoption disruption study, which is exploring the experiences of adoptive families in Wales, later this year. This will also enable comparisons to be made between Wales and England.

The National Assembly for Wales Children and Young Person's Committee is currently holding a consultation regarding CAMHS services in Wales. The consultation response from the Royal College of Psychiatrists states that access to psychological therapies is 'patchy' across Wales, and there is a shortage of practitioners who can undertake evidence-based therapies. It also highlighted the lack of integration between health and social care in the joint strategic planning and commissioning of services to vulnerable children and young people, particularly in the current climate of budgetary restraints.

The development of a National Adoption Service in Wales provides an opportunity to consider how best to meet the complex long-term emotional, behavioural and mental health needs of adopted children and their families. As adoptions from care continue to increase it is likely that the need for services at all levels will increase. In particular, consideration should be given at national level to the development of specialist services in Wales to support adopted children and young people who have complex multi-dimensional needs. Jointly commissioned multi-professional teams with expertise in working holistically on a bio-psycho-social basis with looked-after and adopted children may be an appropriate way forward.

Recommendation 9: The development of a specialist multidisciplinary service in Wales which aims to meet the needs of those adopted children with complex multi-dimensional needs resulting from trauma, and the experience of abuse and neglect should be given strong consideration.

• Financial resourcing

Only a minority of adoption agencies had dedicated budgets for adoption support services, and most agencies reported having to fight for funding for services to families, particularly therapeutic support. The financial provision of adoption support services was determined by adoption team managers in all 13 local authorities and regional consortia. Of these, the three regional consortiums distinguished packages of support on the basis of cost where:

'if a package costs under £10,000 it is agreed at Service Manager level, if over £10,000 then at Operational Manager level'

One of the 3 consortiums noted that whilst the service manager would determine support provision, the adoption team manager had certain types of support available through partnership agreements which did not require senior manager authorisation. This included provision of the Safebase adoptive parenting programme via After Adoption as well as support for birth parents through contracts with voluntary adoption agencies.

Many agencies reported that money for adoption support was not prioritised within the authority, and as a consequence families were not getting the help they needed. Greater financial investment in adoption support services was strongly called for:

'Having an identified budget for adoption support would be a real, real positive. At the moment there is no individual budget and most authorities are in the same position. So I think it needs to be given priority in the budget status of each authority so that there is money there to provide whatever that family needs at any given time really, you don't have to fight for resources especially in respect of therapeutic support all of these quite costly services'. (local authority adoption agency)

'I think that people try and be as creative as they can but it is a limited resource and obviously as we aim to place children with more and more complex needs those families deserve an effective support package that can help them through'. (voluntary adoption agency)

One particular issue highlighted was the 'three year rule' whereby responsibility for adoption support moves from the placing authority to the receiving authority after three years. Several agencies commented that this was difficult and complex to manage:

'I think some of the ones where it becomes trickier are when you are approaching the end of the three years. So sometimes it's the authority that placed them dragging their heels a little bit possibly and the authority that the children are living in are saying well they still have a legal responsibility and they're not particularly swift either, so you can get a little bit of an impasse'. (voluntary adoption agency)

Recommendation 10: Investment is needed in adoption support services nationally in order to ensure high quality provision that meets needs rather than fits in with existing resources, and promotes equity of access across Wales.

Geography

Many agencies described current access to services as being a 'postcode lottery'. Those who live in urban areas were perceived as having increased access to a greater range of support services. For example, adopters living in Cardiff were reported to have easier geographical access to a wider range of therapeutic services, than adopters living in rural West Wales. Services to birth families were also patchy across Wales. One of the challenges of regionalisation will be to ensure that services in wide geographical areas are accessible to adopters and birth families throughout each region. As one voluntary adoption agency noted:

'I think at the moment it is a very fragmented service. This is very difficult for people because it does mean if they have a need, in some areas in particular, you've really got to fight very loudly for that'.

Adoption support services received by adoptive families

When asked which adoption support services were received, 66 families reported that they receive 208 services (Table 27). The most common response was 'Peer group support for adopters (32:52%), followed by 'Letterbox contact with birth parent/s' (29:48%), 'General advice and information' (25:41%), and general financial support (20:33%). Nearly a third (31%:64) of the adoption support services provided related to contact (either direct or via letterbox) with birth parents, birth siblings, birth relatives or foster parents.

	North	Mid &	South	West &	Western
Adoption support received	Wales	South	East	Mid	Bay
		Wales	Wales	Wales	Duy
Pastoral support within educational setting	1	3	2		
Parenting programmes (general)		2	1		
Parenting programmes (Adopters)	1	3	3	1	
Therapeutic parenting /family intervention	2	6	1	1	1
Other counselling/mental health/ therapeutic	_	10			
services for children and young people	2	10	1	1	1
General advice and information	5	11	4	2	
Peer support groups for adopters	3	14	6	4	1
Peer support groups for young people		4	1		1
Services for birth parents related to adoption		1			1
Letterbox contact with birth parent/s	3	13	6	2	1
Letterbox contact with birth siblings		5	3	2	
Letterbox contact with other relatives	2	1		1	
Letterbox contact with previous foster carers		1	1		
Support (excluding financial support) for direct					
(face-to-face) contact arrangements with birth		4			
parent					
Support (excluding financial support) for direct					
(face-to-face) contact arrangements with		4	2		
siblings					
Support (excluding financial support) for direct					
(face-to-face) contact arrangements with	1	1	1		
other relatives					
Support (excluding financial support) for direct					
(face-to-face) contact arrangements with		2	2		
previous foster carers					
Financial assistance to support direct contact		1			
arrangements		-			
Short breaks (i.e. respite care)			1		
Services to assist in case of disruption		2			
Financial support (general)		11	6	2	
Other, please give details	1	4		1	

Table 27: Adoption support services received by adoptive families N=66

Table 28 shows that across all but two of the adoption support services received, families deemed them to be either 'very beneficial' or 'beneficial'. The only services described as 'not very beneficial' by more families was 'letterbox with birth parents' and 'pastoral support within an educational setting'. Regarding letterbox contact with birth parents, the majority of local authority adoption agencies commented that this is an area they wish to

provide more support in but do not have the personnel to achieve this. Several adopters made comments about the lack of understanding of adoption issues within education, and the need for better training and support for education staff:

'Schools seem bewildered on how to manage the challenges of an adopted child. I am constantly on the phone, and they now want me to have [child] at lunchtimes; I have to work...'

