APPENDIX A

Barking & Dagenham

OFSTED Self Evaluation 2022 Children's Care and Support

Summary of where we are, how we know it...and what next

December 2022

one borough; one community; no one left behind

Introductions



Key Messages



Demand reached unprecedented levels during 2022 (though stabilising) with the pandemic, cost-of-living crisis; and growth in the borough contributing to driving this demand.



We had to make some careful decisions during this period of exceptional demand to ensure our focus was on those most at risk – including using QA as a management tool.



The impact of some historical policy decisions (Ambition 2020) have had to be contended with; alongside a challenging workforce climate and placements market.



Council leaders and Members respond supportively, with investment made into Children's Social Care since 2021, Early Help Services in 2022 and Domestic Abuse services – though investment is modest in the context of growth (which is outstripping it).



Key Messages (cont.)

- A journey of continuous improvement and transforming services in the context of considerable challenges.
- Children are consistently kept safe from immediate harm throughout.
- Social workers and leaders continue to be passionate about doing their best for vulnerable children and families.
- Positive staff morale, social workers report feeling well supported and cared for by their managers and leaders.

- A comprehensive training and career progression pathway offer sees many staff staying and progressing in LBBD.
- Strong evidence of service user feedback evidencing a relational practice framework where children and families experience practitioners who are supportive, caring, non-judgmental and kind.
- A high support high challenge QA approach, with robust quality assurance activities informing improvement plans, whilst always celebrating strong practice.



Key Messages: a reminder of our context

- A community hit hard by Covid, with many structural inequalities exacerbated – we are still learning the impact of this.
- A population that is growing rapidly with the highest rates of poverty in London (and in some areas the country).
- Very high levels of churn and mobility within vulnerable communities; likely to be some of the hardest hit be the looming cost of living crisis.
- Our journey, knocked a bit off track by Covid and its aftermath, is one of whole system's improvement, on every area of practice and in a unique local context – we are working to be good in every area – partnerships, prevention, social work practice, recruitment, retention and caring for our staff and children and families.

Hard work paying off – not all at once, and in stages and different places, but we are prioritising, working tactically and keeping the system safe.

Barking & Dagenham





What we know about practice (a summary)



Early Help

The data shows us

333 families (729 children) open to targeted early help at the end of September 2022/23. We have completed a higher number of Early Help assessments in the last 6 months.

Good performance

The majority of children/families open to targeted early help are seen every 4 weeks (on average 85%) and a high 93% in September.

Almost all children and families have an Early Help Assessment (EHA).

The majority of families with a completed EHA have a timely TAF meeting (average of 85%).

Supervision timeliness is improving – a high 94% in September and around 85% on average this year.

Areas requiring improvement

Allocation timeliness (10 Working Days) is improving due to increased staffing and capacity but remains a challenge.

Early Help Assessment timeliness, although improving to nearly 70% year to date, performance is below target.

Practice - Strengths and Progress

New structures now in place and recruited to (almost fully) following significant investment.

Practice Standards revised - co-developed with the service and implemented with a real focus on children seen; purposeful interventions; outcome focused plans, management oversight and reflective supervision.

There has also been essentials training and comprehensive resource bank developed (TREE).



Early Help (cont.)

- Good evidence through audit of direct work being undertaken; visits to the children are focused on practical and purposeful intervention, with good recording of the worker's observations of the mother's care for the children.
- Feedback from children, families and partners is positive overall, complaints dealt with quickly and learning used in the service, more formal methods of gaining feedback is being implemented
- Development of Rapid Response Team to support front door.
- Data tracker/monthly performance meetings firmly embedded and ensuring focus on areas of poor performance is maintained e.g. allocations and assessment timeliness. Action plans in place.
- Managers tracking practice through team meetings with TM group and locality-based group supervision and action learning sets.
- New Assurance Board implemented in May to focus on quality of practice has shown where practice is good and areas for further work and challenge. Action plan rigorously monitored.
- No audits graded as inadequate (a roughly 50/50 split between Requires Improvement and Good) – much improved.

Practice - Areas for Improvement

- Consistent Quality across each locality and timeliness of EHA.
 Timeliness needs improving across the service and Team
 Managers are now expecting a first draft of the EHA after 15 days.
- Greater consistently with including the child's voice, absent parents and other professionals' views and analysis.
- Recruitment of skilled frontline staff and team managers remains a priority, to ensure timely allocations and improved quality of supervision and management oversight.
- Continue to develop partnership working through the TAF to ensure children's plans are clear and outcome focused, lead to meaningful interventions and create sustainable change.
- Workforce development and training particularly so given the planned move to Family Hubs.
- TEHAS development: single front door, wider partnerships and IAG
- QA process aligned and achievable development of consistent high quality practice – links to assurance board.



