

**SERVICE DIRECTOR REPORT: CHILDREN AND SAFEGUARDING**

**To:** Children and Young People  
Audit and Accounts Committee 29<sup>th</sup> July for information

**Meeting Date:** 9<sup>th</sup> July 2019

**From:** Executive Director People and Communities.

**Electoral division(s):** All.

**Forward Plan ref:** n/a **Key decision:** No

**Purpose:** The report provides the Committee with an update on key areas of performance within children's services. Following the inspection by Ofsted in January 2019 an action plan was submitted to the regulator in May 2019, a copy of which can be found at Appendix 2. This report also provides some general information on progress made following the inspection as well as key information relating to the successful bid for funding to implement the Family Safeguarding model in Cambridgeshire County Council.

**Recommendation:** The Committee is recommended to:

- a) Note the information within the report relating to the performance of children's services;
- b) Note the content of the action plan following the recent Ofsted inspection and agree to receive regular updates in respect of this;
- c) Agree in principle to the exploring ways in which we can improve recruitment and retention of particular roles in parts of the service where this remains a challenge;
- d) Note the decision by the Department for Education (DfE) to award significant funding to Cambridgeshire County Council to support our development of the Family Safeguarding model.

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## **1. BACKGROUND**

- 1.1** This report focuses on a number of areas of relevance to the performance of children's services in Cambridgeshire. This includes some key information about performance across the service, information about the action plan following the Ofsted inspection, changes that are being made in services to children with disabilities, the progress relating to the implementation of LiquidLogic across the service, and information about the successful bid for funding to deliver the Family Safeguarding model for vulnerable children and young people in the County

## **2. MAIN ISSUES**

### **Key Performance Information and summary of progress**

- 2.1.** The new structure for children's services, where the system of units was replaced by specialist teams, was implemented between November and December 2018. The Ofsted inspection concluded on the 18<sup>th</sup> January 2019. The service has, therefore, been through a considerable amount of change and challenge over the last twelve months.
- 2.2.** Many of the Ofsted recommendations were centred on ensuring that the service has sufficient capacity to enable the new social work teams to work effectively with vulnerable children, young people and their families. At the time of the inspection, the caseloads of a number of our staff were too high, particularly in the assessment teams in Cambridge and South Cambridgeshire.
- 2.3.** It is absolutely the case that practitioners need manageable caseloads if they are to be able to work effectively with children, young people and their families. There were a number of reasons why caseloads were too high in January, including:
- The newness of the structure, which meant that some of our staff were holding children and young people on their caseloads who were due to move to new teams;
  - The impact of the December 2018 changes to the Integrated Front Door and Multi-Agency Safeguarding Hub, and;
  - That a number of the new children's practitioner roles were not yet recruited to. These practitioners are alternative qualified members of staff who under the new arrangements are able to hold some child in need cases, alleviating the pressure on hard-to-recruit social worker posts.
- 2.4.** Our current target is to ensure that caseloads for most social workers is no more than 20, except for those in assessment teams where up to 25 is acceptable owing to the nature of the work. Caseloads are reported weekly to the Chief Executive, Director of Children's Services, Chair of the Children and Young People's Committee and Chair of the Local Safeguarding Children Board. It is positive to be able to report that caseloads have reduced in most parts of the service, although this is an area where continued vigilance is required and where the impact of social worker vacancies continues to be felt.

- 2.5. As of the week reported at the end of 14<sup>th</sup> June 2019, average caseloads per full time member of staff were mostly at or close to these targets, as illustrated in the table below:

<b>Team</b>	<b>Average caseload</b>
Fenland Assessment	18
Fenland Children's 1	23
Fenland Children's 2	19
Hunts Assessment	21
Hunts Children's 1	19
Hunts Children's 2	20
North Adolescent	14
Cambridge Assessment	24
Cambridge Children's 1	22
Cambridge Children's 2	22
East Cambs Assessment	22
East Cambs Children's	16
South Cambs Assessment	23
South Cambs Children's 1	21
South Cambs Children's 2	16
South Cambs Adolescent	11
North Children in Care 1	19
North Children in Care 2	19
South Children in Care 1	16
South Children in Care 2	22
North Care Leaving	23
South Care Leaving	19
Unaccompanied Care	24
Disability DCT North	19
Disability DCT South	18
Disability Unit North	13
Disability Unit South	22

- 2.6. The above table shows that for the most part, average caseloads are now much closer to target across the service. That said, these are average caseloads, which means that some individual members of staff may have higher caseloads. This improved position is testament to the work of all members of staff and managers, who have worked really

hard to share the load where needed, and to support planned closure and step-downs of children to early help where this is appropriate.

- 2.7. While the above provides some grounds for optimism, recruitment of experienced and qualified social workers remains a considerable challenge, not only in Cambridgeshire but regionally as well as nationally. In order to assist with recruitment, we have been working with an external partner to develop new marketing materials, modelled on those recently and successfully used in Adult Social Care. The materials look impressive and different, which once launched we hope will increase the profile of the County as a great place to work and attract more staff to the County.
- 2.8. But we also need to consider other recruitment and retention incentives in order that we do all we can to support the recruitment and retention of permanent, as opposed to agency, staff. While many agency workers make a significant and long-term contribution to the service, costs of employing them are significantly higher than those associated with directly employed staff. Now we have the structure established, it is time for us to look at the quality of our 'offer' to permanent staff and how this compares with competitors in the employment market.
- 2.9. Specifically, we need to consider the messages from our staff working in our busiest and hardest to recruit to teams that it would make a real difference to them if their long term commitment was recognised by a scheme of retention payments. Funding such a scheme would, however, need to be met from a consequent reduction in the number of agency social workers.
- 2.10. The Children and Young People's Committee is therefore asked to agree in principle to the exploration of adopting a retention scheme that supports the retention of qualified social workers in the areas of the service where it is most difficult to recruit, subject to it being possible to fund this within the budgets associated with staffing costs.
- 2.11. In the lead up to the inspection, there were a number of compliance issues as the previous model of units struggled to meet the often competing priorities of working with children in need, in need of protection and who are in care.
- 2.12. One area where there had been some significant compliance issues was in relation to the number of overdue visits to children. This is an area where significant progress has since been made. In the final performance report covering children's services prior to the re-structure in November 2018, there were a total of almost 270 overdue visits to children in need, in need of protection and to children in care, including 76 overdue visits to children subject to child protection plans.
- 2.13. The most recent data available at the time of preparing this report and as reported for the week ending 14<sup>th</sup> June provides a comparable figure of 59 overdue visits to children in need, children in need of protection and children in care, of which only 6 related to children subject to child protection plans.
- 2.14. There are always going to be situations where some visits are overdue; foster carers are sometimes not available at short notice, or a social worker is off sick, for example. On some occasions, families may be deliberately avoiding visits to children subject to child protection plans. The key difference between the position at the end of October and now

