

## **SAFEGUARDING FOR CHILDREN PLACED WITH PROSPECTIVE ADOPTIVE PARENTS**

### Introduction

This guidance has been created to provide an all-Wales response to child practice reviews and serious case reviews concerning children placed with prospective adoptive parents. It draws on the recommendations of the reviews and good practice shared across the regional collaboratives and VAA's in Wales as well as research carried out by Cleaver and Rose, 2020<sup>1</sup> which outlines the importance of keeping a safeguarding focus when working with adopters during assessment and providing support. It makes clear the responsibilities for safeguarding children placed for adoption for all childcare staff across regions, VAA's and local authorities. When considering this guidance practitioners are also reminded to refer to the Wales Safeguarding Procedures [Safeguarding Wales](#) and the All Wales Adoption Policies and Procedures which can be accessed via the following [Good Practice Guides \(adoptionapp.wales\)](#)

### What the guidance covers

1. Consent to the sharing of information by prospective adopters during the assessment process
2. Visits to children once the placement commences
3. Recording of visits
4. Chronology of significant events
5. Reviews of children
6. The role of family and friends in safeguarding
7. Info to prospective and approved adopters

There are a number of documents/proformas which should be used under each of these headings, and they follow the guidance in the main body of the document.

### **1. Consent to the sharing of information by prospective adopters during the assessment process**

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<sup>1</sup> Safeguarding Children: Living with Foster Carers, Adopters and Special Guardians: learning from Serious Case Reviews, 2007-2019; H Cleaver & W Rose, 2020 CoramBAAF

The regional collaborative/VAA should ensure that, from the first point of contact, it is made clear that the Adoption Agency (AA) will seek information about the prospective adopter from a number of sources.

The message should be given that:

- The assessment process is robust
- It may feel intrusive, as information is sought not only from their GP, but other health practitioners, therapists, and counsellors where they may have sought help. This will include historical information, going back through their adulthood
- Prospective adopters are under a duty to disclose any history of such a relationship. Any lack of honesty will be seen as a concern as to their ability to work openly and honestly with the AA and this may affect their capacity to care safely for a child and in line with their best interests
- The fact that they may have sought therapeutic help in some form may well be a sign of their strength and resilience, but it is important for the AA to have all the relevant information in order to support them in the assessment process and, if successful, matching process
- The Registration of Interest form will outline the type of consent they will be asked to provide.

The following could be added to the Registration of Interest forms and signatures will therefore be obtained.

#### Appendix 1(a): Consents

- I give my consent to the agency asking for information (written, email or verbal) from the individuals, agencies or organisations identified by me or by the agency in support of this Registration of Interest.
- I give my consent to the agency requesting checks, information and references to be undertaken, including:
  - Disclosure & Barring Service (DBS), Niche Police Records, Police National Computer (PNC) checks,
  - General Practitioner, Counsellors (previous and current), Therapists (previous and current), Mental Health Practitioner (previous and current),
  - Local Authority Social Services departments and Education departments,
  - Employers (current and previous where required),
  - Health Visitor and Registration & Inspection with the Care and Social Services Inspectorate Wales (or equivalent) where relevant.

In addition, I consent to *any other*\* relevant checks in connection with my application to become a prospective adopter.

\*Any other checks could be .....

- I consent to the agency requesting a written report from my GP about my health and I agree to arrange and participate in a medical examination by my registered medical practitioner who will then provide a written report for the agency. I also consent to any further enquiry deemed necessary and particularly in relation to further enquiries from medical specialists. I *therefore* give my consent to obtain further health information from any specialists.
- I give my advance consent that, should the agency subsequently determine that I/we are suitable to adopt a child(ren), the agency may refer me to the Adoption UK Cymru support service referred to as 'The Adopter Passport' and the 'First 1000

Days'. I understand that further information regarding this voluntary and free service will be provided post my approval.

### **Appendix 1(b): Letter to counsellor/psychotherapist/psychologist etc**

Dear ####,

#### **RE: professional involvement reference for XXX**

XXX has applied to YYY Adoption Collaborative/VAA to adopt a child.

I am writing to you in connection with the above application and seek your support in assisting with the assessment of the above as a prospective adoptive parent. The Adoption Agencies (Wales) Regulations 2005 set out a requirement for the adoption agency to assess an applicant's suitability and to check whether there is information known to others that would suggest it unwise for applicants to be approved.