Post-adoption support	Very beneficial/	Not very	Not at all	Missing
	beneficial	beneficial	beneficial	data
Pastoral support within educational	2	4		1
setting	2	1		1
Parenting programmes (general)	2	1		1
Parenting programmes (Adopters)	8			2
Therapeutic parenting /family	11			0
intervention				
Other counselling/mental health/	10			
therapeutic services for children and	10	2	3	1
young people			_	
General advice and information	19	1	2	3
Peer support groups for adopters	21	5	1	5
Peer support groups for young people	4			2
Services for birth parents related to				1
adoption				-
Letterbox contact with birth parent/s	9	12	3	5
Letterbox contact with birth siblings	7	2	1	0
Letterbox contact with other relatives			5	1
Letterbox contact with previous foster			1	1
carers			I	
Support (excluding financial support)				
for direct (face-to-face) contact	3		1	0
arrangements with birth parent				
Support (excluding financial support)				
for direct (face-to-face) contact	4	1		1
arrangements with siblings				
Support (excluding financial support)				
for direct (face-to-face) contact	1	1	1	0
arrangements with other relatives				
Support (excluding financial support)				
for direct (face-to-face) contact				
arrangements with previous foster	3		1	0
carers				
Financial assistance to support direct				
contact arrangements	1			0
Short breaks (i.e. respite care)	1			1
Services to assist in case of disruption	1		1	0
Financial support (general)	17		2	1

Table 28: Ratings of adoption support services received

Ratings of adoption support received

57 (63%) of adoptive families indicated that they had received adoption support. When asked to rate the adoption support received the majority described it as 'Excellent/Good' (33:58%), while 15 (26%) deemed it 'Extremely poor/Poor' (Table 29).

Rating	Number	%
Extremely poor	6	10
Poor	9	16
Adequate	8	14
Good	25	44
Excellent	8	14
Not applicable	1	2
Total	57	100

Table 29: Quality of adoption support received

However when asked to explain this rating, those who had provided additional comments (n = 52) showed that slightly more (35:67%) described the service as 'good' with the remaining 17 (33%) suggesting that the service was 'poor'. Of the 8 comments submitted regarding financial aid, most (7 of the 8) described this support as good, e.g. 'I have only requested financial assistance and I have found the local authority adoption team very supportive in this respect'. The one negative comment was based on a lengthy delay in receiving the appropriate forms and the lack of clarity as to how long before the aid awarded would be reviewed.

The support provided by local authority and voluntary adoption agencies was described as *'wonderful'*, by some respondents and specific mention was made as to the value of Adoption UKs peer support groups, the Safebase training for adoptive parents provided through After Adoption, CAMHS, theraplay, and the ability to ask for support when needed.

Conversely, 9 of the 17 families (53%) whose comments deemed the service as poor reported that the support was not there when needed, and several described protracted battles with agencies to try and get help and support. Reasons for this included a lack of knowledge about adoption support services, lack of funding and lack of support from social workers:

'We feel we haven't had the support from social services as they said at the time we are here for you when you need us. My daughter is having problems and we feel we are not getting the help we should have. We are very disappointed with the whole system. I would not adopt again'.

'We were told that there was no money in the budget for any adoption support at all, other than the meetings [social worker] could have with our son'.

'As soon as [child] was placed it felt as though I didn't see the social workers for dust! I had to battle and make complaints in order to have her life story book completed...There wasn't a support group for adopters and I knew no other adopters. She is now [age] and becoming more challenging but I don't even know if I'm entitled to support now?'

Comments were also made about the difficulties in attending support groups, either due to geography or timings or both:

'I would like to attend peer group support sessions but they are either too far away or during the working day so I'm unable to attend'.

Adoptive families' perspectives on adoption support

When asked about the strengths of adoption support, more than half (37:59%) of the 63 adoptive parents who responded to this item perceived the services to be good. Most comments related to Local Authority social workers with very general mention of the support received:

'Good social workers who are committed to their jobs, roles and responsibilities. A good strong team of pooled services from various boroughs'.

'Extremely good training days...The informal support we have received from our Adoption Team has been fantastic...Approachability, friendliness, openness when they can be and explanation when they can't. [Local Authority] have been great'.

'Great course. Great social worker.'

Of the 38 positive comments, 11 (29%) related specifically to Voluntary Adoption Agencies. High value was placed on the peer support available not only to adoptive parents but also for their children. The responses also highlighted the positive relationships developed with workers in the agencies, and the knowledge gained of support services through communications such as regular newsletters: 'From [Voluntary Adoption Agency A] invaluable support groups, peer support and training. From [Voluntary Adoption Agency B] Superb group for our daughter to help her understand what adoption is about and give her a voice'.

'[Voluntary Adoption Agency C] was very supportive and on top of every aspect. We were coached and well-prepared in every step of the way. [Local Authority] was also very supportive and were clear with their expectations. However, they were very busy so we relied on our social worker with '[Voluntary Adoption Agency C]. They prepared us very well for the reality of placement and adoption. We are invited and attend seminars at '[Voluntary Adoption Agency C]'s support group which gives us information about future services. However, having said this, it feels as if we are through the "event" and we are now getting on with it. Not to say support isn't there is we need it but the link is lessening as we move forward. However, if something were to happen in future, I first would contact '[Voluntary Adoption Agency C] to see what to do.'

However, twenty-three (37%) adoptive families did not perceive adoption support to have any strengths. Their responses highlighted feelings of isolation and also frustration, particularly in relation to the lack of funding for and provision of support services:

'I ended up taking on the issues myself, finding the answers and dealing with them without any support'.

'We discussed the issues we had but no support was put in place for us'.

'It's fragmented and inconsistent'

'Rubbish – there aren't any. Once you adopt your child you lose all rights/access/funds for any support whatsoever – you are completely alone.'

'Scarce. Over-stretched and reliant on funding. We have been waiting for support since an assessment was completed in August 2013 yet therapy can't start until the placing Authority pay.'

What do adoptive parents think could be improved?

This open-ended item attracted a wide range of thoughts from the 63 families who completed it. It was highlighted that 'adoptive parenting is specialised parenting' and more preparation and training on the additional needs of the children would be beneficial. Adopters also commented on the lack of information they were given about the child's birth families. Some stated that without this, they could not adequately prepare for the child's

physical and emotional needs, not just at the point of placement but in the ongoing years ahead.

One of the main themes was that of resources. Easier, prompt access to support was highlighted without having to wait for GP-led referrals or placed on long waiting lists. Staffing consistency also emerged as two adopters reported having had five different social workers within one year whilst another struggled to contact their part-time social worker. The lack of funds also emerged as a theme,

'It isn't fair that even though the L.A. agrees that extra support is needed to improve the lives of our children but refuses to grant it due to cost. Adopters save L.A.'s money in every way and they should not be allowed to just dump children and not consider their future needs'.

"I am aware of the differences in support for those who have adopted with an (voluntary) agency compared with a local authority and I consider that the support from (voluntary) agencies has been so much more helpful and available in comparison. Local Authorities are stretched to breaking point and in the current financial climate it is difficult for social services to meet the demands of adopters'.

The access to support sometimes just meant having someone to talk to, with some adopters wanting to see more post-adoption support where social workers 'checked in' with them once or twice a year after the Adoption Order was granted. This reflected the difficulties that some of the adopters experienced following adoption and what they perceived as a tendency for social workers to blame the adoptive parents when problems occurred:

'The professionals always imply that now the child is adopted everything will be ok, and the child is magically fixed. In fact what they mean is they don't give a fig about the child now they've got them off their books'.

'For adopters to be believed and listened to when they say they need assistance and not to be blamed. If you complain they say that you are negative and threaten to remove the children'.