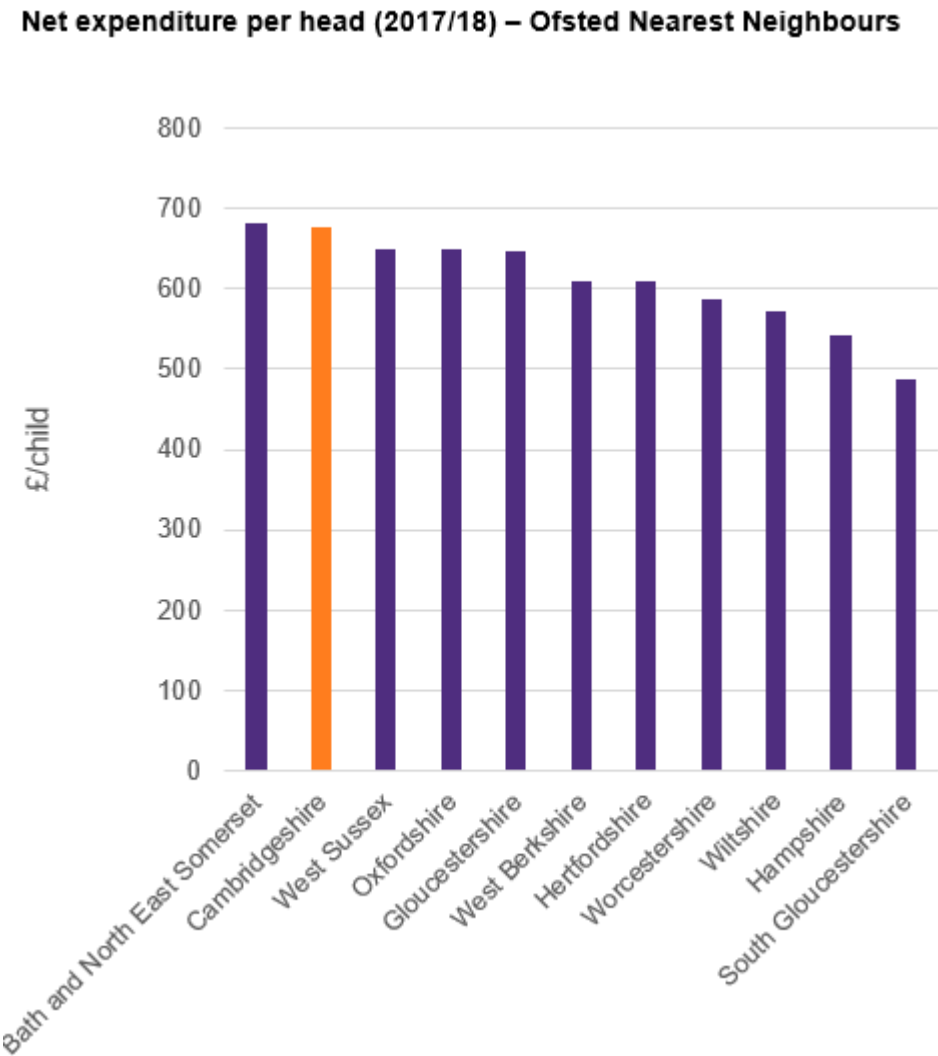
is that because the overall numbers of overdue visits are much lower and because of the new system of specialist teams with dedicated managers means that we now know why visits are overdue. This is reported to senior managers on a weekly basis and so, for example, we know that two of the children for whom a child protection visit is overdue are in Europe with their family, and we are making the necessary enquiries. Knowing the reason why visits are overdue means that managers can take action as necessary.

- 2.15. Maintaining caseloads at an acceptable level, and moving to a position where we can be confident that we are visiting children regularly are important measures of re-establishing the basis of ensuring good consistently good outcomes for children and young people. There remains a considerable amount to do to ensure that we are achieving this, however.
- 2.16. The following sections look at key performance information from assessment through to children in need, child protection and numbers in care to help illustrate progress where this is being achieved, as well as illustrating where we have more work to do. There is a high level of detail in the following sections, which illustrates the complexity of the children's social care system, and how consistency of performance within children's services is related to broader factors affecting schools and communities.

