

## **SLOUGH BOROUGH COUNCIL**

**REPORT TO:** Overview & Scrutiny Committee/Education & Children's Services Scrutiny Panel

**DATE:** 12 January 2016

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**WARD(S):** All

**PORTFOLIO:** Councillor Pavitar Mann (Commissioner for Education and Children)

### **PART I** **FOR SCRUTINY**

#### **UPDATE FROM SLOUGH CHILDREN'S SERVICES TRUST: OUTCOME OF TRUST BENCHMARKING AUDIT**

##### **1 Purpose of Report**

- 1.1 To update Members on the findings of the benchmark audit and progress on implementation of the recommendations.
- 1.2 To provide an opportunity for Members to consider how the council can best support this work.

##### **2 Recommendations**

- 2.1 That the joint Overview & Scrutiny Committee/Education & Children's Services Scrutiny Panel:
  - a) note that the service previously provided had not been good enough;
  - b) consider Slough Children's Services Trust's plans for improvements to the Service; and
  - c) discuss the opportunities for how the council's services can further support the most vulnerable children in the borough.

##### **3. The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan**

##### **3a. Slough Joint Wellbeing Strategy Priorities**

Priorities:

- Safer Communities
  - Carrying out the statutory role of the local authority to provide services for children in need, to safeguard them and look after children whose parents are unable to do so.

### 3b. **Five Year Plan Outcomes**

#### **Outcome 5: Children and young people in Slough will be healthy, resilient and have positive life chances**

The establishment of the SCST aims to make Slough children's services one of the best providers of children's social care in the country, providing timely, purposeful support that brings safe, lasting and positive change.

### 4 **Other Implications**

#### (f) Financial

There are no financial implications specific to the recommendations in this report.

#### (g) Risk Management

There are no specific risks associated with this report.

#### (h) Human Rights Act and Other Legal Implications

In September 2015, the Secretary of State issued a Direction transferring various children's services to Slough Children's Services Trust ('the Trust'). Although the Trust performs services on behalf of Slough Borough Council, the Council retains all its legal obligations for the statutory duties.

On 30 September 2015, the Council entered into a contract with the Trust governing the provision of services by the Trust. The contract with the Trust contains various monitoring powers so that the Council can assure itself that vulnerable children in the borough are receiving the best support possible.

#### (i) Equalities Impact Assessment

There is no identified need for the completion of an EIA in relation to this report.

### 5 **Background**

5.1 The Chief Executive of the Slough Children's Services Trust has provided a report to the DCS about the benchmarking diagnostic the Trust has undertaken, extracts of which are given below in section 6.

5.2 The Chief Executive of the Trust will be present at the meeting to answer any questions.

### 6. **Outcome of Trust benchmarking audit**

#### **Introduction**

6.1 The Trust assumed responsibility for children's services on Thursday 1 October and launched the vision for the future of the service on Monday 5 October, the same day staff moved into the new accommodation in St Martins Place. The vision (appendix 1) set out the areas for improvement under four key themes:

- Improving quality
- Improving information

- Improving workforce
- Improving learning

6.2 The primary focus for the first week was to ensure the safe transition of 1500 open cases and to ensure colleagues were fully supported in managing the transition. The Trust set ambitious targets to achieve in the first four weeks of go live. These are detailed within the vision document and include:

- Establishment of new management and governance arrangements.
- Review of quality assurance framework and introduction of new framework.
- Meeting stakeholders and key partners to assess level of confidence in the service.
- Development of placement and sufficiency strategy.
- Delegated responsibilities document reviewed and re-launched.
- Review of complaints service undertaken.
- Chief Executive of the Trust meeting with Children in Care Council.
- Appointed Head of Quality and Performance and Data Analyst
- Removal of Assistant Director post from management structure.
- Launched informal consultation on developing Slough's social work model and engagement of over 200 staff.
- Conducted staff survey in week one.
- New person specifications developed for Social Worker, Senior Social Worker, Consultant Practitioners and Practice Managers.
- Commissioned benchmarking audit conducted by five independent children's social care specialists.

6.3 This work ran alongside the gathering of intelligence on the state of the service. Gaps in provision, particularly in key risk areas, were identified within the first two weeks of operation. These included the complete absence of a Child Sexual Exploitation (CSE) Strategy within children's services and a failure to meet statutory guidance around return interviews for children who were missing from care.

6.4 The benchmark audit confirmed the Trust's view that the 'front door' was unsafe and the Trust had to take immediate remedial action to secure a safe service. This included the removal of a number of interim managers who were unaware of the level of risk and who failed to take swift action to address the shortfalls.

