

Code of Practice

Local Authority Adoption Services

This code of practice relates to The Local Authority Adoption Services (Wales) Regulations 2019

April 2019

The Adoption and Children Act 2002

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

Preamble

1. Section 9 of the Adoption and Children Act 2002 ('the Act') provides that the Welsh Ministers may make regulations in respect of the regulation and inspection of local authority functions relating to adoption.
2. The requirements upon local authority adoption service providers and managers are contained within the Local Authority Adoption Services (Wales) Regulations 2019 ('the Regulations'), made under section 9 of the Act.
3. This code of practice is issued under section 145 of The Social Services and Well-being (Wales) Act 2014 ('the 2014 Act'), which gives the Welsh Ministers the power to issue codes on the exercise of social services functions. Local authorities, when exercising their social services functions in respect of adoption services, **must** act in accordance with the requirements within the Regulations and **have regard** to any guidance set out in this code.
4. Section 147 of the Act (departure from requirements in codes) does not apply to any requirements contained in this code; therefore these **must** be followed in full.
5. The guidance in this code sets out how local authority service providers and managers may comply with the Regulations. These requirements are contained within Parts 2 to 13 of the Regulations. However, local authority service providers and managers will be responsible for deciding how the requirements within the Regulations will be met, taking into account the needs of individuals using the service and the statement of purpose for the service. Care Inspectorate Wales will use this code of practice to inform decisions about the extent to which local authority service providers and managers are meeting the requirements set out in the Regulations, and as a basis for their inspections of local authority adoption services.
6. The Regulations and this code of practice replace requirements previously imposed on local authority adoption services under The Local Authority Adoption Services (Wales) Regulations 2007 and their associated National Minimum Standards.
7. The Regulations come into force on 29 April 2019 and this code of practice also comes into effect from that date.

Structure of the code of practice

8. This code of practice sets out the following:

- **A summary of the intention of each Part of the Regulations**

Parts 2 to 8 of the Regulations set out the requirements on local authority service providers in relation to the standard of service that must be provided. They also impose other requirements in relation to the operation of the service. Parts 9 to 12 set out the duties placed on managers.

- **The text of each regulation**

It is important that local authority service providers and managers refer to the text of each regulation as the first source of information about what the requirements are and how to meet them. This code of practice provides further explanation on how to meet the individual components of each regulation where further clarification and definition may be helpful, but it is not a substitute for the text of the legislation itself. Where the text of the regulation itself is self-explanatory, no further guidance is given.

- **Guidance on the requirements of individual components of the regulation**

The guidance on individual components of each regulation should not be considered exhaustive as there may be other ways that local authority service providers and managers can show that they meet each component of the regulation.

Advocacy

9. A looked after child must feel that their voice is heard throughout the adoption process. It is open to them to invite someone of their choice to support them to participate fully and express their views, wishes and feelings, whether a friend, family member or someone from their wider support network.
10. The dedicated Code of Practice on advocacy under part 10 of the 2014 Act sets out the functions when a local authority, in partnership with the looked after child, must reach a judgement on how advocacy could support the determination and delivery of their personal outcomes; together with the circumstances when a local authority must arrange an independent professional advocate. Professionals must ensure that judgements about the needs for advocacy are integral to the relevant duties under this code.

List of key terms used within this code of practice

Term	Meaning
The 2016 Act	The Regulation and Inspection of Social Care (Wales) Act 2016
The 2014 Act	The Social Services and Well-Being (Wales) Act 2014
The Act	The Adoption and Children Act 2002
Adoption support services	<p>This has the meaning given in section 2(6) of the Act and regulation 3 of the Adoption Support Services (Local Authorities) (Wales) Regulations 2005, in that:</p> <ul style="list-style-type: none"> a) Under the Act, adoption support services means: <ul style="list-style-type: none"> i. Counselling, advice and information, and ii. Any other services prescribed by regulations b) Under the Adoption Support Services (Local Authorities) (Wales) Regulations 2019, adoption support service includes: <ul style="list-style-type: none"> i. Financial support payable to the adoptive parent in certain circumstances; ii. services to enable groups of adoptive children, adoptive parents and birth parents of an adoptive child to discuss matters relating to adoption. iii. assistance to adoptive children, adoptive parents, birth parents of an adoptive child and related persons in relation to arrangements for contact between an adoptive child and a birth parent or a related person of the adoptive child; iv. services that may be provided to an adoptive family in relation to the therapeutic needs of an adoptive child; v. assistance for the purpose of ensuring the continuance of the relationship between the child and the child's adoptive parent, including: <ul style="list-style-type: none"> o training for the adoptive parent for the purpose of meeting any special needs of the child, and vi. respite care (assistance where disruption in an adoption arrangement or placement has occurred or is in danger of occurring, including— <ul style="list-style-type: none"> a. mediation; and b. organising and running meetings to discuss disruptions in adoption placements;

Area authority	The local authority in Wales ¹ or local authority in England for the area in which a child is placed, or is to be placed, where this is different from the placing authority.
Care and support plan	A plan put in place by the local authority under section 54 or section 83 of the 2014 Act.
Local authority adoption service	The discharge by a local authority of the functions under the Act of making or participating in arrangements for the adoption of children or the provision of adoption support services.
Local authority service providers	The local authority providing the local authority adoption service. Referred to as 'service providers'.
Representative	Any person having legal authority, or the consent of the individual to act on the individual's behalf.
Staff	<ul style="list-style-type: none"> • Persons employed by the local authority to work at the service as an employee or worker (within the meaning of section 230 of the Employment Rights Act 1996); • Persons engaged by the local authority under a contract for services; • This does not include persons who are allowed to work as volunteers.
Support	<p>Where used in relation to the support provided to an individual (as defined below), support includes:</p> <p>(a) the support which a local authority adoption service is required to provide to individuals in the course of arranging an adoption or after an adoption has been arranged in accordance with the Adoption Agencies (Wales) Regulations 2005 or the Access to Information (Post-Commencement Adoptions) (Wales) Regulations 2005), or</p> <p>(b) the adoption support services which a local authority provides or arranges to provide².</p>
The individual	<p>Unless the context indicates otherwise, the individual means:</p> <ul style="list-style-type: none"> (a) a child who may be adopted, their parent or guardian; (b) a person wishing to adopt a child, or (c) an adopted person, their parent, birth parent or former guardian, who is receiving support of the type which a local authority adoption service is required to provide in

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

² Section 3(4) of the Act provides that a local authority may provide any of the requisite facilities by securing their provision by (a) registered adoption societies, or (b) other persons who are within a description prescribed by regulations of persons who may provide the facilities in question. "Facilities" include making arrangements for the provision of adoption support services (s.3(2)(b)). Regulation 5 of the Adoption Support Services (Local Authorities) (Wales) Regulations 2005 prescribes, for the purposes of section 3(4)(b), persons other than registered adoption societies who may provide the requisite facilities

	<p>accordance with the Adoption Agencies (Wales) Regulations 2005 or the Access to Information (Post-Commencement Adoptions) (Wales) Regulations 2005, or</p> <p>(d) any person receiving adoption support services.</p>
The individual's needs	The individual's needs for support from local authority adoption services.
The Regulations	The Local Authority Adoption Services (Wales) Regulations 2019
The service regulator	Care Inspectorate Wales ('CIW'), acting on behalf of the Welsh Ministers in the exercise of their regulatory functions.
Statement of purpose	The statement of purpose for the place at, from or in relation to which the service is provided. The information which must be provided in accordance with Schedule 1 of the Regulations for the place from which the service is provided.

Useful links

The Adoption and Children Act 2002

<http://www.legislation.gov.uk/ukpga/2002/38/contents>

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

<http://www.legislation.gov.uk/anaw/2014/4/contents>

The Local Authority Adoption Services (Wales) Regulations 2019

<http://www.assembly.wales/laid%20documents/sub-ld12190/sub-ld12190-e.pdf>

The Adoption Support Services (Local Authorities) (Wales) Regulations 2005

http://www.legislation.gov.uk/wsi/2005/1512/pdfs/wsi_20051512_mi.pdf

Care Inspectorate Wales

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

Social Care Wales

<https://www.socialcare.wales/>

Social Care Wales: Information and Learning Hub

<https://socialcare.wales/hub/home>

Chapter 1: Requirements on service providers (Parts 2 to 8 of the Regulations)

Please note Chapter 3: Other requirements on service providers and Miscellaneous amendment (Parts 13 and 14)

1.1 General requirements on service providers (Part 2 of the Regulations)

The intent of the general requirements within Part 2 of the Regulations is to ensure that service providers put in place governance arrangements to support the smooth operation of the service and to ensure that there is a sound base for providing high quality support to individuals. This includes the following:

- Setting clear organisational intent and direction by outlining the services provided and the actions the service provider will undertake to achieve this in the statement of purpose.
- Putting in place the underpinning policies and procedures to support managers and staff to achieve the aims of the service and assist individuals to meet their needs for support.
- Establishing sound management structures to oversee and monitor the service in order to ensure that it operates safely and effectively for the individuals receiving support.
- Establishing clear arrangements for an ongoing cycle of quality assurance and review to provide assurance that the service operates in line with legal requirements, its statement of purpose and is appropriately assisting individuals to meet their needs for support. The information obtained through monitoring is used for continued development and improvement of the service.
- Promoting a culture of openness, honesty and candour at all levels.