'An understanding that most adopted children have additional problems at some time in their childhood and that support is available without parents being made to feel to blame for any problems within the family...'

One adopter described the process as wholly 'child centric' with the social workers for both the child and the parent concentrating on the child's needs without any concern for how the adoptive parents were coping: 'The system should be more family centric rather than child centric, this would have helped us feel more included in the process, at times we felt excluded from the decision making process. We also felt scared to voice our own struggles for fear of being judged. Perhaps adoption support could include discussions about some of the common difficult experiences for adoptive parents to normalise some of the experiences and help adopters feel less isolated in their struggles to adjust to the new situation'.

Adopters wanted to be listened to and understood by social workers. One suggestion was that of a mentor who adoptive parents could approach for help and advice in the years after the Adoption Order. Other practical suggestions were made including to have a list of support services that adopters could access if they experienced difficulties as well as a list of approved therapists and other experts who they could approach if required. Adopters wanted support to be consistent across areas rather than a 'postcode lottery' with better communication between professionals and agencies. A final point was made that adoptive families want to see an 'entitlement to services, not just to the Assessment of Need.'

What support services do adoptive families want?

Thirteen of the 53 families (25%) who completed this item wanted more counselling and therapeutic services. This was for the children and the parents too as a means of learning therapeutic parenting skills. Difficulties were noted in engaging CAMHS Services, with better integration of services between CAMHS, Health and Education wanted:

'CAMHS where we live are not interested in anything other than diagnosing so children end up with a raft of conditions such as ASD and ADHD etc. We would like all professionals to have an understanding of the sort of issues our children face without having to explain and justify ourselves'.

More support in school was highlighted by 8 (14%) families. This included increased understanding of adoption issues amongst teachers as well as support for specific issues such as dyslexia and mentoring and befriending schemes.

Ten families wanted more support groups (19%), highlighting the benefits of peer support for parents. Other suggestions included more peer support groups for children and young people, increased information and practical advice on the child's needs, more financial support and respite care in order to help prevent placement disruption and relationship breakdown between adopters. The remaining comments included more information about the service and support services available, more support for single adopters and better social workers.

These findings support those of the Welsh Assembly Children and Young Person's Adoption Inquiry (2012) which found adoption support services in Wales to be inconsistent, with some adopters reporting excellent services and others reporting mixed or poor responses. Furthermore, the views of the adoption agencies and the adoptive parents in this study were broadly in agreement with each other about the areas of strength and those which are lacking at present within adoption support in Wales.

Summary

- A range of universal and targeted adoption support services were reported to be available in Wales from the adoption agencies. The most common support services included general support and advice, letterbox contact with birth parent/s, siblings, other relatives and previous foster carers as well as support for direct contact with birth parents. The local authority or placing voluntary adoption agency was the main provider of the majority of the available services, and they are working creatively within very limited resources to meet the needs of those affected by adoption. Active support with letterbox contact was particularly limited.
- Partnerships are also in place between a small number of adoption agencies and the two VAAs which focus on providing adoption support services (Adoption UK and After Adoption), including peer support groups, telephone help-lines, support to adopted young people, adoptive parenting courses, intermediary services and support to birth families. Access to these particular services is fragmented and inconsistent across Wales and dependent upon whether a partnership is in place with the adoption agency.
- Support services for birth parents were available from the adoption agencies and regional consortia across all five regions, either directly through the agency or in partnership with After Adoption (more rarely). Within the adoption agencies most mentioned support from the adoption team social worker and specifically letterbox and birth parent counselling. However, many also commented that they struggled to

provide a good service in these areas given capacity issues. This was also true for services to adopted adults.

- Support offered to adoptive families was reported as more often having to fit into existing provision rather than being responsive to need.
- Four of the 5 regions reported that families experience delays in receiving adoption support either 'often' or 'very often'. Significant under-resourcing and under-funding was stressed, as was the lack of a multi-agency joined up approach and the challenges of geography.
- Access to targeted and specialist services for adopted children and their families was seen as particularly challenging, especially in relation to providing appropriate support for complex emotional and behavioural difficulties and therapeutic parenting. There was concern about how narrow the criteria are in order to access CAMHS services in particular, and a desire for attachment and trauma related issues to have more priority.
- Adoption agencies and adoptive families want consideration to be given at national level to the development of specialist services in Wales to support adopted children and young people who have complex multi-dimensional needs.
- Of the 91 survey respondents, 34 (37%) listed their child(ren) as having a range of complex needs not directly related to adoption, which were primarily health and educational needs. Many adoptive parents in Wales are therefore managing a range of complex needs on a daily basis.
- The most common request for support from adoptive parents was that of therapeutic parenting / family intervention, followed by letterbox contact.
- 57 (63%) of adoptive families indicated that they had received adoption support. When asked to rate the adoption support received the majority described it as 'Excellent/Good' (33:58%), while 15 (26%) deemed it 'Extremely poor/Poor'.

- Across all but two of the reported adoption support services received, families deemed them to be either 'very beneficial' or 'beneficial'. The only services described as not very beneficial by more families was letterbox contact with birth parents and pastoral support within an educational setting.
- Adoptive parents want more counselling and therapeutic services to be available, more support in schools, more support groups.

Part 4: Development of the National Adoption Service in Wales

Adoption agency perspectives

The adoption agencies were asked their views about the challenges and opportunities presented for adoption support services with the development of the National Adoption Service in Wales. Many of their comments have already been reported elsewhere in this report, but the overwhelming view was that this is a good opportunity to give adoption support services the priority they require so that adopted children and their families receive the services they need and deserve:

'I think that we've got a wonderful opportunity here to prioritise adoption support. I think we need to ensure that we give it as much priority as we give the recruitment of adopters and family finding. If we do that we've got a real opportunity of supporting a number of adopters and a number of adoption placements and hopefully it'll have a real impact in terms of minimising adoption disruption'. (local authority adoption agency)

Increasing the visibility and status of adoption support was also seen as a vehicle through which to increase the number of prospective adopters in Wales:

'I think that some of the deterrents for people applying to adopt has been the feeling that a) they'll receive a very poor service b) the needs of the children are much more complex and difficult and unmanageable. There are quite a lot negative messages going out. I would hope that the National Adoption Service might be able to breathe a more positive message about what people would receive and that might encourage people to come forward'. (Regional consortium)

Opportunities for increased collaborative working with colleagues were also highlighted, both within social services but also with colleagues from other relevant services such as health and education:

'I think within the context of any collaborative working, it's having everyone on board. A lot of the post adoption support issues are not just being the responsibility of, impacted by social services but it's about working closely with education, health, and other services really and voluntary agencies'. (local authority adoption agency)

A service which reduces inequities of access to service provision was emphasised, particularly given the challenges of geography in Wales. There were different points of view regarding how this could be achieved. Some wanted the national service to take greater

ownership of adoption support while others saw the regions as being able to be responsive to local need whilst working together more collaboratively nationally. Central to both perspectives was the promotion of a sense of shared ownership within and between the regions at political, strategic and operational levels:

'I think a more nationally agreed post-adoption service rather it being county based or region based, so you don't have this sort of postcode lottery'. (Regional consortium)

'I think we have an opportunity where we can have real adoption support to families across a wider area. Previously it has always been adopters will say this to you, depending on where they live depends on the level of support they get'. (local authority adoption agency)

'It's having a shared sense of ownership and I think that needs to be fundamental to any regional or national service or else it is not going to be as effective as one would hope'. (local authority adoption agency)

A number of challenges were also identified. Alongside the hope that adoption support will be prioritised there were also concerns that this may not happen and that adoption support would continue to be the 'poor relation' to recruiting adopters and family finding:

'With different regional arrangements we don't know if adoption support is going to be prioritised because sometimes it does feel like the poor relation so we still don't know what kind of priority post adoption is going to be given'. (local authority adoption agency)

The role of the voluntary sector within the National Adoption Service was raised as an issue, with uncertainty being expressed about their role and function within the regions. Many adoption agencies value their services, but further clarity and direction will be needed regarding how their services can best be accessed following regionalisation.

