

KING EDWARD'S HOSPITAL FUND FOR LONDON
King's Fund Centre

ADOPTION PRACTICES, POLICIES AND PROCEDURES

A report of a discussion day held at the King's Fund Centre on 4 July 1980,
under the auspices of
Parents for Children and The King's Fund Centre

King's Fund Centre,
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Adoption Practices, Policies and Procedures

After nearly four years of work in trying to find permanent families for older and handicapped children, Parents for Children staff thought it might be useful to organise a day at which some of the many variations in adoption practices, policies and procedures could be discussed among social workers in the field. Therefore under the auspices of Parents for Children and the King's Fund Centre a study day was held at the King's Fund Centre on 4 July 1980.

All forty of the local authorities in the area covered by Parents for Children were circulated, as well as voluntary agencies, and twenty-one departments or agencies sent representatives, plus two people from the Adoption Resource Exchange.

The wide range of possible topics had to be reduced to a manageable form, and a formula was devised to do this. In the morning the discussion took place under the heading 'The Local Authority as Parent', and in the afternoon under 'Roles, Rules and Relationships'. After a brief plenary session participants divided up into four groups of about thirteen people to facilitate discussion, and each focussed on the same topic. Parents for Children staff had prepared a 'vignette' to form the basis of discussion, with questions, and the points made by each group were outlined in a final plenary session.

The report is an attempt to summarize the discussions and collate some of the many points made, since the topics were ones of wide general interest, and of concern to all in the field.

INTRODUCTION

The Local Authority as Parent

Phillida Sawbridge, as Director of Parents for Children, introduced the day, explaining the thinking behind it, and outlining the topics for discussion. In looking at the local authority as a parent, she said that most of the difficulties in placing children in care in substitute families probably stem from the fact that there are three parental parties involved; the natural parents, the new parents, and the local authority, which is inevitably a corporate parent.

For this discussion day's purpose, the focus was on how a corporate parent works. Social workers spent a lot of time working with and identifying the characteristics of natural and substitute parents; very little time is spent on analysing how a corporate parent really works, and who carries which bits of responsibility.

It was important, Phillida said, to look at what parents actually do: they not only nurture, but look after health, including conferring with and taking the child to doctors and dentists; they arrange schooling, see reports and maybe help with homework; they pay for necessities and teach the child to handle pocket-money; they arrange holidays and authorize school outings, discuss the child's future and hold together his past, negotiate or sanction every outside contact, whether with play-groups, friends, Brownies, sports clubs, relatives. How many different people must be involved for the local authority to cover all these activities? How can some of it not fall between all the stools? Many of these functions are theoretically at least embodied in, or represented by, the social worker, but there are dangers in the child seeing the social worker as the parent, because social workers come and go, and that is in any case not where the power lies. Or is it?

There are also dangers in social workers seeing themselves as the parent, as it is often tempting to do. What is the most frequent pattern of visiting they can hope for? Monthly? Even weekly? Can one be a parent once a month?

Perhaps it is the residential social worker who really is the parent? But can he or she allow the child to go home to tea with new school-friends? Or to stay away overnight? Or arrange for him to go to camp - or see a specialist - or spend money on a bicycle? Usually not. So what kind of parent is that?

These were all questions it was necessary to bear in mind in discussing how plans and decisions are made for the child, and how those relate to the kinds of plans and decisions natural parents make.

The following background story and questions were then given to each participant:

The Local Authority as Parent

'MARY'

Mary is a legitimate Down's syndrome baby of three months, with a heart defect which will require surgery in due course. She was received into care under Section 1 of the 1948 Children's Act soon after birth when her mother felt totally unable to care for her or accept her handicap. Her father visits Mary occasionally in the foster home, but goes along with the decision to place her for adoption, recognising that his wife will never accept her, and that the tension she has caused between them is affecting their other children.