### **Contacts, referrals and assessment**

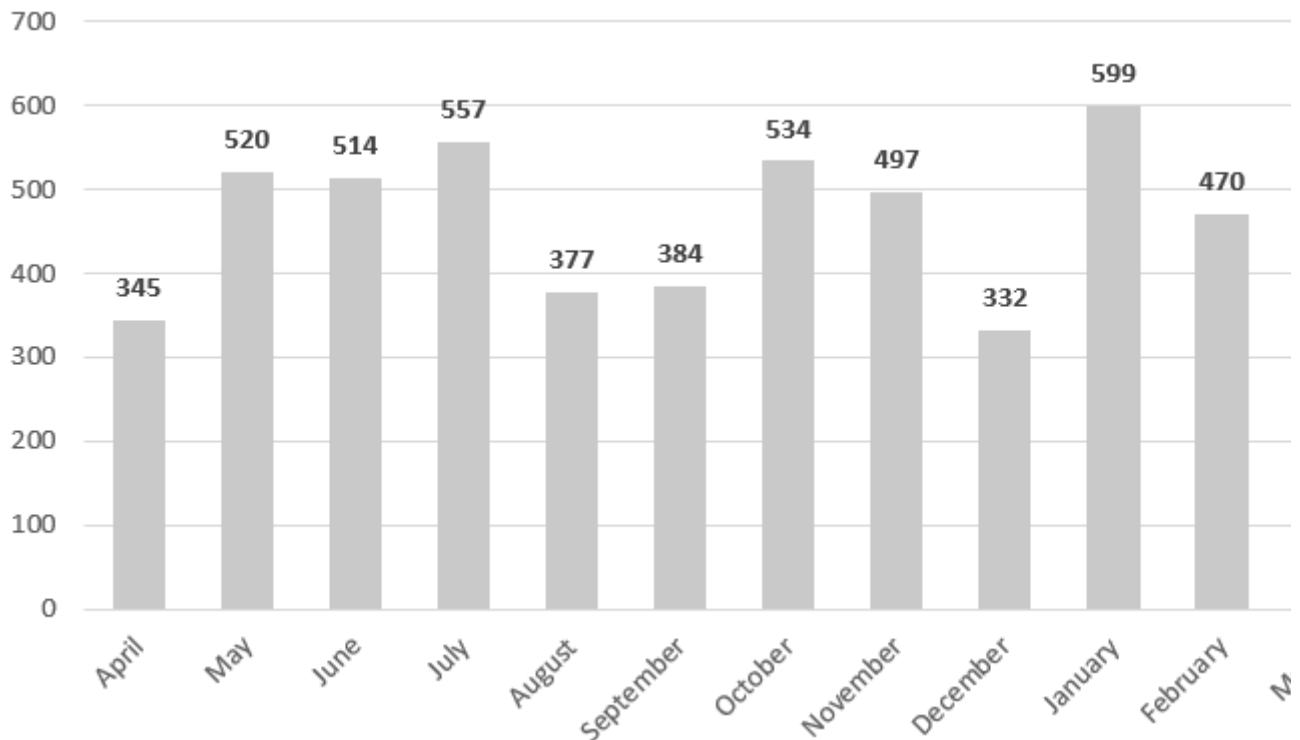
- 2.17. In part, high caseloads in children's services have been a function of the service accepting too much work into the system. We have worked with the local safeguarding board to refresh the guidance on access appropriate support for children and young people, but it is fair to say that there remains a perception among a number of key partners that where there are concerns about a child, these are best met by children's social care as opposed to by early help or by themselves providing additional support in appropriate circumstances.
- 2.18. It is important that we begin to open a dialogue with partners in this area, since continuing as we are implies that we will forever be trying to recruit increasing numbers of staff into our children's social care services, at ever increasing cost and in the face of acute shortages of the type of workers concerned.
- 2.19. Beyond the cost issue, it is also the case that over-intervention in the lives of children and families does not deliver good outcomes, and frequently leads to poorer ones. Children's social care services are often experienced as stigmatising, for example, and in many cases, emerging difficulties are best met within universal services, with support from carefully targeted early help services when needed, as these are usually perceived much more positively by families.
- 2.20. Further, the unnecessary completion of an assessment of needs or a child protection enquiry risks alienating families from services. Those families who may benefit from some targeted [and voluntary] early help support to prevent difficulties engaging can be more likely not to engage, for fear of children's social care services becoming involved once more.

2.21. There is a range of evidence indicating that Cambridgeshire seeks to work with too many children. An important indicator is the amount of spend per head compared with similar authorities. The chart below illustrates the position for children’s services in 2017/18, before the most recent additional investment:



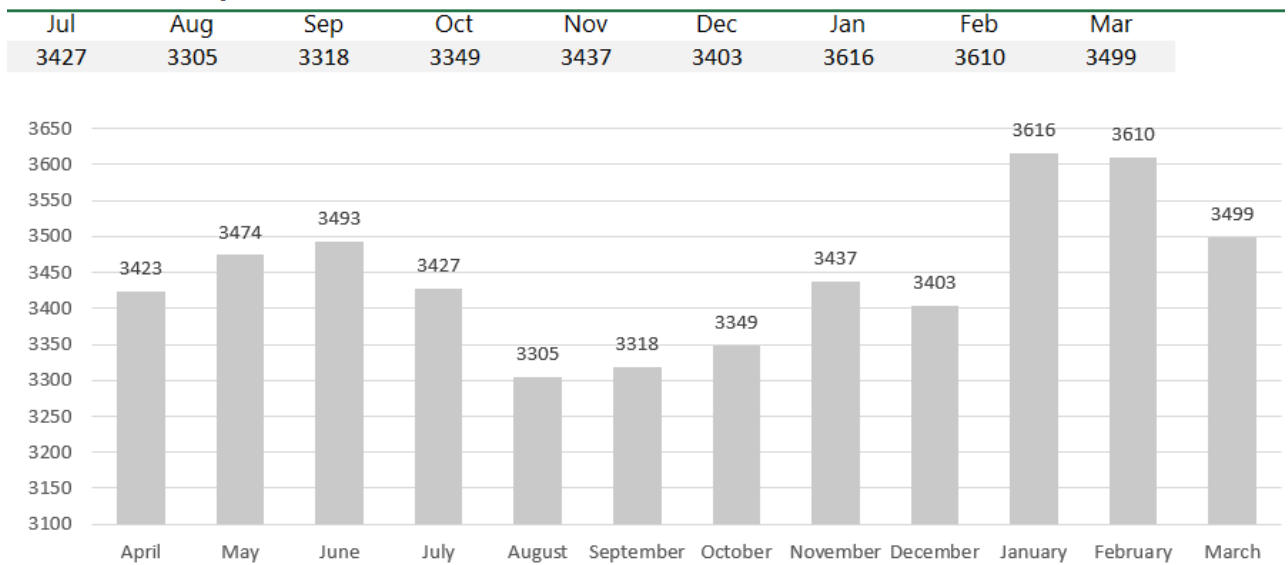
2.22. The Integrated Front Door was remodelled as part of the change for children programme. The customer service centre now manages the majority of contacts about children, directing those that clearly meet criteria for, say early help, or a child protection enquiry, to the relevant team. Where the best course of action is unclear from the available information, the contact is passed to the MASH or Multi-Agency Safeguarding Hub] for further consideration.

