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## **FULL COUNCIL - INFORMATION REPORT**

Date Written	October 2018
Report Author	Annabel Lloyd
Service Area	Children's Services
Exempt/Non Exempt	Non exempt
Committee Date	24 <sup>th</sup> October 2018

To: *Mayor, Ladies and Gentlemen*

### **Children's Services Inspection**

#### **1.0 SUMMARY OF THE REPORT**

1.1 This report summarises the findings of the Care Inspectorate Wales (CIW) Inspection of Children's Services in April and May 2018. The resulting Improvement Action Plan can be found at Appendix 1.

#### **2.0 INTRODUCTION AND BACKGROUND**

2.1 On 18<sup>th</sup> September Social Services Scrutiny Committee received the following summary of strengths and areas for improvement included in the Inspection report.

2.2 The inspection focused on the effectiveness of local authority services and arrangements to help and protect children and their families including:

- the experience and progress of children on the edge of care, children looked after and care leavers including the quality and impact of prevention services, the effectiveness of decision-making, care and support and pathway planning;
- the arrangements for permanence for children who are looked after and children who return home including the use of fostering, residential care and out of local authority area placements; and
- the quality of leadership, corporate parenting and governance arrangements in place to determine, develop and support service sufficiency and delivery particularly in relation to looked after children, care leavers and their families.

2.3 While the main focus of the inspection was on the progress and experience of children and young people looked after and care leaver's transition into adulthood, the inspection included a focus on children, young people and their family's engagement with:

- Information, Advice or Assistance (IAA), preventative services;
- Assessment/reassessment of needs for care and support and care and support planning; and
- Child protection enquiries, procedures, urgent protective action, care and support protection plans.

2.4 Inspectors read case files, interviewed staff and administered a staff survey, interviewed managers and professionals from partner agencies. Inspectors talked to children and their families wherever possible. Young people and care leavers attended two focus groups.

2.5 On 30<sup>th</sup> August 2018, CIW published their report having identified the following strengths and areas for development or improvement:

Strengths	<ul style="list-style-type: none"> <li>• Dedicated workforce, committed to promoting best outcomes.</li> <li>• Safeguarding procedures and processes were understood and followed by staff.</li> <li>• There is good corporate support for children's services from elected members and the wider council.</li> <li>• The Multi Agency Safeguarding Hub (MASH) delivers an integrated approach.</li> <li>• Recognition of work invested in making the changes required by the Social Services and Well-Being (Wales) Act 2014.</li> <li>• Judgements on eligibility are clear.</li> <li>• Inspectors recognised that the management team were alert to pressure areas and had developed plans for implementation to address those areas and were being supported by the wider council in that.</li> <li>• Considerable focus on strengthening preventative support for families.</li> <li>• Good evidence of partnership working with the third sector with examples of support and advice for parenting especially with fathers through the "DADS programme".</li> <li>• Positive practice where children and young people were proactively engaged in producing their assessments (but consistency required).</li> <li>• Children with disabilities - CIW reviewed a small number of assessments but those seen were of a good quality. Evidence was also seen of the offer to parent/carers of carer's assessments.</li> <li>• Inspectors saw evidence of care and support plans being developed in a timely manner and reviewed in accordance with requirements. They saw some very good examples with clear analysis, in-depth risk assessments, transfer or closure</li> </ul>
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	<p>summaries and management oversight was evident in the files (but needs to be consistent).</p> <ul style="list-style-type: none"> <li>• Inspectors saw joint work with partners such as Youth Offending Service, substance misuse agencies and education services in supporting older children to remain at home.</li> <li>• Good evidence of the young persons and families' contribution to outcome focused plans that with intensive support and a multi - agency response prevented young people becoming looked after.</li> <li>• Efficient mechanisms in place including panel and Public Law Outline to ensure timely effective decision making.</li> <li>• Inspectors saw evidence of working with partners to develop therapeutic services, improved life journey work and improved housing and employment options for looked after children.</li> <li>• Overall, services were delivered by a competent well qualified workforce that was committed to achieving good outcomes for children and families. Despite financial and resource pressures, teams were focused on the stability, safety and wellbeing of looked after children, care leavers and their families.</li> </ul>
Areas for development	<ol style="list-style-type: none"> <li>1. Improve arrangements for transfer of cases from Intake.</li> <li>2. Greater consistency in the quality of assessments including detailed analysis of strengths and risks.</li> <li>3. Further development of Pathway Planning to meet the requirement of the Social Services and Well Being (Wales) Act 2014, particularly in relation to Personal Advisors and When I am Ready guidance.</li> <li>4. Further work is required to ensure partner agencies have a clear and shared understanding of significant harm when making referrals to the Multi Agency Safeguarding Hub.</li> <li>5. Further development is required to embed the risk management model and the multi-agency risk assessment form (MARAF) with staff and partners, with assurance mechanisms to ensure compliance, quality and impact of services to young people and families.</li> <li>6. Ensure strategic plans are owned and understood by staff and are used to drive practice.</li> <li>7. Further work is required to develop a more comprehensive quality assurance system that strengthens the link between strategy and improving practice. This should also include improved focus on the frequency, consistency and quality of front line supervision.</li> <li>8. Continue to prioritise the workforce strategy to focus on staff retention and the timely recruitment of experienced staff.</li> <li>9. Review panel arrangements to ensure there is clarity of purpose, timeliness of decision making and engagement from partners.</li> <li>10. There is a need to strengthen the transfer of cases between teams. The development of a formal transfer policy is currently being undertaken and this needs to be embedded throughout practice and monitored as part of the quality assurance framework.</li> </ol>