Regulation 3	Code
<p>Requirements in relation to the provision of the service</p> <p>3. The service provider must ensure that the service is provided with sufficient care, competence and skill, having regard to the statement of purpose.</p>	<ul style="list-style-type: none">• Service providers have clear arrangements for the oversight and governance of their adoption service in order to establish, develop and embed a culture which ensures that the best possible outcomes are achieved for individuals using the local authority adoption service and to meet the requirements of the Regulations. This includes but is not limited to:<ul style="list-style-type: none">○ policies and procedures to achieve the aims of the

	<p>statement of purpose and place individuals at the centre of the service;</p> <ul style="list-style-type: none"> ○ systems for assessment, monitoring and review which support evidence-based practice and assist individuals to meet their needs for support; ○ processes to ensure support is delivered consistently and reliably; ○ safe staffing arrangements, underpinned by professional development, to meet the support needs of individuals using the service; ○ quality and audit systems to review progress and inform service development; ○ a proactive approach to equal opportunities and diversity; and ○ suitable and accessible premises.
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Regulation 4	Code
<p>Content of statement of purpose</p> <p>4.The service provider must prepare a statement of purpose which contains the information listed in Schedule 1.</p>	<ul style="list-style-type: none"> ● The statement of purpose is fundamental to local authority adoption services. It must: <ul style="list-style-type: none"> ○ accurately describe the services provided, ○ state where and how these services will be provided, and ○ state the arrangements to support the delivery of the services. ● It must include the information set out in Schedule 1 to the Regulations. ● In preparing a statement of purpose, service providers take account of any statement of purpose guidance provided by the service regulator.

Regulation 5	Code
<p>Requirements in relation to statement of purpose</p> <p>5.—(1) The service provider must provide the service in accordance with the statement of purpose.</p> <p>(2) The service provider must—</p> <p>(a) keep the statement of purpose under review, and</p> <p>(b) where appropriate, revise the statement of purpose.</p> <p>(3) Unless paragraph (4) applies, the service provider must notify the persons listed in paragraph (6) of any revision to be made to the statement of purpose at least 28 days before it is to take effect.</p> <p>(4) This paragraph applies in cases where it is necessary to revise the statement of purpose with immediate effect.</p> <p>(5) If paragraph (4) applies, the service provider must, without delay, notify the persons listed in paragraph (6) of any revision made to the statement of purpose.</p> <p>(6) The persons who must be notified of any revision to the statement of purpose in accordance with paragraph (3) or (5) are—</p> <p>(a) the service regulator;</p> <p>(b) individuals;</p> <p>(c) any representatives, unless it is not appropriate to do so or would be inconsistent with the well-being of an individual.</p> <p>(7) The service provider must provide the up to date statement of purpose to any person on request, unless it is not appropriate to do so or would be inconsistent with the well-being of an individual.</p>	<ul style="list-style-type: none"> • Service providers review and update the statement of purpose at least annually or earlier if changes are being made to the service provided. • Where there is an intention to change the service being provided, the statement of purpose is updated to reflect the change. Service providers notify those persons set out in regulation 5(6) 28 days prior to the changes being made. Examples of this include: <ul style="list-style-type: none"> ○ provision of additional specialist services; ○ changes to the normal staffing arrangements or levels as set out in the existing statement of purpose. • Where there is an intention to change the service being provided with immediate effect, i.e. within the 28 days notification period (see regulation 5(4) and (5)), the service provider: <ul style="list-style-type: none"> ○ notifies the persons listed in regulation 5(6) immediately (and where practicable, prior to implementing the change); and ○ updates the statement of purpose to reflect the change without delay and provides a copy to the service regulator. • Where a change to the statement of purpose is proposed, the service provider provides the service regulator with additional information it may need to satisfy itself that they can provide the services proposed.

- Where the statement of purpose is updated a record is maintained of the version and date of amendment.
- A copy of the statement of purpose is readily available to those listed in regulation 5(6).

Regulation 6	Code
<p>Requirements in relation to monitoring and improvement</p> <p>6.—(1) The service provider must ensure that there are effective arrangements in place for monitoring, reviewing and improving the quality of the service (2) Those arrangements must include arrangements for seeking the views of—</p> <ul style="list-style-type: none"> (a) individuals; (b) any representatives, unless this is not appropriate or would be inconsistent with the individual’s well-being; (c) any other local authority or local authority in England which has arranged for the provision of adoption support services by the service; (d) staff, on the quality of the service and how this can be improved. <p>(3) When making any decisions on plans for improvement of the quality of the service, the service provider must—</p> <ul style="list-style-type: none"> (a) take into account the views of those persons consulted in accordance with paragraph (2); and (b) have regard to the quality of service report prepared by the manager in accordance with regulation 39(4). 	<ul style="list-style-type: none"> • Service providers have systems and processes in place to monitor, review and improve the quality of the service. This will include: <ul style="list-style-type: none"> ○ who is responsible for ensuring this is done; ○ how this will be done; ○ how often this takes place; and ○ how the results will be fed back to and considered by local authority chief officers and elected members. • The outcome of any review is analysed and reviewed by people with the appropriate knowledge, skills and competence to understand its significance and take action to secure improvement. Service providers seek professional/expert advice as needed and in a timely manner to help secure improvements. • Service providers can demonstrate how they have: <ul style="list-style-type: none"> ○ analysed and responded to the information gathered; ○ used the information to make improvements. • Service providers monitor progress against plans to improve the quality and safety of services, and take appropriate action

immediately where progress is not achieved as expected.

- The systems and processes are continually reviewed to make sure they enable the service provider to identify where quality and/or safety of services are being, or may be, compromised and to enable an appropriate timely response.
- As part of the quality review process, service providers:
 - encourage feedback;
 - regularly seek the views of individuals about the quality of the service; and
 - are able to demonstrate they have done this and the nature of the feedback they have received.
- The methods used to engage with and gain the views of those listed in regulation 6(2) using the service are appropriate to their age, level of understanding and take into account their specific condition and/or any communication needs.
- Information collated through quality and audit systems is used to develop the quality of service report in line with regulation 39(4).

Regulation 7	Code
<p>Requirement to appoint a manager</p> <p>7.—(1) Each service provider must appoint one of its officers to be responsible for the management of the service.</p> <p>(2) The service provider must immediately give notice in writing to the service regulator of—</p>	<ul style="list-style-type: none">• Service providers give written notification to the service regulator without delay as required by the Regulation.

<p>(a) the name of the person appointed as manager; and (b) the date on which the appointment is to take effect. (3) The service provider must notify the service regulator in writing if the person appointed under paragraph (1) ceases to manage the service.</p>	
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Regulation 8	Code
<p>Fitness requirements for appointment of manager</p> <p>8.—(1) The service provider must not appoint a person to manage the service unless that person is fit to do so. (2) For the purposes of paragraph (1), a person is not fit to manage the service unless the requirements of regulation 22(2) (fitness of staff) are met in respect of that person.</p>	<ul style="list-style-type: none"> • Service providers have suitable arrangements in place to ensure the manager is fit and is capable of running the service in line with its statement of purpose. This includes ensuring: <ul style="list-style-type: none"> ○ the manager is appropriately qualified ○ the manager is registered with Social Care Wales (subject to regulation 22(2)(e)) ○ the manager is experienced in managing care services and in the provision of the type of care being provided ○ the vetting of prospective managers includes the relevant checks required by legislation to assure the chief officer that the person is fit and able to work with children.

