

Inspection Report

North Wales Regional Adoption Collaborative

This document is also available in Welsh.
Mae'r ddogfen hon hefyd ar gael yn Cymraeg.

1. Introduction

- 1.1 Care Inspectorate Wales (CIW) inspected North Wales Adoption Collaborative (NWAS)¹ between 13 and 17 October 2025.
- 1.2 Care Inspectorate Wales reviews local authority social services functions, including functions in relation to adoption, on behalf of Welsh Ministers in accordance with Section 149B of the Social Services and Well-being (Wales) Act 2014.
- 1.3 The Adoption and Children Act 2002 (Joint Adoption Arrangements) (Wales) Directions 2015 places statutory duties on local authorities to work collaboratively with each other. The primary purpose of these directions is to ensure that effective joint arrangements are in place between local authorities, to ensure consistent and effective adoption services across Wales. Regional Adoption Services form part of a three-tier structure to provide the National Adoption Service (NAS).
- 1.4 The NWAS Regional Adoption Collaborative comprises of the following local authorities; Wrexham, Flintshire, Denbighshire, Conwy, Gwynedd, and Isle of Anglesey (Ynys Môn). Wrexham County Borough Council is the host local authority for this region.
- 1.5 The focus of the inspection was on how the service promotes the well-being and safety of children through the provision of permanency with adoptive families, who can safely meet their needs and improve the likelihood of them achieving the best possible outcomes. We evaluated the leadership and governance arrangements that support service delivery, and how effective it is in achieving quality outcomes for children.
- 1.6 We considered the following key questions under relevant headings;

Well-being

- Are children's well-being needs appropriately safeguarded in achieving permanence?
- Is the service provided accessible, safe and responsive to people's needs?

¹ The North Wales Regional Adoption Collaborative refers to itself as NWAS. This term will therefore also be used throughout the report.

Care and Support

- Do children, birth and adoptive families achieve good outcomes through the provision of support which promotes their overall well-being?

Leadership and governance

- Do the leadership and governance arrangements ensure the provision of high-quality services for people?

1.7 Glossary of Terminology and Quantity Definitions See Appendix 2 and 3.

2. Summary of inspection findings

- 2.1 NWAS applies National Adoption Service (NAS) policies and guidance, but these are not yet embedded across the service. The Statement of Purpose is reviewed annually and accessible but not routinely shared with CIW, individuals and representatives after revisions.
- 2.2 Assessment and approval processes for adopters are thorough and address safeguarding and risk management. However, depth of analysis and integration of therapeutic parenting approaches is inconsistent.
- 2.3 Adoption support services are valued, but access and quality are variable, with waiting lists affecting some families. Adoption support plans often reflect children's needs at the point of adoption and are regularly reviewed, but do not consistently consider future and evolving needs.
- 2.4 The time children wait for adoptive placements varies. NWAS has a marketing strategy for 2025, but the shortage of adopters, particularly Welsh-speaking adopters and adopters able to support siblings and children with additional needs, remains a challenge. Further alignment of NWAS marketing strategy with NAS's strategy and increased strategic focus could improve service delivery.
- 2.5 Family finding and matching processes prioritise children's needs, with collaborative planning supporting positive outcomes. Most Child's Adoption Report and Annex B documents (CARB) are of good quality and child focused. However, delays in updates and missing documents in electronic records hinder family finding and can delay placements.

