Overview and Scrutiny Committee

17 April 2024

<table>
<tr><td colspan="2">Title: Report on the OFSTED Inspection of Children’s Services Improvement Plan</td></tr>
<tr><td colspan="2">Report of the Cabinet Member for Children’s Social Care and Disabilities</td></tr>
<tr><td>Open Report</td><td>For Information</td></tr>
<tr><td>Wards Affected: All</td><td>Key Decision: No</td></tr>
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<tr><td colspan="2">Accountable Director: April Bald, Operational Director for Children’s Care</td></tr>
<tr><td colspan="2">Accountable Executive Team Director: Elaine Allegretti, Strategic Director for Children’s and Adults</td></tr>
<tr><td colspan="2">Summary
In July, the Council was subject to a Standard Inspection under the OFSTED Inspection of Local Authority Children’s Service (ILACS) framework. The OFSTED inspection report was published on 4 September 2023.

In response to the eight recommendations made, the Council was required to develop and publish an improvement plan by 11 December 2023. The children’s care and support improvement plan covering the eight area of recommendations was published to Ofsted on time and is attached in Appendix 1.

This report sets out key high-level areas of progress made against the improvement plan.</td></tr>
<tr><td colspan="2">Recommendation(s)

The Overview and Scrutiny Committee recommended to:

(i) Note the OFSTED Improvement Plan published on the 11 December 2023; and
(ii) Note the progress made and areas requiring further improvement throughout the duration of this improvement plan.</td></tr>
<tr><td colspan="2">Reason(s)

• The OFSTED Improvement Plan is a key plank of the Council’s plans to continue improvement to Children’s Social Care.</td></tr>
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1. Introduction and Background

1.1 Between 10 July 2023 and the 21 July 2023, the Council was subject to a Standard Inspection under the OFSTED Inspection of Local Authority Children's Service (ILACS) framework. The final 'OFSTED Letter' formally setting-out OFSTED's findings was published on 4 September 2023.

1.2 In response to the eight recommendations made by OFSTED for improving children's social care in the borough, a detailed improvement plan has been produced and published to OFSTED on the 11 December 2023. This report provides the scrutiny committee with a copy of the improvement plan and a high-level update on progress to date. The lifetime of this improvement plan is up to 2025 and future reports will be provided as requested by Scrutiny.

1.3 It is important to note that the challenging financial landscape the Council has faced and continues to face, and how these impact on the delivery of the plan and improvement especially where transformation and growth is required.

2. Summary of Findings

2.1 The judgement from the OFSTED inspection is that services for children in Barking and Dagenham 'requires improvement to be good', as was the case at the last inspection.

Judgement	Grade
The impact of leaders on social work practice with children and families	Requires improvement to be good
The experiences and progress of children who need help and protection	Requires improvement to be good
The experiences and progress of children in care	Requires improvement to be good
The experiences and progress of care leavers	Good
Overall effectiveness	Requires improvement to be good

2.2 Although services for children requires improvement to be good, OFSTED inspectors reported that there have been improvements since the previous inspection in 2019. It was also well received that care leavers a new judgement in the ILACS framework was rated as good in Barking and Dagenham.

2.3 A previous scrutiny report detailed the findings and areas of strengths and weaknesses in the inspection letter. This report focuses on the improvement plan against the eight recommendations required for improving services to be good.

3. The eight key OFSTED recommendations – Progress Update

3.1 OFSTED identified 8 key recommendations where they felt improvement was most strongly required. These are:

- Timeliness of strategy meetings.
- Assessment and decision-making for children experiencing neglect.
- Timeliness of pre-proceedings pathways.

- Consistency of response to 16- and 17-year-olds who present as homeless.
- Oversight of children's placements in unregistered children's homes.
- Application of threshold in early help.
- Life-story work and permanency planning.

3.2 The improvement plan is set out in Appendix A. The remaining section of this report focuses on progress made to date and future iterations of this update will be made during the life span of the improvement plan.