Questions for the groups:

1. When, why and how would it become appropriate for the local authority to assume parental rights under Section 2 of the Children's Act?
2. Is there more than one client, and if so how many social workers should be involved or allocated?
3. Assuming a Section 2 resolution is taken, what would this mean in relation to decisions about -
 - (a) publicity for finding adopters
 - (b) giving adopters permission to authorise medical treatment from the time of placement
 - (c) enabling adopters to obtain a passport for the child?
4. How can agency records be kept in a way that will not only meet administrative requirements but also be useful to the child in the future, and to her adoptive parents.

i.e. How does the local authority as a parent hold together the informal parts of a child's history - developmental, educational, medical, cultural and his or her inheritance? Can this task be divided, and if so, who could help do it?

Discussion:

1. There was quite a strong divergence of opinion as to the advantages of assuming parental rights when a natural parent is willing to agree to adoption.

Advantages were seen as follows: (a) security and freedom for the local authority to plan effectively and act quickly on behalf of the child; (b) Security for prospective adopters; (c) relief of burden for natural parents who need not be asked for minor decisions all along the way.

Disadvantages (a) the local authority may be a more difficult 'parent' than the natural ones, decision-making may be fragmented or delayed; (b) natural parents may resent a Section 2 resolution when they are doing all they can to plan responsibly for their child.

Assuming Parental Rights With Parents Agreement

Although the Association of British Adoption and Fostering Agencies 'Guide to Assumption of Parental Rights' suggests that, if parents give their consent, there is no need to spell out the grounds on which the resolution will be passed since the authority will not have to prove its case in court, there was disagreement over this, and the Association of Directors' "Implementation Notes" on the 1975 Childrens Act takes a different view. This states "The willingness of the parents to consent to the resolution does not affect the grounds which must be satisfied. The evidence in such a case must be as strong as that the authority would consider necessary if the parent did not agree and the matter were to be resolved in court". Some parents, who reject their child entirely, are prepared to agree that they "have consistently failed without reasonable cause to discharge the obligations of a parent" and may welcome the opportunity to relinquish their rights and duties as a first step towards final severance. Others may find this a distasteful allegation and be better able to cooperate with the plans for their child if they retain parental status until placement.

What became clear was that Section 2 was often being inappropriately used in the absence of the "freeing for adoption" clause in the 1975 Childrens Act, (Clause 14) and there was an urgent need for this clause to be implemented.

2. There was divergence of opinion as to whether it was more effective to have the same social worker for natural parents, child and also perhaps adoptive parents, although many agreed in principle that the child should be seen as a separate client once the plan was to remove him permanently from his family. The difficulty of identifying fully with the points of view and needs of both the child and the parents was recognised, but so was the problem of communication and agreeing aims and goals if two or three social workers were involved. In addition many participants felt that a second social worker would simply not be available in their departments. Some recommended the allocation of the child to a separate worker when a Section 2 resolution was passed, but it was generally agreed that the flexibility was probably more desirable than a rigid policy on such matters.

One group wanted to create a statutory accountability regarding the legal status of a child in care. It suggested that, if a child remained under Section 1 for more than six months, the social worker should have to make out a case for not proceeding to assume parental rights.

3. There was fairly general agreement that a local authority which has assumed parental rights does not need to go back to the parents for agreement to publicity for the child, medical treatment, or a passport application. Some social workers felt they might nevertheless want to continue involving the parents for their sake.

Regarding medical consents, natural parents sign a consent form on reception into care and for Section 2 children there is no procedural requirement to go back to them, although there may be casework or purely ethical reasons why they should be kept informed and involved in their children's welfare. There are three kinds of treatment for which consent is required:

- i Routine: (innoculations, dental injections etc) for which a copy of the consent form and a verbal report to the social worker should be sufficient.
- ii Emergency: when there is often no time to get consent anyway and the medical professions can assume responsibility for the decision.
- iii Serious planned operations or treatment: A case was made for delegating responsibility to substitute parents because their role as carer could otherwise be undermined, especially in the case of prospective adopters who have had the child a long time. The other case made was that shared caring is a fact of life until an order is made, and should people in a position to relinquish a child hold such power? The situation would in any case be discussed in advance with the social worker. It is very important, if decision making is to be shared, to smooth the way for this so that the right people are readily available.