- 2.6 The service demonstrates a commitment to the Welsh language and accessibility, with information and support routinely available in Welsh and English.
- 2.7 Panel arrangements are good, with diverse expertise, but there is variation in operation between the three panels and a need to further diversify membership.
- 2.8 NWAS has limited quality assurance measures, the frequency and consistency of audits are unclear, and Quality of Service reviews are not consistently informed by quality assurance processes.
- 2.9 CHARMS is a good quality electronic case management system that supports NWAS to manage adoption information bilingually, securely and efficiently. However, NWAS has not fully utilised the system's functionality. There is no NWAS-specific records management policy, and the service is currently unable to identify where all adoption records are stored, which must be addressed as a matter of urgency.
- 2.10 The Regional Management Board is supported by a signed partnership agreement but lacks sufficient representation from senior leaders with sufficient decision-making authority from all local authorities and key partners. This leads to delays in decision-making and limits the board's ability to provide effective strategic oversight.
- 2.11 The service has a dedicated and skilled workforce of practitioners who value their line managers and feel supported, but the reflective nature of supervision is not consistently recorded. The configuration and sufficiency of management, impact the service's ability to progress work efficiently and provide consistent strategic direction.

3. Findings



Well-being

- 3.1 The Statement of Purpose (SOP) is reviewed annually and is accessible, but inconsistent understanding and sharing among practitioners, partners, panel members, and stakeholders means not all are aligned with the service's vision and statutory duties. This can lead to confusion, inconsistent practice, and missed opportunities to deliver high-quality, compliant services. **NWAS must ensure the Statement of Purpose is reviewed annually and must notify**

CIW, individuals and representatives of any revisions in accordance with the Local Authority Adoption Services (Wales) Regulations 2019.

- 3.2 NWAS provides accessible and timely information to prospective adopters, with established processes for managing initial enquiries. NWAS has an inclusive ethos, encouraging applications from a broad range of people. Materials for birth parents, adoption support, and intermediary services are not always complete, easy to find or available in a range of formats. **NWAS should ensure information is developed and provided in different formats, such as easy-read and digital, so that all people can access the support they need.**
- 3.3 Assessments of prospective adopters by NWAS are thorough, address safeguarding, and include detailed analysis of applicants' backgrounds, motivations, and support networks. Many adopters responding to surveys report feeling respected and supported by social workers, with information provided in a timely and accessible way. NWAS provides comprehensive training and preparation for adopters, including bilingual resources. Most adopters surveyed feel supported to understand the potential impact of adverse childhood experiences. However, assessments do not always demonstrate sufficient analytical depth or a consistent focus on therapeutic parenting, including reflection on how prospective adopters will apply their learning. **NWAS should embed the recently published NAS Adoption Qualities and Skills Framework² within its assessment practice to ensure a consistent, evidence-based approach.**
- 3.4 Some adopters experience significant delays progressing their assessments, sometimes over six months, due to limited availability of practitioners or administrative processes. The latter include delays in obtaining medical information or reports, which are required before assessments or matching can proceed. Whilst we acknowledge that this is outside of NWAS control to an extent, the service should explore opportunities to reduce delays with strategic partners. One adopter also raised concerns about transparency in decision-making, particularly regarding changes in matching criteria. **NWAS must strengthen consistency in timeliness, communication, and transparency during the assessment to ensure all prospective adopters experience a fair and efficient process.**
- 3.5 The service demonstrates a strong commitment to the Welsh language. Practitioners promote the active offer in line with the 'More Than Just Words' framework, ensuring people can access services in Welsh. NWAS also supports people to use their preferred language, providing translation support where needed, including for languages other than Welsh. Adopters confirm they

² [NAS Adoption Qualities and Skills Framework](#)

receive information in their language of choice, and marketing materials are produced bilingually. People can attend a Welsh language panel, and the service takes steps to ensure everyone can communicate and participate fully, regardless of their language needs.

