

Title	Children's Services Update
Date	28 March 2019
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Purpose of this report

1. To provide the Health and Wellbeing Board with an update of the latest developments within Children's Services.

Early Help

2. On 4 March 2019, Cabinet agreed changes to Children's Services which will mean a new Family Support Service and Early Help strategy for the county. The recommendations for change were prepared following a recent public consultation, conducted by independent consultation agency BMG Research. This asked residents and organisations for views on how to deliver early help services to support children and families.
3. The new integrated Family Support Service will consist of three area-based family support teams working in partnership with other organisations, particularly schools and health, to improve access to services and provide more joined-up services. The changes will take effect from September 2019.
4. The service will include a network of 16 family centres across the county, which were previously used as children's centres. It will also ensure that a further 19 buildings, which will no longer be used as children's centres, will be continue to be used for early years services and community benefit. The Cabinet has also agreed an Early Help Strategy, setting out the ambition of the service and how the Council and its partner organisations will work together.
5. Other key elements of the changes include:
 - (a) A named key worker for each family who will create a team around that family to help them tackle the issues they face. This will help ensure they only need to tell their story once, to their key worker.
 - (b) Investment in the Buckinghamshire Family Information Service website to ensure there is effective promotion of community activities together with information and guidance for families.
 - (c) Open access to stay and play sessions for babies and toddlers at family centres.
 - (d) Each school will have a named link family support worker to co-ordinate family support.

Home to School Transport

6. On the 4 March 2019, Cabinet also agreed a series of changes to our home to school transport offer. The recommendations for change were prepared following a recent public consultation which asked residents and organisations for views on how home to school transport services are delivered in Buckinghamshire.
7. The changes aim to modernise services, making sure they remain high quality and are sustainable for the future. They will also address the unsustainable budget pressures which increasing demand on services has caused.
8. Some of these changes will take effect at the start of the next academic year, in September 2019, while others are expected to be phased in over the next few years.
9. They will support young people by helping them to access education and develop their independence. There will be no change to arrangements for more than 5,000 pupils who are eligible for free travel. The revisions only apply to children and young people who are not eligible for free statutory home to school transport. The main changes are as follows:

(a) How we provide school transport

Many school and public bus services currently duplicate routes and our plan over the next few years will aim to reduce this. We will work with service providers to make routes more efficient and offer children and young people more flexibility in their travel options.

(b) Phasing out two historic local transport arrangements

Parents in the Ivinghoe and Evreham area who choose a school which is not the nearest appropriate one for their child, will be required to pay for transport. This brings these arrangements in line with the rest of the County meaning fair and consistent transport charges are applied to families. This will take effect from September 2020.

(c) Charging for transport for pupils with SEN aged over 16

Parents of all children over the age of 16 will be required to contribute towards their child's travel. This includes parents of children with SEN. Students with SEN who attend college can apply for a bursary to assist with costs. Transport will still be provided to pupils with SEN which affects their ability to travel. This will be introduced from September 2019.

10. The proposed changes include:
 - (a) Improving the mix of council provided and commercial transport to provide more flexible options.
 - (b) Applying statutory requirements to all Buckinghamshire school children, which would include phasing out of historically agreed local free transport

- arrangements. Parents choosing a place that is not their nearest eligible school would be required to pay for their transport in future.
- (c) Requiring parents of post-16 students with Special Educational Needs to contribute towards their travel costs. This would bring the application of the transport policy for this cohort more in line with their peers attending mainstream education.

Special Educational Needs and Disability

11. Our SEND Improvement plan was revised in December 2018 and now includes contributions from a range of stakeholders. The immediate priorities are:
 - (a) Compliance with the statutory Education, Health and Care Planning 20 week timescale, annual review process and effective use of panels.
 - (b) Improving the quality of Education, Health and Care Plans and the family experience.
 - (c) Ensuring children have their needs met locally in mainstream schools where possible.
 - (d) Developing early identification and early intervention support as part of the Early Help programme.
 - (e) Developing a shared understanding of co-production.
 - (f) Improving transition arrangements as young people prepare for adulthood.
 - (g) Improving support to children and young people with Autistic Spectrum Disorder (ASD).
 - (h) Upskilling the workforce across the local area to ensure children and their families benefit from skilled and knowledgeable professionals.
12. Alongside these improvement priorities, work is underway to restructure the SEN team, Education Psychology Service and the Special Teaching Service to ensure effective integration and sufficient capacity to meet need. It is anticipated this work will be completed by the end of April 2019
13. Preparation for a potential SEND Ofsted/CQC inspection is also continuing and a number of challenge events with partners have been held.