4. Agency records and child's history

A distinction was drawn between an administrative record of the child's life (important dates, events, legal decisions, etc) and a life-story book (anecdotal memories, photographs, daily happenings).

All groups were in favour of both kinds of records being obligatorily kept. Social services departments would continue to need administrative records, although it was felt that improvements could be made in these e.g. separate records for individual family members, rather than blanketing them all under one; delegating responsibility for the record to one person, rather than splitting it between administrative, field and residential social workers; clearer definition of the purpose of the file and the appropriateness of mixing fact, opinion and internal discussion; etc.

Alongside this there should also be a personal record book opened for each child when he comes into care, to be kept by a named care-taker of the child, and to contain regular entries of happenings, people in the child's life, and minor events usually recalled by parents of the "Remember when.....?" variety. Regular photographs should be a requirement, and the progress of the book should be monitored at the child's statutory review. This book would accompany the child if he moved. A suggestion was made that ANAFA might be asked to produce some guidelines as to contents or possibly a checklist.

Roles, Rules and Relationships

Introducing this topic, Phillida Sawbridge said that it was an even wider-open subject, but so much hinged on it. How do social workers and other interested parties work together? There were only four social workers at Parents for Children and communication was fairly difficult - how do people manage in vast Departments.....with other agencies.....?

Who holds power? Is it always the person who nominally has it? What happens if people have power without knowledge? Or power by influence but not explicitly?

The placements being made nowadays were so complicated. When, as one department reported, a placement concerns an eleven-year old child with brain damage or thirteen and fourteen year olds who have been moved several times, or children with spina bifida, or family groups of two, three or four, so many people are involved in their lives. How do we handle and coordinate all those relationships? Whose opinions matter? Who has the power or the right to decide?

The effects of not knowing the answer to all these questions are what all of us in this work struggle with every day. The chance to discuss them and share some solutions was what this day was all about.

'JOHN'

John is nine years old, living in a children's home and attending a boarding-school for maladjusted children. At a six-monthly review his social worker, who will be leaving the department in three months time, raises the issue of seeking an adoptive home for him, since he has no family contacts. She has consulted the Adoption and Fostering Officer, who is not present at the review, but who strongly favours the idea and believes John could be placed. The social worker's senior is dubious, but is more concerned that John cannot be re-allocated to a social worker until new staff are appointed in at least six months time. The psychologist who is present opposes the idea of adoption for John. The residential staff are divided in their view, and the opinion of the school is not known and nobody is present to represent them. The recommendation is made to refer John to a specialist agency for placement.

Questions for the group:

If you were setting up a review for John at this point:

1. Who should be present and why?
2. Who should invite those people?
3. Who has executive power?
4. Who has what responsibility?
5. Who is there to offer advice and/or opinion?

6. Should there be a size limit?
7. Can decision-making and opinion-giving be combined in the one meeting?
8. How do you establish what the relevant roles are, and are they implicit or explicit?
9. What steps need to be taken afterwards to implement the decisions made?
10. How do you carry out a decision when it is unpopular among people with the capacity to undermine it?

Discussion

It was clear that there is considerable divergence of views in Social Services Departments about the real purpose of reviews, and about where decision-making power lie. Two or three departments were known to be analysing their review system and making recommendations for improvement. However, it was generally agreed that the six-monthly review ought to be more than a paper exercise between a social worker and a senior, and that careful preparation was needed.

The following questions were felt to be crucial: "Is this a meeting to summarise progress over the past six months? Can it also make decisions about the future, or only recommendations? If the latter, who will make and who will carry out the decisions?"

The following points were also all stressed by more than one group:

1. There should be a clear policy about who should normally be invited to a child's review, rather than leaving it to the whim, personality or dedication of the social worker (or clerk) arranging the meeting.
2. Advance work bears fruit, in terms of personal discussions with individuals who may or may not be able to attend, and written reports from all the latter. One authority requires a form to be completed by all interested parties, including the child.
3. Two separate meetings may be effective - one large one to gather opinion, the second involving on those with power to make decisions once all the opinions have been heard. Against this is the known fact that decisions can be undermined if the people responsible for implementing them do not feel involved in making them. One group suggested there should be a clear procedure for appeal by care staff if they felt their views had not been sufficiently taken into account. Another group stressed the importance of remembering that, when a group of people is not used to working together, time is needed before the defences are lowered. Brisk decision-making comes after working through feelings.