As well as adoption agencies having a responsibility to ensure that adoptive parents do not pose a risk to any children placed with them, we know that children in need of adoption have often experienced a traumatic start in life which will impact on them as they grow up. This trauma may also have an effect on the people caring for them and create additional stress that they may not expect. It is important that we have as much information as possible to be able to support families if difficulties arise after a child is placed.

The applicant has shared that they have either previously or are currently in receipt of counselling/therapeutic support from you. We fully appreciate and respect the need for confidentiality and that the trusting relationship between professional and service user is important.

The applicant is aware we are requesting information from you and has provided their signed consent for us to seek relevant information from you. This consent is attached to this request.

I'd be grateful for responses to the following queries:

1. Confirmation of your role and the service(s) you are providing, or have provided, the applicant.
2. How long has the applicant been accessing/did the applicant access your support? Please provide the dates and reasons for ending the support.
3. Your observations surrounding the applicant's engagement with the support you provide/provided and any impact you have perceived.
4. Your observations surrounding any apparent vulnerabilities surrounding the applicants coping strategies?
5. Awareness of any known safeguarding concerns or admissions that could be perceived to be related to safeguarding.
6. Any other relevant information you feel would be important for us to consider, including any information that you believe may affect the applicant's capacity to parent a child who may have suffered trauma and instability. If you have not kept a record of your work with the applicant, do you have any recollection of them?

Your reference can be returned via the email or postal address listed above to me personally. Should you have any queries surrounding this request, please do not hesitate to contact me or *[name of social worker]*.

I'd like to thank you in anticipation for your assistance with this matter.

Yours sincerely,

## Appendix 2: Reference Questionnaire

### REFERENCE QUESTIONNAIRE

Name of applicant(s):

<b>Referee Name</b>	
<b>Address</b>	
<b>Email</b>	
<b>Telephone</b>	
<b>Relationship to applicant(s)</b>	
<b>Length of time known</b>	
<b>Which of the following best represents your view? Please tick one box</b>	
<ul style="list-style-type: none"> <li>• I have no concerns about the named person adopting children <input type="checkbox"/></li> <li>• I do not think the named person is suitable to adopt children, and I have provided written reasons for this below <input type="checkbox"/></li> <li>• I have concerns about whether the named person is suitable to adopt children, and I would like to discuss this with you <input type="checkbox"/></li> <li>• Other <input type="checkbox"/></li> </ul>	
<b>1. Confirm your role and the service(s) you are providing/have provided to the applicant. Please give dates and the reason for ending the support</b>	
<b>2. How long has the applicant been accessing/did the applicant access your support?</b>	
<b>3. What support do you provide/did you provide the applicant and what observations do you have regarding the applicant's engagement?</b>	
<b>4. Your observations surrounding any apparent vulnerabilities surrounding the applicants coping strategies?</b>	
<b>5. Are you aware of any known safeguarding concerns or admissions that could be perceived to be related to safeguarding.</b>	
<b>6. Any other relevant information you feel would be important for us to consider, including any information they you believe may affect the applicant's capacity to parent a child who may have suffered trauma and instability</b>	

## **2. Visits to children once the placement commences**

### **The legal framework**

*Adoption Agencies (Wales) Regulations 2005*

*Reg 37(5):*

*The AA must –*

- (a) Ensure the child and the prospective adopter are visited within one week of the placement and thereafter at least once a week until the first review and thereafter at such frequency as the agency decides at each review;*
- (b) Ensure that written reports are made of such visits; and*
- (c) Provide such advice and assistance to the prospective adopter as the agency considers necessary.*

It is the responsibility of the childcare social worker to undertake the visits outlined above. They cannot be undertaken by a social worker from the adoption collaborative or a VAA.

This is the legal minimum number of visits the child's social worker should make, with additional visits taking place as part of an intervention plan where there are concerns over the quality and/or viability of the placement including where the prospective adopter(s) indicate any concerns about their own emotional well-being or ability to manage the child's needs.

The regional collaborative social worker and VAA social worker will also visit the placement in addition to the child's social worker's statutory visits. It is good practice for these visits to take place weekly until the first review. Those involved should ensure that visits are planned to provide the best support to the placement and most effective surveillance. The number of visits undertaken, both statutory and non-statutory, should be reviewed in a collaborative manner and discussed in supervision if difficulties arise.