MASH and Assessment

The data shows us

Contacts to social care fairly stable with a monthly average in 2022/23 of 1163 compared to 1171 in 2021/22.

Referrals have increased post COVID-19 but we seeing some levelling out with a monthly average this year of 534 compared to 513 in 2021/22.

The majority of referrals progress to a statutory single assessment.

Good performance on feedback to referrer – over 90% monthly.

Most contacts are completed within timescale. On average 96% of contacts RAG rated red are dealt with in time (99.5% green).

Number of ongoing assessments is lower down to 619 at end of September and average caseloads in Assessment and Intervention have decreased to 19 in September compared to very high 32 in May this year.

Most assessments completed within 45 days.

Almost all children are seen during assessment.

Practice – Strengths and Progress

- MASH makes safe decisions, and no children are left at risk of immediate harm.
- MASH consults other professionals appropriately and responses are timely.
- EDT makes appropriate decisions and passes cases through appropriately.
- Most referrals give suitably clear picture of children's circumstances and the worries about them.
- In most cases MASH workers gather suitable range of good quality background information.
- Consent to MASH enquiries is consistently recorded.
- MASH managers clearly and consistently record their oversight and sign-off on contacts and referrals, and these decisions are appropriate.
- Strategy meetings are well attended, and information sharing is appropriate.



MASH and Assessment (cont.)

- Initial response to worries about children is robust and children are seen quickly when required
- When worries about children increase, workers take appropriate actions e.g. convene strategy meeting or arrange for the child to be looked after
- An improved timely through-put of children stepping across to Early help services and Family support and safeguarding services.
- Joint assessment approach with Housing colleagues for homeless 16 /17 year old's – improvement work overseen and positively endorsed by MHCLG.

Practice – Areas for Improvement

- Referrers to consistently address consent in the MARF making it clear who has consented, when, and their authority to give consent.
- Establish a permanent education presence within the MASH
- Work with health partners to consider how information from GPs

- can be consistently obtained to help inform MASH decisions
- Sharpen focus on children's lived experiences to inform analysis and plans – more purposeful visits and direct work
- Improved focus and senior management oversight of repeat: contacts, referrals and repeat assessments- carefully applying the threshold / continuum of need at every step to reduce volume of referrals and assessment that lead to No further action
- Improve timeliness of assessments and children progressing to ICPCC
- Improve quality of plans made at strategy meetings and at the end of an assessment - more outcomes focussed
- Refresh the Multi agency Threshold / Continuum of need document – with focus on children in specific circumstances i.e. physical chastisement, D.A and those with disability



Children in Need and Child Protection

The data shows us

Number of children on CIN plans declining due to CiN improvement work - 613 at end of September compared to 842 at end of 2021/22.

The majority of children in need are visited every six weeks.

The majority of children in need had their review in timescale.

The number of CP children decreased by 53 from 455 to 402 between August and September this year (now 390).

Almost all children on CPP seen every 4 weeks - good performance.

Good performance with few children subject to subsequent child protection plans (9%).

Almost all child protection reviews were completed in timescale.

Very few children (6%) have a ceased CP plan lasting more than 2 years – 15 out of 233 children.

Seeing CP children alone is improving. Aged 4+ seen alone on last 2 weekly visit improving to 67% - 12% higher than end of year 2021/22.

Around 3 in 5 of all CP children seen alone - up by 8% on end of year.

Over 40% of S47s progressed to ICPC – positive direction of travel.

Around 8 out of 10 children at ICPC result in a CP plan.

Lower proportion of repeat CP plans.

Practice – Strengths and Progress

- Most children in need and children subject to child protection planning are being kept safe, none audited have been found to be at risk of immediate harm.
- They are seen regularly by their social workers who know them well- with evidence of culturally sensitive work
- CP reports show social workers have an understanding of the child's lived experience and what is important to them.
- Partnership working and information sharing is a strength with partners consistently attending and participating in meetings.
- Specialist intervention service involvement provides practical support which is valued by parents and helps to improve parenting experienced by children.



Children in Need and Child Protection (cont.)