- 3.6 Positive feedback was received about individual relationships between children, people, and workers through interviews. Adoption panels include a question from an adopted child, serving as an example of how children's views are actively sought and responded to in the decision-making process, **this is good practice**. Additionally, Child Looked After (CLA) review minutes are written to the child, **which is good practice**. However, there is limited evidence of a systematic approach to advocacy. While advocacy is sometimes offered or referenced this is not consistent; the child's voice is not always present in planning and review. Advocacy is not routinely used to support participation. **NWAS must develop clear mechanisms for promoting advocacy and regularly evaluate their effectiveness, to ensure every child's voice is heard and acted upon in assessment planning and review processes.**
- 3.7 NWAS advised there have been no formal complaints during the inspection period. It is positive most people know how to raise concerns or make complaints about the service; however, a minority of survey respondents feel the complaints process is unclear. **NWAS must ensure that all families are fully informed about the support available to them and their rights throughout the adoption process.**
- 3.8 Mechanisms for gathering and evaluating feedback from children, families, and professionals are significantly underdeveloped with no consistent process for collating and using this information to drive service improvement. **NWAS must establish regular, structured opportunities for all stakeholders to provide feedback, and ensure that this feedback is systematically analysed and used to inform quality-of-service reviews and future planning.**
- 3.9 Safeguarding is an important focus for the service, with evidence of referrals and action taken when concerns are identified. However, there are gaps in documentation, follow-up, and multi-agency planning. **Managers must ensure they have sufficiently robust systems in place to provide effective management oversight in relation to their safeguarding responsibilities.**



Care & Support

- 3.10 NWAS implements NAS policies and guidance, but these are not fully embedded. Awareness and uptake of Welsh Early Permanence (WEP)³ training is inconsistent. There is uncertainty about the existence of a WEP Champion among local authority practitioners and limited evidence of WEP being considered in care planning for babies referred to the service. NWAS recognises that progress has been slow and intends to learn from the first WEP placement in the region made during the inspection period. **NWAS should continue to embed the Welsh Early Permanence (WEP) framework and ensure decisions and their reasons are recorded clearly and consistently in care plans, Child's Adoption Reports, and Prospective Adopter Reports. This should be in line with the National Adoption Service Good Practice Guide. NWAS should explore opportunities to promote WEP and engage people in the development of recruitment and marketing strategies for this option.**
- 3.11 Most Child's Adoption Report and Annex B documents (CARB) are good quality and child focused. Panel Chairs and practitioners state reports have improved, and panels appropriately defer cases or request more information when required. However, inconsistencies remain across Local Authorities in CARB's, including errors, missing information, and variable quality often linked to local authority high practitioner turnover. Delays in updates and missing documents in electronic records hinder family finding and delay placements. Regular updates, a strengths-based approach, and consistent inclusion of the child's voice and background are needed to support timely and effective matching. NWAS recognises these issues, and Flintshire local authority is piloting a revised form as part of a national initiative. **NWAS must ensure CARB documents are accurate, up to date, reflect the child's voice and include all relevant information to ensure compliance with statutory duties and support effective placement decisions.**
- 3.12 NWAS has systems in place to support matching, including monthly tracking meetings, early profiling, and 'Understanding the Child' days. These approaches help shape matching decisions and support adopters' understanding of children's needs. However, evidence shows variability in the timeliness of matching, and delays in progressing to panel. The use of NAS

³ [Welsh Early Permanency Framework.pdf](#)

good practice trauma-informed tools, such as the trauma nurture timeline is not utilised. The lack of prospective adopters (which is a national issue), contributes to some children experiencing delays in being matched. **NWAS must ensure timely decisions are made in relation to matching children to prospective adopters to support children's outcomes.**