The role of the childcare social worker is to maintain a clear focus on the child's safety and well-being. The adoption (and VAA) social worker's role is to provide support to the placement, whilst still being able to place the child at the centre of their work. For further guidance on the need for support during the early stages of placement refer to the NAS Good Practice Guide on Transitions and Early Support.

**All visits** following a child's placement with the adopters will take place on a **face-to-face basis** unless there are exceptional circumstances that require an additional 'one-off' virtual meeting. Should this be the case all workers are required to seek authorisation from their line manager before the visit/meeting happens.

#### Expectations of visits

For each visit by the child's social worker there is an expectation that:

- The child will be seen alone
- The child's social worker will check out any potential risks to the placement both through observation and assessment of the current situation.

### **3. Recordings of the visits (reg 37(5)(b))**

The recording, undertaken by the child's social worker, must contain the following:

- Who was present at the visit;
- Whether the child was seen at the visit and whether they were seen alone;
- Whether any other children in the household were seen;
- What was discussed at the visit?

- Were any injuries/illnesses / GP or hospital visits discussed? Were any seen by a social worker
- Were any concerns observed or discussed during the visit?
- What advice was given and were any further support needs identified;
- Whether the adoption social worker is aware of the identified support needs and plans for contacting them;
- Whether there are any actions that need to be taken, other than the provision of support, following the meeting, including any safeguarding actions.

See Appendix 3(a) for the case recording sheet for the child's social worker. It may also be used by the adoption social worker where the child's social worker needs to be informed of any safeguarding concerns. The recording should be in addition to the adoption social worker contacting the child's social worker by email (or their manager in their absence).

Where a concern arises during or between visits the childcare social worker and adoption social worker should communicate with each other at their earliest opportunity and no later than 24 hours after the concern has arisen or been communicated to either worker. If the recipient worker is not available, then their team manager should be informed of the concern.

All recordings of visits and discussions with prospective adopters should be shared between the childcare social worker and the adoption social worker.

#### Long distance placements:

All visits to children in adoptive placements should be undertaken by the childcare social worker and this remains the case when children are placed at a distance from the placing agency. If this is not possible the childcare social worker's line manager, or another member of the childcare team (who knows the child) should undertake the visit on their behalf. Consideration should be given to the distance during the placement planning stage and provisional dates agreed with the childcare worker so that they have enough time in which to make the necessary arrangements.

#### Unannounced visits

These visits should be undertaken at least once during the first three months of placement and thereafter on a quarterly basis. The visits can be undertaken by either the childcare social worker or the adoption social worker (preferably a practitioner who knows the family well and can therefore assess the general mood and atmosphere within the home). There may be more visits if circumstances dictate.

#### Where one prospective adoptive parent works and/or is away from home.

Where one prospective adoptive parent is likely to be away from home in the early stages of the placement the support plan should reflect how the placement will be supported during this period. Where arrangements become known about or begin after the placement has started an open and frank discussion should take place with both adopters to consider the risks and challenges that the remaining partner may encounter. During this period, social workers should take every opportunity to see both adopters together whenever this is possible and as well as being mindful of the impact the absence of one carer may have on the child should also be alert to either party being avoidant or dismissive of any potential challenges they may be facing.

Prospective adoptive parents should be able to understand the importance of taking time to fulfil their regulatory obligations in relation to being available for visits and make the child available for the child’s social worker to see them.

A review of the visits undertaken should take place in supervision with both the child’s social worker and adoption social worker, to ensure that the regulatory requirements are adhered to, and additional visits have taken place where appropriate.

**Appendix 3: Checklist of Adoption Statutory visit (both CSW and ASW)**

This checklist is designed to assist the social worker undertaking the visit with points to consider and could be used to take notes during the visit. A record of the visit should be shared between the childcare social worker and the adoption social worker.

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<b>Discussion</b> How are they coping, any stresses, issues, routines, activities		
<b>Education</b> starting school/nursery/childcare		
<b>Support</b> What access has there been to support services, universal, wider family, support networks? What support may need to be considered <b>ASW</b> Are the adopters aware of all of the available support that can be offered by the region.		
<b>Visits</b> Who else has visited the placement (e.g., health visitor) any issues raised? Who was present at the visit? Was the child seen alone?		
<b>Health visits</b> - (Any GP/Health Visitor /Dentist/Optician/hospital) for any family member.		
<b>Incidents/Issues</b> To include all injuries, health issues and anything arising from the chronology of significant events. Also were any observed during the visit.		
<b>Adopter updates (pre/post-placement)</b> PAR changes, work, health, bereavements. <b>ASW</b> Any checks requiring updating – DBS, medical, work references, LA checks, professional and friend references		
<b>Observations with child during visit/wishes &amp; feelings of the child</b> - Attachments, relationships, routine, siblings, play/activities		
NB: How/when will the content of this visit be shared with the CSW/ASW		
<b>Reflections, observations, concerns?</b>		
<b>Actions needed</b>	<b>Who</b>	<b>When</b>