3.3

Recommendation	Progress Update
Timeliness of strategy meetings.	A weekly performance dashboard has been produced and automated for the service to track timeliness of strategy discussions, including police attendance. Data is showing an improvement in timeliness with the average number of days to complete strategy discussions reducing to 3.17 days and over 70% are now being held in timescale. This is an ongoing priority area for further improvement. The strategy meeting scheduling system is in place and making a difference to co-ordination and timeliness – police are using the slot-based approach including CAIT. Practice workshops have been held across the service to ensure all practitioners are following standards. Multiagency workshops will be taking place in April /May 2024. Audits/dip sampling is taking place and quality of strategy meetings are improving with good multi agency attendance and participation with improved management follow up on decisions being made.
The capacity, quality, consistency and impact of supervision and management oversight.	Capacity has increased with 1.5 FTE Head of Service in Family Support and Safeguarding (FS&S). The wider review of children's care and support operational management capacity and structure is outstanding and has been delayed due to the financial situation of the Council. The development of the CARES Academy (driving learning, development, overall practice improvement and staff retention) is in train and a project manager has been recruited. The online platform will be ready by end of March and branding discussions have started with the overall aim of launching April 2024. Delivering comprehensive skills-based supervision training across the service is ongoing. The principle

	social worker is auditing quality of supervision records, testing impact of the training and whilst some inconsistency, there is evidence of more reflective supervisions. Heads of service undertake weekly dip sampling of practice in their area whilst includes an overview of supervision and management oversight. Dip samples are now routinely highlighting good and regular management oversight as a theme. Monthly case file audit has also indicated evidence of improved supervision driving plans and stronger management oversight. A supervision scheduling pilot is currently underway in Family Support and Safeguarding to evaluate how supervision timelines can be improved using a booking system. Demand is being managed with the number of children open to social care at 2355 compared to 2425 at end of Q2 2023/24 and 2386 at end of year 2022/23. Supervision timeliness at 8 weeks is at 87% and 4 weekly is at 67% – 4 weekly supervision is our practice standard and requires further improvement but going in the right direction. Average caseloads are manageable across the service although around 1:20 in assessment and intervention. However, 39 out of 157 (25%) of case holding social workers still hold more children than their respective target, a 1% decrease from the previous month (41, 26%). Those social workers are in Assessment and Intervention and FS&S. High caseloads impact on supervision timeliness and quality.
Assessment and decision-making for children experiencing neglect.	A new LBDD Safeguarding children's partnership (BDSCP) Neglect Strategy has been developed through the Neglect Improvement Programme Task and Finish Group (NIPTFG), with multi agency input. The Strategy will be launched across the workforce in March 2024 at an event where we will engage staff in the finalisation of the related action plan, ensuring we are understanding the needs of practitioners, as well as children, young people, and their families. The strategy contains key outcomes and measures which will be monitored quarterly by the NIPTFG and reported to the BDSCP Executive by exception. The NIPTFG was established by the BDSCP in October 2023.

	The NIPTFG has an independent Chair, representation from across partners, agencies and services and meets monthly. The NIPTIF has established five thematic subgroups. • 0-5 Babies and Children Subgroup • 5+ Children and Young People Subgroup • Social Care Subgroup • Poverty, Housing and Environment Subgroup • Information, Advice and Guidance Subgroup These subgroups meet monthly and are driving forward the improvement activity in their thematic area. The NIPTFG agrees all improvement proposals developed by the subgroups. Funding to appoint a practice lead has not been identified, in the context of significant financial pressures. The use of the Graded Care Profile 2 (GCP2), a tool that supports practitioners in assessing neglect and formulating meaningful plans with families, is being embedded in several ways: • The NIPTFG have identified the use of tools as a key issue, and reviews data on use. The improvement work includes developing resources for practitioners and training and establishing Neglect Champions, building on the DA Champions model. • The BDSCP has agreed to allocate resources to improve the Neglect learning and development offer in 2024/25 - the aim will be to improve skills and knowledge in recognising and responding robustly to neglect. • A joint Adults and Childrens Children Safeguarding Partnership Boards are hosting a Neglect Practice Week May 2025 - the outcomes of these will further inform the work of the NIPTFG and the action plan of our new Neglect Strategy. DARAC training has been rolled out, with 200 training spaces provided. This tool supports practitioners in identifying and assessing risk of domestic abuse. Train the Trainer training has been scheduled for March 2024. The DA Learning and Development Lead will continue to provide DARAC training through our BDSCP Learning and Development Offer. Other attendees will become the Champions for DARAC, rolling out workshops and sessions to support practitioners. Key practitioners in Support 2 Safety, our front door multi-disciplinary domestic abuse triage team have been trained to DARAC and incorporated the tool into their approach. We have also formally launched Domestic Abuse Champions corporately.