2.23. This new system is beginning to settle into a good pattern of operation, but struggles to make the best quality decisions where the numbers of children referred into our services is very high. The chart below shows the number of children that we regarded as referrals over the last 12 months:



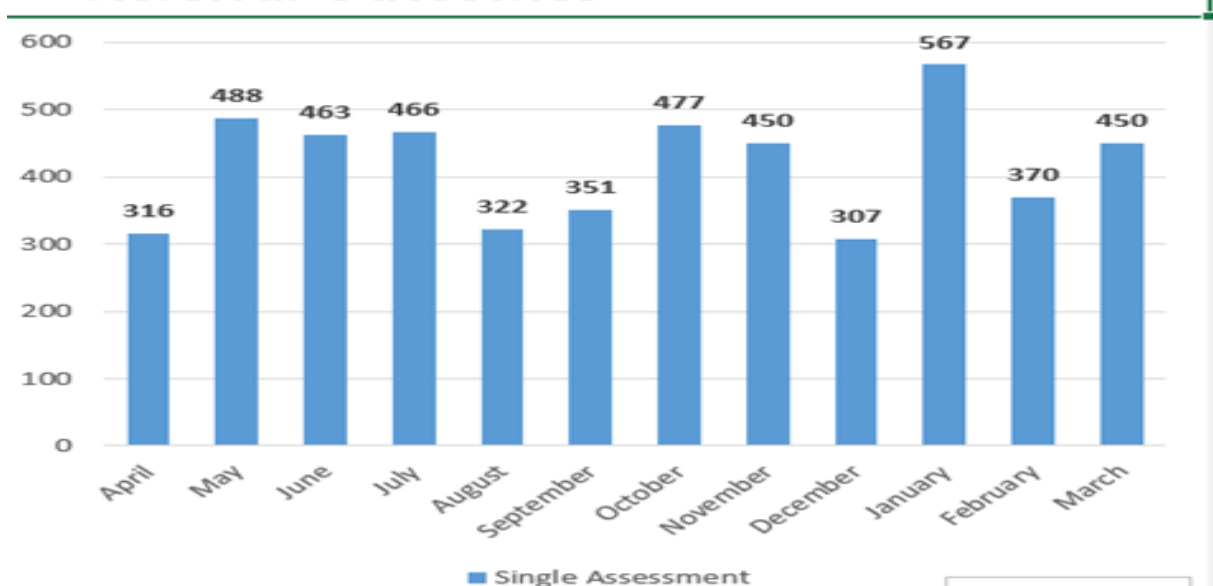
- 2.24. There was notable peak in the number of children we treated as referrals in January of this year; this coincided with the return to school after the Christmas break, but also with a temporary change in the way that the police notified us of domestic abuse incidents, which is now resolved. The issue is that this significant increase in referrals in turn placed significant additional pressure on the then newly established assessment teams.
- 2.25. The newly appointed managers in these teams make the final decision as to whether or not a child referred requires an assessment or a child protection enquiry, or whether on a fuller consideration of the circumstances, they can be safely stepped down to early help. Decisions have to be made quickly, and when there is an increase in the numbers of referrals, there is every likelihood that more will progress through to assessment than might otherwise be the case.
- 2.26. This combination of circumstances all contributed to the unacceptably high caseloads in some assessment teams in January of this year. It takes a considerable amount of time to manage the peak in demand through the system once this initial peak has passed. The likely outcome is that social workers under pressure from high caseloads in assessment teams are more likely to refer children on to further support by the children's teams, since this enables them to move the child off their caseload and complete other assessments that are outstanding. Where caseloads are lower, social workers have the time to complete short term work with the child and their family, preventing the move of the child further into the system.
- 2.27. This effect can be seen when we look at the number of children open to the service over the last 12 months:

## Open Cases



- 2.28. The number of children open to the service rose by over 200 between December 2018 and January 2019, and did not start to reduce until March, and this was only achieved because of the concerted action by managers within the social care service with the support of early help managers to step children down to early help where appropriate.
- 2.29. January was in many respects an unusual month in that we had a combination of a brand new system, with new team managers, children returning to school after the holidays and an issue affecting the police, all contributing to a significant increase in children moving into the system.
- 2.30. It is encouraging that there are more recent signs that the system is now beginning to settle, however. The March 2019 data shows that almost as many children were treated as referrals as was the case in January, but the numbers open in the service did not increase as they had done in January. The chart below provides part of the explanation:

## Referral Outcomes





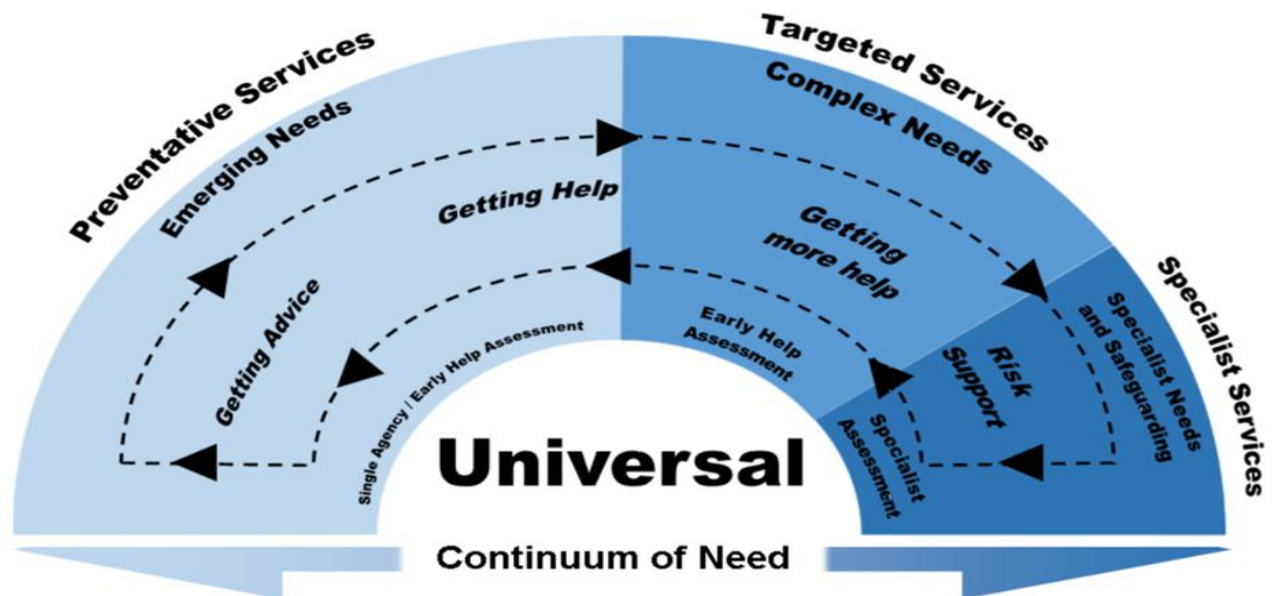
- 2.31. The above chart shows that in January, almost all children and young people treated as a referral to the service progressed to a single assessment. The number of referrals in March was not much less than the number in January, by the number progressing through to assessment was considerably less. This is indicating that the managers of the new assessment teams are becoming more confident in not progressing children through to assessment, helping to avoid the risks associated with over-intervention in the lives of families, while also helping to maintain workloads at manageable levels.
- 2.32. The very high numbers of children progressed to assessment in January has other implications. Higher caseloads and workloads in the assessment teams meant that fewer assessments are completed within the 45 day timeframe, with fewer than 60% being completed in this period at present. It is the case that many authorities struggle to perform very well against this target, but we should be achieving a rate of 80%-85%. This again illustrates the importance of ensuring that we progress only the right children to referral and again onto a single assessment.
- 2.33. There are other indicators of there being too many children in our system, when compared with similar authorities. One is the number of children open on children in need plans, although this data is not published nationally, making comprehensive benchmarking in this area difficult. However, the table below provides a snap shot of the number of children open to children in need plans in Cambridgeshire compared with three other Eastern Region in February 2018:

Authority	Open Children in Need cases not including open for Assessment		
	0-17 Population	Number of Children in Need	Rate of Children in Need per 10,000
Cambridgeshire	137,000	1,283	94
Peterborough	53,600	511	101
Essex	308,500	1,912	62
Hertfordshire	268,400	1,074	40

- 2.34. Cambridgeshire is the 134<sup>th</sup> least deprived authority in the country according to the Index of Multiple Deprivation. Essex, not a statistical neighbour, is more deprived, at 112<sup>th</sup>; Hertfordshire is a statistical neighbour, while Peterborough is ranked 45<sup>th</sup> in terms of deprivation. Although the number of children open to the service has declined a little since this data was collected in February, the number of children open to our services as children in need would appear to be significantly higher than might be expected.
- 2.35. As noted above, a number of our partners perceive children as being better safeguarded if they are open to children's social care and have a social worker. The reality is that most children and families respond better to early help services than statutory

intervention, and that the latter should only be considered where there is real evidence of significant harm. Where too many children are open to the service, caseloads increase, meaning that it is harder to identify those most at risk of significant harm.

- 2.36. Where children who have been open to children's social care services unnecessarily and are then stepped back down to targeted and universal support, their families may be less willing to engage because they fear that this may again result in being referred back to children's social care. As engagement in targeted support is voluntary, children may not access the support that might benefit them, resulting in the potential for poorer long term outcomes.