#### 4. The use of multi-agency chronologies

The use of a multi-agency chronology in an adoptive placement provides the opportunity to identify patterns of behaviour or presentations which may lead to the additional provision of adoption support and / or a conclusion that a safeguarding / child protection referral is required.

Significant events in a child's life need to be seen within the context of their history and environment. The chronology will be used to keep the child's social worker and adoption social worker's up to date with any significant events and will be reviewed by the Independent Reviewing Officer (IRO) at each review.

What is a 'significant event' to be added to the chronology

- Anything that involves a trip to A&E or a minor injuries unit
- Any urgent GP appointment
- Any incident or accident where the child sustains an injury that results in bruising or cuts
- Any illness that is more serious than a slight temperature / cold or tummy upset or lasts for more than three days
- Any time that the child is looked after by someone for over three hours without the AA's knowledge and consent.

The recording must detail which parent/adult is discussing the child with an agency or presenting the child to a medical practitioner.

The chronology will be discussed at:

- The childcare social worker's supervision
- The adoption social worker's supervision
- The child's review.

Where any concerns arise as a result of a review of the chronology, a network meeting should take place to decide upon a course of action

#### **Appendix 4a: Chronology of significant events/information for children placed for adoption**

- *It is the responsibility of individual agencies to maintain their chronology and present for consideration in readiness for the statutory adoption review*
- *The IRO to ensure that these chronologies are considered and discussed within the relevant forums and sent as part of any minutes.*

Child's details:

Forenames	
Surname	
Gender	
Date of birth	
Date of review meeting	

Date	Source of information	Key event	Action taken/required	Analysis	Information recorded by
<b>Completed by:</b>					
<b>Signed:</b>			<b>Date:</b>		

**Appendix 4b: Information for prospective adoptive parents on the safeguarding elements of your role when a child is placed with you, pending the making of an Adoption Order**

When a child is first placed with you as a prospective adopter, the child remains 'looked after' and therefore the responsibility of the local authority (LA). You will have some limited parental responsibility, as set out in your signed PR agreement, but the LA still has the overall responsibility for the child's safety and well-being, including the duty to keep the child safe from harm.

The adoption region, via your adoption social worker and the local authority, via the child's social worker, will work with you to support the placement and ensure that you have all the support you need to provide a safe and secure environment for the child in the weeks and months prior to the making of an Adoption Order.

All of the professionals involved with adoption understand that these can be challenging times for newly created or completed families, and if or, when you identify the need for support (which may be an addition to that contained within your child's Adoption Support Plan) and/or advice you should contact your adoption social worker **without delay**.

You are also required to inform the local authority (the child's social worker and/or the adoption social worker) if there is a 'significant event' in relation to the child placed with you.

### **What is a 'significant event'?**

- Anything that involves a trip to A&E or a minor injuries unit
- Any urgent GP appointment
- Any incident or accident where the child sustains an injury that results in bruising or cuts
- Any illness that is more serious than a slight temperature/cold or tummy upset or lasts for more than three days
- Any time that the child is looked after by someone without the AA's knowledge and consent
- An event that substantially effects the emotional well-being of you and/or your family (e.g., sudden illness or bereavement) and may well impact on your ability to care for the child.

It may be difficult for you to decide whether an event is significant. If in doubt, err on the side of caution and discuss with either your social worker or the child's social worker as soon as possible.

### Recording a significant event

You are not under any legal duty to keep recordings, but it would be very useful, and in everyone's interests, to make a short recording of any significant event, as soon after it has occurred as possible. Provide information of the circumstances leading to the event, the event itself and your actions following the event. You can then email that to both the child and adoption social worker so that they are aware and can offer support if needed.

### Frequency of visits

The child's social worker and your adoption social worker will each visit you and the child within one week of the start of the placement, and thereafter will visit at least weekly until the first adoption review which will take place after four weeks. At the review a plan of visits will be agreed, and it is likely that these will continue at fortnightly intervals dropping to no less than monthly until the second adoption review when a final plan will be agreed that will cover the period up until an Adoption Order is granted by the court.