Recommendation 11: The role of the voluntary sector in Wales regarding adoption support should continue to be developed.

Significant concerns were raised regarding the lack of financial investment in adoption support services to date and the consequences of this for adopted children and their families: 'Unless they also recognise that adoption is a lifelong process and equal attention and money given towards the development and investment in adoption support this could become quite a significant problem'. (regional consortium)

'If you are going to succeed which we are doing at the moment, in placing harder to place adoptive children by that I mean older children, children with disabilities, sibling groups, you've got to make a comparable investment in adoption support services. You've got to expect increased demand'. (local authority adoption agency)

'We've got big plans, we've got this view of the future what we could do and yet we are restrained because of finance'. (regional consortium)

Views of adoptive families

Adoptive parents were given information about the National Adoption Service in Wales and asked 'what difference, if any, do you think the National Adoption Service will make to adoption support?' 88 responses were given to this question. The results showed that the majority (45:66%) thought this would be a positive development with 23 (34%) concerned that this would negatively impact adoption support in Wales. An additional 10 were unsure how the changes would affect adoption support.

The most commonly reported benefit was that of producing a consistent adoption support service across Wales (15:22%), e.g. 'Hopefully reduce the postcode lottery in terms of access to services'. This was followed by the belief that a National Adoption Service in Wales would help to speed up the adoption process (14:21%) generally as well as the provision of support. Other comments highlighted the need for more co-ordination (2:3%), communication (1:1%) and integration of services (2:3%) as well as the provision of efficient services (3:4%) with more services made available (3:4%). Five families felt that the new service would be beneficial providing that adequate funding was made available (5:7%).

Around a third of families thought that the National Adoption Service would be a negative development. Generally, the comments included fears that the service would become impersonal making it harder to find the right person to contact, the process would be slower with more managers appointed, and staff difficulties due to both staff turnover when offices became centralised as well the travel times needed to visit families scattered across large areas. Families also reported concerns over the ability of a national service to reflect geographical differences, especially in regard to small rural communities.

Summary

- Adoption agencies in Wales were positive about the potential opportunities afforded to adoption support services with the development of the National Adoption Service. In particular, they felt that adoption support could finally achieve the priority needed in order to meet the on-going and complex support needs of adopted children and their families. However, there were also concerns that this may not happen and that adoption support would continue to be the 'poor relation' to recruiting adopters and family finding.
- Increasing the visibility and status of adoption support was seen as a vehicle through which to increase the number of prospective adopters in Wales.
- Reducing inequities of access to service provision was emphasised, particularly given the challenges of geography in Wales.
- The importance of shared ownership of adoption support services across social services, health and education both politically, strategically and operationally was stressed.
- The role of the voluntary sector within the national adoption service remains uncertain and will need further clarification.
- Significant concerns were raised regarding the lack of financial investment in adoption support services to date and the consequences of this for adopted children and their families.
- 66% of adoptive parents thought that the National Adoption Service was a positive development, primarily because they hoped it would ensure a consistent support service across Wales.
- Adoptive parents also feared that regionalisation would make adoption support services impersonal, and they would wish the national service to reflect geographical differences, especially in regard to small rural communities.

Conclusion

This study has explored the provision and experience of adoption support services in Wales at a time when significant developments are underway with the creation and implementation of the National Adoption Service. Current service provision has areas of strength, including the commitment and creativity of adoption agencies who are working hard to meet the needs of those affected by adoption within limited financial and service resources. However, high quality service provision is patchy across Wales, particularly in relation to specialist services to meet the complex multi-dimensional needs of adopted children and their families. Adoption agencies also reported struggling to meet the needs of birth families and adopted adults in a consistent and timely manner. Increased training for *all* social work staff undertaking adoption work was stressed, so that they are more skilled and equipped to recognise and support children and their families.

Adoptive parents came across as highly committed to their children, but they are often managing highly complex needs with limited support. They reported accessing a wide variety of support services, but highlighted that provision is not consistent across Wales. The agencies and adoptive parents were also in agreement that service provision is often resource led rather than needs led, and dependent on the resources available in their local area. The adoption agency and adoptive parent participants were overwhelmingly positive about the development of the National Support Service and its potential to develop best practice in relation to adoption support. However, both stressed that to do this would require significant investment so that adoption support does not continue to be the 'poor relation' to adopter recruitment and family finding.

Recommendations

- 1) Support should be given to increased access to and provision of specialist training for *all* social workers involved in the adoption of children.
- Strong consideration should be given to the development of dedicated adoption support teams in each region.
- 3) Welsh language provision within the regions should be reviewed, and plans developed to lessen vulnerability to staff turnover.

- 4) The process through which families request adoption support needs to be streamlined within and across the regions.
- 5) Visibility of information about adoption support services within each region should be significantly increased so that all parties affected by adoption can easily access appropriate information. One route would be via the National Adoption Service's website <u>www.adopt-wales.co.uk</u>, with available services within the 5 regions clearly delineated.
- 6) The framework for the assessment of adoption support needs should be reviewed, and a consistent approach developed within and across regions.
- 7) A consistent approach for reviewing adoption support plans should be implemented across the regions. In particular, adoption agencies should ensure that adoption support plans are not only reviewed prior to the adoption order being granted, but that they are actively involved in this process.
- 8) The regions should continue to work with the Welsh Government regarding the level, type and quality of data which is collected regarding adoption support provision.
- 9) The development of a specialist multi-disciplinary service in Wales which aims to meet the needs of those adopted children with complex multi-dimensional needs resulting from trauma, and the experience of abuse and neglect should be given strong consideration.
- 10) Investment is needed in adoption support services nationally in order to ensure high quality provision that meets needs rather than fits in with existing resources, and promotes equity of access across Wales.
- 11) The role of the voluntary sector in Wales regarding adoption support should continue to be developed.

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Appendix 1 : Email for Head of Children's Services

Dear [name]

As you are aware, Cardiff University have been commissioned by the Welsh Government to conduct a scoping exercise in order to explore adoption support across Wales. The survey will inform the development of support services under the new National Adoption Service and is informed by the findings of the National Assembly for Wales' Adoption Inquiry. The survey is designed for completion by Adoption Managers and we would like to ask you for your support in nominating a member of staff who is best suited to complete the survey on behalf of your area.

