

ADOPTION SUPPORT TRANSFER PROTOCOL





ADOPTION SUPPORT TRANSFER PROTOCOL

1. INTRODUCTIONS

This protocol applies to all Regional Adoption Agencies. It outlines the expected process, accountabilities and procedures that should be applied when the responsibility of the provision of adoption support transfers from agency to another.

2. LINKED DOCUMENTS

Adoption Support Transfer Form

3. PURPOSE

- To ensure adoption support plans for children, young people and families are clearly understood by the receiving agency.
- To ensure children, young people and families are clear about who will support them in the future and what services are available for them.

4. LEGISLATIVE FRAMEWORK AND STANDARDS

- The Adoption and Children Act 2002 and associated regulations.
- The Children and Adoption Act 2006 and associated regulations
- The Adoption Support Services Regulations 2005
- Adoption Statutory Guidance 2013

5. ELIGIBILITY CRITERIA

This protocol is designed to be used in cases where an agency is actively providing adoption support for a child and when:

- The child lives within the RAA region and has been placed by another local authority/ agency, has been adopted and is post 3 years adoption order.
- The adopted family have moved into the geographical area and are currently in receipt of adoption support from another RAA.

When a three-year period following the making of the adoption order expires, the responsibility for assessing and providing adoption support services transfers from the placing authority to the local authority where the adoptive child lives.

6. THE ROLE OF ADOPTION SUPPORT SERVICES ADVISER (ASSA)

All local authorities must appoint an Adoption Support Services Adviser (ASSA), who will be a key contact for a local authority placing a child for adoption out-of-area, as their role is to give advice and information to people affected by adoption. When a child is placed with an adoptive parent living outside the placing local authority's area (whether as an interagency placement or not) or subsequently if the family moves out of the local authority's area, the placing agency should contact the ASSA of the regional agency where the adoptive family lives to be able to provide the family with knowledge of local services.





7. RESPONSIBILITY OF THE ASSESSMENT OF NEED AND THE PROVISION OF SUPPORT

The placing authority remains responsible for the assessment of need and provision of support for three years from the date of the adoption order. The agencies involved can negotiate and agree that the RAA of the family's residence provides adoption support services and recover the costs from the placing authority / agency.

8. FINANCIAL SUPPORT

The three-year limitation does not apply, if the family is provided with financial support. The placing local authority is responsible for the continued payment, and of the review of a need for financial support <u>agreed before the adoption order is made</u> for as long as the family qualifies for payments.

9. CONTACT BETWEEN THE CHILD AND THE BIRTH FAMILY

The placing authority continues to be responsible for managing and supporting the contact arrangements between the child and the birth family, irrespective of where the adoptive family lives, as well as for any changes to those arrangements over time.

The new RAA and the placing authority should work in partnership should the adopted child and family wish to change the originally agreed contact arrangements. In particularly, the contact arrangements between brothers and sisters may need to be varied as the children's relationships and need for contact change over time. The new RAA should take an active role in supporting the child / young person and adopted family. Whereas it probably is more appropriate for the placing authority to provide support for the birth family.

10.TRANSFER

When the three-year period from making the adoption order expires, the responsibility for the assessment of need and the provision of adoption support transfers to the agency where the adopted child lives. It is important that the transfer is planned and managed carefully to ensure the child and the family continue to be supported.

Where the family is supported by a Voluntary Adoption Agency, the placing authority should work together with the VAA in question to provide the receiving RAA a summary of the support, including interventions that has been provided for the family, and an adoption support plan. The VAA Social Worker who is currently supporting the family should attend the transfer meeting.

11.TRANSFER PROCESS

Three months prior to the date when the responsibility of support is due to transfer the agency currently supporting the family will contact the new agency and start preparing for





the transfer. The agencies should agree when and how the transfer of responsibilities will take place taking into consideration the family's current needs and the ability of the receiving agency to provide the support the family needs.

The Social Worker currently supporting the family completes the Adoption Support Transfer Form in partnership with the family and ensure all documents listed on the form are available.

The Social Worker who is supporting the family sets up a handover meeting, which should take place one month before the identified handover date. The Social Worker currently supporting the family ensures the family is aware of the transfer, agrees with the transfer plans, and have given their written consent for the transfer. The meeting will only proceed if the documents are up to date and complete.

The following people will be invited:

- Existing RAA Social Worker
- Existing RAA Line manager to chair the meeting (if appropriate).
- Existing LA children's Social Worker if relevant
- New RAA Social Worker if known
- New RAA Line manager if appropriate
- VAA Social Worker if applicable
- Parent/s
- Young person if appropriate

The Transfer form will be the used to formulate the agenda.

