

CHILDREN AND YOUNG PEOPLE OVERVIEW AND SCRUTINY COMMITTEE

1 DECEMBER 2020

CHILDREN'S SERVICES IMPROVEMENT UPDATE

Report from: Ian Sutherland, Director of People – Children and Adults
Services

Author: Sue Brunton-Reed, Head of Special Projects and Improvement

Summary

This report provides the Committee with a progress update on improvement activity in Children's Social Care Services with a particular focus on assessment and quality assurance.

1. Budget and policy framework

1.1 This report supports the Council Strategy priority "Supporting Medway's people to realise their potential" to achieve the outcome 'Resilient Families'.

1.2 In January 2018, Ofsted launched the Inspection of Local Authority Children's Services' (ILACS), the framework for inspecting local authority services for children in need of help and protection, children in care and care leavers. This framework outlines the responsibilities of both local authorities and Ofsted following an 'Inadequate' judgement

2. Background

2.1 The Ofsted ILACS took place in Medway Children's Services from 15 to 26 July 2019 and the report was published on the 27 August 2019.

2.2 Ofsted provide judgements against three discrete domains and then provide an overall judgement. The overall judgement for Medway was rated inadequate.

2.3 The Department for Education (DfE) issued a statutory direction to Medway Council due to poor performance in Children's Social Care Services and an independent Children's Services Commissioner, Eleanor Brazil, was appointed by the Secretary of State.

- 2.4 The Commissioner has reported to the Secretary of State in December 2019 and July 2020. Her final report is due to be submitted in December 2020.
- 2.5 Over the last six months Eleanor Brazil has been a member of the Improvement Board and has overseen a comprehensive leadership improvement plan with strategic leaders and elected members.
- 2.6 The Council have developed an Improvement Plan for the delivery of services which is overseen, challenged and supported by the Improvement Board, independently chaired by Rory Paterson, a former Director of Children's Services for Thurrock.
- 2.7 The plan was refreshed and updated to take into account the significant work undertaken immediately post ILACS to build the foundations within the services for practice improvement, and the revised plan set out the next stage of improvement, which is to embed the changes and monitor the impact on children and families. The most recent plan was signed off by the Board in July 2020.
- 2.8 The plan is structured into five pillars:
- Quality of Practice
 - Capacity and Capability of our workforce
 - Effective Leadership and Management
 - Quality Assurance and Performance management
 - Partnership and Engagement
- 2.9 As requested by O and S Committee, this report provides a summary of activity and impact in relation to assessment of need, and quality assurance activity to test and monitor impact of our interventions with children and families

3. Assessment of Need

- 3.1 A child and family assessment is carried out on every case which meets criteria for a referral to children's services and is updated whenever circumstances change in any open case.
- 3.2 The purpose of an assessment is to gather sufficient information about the child and family to understand their needs and make a decision about whether the child meets the criteria for a service and what intervention is appropriate for their needs, which may be support under S17 of the Children Act 1989 if the child and family are deemed to be in need or under S47 of the Children Act 1989 if the child is at risk of harm.
- 3.3 Information to inform the assessment is gathered from the family and child/ren, and through information sharing with key relevant professionals who know the child/family which may include, for example, the school, health visitor, GP. Parents are required to give consent to seeking information, but this can be dispensed with if the child is at risk of harm.

- 3.4 An assessment should be completed within a maximum of 45 days from the point of referral, but the timescale should be determined by the needs of the child/family and the presenting need/risk and many will be completed in a shorter timescale. The voice of the child and their wishes and feelings must be ascertained and recorded. The assessment will identify family strengths and what is working well, as well as the issues of concern. The plan which follows the assessment will identify actions to be taken to address the concerns and risks.
- 3.5 The ILAC report noted that too many vulnerable children identified as requiring statutory assessments and interventions were waiting too long to be seen, which led to unassessed risks for many children. Capacity issues were considerable with too few social workers to carry out the work which resulted in an inability to carry out good quality assessments.
- 3.6 The capacity issues were addressed immediately after the July 2019 inspection and additional posts created in the assessment service. This has resulted in caseloads reducing from an average of 32 in July 2019 to 17 currently. The Signs of Safety practice model has been introduced with a programme of training, and this is supporting practitioners to improve the quality of their assessments and facilitating analysis of the information which will improve the ability to plan purposeful interventions.
- 3.7 Essex County Council are working with Medway as a Partner in Practice and carried out a diagnostic of the assessment service in February 2020. They found evidence of management oversight and challenge, and sensible risk management in assessments. Compliance with timescales and timeliness of visits were positive but Essex colleagues felt that this sometimes came at the expense of stopping and reflecting and allowing more time for analysis. It was noted that the quality of assessments still needed to improve with more evidence of genograms and chronologies to support understanding of the family and their history.
- 3.8 Audits which were carried out in June 2020 found that out of 30 cases audited, 21 (73%) were graded Requires Improvement or Inadequate in relation to the quality of assessment. These assessments continued to lack analysis and failed to record the child's voice. The good assessments, 7 (23.5%), evidenced timely completion, addressed current concerns as well as historic information, children were considered individually, their current and future needs were well-thought-out, risk was identified, other agencies contributed, and the assessment was shared with parents.
- 3.9 The first Ofsted Monitoring Visit took place in August 2020 and the focus of the visit was on the quality of initial decision making, assessments and planning. The inspectors found that assessments are completed promptly, with clear evidence that children are seen, and that their views are considered. Social workers know the children well. Assessments are detailed, but further work is required to improve the analysis of risk and need. Caseloads, particularly in the assessment teams, have reduced significantly,

