

**CORPORATE PARENTING BOARD**

**1 February 2016**

**SUNDERLAND CHILDREN'S SERVICES PROGRESS REPORT**

**Report of the Associate Director, Children's Safeguarding**

**1. Purpose of report**

This report summarises key messages on progress of the Learning and Improvement plan and summarises key messages from current Board Performance report. The Learning and Improvement plan and the performance report include full comments.

**2. Where are we trying to get to**

Services need to move to a point where risk to children is recognised consistently; is responded to in a proportionate and timely way, and action is taken by the team around the child that reduces risk. Decisions need to be proportionate but timely to escalate intervention where sufficient progress is not made to provide safe permanent care with family or in their current placement if elsewhere.

By doing these things we will improve short and longer term outcomes for children and young people. We will recognise that teenagers also need security and stability and will be helped to establish relationships that support them into adulthood. The actions in the Learning and Improvement plan are designed to help us achieve these outcomes.

**3. Progress on priorities of the Learning and Improvement Plan**

There is no significant change in the Rag rating for priorities. A number of further tasks have been completed but it is too early to see the impact of these for children.

Since the last report work has continued to draft a structure and cost staffing for children's services.

The senior manager structure has been agreed and the four Associate Director posts have been advertised.

For social care teams the proposed structure includes additional front line managers and practitioners. The costing and agreement of the final number of posts is not yet agreed but it has been agreed that recruitment to front line posts should commence as these posts are currently covered by agency staff.

There is a meeting this week to create a recruitment timetable and set targets for social care practitioner recruitment.

The number of children in need receiving a service remains above the national and statistical neighbour average. The number of looked after children continues to reduce. The placements for looked after children are now reviewed and need to progress permanent placements identified where appropriate. The review of children in voluntary care [S20] has identified children where there is a need to escalate intervention leading to a significant increase in children subject to child care proceedings. The number of children in care through voluntary agreement has therefore fallen but remains higher than similar authorities. The increase in proceedings will create workload pressures that will gradually move through the teams but will provide more certainty and security for these children about their future care.

Both the Fostering panel and the Adoption panel have updated terms of reference to bring practice in line with national requirements. Regular meetings are in place between the Head of LAC services and the independent Chairs and panel advisors. There is further work needed to quality assure reports to these panels which will be supported when the permanence lead is recruited to.

Advertising has now commenced for foster carers and adopters and five foster carers have already been recruited from local IFAs. A foster to adopt strategy is now in place and so far we have two approved foster to adopt carers. Placement supply for looked after children needs to increase to support local placement. Fostering recruitment will need to support this. There is now good progress to make available more suitable accommodation for care leavers with an additional property offering five self-contained flats coming available in the next two months.

The care leavers' service has identified a town centre base for the service to move to making it more accessible to young people.

Overall the social work service is maintaining better capacity to embrace improvement needed. Cases are allocated and children are seen consistently. For children in most need planning and decision making is improved. Performance information is needed to enable monitoring of children subject to a child in need plan to ensure that improvement can be evidenced for all children.

The operation of MASH and the service for care leavers are the most vulnerable areas showing a slower rate of improvement. Decision making has good oversight from middle managers. Performance management and quality assurance is embraced by middle managers but not yet embedded in front line manager practice. There is a greater focus on quality of practice which is being reinforced through practice focused sessions with front line managers and practitioners each month.

### **3.1 Priority 2 Early Help**

An early help strategy group has been established that is currently reviewing current early help activity and families receiving assistance. A draft future structure and processes to access help to maximise impact and accessibility are in place. A step up/down process has been put in place with social care teams to ensure children get the right help at the right time and to support throughput of work for social care teams. Reporting on this could usefully be included in routine data reporting.

### **3.2 Priority 1 recruitment and retention of social workers**

Currently 88% of established social work posts [115] are filled by permanent staff. There are, in addition, currently 79 agency social workers. Work is progressing to outline the service needs going forward for consultation and agreement. The proposed structure will increase the number of established social work posts and the front line management capacity to provide management oversight and decision making to sustain improvement. The proposed establishment is currently being costed. It has been agreed recruitment to front line manager and practitioner posts should commence as many of these posts are covered by agency staff at present. A timetable for recruitment should be agreed in the coming week as it likely to be most effective between January and May 2016.