Regulation 9	Code
<p>Other requirements in relation to the manager</p> <p>9.—(1) A service provider must ensure that the person who is appointed as the manager— (a) is supported to carry out their duties effectively, and (b) undertakes appropriate training. (2) The service provider must ensure that the manager complies</p>	<ul style="list-style-type: none"> • Service providers have arrangements in place for regular formal discussion with, and support for, the manager. • Service providers support the manager to undertake training which enables them to carry out their role effectively and to meet the aims of the service as outlined in the statement of purpose and in line with practice guidance recommended by

<p>with the requirements of Parts 9 to 12 (duties to be carried out by the manager).</p> <p>(3) In the event that the service provider has reason to believe that the manager has not complied with a requirement imposed by the regulations in Parts 9 to 12, the service provider must take such action as is necessary to ensure that the requirement is complied with.</p> <p>(4) The service provider must put suitable arrangements in place to ensure that the service is managed effectively at any time when there is no manager appointed or when the manager is absent from the service.</p>	<p>Social Care Wales.</p> <ul style="list-style-type: none"> • If there is no manager in place, or the manager is unable to fulfil their duties for any reason (for example, they are absent from their role due to illness), service providers ensure that appropriate and robust arrangements are in place for the management of the service during the vacancy.
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Regulation 10	Code
<p>Requirements to provide the service in accordance with policies and procedures</p> <p>10.—(1) The service provider must ensure that the following policies and procedures are in place for the service—</p> <ul style="list-style-type: none"> (a) safeguarding (see regulation 19); (b) supporting and developing staff (see regulation 23); (c) staff discipline (see regulation 25); (d) complaints (see regulation 31); (e) whistleblowing (regulation 32). <p>(2) The service provider must also have such other policies and procedures in place as are reasonably necessary to support the aims and objectives of the service set out in the statement of purpose.</p> <p>(3) The service provider must ensure that the content of the policies and procedures which are required to be in place by virtue of paragraphs (1) to (2) is—</p>	<ul style="list-style-type: none"> • Service providers have the policies and procedures in place as required by the Regulations. • Policies and procedures are proportionate to the service being provided in accordance with the statement of purpose. • Policies and procedures: <ul style="list-style-type: none"> ○ are aligned to any current legislation and national guidance; ○ set out how they relate to any regional service, including the regional framework and any agreements, where appropriate; ○ provide guidance for staff to ensure that services are provided in line with the statement of purpose; and ○ set out requirements to inform individuals about how the service is provided.

<p>(a) appropriate to the needs of individuals for whom support is provided;</p> <p>(b) consistent with the statement of purpose; and</p> <p>(c) kept up to date.</p> <p>(4) The service provider must ensure that the service is provided in accordance with those policies and procedures.</p>	<ul style="list-style-type: none"> • Policies, procedures and practices are reviewed and updated in light of changes to practice, changing legislation and best practice recommendations. • Staff and individuals using the service have the opportunity to be involved in developing policies and procedures. • Where changes are made to the statement of purpose the policies and procedures are reviewed and updated to reflect the changes. • Service providers ensure staff have access to, and knowledge and understanding of, the policies and procedures which support them in their role in meeting the individual's need for support. • All policies and procedures are available on request to the individuals who use the service and their representatives. • Policies and procedures are in a format accessible to the individual and they receive assistance as is necessary to enable them to understand the information provided. • Systems for monitoring and improvement include those which ensure the service is being run in accordance with the policies and procedures.
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Regulation 11	Code
<p>Duty of candour</p> <p>11. The service provider must act in an open and transparent way</p>	<ul style="list-style-type: none"> • Service providers have policies and procedures in place to support a culture of openness and transparency, and which ensure that all staff are aware of and follow them. These are in

with—

- (a) individuals;
- (b) any representatives of those individuals.

line with, and take account of, Social Care Wales' guidance on the professional duty of candour for social care professionals registered with Social Care Wales.

- Service providers promote a culture of candour that includes:
 - being open and honest when engaging with those listed in regulation 11 (a) and (b);
 - providing information about what has happened and the outcome of any investigations that have taken place; and
 - offering an apology for what has happened, where it is appropriate to do so.
- Service providers take action to prevent and appropriately address bullying, victimisation and/or harassment in relation to the duty of candour, and investigate any instances where elected members, senior officers (of the local authority) or other members of staff may have obstructed another in exercising their duty of candour.
- Service providers have a system in place to identify and deal with possible breaches of the professional duty of candour by staff who are professionally registered, including the obstruction of another in their professional duty of candour. Action taken to address such breaches includes, where appropriate, a referral to the professional regulator or other relevant body.

1.2 Requirements on service providers as to the information to be provided to individuals on commencement of the provision of support (Part 3 of the Regulations)

The intent of Part 3 of the Regulations is to ensure that individuals are provided with information about the service to enable them to have:

- a clear understanding of the culture and ethos of the service
- an outline of the services they can expect to receive
- an understanding of the manner in which services will be provided
- the terms and conditions of the service

This should enable individuals and any representatives to have a good understanding of how the service operates in providing support. The guide provides individuals and any representatives with the information they need to raise concerns and make complaints to service providers when they are dissatisfied with the service and informs them of how to escalate concerns if they are not satisfied with the response.

Regulation 12	Code
<p>Information about the service</p> <p>12.—(1) The service provider must prepare a written guide to the service.</p> <p>(2) The guide must be—</p> <p>(a) dated, reviewed at least annually and updated as necessary;</p> <p>(b) in an appropriate language, style, presentation and format, having regard to the statement of purpose for the service;</p> <p>(c) given to any individual who is receiving support;</p> <p>(d) made available to others on request, unless this is not appropriate or would be inconsistent with the well-being of an individual.</p> <p>(3) The guide must contain information about—</p>	<ul style="list-style-type: none"> • A written guide is available to those listed in regulation 12(2)(c), and 12(2)(d) if appropriate, which provides information about the service. • The guide is in plain language and in a format that reflects the needs, age and level of understanding for whom the service is intended. The guide is made available in formats and media accessible and appropriate to the audience. For example, preferred and appropriate language, large print, audio, computerised and visual aids. When required it is explained in the individual's preferred method of communication. • Where required, individuals are supported to understand the contents of the guide and what it means for them.

- (a) how to raise a concern or make a complaint;
 - (b) the availability of advocacy services.
 - (c) the role and contact details for the Children's Commissioner for Wales.
- (4) The service provider must ensure that an individual receives such assistance as is necessary to enable the individual to understand the information contained in the guide.

- The guide sets out the areas required by regulation 12(3) and in addition includes the following:
 - arrangements for welcoming and supporting individuals;
 - the ethos, culture and priorities of the service including summary of the statement of purpose;
 - information on any support processes and related timescales, where relevant;
 - information on the process for seeking support, where appropriate;
 - information about foster to adopt;
 - how to access the most recent inspection report completed by the service regulator;
 - key staff who will be supporting the individual;
 - how to contact the local authority adoption services manager;
 - an individual's right to make representations and the support available if needed;
 - the complaints procedure and how to make a complaint;
 - contact details and role of the Public Service Ombudsman for Wales, the service regulator, the Children's Commissioner for Wales (as appropriate);
 - information about the entitlement for looked after children to access independent advocacy services;
 - arrangements for contributing views on the running of the service;
 - fees – range, any additional fees or costs payable by the individual, method of payment, notice of increase;
 - terms and conditions including circumstances in which the service may cease to be provided and notice periods; and
 - how individuals can access their own records.

Regulation 13	Code
<p>Service agreement</p> <p>13.—(1) The service provider must ensure that every individual who receives support is given a signed copy of any agreement relating to—</p> <p style="padding-left: 20px;">(a) the support provided to the individual;</p> <p style="padding-left: 20px;">(b) any other services provided to the individual.</p> <p>(2) The service provider must ensure that the individual receives such assistance as is necessary to enable the individual to understand the information contained in any such agreement.</p>	<ul style="list-style-type: none"> • Individuals using the service are given a copy of any agreement with, where appropriate: <ul style="list-style-type: none"> ○ information about the costs payable by the individual, for example medicals, mileage/travel costs relating to assessment, training and panel attendance; application fees, legal costs, etc; other costs covered by the placing authority; and terms and conditions of the service including termination of contracts and notice period, so that they can make decisions about their care and support; and ○ the information which details the individual service to be provided. • Service providers give individuals, or their representative, a written estimate of any costs of support payable by the individual, in a format accessible to the individual and suitable to their age and level of understanding. This includes details of any likely additional costs.