and this is enabling social workers to see families soon after referral and at regular times during the assessment. The inspectors noted that the practice model had been introduced but is yet to be fully embedded.

- 3.10 Timeliness of visits and completion of assessments are kept under review at performance clinics. Currently 96 % of assessments are completed within 45 days and 82% of assessment visits under S47 are recorded as completed within 1 working day. This is kept under review by managers who check that children have been seen, even if the visit has not been recorded within timescale.
- 3.11 The service is working to a plan which sets out actions in response to both the Essex diagnostic and the Ofsted Monitoring Visit. There is close management oversight of the quality of assessments and managers are expected to support their practitioners to improve the analysis of risks and needs and utilise available risk assessment tools.

4. Quality Assurance Activity

- 4.1 The July 2019 ILACs found that although a comprehensive audit programme was in place, there was a significant disparity between auditors about what good practice looks like. The findings were often overly optimistic, with key areas of poor practice and delays in progressing work being missed in too many cases. The often-inaccurate audit findings were leading to false evaluations about the quality and effectiveness of social work practice, which meant that senior leaders were not aware of the widespread and serious concerns.
- 4.2 Following the inspection, the Quality Assurance Framework was reviewed and revised, and the audit tool was re-designed with a stronger focus on learning and reflection. The updated Framework was agreed by the Improvement Board in February 2020.
- 4.3 Regular auditing is now an agreed monthly activity outlined in the Quality Assurance Framework. Audits are undertaken by Team Managers, Group Managers, Advanced Practitioners, QA Manager, Heads of Service, and Assistant Director. The audit process includes a discussion with the allocated case worker, and if appropriate their Team Manager. Auditors are asked to review the previous six months of case history, but to consider historical practice which continues to impact on the child. All audits are currently moderated.
- 4.4 Training has been provided for auditors to support improvement and consistency of judgements.
- 4.5 An overview report of the audits undertaken in June 2020 evidenced compliance with processes and some evidence of emerging signs of improving practice, in relation to positive impact on some individual children's lives. Social Workers continue to demonstrate that they know their children and understand the need to represent their views and their lived experiences

in the child's electronic record. Areas for development included direct work with children and management oversight.

- 4.6 The Ofsted Monitoring Visit in August 2020 found that audits were appropriately graded following the moderation process, although there was still some over optimism on the part of first auditors.
- 4.7 An overview of audits carried out over the last three months indicate some level of improvement. Whereas the audit grading previously indicated some inadequate levels of practice across the service, we are now seeing more grading of requires improvement and importantly, these grades are holding following moderation. It is important to recognise that the auditing process is now more robust, in that our moderators are not down grading the first auditor's grades with the same level of frequency. This indicates that managers are aware of the deficits in practice and are addressing the areas where practice is not so strong and will therefore be better placed to support practitioners to continue to improve practice for the children across Medway.
- 4.8 A Quality Assurance and Performance Board (QAPIB) chaired by the Assistant Director, has been set up to meet six-weekly, which oversees and challenges all aspects of the Improvement Plan.
- 4.9 The DCS and Lead Member are participating in regular visits to front line teams and are observing social workers practice as part of this process of engagement. The learning from these visits is fed back into the Quality Assurance and Performance Board, and actions are agreed to support improvement.
- 4.10 A revised performance reporting framework has been developed and this is overseen by senior leaders including the Lead Member, the Leader of the Council and the Chief Executive, who hold monthly challenge meetings with the Director and Assistant Director. The monthly dashboard is a standing item on the Improvement Board. Monthly reports have been revised to provide a more comprehensive overview of each service area and the Assistant Director provides a narrative on monthly performance for the Improvement Board and other strategic arenas, which provides further analysis and explanation for performance against individual indicators.