### **3.3 Priority 3 improving quality of assessment and care planning**

The business processes in the contact and triage service are being reviewed to ensure they consistently reflect the required practice standards. We also want to bring the influence of partners into this early decision making about threshold more effectively. This is important in order to develop a shared understanding and application of appropriate thresholds across the partnership. A dedicated service manager has been recruited to implement these changes as quickly as possible. The Mash reference group will review and approve proposals on the 14<sup>th</sup> January.

Decisions about referrals needing a social care response are timely at 99%. This is followed by more timely allocation of referrals for assessment. However managers are struggling to ensure work is then progressed in a timely way to a consistent good standard. Assessment timeliness is remains poor and contributes to growing workloads for workers.

Some performance data is being provided but this is not yet well used by managers particularly in MASH to drive improved timeliness. This is being addressed by providing additional management resource and recruitment of two new interim managers for the assessment teams.

The service manager has been relieved of additional duties to concentrate on driving quality and timeliness through the assessment teams. By auditing work we can see that current quality and timeliness of practice is inconsistent in these teams. Feedback from partners also indicates there is more work needed to bring the service to a consistently good level.

### 3.4 Performance

The workload for social care teams remains stable. However, the number of contacts, although remaining high have reduced in November and December. Table 1 provides a comparison of the number of contacts received in Sunderland [Child population: 54,500] with Leeds [Child population: 183,000]. The comparison shows that although the population of Sunderland is less than a third of that of Leeds more contacts are made to the Sunderland MASH than the Leeds Front Door Service. Between 1 July and 31 October Sunderland dealt with 8,392 referrals (105 a day) compared with 6,916 in Leeds (86 a day).

|            | July | August | September | October | November | December |
|------------|------|--------|-----------|---------|----------|----------|
| Sunderland | 2351 | 1817   | 2253      | 1971    | 2012     | 1663     |
| Leeds      | 1903 | 1380   | 1833      | 1800    |          |          |

Table 1

In this period Leeds dealt with 3,727 referrals (a contact to referral rate of 54%). Sunderland dealt with 1,488 referrals (a contact to referral rate of 18%). This highlights that many contacts do not meet the threshold for social care intervention and considerable resource is going into logging this information onto the system without any benefit to children and families.

The volume of contacts is impact on the ability of the Triage and MASH services to provide a safe, appropriate and timely service. The number of contacts being made suggests that there is a mismatch of expectations of partner agencies and the social care professionals identifying social care referrals. These data highlights that any work to strengthen front door processes should also consider the understanding and application of thresholds across all agencies.

The re referral rate has reduced but remains very high. Re referrals within three months have been sampled and there is evidence that practice standards are inconsistent with some evidence that some cases were closed too quickly.

Performance to ensure that Initial Child protection conferences take place within 15 days has improved after a fall in November.

Improved performance on visits to children with a CP plan and meetings of core groups continues.

Partner agencies have been encouraged to follow the agreed escalation process to resolve issues as this has not been followed consistently as this will help to support consistent practice.

Compliance with supervision frequency has dropped in two child protection teams due to absence of managers. Compliance with supervision arrangement in the MASH teams remains poor due to absence and turnover of managers.

### **3.5 Priority 4 Ensuring high quality of support for looked after children and effective permanence planning**

Processes now used to support more timely decisions about permanence of care for all children. Child Protection Conference chairs have been encouraged to identify drift if sustainable improvement is not seen. Independent Reviewing Officers are expected to establish a permanence plan for all looked after children by the second review. Reduced workloads for the team have been maintained. Independent Reviewing Officers and Child Protection chairs have continued to make better and more frequent use of escalation to address practice issues. A Quality Assurance process has also been suggested to support improvement in their practice.

Public Law outline tracker for children where proceedings are being considered is in place and reviewed 6 weekly to ensure drift is avoided. Currently 70% have been further reviewed and the remaining children will be reviewed during January. A tracker is also in place to monitor children in proceedings to avoid delay and this is managed by the legal team.

Post adoption support is taking shape with the establishment of a therapeutic parenting programme which will be run twice a year and three workers have been trained in use of "Theraplay" to support developing attachment between children and their adoptive parents. Agreement has been reached with Health colleagues to identify improved availability of mental health support for looked after children so that therapeutic needs are better addressed prior to adoption and to support children in other placements.