- Specialist intervention service involvement provides practical support which is valued by parents and helps to improve parenting experienced by children.
- Family group conferences are routinely offered to families.
- In most cases contextual safeguarding risks to children are recognized and well described with good multi agency information sharing
- Return home interviews offered to most children demonstrate an awareness of curiosity and contextual safeguarding issues including push /pull factors and signs of exploitation
- Management oversight in the Adolescent service is clear and consistent with concise analysis of contextual risks, making appropriate recommendations to progress work
- Through feedback we have a good understanding of what makes a positive difference in reducing risk of exploitation
- Established National referral mechanism panel (NRM) results in trafficked children having timely conclusive grounds decisions and multi agency support plans.

Practice – Areas for Improvement

- Social work analysis and plans need to be more informed by the child's lived experience
- All planning needs to be more outcome focused and CIN threshold need to be consistently and appropriately applied
- Visits to children need to be consistently purposeful with evidence of quality direct work
- Supervision needs to be consistently reflective
- Improved management oversight to address timeliness of children being seen two weekly when on CP plan and timeliness of Core groups
- Improve consistency of reviews of exploitation risk assessment tool and responding to Contextual Safeguarding case direction
- Refresh and embed a Domestic abuse risk assessment tool and more consistent use of the Graded care profile 2 assessment tool
- Progress improvement work on CSA in partnership with Centre of expertise in CSA.



Children in Care and Care Leavers

The data shows us

Increasing number and rate per 10,000 LAC up to 443 at end of September

Increasing proportion of LAC on ICO and declining proportion on FCO - S20 stable at around 25%.

Children entering care on police protection increasing (24%) – above benchmarks.

47 young people (11%) are in residential placements at September – down 1 on last month. Children's homes/schools have increased by 1 to 39.

The majority of children in care are visited 6 weekly.

Almost all looked after children that require them are visited every 3 months.

Few looked after children experience more than 3 plus placements and performance is at 13%.

The majority of looked after children have long term placement stability at 71% - above benchmarks.

Almost all looked after children had their review in timescale.

Almost all children in care have a permanence plan recorded.

Improved performance on RHIs - 69% of children were offered a return home interview (of which 88% accepted).

The majority of children in care for a year or more have an up to date medical.

The Aspire Virtual School (AVS) continues to be strong, providing an effective service.

The AVS continues to demonstrate robust outcomes in education with most children in care making good progress and above average attainment for children in care compared to national children in care average.

Most of our children in care are in good or outstanding schools, and where they are not, the AVS monitors their progress robustly.

The most recent data shows that we remain below the national average for unauthorised and overall absence and for fixed term exclusions although above average for persistent absence.



Children in Care and Care Leavers

The AVS has worked hard with social care colleagues, to improve the Personal Education Plan (PEP) completion rate. In 2021/22, 89% of children in care had an up-to-date PEP compared to 86% in 2020/21. The quality of PEPs has also improved.

High level of keep in touch with care leavers.

The majority of care leavers (68%) are in education, employment, and training.

Almost all of care leavers (92%) are also in suitable accommodation and our performance is above target of 90%.

The large majority of care leavers have an up to date pathway plan.

This year 8 students progressed to University, which is 50% increase from 4 young people who progressed to University in 2021.

Practice – Strengths and Progress

 Missing coordinators are persistent and consistent in offering quality RHI's to children in care, improving understanding of risks and reasons for the missing episode.

- Improving picture of tracking and progressing children's permanence plans
- Improved early permanence for new-born's through work of prebirth team
- A Residential oversight meeting ensures circumstances for children in these settings are better understood with improvement on driving forward their plans for leaving residential care where appropriate
- Children in care visits are recorded in a child centred way evidencing their lived experience – workers know their children well and advocate for them
- Children in care are supported well by the Virtual School.
- Children in care are supported to see their family members
- Young people led corporate parenting board, improving members and leaders understanding of the experiences of being in care and a care leaver in LBBD
- Care leavers have timely access to their move on accommodation due to a strong partnership between social care and Housing



Children in Care and Care Leavers (cont.)

- A new service structure aimed to offer children the opportunity to get to know their Leaving care advisors earlier than 18
- Care leaver apprentice and traineeship posts in social care
- Foster carers and children in care have access to a Mockingbird placement getting additional support.
- DfE national lead on improvement work for care leavers, sighted LBBD Enhanced Local offer as one of the best he had seen.

