

TRANSFORMING OUTCOMES FOR CHILDREN IN CARE

To: Children and Young People

Meeting Date: 22nd May 2018

From: Executive Director People and Communities.

Electoral division(s): All

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

Purpose: The Committee is being asked to consider proposals for changing the way in which children's safeguarding services are delivered across the County.

Recommendation: The Committee is asked to:

- a) endorse recommendations 1-8 as briefly described in the report and in more detail in Appendix 1;
- b) agree that a progress update on implementation should be submitted to the Committee's meeting in September 2018.

<i>Officer contact:</i>	<i>Member contacts:</i>
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1. BACKGROUND

- 1.1 It should be noted that the recommendations in this report do not apply to children with disability services, for which no changes are proposed. Similarly, it is unlikely that there will be significant implications for the majority of our early help services. This report relates mostly to the organisation of children's safeguarding services, with implications for the Integrated Front Door and the Multi-agency Safeguarding Hub (MASH), the system of social work units, Customer Services and the county-wide 14-25 service.
- 1.2 Between 2016 and 2017, the Children's Change programme introduced a number of changes to the way in which children's services were organised in Cambridgeshire. Many of these changes have been positive and in particular, the development of the county-wide service for older children and young people in care, care leavers, unaccompanied minors, fostering, residential and edge of care services has worked well. Similarly, the bringing together of early help and children's safeguarding services within a district based model has also been very successful, enabling the more effective targeting of our early help services towards those in greatest need.
- 1.3 One year on, it is timely to review the impact of these changes in order to ensure that they are delivering consistently good outcomes for children and young people in a sustainable way. In order to assist in this process and ensure that any proposals for change are evidence-based, two external reviews of our services have been commissioned. We asked senior colleagues from the eastern region of the Association of Directors of Children's Services to undertake a peer review of the operation of our Multi-Agency Safeguarding Hub [or MASH] and the First Response Team, which took place in March 2018. We also commissioned an in-depth analysis of the likely causes behind our growing population of children in care from Oxford Brookes, which took place between January and April 2018.
- 1.4 The review of our services has also been assisted by the decision by Ofsted to undertake a focused visit under the new Inspection of Local Authorities' Children's Services framework that concentrated on the journeys of our children in need and children in need of protection, which took place in March 2018.
- 1.5 In addition we have listened to the views of our staff as expressed in workshops facilitated by Oxford Brookes, feedback at staff roadshows from staff and managers, and listened to the views of other key stakeholders about our services.
- 1.6 This report summarises the key findings from the external reviews and messages from our staff and other stakeholders, leading to a series of recommendations around how we can ensure that our staff are supported to work as effectively as possible with vulnerable children and young people, now and into the future.
- 1.7 It is important to say that while this report sets out proposals to make some quite significant changes to the way in which services are delivered, many strengths were identified in the outcomes of all of the external reviews. These particularly related to the skills, competency and knowledge of our staff, the extent to which leaders and managers know our services and understand what is needed in order to continue the journey of continuous improvement, and the impact of bringing together early help and

children's safeguarding services.

- 1.8 The changes proposed in this report seek to build on the strengths identified, as we take the children's change programme further forward and develop a coherent model of delivery across the whole service.

2. MAIN ISSUES

- 2.1 Listed below are the recommendations for change being made, followed by a brief summary of the evidence base. Detailed evidence and rationale for each recommendation is contained within Appendix 1 of this report, as further referenced under each recommendation.

2.2 Recommendation 1: Move resources from the MASH to support increased screening and diversion at the contact centre at St Ives, enabling the MASH to focus on decision-making where the needs of children referred is unclear.

