

TRAFFORD COUNCIL

Report to: Overview and Scrutiny Committee
Date: September 2022
Report of: Jill McGregor – Corporate Director Children’s Services

Report Title

Children’s Services’ Improvement Activity

Summary

A report to provide the committee with an overview of the Children’s Services’ Improvement Journey to date, and of the actions taken to address the findings of the 2019 inspection and response to the recommendations

Recommendation(s)

- To note the contents of this report and the work that has been progressed to date.
- To agree to receive further updates
- To offer scrutiny and challenge to the service.

Contact person for access to background papers and further information:

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Background Papers:

Corporate Priorities	N/A
Relationship to GM Policy or Strategy Framework	N/A
Finance	N/A
Legal	N/A
Equality/Diversity	N/A
Sustainability	N/A
Carbon Reduction	N/A
Staffing/E-Government/Asset Management	N/A
Risk Management	N/A
Health and Safety	N/A

1. 2019 Inspection – Summary

1.1 In March 2019, Trafford Children’s Services was subject to an unannounced inspection under the Ofsted Inspection of Local Authority Children’s Services (ILACS) framework. The inspection judgements sit under three headings:

- The experiences and progress of children in need of help and protection
- The experiences and progress of children in care and care leavers
- The impact of leaders on social work practice with children and families

Trafford were last subject to a full Ofsted inspection in January 2015 ([Trafford 2015 Inspection Report](#)). The overall judgement at that time was ‘Good’ and for that reason the ILACS inspection in 2019 was a short inspection, in line with the Inspection Framework at that time.

1.2 The inspectors made the following judgement:

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

The Ofsted report was published 8th May 2019 and can be found online at: [Trafford 2019 ILACS Inspection Report](#)

1.3 The key things that Ofsted identified as needing to improve were:

- Senior leaders’ understanding of the quality of social work practice, through accurate evaluation of performance information, and implementation of an effective quality assurance framework.
- Management oversight at all levels of social work practice with children in order to ensure that work is good and is helping them to achieve better outcomes.

- The response to all children referred to [Front Door] to ensure timely review and effective decision-making about the help that children require.
- The quality of social work assessment and plans to ensure that they are effective in meeting children's needs.
- The response to children who go missing to ensure that return home interviews are completed and records of these contain information that will help reduce risk in future.
- The way in which all staff and managers listen to the voice of children to inform individual work and wider service development.

The gap in leaders' understanding regarding what the quality of practice was hugely significant and set the tone for the whole findings. *"At the start of this inspection, the self-assessment and the presentation from senior leaders made clear that they believed services remained good or outstanding. They had no awareness of the decline in services and no accurate understanding of the current quality of practice"* Ofsted 2019

1.4 An Improvement Plan was produced in May 2019 and the Council responded with investment and realignment of corporate support and ownership. The Improvement Plan was an immediate response to the ILACS findings, and the Plan focused on the inspection findings, and not necessarily Trafford's longer-term vision and aspirations.

1.5 Following a change in leadership, the Improvement Plan was refreshed, progressing from traditional improvement plans to one of ambitions. It was a signal of the intent, commitment to continuous improvement and culture change. The refreshed plan incorporated learning from the response from the Covid-19 pandemic and allowed the service to take stock of their journey and achievements so far. The approach became more outcome based with a relentless focus on impact. Leaders really started to ask 'so what?' and 'what does this mean for children and families?' and started to drive forward a much-needed culture change. Governance arrangements were strengthened to provide greater scrutiny, accountability, and risk management for all of the improvement work

Each of the 8 Ambitions has its own workstream and action plan, with a member of the senior leadership team as the ambition lead. There is representation from across the partnership within the membership of these workstreams. Qualitative and quantitative measures of success, aligned to priorities, were agreed – answering the 'so what?' question – and a dedicated scorecard was developed to sit alongside the plan.