	We have an Implementation Lead in place to embed the Safe and Together approach to working with families where domestic abuse is an issue. The lead provided through Respect is delivering core and partnership training on Safe and Together. Attendance and engagement have been strong for this. The lead is establishing Action Learning Sets to support. They are collocating with the Specialist Intervention Service providing DA expertise within the SIS enabling effective challenge and embedding of the Safe and Together Approach in our practice. The Domestic Abuse pages of the social care intranet provide full and detailed information to practitioners - including a detailed Practitioners Guidance, and At a Glance Guide, MARAC Protocol and Referral Forms, available support services and referral forms and pathways. The pages also promote our DA Champions. We are finalising similar content for neglect. Funding has been sought for a Hidden harm worker to be based in the Specialist intervention service supporting practice with children and young people whose parents have substance misuse problems. Public health colleagues have funded and delivered perinatal mental health training for practitioners, enhancing their understanding of the impact of poor mental health on parenting. Poor parental mental health is a key feature in our longstanding child protection cases and those in pre proceedings. The Child Protection Panel is in place ensuring senior management and partnership review and oversight of 11 month+ Child protection plans, repeat CP plans and de-plans at 3 months with a strong focus on lived experience of the child. At end of January, 18 children out of 268 children on CP plans had been on the plan for 2 years plus (7%). Repeat CP plan performance is at 20% (47 children) above target and higher than benchmarks. A recent audit focusing on repeat and long duration plans with a lens on neglect highlighted that most children had been known to social care on and off over many years. All but one of the cohorts audited had been exposed to domestic abuse, and for most substance misuse issues was prevalent. A small minority had their CP plan ended prematurely due to over-optimism, and over a quarter ended as they were placed in alternative care. There was overall evidence of good Child

	protection planning, supervision, and direct work with children. There was an absence of focus on the perpetrator (hence the importance of us embedding the Safe & together approach to domestic abuse which puts the focus back on the perpetrator and safety planning for the mother and children). The audit also evidenced the early help offer was not effective for this cohort of families highlighting the necessity of the work with the Partnership on effective early help responses to neglect and domestic abuse. A Child in need (CIN) partnership review meeting chaired by Head of Service meets monthly to ensure better oversight of 9 month plus CIN plans tackling any drift and ensuring progress is made. The majority of children in need are visited 6 weekly and have plans reviewed 3 monthly. Children on CiN plans for more than a year but less than 2 years has increased to 75 13% compared to 11% at end of year (60 children) while those open for 2 years plus has remained at 2.5% 14 children. This cohort tend to be made up of vulnerable adolescents who require longer term intensive intervention. Audit and dip sample work indicate the positive impact of the Specialist intervention service e.g. family group conferences and family support work and improved quality of CIN plans. 20% of new Looked after children have entered care on Police Protection – up 1%. (29 children – 1 sibling group of 5, 1 sibling of 3, 2 sibling groups of 2 and 17 individuals) – above our target of 13%. This proportion is higher than all benchmarks and is under regular review. Heads of Service have oversight of all police protections and submit a need-to-know notification to the Director which outlines a review of the quality of practice and whether the police protection could have been prevented. A summary of these notifications highlights overall improved response to children who have been taken into police protection, with robust MASH enquiries and decision making, strategy meetings being held in a timely way with good partnership attendance and good decision making with consideration of child protection medicals and legal proceedings. Of the cohort most were returned home within 2 weeks of the police protection. Children are being seen quickly and wider family members being considered for children who cannot be placed back with their parent/s. A few children need not have come into care via a police protection had there been earlier more decisive assessments e.g. GCP2 and decisions made about their

	care. In these instances, a specific incident triggered the police protection in the context of longer-term chronic neglect e.g. mother found under the influence of alcohol and home being found in chronic conditions. Similarly, a homeless 16/17-year-old need not have triggered a Police protection as a child of this age can request to come into care. Larger families in the borough impact on the percentage of children.
Timeliness of pre-proceedings pathways.	The number of children in pre-proceedings has increased by one family and one child as at end of January 2024 - 20 children (9 families) compared to 19 children (10 families) this time last year. However, the number of children in pre-proceedings for over 16 weeks is lower – 7 children (3 families) at end of January 2024 compared to 11 children (6 families) one year ago. Timeliness is therefore improving. Good progress is taking place with improving pre-proceeding pathways with an ongoing review of all pre-proceeding children at maximum of 12 weeks regardless of whether assessments have been completed or are still in progress. TCLPM (Legal planning meetings) are now considering whether children can be safely stepped out of pre-proceedings post 12 weeks with assessments continuing under the child protection plan if significant harm to the child has been reduced. Some children have stepped across to a CP plan as a result. At 12 weeks, if further assessments are required, Social Worker and Solicitor are now identifying relevant experts prior to returning to TCLPM to avoid delay. Decisions are audited by TCLPM and recorded on file. Regular dip samples are undertaken, and a monthly report is sent to Director for Children's outlining progress for all Pre-Proceedings cases over 16 weeks but also covers general Pre-Proceedings update. These updates reflect some positive impact of the increased tracking and management oversight with more decisive decision making. Assessments commissioned by external independent assessors e.g. clinical psychologists, or independent social workers continue to contribute to the delay in pre-proceedings. We have proposed setting up and inhouse expert assessment team however the financial context of the borough has delayed any progress on this as it would require some growth monies. We therefore remain dependent on a limited pool of external experts.