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1.3 Requirements on service providers as to standards of support to be provided (Part 4 of the Regulations)

The intent of Part 4 of the Regulations is to ensure that individuals are assisted to meet their needs for support. The service is designed in consultation with individuals and considers their personal wishes and aspirations, any risks and specialist needs which inform their needs for support.

This includes:

- providing assistance that enables the individual to meet their needs for support;
- provision of staff with the knowledge, skills and competency to meet the individual’s needs for support;
- ensuring staff have the appropriate language and communication skills; and
- consultation with and seeking support from relevant agencies and specialists where required.

Regulation 14	Code
<p>Standards of support – overarching requirements</p> <p>14.—(1) The service provider must ensure that support is provided in a way which protects, promotes and maintains the safety and well-being of individuals.</p> <p>(2) The service provider must ensure that support is provided in a way which—</p> <p>(a) maintains good personal and professional relationships with individuals and staff; and</p> <p>(b) encourages and assists staff to maintain good personal and professional relationships with individuals.</p>	<ul style="list-style-type: none"> • The service provider’s expectations as to standards of support are clearly set out in the statement of purpose. • Policies and procedures are in line with any current legislation and national guidance; and reflect evidence-based practice. • Service providers ensure the service is responsive and proactive in identifying and mitigating risks. • Service providers ensure support is delivered in a dignified and respectful manner with staff demonstrating a positive and caring attitude towards individuals. • Service providers ensure support is provided in keeping with any care and support plan, adoption support plan and/or placement plan in respect of the individual, and that it assists individuals to meet their needs for support in relation to their: <ul style="list-style-type: none"> ○ physical, mental and emotional well being;

- cultural, religious, social or spiritual preferences;
- education, training and recreation needs;
- family and personal relationships;
- control over everyday life and where relevant participation in work;
- intellectual, emotional and behavioural development;
- rights and entitlements, in particular with regard to the United Nations Convention on the Rights of the Child;
- protection from any abuse and neglect.

Examples of this include:

- Children are introduced to their prospective adopters sensitively and with careful and considered planning that promotes attachment. When unplanned circumstances require children to move on from one setting to another, then the welfare and well-being of children remain paramount and agency staff act at all times with this in mind.
- Individuals are given support that assists them to manage their own conflicts and difficult feelings.
- Individuals develop positive relationships with other individuals and staff. There are clear, consistent and appropriate boundaries for children.
- Children have appropriate, carefully assessed, supported contact (direct and/or indirect) with their birth relatives, including their brothers and sisters, and other people who are important to them, such as previous carers, where this is in their best interests.
- Ongoing appropriate support designed to ensure that adopters and prospective adopters continue to understand the potential

	<p>impact of abuse and neglect on their adopted child’s behaviour as they grow older (including the trauma created by adverse childhood experiences) in order to equip them to provide stable and secure attachments.</p> <ul style="list-style-type: none"> • Service providers have arrangements in place to assist individuals to raise concerns where there are difficulties in the provision of support.
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Regulation 15	Code
<p>Information</p> <p>15.—(1) The service provider must put arrangements in place to ensure that an individual has the information they need to make or participate in assessments, plans and day to day decisions about the way support is provided to them.</p> <p>(2) Information provided must be available in the appropriate language, style, presentation and format, having regard to—</p> <ul style="list-style-type: none"> (a) the nature of the service as described in the statement of purpose; (b) the level of the individual’s understanding and ability to communicate; (c) in the case of a child, the child’s age. <p>(3) The service provider must ensure that the individual receives such assistance as is necessary to enable them to understand the information provided.</p>	<ul style="list-style-type: none"> • Service providers ensure that individuals are able to make decisions about their lives and are helped where necessary to do this. • Individuals are offered the opportunity and are enabled to contribute their views about the day to day running of the service. • Service providers put in place arrangements to enable individuals to access relevant advocacy services or self advocacy groups (if they wish) and support for their communication needs so individuals are able to make decisions about their lives. • Service providers put in place arrangements to enable individuals to understand the information provided. • Where information is available about children who need families locally, this is provided promptly and in a clear and accurate way.

Regulation 16	Code
<p>Language and communication</p> <p>16.—The service provider must take reasonable steps to meet the language and communication needs of an individual.</p>	<ul style="list-style-type: none"> • Service providers have arrangements in place to assist individuals with their specific communication and language needs in line with the statement of purpose. Where necessary this will include putting in place measures to ensure that individuals can communicate meaningfully. This includes: <ul style="list-style-type: none"> ○ the individual’s language of need and choice; ○ additional means of communication such as Picture Exchange Communication System (PECS), Treatment and Education of Autistic and Communication related handicapped Children (TEACCH), Makaton, British Sign Language (BSL) where appropriate. • Service providers identify an individual’s communication needs as part of their determination as to whether the service can meet their needs for support. • Individuals can understand staff when they communicate with them. • Service providers deliver, or work towards, actively offering a service in the Welsh language to individuals whose first language is Welsh.
Regulation 17	Code
<p>Respect and sensitivity</p> <p>17.—(1) The service provider must ensure that individuals are treated with respect and sensitivity. (2) This includes, but is not limited to—</p>	<ul style="list-style-type: none"> • Service providers ensure that individuals are: <ul style="list-style-type: none"> ○ listened to, and communicated with, in a courteous and respectful manner; and ○ treated with respect and feel valued.

- (a) respecting the individual's privacy and dignity;
- (b) respecting the individual's rights to confidentiality;
- (c) promoting the individual's autonomy and independence;
- (d) having regard to any relevant protected characteristics (as defined in section 4 of the Equality Act 2010⁽¹⁾) of the individual.

- Service providers ensure that systems are in place to respond promptly to the requests of and work with individuals who have been affected by adoption, at all times being respectful of their ethnic origin, religion, culture, language, sexuality, gender and disability and their experience and understanding of adoption.

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⁽¹⁾ 2010 c. 15

1.4 Requirements on service providers – safeguarding (Part 5)

The intent of Part 5 of the Regulations is to ensure that service providers have in place the mechanisms to safeguard vulnerable individuals to whom they provide support.

This includes arrangements that:

- empower vulnerable individuals using the service to speak up about their needs, wishes and experiences;
- support and underpin staff knowledge, understanding and skill in identifying risks and action to take where abuse, neglect or improper treatment is suspected or identified; and
- ensure providers work collaboratively with relevant partners to prevent and take action where abuse, neglect or improper treatment is suspected or identified.

Regulation 18	Code
<p>Safeguarding - overarching requirement</p> <p>18. The service provider must provide the service in a way which ensures that individuals are safe and are protected from abuse, neglect and improper treatment.</p>	<ul style="list-style-type: none"> • When they begin using the service, individuals are given information about safeguarding, how to raise a concern and about what help is available to enable them to do so. • Staff and individuals can access up to date safeguarding policy and procedures. • Staff receive training relevant to their role at induction to understand safeguarding and protecting vulnerable individuals. This includes both internal and local safeguarding arrangements including how to raise a concern (whistleblowing). • Staff training is ongoing at regular intervals in line with local safeguarding recommendations. • Staff are aware of their individual responsibilities for raising concerns to ensure the safety and well-being of individuals.

	<ul style="list-style-type: none"> • Service providers make provision to support staff raising safeguarding concerns (whistleblowing). • Service providers work in partnership with other relevant professionals and agencies and manage risk to individuals using the service. • Records of safeguarding referrals and outcomes are maintained to enable oversight and scrutiny of safeguarding within the service. Protection of vulnerable individuals must be overseen by the manager and within the governance structure with arrangements for oversight at chief officer level. • Service providers ensure that outcomes arising from any safeguarding referral are communicated to the individual in a method appropriate to their age, level of understanding and which takes into account their specific condition and any communication needs.
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Regulation 19	Code
<p>Safeguarding policies and procedures</p> <p>19.—(1) The service provider must have policies and procedures in place—</p> <p>(a) for the prevention of abuse, neglect and improper treatment, and</p> <p>(b) for responding to any allegation or evidence of abuse, neglect or improper treatment.</p> <p>(2) In this regulation, such policies and procedures are referred to as safeguarding policies and procedures.</p> <p>(3) The service provider must ensure that their safeguarding</p>	<ul style="list-style-type: none"> • There is an up-to-date safeguarding policy and procedures in place. • Policies and procedures are aligned to current legislation, national guidance and local safeguarding procedures. • The safeguarding policy and procedures include the individual roles and responsibilities of staff or others working at the service in receiving and reporting allegations of abuse, neglect or improper treatment or suspected abuse, neglect or improper treatment. This will include instruction for staff on actions to be

<p>policies and procedures are operated effectively.</p> <p>(4) In particular, where there is an allegation or evidence of abuse, neglect or improper treatment, the service provider must—</p> <ul style="list-style-type: none"> (a) act in accordance with their safeguarding policies and procedures; (b) take immediate action to ensure the safety of all individuals for whom support is provided; (c) make appropriate referrals to other agencies; and (d) keep a record of any evidence or the substance of any allegation, any action taken and any referrals made. 	<p>taken and mechanisms for referral to the local authority and other relevant partners and agencies.</p> <ul style="list-style-type: none"> • Service providers ensure that service users are informed of their right to independent professional advocacy services.
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Regulation 20

Interpretation of Part 5

20. In this Part –

“abuse” (*camdriniaeth*) means physical, sexual, psychological, emotional or financial abuse and, in relation to a child, any other harm.