- 2.3 The current Multi-Agency Safeguarding Hub was established in April 2017 and operates jointly with Peterborough. It is part of what is known as the Integrated Front Door, which is located at Chord Park in Godmanchester. The current model is based on what is sometimes known as a purist model, which says that decisions about all or most children about whom enquiries are made should be overseen by a qualified social worker or very experienced practitioner.
- 2.4 While arguments can be made to support such an approach, it is very expensive to implement as it requires large numbers of qualified and experienced staff to oversee decisions about children and young people where in practice most enquires made are reasonably straightforward. Most enquiries about children are scenarios where advice or information can be given; smaller numbers will require a response from early help services; very much smaller numbers again will require a response from children's safeguarding services.
- 2.5 The strength of a MASH is that partners contribute to decision making about children and young people and it is very much the case that partners have been much more successfully engaged in the MASH since April 2017, which is a real strength and one that needs to be retained. Where this sharing of information is most important is where it is unclear from the information held by children's services and from the information within the referral as to what the most appropriate response should be.
- 2.6 The peer review identified, however, that the MASH is continuously struggling to meet the very high levels of demand. It has not been possible to recruit the numbers of social workers and managers required to cope with the volume of enquiries. This in turn has meant in practice that multi-agency information sharing usually only takes place when a decision has been made to hold a strategy discussion because there are serious concerns about the welfare of a child.
- 2.7 While the peer review identified that the Early Help Hub was a strength, it also found that this was struggling to cope with the volume of enquiries passed to it.

- 2.8 The proposal is therefore to move some resources from the MASH to the customer contact centre at St Ives. Experience from elsewhere is that at least half of all enquiries about children and young people can be screened out at this point. This, together with some other changes around the detailed operation of the MASH will mean that it can focus on where it adds most value: sharing information between partners about children where the most appropriate response is unclear. Focusing multi-agency input on these children and young people will improve the quality of decision-making for this group of children and young people and so lead to better outcomes.
- 2.9 It should also be noted that the new Ofsted inspection framework for children's services emphasises the need for timely and proportionate decision making within children's services. The current model whereby most children about whom enquiries are made are screened by children's social care is not proportionate and is likely to result in delays in families receiving a response to their needs.
- 2.10 Further information about the evidence base and rationale for this recommendation can be found in Appendix 1, sections 3 and 6.1.
- 2.11 Recommendation 2: Adopt a single children's information system within the MASH.**
- 2.12 Peterborough and Cambridgeshire councils operate different children's information systems. This means that the opportunities for developing a truly integrated response are limited. It also means that it is difficult to provide good quality performance information. We are already working with colleagues in Peterborough to activate the Liquid Logic MASH module. We are exploring the feasibility of this module working with Cambridgeshire's system to provide a temporary solution while longer term options are considered. We need to move to a common, aligned IT system for the whole of children's across the two authorities as soon as we can. This matter will be considered by the General Purposes Committee at its meeting on 29 May 2018, as the committee with responsibility for IT.
- 2.13 Further information about the evidence base and rationale for this recommendation can be found in Appendix 1, section 6.1
- 2.14 Recommendation 3: Move to a structure of teams that include a dedicated management role.**
- 2.15 This is one of the more significant proposals in this report. Most children's safeguarding services are currently configured across 32 units. There is also a county-wide 14-25 service which works with children in care, care leavers and includes a number of other services, and the county-wide MASH and First Response Team.
- 2.16 While many of our staff report that they like working in the units, and particularly value the input from clinicians, both Oxford Brookes and Ofsted have highlighted the fragility of the Unit model. Units are small, consisting of a case-holding Consultant Social Worker, a senior social worker and two further social workers. When these units are faced with demands from an increase in caseloads, exacerbated by carrying a vacancy and perhaps from further pressures resulting from annual leave, they struggle to cope. This has been particularly the case in South Cambridgeshire and Cambridgeshire City,

where recruitment issues are most challenging.