Consistency of response to 16- and 17-year-olds who present as homeless.	The training and practice standards have been refreshed following the Inspection with a new training module which now includes case studies and role playing to ensure staff clearly understand the processes and the placement options for young people who present as homeless. The 16/17 Homeless Protocol is being reviewed. The first draft will be available for review on 11 March 2024. The inhouse children's rights advisor for looked after children now sees all homeless 16/17-year old's offering them independent advocacy asset out in National Guidance. The joint homeless assessment form has been revised so that the social worker and the children's rights officer both clearly record the options discussed with the young person about accommodation provision under section 20 or Section 17. Following the three-way meeting between housing, social worker and the young person, an options letter and leaflet is provided to the young person which clearly states what was discussed during the meeting highlighting the possible outcomes, accommodation options and the role of the independent advisor. All 16 plus presenting as homeless are now being notified to the Operations Director in the form of a Need-to-Know notification. This includes quality assurance by the Head of service. Overall, we are seeing an improvement in responses to homeless 16 /17-year-olds who present as homeless. Their needs are being assessed and there is evidence that they have seen the children's rights officer and had the options available to them explained. There is also good evidence of efforts to re-unify them with family, when safe to do so, through intervention by the restorative intervention team. There is evidence of swift management decision making and intervention when the social worker has not followed due process. Regular audits are undertaken, and outcomes shared at the Vulnerable 16-15 persons Housing meeting chaired by the Director of Operations. Audit findings indicate the improvement work is impacting positively although social workers and managers need to pay attention to the quality of their recording.

Oversight of children's placements in unregistered children's homes.	Director Need to know notifications are now completed for Director authorisation of any placement of a child aged under 16 children in an unregulated setting. The protocol on timely notifications to Ofsted on all under 16 placed in unregistered homes has been revised and in place since July 2023. For those placements, notifications are sent to Ofsted by the Placement Finding Manager as soon as the child moves into placement. Since July there has been 100% compliance with this notification process. A list of children and details on their unregulated placement is included on the agenda for the monthly Provider Risk, Quality & Concerns meetings. This list includes the date of the placement, the date the notification was sent to Ofsted, a summary of pre-placement checks (or if it is a framework provider) and a summary of the findings from a visit by the Provider Quality Team (in person or virtual visit depending on placement location). These papers are distributed to a wide range of people, including the Commissioning and Operational directors. Children who are under 16 in 16+ provisions or children over 16 in a 16+ but on a DOLS provision are discussed at the monthly Residential oversight meeting (ROM). This meeting quality assures the child's care package including progress being made to find a registered placement or step the child back to a foster/ family placement. Expectations on frequency of visiting to under 16's in unregulated settings has been set and Practice guidance has been issued to all staff and will be monitored via performance data on visits to children in care. Dip sample activity indicates increased visiting by social workers to these children, although distance of the placement does prove a challenge. These children are also being seen in placement by their IRO and one child has a Family support worker funded by the Local authority visiting 3 times a week. There is also evidence of frequent management oversight and supervision for these children.
Application of threshold in early help.	Roadshows in October 2023 and monthly drop-in sessions have taken place to further embed the continuum of needs threshold across children's care and support workforce and partners.