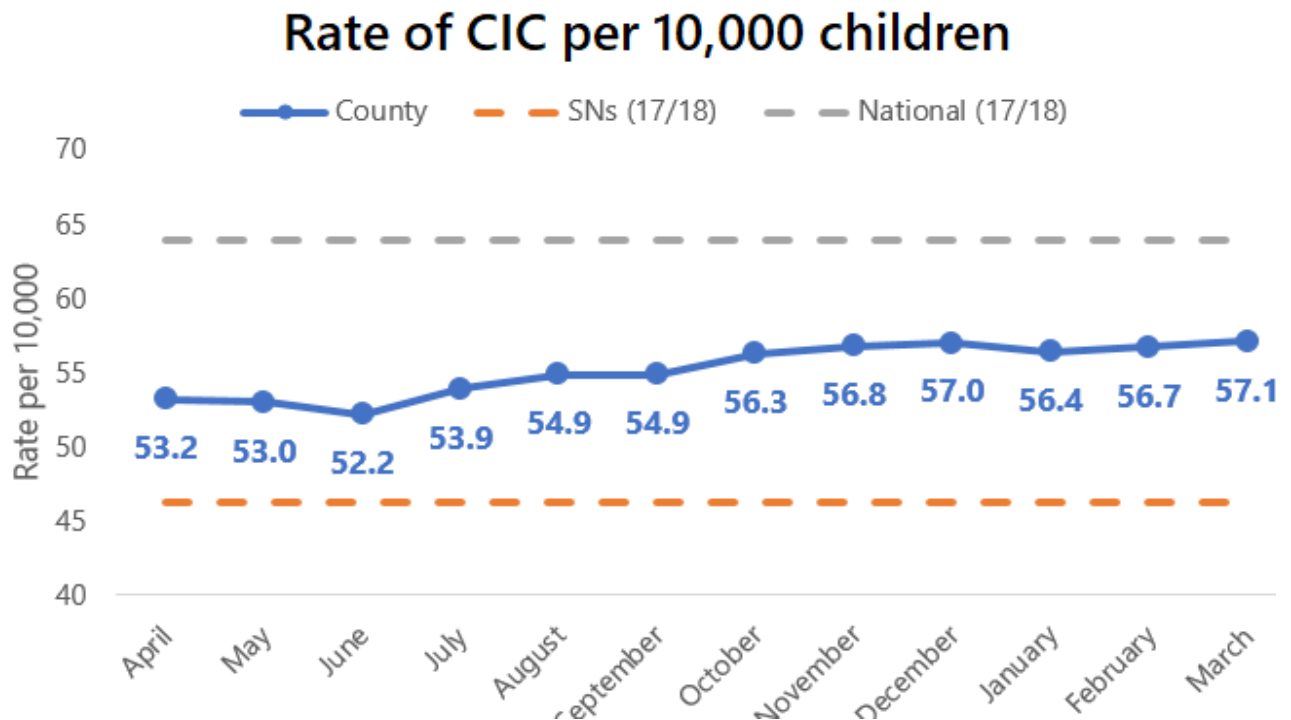
### Child Protection

- 2.37. The rate of children subject to child protection plans per 10,000 is currently in line with our statistical neighbours, at around 52 per 10,000. This is, however, a higher rate than has been the case in Cambridgeshire for some time, reflecting a number of around 570 subject to plans as of June 2019. The statistical neighbour rate climbed significantly between 2017 and 2018, from 46 per 10,000 to 52 per 10,000. This was because two of our statistical neighbours experienced significant increases in numbers on plans over this period. The current number subject to child protection plans in Cambridgeshire is higher than it should be, and a rate closer to the 46 per 10,000 previous average would be preferable.
- 2.38. Numbers on child protection plans also need to be considered as part of the complex inter-related system that is children's services. The impact of too many children open as children in need as described above is that higher caseloads mean that some children in need may receive a less intensive package of support than they may otherwise have received. This in turn can result in a reduced confidence that children open as children in need will make good progress. This perception can then result in pressure for more children to be escalated to child protection plans.
- 2.39. The same points that can be made about having too many children open as children in need apply equally to having too high numbers of children on child protection plans. Too

many children in the system means that some may receive a less intensive service, in turn risking poorer outcomes. This can then result in a continued escalation into pre-proceedings and, potentially, to care proceedings, increasing numbers in care.

### Children in Care (CIC)

- 2.40. Numbers of children in care remain significantly above the statistical neighbour average, as illustrated in the chart below, which shows the rate of children in care per 10,000 children and young people living in Cambridgeshire. The current number of children and young people in care is around 780:



- 2.41. Clearly, a key aim of the move into specialist teams is to address this continuing increase in overall numbers. In part, this is to be achieved through improving the quality of planning for children in care in the teams, compared with the much more generic approach that was a feature of the whole life children's units that the teams have replaced.
- 2.42. The new corporate parenting service is reviewing all children and young people in care to ensure that all those for whom a return home or a move on to permanency outside the care system where this is in their best long term interests is prioritised. The new adolescent teams are focusing on intensive work with young people who are on the edge of care. While the rate of increase in overall numbers has reduced, progress is not where it needs to be and is an absolute priority for the service as a whole.
- 2.43. We clearly need to look after children when they would otherwise be at risk of significant harm and when there are no other viable alternatives, and will continue to do so. But we need to continue to focus on the throughput of children through the system, reducing the average number of days that children remain in care. This approach will result in better

outcomes for the children concerned, while ensuring that those who need to come into care continue to do so.

- 2.44. The Service Director for Children and Safeguarding now chairs a monthly meeting that monitors the progress of plans for children and young people to leave the care system where this is in accordance with their care plan, considering children and young people at an individual level. The focused work in the service is now beginning to have an impact; children and young people for whom a return home or move onto other permanent arrangements [for example through Special Guardianship Orders] have been identified, and progress is being achieved, although not yet at a rate that is being translated into reducing numbers overall in the care system.
- 2.45. As the above hopefully illustrates, achieving a position where numbers in care reduce significantly and relatively quickly means taking action across the whole system that includes changing the narrative about the evidence for intervention from early help through to child in need, child protection, pre-proceedings and proceedings.
- 2.46. Our still new structure of specialist teams is an important part of this journey. The increased levels of management oversight and supervision these teams provide, alongside their ability to better manage competing priorities through greater resilience is already playing an important role in improving consistency of practice across the service.
- 2.47. Nevertheless, changes of this scale do take time to have an impact on culture and outcomes. This is why the award of trailblazer status to the local authority to implement Family Safeguarding is so important, since this brings new approaches to working with vulnerable parents, with the result that more of our most vulnerable children are able to remain safely and permanently within their families. Family Safeguarding is explored in more detail in the relevant section below.

### **Action Plan in response to the Ofsted inspection**

- 2.48. The action plan following the inspection can be found at Appendix 1, and was shared with Ofsted in May 2019, as is required. There were four key recommendations following the inspection:
- Improve the capacity of social work teams to complete work to a consistently good standard and to ensure that children and families receive the help they need as quickly as possible;
  - Improve the consistency and quality of direct work undertaken with children, and how well this is used to inform help and support for them and their families;
  - Improve the frequency, quality and impact of management supervision of social work practice, and:
  - Improve the effectiveness of arrangements to promote health and education and to secure permanence for children in care.
- 2.49. As can be seen from the action plan itself, these actions are broken down into a number of objectives, each with a lead officer, indicators and eventual targets. Monitoring is

through regular performance monitoring meetings, and a formal update noting progress and direction of travel will be completed quarterly. There has been progress in a number of areas, as identified above. In other areas, for example, in increasing the number of permanent members of staff, strategies are well-developed and moving towards implementation.