- 3.13 Most transition arrangements are well planned and involve children's social workers, foster carers, adopters, and, where appropriate, therapeutic support workers. Most transitions are flexible and paced to the child's needs, with regular reviews and good communication between professionals including foster carers. However, transition plans do not always specify who is responsible for each action or provide enough detail about the timing and nature of support for the child, adopters and foster carers. In some cases, insufficient cover or unclear arrangements have led to delays or increased stress for families during transition processes. **NWAS should ensure transition plans are detailed, with clear roles and robust cover arrangements, to support all parties, minimise disruption, and ensure continuity of care.**
- 3.14 Practitioners in local authorities highlight NWAS's proactive approach, regular communication, and commitment to supporting children and families. However, delays in life journey work and adoption plan progression are linked to recruitment and retention challenges, as well as insufficient dedicated time and space. Survey feedback from adoptive families and practitioners indicates that life journey work is sometimes incomplete, delayed, or of poor quality. Inconsistent completion and quality of life journey work can hinder children's understanding of their identity and history, affecting placement stability. **NWAS should further strengthen training and quality assurance oversight to ensure life journey work is timely and reflects each child's experiences and identity**
- 3.15 NWAS has appointed a life journey work social worker who provides effective guidance and quality assurance to practitioners. The service includes well-written later life letters, therapeutic stories and embedded therapeutic support workers, though access post adoption is limited by waiting lists. NWAS together with Wrexham local authority has recently introduced a life journey work policy, toolkit and a task and finish group to improve timeliness and child-centred practice for all care experienced children. **This is good practice.** Draft life journey work is not routinely provided to matching panel; this would provide assurance progress against expected timescales is made and ensure children receive the same quality of service across the region. Whilst there were some examples of good quality life journey materials, the quality and timeliness of life journey work varies and does not consistently meet NAS Life Journey Work

Good Practice **NWAS should ensure life journey work is embedded in accordance with NAS Life Journey Work Good Practice Guidance⁴.**

- 3.16 Adoption support services are valued by families and practitioners, but access, quality, and timeliness vary across the region. Waiting lists for therapeutic support are common, and delays in interventions have, in some cases, placed adoptive placements at risk. Survey responses from adopters, families, and partners indicate that pathways to support are not always clear and highlight a particular need for more specialists, such as psychologists and occupational therapists. Triage systems are in place, waiting lists are regularly reviewed and practitioners are proactive in seeking solutions, but delays in funding decisions can undermine the stability and well-being of adoptive families. **NWAS must ensure that all families are fully informed about the support available to them throughout the adoption process as well as post adoption.**
- 3.17 Adoption support plans often demonstrate a good understanding of children's holistic needs at the point of adoption, but do not always reflect future or evolving needs. Plans frequently lack detail about responsibilities, provision, and mechanisms for review. Nevertheless, support plans are reviewed, typically at one-year post-adoption and in response to changing needs. The quality and consistency of reviews vary, and there is limited evidence of systematic audit or use of review outcomes to inform service development. **NWAS must review adoption support pathways, advocate for increased resources and stronger cross-agency commitment and ensure that support plans are robust and clearly set out responsibilities. This will help provide timely, equitable, and needs-led support for all families.**
- 3.18 NWAS delivers intermediary services that support adopted adults and birth relatives to understand their histories and access information. Practitioners sensitively provide clear explanations, emotional support, and practical assistance, including counselling, accessing adoption records and making contact. Practitioners demonstrate skill and sensitivity in managing complex histories, **this is good practice**. Intermediary services face challenges due to waiting lists and limited resources, particularly for birth parent support groups. **NWAS should review resource allocation to ensure timely, sufficient and equitable support for all people accessing intermediary services.**
- 3.19 NWAS proactively and successfully supports meetings between adopters and birth families, **this is good practice**. The Reflect service provides valuable support for birth families in the region and NWAS promotes contact between adopted children and their birth families, however modern approaches to contact are not consistently embedded in practice. Survey responses from both

⁴ [Life Journey Framework Good Practice Guide](#)

staff and birth families describe that support for birth families is limited. The NAS Contact Planning Tool⁵ which supports tailored and child-focused contact, is not routinely used and arrangements are not always thoroughly considered in the longer-term. The default position remains indirect (letterbox) contact, with limited evidence of ongoing review or adaptation to changing needs. To align with national best practice, **NWAS should ensure that all practitioners are trained in and consistently apply the NAS Contact Planning Tool, and that contact arrangements are regularly reviewed and recorded.**