The nominated member of staff will be expected to complete the <u>survey</u>, which consists of 25 questions in 5 sections (Service structure, Data collection, Requests for adoption support, Provision of adoption support and Partnerships). We ask that they provide as much information as possible so that each Local Authority is accurately represented. The deadline for completion is <u>Friday 14th February</u>.

Once we have received their completed survey, I will contact them to arrange a 20-minute telephone interview. This interview will invite them to comment upon the availability and effectiveness of adoption support within the area.

If you have any questions about the exercise or would like further information, please contact Dr Heather Ottaway (<u>ottawayhc@cardiff.ac.uk</u>).

An investigation into the provision and experience of adoption support in Wales

Thank you for your support.

Best wishes,

Nina

Dr Nina Maxwell School of Social Sciences Glamorgan Building Cardiff University King Edward VII Avenue Cardiff CF103WT

An investigation into the provision and experience of adoption support in Wales

Cardiff University's School of Social Sciences has been commissioned by Welsh Government to conduct a scoping exercise to explore current adoption support provision across Wales. This exercise is supported by the All-Wales Heads of Children's Services. It will inform the planning and commissioning of adoption support services in the National Adoption Service.

The main aims of this scoping exercise are:

- 7) To map the current structure and provision of adoption support services throughout Wales.
- 8) To explore the views of Local Authorities and Voluntary Adoption Agencies regarding the availability and effectiveness of adoption support services, and how adoptive families' support needs can be appropriately met through the new National Adoption Service Framework.
- 9) To explore adoptive families' current experiences of assessment and provision of adoption support services in Wales, and their views about how their needs can most appropriately be met.

The scoping exercise is in three parts. Representatives from every Local Authority in Wales and 4 Adoption Agencies are invited to contribute to parts one and two whilst a sample of around 80 adoptive families will complete a survey regarding post adoption support.

We would be grateful if you would complete part one which is an online survey (click here) by <u>Friday 14th February</u> and part two at a later date as it involves a 30 minute telephone interview.

The survey consists of 25 questions in 5 sections (Service structure, Data collection, Requests for post adoption support, Provision of post adoption support and Partnerships). It will require access to information regarding numbers of requests for support, length of time to complete an assessment, type of support provided etc. We ask that you provide as much information as possible so that each Local Authority is accurately represented. We estimate that it will take approximately 40 minutes to complete although this will vary depending on whether you need to consult other staff and how easy it is to locate the required information.

We appreciate that this is an extremely busy time for adoption services in Wales but we hope that you will agree that this study is an important one to ensure that strategic planning for adoption support is based on accurate information and draws on the knowledge of experienced adoption managers and families in Wales.

Once we receive your completed survey, Dr Nina Maxwell (Research Assistant) will contact you to arrange a suitable time for the telephone interview. The interview will take around 20 minutes and will ask you for your views on the availability and effectiveness of adoption support services, how assessments of need and adoption support plans operate in practice and your perceptions of the improvements needed. The names and contact details of individual respondents to this survey will not be published and will be stored securely and separately from survey responses. The names of adoption agencies responding to the survey will be included in the survey report so that an accurate picture of support available throughout Wales may be given. This research has been approved by Cardiff University School of Social Sciences' Research ethics Committee.

If you have any questions regarding the scoping exercise or completion of the survey please contact Dr Heather Ottaway (*ottawayhc@cardiff.ac.uk*).

Link to survey

We would like to thank you for agreeing to take part.

Dr Heather Ottaway and Dr Sally Holland, Cardiff University, January 2014.

Service structure

- 1. Job title:
- 2. Local Authority:
- 3. How is the adoption service currently structured in your organisation?
- Which team *currently* has responsibility for post adoption support? Separate post adoption support team Adoption and special guardianship support team Fostering and adoption service Other, please specify......
- 5. How many staff in your agency are *currently* responsible for supporting the delivery of post adoption support?
 - 1
 - 2
 - 3
 - 4
 - 5
 - 6
 - 7
 - 8
 - 9
 - 10
 - More than 10
- 6. Please provide the following information:

Job title	Full or part time	Brief description of role	Brief description of responsibilities

Data collection

7. Does your service routinely collect the following information? Please tick all that apply.

The number of adoptive families and young people that <i>request</i> an	
assessment of need for adoption support, in addition to the support	
outlined in the adoption support plan, post adoption order.	
The number of adoptive families and young people that <i>request</i> an	
assessment of need for adoption support, in addition to the support	
outlined in the adoption support plan, pre adoption order.	
The number of adoptive families that are <i>offered</i> additional support, in	
addition to the support outlined in the adoption support plan, post	
adoption order.	
The number of adoptive families that are <i>offered</i> additional support, in	
addition to the support outlined in the adoption support plan, pre	
adoption order.	
The number of adoptive families that subsequently <i>receive</i> additional	
adoption support in addition to the support outlined in the adoption	
support plan <i>post</i> adoption order.	
The number of adoptive families that subsequently <i>receive</i> additional	
adoption support in addition to the support outlined in the adoption	
support plan pre adoption order.	
The number of adoptive families receiving each specific type of	
adoption support.	
The length of time adoptive families' access adoption support.	

- 8. Does your service routinely collect the following information on the characteristics of the adoptive children receiving adoption support? Please click all that apply.
 - Age
 - Ethnicity
 - Sibling group
 - Emotional/ behavioural difficulties
 - Developmental delay.
- 9. What is this information used for? (You will be asked to give further information about the availability and quality of data within the telephone interview for phase two of the scoping exercise).

Requests for adoption support

10. Please provide data for your local authority for the time period 1st January 2013 – 31st December 2013 in the table below. If actual data is unavailable, please use estimates and provide a brief description of how these estimates have been derived. The table differentiates between support which was agreed in the adoption support plan at the time of the child being placed with their adoptive family, and assessments requested outside of this plan. It also differentiates between supported provided pre and post adoption order.

	Number
The number of adoptive families in your area known to your agency (pre and post order)	
The number of adoptive families who received all the support outlined in the adoption support plan	
The number of adoptive families who received part of the support outlined in the adoption support plan	
The number of adoptive families who received none of the support outlined in the adoption support plan	
The number of adoptive families that <i>requested</i> an assessment of need for adoption support post adoption order.	
Average time post-order that the <i>request</i> was made.	
The number of adoptive families that were <i>offered</i> additional support, post adoption order.	
The number of adoptive families that subsequently <i>received</i> adoption support.	
The average length of time adoptive families access adoption support for.	

- 11. On average, what is the timeframe between a request for assessment for post adoption support and completion of an assessment?
- 12. What time frame, for the completion of the assessment, would you consider to be appropriate?
- 13. What are the main causes of delay in completing the assessment?

Provision of adoption support

- 15. Who ultimately decides whether adopters should be offered post adoption support?
- 16. Which of the following adoption support services are available in your local authority area for adopters? For those that are available, please outline the main provider of these services.