2. Monitoring Visit Activity

2.1 Since Trafford Children's Services Full Inspection under the *Inspecting Local Authority Children's Services Framework* (ILACS) in 2019, there have been 4

Monitoring Visits as well as a Focus Visit, that specifically considered the authority's response to the pandemic:

Summary of the monitoring activity is as follows:

October 2019 – First monitoring visit (with a focus on the Front Door)

March 2020 – What was planned to be the 2nd monitoring visit was cancelled due to the pandemic

February 2021 – Covid Assurance Focussed Visit that considered all aspects of CSC delivery and included an Her Majesty's Inspector (HMI) for Education

September 2021 – Second monitoring visit. Inspectors reviewed the progress made in all areas of concern identified at the last inspection including the quality of social work assessment and plans

March 2022 – Third monitoring visit. Inspectors were focused on children in care and ensuring that effective support was being provided to enable them to achieve better outcomes.

July 2022 – Fourth monitoring visit. The focus of this visit was Children in Need, considering specifically: assessments, plans, consistency, and the impact of CIN journey for children and young people.

All of the formal assurance activity has included consideration of the quality of leadership and management across the service and corporately. Findings and the ongoing improvement work has been reported regularly to Scrutiny.

2.2 In addition, the service has benefited from the continual oversight from the DfE and through formal DfE reviews of progress. There has been a flexible approach to the organisation of these reviews, and they have always involved practitioners.

2.3 Following the last Monitoring Visit a meeting was held between the DCS and the Regional lead HMI to determine the next period of oversight and scrutiny from Ofsted. At this meeting it was determined that the next inspection activity would be a full reinspection, under the ILACS Framework. This is line with Ofsted's assessment of where Trafford are on the improvement journey

Key considerations in reaching this determination included:

- Staff having been hugely positive about working for Trafford and they are Trafford's greatest asset
- Ofsted having not found systemic failings or children left unsafe whilst carrying out monitoring activity

- The service knowing themselves well. Inspectors have not seen or told leaders anything, during monitoring activity, that was not already known and indeed had not been reported to Ofsted by those leaders in meetings and context setting

The inspection will likely take place between December 2022 and March 2023.

The sections below will outline key improvement activity that has taken place and in doing so will consider our own self-assessment

3. Summary of Improvement Activity

3.1 In order to address all the recommendations made by Ofsted, a principle of being ambitious for children and families was adopted. It was imperative that the right people were in place who had the right skills and values. The whole service redesign had to take place as it was essential that the service was organised in a way that made sense to the workforce but more importantly to children and families.

3.2 Initially the redesign had an impact of the stability of the workforce but reassuringly this has stabilised. There is also a regional and national context around the recruitment and retention of social workers.

3.3 Workforce stability was and continues to be an ongoing priority for the service, and is routed through Ambition 3 of the improvement plan under the action; 'Creating the Conditions for Practice to Flourish'. An 'Investing in our People' Strategy has been developed which includes a dynamic plan, concentrating on Recruiting, Retaining, Growing & Sustaining. The plan is regularly updated and was part of the evidence submitted to Ofsted as part of most recent monitoring visit, who noted that the right action was being taken. This is a view supported by the DfE

3.4 There has been investment in a 3-year bespoke programme with Strengthening Practice. This commenced with a Care and Confidence module that recognised that having worked in pandemic and gone through a redesign, whilst simultaneously being on an improvement journey, practitioners and managers needed to be given space to reconnect with the values and vision of both self and organisation. This was a 6-month programme that completed in April 2022. This supported developing the right culture, being clear that it was the service's job to be helpful to children and families. There was clarity that only in seeing children and having purposeful time with them could there be a real understanding of what was happening in their lives, even during the height of the pandemic.

3.5 In that time, the service have worked closely alongside Strengthening Practice to develop the bespoke Core Skills Programme which is a critical element underpinning the improvement plan.

3.6 In addition, there has been a relentless focus on using data intelligently and trackers have been developed for each service that are being used routinely by managers to understand what is happening within their services.