- 3.20 Panel members receive induction, annual appraisal, and ongoing training. They bring diverse expertise, including lived experience in adoption and fostering, as well as backgrounds in health and education and provide good scrutiny. Medical and legal advisors are available for all panels; **this is good practice.**
- 3.21 Panel arrangements across the region are good, but there is notable inconsistency in how panels operate, record minutes, and apply quality assurance processes. This leads to variability in the quality and transparency of decision-making. Panel members have identified the need to diversify membership to better reflect the community served. **NWAS should review panel operations to ensure uniformity with clear standards for documentation, quality assurance, and diversity.**
- 3.22 There are inconsistencies in how Agency Decision Maker's (ADM) record their decisions ranging from exemplary practice to instances where recorded analysis and rationale is insufficient. **ADM decisions should be clearly recorded in panel minutes, including analysis and rationale, to strengthen transparency and accountability.**



Leadership & Management

- 3.23 NWAS is directed and supported by a Regional Management Board (RMB). Currently there is a lack of sufficiently authorised representatives from each local authority and from health and education in the RMB. Practitioners raise that decisions requiring board approval are delayed, the service has recently amended the partnership agreement to enable majority decisions to be made to reduce the delay. **NWAS must strengthen the delivery of the partnership agreement and ensure board representation with sufficient authority to make decisions and greater commitment to strategic planning by all**

⁵ [NAS Contact Planning Tool](#)

partners. This will ensure adopted children have consistent access to appropriate universal, targeted or specialist services, to promote their overall well-being and permanence.

- 3.24 Variations in local practice affect the consistency and quality of adoption, despite some examples of good collaboration. The lack of a unified approach to support, decision-making, and quality assurance leads to inconsistent experiences depending on which local authority has responsibility for the child. Practitioners report challenges navigating differing systems and criteria across the six local authorities, compounded by the absence of a shared service identity. Establishing a region-wide model of practice, with strengthened governance and standardised processes, is essential to ensure equitable, timely, and consistent support for all children and families.
- 3.25 Strategic direction, partnership arrangements, and sustainable funding across local authorities require strengthening. The service's reliance on grant funding, resource constraints, and difficulties in recruiting and retaining local authority practitioners impact quality, sustainability, and morale within NWAS. Achieving parity across local authorities remains a challenge. **NWAS must develop a clear strategic plan with secure funding and robust partnership agreements to address these risks and ensure the long-term sustainability of high-quality adoption services.**
- 3.26 To ensure leadership arrangements fully support the service's aims, statutory responsibilities are consistently met and that improvements identified are driven at pace, it would be beneficial for NWAS to review the configuration and sufficiency of management roles. This review should include consideration of the Regional Adoption Collaborative manager's responsibilities over different services and their physical presence within the core team, with the aim of strengthening strategic leadership and ensuring consistent, effective management oversight. **NWAS must ensure that the configuration and sufficiency of management are adequate to provide effective leadership and robust management oversight.**
- 3.27 NWAS has a marketing strategy for 2025; however, efforts are constrained by limited dedicated time and resources. The shortage of adopters, particularly Welsh-speaking adopters and adopters who can support siblings and children with additional needs, continues to challenge NWAS's ability to provide placements that meet children's linguistic and cultural needs. **NWAS must continue to strengthen its use of data to inform recruitment and marketing strategy, including analysis of conversion rates from enquiry to application and approval. Formal feedback loops with adopters should be established to inform and refine marketing approaches.** This will ensure

recruitment strategies are responsive to the findings of local authority population needs analysis.