Practice - Areas for Improvement

- Management oversight and improved supervision needs to consistently drive case direction – supporting more timely permanence arrangement being achieved for children
- Working with wider London partners to address sufficiency of placements
- Improve Initial health assessment timeliness and quality
- Improved focus on children coming into care via Police protection
- Improve quality of life story work
- Improve the quality of pathway plans for care leavers



How we know it: Quality Assurance



Quality Assurance

Our Approach to Quality Assurance (incl. practice evaluations)

- A revised Quality Assurance Framework and Practice Evaluation programme introduced in February 2022 with an increasing number of managers completing practice evaluations
- This included a new Practice Evaluation Tool and implemented a more systematic approach.
- Monthly training offered to managers completing practice evaluations on the practice evaluation tool
- To strengthen oversight, each service area completes audits for cases in their area.
- All completed audits are moderated for practice judgement and findings.

Building Capacity

During 2022 we have introduced additional, significant capacity to work within Quality Assurance to ensure that there is adequate reach, at sufficient pace to cover our service as a whole. Known as our 'QA Leads', each has a dedicated service area of focus.

In addition to our QA Leads, we have established a small cadre of experienced, interim support to ensure there is sufficient oversight of continuous improvement, and to provide support to operational leadership to deliver.



Quality Assurance (cont.)

Learning >>> Practice

- Quality Assurance Service leads on delivering messages of practice improvement through a range of quality assurance activity:
- Disseminating Monthly Practice Evaluations findings.
- Delivering Monthly 'QA practice evaluation workshops' to managers completing practice evaluations
- Attendance at practice evaluation moderation meetings,
- Attending service, and team meetings
- Learning from practice alerts and escalations from IROs and CP chairs

- All completed audits are moderated for practice judgement and findings.
- Overview reports completed for each audit cycle, dip samples and thematic audits
- Practice of Concern process that tracks the completion of remedial action for all audits graded "inadequate"
- Service 'dip-sampling' across children's services.
- Live MASH multiagency audits since February 2022
- Parental and child feedback sought.
- Strengthened IRO and CP chair oversight (via planning, consultations, and midway reviews).



Quality Assurance (cont.)

Learning >>> Practice (cont.)

- Testing of the Practice through sitting with social workers.
- Practice week (Domestic Abuse Focus)
 September 2022
- Undertake thematic reviews and dip samples
- CP chair and IRO expectations outlined and disseminated across all teams
- Introduction of tool for application of the threshold for significant harm
- Cross section of service areas and themed audits.
- Targeted training to upskill CP chairs and IROs

QA Areas for Improvement / Priorities for 2022

- Ensure QA activity is impactful and leads to improving the quality of practice.
- Compliance of at least 95% (currently 75%)
- To complete moderation of all sections within the practice evaluation tool
- CP Chair and IRO oversight and quality of minutes, analysis and plans
- Continue to build on the consultation undertaken with children, families and agency partners.
- Ensure learning is accessible to staff and userfriendly for managers to realise positive change through effective support/challenge



Improvement journey – and what next



Strengthening our understanding of the quality of practice

A comprehensive programme to better understand the quality of practice from across the services is now underway. This programme is supported through our Quality Assurance Division detailing a monthly review of focused areas to sit alongside our business-as-usual programme of audit and practice evaluation.

The forward programme includes (but not limited to) the following:

- Direct work with our child protection conference chairs, this includes observations of conferences.
- A review of all children subject to a child protection plan testing for effectiveness and robust application of thresholds.
- A range of dip-sampling activity focusing on repeat referrals, multi-agency MASH audits.
- Review of thresholds on the following areas: physical chastisement, S47 and Strategy Meetings, disability, and domestic abuse.

"The plan is to review the programme monthly to ensure timely delivery of completed activity alongside providing assurances that all learning can evidence tangible improvements within practice over time."

This programme is underpinned with an approach of working alongside practitioners and managers and seeks to embed a culture of learning from the findings and themes arising from both our monthly audit and practice evaluation programme.



Priorities for the next 12-months

Cracking consistency in the quality and impact of social work practice— with focus on :

- Supervision and management oversight
- Quality planning informed by the child's lived experience and outcomes—(this includes safety planning, CP and CIN purposeful plans and permanence planning)
- Purposeful visits and direct work
- Application of threshold
- Further improving permanence for children in line with Ofsted Focused Visit in May 2022
- Refreshed Practice Standards, Practice framework and a suite of risk assessment tools to support consistency of quality practice

- Increasing level of permanent staff in the Assessment and Life planning services
- Restructure Adolescent service to strengthen the offer for vulnerable adolescents and harness the good practice in that service
- Develop strengthened participation offer for children in care & care leavers
- SEND improvement work
- Developing the Family hub/Early help offer
- Implement the new DA offer
- Strengthen sufficiency of placements options