- 2.50. Some areas where improvement is needed requires broader partnership working, for example in relation to improving health outcomes for children in care. Health assessments must be arranged at times that suit the child and their foster carer; information from those assessments then needs to be made available to the child's carers and social workers. Relevant information from those assessments then need to be inputted into the child's care plan in a way that results in clear actions, the impact of which can then be monitored. Making sure that this happens consistently requires the sharing of performance information between the council and our health partners. Making sure that there is a positive outcome for the child is one of the key roles and responsibilities of the independent chairs of children's statutory childcare reviews.
- 2.51. Developing and maintaining effective quality assurance systems is a key part of ensuring that we are making the consistent process that is required. The independent chairs are an important part of this quality assurance process, and they are offering more constructive challenge to the service, which is a good thing. Audits of the work undertaken, whether of the work of individual members of staff, or broader themed audits of practice, help us to know whether there are areas of practice that need support and improvement.
- 2.52. Practice and bite-size workshops are organised to take place across the service, helping to support practice development. These are informed by the findings of the quality assurance processes, helping to make sure that we close the circle.
- 2.53. Cambridgeshire's annual conversation with Ofsted took place on 1<sup>st</sup> May 2019. This is an aspect of the Inspection of Local Authority Children's Services framework. Ofsted comes to all authorities on an annual basis to gain an understanding of progress made since recent inspections, any issues arising from performance data or other intelligence held by Ofsted about the authority and any issues arising from the authority's self-assessment, which is also shared with Ofsted.
- 2.54. Those attending our annual conversation included the senior HMI for the region and the lead inspector from our most recent inspection. Inspectors were reassured by the information we were able to provide about progress since the last inspection, and confirmed that they thought that the direction of travel for Cambridgeshire children's services was the right one. They also confirmed that they saw no reason for further inspection activity relating to children's services in the current financial year, observing that managers and leaders needed to be allowed to continue implementing the planned improvements to the service.

### **Children with Disability [0-25] Services**

- 2.55. At the time that the change for children programme was consulted upon and implemented, our children with disability service was aligned with special educational needs and disability services, which are part of the education service. This meant that

they were not part of the change for children changes and so continued to operate under the unit model.

- 2.56. The 0-25 service has now moved back into children's social care services. A consultation with staff within the service has taken place and we are changing the approach so that it is in line with the rest of children's services, with teams as opposed to units. This has taken place within available resources, and enables this part of the service to benefit from the changes including improved management oversight from a designated team manager.

### **Implementation of LiquidLogic**

- 2.57. The project to implement the most recent version of LiquidLogic is progressing very well and it continues to be expected that the implementation date of the end of October 2019 will be achieved. The system is now being extensively tested and the process of data migration has commenced.
- 2.58. LiquidLogic will make a very significant difference to the workloads of our staff as well as supporting the effectiveness of practice. The current recording system is very out of date and does not, for example, automatically complete basic information about children and their families when moving from one record to another – an assessment to a child in need plan for example. This means that staff have to laboriously re-type or extensively copy and paste basic information like names, family relationships and demographic data from form to form.
- 2.59. As well as addressing issues such as these, LiquidLogic will also support improved practice. Templates built into the system reflect best practice, prompting workers and managers to include, for example, consideration of the lived experience of the child in assessments and plans.
- 2.60. LiquidLogic is pre-configured to support Family Safeguarding working, a significant factor in the government's decision to award Cambridgeshire County Council the status of Family Safeguarding trailblazer, as described in more detail below. The system also enables much better multi-agency working at early help level as well as within the MASH and Early Help Hub.
- 2.61. Finally, the adoption of LiquidLogic will support better and timelier performance reporting. This is important for managers as it enables them to have an up to date view of any outstanding tasks in the teams they manage. It is important for senior managers as it means that they can see emerging trends and take action as necessary.

### **Family Safeguarding Trailblazer**

- 2.62. As noted elsewhere, the Department for Education has announced that Cambridgeshire County Council will be the trailblazing authority for Family Safeguarding as part of its Strengthening Families programme.
- 2.63. Members will recall that part of the thinking behind the change for children programme we implemented at the end of 2018 was to enable the service to be in a strong position to develop the Family Safeguarding approach should funding be available to enable this. It was always considered possible that funding would be available from the DfE, but we

were also prepared to develop a business case to support a bid for transformation funding on the basis that while initially requiring investment to establish, Family Safeguarding should result in significant reductions in demand in terms of numbers of children subject to child protection plans and in care.

- 2.64. This preparation was also a key part of the decision to move to LiquidLogic as the new children's information system, because this was the system that was the most Family Safeguarding ready.
- 2.65. It is very good news that the Department for Education (DfE) has selected Cambridgeshire County Council to be the trailblazer authority for Family Safeguarding, since this will bring significant additional investment into the authority, enabling us to meet the majority of initial additional costs. Adopting the model itself will also mean that we are more able to provide the support that families need in order to make the changes required so that they can safely parent their children, resulting in better long term outcomes alongside reducing costs.
- 2.66. Family Safeguarding is a model of practice that involves the development of multi-disciplinary teams within children's social care services. These teams include adult-facing practitioners who are expert in working with substance and/or alcohol misuse, domestic abuse including both perpetrator and victim workers, and adult mental or emotional health and wellbeing. Known as the 'toxic trio', these are the most common underlying problems that the families of the majority of children subject to child protection plans are struggling with.
- 2.67. The addition of these workers into the children's teams means that adult members of families can more easily access support than would otherwise be the case. The programme used to work with domestic abusers is, for example, very effective. It is of a quality and intensity that is similar to programmes used by the national probation service, which are usually only open to perpetrators after conviction for domestic abuse. Similarly, while children's social workers may recognise the impact of mental health issues among the parents they work with, very often those parents do not meet the threshold for accessing very hard pressed mental health services. The fact that there are mental health professionals as part of the multi-disciplinary team means that parents can benefit from the support they need, with benefits for the way in which they can care for their children.
- 2.68. To be effective, the model requires caseloads to be no higher than 15, less than the current position in the service. This emphasises the need to ensure that we are working with the right children for the right length of time. It also means that we may need to invest in some additional members of staff at least initially, in order to support the process of bringing the caseloads down.
- 2.69. Funding from the DfE will support the investment needed in additional adult-facing practitioners and any additional children's social workers that might be needed. It will also support the programme of training in Motivational Interviewing that accompanies the model.
- 2.70. The DfE has recently completed a diagnostic of our services, to assess the degree of readiness for us to implement the approach, alongside estimating the amount of

financial support that will be provided to enable the required up-front investment available.