- 2.17 This fragility impacts on the quality of work undertaken. Ofsted identified, for example, that many children in need are currently being visited at only the statutory minimum levels of frequency. Visiting families infrequently is likely to extend the period of intervention and risks difficulties escalating. Delays in care planning, use of the public law outline and other similar issues were also identified by both Oxford Brookes and Ofsted.
- 2.18 Moving to a team structure would result in dedicated oversight and a more resilient service. A typical team under these proposals would consist of a non-case holding team manager, two senior social workers or equivalent, four to six social workers of which up to two may be in their assessed year, one to two alternatively qualified workers, supported by clinician input. Each team would also include business support.
- 2.19 The overall model of practice would remain a systemic one, again supported by the clinicians. While practitioners will experience change as a result of this proposal, the aspects of unit work that they are most positive about – the model of practice and support from clinicians – would be largely retained.
- 2.20 The Consultant Social Worker role is one that is enormously challenging since it combines a requirement to both hold children’s cases and maintain oversight of the 60 and sometimes more children allocated to other social workers in the unit. This combination of responsibilities is not a sustainable one and when faced with demands from managing a caseload or ensuring that plans for children allocated to others in the unit are progressing well, it is the latter that is likely to suffer.
- 2.21 It is very important to note that this is in no way a criticism of the practitioners holding the Consultant Social Worker role; it is simply a reflection that the role itself is not sustainable.
- 2.22 Lack of dedicated management oversight is a factor identified by Oxford Brookes, while both Oxford Brookes and Ofsted highlight variations in practice across the County, which is likely to be a function of having such a large number of units undertaking the bulk of direct work with children and families.
- 2.23 Further information about the evidence base and rationale for this recommendation can be found in Appendix 1, sections 5.2, 5.3 and 6.2.
- 2.24 Recommendation 4: Develop specialist teams within each district;**
- 2.25 Recommendation 5: Move the work of the current First Response Team to district-based assessment teams.**
- 2.26 Along with recommendation 3, these are also significant proposals, and are best understood by being considered together.
- 2.27 Under current arrangements, the First Response Team is tasked with undertaking all new s.47 [child protection] enquiries that result from new referrals into the MASH. The First Response Team is based at Chord Park, meaning that team members also spend

a lot of time travelling to visits across the county.

2.28 The 32 units are responsible for a wide range of other activities, including:

- Single [Child and Family] Assessments;
- Some s.47 [child protection] enquiries for cases open in the unit;
- Children in Need;
- Children in need of Protection;
- Children and young people in care proceedings, including permanency planning;
- Children and young people in care but who are aged under 14.

2.29 The peer review identified that the First Response Team does not have the capacity to meet the demand for all new s.47 enquiries, meaning that a number of these are also picked up by the Units. This lack of capacity in the First Response Team is the result of a combination of an establishment that is too small, further impacted by recruitment challenges. Recruitment challenges are exacerbated by the narrowness of these roles; relatively few social workers want to spend their entire working week undertaking only s.47 enquiries.

2.30 Meanwhile, in the units, the scope of the work places unnecessary pressure on practitioners working within them, and leads to certain groups of children – notably children in care and children in need – being at risk of being accorded a lower priority as workers struggle to manage competing demands. It is not difficult to see how an urgent need to visit a child subject to a child protection plan, or a deadline for the completion of a court statement or single assessment could result in the pushing back of the completion of a care plan for a child in a settled foster placement.

2.31 Delays in care planning, however, result in children staying longer in care, increasing overall care numbers. Reduced visiting to children in need, as identified by Ofsted, delays work being completed with the family, increasing the volume of children open to the service and risking an escalation of needs resulting in progression to a child protection plan or risk of coming into care.

2.32 Oxford Brookes also identified in the cases that they tracked a degree of over-optimism in work with families, resulting in a number of children coming into care later than they would have been had there been more robust oversight. Maintaining robust oversight is more difficult when there is a lack of managerial capacity and social workers are struggling with a large number of competing demands.

2.33 This finding of over-optimism has consequences for actions that we can take to reduce numbers of children in care, however. Children who become looked after at primary school age are much more likely to remain in care for the remainder of their childhoods than children looked after under the age of five, for whom permanent options such as adoption and Special Guardianship Orders are much more likely outcomes. This means that care numbers may remain higher in Cambridgeshire for longer than initially anticipated.

2.34 The original rationale for developing these ‘whole-life’ units was the laudable ambition that children should experience as few changes of social worker as possible as their cases move to different teams within the organisation. Interestingly, in their case

sampling, Oxford Brookes identified that most children and families experienced significant changes in social worker as cases moved within and between units.

2.35 It is therefore recommended that we develop a county-wide service for children and young people of all ages who are in care [see recommendation 6 below] and a district-based structure that consists of:

- **Assessment teams** that undertake all single assessments, s.47 enquiries and which undertake short term work of up to 3 months with families;
- **Children's teams** that undertake child in need, child protection and care proceedings work for mostly younger children aged under 13, and;
- **Adolescent teams** that work with young people who have significant challenges and who are at risk of becoming looked after.

2.36 More details about how these teams will operate can be found in Appendix 1 sections 5.2 and 6.2

2.37 Recommendation 6: Develop a county-wide specialist service for children in care of all ages, young people leaving care and asylum seeking young people

2.38 As noted above, the current wide range of expectations placed on units has been identified as contributing to delays in care planning for children. This is significant in that it is likely to result in poorer outcomes for children, who should progress as quickly as possible through the care system. It is also important as it increases the numbers of children in care.