- 3.28 Practitioners value their line managers and appreciate their visibility and accessibility outside of formal supervision. Practitioners receive regular supervision with a strong emphasis on staff well-being, and this is evident in case records. **This is good practice.** The reflective nature of supervision, however, is not consistently recorded or embedded in day-to-day practice. **NWAS should strengthen its approach to reflective supervision by ensuring sessions are clearly documented and by supporting staff to reflect on their practice, learn from experience, and improve outcomes for children and families.**
- 3.29 Appraisal and induction arrangements are not clearly evidenced within supervision notes. Practitioners report a lack of formal induction processes, with many learning their roles informally through observation and peer support rather than structured guidance. **NWAS must ensure that all staff receive a thorough induction and regular appraisal, with opportunities for professional development and reflection. These processes should be documented and monitored to support workforce stability and high-quality practice.**
- 3.30 The service benefits from use of the CHARMS electronic case management system, which supports management of adoption information bilingually, securely, and efficiently. NWAS has not yet fully developed or utilised the system's functionality. There is missing or incomplete documentation in case files, inconsistent use of electronic systems, and uncertainty regarding the storage location and security of children's adoption records. These issues hinder effective case management and quality assurance and pose risks for children and families seeking access to their records in the future. Further development is needed to enable seamless cross-authority working and direct access to records across all local authorities. **NWAS must prioritise the development and implementation of a unified, region-wide records management policy. Clear policies and procedures in accordance with the Code of Practice for Local Authority Adoption Services must be implemented for recording, storing and accessing records. All adoption records must be urgently located and secured.**
- 3.31 It is vital that each child's name is recorded accurately and consistently, with correct spelling, to uphold the integrity of the record and demonstrate respect for the child's identity. Records should also be sufficiently detailed to provide a clear and coherent account of the child's journey through adoption, supporting transparency and meaningful understanding. **Quality assurance and audit**

processes should be developed with consideration for the experiences of adopted people who may access their care records in the future.

- 3.32 NWAS has limited quality assurance measures. Existing strategies for oversight, feedback analysis and data monitoring are **insufficient**. There is no formalised quality assurance framework specific to NWAS, and the frequency and consistency of audits is unclear. This means service reviews are not consistently informed by quality assurance processes and opportunities to reflect on good practice can be missed. **NWAS must implement a structured quality assurance framework to ensure consistent oversight and continuous improvement across all service areas.**

4. Priority Areas for Improvement

- 4.1 NWAS **must** ensure the Statement of Purpose is reviewed annually and **must** notify CIW, individuals and representatives of any revisions in accordance with Regulation 5(3) and (6) of the Local Authority Adoption Services (Wales) Regulations 2019.
- 4.2 NWAS **must** ensure its marketing strategy is robust and regularly reviewed to support them in their drive to recruit sufficient adopters in line with Adoption and Children Act 2002 (Joint Adoption Arrangements) (Wales) Directions 2015.
- 4.3 NWAS **must** ensure matching activity is consistently timely in line with Regulation 36 & 17 of the Adoption Agencies (Wales) Regulations 2005.
- 4.4 NWAS **must** ensure there are sufficiently robust systems in place to provide effective management oversight in relation to their safeguarding responsibilities in line with Regulation 10 (4) of the Local Authority Adoption Services (Wales) Regulations 2019.
- 4.5 NWAS **must** ensure CARB documents are accurate, up to date in accordance with Regulation 15 of the Local Authority Adoption Services (Wales) Regulations 2019.
- 4.6 NWAS **must** strengthen consistency in timeliness, communication, and transparency during the assessment process in accordance with Regulations 21 – 30 of The Adoption Agencies (Wales) Regulations 2005
- 4.7 NWAS **must** ensure every child and family is actively offered advocacy and that this is documented in all relevant records in accordance with Regulation 15 of the Local Authority Adoption Services (Wales) Regulations 2019.