For the purposes of this definition—

- (a) “financial abuse” (*camdriniaeth ariannol*) includes—
 - (i) having money or other property stolen;
 - (ii) being defrauded;
 - (iii) being put under pressure in relation to money or other property;
 - (iv) having money or other property misused;
- (b) “harm” (*niwed*) has the same meaning as in section 197(1) of the 2014 Act⁽¹⁾ ;

“improper treatment” (*triniaeth amhriodol*) includes discrimination or unlawful restraint, including inappropriate deprivation of liberty under the terms of the Mental Capacity Act 2005⁽²⁾**15**);

“neglect” (*esgeulustod*) has the same meaning as in section 197(1) of the 2014 Act.

⁽¹⁾ “The 2014 Act” is defined in section 2(5) of the Act as the Social Services and Well-being (Wales) Act 2014 (anaw 4)

⁽²⁾2005 c.9

1.5 Requirements on service providers as to staffing (Part 6)

The intent of Part 6 of the Regulations is to ensure that there are appropriate numbers of staff who have the required knowledge, competency, skills and qualifications to meet individuals' needs for support, to the required standards.

Service providers have in place:

- policies and procedures for recruitment;
- rigorous practices for recruiting and vetting staff;
- a structure of management and staffing that supports the statement of purpose and is relevant to individuals' needs for support; and
- management structure, systems and processes for induction, ongoing supervision, training and development of staff.

Regulation 21	Code
<p>Staffing - overarching requirements</p> <p>21.—(1) The service provider must ensure that at all times a sufficient number of suitably qualified, trained, skilled, competent and experienced staff are deployed to work at the service, having regard to—</p> <ul style="list-style-type: none"> (a) the statement of purpose for the service; (b) the individuals' need for support; (c) assisting individuals to meet their need for support; (d) the need to safeguard and promote the health and welfare of children; and (e) the requirements of these Regulations. <p>(2) The service provider must ensure that suitable arrangements are made for the support and development staff.</p>	<ul style="list-style-type: none"> • Service providers have a demonstrable, measurable and systematic approach to determine the number of staff and range of skills/qualifications required to reliably meet individuals' needs for support. This considers, but is not limited to: <ul style="list-style-type: none"> ○ the statement of purpose; ○ the individual's needs for support. • Staffing levels and skill mix are reviewed continuously and adapted to respond to the changing needs of the service. • Arrangements are in place to cover staff sickness or absence to ensure individuals' needs for support are met.

Regulation 22	Code
<p>Fitness of staff</p> <p>22.—(1) The service provider must not—</p> <ul style="list-style-type: none"> (a) employ a person under a contract of employment to work at the service unless that person is fit do so; (b) allow a volunteer to work at the service unless that person is fit to do so; (c) allow any other person to work at the service in a position in which that person may, in the course of duties, have regular contact with individuals who are receiving support or with other persons who are vulnerable unless that person is fit to do so. <p>(2) For the purposes of paragraph (1), a person is not fit to work at the service unless—</p> <ul style="list-style-type: none"> (a) the person is of suitable integrity and good character; (b) the person has the qualifications, skills, competence and experience necessary for the work that person is to perform; (c) the person is able by reason of their health, after reasonable adjustments are made, to properly perform the tasks which are intrinsic to the work for which that person is employed or engaged; (d) the person has provided full and satisfactory information or documentation, as the case may be, in respect of each of the matters specified in Part 1 of Schedule 2 and this information or documentation is available at the service for inspection by the service regulator; (e) where the person is employed by the service provider to manage the service, from 1 April 2022, the person is registered as a social care manager with Social Care Wales. <p>(3) An appropriate DBS certificate must be applied for by, or on behalf of the service provider, for the purpose of assessing the</p>	<ul style="list-style-type: none"> • Service providers have rigorous selection and vetting systems in place to enable them to make a decision on the appointment or rejection of all staff and volunteers. This includes the information set out in schedule 1 of the Regulations. This also includes checking the veracity of references and past employment records. • Where agency staff are deployed service providers ensure that they are subject by the agency to the same checks as permanently employed staff and have evidence to demonstrate the checks have been undertaken. This may include confirmation and checklists supplied by any agency, where sufficiently reliable and robust. • Service providers have a process in place to check that staff have appropriate and current registration with a professional regulator where required or, where applicable, an accredited voluntary register. • Having considered all the information available service providers should determine whether the person has the necessary skills, qualifications and character to undertake the role for which they are employed/deployed. • Where staff (including volunteers) no longer meet the required fitness criteria set out in regulation 22(2), service providers take appropriate and timely action. For example, this may include: <ul style="list-style-type: none"> ○ coaching and mentoring; ○ providing additional training and supervision; ○ the use of disciplinary procedures.

<p>suitability of a person for the post referred to in paragraph (1). But this requirement does not apply if the person working at the service is registered with the Disclosure and Barring Service update service (referred to in this regulation as “the DBS update service”).</p> <p>(4) Where a person being considered for a post referred to in paragraph (1) is registered with the DBS update service, the service provider must check the person’s DBS certificate status for the purpose of assessing the suitability of that person for that post.</p> <p>(5) Where a person appointed to a post referred to in paragraph (1) is registered with the DBS update service, the service provider must check the person’s DBS certificate status at least annually.</p> <p>(6) Where a person appointed to a post referred to in paragraph (1) is not registered with the DBS update service, the service provider must apply for a new DBS certificate in respect of that person within three years of the issue of the certificate applied for in accordance with paragraph (3) and thereafter further such applications must be made at least every three years.</p> <p>(7) If any person working at the service is no longer fit to work at the service as a result of one or more of the requirements in paragraph (2) not being met, the service provider must—</p> <ul style="list-style-type: none"> (a) take necessary and proportionate action to ensure that the relevant requirements are complied with; (b) where appropriate, inform— <ul style="list-style-type: none"> (i) the relevant regulatory or professional body; (ii) the Disclosure and Barring Service. 	<ul style="list-style-type: none"> • Service providers ensure staff comply with the requirements of their professional codes of practice and, where appropriate, providers make referrals to the relevant professional bodies for staff whose fitness to practice is brought into question. • Where there are concerns that a member of staff has abused an individual or placed an individual at risk of abuse, the Disclosure and Barring Service and any relevant professional registration body are notified by the service provider without delay.
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Regulation 23	Code
<p>Supporting and developing staff</p> <p>23.—(1) The service provider must have a policy in place for the support and development of staff.</p> <p>(2) The service provider must ensure that any person working at the service (including a person allowed to work as a volunteer)—</p> <ul style="list-style-type: none"> (a) receives an induction appropriate to their role; 	<ul style="list-style-type: none"> • Service providers ensure they have an induction programme that equips all new staff (including volunteers) to be confident in their roles and practice. Staff and volunteers understand their roles and responsibilities. • Social care workers complete the relevant induction programme