Ofsted Action Plan Update

14. The Phase 2 improvement plan continues to embed performance compliance and further develops practice and quality standards. The plan outlines the actions that the service will take to address the 10 Ofsted recommendations and, in addition, a further 3 actions have been developed in response to more recent findings. It also incorporates the Commissioner's report and the Secretary of State's statutory direction, including the Improvement Adviser role provided by Hampshire County Council.
15. The successful implementation of this plan relies on effective and competent first line managers as this tier is critical to achieving and maintaining good standards of social work practice. The Senior Management Team will provide

support and guidance to managers to improve outcomes for children and young people. It is acknowledged that in order to embed and sustain change, staff will require the right balance of performance management and support. Currently, it is too early to demonstrate the impact of initial progress against actions on improving outcomes. The plan will be under regular review to ensure that progress is tracked and actions are further expanded where it is necessary. Actions to address key risks also included in the plan and will be carefully monitored in line with current risk management practice.

16. The action that is taken and the progress made to improve outcomes for children, young people and their families will be monitored and reviewed by the Children's Improvement Board which is chaired by the Independent Improvement Adviser.

Ofsted Monitoring Visit – December 2018

17. Following the November 2017 inspection of Children's Social Care, Ofsted conducted their second monitoring visit on 11 and 12 December 2018.
18. During the course of this visit, inspectors reviewed the progress made in the arrangements for supporting children in need of protection, including:
 - (a) the understanding and application of thresholds,
 - (b) the quality, effectiveness and impact of assessment and planning in managing risk and improving children's outcomes,
 - (c) the effectiveness of practice in response to increasing or reducing risks for children subject to a child protection plan, including pre-proceedings interventions, and
 - (d) the quality and timeliness of supervision, management oversight and decision making, social work capacity and caseloads.
19. A range of evidence was considered during the visit, including electronic case records, discussions with social workers and their managers and other supporting documentation. In addition, inspectors spoke with the judiciary and the children and family court advisory and support service.
20. The key findings as detailed within the monitoring visit letter are set out below:
 - (a) Since the last monitoring visit, leaders have continued to maintain a clear focus on improving services for children in need of help and protection. They have worked determinedly to deliver improvements across the service, with strong political support.
 - (b) The senior leadership team continues to maintain a clear focus on how best to improve children's services and have the political support to deliver this. They have an accurate understanding of the extent of the challenge and a realistic improvement plan in place to address this. The refreshed improvement plan, implemented in November 2018, brings an increased focus on strengthening practice and quality standards, alongside continuing to embed performance compliance.
 - (c) Leaders' work to tackle quality, performance and capability issues has resulted in a high turnover of staff, in social worker and managerial positions. This has created considerable shortfalls in capacity in some

parts of the service, leading to high caseloads. Despite these pressures, morale across the workforce is positive, with most social workers reporting that they enjoy working in Buckinghamshire and feel supported by their peers and managers.