### 3.0 POST INSPECTION IMPROVEMENT PLAN

3.1 The post inspection improvement plan can be found at Appendix 1.

### 4.0 FINANCIAL IMPLICATIONS

4.1 Children's Services have provided reports to Budget board, having experienced pressure in relation to high cost placements for looked after young people. The work within the improvement plan will be delivered within budget limits.

### 5.0 INTEGRATED IMPACT ASSESSMENT

	Positive Impacts	Negative Impacts	Not Applicable
<b>1. Merthyr Tydfil Well-being Objectives</b>	4 of 4	0 of 4	0 of 4
<b>2. Sustainable Development Principles - How have you considered the five ways of working:</b> <ul style="list-style-type: none"><li>• Long term</li><li>• Prevention</li><li>• Integration</li><li>• Collaboration</li><li>• Involvement</li></ul>	5 of 5	0 of 5	0 of 5
<b>3. Protected Characteristics</b> <i>(including Welsh Language)</i>	0 of 10	0 of 10	10 of 10
<b>4. Biodiversity</b>	0 of 1	0 of 1	1 of 1
<b><u>Summary:</u></b>  The main positive impacts are the development and improvement of services for children and young people.  There are no negative impacts.			

**LISA CURTIS JONES**  
**CHIEF OFFICER (SOCIAL SERVICES)**

**COUNCILLOR DAVID HUGHES**  
**CABINET MEMBER FOR**  
**SOCIAL SERVICES**

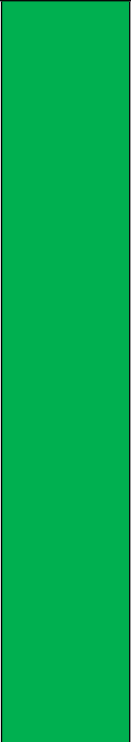
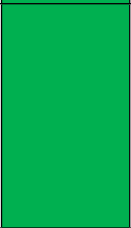
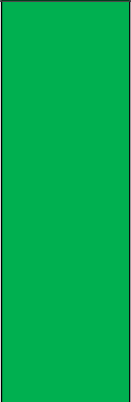
<b>BACKGROUND PAPERS</b>		
<b>Title of Document(s)</b>	<b>Document(s) Date</b>	<b>Document Location</b>
<b>Does the report contain any issue that may impact the Council's Constitution?</b>		No

***Consultation has been undertaken with the Corporate Management Team in respect of each proposal(s) and recommendation(s) set out in this report.***

**Children's Services Post Inspection Action Plan 2018-19**

CIW Area for Improvement	Outcome	What needs to happen?	By who and by when?	BRAG	Update/Review
<p>1. Improve arrangements for transfer of cases from Intake</p> <p>10. There is a need to strengthen the transfer of cases between teams. The development of a formal transfer policy is currently being undertaken and this needs to be embedded throughout practice and monitored as part of the quality assurance framework.</p>	<ul style="list-style-type: none"> <li>Manageable caseloads</li> <li>No delay in transfer</li> </ul>	<ul style="list-style-type: none"> <li>This has been achieved under the <u>Prevention of Delays in Allocations</u> process implemented ahead of the inspection, accompanied by improved working with Agency provider. But we will: <ul style="list-style-type: none"> <li>Review <u>The Case Transfer Policy</u></li> </ul> </li> </ul>	<p>PO for EH and W-B</p> <p>01.11.18</p>		No further delays in transfer reported to Children's Services Management Team.
<p>2. Greater consistency in the quality of assessments including detailed analysis of strengths and risks.</p>	<ul style="list-style-type: none"> <li>Practice standards in assessment and analysis are documented and understood.</li> <li>Staff are trained and supported to achieve these standards.</li> <li>Managers support consistency in their</li> </ul>	<ul style="list-style-type: none"> <li>Quality Assurance group will oversee development of a <u>guide to staff about assessment and analysis</u> – setting out what good looks like.</li> <li>Quality Assurance group will <u>develop a standard tool to</u></li> </ul>	<p>Chair of QA Group</p> <p>01.02.19</p>		