The purpose of the meeting is to ensure that the family continues to receive the appropriate adoption related support, and that the family has a clear understanding of who their main contact at the new RAA will be and what services and support will be provided by the new RAA.

It is important that the availability of universal service in the new RAA area, including services provided by the RAA and universal education and health services are discussed, and the parent/s are advised how these services can be accessed.

Should the family be at crisis or should the support for the family, or any member of it, stretch beyond the transfer date, the agencies may want to agree to continue to work together for an agreed term.

At the beginning of the process the responsible manager in the transferring agency writes to the new agency requesting for the transfer process to commence. The completed Transfer form will be sent with the transfer request.

At the end of the transfer process the responsible manager at the new agency writes to the transferring agency confirming the transfer has been agreed and the date when the responsibility will transfer to the new agency.





12. SUPPORT FUNDED BY ADOPTION SUPPORT FUND

In the cases where adoption support is funded by Adoption Support Fund the timing of the transfer should be carefully considered. Where an application for ASF has been made before the responsibility for the provision of adoption support transfers to another local authority, it may not be in the family's best interest to transfer the money as it may lead to a disruption in therapy being provided.

According to the ASF's T&Cs the payment claim will stay the responsibility of the LA/RAA who submitted the application. It is not possible to transfer the responsibility to the new agency. Should the applying Local Authority decide to continue to process the payments, they will be able do so past the transfer date. Should the applying LA decide not to continue to process the payments, they need to surrender the unclaimed funds and the new Local Authority needs to submit a new claim.

The agencies should consider working in partnership to ensure a seamless transition of responsibility of assessment of need and the provision of support. The applying agency could continue to administratively manage the provision of support until the end of existing funding period and the new agency should keep the applying agency informed of any changes to the terms of the funding or support plans.

13. MATCH FUNDING

In cases, where local authorities or RAAs have agreed to match-fund adoption support interventions, the responsibility for the provision of that support remains with the placing authority. In those cases, the receiving RAA can and should support the family by providing universal services. The agencies should work together to agree the practicalities of the service provision.

14. APPENDIX

Adoption Support Transfer form.

15. IMPLEMENTATION AND REVIEW

This protocol and the accompanying form were approved by the RAA Leaders' Group on the 15th of December 2022. They recommended that the protocol would be implemented by the English Regional Adoption Agencies starting from 1st January 2023. A formal review of the protocol and the accompanying form will take place in May 2023.





Please fill in the relevant sections

Adoption Support Transfer Form

Consent	
Has the family given consent to transfer the case?	Yes / No

Agencies involved	
Name of agency instigating transfer	
Name of the person supporting the family	
(in the transferring agency)	
Contact details for person supporting the	E-mail:
family	
(in the transferring agency)	Phone number:
Name of the agency the support will transfer	
to	
Name of the agency who approved the	
adopters	
If the approving agency was a Voluntary	
Adoption Agency, what is their current role in	
supporting the family?	
Name of the person supporting the family	
(in the approving agency, if a VAA)	
Contact details of the person supporting the	E-mail:
family (in the approving agency, if a VAA)	
	Phone number:

Core Information – Child/Young Person		
Name		
Surname		
Date of Birth		
Gender		
Ethnic Origin		
Religion		
NHS Number (If known)		

Adoption Order		
Name of the Placing Authority?		
Date of Adoption Order	Date of Placement	
Name of the Court		

Core Information – Adoptive Parent	
Name	
Surname	
Date of Birth	
Gender	
Ethnic Origin	