2.39 There are other reasons for this recommendation, however, including that these generic units dilute the specialist knowledge of practitioners working with children in care. One criticism by a number of staff of the life-long approach is that the specialist knowledge of practitioners working with children in care was dissipated across the system. A number of experienced social workers left the authority at the time that the decision to move away from specialist provision for children in care, and it was this loss of specialism that appears to have been a factor in their decision making.

2.40 It is a reality that some practitioners prefer to undertake particular types of work; some prefer working with children in care, others prefer short term work with families, while others prefer to work with more challenging young people. Developing the specialism of children in care, combined with the specialist teams based in the districts will enable practitioners to align themselves with roles that are more aligned with their skills, knowledge and affinity.

2.41 The new all age children in care service would be created by combining the work currently undertaken within the units with the existing work undertaken within the existing 14-25 service, creating a single service that works with children in care of all ages, care leavers and young people leaving care. It is of note that Oxford Brookes identified that the current 14-25 service for young people in care and care leavers, based on a team structure with team managers, is operating well despite caseloads that are higher than is ideal.

2.42 More details about how these teams will operate can be found in Appendix 1 section 6.2

2.43 Taken together, these recommendations have some implications for other services and functions within children's safeguarding services, which are discussed in recommendation 7, below.

2.44 Recommendation 7: Develop a separate service responsible for fostering, the Hub and edge of care and supervised contact services

2.45 The current responsibility for the hub, edge of care and fostering service as part of the 14-25 service already makes this a significant service area in terms of scope of responsibility. Supervised contact is managed by one of the heads of service within the children's safeguarding service.

2.46 The proposal is to create a new county-wide service that has responsibility for fostering and related services, together with our residential and edge of care services and supervised contact service. This will require the development of an additional head of service role, bringing dedicated leadership to these important services. Members will of course be aware that controlling expenditure on placements depends on a successful recruitment and retention strategy for in-house fostering placements and it is important that there is sufficient leadership in place to ensure that this happens.

2.47 Recommendation 8: Develop case-holding alternatively qualified roles

2.48 There is a national shortage of qualified social workers and there are acute recruitment challenges in Cambridge City and South Cambridgeshire. These pressures mean that while we need to do all we can to recruit permanent social worker roles, we also need to consider alternative solutions.

2.49 Statutory guidance permits some children in need work to be directly allocated to alternatively qualified workers, providing the initial assessment is completed by a qualified social worker and the subsequent work is also overseen by a qualified social worker. Allocating work in this way means that we will require fewer qualified workers.

2.50 Developing these roles has a number of other benefits, however. Firstly, it is work with children in need that can suffer when social workers holding mixed caseloads of child protection and court proceedings work are prioritising their work. This means that children in need are more likely to be visited less often, meaning that the work with families has less purpose and drive. This in turn means that cases remain open longer – increasing the amount of work in the system – and risks situations deteriorating to the point that they escalate to child protection or to risks of coming into care.

2.51 Secondly, this group of workers are more likely to reflect the community served and to live locally, meaning that once appointed, they often remain in post for a considerable time. Not only is this good for the stability of the overall workforce, it also provides additional opportunities to develop social worker and other roles through career development.

2.52 More details about how these teams will operate can be found in Appendix 1 section 6.2.

2.53 Rationale for recommendations

2.54 In general terms the quality of much of the work undertaken by our practitioners is of a good standard. The lack of close management oversight of the progression of plans, however, combined with the lack of specialism within the existing fragile units means that there is a risk that interventions lack focus, purpose and pace. This leads to poorer outcomes for children and young people while leading to more work within the system including higher numbers of children in care.

2.55 The recommendations incorporate the findings of external reviews of our services in terms of areas identified as needing further development. They also reflect the views of a significant number of staff and managers in the service. While quite significant in scope, the proposed model retains what staff and external reviews have said works well; the systemic model of practice supported by clinician input.

2.56 Moving the model of delivery to this model also provides us with the opportunity to develop Family Safeguarding in Cambridgeshire. This model involves the secondment of adult-focused workers into children's teams and is a development of the unit model as originally adopted in Cambridgeshire.