3.7 Through the whole service redesign, a service has been created where leaders have manageable spans of control and clear lines of sight to practice. A systematic layer on layer approach to the recruitment was implemented in the newly designed service from Head of Service to social workers and this was successful; 95% of practitioners and managers were given their first preference & 65% of or new Practice Manager posts were recruited to from internal permanent candidates or agency workers who wanted to become permanent.

3.8 The newly established leadership team were supported with the implementation of a bespoke management development programme and through a fortnightly leadership forum Leadership Forum which has seen leaders come together as a cohesive team with shared visions.

3.9 A dedicated Practice Improvement and Learning Service are driving improvements in the quality of practice through the learning from quality assurance. The approach taken has been that practice improvement is led *by practitioners for practitioners* wherever it is possible. The development and roll out of a new Quality Assurance Framework meant that solid performance and quality assurance arrangements were created that ensured there was a strong understanding of the quality of service being provided to families. This framework outlines that quality assurance is not just about audit but it is about the wider parameters of how leaders and managers can be assured that quality of practice is improving and that children are safe. This is through audit, performance management and supervision

3.10 Quality assurance activity is now embedded, and the service is systematically achieving a high number of audits quarter on quarter.

3.11 Work still needs to take place to further improve the quality of assessments and plans to understand what life is like for children and ensure that workers are updating assessments and plans when children's circumstances change. There is still a lack of consistency with recording. Whilst Ofsted feedback has consistently said that social workers know their children and know them well, too often this is not reflected adequately in the written record, and internal auditing activity has highlighted this. 42% of audited assessment were graded 'Requires Improvement', indicating there is more to do. The area of focus now for the service is shifting this activity to achievement of outcomes for children. A session has been undertaken with managers around their role as the quality assurers of practice for the children they are responsible for. This is not to be seen as separate to audit. This is the day-to-day oversight and approval of assessment, plans and how they make decisions every day. Alongside this is the leadership master classes from Strengthening Practice and the internal offer of coaching sessions around having reflective conversations.

3.12 An annual overview report considered in detail the quality of audits over the last year and the subsequent moderations, in order to continue to strengthen the practice around quality assurance. The review found that are some examples of reflective conversations happening with practitioners with their manager to support ensuring quality assurance is about learning and is a live activity serving to improve practice for children and families. It also concluded however that these reflective conversations are not yet embedded across all service areas and manager in the way intended.

Really strong examples were highlighted, in terms of the information contained in the audits and also the level of analysis in terms of what was happening meant for the child, but some audits were found to still lack adequate analysis and be too task orientated.

The service is also aware that the practice of moderation is not yet consistent. Whilst there are some examples of clear and concise moderations that demonstrate analysis and reflection, there are some examples where there is a need for improvement.

Heads of Service now provide an overview report of the audits in their area, and this is demonstrating that themes and trends are being identified These are then becoming actions that the service takes across the teams.

3.13 Improving the quality of both auditing and moderations is a priority in order to achieve consistency. A clear action plan has been developed that addresses how these further improvements in quality assurance activity will be made.

3.14 The approach to multi-agency audit activity has been extended and is now having an impact and influencing changes in practice e.g., improvement in quality or referrals; audit of referrals aligning with agreed pathway; the quality of and consistency of recording visits to children - this is helping leaders understand children's lived experience and enhance the quality of assessment

3.15 As well as monthly Performance Clinics for each team and service and quarterly across the directorate, Quarterly Chief Executive and Lead Member Assurance Meetings are well established, that are chaired by Cllr Hynes, Lead Member for Children's Services. They hold the service to account on a number of areas and enable senior leaders to scrutinise data and performance and seek assurance about the quality of provision.