	Weekly dip sampling of decision making in MASH is undertaken by the MASH Head of service. This work includes review of the work undertaken by early help with consideration of their decision making to step up to MASH. Overall, decision making in MASH is good and informed by robust MASH enquiries where partners have contributed information enabling the MASH managers to make an evidence-based risk assessment and decision. History is routinely taken into consideration and analysis is child centred. There is evidence of MASH managers routinely evidencing the rationale for decisions rather than merely ratifying the social work recommendation. Around 70% of referrals into MASH now have a detailed MASH enquiry, which contributes to improved decision making. Targeted Early Help Advisory service and Locality service manager use the current step-up and step-down protocol in collaboration with MASH and regularly review of threshold application. Audit shows increased confidence in application of threshold. Audit of the decision making by the Support 2 Safety (S2S) domestic abuse team in MASH shows consistently strong decision making and application of the Continuum of Need threshold. Domestic abuse referrals were previously likely to be subject to repeat referrals. The expertise within the S2S team has strengthened the quality of decisions with the needs of perpetrators being routinely considered, safety planning included and a marked increase in referrals to MARAC. The MASH multi agency monthly audits continue, and the vast majority now have a 'good' finding with some outstanding areas of practice. Quality of referrals are seeing some improvements. Dip samples highlight more timely early help planning and interventions with families. However, lack of parental consent can hamper progress and lead to re - referral back into social care. Many repeat referrals are in relation to vulnerable adolescents and children with special education needs and the early help offer not being readily available or impactful for this cohort. The Early Help improvement work includes a focus on this cohort. The January monthly case file audit highlighted improved focus on the lived experience of the child in the Early help work and some outstanding early help assessments with strong partnership involvement and purposeful direct work. Where work was less strong was

	where families who had long term involvement with social care services due to neglect and had been stepped down, audit indicated the early help offer was less effective for these families.
Life-story work and permanence planning.	A great deal of improvement work has focused on timely permanence planning. A detailed weekly permanence tracker provides single oversight on the prevalence of permanence plans for all looked after children. This tracker supports managers in ensuring more timely permanence planning meetings. Current data shows that 94% of looked after children have had a permanence planning meeting and 99.5% have had a PPM by second LAC review. This is excellent progress. Permanence practice guidance has been issued and training rolled out to staff. The most recent dip sample showed improving practice with better understanding of parallel planning and consideration of the permanence options available for the child with family group conferences being routinely held. There is further work to do to support more coordinated early planning for adoption, although the adoption scorecard is still impacted by delayed court proceedings for these children. The Principal Social Worker is currently planning regular bitesize workshops on the ethos and planning needed for ensuring early permanence and this will include the sharing of best practice and exemplars. Efforts are underway to purchase a Life Story App which will be available to all looked after children and become a repository for photos, certificates, and other memorabilia that a parent and child will collect and keep as they grow. This app will support the child understanding their story, family connections and childhood experiences. Our inhouse therapy team continue to support quality life story work and are developing a new training offer for staff in the corporate parenting and children with disabilities service to support improved life story work. Dip sample activity by the Head of Service is evidencing increased prevalence of photos and direct work with young people focusing on ‘their story ‘and identity. We have recently been successful in winning a bid from the DfE of £650 k to implement a Lifelong links offer. This will contribute to strengthened life story work and connecting young people with wider family and

	important people in their lives which in turn will strengthen their understanding of their history and improve their sense of belonging.

4. Consultation

4.1 The OFSTED Improvement Plan was developed in conjunction with key stakeholders across the Council, including the Lead Member for Children's Services. This included partners outside of Children's Care and Support who will play a significant role in delivering the improved outcomes for our children and young people.

4.2 Findings from the inspection and the associated improvement plan has been presented to the Local Safeguarding Children Partnership. This Improvement Plan will also be formally presented to the local Health and Wellbeing Board and NEL ICB.

5. Financial Implications

Implications completed by: Antony Envoldsen-Harris, Finance Business Partner

5.1 There are no financial implications

6. Legal Implications

Implications completed by: Dr Paul Feild Principal Solicitor Standards and Governance

6.1 This report is for the Committee to note. It sets out a comprehensive description of the required improvement plan focused on the necessary steps to raise the standards to establish arrangements which deliver the outcomes which the inspectors report identifies to be achieved across the board. The plan has been delivered and published on 11 December 2023 before the final date for doing so.

7. Other Implications

7.1 **Risk Management** – there is significant risk in failing to deliver an adequate Children's Service. There are considerable risks to the children and young people who we have a duty to safeguard, as well as the risks to the Council of failing to adequately discharge statutory duties. As part of our governance and programme management arrangements, risks are being identified and will be managed through this process.

7.2 **Safeguarding** – safeguarding children is *the* core focus of the OFSTED Improvement Plan.

Public Background Papers Used in the Preparation of the Report:

- London Borough of Barking and Dagenham: Inspection of Children's Social Care Services (OFSTED Letter) September 2023

List of appendices:

- Appendix 1: Children’ s Care and Support Improvement Plan
- Appendix 2 – Glossary of Terms