### Unannounced visits

From time to time either your child's social worker or your adoption social worker will visit you without having made a prior arrangement. The purpose of this visit is to enable the placement to be observed in the ordinary course of the day and to gain a view of the child's routine. Please do not be alarmed by these visits – we are not

trying to catch you out in any way, but we are required to ensure that the child is safe in your care at all times. Your social worker will discuss this visit with you before the first one happens and if you have any concerns, please discuss with them so that they can assist you to further understand their purpose.

## **5. Statutory (and Adoption) Reviews**

### **The legal framework**

*Adoption Agencies (Wales) Regulations 2005*

*Reg 37(4) the adoption agency must carry out a review of the child's case –*

- (a) Not more than four weeks after the date on which the child is placed for adoption ("the first review");*
- (b) No more than three months after the first review; and*

- (c) *Thereafter not more than six months after the date of the previous review, unless the child is returned to the agency by the prospective adopter, or an Adoption Order is made.*

*Reg 37(6) When carrying out a review the adoption agency must visit the child and so far as reasonably practicable ascertain the views of –*

- (a) *The child in the light of the child's age and understanding;*  
 (b) *...the prospective adopter; and*  
 (c) *Any other person the agency considers relevant,*

*In relation to each of the matters set out in paragraph (7)(a) to (f).*

*Reg 37(7) As part of each review the adoption agency must consider –*

- (a) *Whether placed or not, whether the adoption agency remains satisfied that the child should still be placed for adoption;*  
 (b) *The child's needs, welfare, progress and development, and whether any changes need to be made to meet the child's needs or assist the child's development;*  
 (c) *The existing arrangements for contact, and whether they should continue or be modified;*  
 (d) *...the arrangements in relation to the exercise of parental responsibility for the child, and whether they should continue or be modified;*  
 (e) *The existing arrangements for the provision of adoption support services and whether there should be any re-assessment of the need for those services;*  
 (f) *In consultation with the appropriate agencies, the arrangements for assessing and meeting the child's health care needs and educational needs;*  
 (g) *...the frequency of the reviews.*

The statutory review will take place within the timescales set out in the regulations and it is expected that the child's social worker, the adoption social worker and any other relevant professional will attend.

If there are concerns about the placement or there are any unplanned changes to the adoption support plan, then an adoption review needs to be brought forward.

A mid-point 'check-in' should take place between adoption reviews and will involve the IRO, child's social worker and adoption social worker. This would be at around week 10 if between the first and second review. The mid-point check in could take the form of an email exchange, telephone conversation or a brief Teams meeting.

The midpoint check-in will be able to review any plans for an application for the Adoption Order which can be made after week 10. If there are concerns as to the application, the IRO may bring the second review forward.

## **Appendix 5: Checklist of areas the adoption review will need to consider.**

<b>Areas to be considered</b>	
<b>Statutory visits by CSW and visits by the ASW</b>	Are they at the required frequency Were visits both announced and unannounced Were both sets of adopters seen? Was the child seen? Seen alone? Have the recordings of the CSW/ASW been received by the IRO in advance of the review?
<b>Health</b>	Has the child been seen by the GP/Hospital since placement/last review

Areas to be considered	
	<p>Were any of these emergency visits?          Has HV seen the child          Has the child been registered with the optician/dentist          Any new health issues?</p>
<b>Education</b>	<p>Has the child been registered with school/nursery          What is the plan for the child to start school          Any changes to child's identified need</p>
<b>Identity</b>	<p>Is a change of name being considered for the child?</p>
<b>Contact</b>	<p>What are the pre-Adoption Order contact arrangements - have the relevant proformas been completed and signed. Is the post Adoption Order contact plan clear and agreed? (second review)          What arrangements have been made for contact with birth parents, extended family, siblings/foster carers</p> <p>Did a meeting take place between the adopters/ birth parents</p> <p>Has a settling in report been shared with birth parents, if no who will do this</p>
<b>Life Journey Work</b>	<p>Has IRO been provided with draft copy of LJW and Later Life Letter (LLL) from matching panel?          Did Panel provide any feedback in relation to the drafts?</p> <p>Is the SW on track to complete the final version of the LJW and LLL no later than the second review. If not on track IRO/FFSW to escalate to the team manager for the CSW team/FF team manager.</p> <p><b>Have the final versions of the LLL and LJW been completed and provided to adopters (this has to happen no later than second review)</b></p>
<b>Initial adoption review</b>	
<b>Midpoint Review</b>	
<b>Second adoption Review</b>	
<b>Adoption Support Plan</b>	<p>Have any new adoption support needs been identified? Does the ASP need updating?</p>
<b>View of the placement</b>	<p>CSW/ASW view of the placement. How has the child settled, have any concerns arisen. Have any early adoption support needs been identified. Are the adopters booked onto a therapeutic parenting and/or support group. Have there been any significant events or safeguarding concerns. If yes, what action has been taken by the LA or what action needs to be taken?</p>
<b>Child seen at review</b>	<p>Yes/No</p>
<b>Frequency of future stat visits by the CSW</b>	