	Local Authority adoption agency	Local authority children's services	Voluntary adoption agency (St David's, Barnardos),	Adoption support agency (Adoption UK and After Adoption)	Education	Health	CAMHS	Private provider	Other
Pastoral support within educational setting									
Parenting programmes (general)									
Parenting programmes (Adopters)									
Therapeutic parenting /family intervention									
Other counselling/ mental health/ thorpoputic									
therapeutic services for children and young people									
General advice and information									
Peer support groups for adopters									
Peer support groups for young people									

Services for					
birth parents					
related to					
adoption					
Letterbox					
contact with					
birth					
parent/s					
Letterbox					
contact with					
birth siblings					
Letterbox					
contact with					
other					
relatives		 			
Letterbox					
contact with					
previous					
foster carers					
Support					
(excluding					
financial					
support) for					
direct (face-					
to-face)					
contact					
arrangement					
s with birth					
parent/s					
Support					
(excluding					
financial					
support) for					
direct (face-					
to-face)					
contact					
arrangement					
with siblings					
Support					
(excluding					
financial					
support) for					
direct (face-					
to-face)					
contact					
arrangement					
with other					
relatives					
S					
Support					
----------------	--	--	--	--	--
(excluding					
financial					
support) for					
direct (face-					
to-face)					
contact					
arrangement					
S					
Financial					
assistance					
to support					
direct					
contact					
arrangeme					
nts with					
previous					
foster carers					
Short breaks					
(i.e. respite					
care)					
Services to					
assist in case					
of disruption					
Financial					
support					
(general)					
Other					
(please					
specify)					

- 17. Are there any adoption support services available in your local authority area which specifically target financial issues?
- 18. What specific adoption support services are available in your local authority area for birth parents?
- 19. Please rank these adoption support services in order of frequency of request. If a service is not available in your area please leave blank.

	Rank
Financial support (excluding financial support for direct contact arrangements)	
Educational support services	
Pastoral support within educational setting	

Parenting programmes (general)	
Parenting programmes (adopters)	
Therapeutic parenting /family intervention	
Child and Adolescent Mental Health Services (CAMHS)	
Other counselling/mental health/therapeutic services for children and young people	
General advice and information	
Services to enable discussion related to adoption, e.g. support groups	
Letterbox (in-direct) contact	
Support for direct (face-to-face) contact arrangements	
Short breaks (i.e. respite care)	
Services to assist in case of disruption	
Other (please specify)	

- 20. How common is it for adoptive families to experience delays in receiving post adoption support services?
 - Very often
 - Often
 - Occasionally
 - Rarely
 - Never

Partnerships

- 21. Which organisations do you have formal partnership arrangements with for the delivery of post adoption support?
- 22. What types of services are commissioned from these organisations?
- 23. What are the benefits of these partnership working arrangements?
- 24. Can you describe any challenges you have faced with these partnership working arrangements?

Thank you very much for spending the time completing this questionnaire. You will have an opportunity to discuss issues in relation to provision of Adoption Support services. In the

meantime if there is anything you would like to add about adoption support in your area please add it here.

25. What is the best telephone number to contact you regarding the telephone interview?

If you would like to see the telephone interview questions in advance please provide your email address:

Thank you for your time.

Appendix 3 : Agency email for parent survey

Dear [name],

As you are aware, Cardiff University have been commissioned by the Welsh Government to conduct a scoping exercise in order to explore adoption support across Wales. The survey will inform the development of support services under the new National Adoption Service and is informed by the findings of the National Assembly for Wales' Adoption Inquiry.

I understand that you have agreed to contact parents who would be willing to take part. We are looking for families with adopted child(ren) aged 18 or under. Parents whose child(ren) are placed with them for adoption but have not yet received an adoption order are also encouraged to complete the survey. I have drafted an email to parents below with further details about the exercise. The survey should take them around 30 minutes to complete. The deadline for completion is Wednesday 26th February.

Ideally, we want at least 80 families to take part. We have aimed to make it as easy for them to access and complete as possible. However, if they prefer, I can telephone them and ask the questions in an interview format – this would require them to consent to my having their names and telephone number.

If you need anything further, please don't hesitate to contact me.

Best wishes, Nina

Dr Nina Maxwell School of Social Sciences Glamorgan Building Cardiff University King Edward VII Avenue Cardiff CF10 3WT

Appendix 4: Email for parents

Dear [name here],

We have agreed to help Cardiff University contact adoptive families as we support their research, 'An investigation into the provision and experience of adoption support in Wales'. This research has been commissioned by the Welsh Government to inform the development of support services under the new National Adoption Service.

The main aims of this scoping exercise are:

- 1) To map the current structure and provision of adoption support services throughout Wales.
- 2) To explore the views of Local Authorities and Voluntary Adoption Agencies regarding the availability and effectiveness of adoption support services, and how adoptive families' support needs can be appropriately met through the new National Adoption Service Framework.
- 3) To explore adoptive families' current experiences of assessment and provision of adoption support services in Wales, and their views about how their needs can most appropriately be met.

The team are looking for adoptive families with adopted child(ren) aged 18 or under as well as parents whose child(ren) are placed with them for adoption but have not yet received an adoption order to complete a survey [link here] on their experiences of asking for and receiving adoption support.

Completion is completely voluntary but we would urge adoptive families to take part so that we can gain a complete picture of how adopters experience requesting and gaining post adoption support. All responses are confidential and only the research team will see individual survey results. Families will not be identifiable in any research report or publication and we will remove any information that we feel may identify an individual parent or child.

The <u>survey</u> should take around 30 minutes to complete and can be accessed by clicking here. Once you have completed all of the sections you will be asked if you want to submit your responses. The deadline for completion is <u>Friday 7th March</u>.

The research team will not contact you but if you have any questions about the scoping exercise or completion of the survey please contact Dr Heather Ottaway (*ottawayhc@cardiff.ac.uk*). The results of the survey will be available on our <u>Adoption</u> <u>Research Group website</u> from May 2014 or by emailing (<u>ottawayhc@cardiff.ac.uk</u>).

Click here for survey

Thank you for your time, Nina Dr Nina Maxwell School of Social Sciences Cardiff University Cardiff CF10 3WT

Appendix 5 : Parent survey

An investigation into the provision and experience of adoption support in Wales

Cardiff University's School of Social Sciences been commissioned by the Welsh Government to carry out research exploring adoption support across Wales. The survey will inform the development of support services under the new National Adoption Service, and we are very keen to hear the views of adoptive families. In particular, we want to know more about you and your children's support needs in relation to adoption, how you feel these can best be met, and your experiences of the assessment and provision of adoption support services in Wales. Even if you do not feel that you have particular support needs currently, your experiences are valuable to our research and will help us to show a realistic picture of the number and types of adoptive families in Wales.

All adoptive families living in Wales who have a child aged 18 years and under are invited to complete this survey. The research team has distributed this information to all adoption agencies in Wales and to Adoption UK, who have forwarded this survey to you as an adopter. Completion of this survey is completely voluntary but we would be very grateful if you decide to take part.