			regio	onal adoption agencies working together
Relationship to the	e child/young persor	1		
e-mail address				
Telephone Number	er			
Home address				
Core Information	n – Adoptive Parent			
Name				
Surname				
Date of Birth				
Gender				
Ethnic Origin				
•	e child/young persor	ו		
e-mail address				
Telephone number				
Home address (if a	different from above)			
Other Family/Ho	usehold Members (living in the sa	ame household)	
Name	Date of Birth	Gender	Relationship to the	e above Child/Young Person
Contact consent				
Has the family giv	en consent to be add	ded on		
Has the family giv the mailing list of	en consent to be add the new agency?	ded on		
Has the family give the mailing list of (If so, a separate wr	en consent to be add the new agency? ritten form is required)			
Has the family giv the mailing list of (If so, a separate wr e-mail address (to	en consent to be add the new agency?			
Has the family give the mailing list of (If so, a separate wr	en consent to be add the new agency? ritten form is required)			
Has the family give the mailing list of the mailing list of the solution of th	en consent to be add the new agency? <u>ritten form is required)</u> be added on the ma			
Has the family give the mailing list of the mailing list of the so, a separate with e-mail address (to list): Communication	en consent to be add the new agency? ritten form is required) to be added on the ma Needs (including	ailing		
Has the family give the mailing list of the mailing list of the so, a separate with e-mail address (to list): Communication language/literacy)	en consent to be add the new agency? itten form is required) be be added on the ma Needs (including regarding any of the	ailing		
Has the family give the mailing list of the mailing list of the so, a separate with e-mail address (to list): Communication	en consent to be add the new agency? itten form is required) be be added on the ma Needs (including regarding any of the	ailing		
Has the family give the mailing list of the mailing list of the so, a separate with e-mail address (to list): Communication language/literacy) people to be included.	en consent to be add the new agency? ritten form is required) to be added on the ma Needs (including regarding any of the aded in this plan	ailing		
Has the family give the mailing list of the mailing list of the so, a separate with e-mail address (to list): Communication language/literacy) people to be included. Arrangements to	en consent to be add the new agency? itten form is required) be be added on the ma Needs (including regarding any of the ided in this plan	ailing e	n family and other	significant people
Has the family give the mailing list of the mailing list of the so, a separate with e-mail address (to list): Communication language/literacy) people to be included a separate with e-mail address (to list):	en consent to be add the new agency? itten form is required) to be added on the ma Needs (including regarding any of the added in this plan to maintain relations	ailing e hips with birth		
Has the family give the mailing list of the mailing list of the mailing list of the mail address (to list): Communication language/literacy) people to be included a property of the placing authority.	en consent to be add the new agency? ritten form is required) to be added on the ma Needs (including regarding any of the ided in this plan of maintain relations tration of all arrang continues to be responsi	hips with birth	and supporting the arrai	ngements to maintain relationships
Has the family give the mailing list of the mailing list of the mailing list of the mail address (to list): Communication language/literacy) people to be included a property of the placing authority.	en consent to be add the new agency? ritten form is required) to be added on the ma Needs (including regarding any of the ided in this plan o maintain relations remation of all arrang continues to be responsi	hips with birth	and supporting the arrai	
Has the family give the mailing list of the mailing list of the mailing list of the mail address (to list): Communication language/literacy) people to be inclused. Arrangements to Please give information and the child and th	en consent to be add the new agency? ritten form is required) to be added on the ma Needs (including regarding any of the add in this plan o maintain relations mation of all arrang continues to be responsi to the birth family, irrespec-	hips with birth	and supporting the arrai	ngements to maintain relationships
Has the family give the mailing list of the mailing list of the control of the mail address (to list): Communication language/literacy) people to be included and an arrangements over time of the arrangements over ti	en consent to be add the new agency? ritten form is required) to be added on the ma Needs (including o regarding any of the added in this plan o maintain relations remation of all arrang continues to be responsi of the birth family, irrespect one. rrangements	hips with birth	and supporting the arrai	ngements to maintain relationships
Has the family give the mailing list of the mailing list of the family give the mail address (to list): Communication language/literacy) people to be included and an arrangements over time overview of the an arrangement overview of the arrangement overview	en consent to be add the new agency? initten form is required) be be added on the many of the added in this plan maintain relations of all arrange continues to be responsible the birth family, irrespective. Trangements to contact etc.) and	hips with birth	and supporting the arrai	ngements to maintain relationships
Has the family give the mailing list of the mailing list of the control of the mail address (to list): Communication language/literacy) people to be included and an arrangements over time of the arrangements over ti	en consent to be add the new agency? initten form is required) be be added on the many of the added in this plan maintain relations of all arrange continues to be responsible the birth family, irrespective. Trangements to contact etc.) and	hips with birth	and supporting the arrai	ngements to maintain relationships
Has the family give the mailing list of the mailing list of the control of the mail address (to list): Communication language/literacy) people to be included and an arrangements over time of the arrangements over time of the arrangement of the arrangement overview of the arrangement of the arrangement of the arrangement overview overvie	en consent to be add the new agency? itten form is required) be be added on the ma Needs (including o regarding any of the ided in this plan o maintain relations mation of all arrang continues to be responsi of the birth family, irrespect ine. rrangements t contact etc.) and rdinator	hips with birth	and supporting the arrai	ngements to maintain relationships
Has the family give the mailing list of the mailing list of the family give the mail address (to list): Communication language/literacy) people to be included and an arrangements over time overview of the an arrangement overview of the arrangement overview	en consent to be add the new agency? itten form is required) be be added on the ma Needs (including o regarding any of the ided in this plan o maintain relations mation of all arrang continues to be responsi of the birth family, irrespect ine. rrangements t contact etc.) and rdinator	hips with birth	and supporting the arrai	ngements to maintain relationships
Has the family give the mailing list of the mailing list of the control of the mail address (to list): Communication language/literacy) people to be inclused. Arrangements to Please give inforthe placing authority between the child and arrangements over time. Overview of the a Type (letterbox, directing literacy / time). Name of the co-ordinate the mail (co-ordinate).	en consent to be add the new agency? initten form is required) be added on the many of the added in this plan maintain relations of the birth family, irrespective. Trangements to contact etc.) and redinator	hips with birth	and supporting the arrai	ngements to maintain relationships
Has the family give the mailing list of the mailing list of the control of the mail address (to list): Communication language/literacy) people to be included and an arrangements over time of the arrangements over time of the arrangement of the arrangement overview of the arrangement of the arrangement of the arrangement overview overvie	en consent to be add the new agency? initten form is required) be added on the many of the added in this plan maintain relations of the birth family, irrespective. Trangements to contact etc.) and redinator	hips with birth	and supporting the arrai	ngements to maintain relationships