<p>(b) is made aware of their own responsibilities and those of other staff;</p> <p>(c) receives appropriate supervision and appraisal;</p> <p>(d) receives core training appropriate to the work to be performed by them;</p> <p>(e) receives specialist training as appropriate;</p> <p>(f) receives support and assistance to obtain such further training as is appropriate to the work they perform.</p> <p>(3) The service provider must ensure that any person employed to work at the service as a manager is supported to maintain their registration with Social Care Wales.</p>	<p>required by Social Care Wales within the defined timescales alongside any service-specific induction programmes.</p> <ul style="list-style-type: none"> • Staff have access to copies of any relevant codes of practice and practice guidance, including any set out by Social Care Wales. The standards specified in these codes and practice guidance are actively promoted. • Where agency staff are deployed an introduction to the service is provided which includes, but is not limited to: <ul style="list-style-type: none"> ○ the statement of purpose; ○ core policies and procedures; and ○ management arrangements. • Staff receive supervision in their role to help them reflect on their practice and to make sure their professional competence is maintained. This includes feedback about their performance from individuals using the service. • Staff meet for one to one supervision or group supervision (where appropriate) with their line manager or equivalent officer, or a more senior member of staff, no less than quarterly. • All staff have an annual appraisal which provides feedback on their performance and identifies areas for training and development in order to support them in their role. • Additional training, learning and development needs of individual staff members are identified within the first month of employment and reviewed through the supervision and appraisal process. • Staff are supported to undertake training, learning and
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	<p>development to enable them to fulfil the requirements of their role and meet the needs of individuals using the service.</p> <ul style="list-style-type: none"> • Service providers undertake an annual (or sooner if required) training needs analysis to ensure that staff have the relevant skills and competence to meet the needs of individuals in accordance with the statement of purpose for the service. • Service providers maintain a written record of all training and supervision, both required and completed. • Service providers support all staff to complete, where appropriate: <ul style="list-style-type: none"> ○ core training; ○ necessary qualifications that would enable them to continue to perform their role; ○ training and activities required for continuing professional development; ○ other training deemed appropriate by the service provider; ○ core and specialist training identified by Social Care Wales as consistent with their role.
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Regulation 24	Code
<p>Information for staff</p> <p>24.—(1) The service provider must ensure that all persons working at the service (including any person allowed to work as a volunteer) are provided with information about the service and the way it is provided.</p> <p>(2) The service provider must ensure that there are arrangements</p>	<ul style="list-style-type: none"> • Service providers compile and make available information for staff in line with the statement of purpose. This includes information about the following matters— <ul style="list-style-type: none"> ○ ethos and culture of the service; ○ the conduct expected of staff or other workers; ○ the roles and responsibilities of staff or others working at

<p>in place to make staff aware of any codes of practice about the standards of conduct expected of social care workers, which are required to be published by Social Care Wales under section 112(1)(a) of the Act.</p>	<ul style="list-style-type: none"> the service; ○ the policies and procedures of the service; ○ record keeping requirements; ○ confidentiality and data protection requirements; ○ disciplinary procedures; ○ arrangements for reporting concerns; ○ arrangements for lone working. <ul style="list-style-type: none"> • Service providers ensure staff have access to and understand up-to-date copies of all relevant policies, procedures and codes of practice. They ensure staff have read these during the induction period and test staff members' ongoing understanding through supervision and performance reviews. • Service providers ensure staff undertake their duties in line with the requirements of the policies and procedures. • All staff are provided with a written job description which states clearly their responsibilities, the duties currently expected of them and their line of accountability. • Regular staff meetings (a minimum of six meetings per year) take place, are recorded and appropriate actions are taken as a result.
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Regulation 25	Code
<p>Disciplinary procedures</p> <p>25.—(1) The service provider must put in place and operate a disciplinary procedure.</p> <p>(2) The disciplinary procedure must include—</p> <p>(a) provision for the suspension, and the taking of action short of suspension, of an employee, in the interests of the</p>	<ul style="list-style-type: none"> • Service providers have a disciplinary procedure, in line with employment law, to deal with employee performance and conduct. This includes: <ul style="list-style-type: none"> ○ information about what is acceptable and unacceptable behaviour and what action will be taken if there are concerns about staff behaviour.

<p>safety or well-being of individuals;</p> <p>(b) provision that a failure on the part of an employee to report an incident of abuse, or suspected abuse, to an appropriate person, is grounds on which disciplinary proceedings may be instituted.</p> <p>(3) For the purpose of paragraph (2)(b), an appropriate person is—</p> <p>(a) the service provider;</p> <p>(b) an officer of the service regulator;</p> <p>(c) an officer of the local authority for the area where the service is provided;</p> <p>(d) in the case of an incident of abuse or suspected abuse of a child, an officer of the National Society for the Prevention of Cruelty to Children; or</p> <p>(e) a police officer,</p> <p>as the case may be.</p>	<ul style="list-style-type: none"> ○ the arrangements for a member of staff to be suspended (or transferred to other duties) pending consideration or investigation of an allegation of abuse or serious concern relating to the safety or well-being of individuals. ● Where a volunteer’s fitness to practice is in question, due to any alleged misconduct/lack of capability of a concerning nature, the service provider takes appropriate and timely action. For example this may include: <ul style="list-style-type: none"> ○ providing additional training and supervision; ○ informally applying the disciplinary process to the volunteer where appropriate. ○ referral to the Disclosure and Barring Service or police, where appropriate. ● Service providers ensure staff are aware of and understand the disciplinary procedures and any grievance procedures. ● A written report of any disciplinary investigations and action taken is kept on the employee’s file in line with employment and data protection legislation.
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1.6 Requirements on service providers as to premises (Part 7)

The intent of Part 7 of the Regulations set out the requirements for service providers to ensure that the service is provided in a location and environment suitable for the operation of the service.

Regulations 26	Code
<p data-bbox="136 437 533 475">Overarching requirement</p> <p data-bbox="136 512 1115 619">26. The service provider must ensure that the premises are suitable for the service, having regard to the statement of purpose for the service.</p>	<ul data-bbox="1122 437 2101 512" style="list-style-type: none"><li data-bbox="1122 437 2101 512">• The location, design and size of the premises are suitable for the service described in the statement of purpose.
Regulation 27	Code
<p data-bbox="136 753 495 791">Adequacy of premises</p> <p data-bbox="136 828 1115 975">27. The service provider must ensure that the premises used for the operation of the service have adequate facilities for— (a) the supervision of staff; (b) the secure storage of records.</p>	<ul data-bbox="1122 753 2101 975" style="list-style-type: none"><li data-bbox="1122 753 2101 863">• Service providers have a suitable space within the premises, such as a shared meeting room, to provide privacy for the supervision of staff.<li data-bbox="1122 900 2101 975">• Records are stored securely in line with legislative requirements.

1.7 Other requirements on service providers (Part 8)

The intent of Part 8 of the Regulations is to ensure that individuals are protected by a service that works proactively to secure their support and protect their rights by:

- maintaining accurate records which are available to them and their representatives;
- communicating with the relevant regulatory bodies and statutory agencies where there are concerns and significant events affecting individuals;
- ensuring an open and transparent service by promoting an accessible complaints policy and procedure;
- supporting staff to raise concerns about the service through whistleblowing procedures; and
- being able to demonstrate learning from concerns and complaints to improve the service.

Regulation 28	Code
<p>Records</p> <p>28.—(1) The service provider must keep and maintain the records specified in Part 1 of Schedule 3.</p> <p>(2) The service provider must—</p> <ul style="list-style-type: none"> (a) ensure that records specified in Part 1 of Schedule 3 are accurate and up to date; (b) keep the records securely; (c) make suitable arrangements for the records to continue to be kept securely in the event the service closes; (d) make the records available to the service regulator on request; (e) where an adoption order has been made in relation to a child, retain records relating to the child and the child’s adopter for at least 100 years from the date of the adoption order; (f) where adoption support services are provided to an individual, retain records relating to the individual for at 	<ul style="list-style-type: none"> • There is a policy and procedure for the recording and management of records. This includes, but is not limited to: <ul style="list-style-type: none"> ○ the purpose, format, confidentiality and contents of files, including secure storage and access to case files in line with regulations ○ arrangements for authorising access to the adoption case records, and for authorising the disclosure of adoption information; ○ the circumstances where it might wish to make records or information available, both within and outside the adoption service, for the purposes of its functions as an adoption service; ○ how staff should deal with requests for such access or disclosure and who is empowered to authorise them; ○ the requirement that before the service provider may make case records or information available, a written agreement must be obtained from the person to whom the service

- least 100 years from the date of the last entry;
- (g) in a case which does not fall within sub-paragraph (e) or (f) retain—
- (i) records relating to adults for 3 years from the date of the last entry;
 - (ii) records relating to children for 15 years from the date of the last entry;
- (h) ensure that individuals who use the service—
- (i) can have access to their records; and
 - (ii) are made aware they can access their records.

provider wishes to disclose the case records or information that they will keep them confidential. This requirement does not cover the child or adopter but does cover anyone else within or outside the local authority, i.e. the local authority's own members and employees, and members of its adoption panel.