### **3.6 Performance**

Numbers of looked after children have dropped further this month to 538. This is from a peak in July of 598. 28% of children are placed outside the LA area of these 122 are placed primarily due to local capacity of placements. A fostering recruitment strategy has commenced.

Placement stability remains good. The timeliness of reviews for looked after children have dropped this month due to three reviews being held 4 days late.

### **3.7 Priority 5 Putting the child's voice at the centre of practice**

The practice standards and assessment framework emphasise the need for real understanding of children's day to day experience. This will be monitored by audit. Visits are monitored to support regular contact with children. However we do need to track contacts to children 'in Need' our largest group of children receiving services.

Training, planned for January, will support quality of engagement and direct work with children and young people. The sessions will be supported by young people.

### **3.8 Priority 6 Supporting care leavers in the transition to adult hood**

The care leavers' service started from a very low base. Training is being provided to improve awareness; standards of practice and engagement with young people.

### **3.9 Performance**

The number of young people in touch with the service has not increased at the rate we would hope. Consequently the rate of young people NEET is high and the percentage of young people in suitable accommodation low. Re engaging care leavers is proving a challenge and will take further time. There is an improving supply of suitable accommodation to meet current demand and the matching process is being improved so that young people feel more engaged in choice. A post 16yrs education and training and employment worker has been appointed and with help from connexions is engaging young people in employment education and training. Five apprenticeships have been identified for care leavers to improve opportunities.

Further meetings with Health colleagues have been agreed to develop more integrated pathways to support for young people where there is self-harm or risk of suicide. There is an urgent need to target this group with services designed to build resilience and therapeutic intervention for young people with possible depression and high levels of emotional and behavioural difficulty.

### **3.10 Priority 7 Embed performance management and quality assurance and governance to sustain improvement**

Some performance reports are now available to front line social care managers and more senior managers to drive improvement.

The culture of performance management is rather new and information is only now beginning to be used in management meetings. More work is needed with front line managers particularly in MASH to give them confidence about using data. A fuller monthly report on performance data is planned but not yet delivered due to the capacity of the management information team which is being addressed.

This month in addition to previous dip sample audit a routine case audit programme has been launched. Each manager will complete audit to embed this as a method of management oversight to drive quality of practice. The audit focus is on quality of practice and reflects the practice standards launched this month. For this reason I do not expect audit findings to reflect a good picture initially. The IRO service has also been encouraged to establish quality audit of CP and IRO practice.

Tri ex procedures have been updated and have now gone live.

The Corporate Parenting Forum has a work plan and is supported by young people from the CiCC.

The Scrutiny panel has been established and are beginning to plan their work programme. The DCS and Associate Director will provide a briefing to the

panel which will assist the panel in further planning work for the coming months.

#### **4. Challenges and action proposed to address these**

1. The recruitment plan needs to be agreed to deliver the increased social work staff so that delivery can commence in January to reduce agency costs.
2. The current arrangements covering contact and triage need to be strengthened to deliver a better functioning MASH by March.
3. The assessment teams currently part of the MASH need to shift focus to delivering timely good quality assessment and purposeful plans. The dedicated service manager will now be able to give attention to auditing practice and performance. Evidence of improvement needs to be seen during January and February.
4. The Leaving care team are ambitious to deliver improvement but the pace is not sufficient. I will further review the action plan for the service to identify how we can accelerate establishing and sustaining contact with all care leavers.
5. There is agreement with Health colleagues on need to urgently develop of multi-agency strategy to address self-harm and suicide.
6. The improvement in quality of practice in social care will be supported by promoting good practice standards and performance management and quality assurance. We will coach front line managers and practitioners to embrace these approaches through the practitioner's forum. The need to put additional resource into the management information teams needs to be settled and provided so that the service can commission user friendly reports that can be used by busy managers.
7. More progress is needed to ensure that Child Protection chairs and Independent Reviewing Officers embrace good practice standards and use escalation to drive permanence and timely decision making for children. The IRO manager will take this forward by encouraging Chairs and Independent Reviewing Officers to participate in activities designed to support good practice and by implementing quality assurance processes within the service.

Ann Goldsmith, Interim Associate Director Safeguarding.