3.16 Throughout the whole of the improvement journey to date, there has been a focus on partnerships, both strategically and operationally. A Safeguarding Effectiveness Board was established to challenge and oversee partnership activity. Children's Governance across the whole system was strengthened including TSSP & Early Help arrangements

3.17 The Front Door was redesigned based on a reach out model, increasing the partnership presence. The number of social workers at this critical decision-making point was increased, to further strengthen screening and referral processes in line with the relational practice model. Social workers are actively involved in talking to referrers to improve the quality of information and build confidence and capacity across the partnership. This is ensuring children's needs and the worries referrers have been understood and that collective next steps are agreed in a timely way

The integrated front door is making a difference and timeliness of decision making remains strong. There has been a reduction in re-referral rates which means that fewer children and families are having avoidable repeat interventions

3.18 The partnership roles within the front door have been further strengthened by integration with GMP, enabling police and social workers to make joint decisions and

through dedicated specialist posts, including a dedicated schools' advisor & the mainstreaming of a Domestic Abuse advisor, who assists in the screening of Domestic Abuse referrals alongside the police, promoting preventative practice across early help and support as well as the integration of the Reducing Parental Conflict model.

3.19 The whole service redesign brought services such as Missing from Home Team, Youth Justice, and the exploitation team, together to support young people at risk of exploitation or missing under a single service which has resulted in a more coordinated response to adolescents who have vulnerabilities.

3.20 The resource within the specialist exploitation team (Shine) has been increased and expertise from across the partnership has been brought together to share worries and intelligence about young people where there are concerns and focus on early identification - Daily Risk Management Meetings. The work of this team is making a difference to young people through the building of trusted relationships and interventions. There is now further co-location with partners – Shine located within the Police and third sector colleagues sitting within Talk Shop.

3.21 Missing from Home processes have been thoroughly strengthened. Creative ways of undertaking Return Home Interviews have been adopted such as dedicated sessions being offered to young people in children's homes including activity-based session to support the development & engagement with workers and reduce missing episodes. A multi-agency audit took place in respect of the response to our young people who go 'missing from home' and the themes highlighted by these audits used to inform how the response can be improved and how the service can work to further prevent and reduce identified risk for the cohort of children and young people who go missing from their home.

4. What Inspection Will Look Like

4.1 The ILACS approach is a whole system of inspection which aims to apply a proportionate and risk-based approach. The inspection team will usually be 4 social care inspectors, a social care regulatory inspector and an education inspector (usually a schools HMI) will carry out 2 days of fieldwork. Looks at the whole service. A full inspection will be a 3-week process, with the final two weeks involving on-site fieldwork.

4.2 The HMIs will judge the effectiveness of partnership working through looking at children's records and considering whether what do together is making a difference to children. It will involve assessing impact of our audit activity and approach through the lens of 6 to 12 cases we have already audited and testing out whether we know what good looks like and how we use Quality Assurance to improve outcomes for children. It may also involve speaking to some of the children and families selected.

The framework tests the effectiveness of practice in respect of:

- The help and protection of children
- The experiences and progress of children in care wherever they live, including those children who return home
- The arrangements for permanence for children who are looked after, including adoption
- The experiences and progress of care leavers

Running throughout the whole process is a focus on assessing the effectiveness of leadership and management and the impact this has on the lives of children and the quality of practice.

4.3 Inspectors will determine the overall effectiveness graded judgement by taking account of the grading of the other judgements that have been agreed and by looking at:

- The extent of good practice across the service
- The extent and impact of any areas for improvement

They will also consider whether there any other identified areas for improvement have been identified and the extent to which leaders and managers have a 'grip' on the issues

4.4 The culture of inspection readiness is being developed across the whole of the service and the frequency of Improvement Board Steering Group has been increased (monthly) with a focus on Inspection Readiness and an associated action plan.

4.5 Evidence is being prepared in advance of any inspection notification and staff are being encouraged to celebrate good practice and to being proud of the good work that they are doing to improve the lives of children and young people.

4.6 There are some common themes throughout the feedback that leaders at all levels, through the Leadership Forum, are focusing on. This is through the development of service specific plans regarding what needs to improve and how these themes are addressed in practice. There is assurance that the right plans are in place at a strategic level to make the necessary improvements to begin to consistently evidence the impact of intervention for children and families.

----- Jill McGregor September 2022 -----