Identity – Child's Needs	
Has the Life Story Book been shared with the child / family	
Has the later life letter been shared with the family?	

involvements. (Please list all sign	nificant professio	nals involved in the child	s/young person's life (social worker, school, heal	th etc.)
Name & Designation/ Name of the organisation	Address	E-mail Address	Telephone Number	Date when involvement started	Date when involve ment ended
Adoption Sup	port Assessr	nent			
/ Review (must b	oe within 3 mor a copy of the <i>i</i>	n Support Assessmei hths) Adoption Support Pla			
Education					
Name of the scl	hool				
Named contact	at school (if a	applicable)			
Contact details applicable)	to the named	contact (if			
Does the child heeds? (Please,	-	education related			
Does the child h	nave an EHCF	P in place?			
Copy of the late	est EHCP (if av	vailable)			
When will the E	HCP be revie	wed?			
Name of the co	ntact / officer	for EHCP?			





		regional adoption agencies working together
e-mail address for the EHCP contact?		
T. I.	10	
Telephone number for the EHCP conta	Ct?	
	<u>.</u>	
Health		
Does the child have any specific health		
needs?		
neeus!		
Is there a plan in place to address the		
health needs?		
Organisation/s responsible for the		
provision of the support for the health		
needs?		
Named contact/s		
e-mail address/s		
Talanhana mushan/a		
Telephone number/s		
Current Support		
Description of support		
(What is provided and to whom?		
What are the expected outcomes of		
this support? Are there any outcome measures that are being		
used?)		
Current Provider/s		
Current Frevious,		
Named contact at the		
provider/s		
e-mail address for the current		
provider		
Telephone number for the		
current provider/s		
When is the next review point		
for the support plan?		
Adoption Support Fund		
Details of application/s to the		
Details of application/s to the		
Adoption Support Fund		
(ASF) in the current financial		
year? – Provide start date,		
review date, end date, type of		





	regional adoption of	agencies working together	
service, provider & amount agreed (ASF number and child's case record number)			
Attach ASF approval letter			
Attach the last ASF Services Review			
Have any Specialist Assessments been completed for the child / family? (Please attach copies of the assessment)			
How much of the current FAL (fair access limit) for this child has been used?			
Details of any current match funding arrangement. Provide name of the local authorities / health commissioners, named contact and contact details (e-mail / phone number)			
Brief overview of the ASF handover arrangements.			
Financial Support (specify i	f this support is for parent/ child) – one-off /	on-going support	
Details of any ongoing financial allowance or support for which the placing authority will maintain responsibility? (Adoption Support Regulation 8) Any other finances that the family receive from the LA (Adoption Support Regulation 8)			
Documents required for transfer in (where applicable):			
	Mandatory Documents		
Child/ren's Permanence Repor	rt at the time of placement		
Original Adoption Placement R	Report (APR)		
Most recent completed assess	ment of need report.		
Most recent adoption support review (must be within 3 months).			





		regional adoption	agencies working together			
Information sharing agreer	ment / letter of consent from					
	Discretionary Documents (if	appropriate / available)				
Copy of EHCP						
Original Adoption Support	Plan					
PAR if appropriate / availal	ble					
Later Life Letter (if availab	le					
Life Story Work						
Any other assessment of c	child/ren within the family th	nat is relevant				
Details of person comple	eting this form:					
Name						
Position						
Date						
Action Los						
Action Log						
Discussion	Action	By Whom	By When			
Details of the Transfer	Arrangements					
	7 cg					
Date of the transfer meeting?						
Date when the transfer of responsibility of the provis of adoption support take place?	ion					
Summary of the transfer arrangement.						