- Staff are aware of the policy and have a clear understanding of the procedures for recording and managing records. This includes training in information security and action to be taken where personal information is compromised.
- Service providers maintain all the records required for the protection of individuals and the effective running of the service as specified by Schedule 3 of the Regulations.
- All records are secure, up to date and in good order. They are prepared, maintained and used in accordance with the data protection legislation and other statutory requirements and are kept for the required length of time as set out in regulation 28(2)(e) to (g).
- Records are stored securely including electronic records which are password protected.
- Individuals and staff are given access to any records and information about them held by service providers in accordance with current legal requirements.
- The service provider provides all relevant information from its case files, in a timely way, to other regulated adoption services and local authority adoption services with whom it is working to effect the provision of care and support for a child.

Regulation 29	Code
<p>Notifications</p> <p>29.—(1) The service provider must notify the service regulator of the events specified in paragraphs 1 and 2 of Schedule 4. (2) The service provider must notify the local authority for the area in which the child is placed for adoption of the event specified in paragraph 1 of Schedule 4. (3) The notifications required by paragraphs (1) and (2) of this regulation must include details of the event. (4) Unless otherwise stated, notifications must be made without delay and in writing. (5) Notifications must be made in such manner and in such form as may be required by the service regulator.</p>	<ul style="list-style-type: none"> • The service provider has suitable arrangements in place to notify the service regulator and the local authority for the area where the child is placed for adoption of events specified in Schedule 4 of the Regulations. • Notifications are made without delay, usually within 24 hours of the event occurring.
Regulation 30	Code
<p>Conflicts of interest</p> <p>30. The service provider must have effective arrangements in place to identify, record and manage potential conflicts of interest.</p>	<ul style="list-style-type: none"> • Service providers maintain appropriate systems and take all reasonable steps to make sure actual or perceived conflicts of interests are identified, prevented and recorded in an open way.
Regulation 31	Code
<p>Complaints policy and procedure</p> <p>31.—(1) The service provider must have a complaints policy in place and ensure that the service is operated in accordance with that policy. (2) The service provider must have effective arrangements in place for dealing with complaints including arrangements for— (a) identifying and investigating complaints; (b) giving an appropriate response to a person who makes a complaint, if it is reasonably practicable to contact that</p>	<ul style="list-style-type: none"> • Service providers have an accessible complaints policy which includes an informal resolution stage and explains – <ul style="list-style-type: none"> ○ who can make a complaint and in relation to what ○ who to approach to discuss a concern/complaint ○ how individuals can be assisted to make a complaint ○ information about accessing independent advocacy, where available ○ how complaints will be dealt with ○ the stages and timescales for the process

<p>person;</p> <p>(c) ensuring that appropriate action is taken following an investigation; and</p> <p>(d) keeping records relating to the matters in sub-paragraphs (a) to (c).</p> <p>(3) The service provider must provide a summary of complaints, responses and any subsequent action taken to the service regulator within 28 days of being requested to do so.</p> <p>(4) The service provider must—</p> <p>(a) analyse information relating to complaints and concerns; and</p> <p>(b) having regard to that analysis, identify any areas for improvement.</p>	<ul style="list-style-type: none"> ○ how to escalate a concern/complaint to the placing authority or area authority, the Children’s Commissioner for Wales, and/or the Public Service Ombudsman for Wales. • The policy and procedures are in an easy to read format, well publicised, readily available and accessible to individuals using the service, their families, significant others, visitors, staff and others working at the service. • Information about other avenues for complaint is included to assist complainants if they are not satisfied with the service provider’s action. For example, information about the complaints procedure of the placing agency or area authority, the Children’s Commissioner for Wales and/or the Public Services Ombudsman for Wales. • Individuals are able to make their complaint in writing or verbally to staff and these should be acknowledged unless complaints are made anonymously. • Staff are aware of the complaints policy and understand how to respond appropriately to complaints. • Service providers ensure any representation or complaint is acknowledged, addressed promptly and the complainant is kept informed of progress. • A written report is provided to the complainant setting out the outcome of the complaint and any action to be taken. • Consent should be gained (where practicable) to the disclosure of the details of a complaint where necessary to enable an effective investigation to take place, and confidentiality maintained during the complaints process unless there are
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professional or statutory obligations which would not make this possible, such as those in relation to safeguarding.

- Individuals do not suffer discrimination, disadvantage, or the withdrawal or reduction of a service as a result of making representations or complaints.
- Systems are in place to make sure that all complaints are investigated in accordance with the timescales set out in the service provider's complaints policy. This includes the following:
 - undertaking a review to establish the level of investigation and immediate action required, including referral to appropriate authorities for investigation. This may include the service regulator or local authority safeguarding teams.
 - where areas for improvement or service failures are identified, acting upon these immediately.
- Staff and others involved in the investigation of complaints have the right level of knowledge and skill to do this. They understand the service provider's complaints process and are knowledgeable about any current related guidance.
- Records of complaints are maintained and monitored to identify trends and areas of risk which may require pre-emptive action.
- Actions taken in response to complaints are reported on as part of the governance arrangements for the service.

Regulation 32	Code
<p>Whistleblowing</p> <p>32.—(1) The service provider must have arrangements in place to ensure that all persons working at the service (including any person allowed to work as a volunteer) are able to raise concerns about matters that may adversely affect the health, safety or well-being of persons for whom the service is provided.</p> <p>(2) These arrangements must include—</p> <p>(a) having a whistleblowing policy in place and acting in accordance with that policy; and</p> <p>(b) establishing arrangements to enable and support people working at the service to raise such concerns.</p> <p>(3) The service provider must ensure that the arrangements required under this regulation are operated effectively.</p> <p>(4) When a concern is raised, the service provider must ensure that—</p> <p>(a) the concern is investigated,</p> <p>(b) appropriate steps are taken following an investigation, and</p> <p>(c) a record is kept relating to the matters in sub-paragraphs (a) and (b).</p>	<ul style="list-style-type: none"> • There is a whistleblowing policy in place. This includes: <ul style="list-style-type: none"> ○ the procedure for raising a concern; ○ the safeguards in place for staff who raise a concern; and ○ how concerns will be investigated. • Staff are aware of, and have had training in, how to raise concerns and there are mechanisms and support available to enable them to do this. • Consent should be gained (where practicable) to the disclosure of the details of a concern where necessary to enable an effective investigation to take place and confidentiality maintained during the investigation process unless there are professional or statutory obligations which would not make this possible, such as those in relation to safeguarding. • Individuals using the service do not suffer discrimination or disadvantage as a result of making their concerns known. • All allegations and incidents of abuse are followed up promptly in line with the service provider’s safeguarding policy and procedures and local safeguarding arrangements. • Systems are in place to make sure that all concerns are considered without delay in line with the service provider’s safeguarding policy and procedures. This includes: <ul style="list-style-type: none"> ○ undertaking a review to establish the level of investigation and immediate action required, including referral to appropriate authorities for investigation. This may include seeking advice from the service regulator or

	<p>local authority safeguarding staff.</p> <ul style="list-style-type: none">○ where areas for improvement or service failures are identified, acting upon these without delay.○ ensuring staff and others involved in the investigation of concerns have the right level of knowledge and skill. They should understand the processes relating to safeguarding and responding to concerns. <ul style="list-style-type: none">● Records of concerns are maintained and monitored to identify trends and areas of risk which may require action. Actions taken as a response to whistleblowing are subject to reporting within governance arrangements.
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Chapter 2: Requirements on managers (Parts 9 to 12)

Parts 9 to 12 of the Regulations describe the responsibilities which must be carried out by the manager appointed by the service provider to be responsible for the management of the service.

These include responsibilities relating to:

- the oversight of the adequacy of resources;
- making reports to the service provider;
- ensuring that there are systems in place to record incidents and complaints and for the keeping of records
- ensuring that policies and procedures are kept up to date.

The manager must put suitable arrangements in place for engaging with individuals and staff, and is responsible for arranging quality of service reviews.

2.1 Requirements on managers for ensuring effective oversight of the service (Part 9)

Regulation 33	Code
<p>Oversight of adequacy of resources</p> <p>33.—(1) The manager must report to the service provider on the adequacy of the resources available to provide the service in accordance with the requirements of these Regulations. (2) Such reports must be made on a quarterly basis.</p>	<ul style="list-style-type: none">• The manager has systems and processes in place that provide information about the local authority adoption service and any areas that may need closer observation/consideration and/or improvement. This includes, but is not limited to:<ul style="list-style-type: none">○ staff turnover;○ staff sickness levels;○ complaints;○ safeguarding issues;○ inspection reports by the service regulator,○ inspection outcomes and/or reports from Health and Safety Executive (HSE) and fire service.