All responses are confidential and only the research team will see your individual survey results. You will not be identifiable in any research report or publication and we will remove any information that we feel may identify an individual parent or child. This research has been approved by Cardiff University School of Social Sciences' Research ethics Committee. Please complete this survey if your adopted child(ren) is aged 18 or under. Parents whose child(ren) are placed with them for adoption but have not yet received an adoption order are also encouraged to complete the survey. Please do not complete the survey if you are currently being assessed or waiting to be matched with your child.

The survey should take around 30 minutes to complete. Once you have completed all of the sections you will be asked if you want to submit your responses. The deadline for completion is Friday 14th February. The research team will not contact you but if you have any questions about the scoping exercise or completion of the survey please contact Dr Heather Ottaway (*ottawayhc@cardiff.ac.uk*). The results of the survey will be available on this web-page from May 2014 or by emailing (<u>ottawayhc@cardiff.ac.uk</u>).

We are aware that many adopters are in touch with other adopters. Please encourage others in your network to complete this survey by forwarding this email to them. By moving on to the survey you are giving your consent to take part.

We would like to thank you for helping with this research.

Heather Ottaway and Sally Holland

You and your family

This section will ask about you and your family. It is very important for us to understand the profile of adoptive families in Wales, and in your local area, so that we can understand more about your adoption support needs nationally and locally. As stated on the previous page, you will not be identifiable in any research report or publication and we will remove any information that we feel may identify an individual parent or child.

- 1. Are you?
 - An adoptive parent post-Adoption Order
 - An adoptive parent pre-Adoption Order
 - None of the above skip to end of survey:
 - If you are currently being assessed or waiting to be matched with your child you will not be able to take part in this survey as it asks about adoption support in relation to the child(ren) already placed with you. Thank you for your interest.
- 2. Which Local Authority area do you live in?
- 3. Where were the child(ren) you adopted placed from?
 - Same local authority
 - Another local authority in Wales
 - A local authority in England
 - Other, please give details below
- 4. Are you?
 - A single adopter
 - A male/male couple
 - A female/female couple
 - A male/female couple
- 5. What is your ethnicity?
 - White
 - Asian or Asian British
 - Black or Black British
 - Chinese
 - Mixed
 - Other, please specify.
- 6. Do you speak Welsh?
 - Yes
 - No
 - 6a. If yes, would you prefer adoption support to be delivered in Welsh?
 - Yes for me/partner
 - Yes for my child(ren)
 - No
 - I do not have a preference

If single adopter is not selected:

- 7. What is your partner's ethnicity?
 - White
 - Asian or Asian British
 - Black or Black British
 - Chinese
 - Mixed
 - Other, please specify.

If single adopter is not selected:

- 8. Does your partner speak Welsh?
 - Yes
 - No
- 9. Have you adopted internationally?
 - Yes
 - No

If no is selected, then skip to Q10 How many children have you adopted?

9a. If so, what country have you adopted from?

- 10. How many children have you adopted?
 - 1
 - 2
 - 3
 - 4
 - 5
- 11. How old was your first child when they were placed for adoption?
 - 1 year old
 - 2 year old
 - 3 year old
 - 4 year old
 - 5 year old
 - 6 year old
 - 7 year old
 - 8 year old
 - 9 year old
 - 10 year old
 - 11 year old
 - 12 year old
 - 13 year old

- 14 year old
- 15 year old
- 16 year old
- 17 year old
- 18 year old

12. How old is your first child now?

- 0
- 1 year old
- 2 year old
- 3 year old
- 4 year old
- 5 year old
- 6 year old
- 7 year old
- 8 year old
- 9 year old
- 10 year old
- 11 year old
- 12 year old
- 13 year old
- 14 year old
- 15 year old
- 16 year old
- 17 year old
- 18 year old
- 13. Do your first child speak Welsh?
 - Yes
 - No
- 14. What is your first child's ethnicity?
 - White
 - Asian or Asian British
 - Black or Black British
 - Chinese
 - Mixed
 - Other, please specify.
- 15. Does your first child have a disability?
 - Yes
 - No

Answer if Q10. How many children have you adopted, trigger Q11-Q15 for each additional child.

- 16. Are any other languages used in the home?
 - Yes
 - No

If yes is selected, then skip to Q16a.

16a. What other languages are used in the home?

- 17. Does your child(ren) have birth siblings?
 - Yes
 - No
- 18. If yes, are they placed?
 - Together
 - Apart
 - Both

Adoption support plans

Adoption support plans were introduced through the Adoption and Children Act (2002), and came into effect in 2005. They are formal plans which set out a child's needs when they are placed with their adoptive family, and the support services which will be put in place to meet those needs. For those of you who adopted children prior to 2005 you will in all likelihood not have come across adoption support plans, and that is absolutely fine. In this section of the survey we are interested to hear about the knowledge and experiences of those families who adopted a child from 2005 onwards only. Please base your answers on the last child you adopted.

- Adopted before 2005
- Adopted after 2005.

If adopted before 2005 is selected, then skip to end of section.

19. Did your child have an adoption support plan when they were placed with you?

- Yes
- No
- Don't know

If yes is not selected, then skip to end of section.

- 20. What were your child's support needs as identified in the adoption support plan?
- 21. What support services were planned to be provided in order to meet these needs?
- 22. Were the identified support services provided?
 - Yes, we received ALL of the identified adoption support
 - Yes, but we only received PART of the identified adoption support

- Support was recommended but we did not receive it
- Support was recommended but we chose not to go ahead with it
- Other (please specify)
- 23. Has the adoption support plan been reviewed?
 - Yes
 - No
- 24. Please explain your answer. If yes, how frequently has it been reviewed? If no, please explain your understanding of why this is.

Requests for adoption support

Please base your answers on the last time you requested adoption support.

- 25. Have you ever requested an assessment of need for adoption support from your Adoption Agency?
 - Yes
 - No

If no is selected, then skip to end of section.

26. Who did you approach in the first instance?

- Adoption support team
- Children's social work team
- GP
- Other, please specify
- 27. How was your request dealt with?
- 28. When did you make the request?
 - In the last month
 - In the last 6 months
 - In the last 12 months
 - Between 13 and 24 months ago
 - More than two years ago
- 29. Did you make this request for adoption support:
 - When difficulties first emerged
 - In response to advice from a partner organisation
 - At crisis point.
- 30. How easy was it for you to get an assessment of post adoption support needs?
 - Very difficult
 - Difficult

- Neither difficult or easy
- Easy
- Very easy.
- 31. Please explain your answer.
- 32. How long was it between the request for an assessment and the assessment being carried out?
 - Less than 1 week,
 - 1-2 weeks,
 - 3-4 weeks,
 - 5-7 weeks,
 - More than 7 weeks please give details.
- 32. If you experienced a delay in the assessment being carried out, were you offered any reasons for this?
- 33. Do you think that this was an appropriate timeframe, and why?
- 34. If you experienced a delay in receiving the outcome of your assessment, were you offered any reasons for this? What were the reasons?
- 35. How would you describe the quality of the assessment of adoption support needs?
 - Extremely poor
 - Poor
 - Adequate
 - Good
 - Excellent
- 36. Please explain your answer
- 37. Did the assessment result in you receiving post adoption support?
 - Yes, we received ALL of the recommended adoption support
 - Yes, but we only received PART of the recommended adoption support
 - Support was recommended but we did not receive it
 - Support was recommended but we chose not to go ahead with it
 - No, the assessment rejected our need for support
 - Other (please specify)
- 38. Please explain your answer.