- 4.8 NWAS **must** ensure that the child's voice is consistently represented in all assessments, care plans, and reviews in accordance with Regulation 15 of the Local Authority Adoption Services (Wales) Regulations 2019 and section 21 of the Social Services and Well-being (Wales) Act 2014.
- 4.9 NWAS **must** ensure that the availability and delivery of the adoption service, and adoption support services, is consistent, equitable and timely in line with Regulations 16 and 17 of the Adoption Support Services (Local Authorities) (Wales) Regulations 2005 & Adoption and Children Act 2002 (Joint Adoption Arrangements) (Wales) Directions 2015.
- 4.10 NWAS **must** ensure adoption support plans are of consistent quality, aligned to good practice guidance for support and contact and are reviewed timely in line with Regulation 16 and 17 of the Adoption Support Services (Local Authorities) (Wales) Regulations 2005.
- 4.11 NWAS **must** ensure that life journey work, as part of the adoption support service, is undertaken and provided timely in line with Regulation 4(2) of the Adoption Support Services (Local Authorities) (Wales) Regulations 2005.
- 4.12 NWAS **must** ensure that all families are fully informed about the support available to them and their rights throughout the adoption process in accordance with regulations 12, 13 and 15 of the Local Authority Adoption Services (Wales) Regulations 2019.
- 4.13 NWAS **must** ensure that contact arrangements for children and birth families are regularly reviewed, clearly recorded, and reflect the best interests and wishes of the child in accordance with Regulation 19 of the Local Authority Adoption Services (Wales) Regulations 2019 and Regulations 35 and 36 of the Adoption Agencies (Wales) Regulations 2005, as well as the overarching principles of the Adoption and Children Act 2002.
- 4.14 NWAS **must** ensure that quality-of-service reviews fully comply with Regulation 39(1) of the Local Authority Adoption Services (Wales) Regulations 2019, with effective arrangements in place for monitoring, reviewing, and improving the quality of the service, including the evaluation of engagement and audits to inform future service development.
- 4.15 NWAS **must** implement a structured quality assurance framework to ensure consistent oversight and continuous improvement across all service areas, including panel arrangements, in line with Regulation 39(1) and Regulation 6 of the Local Authority Adoption Services (Wales) Regulations 2019.

- 4.16 NWAS **must** ensure compliance with Paragraph 7 (including Paragraph 7(4) (c), (f), (m), (n) and (o) of the Adoption and Children Act 2002 (Joint Adoption Arrangements) (Wales) Directions 2015 by progressing its current work programme to ensure that there is sufficient representation of people with sufficient authority from local authorities, education departments, health boards, and NHS Trusts is in place on the Regional Management Board.
- 4.17 NWAS **must** develop a clear strategic plan with secure funding and robust partnership agreements in accordance with Paragraph 9(1) of the Adoption and Children Act 2002 (Joint Adoption Arrangements) (Wales) Directions 2015.
- 4.18 NWAS **must** ensure all staff receive appropriate induction and appraisal in accordance with Regulation 23(1) of the Local Authority Adoption Services (Wales) Regulations 2019.
- 4.19 NWAS **must** ensure that the configuration and sufficiency of management are adequate to provide effective leadership and robust management oversight in accordance with Regulation 9(1)(a) and 21 of the Local Authority Adoption Services (Wales) Regulations 2019
- 4.20 NWAS **must** take immediate action to ensure that its records management arrangements fully comply with the requirements of Regulation 28(1) and Schedule 3 of the Local Authority Adoption Services (Wales) Regulations 2019.

5. Recommendation

- 5.1 NWAS **should** explore opportunities to reduce delays in completion of relevant checks with strategic partners.
- 5.2 NWAS **should** embed the recently published NAS Adoption Qualities and Skills Framework within its assessment practice
- 5.3 NWAS **should** continue to strengthen its use of WEP to ensure consistent and timely permanence planning.
- 5.4 NWAS **should** continue prioritising diversity in panel members to ensure the panel represents the population it serves.
- 5.5 NWAS **should** ensure that ADM decisions are clearly recorded in the minutes, including analysis and rationale, to strengthen transparency and accountability.

- 5.6 Recording of reflective supervision of staff **should** be strengthened.
- 5.7 NWAS **should** establish a region-wide therapeutic approach to practice to ensure all children and families receive equitable, timely, and consistent support throughout the adoption process in accordance with NAS practice guidance.
- 5.8 NWAS **should** continue to promote modern adoption contact arrangements in accordance with NAS good practice guidance.
- 5.9 NWAS **should** ensure future planning for adoption record services is informed by current and projected demand, and that resourcing is sufficient to meet statutory responsibilities and support timely access.