<b>Areas to be considered</b>	
<b>First adoption review - 4 weeks</b>  <b>Timing of adoption application and Deadline for Annex A</b>	<p>Adopters can make their adoption application after the child has been placed with them for 10 weeks, the adopters' views about proposed timescale for application can be canvassed at the end of the first review with timescales agreed for preparation of the Annex A.</p> <p>Midpoint review – this could check out with key parties, the ASW, CSW and IRO any concerns about the application being made.</p> <p>Second review – confirm position for placements where application not yet made.</p>

### **The role of the IRO in reviews**

- The IRO should have access to the chronology 48 hours before the review takes place
- The IRO will ensure that all relevant professionals will understand the importance of attendance at a review
- The IRO will ensure that the multi-agency chronology of significant events is considered at the review and will ask prospective adopters if they wish to add to the chronology

## **6. The role of family and friends in safeguarding the child**

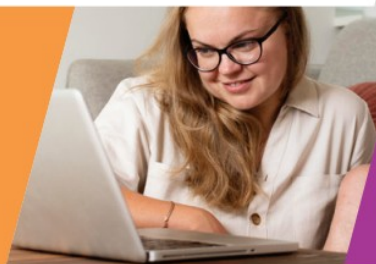
The family and friends' network will have been informed, during the assessment process and reminded upon placement that they have a duty to seek support for the family and/or share concerns as to the child's safety and well-being, if the prospective adopters are unable or unwilling to seek help themselves

The handout 6 should be sent, or given, to:

- All referees
  - All known close family members and friends
- at the start of the placement.



## **Appendix 6:**



## Information for Family and Friends of Prospective Adopters

### Things to consider if you have been asked to be a referee for a family member or friend of someone applying to adopt.

During the adoption process and beyond, adopters receive and benefit from the support of friends and family. All the adoption agencies in Wales provide information and/or training to help raise awareness and understanding of the adoption process, the needs of adopted children and how family and friends can offer the most effective help and support to their friends or relatives who are on their way to becoming adoptive parents.

#### The early weeks and months of a new placement

Whilst these early days provide much joy for new parents, they can also be a challenge as the children begin to settle and parents come to terms with their new roles and the huge changes that have occurred in their lives.

#### How can you help?

As well as offering practical support, part of your role in supporting the new family is to *notice and identify any stresses or difficulties if/when they arise*. As you will know these parents better than anyone you will be able to tell if things get difficult. The adoption agency understands that these times can be challenging and will want to offer support at the earliest opportunity. Therefore, if you do feel things are becoming difficult, we ask that you do the following:

- Encourage the adopters to seek advice and help from their social worker or someone in the agency as soon as possible – and check that they have done so
- Talk to the agency about any concerns you may have – sometimes a conversation can help gain perspective on a situation and may also provide advice on what you can do to help.

#### What we will do...

- We will listen to your concerns and ensure that the right level and type of support is being offered to the family.

As you will know ensuring children are safe at all times is everyone's responsibility. If you are worried in any way, whether this be about the child or the adopter, we advise you to make contact with the regional or voluntary adoption agency, supporting the family, immediately. It is in everyone's interests that newly formed adoptive families get the support they need at an early stage and that any concerns about the child or the parents are raised at the earliest opportunity.

#### Further information on supporting adopters:

- Read the information provided by your adoption region/agency
- Read 'Related by Adoption' by Heidi Argent, 2014

#### How to contact us

If you need any further information or have any queries about adoption, please do not hesitate to contact us.

✉ [contact@adoptcymru.com](mailto:contact@adoptcymru.com)

☎ 029 2087 3927