	<ul style="list-style-type: none"> • The manager has suitable arrangements in place to alert the head of service and other relevant senior officers (of the local authority) immediately where the service is: <ul style="list-style-type: none"> ○ not complying with policies and procedures; ○ failing or unable to meet or address issues raised in inspection reports; and ○ providing a service not included in the statement of purpose.
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Regulation 34	Code
<p>Other reports to the service provider</p> <p>34. The manager must, without delay, report to the service provider—</p> <ul style="list-style-type: none"> (a) any concerns about the provision of the service, (b) any significant changes to the way the service is managed or provided, and (c) any concerns that the service is not being provided in accordance with the statement of purpose for the service. 	<ul style="list-style-type: none"> • The manager ensures suitable arrangements are in place to report to the service provider in line with the requirements of regulations 34 and 39(4). • The manager has a system in place to submit reports to the service provider that accurately reflect overall service quality and performance. This includes arrangements for the manager to feed back and communicate any urgent matters requiring immediate action. This includes, but is not limited to: <ul style="list-style-type: none"> ○ sudden or unexplained death of individuals using the service; ○ natural disaster; ○ financial irregularities; ○ significant concerns raised by the service regulator or another local authority; and ○ any event which affects staff availability.

Regulation 35	Code
<p>Engagement with individuals and others</p> <p>35.—(1) The manager must put suitable arrangements in place for obtaining the views of—</p> <ul style="list-style-type: none"> (a) individuals; (b) any representatives of those individuals; (c) staff employed at the service; and (d) any other local authority or local authority in England, <p>on the quality of support provided and how this can be improved.</p> <p>(2) The manager must report on the views obtained so that these views can be taken into account by the service provider when making any decisions on plans for improvement of the quality of support provided by the service.</p>	<ul style="list-style-type: none"> • The manager has suitable arrangements in place to enable feedback on all aspects of service provision and ensure that these arrangements are accessible to, and take into account the views of, all those listed under regulation 35(1). • The manager ensures the methods used to engage with and gain the views of individuals using the service are appropriate to their age, level of understanding and take into account any specific condition or communication need. • The manager has positive relationships with, and is accessible to, people outside the service. This includes but is not limited to: <ul style="list-style-type: none"> ○ families or nominated representatives; ○ any other local authority or local authority in England. ○ regulators; ○ professional bodies.

2.2 Requirements on managers for ensuring the compliance of the service (Part 10)

Regulation 36	Code
<p>Duty to ensure there are systems in place to record incidents and complaints</p> <p>36. The manager must ensure that there are effective systems in place to record incidents, complaints and matters on which notifications must be made in accordance with regulation 29.</p>	<ul style="list-style-type: none"> • The manager ensures there are suitable arrangements in place for the recording of the matters set out in regulation 29. • The manager has systems and processes in place to ensure that any records made are legible, accurate and kept securely.
Regulation 37	Code
<p>Duty to ensure there are systems in place for keeping of records</p> <p>37. The manager must ensure that there are effective systems in place in relation to the records, which include systems for ensuring the accuracy and completeness of records which must be kept in accordance with regulation 28.</p>	<ul style="list-style-type: none"> • Where records are stored electronically, they are secure and staff have individual access codes which provide a clear audit trail which shows who has made entries and amendments.
Regulation 38	Code
<p>Duty to ensure policies and procedures are up to date</p> <p>38. The manager must put suitable arrangements in place to ensure that the service provider's policies and procedures are kept up to date, having regard to the statement of purpose for the service.</p>	<ul style="list-style-type: none"> • The manager ensures suitable arrangements are in place to review policies and procedures in line with regulation 10. • The manager ensures suitable arrangements are in place to ensure staff have access to, and knowledge and understanding of, the policies and procedures which support them in their role in achieving the best possible outcomes for individuals.

2.3 Requirements on managers for monitoring, reviewing and improving the quality of the service (Part 11)

Regulation 39	Code
<p>Quality of service review</p> <p>39.—(1) The manager must put suitable arrangements in place to establish and maintain a system for monitoring, reviewing and improving the quality of the service.</p> <p>(2) The system established under paragraph (1) must make provision for the quality of the service to be reviewed as often as required but at least every 6 months.</p> <p>(3) As part of any review undertaken, the manager must make arrangements for—</p> <p>(a) considering the outcome of the engagement with individuals and others, as required by regulation 35 (engagement with individuals and others);</p> <p>(b) analysing the aggregated data on incidents, notifiable incidents, safeguarding matters, whistleblowing, concerns and complaints;</p> <p>(c) reviewing any action taken in relation to complaints;</p> <p>(d) considering the outcome of any audit of the accuracy and completeness of records.</p> <p>(4) On completion of a review of the quality of service in accordance with this regulation, the manager must prepare a report to the service provider which must include—</p> <p>(a) an assessment of the standard of support provided; and</p> <p>(b) recommendations for the improvement of the service.</p>	<ul style="list-style-type: none"> • The manager has suitable arrangements in place to assess, monitor and improve the quality and safety of the service. This includes, but is not limited to: <ul style="list-style-type: none"> ○ the collation and analysis of feedback from those listed under regulation 35(1); ○ issues and lessons learned in the analysis of complaints and safeguarding matters; ○ patterns and trends identified through the analysis of notifications, safeguarding matters, whistleblowing concerns and complaints; ○ the outcome of any inspection reports from regulators; ○ audits of records. • The manager ensures that the audit systems and processes for monitoring and reviewing the service give assurance that a high quality service is provided. • The manager has suitable arrangements in place to ensure systems and processes are continually reviewed to enable the manager to identify where the quality and/or safety of services is being, or may be, compromised, and to respond appropriately without delay. • The manager has suitable arrangements in place to ensure all feedback is listened to, recorded and responded to as appropriate. • The manager has suitable arrangements in place to ensure

	<p>areas of learning from complaints, safeguarding and whistleblowing are shared with staff to improve the service and encourage safe, compassionate support practices.</p> <ul style="list-style-type: none"> • The manager ensures information is analysed and that recommendations are made to the service provider as to how and where the quality and safety of the service can be improved.
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2.4 Other requirements on managers (Part 12)

Regulation 40	Code
<p>Support for raising concerns</p> <p>40. The manager must ensure that the service provider’s whistleblowing policy is being complied with and that the arrangements to enable and support people working at the service to raise such concerns are being operated effectively.</p>	<ul style="list-style-type: none"> • The manager ensures suitable arrangements are in place for: <ul style="list-style-type: none"> ○ staff and individuals to be aware of and understand the whistleblowing policy; ○ staff to understand there is zero tolerance for poor service delivery or lack of concern for the well-being of individuals and that they are encouraged and supported to report issues; and ○ ensuring staff and individuals understand that concerns are welcomed and sought out, not ignored.

Regulation 41
<p>Duty of candour</p> <p>41. The manager must act in an open and transparent way with—</p> <ol style="list-style-type: none"> (a) individuals; and (b) any representatives of those individuals.

Chapter 3: Other requirements on service providers and miscellaneous amendment (Parts 13 and 14)

Regulation 42	Code
<p>Prospective and approved adopters</p> <p>42. The service provider must—</p> <ul style="list-style-type: none"> (a) have written plans on its strategy to recruit sufficient number of adopters; (b) have comprehensive plans for preparation and approval processes for adopters contained within its policies and procedures; (c) provide prospective adopters with written information about the adoption process including information about— <ul style="list-style-type: none"> (i) the policy and procedures in respect of the adoption process; (ii) arrangements for the assessment of and the provision of adoption support services; (iii) the Adoption Register for Wales and any other relevant national adoption register; (iv) local and regional arrangements; (d) provide assistance where disruption of a placement has occurred or is in danger of occurring, which includes the use of mediation and meetings. 	<ul style="list-style-type: none"> • Service providers have written plans for the implementation and evaluation of effective strategies to recruit sufficient adopters to meet the needs of the range of children waiting for adoption locally. • Service providers have clear written information about the matching, introduction and placement process, as well as any support to facilitate this that prospective or approved adopters may need. • Service providers make available the written eligibility criteria, information on becoming an adoptive parent and what is expected of adopters. • Service providers have arrangements in place for when the placement or adoption is disrupted and provide support for those affected.