- 2.71. The diagnostic has also broadly confirmed the view that we have too many children open to the service for too long. It has confirmed that we have a skilled workforce and that there is a good level of enthusiasm for adopting the approach, provided that this does not mean further structural change.
- 2.72. While the DfE has yet to confirm the level of funding that will be made available to the Council to support implementation, the indications are that this will be between £3.5M and £4.0M.
- 2.73. This is obviously very welcome; it provides us with the funding to invest in a model that has been demonstrated to improve outcomes and reduce demand pressures in relation to children in need of protection or needing to come into care. It is also good for Cambridgeshire more generally, as it again marks the authority out as one that seeks to innovate in order to improve outcomes for children and young people, again helping to raise our profile and be more attractive to people who want to come and work for us.
- 2.74. Because the changes we made to the structure as part of the change for children programme were designed to be Family Safeguarding ready, there is minimal need for further structural change for the great majority of the workforce, although we are reviewing responsibilities at a senior leadership level to ensure that we have the capacity to deliver the programme effectively.
- 2.75. We have appointed a programme manager to assist us in implementation. There are a number of key activities that we need to complete before we are ready to launch the new approach, including developing the necessary support and training programmes, reviewing the contribution to the new approach that can be provided by the established cohort of clinicians, recruiting other key practitioners and, of course, consulting and involving our practitioners in the process as a whole.
- 2.76. We aim to formally launch the approach between January and March 2020.

### **Concluding Remarks**

- 2.77. This is a lengthy report, but it is important that Members have a clear understanding of the improvements that the service is making, together with some of the areas of challenge, as well as some of the broader influences on children's services and their impact on outcomes for children.
- 2.78. The essential elements are now in place to deliver consistently good outcomes for our most vulnerable children and young people. We have a highly skilled and committed workforce and we are seeing the benefits of the move to the new structure in terms of helping to manage workloads, improve management oversight and begin to deliver a more consistent service to children, young people and their families.
- 2.79. The development of Family Safeguarding in the county presents us with a real opportunity to further build on these strengths. While risks remain, not least in relation to



recruitment and retention of staff, there are exciting prospects for the continuing development of children's services in Cambridgeshire.

### **3. ALIGNMENT WITH CORPORATE PRIORITIES**

#### **3.1 A good quality of life for everyone**

The following bullet points set out details of implications identified by officers:

- Supporting vulnerable children and young people to achieve the best possible outcomes has longer term benefits for them as well as to the wider population. Where children are enabled to remain safely with their families or provided with good quality care, they are most likely to develop resilience and be more likely to remain in good physical, mental and emotional health, make better quality relationships and contribute more to the community.

#### **3.2 Thriving places to live**

The following bullet points set out details of implications identified by officers:

- Promoting the best outcomes for children and young people means that they are most likely to make a positive economic and social contribution into adulthood.

#### **3.3 The best start in life for Cambridgeshire's children**

The following bullet points set out details of implications identified by officers:

- A children's services that is effective overall will ensure that vulnerable children and young people are supported to achieve good outcomes, including by enabling families to provide permanent, safe and loving homes to their children wherever possible;
- Where children and young people are identified as being at risk of harm, children's services take action in order to ensure that these risks are minimised;
- As corporate parents, we share responsibility for ensuring that our children and young people in care and young people leaving care are able to access the best possible support in order to achieve good long term outcomes.

### **4. SIGNIFICANT IMPLICATIONS**

#### **4.1 Resource Implications**

*There are no significant implications within this category.*

#### **4.2 Procurement/Contractual/Council Contract Procedure Rules Implications**

*There are no significant implications within this category.*

#### **4.3 Statutory, Legal and Risk Implications**

The following bullet points set out details of significant implications identified by officers:

- The Council has a variety of statutory duties relating to children and young people in need, in need of protection and in care, and in ensuring that this group of children and young people are supported to achieve good outcomes.

#### 4.4 Equality and Diversity Implications

*There are no significant implications within this category*

#### 4.5 Engagement and Communications Implications

*There are no significant implications within this category*

#### 4.6 Localism and Local Member Involvement

*There are no significant implications within this category.*

#### 4.7 Public Health Implications

Children's safeguarding services work closely with services commissioned by public health (for example: health visiting, school nursing, mental health, lifestyle services) and it is important that children in contact with these services have good health outcomes

Implications	Officer Clearance
Have the resource implications been cleared by Finance?	Yes or No Name of Financial Officer:
Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by Finance?	Yes or No Name of Financial Officer: N/A
Has the impact on statutory, legal and risk implications been cleared by LGSS Law?	Yes or No Name of Legal Officer:
Have the equality and diversity implications been cleared by your Service Contact?	Yes Name of Officer: Lou Williams
Have any engagement and communication implications been cleared by Communications?	Yes or No Name of Officer:
Have any localism and Local Member involvement issues been cleared by your Service Contact?	Yes Name of Officer: Lou Williams

<b>Have any Public Health implications been cleared by Public Health</b>	Yes Name of Officer: Dr Liz Robin

### **SOURCE DOCUMENTS**

<b>Source Documents</b>	<b>Location</b>
<b>Ofsted Inspection of Children's Services, January 2019</b>	<a href="https://files.api.ofsted.gov.uk/v1/file/50056032">https://files.api.ofsted.gov.uk/v1/file/50056032</a>