6.5 It was also clear that there was an acceptance of poor practice and a failure to comply with statutory guidance. There was a degree of complacency around these shortfalls compounded by a lack of adherence to basic practice standards e.g. recording.

### **Benchmarking Audit**

6.6 Five independent social care specialists were commissioned to undertake 10 days work commencing week two. The areas of focus were:

- First Contact and Duty allocation
- Early Help
- Child in Need (CiN) and Child Protection (CP)
- Looked after Children (LAC) and Care Leavers (CL), to include placements, missing children and CSE
- Performance Data and Quality Assurance

#### 6.7 Initial findings included:

- No MASH.
- Lack of clarity on Early Help Pathways.
- Lack of rigor within performance data for service.
- Absence of strategic document on CSE and missing children which compounds on the operational service.
- No Quality Assurance framework.

6.8 Over a two week period a total of 30 case reviews were undertaken in the First Contact Team. 28 case reviews for allocation in the duty CiN team. 21 audits of LAC/ CL and 32 audits CP/CiN. Two cases were escalated as they met the Annex H threshold criteria that the child was at risk of harm or not having their needs met. In total 50 per cent of cases were judged inadequate, 25 per cent required improvement and 25 per cent were good.

#### 6.9 Themes identified included:

- Lack of clarity on the use of the threshold document and the continuum of need.
- Lack of clarity about when sufficient information has been gathered and assessment should start.
- Difficult to find evidence of management footprint across the child's journey and evidence of regular and reflective supervision.
- Early Help is still underdeveloped with the focus still being on children's social care.
- The pathway for screening of domestic violence (DV) notifications sits within Early Help.
- Insufficient management oversight leading to weak risk analysis and planning.
- Delay in progression in cases where cases are de-escalated from CP to CiN.
- The lack of continuity between CP plans and CiN planning.
- Operational response to CSE and missing is weak and not coordinated.
- A lack of ambition for looked after children, care leavers and placement sufficiency.

#### 6.10 The strengths were identified as:

- An open and engaging approach to the audit process by staff.
- A commitment from staff and willingness to learn and do the 'right thing'.
- Staff used the audit process to reflect and consider alternative approaches.
- Recent case work had good examples of management oversight, planning and evidence of the voice of the child.

6.11 The additional capacity brought by the consultant practitioners is showing signs of improving the quality of practice by offering challenge.

- The use of Signs of Safety, although not consistent across the service, appears to be beneficial.
- Observation of a Review Child Protection Conference was observed to be well chaired.

#### 6.12 Recommendations

- Urgently develop and put into operation a system for tracking and responding to missing children and children at risk of sexual exploitation.

- Urgently review escalation process in relation to children at risk of significant harm.
- Urgently review the practice of sending letters to victims of DV.
- Urgently review the use of Business Support Officers to screen first contacts.
- Implementation of MASH and urgent review of workflow from First Contact to Duty, including the pathway to Early Help.
- Improve direct work with children to capture the voice of the child to include cultural competences.
- The Local Safeguarding Children's Board (LSCB) to undertake a review of the threshold document/ continuum of need.
- Senior managers to ensure the staff are aware of and inducted on minimum practice standards as a base line of acceptable practice. Workforce development to ensure there is robust induction and skill and knowledge development program for new starters and existing staff.
- Managers at all levels need to ensure that supervision and appraisal arrangements are robust, reflective and focused on ensuring that minimum practice standards are adhered to.
- Re-focus on systems and processes in order to promote the exercise of sound professional judgement; including improved monitoring arrangements and learning outcomes.
- Overhaul of data on performance as it is a key element in supporting the effective delivery of a safe and responsive service. It should help to benchmark improvement, facilitate improvement and promote accountability.
- To establish a quality assurance framework and a robust implementation plan that ensures standards of practice are consistent across the service and promote and disseminate learning to help understand the routes to improving practice.
- Ensure the development of a social work model setting a clear timeline for implementation.
- Review the commissioning strategy for the provision of accommodation for leaving care.
- A re-focus of the placement strategy to support the service to reduce the number of children and young people placed out of the area.
- Ensure pathway plans are outcome focused and are specific and measurable in particular to education, employment and training.
- Strengthen corporate parenting function to allow for effective scrutiny of outcomes for looked after children and care leavers.

### 6.13 **Conclusion**

All the recommendations have been taken forward and a progress report is attached (appendix 2). This will complement the actions arising from the recent re-inspection undertaken by Ofsted which started on 24 November and ended on 17 December and will form part of the improvement plan.

### 7 **Appendices Attached**

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| 1 | - | The Vision for SCST                                     |
| 2 | - | Baseline Audit Findings Progress Report – November 2015 |

### 8 **Background Papers**

None.