Adoption support received

39. Have you ever received any form of adoption support such as financial assistance, therapeutic parenting, peer support groups?

- Yes
- No

If no is selected, then skip to end of section.

- 40. Who paid for the adoption support you received?
 - Local Authority
 - We paid ourselves
 - A combination of us and the Local Authority
 - A combination of us and a charity/other organisation
 - Funded by a charity/other organisation
 - Other (please specify)
 - Not applicable: it was a no-cost service
- 41. Overall, how would you describe the adoption support you received?
 - Not applicable
 - Extremely poor
 - Poor
 - Adequate
 - Good
 - Excellent
- 42. Please explain your answer.
- 43. Which of the following post adoption support services did you receive? Please note that some of these services may not be available in your Local Authority. Click all that apply. For those that you received, please outline who provided these services, e.g. Adoption UK, Local Authority Adoption Agency.

Adoption support service	Who provided these services?
Pastoral support within educational setting	
Parenting programmes (general)	
Parenting programmes (Adopters)	
Therapeutic parenting /family intervention	
Other counselling/mental health/ therapeutic services for children and young people	

General advice and information	
Peer support groups for adopters	
Peer support groups for young people	
Services for birth parents related to adoption	
Letterbox contact with birth parent/s	
Letterbox contact with birth siblings	
Letterbox contact with other relatives	
Letterbox contact with previous foster carers	
Support (excluding financial support) for direct (face-to-face) contact arrangements with birth parent	
Support (excluding financial support) for direct (face-to-face) contact arrangements with siblings	
Support (excluding financial support) for direct (face-to-face) contact arrangements with other relatives	
Support (excluding financial support) for direct (face-to-face) contact arrangements with previous foster carers	
Financial assistance to support direct contact arrangements	
Short breaks (i.e. respite care)	
Services to assist in case of disruption	
Financial support (general)	
Other (please specify)	

Display Q44 for each service received:

- 44. How beneficial do you believe the adoption support you have received has been to your family?
 - Very beneficial
 - Beneficial
 - Not very beneficial
 - Not at all beneficial
- 45. What needs does your child(ren) have that are not related to adoption (such as disability or health needs)?
- 46. Have these needs been met by other services?

Experience of gaining post adoption support

- 47. Based on your experiences, what are the strengths of current adoption support services in your area?
- 48. Based on your experiences of requesting and receiving adoption support, what do you think should be improved for adoptive families?
- 49. What kind of support services would you like?

National Adoption Service

The development of a National Adoption Service in Wales will lead to significant changes in the way adoption services are organised and managed. In particular, services will be managed on a regional basis rather than in each local authority area, and some services such as the recruitment of adoptive parents will be co-ordinated nationally. The Welsh Government's view is that these significant changes are needed in order to reduce delays for children finding adoptive families, and to ensure adoptive families are better supported.

- 50. What difference, if any, do you think the National Adoption Service will make to adoption support?
- 51. Is there anything you would like to add in relation to your experiences of adoption support assessment, plans and/or services?

Thank you for taking the time to complete this survey.

If this survey has brought up some difficult memories or experiences, please remember that Adoption UK's Helpline is available. You can contact the Helpline whether you would like information and guidance or simply someone to talk to.

The Helpline is available on 0844 848 7900 from Monday to Friday, 10am to 4pm.

Appendix 6 : Requests for adoption support

LA	The number families known to your agency (pre and post order).	The number of adoptive families who received all the support outlined in the adoption support plan.	The number who received <i>part</i> of the support outlined in the adoption support plan.	The number of adoptive families who received <i>none</i> of the support outlined in the adoption support plan.	The number that requested an assessment of need.	Average time post-order that the request was made.	The number of families that were offered additional support, post adoption order.	The number of adoptive families that subsequently received adoption support.	The average length of time adoptive families access adoption support for.
Bridgend	40	NS	NS	NS	7	5 years	7	7	NS
Caerphilly	40	35	38	2	10	1 year	9	9	highly variable
Cardiff	44	44	NS	NS	8	10 years E	8	8	2 years E
Merthyr Tydfil	25	NS	NK	NK	1	2years	1	1	1month to 3 years
Neath Port Talbot	44	NS	NS	NK	21	3 years	21	21	6 months E
Newport	30	NS	25	2	5	5 years	NS	NS	l year
North Wales*	166 E	116 E	NK	0	50E	Teenagers	50 E	50 E	NK
Powys	34	18	0	0	6	NK	6	16	NK
RCT	100+ E	31	0	0	4	1-2 yrs	4	4	6-12mths
South East Wales	191	35 E	4	0	25 E^	7.5 years E	49	24	6 to 12 months
Swansea	51	51	0**	0**	56E	3yrs 8mths E	49	49	2yrs 4mths E
Vale of Glamorgan	44 E	NS	NS	NS	12	5+ years	9	9	12 - 14months
West Wales	80+	NS	NS	NS	NS	NS	NS	NS	NS

E – Estimate NS - Data not supplied NK – Not known * - Data given from April 2010 ** - Do not record this information.

not all families requested an Assessment of Need but rather accessed the support on a more informal basis e.g. support groups, training etc.
 Table 3: Requests for adoption support

Appendix 7: Adoption support services received

Support	Number	%
Pastoral support within educational setting	7	11
Parenting programmes (general)	4	7
Parenting programmes (Adopters)	10	16
Therapeutic parenting /family intervention	11	18
Other counselling/mental health/ therapeutic services for children and young people	16	26
General advice and information	25	41
Peer support groups for adopters	32	52
Peer support groups for young people	6	10
Services for birth parents related to adoption	1	2
Letterbox contact with birth parent/s	29	48
Letterbox contact with birth siblings	10	16
Letterbox contact with other relatives	6	10
Letterbox contact with previous foster carers	2	3
Support (excluding financial support) for direct (face-to-face) contact arrangements with birth parent	4	7
Support (excluding financial support) for direct (face-to-face) contact arrangements with siblings	6	10
Support (excluding financial support) for direct (face-to-face) contact arrangements with other relatives	3	5
Support (excluding financial support) for direct (face-to-face) contact arrangements with previous foster carers	4	7
Financial assistance to support direct contact arrangements	1	2
Short breaks (i.e. respite care)	2	3
Services to assist in case of disruption	2	3
Financial support (general)	20	33
Other, please give details	7	11
Attachment support group run by local authority	1	
Contact with foster carer	2	
Outreach worker	1	
Voluntary Agency Family Consultant	1	
Missing data Adoption support services received	2	

Adoption support services received

Appendix 7 :