4. Reviews should be chaired by a senior person independent of those with regular responsibility for the case. Decisions should be summarised, tasks allocated and time limits set, and the line of accountability must be made clear, so that a second review cannot be reached with no action taken on the decisions made at the first.
5. The adoption and fostering specialist's role varies from department to department but it was generally felt to be a post with more influence than power. Every group felt a specialist should be represented at all reviews as a matter of policy, although it was acknowledged that some area officers might unfoundedly consider this a reflection on their professional competence. The continuity and evenness of policy which result from this automatic attendance are ample justification.
6. Involving children in their own reviews was not felt to be something there could be a general policy about, as the advisability varied from child to child and with circumstances. What was felt to be important was involving children in plans and decisions before putting these into effect, whether or not the child attends all or part of the review.
7. Implementing decisions was recognised as being every bit as critical as making them. It was suggested that people hesitant about a decision needed to be positively involved in the next stage. A good case-discussion often helped change people's views. Outside professionals could be helped to understand the work and policies of the department or agency better by being asked to come and speak about their own work, either to staff or to foster-parent groups. For example regular internal discussions (such as one department's fortnightly lunch-meeting between residential and field workers) can help allay worries about family placement, and promote better trust.

There was concern about the way decisions can get blocked by covert sabotage or apathy or even reversed by a new social worker without reference to the group which made them. This was felt to be less likely where a specialist worker or team was involved in both the decision and the implementation, and where accountability and supervision were clearly defined.

Final Session

Joan Cooper, Chairman of Parents for Children's Executive Committee, then commented on the discussions. She said it had been a 'questing day which it would be impossible to sum up'. The theme of power had been much talked about, not suprisingly since it was hard to know where power lay in this work, when so much of it involved generic and specialist workers, statutory and voluntary agencies. Standing in the way of securing what we want for children were all kinds of bureaucratic structures, ambitions, cultural differences, rivalries between field and residential workers, professionals and non-professionals, natural and foster-parents. Corporate responsibility had to be married to caring, personal relationships with individual children. Who could link the two, who linked the anxiety and the caring, the professional and non-professional responsibilities?

Miss Cooper commented that there had clearly been strong feelings around about the need for safeguards against the quixotic changing of social work opinion. She felt that reviews could help modify attitudes and broaden understanding of other view points, but could not produce consensus, so that mechanisms must be devised to ensure that decisions could be implemented without sabotage.

A day like this did not solve problems, Miss Cooper said, but it did help expose them. It also highlighted another question: "Can corporate bodies take risks," Perhaps a body like Parents for Children was where the risks were put? This could lead to a divisive system which might not be desirable. Certainly Parents for Children itself was not claiming to be the recipient for all the risks. As a small, sometimes rather lonely, agency it was willing to take risks, but wanting to share both risks and responsibilities with the corporate bodies. That sharing was what the day had been all about.



Appendix

In the planning for the day, one suggested topic had been "what makes a successful placement for a child?". One London Borough's Fostering and Adoption unit discussed this, and drew up the following list, not in any order of importance.

1. Children initially being chosen by the adopters
eg at adoption parties, through PPIAS Newsletters.
2. Chemistry
3. Each had need of the other
4. Sense of humour
5. Adopters have no rigid expectations
6. Child is accepted for what he is.
7. Openness, honesty all round.
8. Social worker knowing child well and
preparing him well.
9. Stickability.
10. Ability to work at relationships.
11. Ability to set limits.
12. Adults able to be themselves.
13. Adults without high expectations of themselves.
14. Adults have show ability to come to terms with
pain/difficulties.
15. Committment and support of social worker.
16. Planning meetings of professionals concerned.