2.57 Family Safeguarding has reduced numbers in care in Hertfordshire, where it was originally developed, by around 7%. The structure proposed above would be simple to develop further into a Family Safeguarding approach should further evaluation of the model indicate that this would be positive for children, young people and families in Cambridgeshire.

2.58 More information about Family Safeguarding can be found in Appendix 1, section 9.1.

2.59 It is also proposed that we explore the development of closer working relationships between the quality assurance services in Cambridgeshire and Peterborough, including the establishment of a shared service.

2.60 Quality assurance services are vital in ensuring that the services that are delivered to individual children and young people are effective. This part of our service, called the Partnerships and Quality Assurance Service, also contributes to ensuring that children and young people subject to child protection plans or who are looked after are making good progress. The service also supports participation by children, young people and their families and takes a lead in supporting improved practice standards for our practitioners.

2.70 Some of the services that are the responsibility of the Partnership and Quality Assurance Service are vulnerable to peaks in demand, and sharing across the two authorities brings the potential to improve capacity to manage such peaks in demand more effectively.

2.71 Developing a shared approach will also help both local authorities to learn from best practice in the other, improving services for children and young people.

2.78 More Information about this proposal can be found in Appendix 1, section 7.

3. ALIGNMENT WITH CORPORATE PRIORITIES

3.1 Developing the local economy for the benefit of all

There are no significant implications for this priority.

3.2 Helping people live healthy and independent lives

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

- Children and young people who live in permanent family arrangements have much better lifelong healthy outcomes and develop greater resilience, helping them to live successfully and independently as adults.

3.3 Supporting and protecting vulnerable people

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

- Children and young people in care are highly vulnerable;
- Good quality family-based placements close to home communities result in better long term outcomes than other placement alternatives;
- Where children can progress through the care system to successful permanence either with their own families, or move on to adoption or special guardianship, outcomes are generally better when plans are progressed without delay.

4. SIGNIFICANT IMPLICATIONS

4.1 Resource Implications

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

- Initial analysis is that it should be possible to reconfigure our services in line with the proposals above within existing resources. That said, there may be a need for some additional interim funding to support the secure implementation of the changes, and it may also be necessary to seek funding for change management costs from the General Purposes Committee;
- There are clearly significant implications for our staff and we will consult both informally and formally on the detailed proposals as these develop with staff and representatives;
- Governance arrangements for overseeing the implementation are in place, with a number of work streams reporting to an overarching board chaired by the Service Director. Membership of these work streams will expand to include practitioners now that the proposals are public;
- While we do want to ensure as much participation in the detailed development of

the proposals by staff and stakeholders, some of the changes needed are quite urgent. For this reason, we would want to see changes implemented in the autumn;

- Change of this nature does have an impact on service delivery but we will work to ensure that disruption for our staff and the children, young people and families with whom we work will be kept to a minimum.

4.2 Procurement/Contractual/Council Contract Procedure Rules Implications

- Any new contracts resulting will need to be procured in line with the Contract Procedure Rules of the authority leading the Procurement

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. The changes proposed in this report will assist the Council in discharging these responsibilities.

4.4 Equality and Diversity Implications

There are no significant implications within this category

4.5 Engagement and Communications Implications

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

- As noted above, these proposals result in significant implications for staff; informal and formal consultation will take place as more detailed proposals develop;
- It is also important that we ensure that children, young people, families and broader communities are enabled to contribute to the development of the proposals and we will ensure that consultation takes place with representative groups of children, young people and others for whom there may be direct implications;
- Stakeholders in the wider community including partner agencies will also be engaged in consultation around the changes through a series of stakeholder workshops;
- The above activities will be supported by a communications strategy and there is a communications work stream in place as part of the governance arrangements for overseeing the changes.

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 Name of Financial Officer: Martin Wade
Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by Finance?	Yes or No Name of Financial Officer:
Has the impact on statutory, legal and risk implications been cleared by LGSS Law?	Yes Name of Legal Officer: Prity Patal
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 Name of Officer: Matthew Hall
Have any localism and Local Member involvement issues been cleared by your Service Contact?	Yes Name of Officer: Lou Williams
Have any Public Health implications been cleared by Public Health	Yes Name of Officer: Tess Campbell

SOURCE DOCUMENTS

Source Documents	Location
None	n/a