- (d) Variable standards in social work practice and frontline management in some teams impedes the practice improvements that are needed, and that leaders aspire to. A clear plan is in place to ensure robust performance management of staff, where appropriate, to ensure the service continues to improve.
- (e) The service is aware that it is difficult to achieve consistency and quality in practice, particularly when there are considerable gaps in supervision for social workers in some teams.
- (f) Work to strengthen the quality of practice and ensure greater compliance with basic practice standards is beginning to show some early signs of improvement in some parts of the service.
- (g) There remains too much variability in the quality of assessment, planning and intervention. The impact of this is that some children do not receive the help, protection and support they need.
- (h) Prior to the monitoring visit, the service reported significant pressures in capacity which meant that just over 100 children's cases were held in managers' names. However, by the time of the visit, appropriate action had been taken to reduce this number.
- (i) Most social workers visit children regularly and build effective relationships with them, taking time to understand their experiences. However, not all children are visited in accordance with their needs, with gaps in visiting evident.
- (j) Social workers use a range of direct work tools to engage children and elicit their views, but there is more to do to ensure that this work is properly recorded.
- (k) Strategy meetings are convened in response to concerns that children are suffering harm. Most include police and children's social care only and do not always include clear actions and timescales for delivery, or interim safety plans to ensure children are protected while enquiries take place.
- (l) Initial child protection conferences are convened when children's needs escalate and most lead to an appropriate outcome. The timeliness in which these are convened has declined over recent months.
- (m) The quality of child protection plans requires improvement. Some do not have clear actions or timescales for delivery and language is often professional, making it difficult for parents to understand.
- (n) Public Law Outline (PLO) meetings are effective in tracking progress of the plan and engaging parents in planning. However, there is still further work to do to ensure that all children's plans are progressed without delay, particularly for those children who have been in PLO for extended periods.

21. The service is pleased to report that the pressures have eased more recently as a significant amount of time has been invested in closing and improving the throughput of cases, where appropriate, to alleviate the pressures. In addition,

the application of thresholds in the MASH has also received substantial attention which is helping ensure that the right cases are progressed through the service. Further work is required on this but the early signs are promising.

22. The next monitoring visit will take place In May 2019.

Health Assessments for Looked After Children

23. Buckinghamshire Healthcare NHS Trust (BHT) is commissioned by the Clinical Commissioning Group (CCG) to provide this service for Buckinghamshire children placed in county, and to liaise with other Local Authorities to coordinate the health assessments of children placed out of county.

24. All children who enter care are entitled to receive an Initial Health Assessment (IHA) within 20 working days of becoming looked after. Performance for Buckinghamshire has been varied over a long period of time. In January 2019 (the most recent month where confirmed data is available), 70% of children had their IHA within 20 working days. Over the past 12 months, the average performance has been 76.5%, but performance has varied between 50% and 100% during this time. Some older children are not seen within 20 days because they refuse to attend. In such cases, appropriate actions are set to ensure that the health needs of the child are understood and met. For children placed out of county, arranging assessments with other Local Authorities can be difficult within the statutory timeframe, especially where children move between placements during this time. Early notification of children becoming looked after is crucial, particularly in these more complex circumstances, and there is significant and ongoing work across Children's Social Care and BHT to support robust and early notification processes.

25. All children over 5 are entitled to a Review Health Assessment (RHA) every 12 months. Those under 5 are entitled to an RHA every 6 months. Performance on RHAs has also been varied. All children are offered and receive an RHA unless they decline to attend, in which case action is taken as outlined above. Local Authority data for February 2019 shows that across all Looked After Children, 81% received a health assessment within the last 12 months. However, our own analysis shows that we need to do more to ensure that children are seen for their RHA on time. Improvement activity has therefore focused on ensuring that BHT is able to undertake RHAs in a timely manner, and on supporting an effective flow of information from Children's Social Care. Ensuring that RHAs for children placed out of county are done on time can be challenging. Where there are delays or problems arranging an assessment, the CCG will contact the other Local Authority area for assurance that our children are getting the same level of service as their own children.

26. To support performance across both Initial and Review Health Assessments, improvement activity includes co-location between BHT and Children's Social Care staff as well as improved information sharing and joint working.

27. All children leaving care are provided with a summary of their health history. Since January 2018, 100% of care leavers have been issued with a summary. BHT has worked collaboratively with Children's Social Care to agree a process for issuing a health summary retrospectively to children who left care between January 2016 and December 2017. This cohort has been contacted, and summaries are being prepared for young people who have responded to say they would like to receive one.

28. Whilst there has been significant work to drive improvement, it is recognised that performance is not yet good enough. Performance is robustly monitored and challenged by the CCG on a monthly basis via routine contract monitoring and reported every two months to the Corporate Parenting Panel. Senior officers across BHT, Social Care and the CCG are ensuring there is sufficient oversight and ownership of improvement activity and routine escalation procedures are used to ensure that issues and challenges are addressed on a day to day basis.