5. Sustainability of Improvements in these areas

- 5.1 The Quality Assurance activity outlined above will support the service and its senior leaders in maintaining oversight of improvement and ensuring the steps taken are having the required impact on children and families and can be sustained.
- 5.2 A key feature of sustainable improvement is a permanent workforce, and recruitment and retention continues to be a focus of activity. Maintaining lower caseloads and supporting workers with the right conditions for social work to flourish, is essential. The indicators are currently positive with the agency rate

of workers having reduced from 40% in April 2020 to 22.9% at the end of October. Nine workers have converted from agency to permanent roles.

6. Risk management

Risk	Description	Action to avoid or mitigate risk	Risk rating
<p>Actions from diagnostic reports and audit activity are not implemented in a timely manner, and do not achieve the anticipated impact</p>	<p>If the actions within the Improvement Plan and any other diagnostic activity are not implemented in a timely manner, then Medway's vulnerable children & young people may remain at risk or living in situations of harm.</p> <p>This is an enhanced risk due to the Covid restrictions which mean that purposeful direct work with families is more challenging due to limited face to face contact with them.</p>	<p>The Quality Assurance and Performance Board as well as the Improvement Board will monitor progress and will hold people to account if progress is not positive.</p> <p>Regular management oversight within the service, and increased quality assurance activity will provide assurance of individual children's safety.</p> <p>Clear Covid Operating Procedures which set out arrangements for seeing and maintaining contact with children, and regularly reviewing the level of risk.</p>	<p>B2</p>
<p>Recruitment & retention</p>	<p>There are ongoing challenges relating to recruitment & retention of Social Workers.</p>	<p>A Workforce Development Strategy has been developed. A company has been commissioned to develop a brand to support recruitment of staff and identify Medway as an employer of choice. HR continues to actively pursue the recruitment strategy during this time and offer online interviews. Nine staff have converted from agency to permanent roles as part of this strategy.</p> <p>An engagement forum has been introduced and continues virtually under current arrangements to support staff and ensure they recognise they are valued and their views are welcomed.</p>	<p>C3</p>

Risk	Description	Action to avoid or mitigate risk	Risk rating
Financial Implications	<p>Improving Children's Services has had significant financial implications. The risk is that the authority cannot continue to maintain the necessary long-term investment in the service which supports sustainable improvement to Children's Social Care. This will create additional budget pressures for the authority.</p> <p>The additional obligations to maintain a service during the Covid pandemic will also have financial implications.</p>	<p>The Local Authority and its partners will commit to support the improvement journey, whilst ensuring efficient use of resources and identifying opportunities to achieve savings and efficiency in service delivery.</p> <p>Ensure an accurate record is maintained of all expenditure directly relating to Covid pressures.</p>	B2
Caseloads	<p>Whilst additional resource has been introduced to reduce caseloads, there is a risk that the pressure of the Covid restrictions will create additional stress in families and lead to an increase in the number and complexity of referrals, which will require further Social Work resource.</p>	<p>Ensure engagement with partners and community support resources is increased to support provision of services to children and families and reassure all that safeguarding children is a priority for Medway. Maintain oversight of contact and referral data and predict and plan for any upward trend.</p>	B2

7. Implications for Looked After Children

- 7.1 The Improvement Plan will support an improved service for Medway's Looked After Children and the work with Corporate Parenting Board provides for increase scrutiny and challenge.
- 7.2 Practitioners are enabled to prioritise permanency planning and direct work, which will support better outcomes for our children in care.

8. Financial implications

- 8.1 Improving Children's Services has created additional budget pressures and £7.6m of additional funding has been made available to the service through the 2020-21 budget setting process and the improvement action plan. The

additional funding has been made available, to substantially increase the staffing establishment for Children's Social Care (including the budgets which form part of Children's Social Care but reside within Children's divisions) as well as the non-staffing budgets, such as budgets that relate to financial support for care leavers as an example.

- 8.2 There is a need for urgency and pace, to demonstrate that the Council has the capacity to make the required changes.
- 8.3 The service will continue to work with colleagues from across the Council to identify opportunities to use resources more effectively, in order to deliver service improvement including working closely with corporate finance colleagues to ensure accurate and robust forecasting.

9. Legal implications

- 9.1 The Secretary of State for Education has powers in the Education Act 1996 and the Children Act 2004 to appoint a Commissioner for Children's Services and for the Commissioner to make directions to the Council to ensure the children's social care functions are performed to an adequate standard.

10. Recommendations

- 10.1 The Committee is asked to note the content of this report and the improvement steps taken so far in relation to assessment and quality assurance.

Lead officer contact

Lee-Anne Farach, Assistant Director, Early Help and Children's Social Care,
01634 331215, leeanne.farach@medway.gov.uk

Sue Brunton-Reed, Head of Special Projects and Improvement, 01634 334160,
sue.bruntonreed@medway.gov.uk

Appendices

None

Background Papers

None