	<p>sign off.</p> <ul style="list-style-type: none"> <li>Assessment quality improves and greater consistency.</li> </ul>	<p><u>inform manager sign off.</u></p> <ul style="list-style-type: none"> <li>Quality Assurance Group will <u>provide training for colleagues with a training needs analysis for commissioning future training and coaching.</u></li> </ul>			
<p>3. Further development of Pathway Planning to meet the requirement of the Social Services and Well Being (Wales) Act 2014 (SSWBA), particularly in relation to Personal Advisors and When I am Ready guidance.</p>	<ul style="list-style-type: none"> <li>Care Leavers are supported by personal advisers from 16 years.</li> <li>Care Leavers report satisfaction with the support.</li> <li>Increased numbers of Care Leavers are in stable accommodation, employment, education and training.</li> </ul>	<ul style="list-style-type: none"> <li>Business case to improve the specification and enhance the provision to include 16+ PA support.</li> <li>Review When I am Ready publication with care leavers, staff and providers and re-launch.</li> </ul>	<p>PO Permanence</p> <p>01.12.18</p>		
<p>4. Further work is required to ensure partner agencies have a clear and shared understanding of significant harm when making referrals to the Multi Agency Safeguarding Hub.</p>	<ul style="list-style-type: none"> <li>Information sharing in C1 is timely and appropriate.</li> <li>Partners are clear and can access information and advice.</li> </ul>	<ul style="list-style-type: none"> <li>Discussion with partners about this at Safeguarding Board on 27.09.18.</li> </ul>	<p>PO for Safeguarding</p> <p>01.12.18</p>		
<p>5. Further development</p>	<ul style="list-style-type: none"> <li>Consistent</li> </ul>	<ul style="list-style-type: none"> <li>Practitioner led</li> </ul>	<p>PO for EH</p>		

<p>is required to embed the risk management model and the multi-agency risk assessment form (MARAF) with staff and partners, with assurance mechanisms to ensure compliance, quality and impact of services to young people and families.</p>	<p>approach to assessment and management of risk.</p>	<p>programme of peer support groups is established.</p> <ul style="list-style-type: none"> <li>• The MARAF will be included in all case audits.</li> <li>• Managers meet to discuss outcomes of the peer support groups to consider further learning and impact of the MARAF.</li> <li>• Independent Chairs will monitor at Child Protection Conference, giving early alert to PO of any lapse.</li> </ul>	<p>and W-B and PO for Safeguarding</p> <p>31.03.19</p>		
<p>6. Ensure strategic plans are owned and understood by staff and are used to drive practice.</p>	<ul style="list-style-type: none"> <li>• Staff contribute to staff briefings where we develop our service strategy.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue staff briefings.</li> <li>• Develop a one minute guide for staff meetings.</li> </ul>	<p>Head of Service</p> <p>01.12.18</p>		
<p>7. Further work is required to develop a more comprehensive quality assurance system that strengthens the link between strategy and improving practice. This should also include improved focus on the</p>	<ul style="list-style-type: none"> <li>• Practice continues to improve.</li> <li>• We understand service user experience and how to improve outcomes.</li> </ul>	<ul style="list-style-type: none"> <li>• Quality assurance Framework is signed off and being implemented.</li> </ul>			



frequency, consistency and quality of front line supervision.					
8. Continue to prioritise the workforce strategy to focus on staff retention and the timely recruitment of experienced staff.	<ul style="list-style-type: none"> <li>MT Children's Services is an attractive place to work and develop.</li> </ul>	<ul style="list-style-type: none"> <li>Workforce strategy has been signed off and will continue to be developed.</li> </ul>	HR Workforce Adviser		
9. Review panel arrangements to ensure there is clarity of purpose, timeliness of decision making and engagement from partners.	<ul style="list-style-type: none"> <li>One multi-agency panel to coordinate work.</li> </ul>	<ul style="list-style-type: none"> <li>Revised terms of reference to be developed and agreed.</li> <li>Revised Panel arrangements to be implemented.</li> </ul>	Head of Service 01.12.18		