6. Next steps

- 6.1 CIW requires that NWAS compile an improvement plan and share this with CIW by 10/03/2026.
- 6.2 CIW will review the improvement plan and seek further assurance of progress. This will be through a meeting with the Head of Children's Services of the host local authority as well as the Regional Adoption Manager within 18-24 months of publication of the report.
- 6.3 CIW will consider further activity to be assured of continued improvement and will consider bespoke engagement activity to support its ongoing monitoring.

7. Acknowledgements

CIW would like to thank staff, partners and people who gave their time and contributed to this inspection.

Yours sincerely,



Lou Bushell-Bauers
Head of Local Authority Inspection
Care Inspectorate Wales



Julie Heal
Head of Adult and Children's Services
Inspection
Care Inspectorate Wales

Appendix 1

Methodology

Self-Evaluation

- NWAS was requested to complete a Self-Evaluation to reflect on their own performance in specific areas of service.

Fieldwork

- We reviewed the experiences of 23 people through the review and tracking of their records. We reviewed 17 records and tracked six.
- Tracking a person's record may include having conversations with the person in receipt of services, their family or carers, adoption social worker, childcare social worker, manager, and where appropriate, other professionals involved.
- We engaged, through interviews and/or focus groups, with 13 people receiving services and/or their carers (to include adoptive parents, foster carers and adopted adults).
- We engaged, through interviews and/or focus groups, with 49 practitioners and managers. This included childcare social workers, adoption social workers, fostering social workers, team managers, assistant team managers, IRO's, Regional Adoption Manager and Head of Children's Services for the RAC's host local authority,
- We engaged, through interviews, with 4 representatives from partner agencies.
- We observed adoption panels and spoke with 3 panel chairs and 28 panel members.
- We reviewed a sample of staff supervision files.
- We observed a Stay and Play session.
- We reviewed supporting documentation sent to CIW for the purpose of the inspection.
- We administered surveys to NWAS practitioners and managers, partner organisations and people. We received responses from 25 practitioners and managers from NWAS, 110 from people and 27 from relevant stakeholders. 1 response was received from birth families.

Our Privacy Notice can be found at <https://careinspectorate.wales/how-we-use-your-information>.

Welsh Language

CIW is committed to providing an active offer of the Welsh language during its activity with local authorities.

The active offer of the Welsh language was available throughout the inspection, including a Welsh speaking inspector attending panels conducted in the Welsh language and Welsh-speaking practitioners on site during inspection activity, ensuring that people could access services in their preferred language whenever needed.

Appendix 2

Glossary of Terminology

Term	What we mean in our reports and letters
Must	Improvement is deemed necessary in order for the RAC to meet a duty outlined in legislation, regulation or code of practice. The RAC is not currently meeting its statutory duty/duties and must take action.
Should	Improvement will enhance service provision and/or outcomes for people. It does not constitute a failure to meet a legal duty at this time; but without suitable action, there is a risk the RAC may fail to meet its legal duty/duties in future.
Good practice	Identified areas of strength within the RAC. This relates to practice considered innovative and/or which consistently results in positive outcomes for people receiving statutory services.
Well-being	A principle of the Social Services and Well-being (Wales) Act 2014 which aims for people to have well-being in every part of their lives. Well-being is more than being healthy. It is about being safe and happy, having choice and getting the right support, being part of a strong community, having friends and relationships that are good for you, and having hobbies, work or learning. It is about supporting people to achieve their own well-being and measuring the success of care and support.

Appendix 3

Quantity Definitions Table

Terminology	Definition
Nearly all	With very few exceptions
Most	90% or more
Many	70% or more
A majority	Over 60%

Half	50%
Around half	Close to 50%
A minority	Below 40%
Few	Below 20%
Very few	Less than 10%