

Inspection of safeguarding and looked after children services

Sefton

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Reporting inspector: Ian Young HMI

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About this inspection

1. The purpose of the inspection is to evaluate the contribution made by relevant services in the local area towards ensuring that children and young people are properly safeguarded, and to determine the quality of service provision for looked after children and care leavers. The inspection team consisted of four of Her Majesty's Inspectors (HMI) and one inspector from the Care Quality Commission. The inspection was carried out under the Children Act 2004.
2. The evidence evaluated by inspectors included:
 - discussions with 106 children and young people receiving services, 15 parents and carers, front line managers, senior officers including the Director of Children's Services, the Chair of the Local Safeguarding Children Board (LSCB), elected members and a range of community representatives
 - analysing and evaluating reports from a variety of sources, including a review of the Children and Young People's Plan, performance data, information from the inspection of local settings, such as schools and day care provision, and the evaluation of a serious case review undertaken by Ofsted in accordance with *'Working Together To Safeguard Children'*, 2010
 - a review of 46 case files for children and young people with a range of need. This provided a view of services provided over time and the quality of reporting, recording and decision making undertaken
 - the outcomes of the most recent annual unannounced inspection of local authority contact, referral and assessment services, undertaken in Sefton in October 2010
 - interviews and focus groups with front line professionals, managers and senior staff from NHS Sefton, Liverpool Community Health NHS Trust including Litherland walk-in centre, Southport and Ormskirk Hospital Trust, Aintree University Foundation NHS Trust and Alder Hey Children's Hospital NHS Trust.

The inspection judgements and what they mean

3. All inspection judgements are made using the following four point scale.

Outstanding (Grade 1)	A service that significantly exceeds minimum requirements
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Good (Grade 2)	A service that exceeds minimum requirements
Adequate (Grade 3)	A service that only meets minimum requirements
Inadequate (Grade 4)	A service that does not meet minimum requirements

Service information

4. Sefton has an overall population of approximately 273,300 and is one of five metropolitan districts on Merseyside. Children and young people aged 0 to 17 years make up 20.4% of the population (55,700). The population is predominately White British (96.7%). The age profile of the Borough is older than for the country as a whole, with a greater than average number of people over 50 years of age. Sefton has the largest population of people aged over 80 years of any metropolitan borough.
5. Sefton's social care services for children in need are delivered by assessment and family support teams based in the north and south of the borough. These teams undertake duty and assessment work as well as providing planned intervention and support to children in need and children in need of protection. Services to looked after children are provided by three teams. There is a fostering and an adoption service that provide placements for children in need of short or long term foster care and adoption.
6. There are currently 380 looked after children and young people, of whom 252 are in foster care placements, 42 are placed with their own families, 55 are living in the borough's four children's homes and 31 are placed out of borough. Approximately 82 children are in receipt of overnight respite care. There is also a specialist social care disabled children service that provides support to 230 families of children with the most complex needs.
7. Sefton has 15 children's centres and four satellite centres, delivering a wide range of services for families and carers with children under the age of five. The common assessment framework (CAF) has been used to support 2,057 children and young people since 2007 and 235 children and young people are currently supported through child protection plans.
8. Sefton provides education places for over 39,000 pupils through 75 primary schools, five special schools and 20 secondary schools with two sixth form colleges and two general Further Education colleges. There is one pupil referral unit (PRU) covering Key Stages 2 and 3 with 34 places, and one for Key Stage 4 offering an alternative curriculum programme with 150 places. This includes provision for pupils permanently excluded at Key Stage 4.

9. Sefton Metropolitan Borough Council has undertaken a transformation programme to restructure its senior management and departments. The council plans to amalgamate the Children, Schools and Families Department with Adult, Leisure and Community services into a People Directorate, to be led by the former Strategic Director of Children, Schools and Families, whose role is now Strategic Director of People. Children's Trust arrangements have been maintained, and these form part of Sefton's local strategic partnership which works closely with Sefton's LSCB, corporate parenting board and shadow health and well-being board.
10. Prior to April 2011 all community health services had been provided by NHS Sefton, these services were transferred under the Transforming Community Services arrangements. Lead commissioner for safeguarding children in NHS Sefton is the Director of Corporate Performance and Standards, supported by the designated nurse for safeguarding. Children's services are commissioned via a joint health and local authority team which contains a number of jointly funded posts.
11. All health services in Sefton, including community services, are commissioned by NHS Sefton. Services are provided through a number of acute, community and specialist organisations. Adult community services are now provided by either Liverpool Community Health NHS Trust or Southport and Ormskirk Hospitals NHS Trust. All children's community services are provided via Liverpool Community Health NHS Trust, which also provides 70% of adult community services including a walk-in centre, prison services and out of hours primary care, nine Primary Care Trust (PCT) personal medical services, general practices and the dental service. The remaining 30% of adult services including the sexual health services are provided from Southport and Ormskirk Hospitals Trust. Southport and Ormskirk Hospital's NHS Trust provides acute children's services but no community children's services. The acute trusts serving children in Sefton include Southport and Ormskirk Hospital Trust, Aintree University Foundation NHS Trust and Alder Hey Children's Hospital NHS Trust. Acute women's health and maternity services are provided at Liverpool Women's Hospital in the south of the borough, and Southport and Ormskirk Hospitals Trust in the north of the borough, with follow-up general care through adult community services. Community maternity services are provided by Liverpool Women's Hospital in the south of the borough, and Southport and Ormskirk Hospitals Trust in the north of the borough. Child and adolescent mental health services (CAMHS) are provided via Alder Hey Children's Hospital NHS Trust and adult mental health services are provided by MerseyCare Foundation NHS Trust. Alder Hey is the main provider of children's acute care in the south of the borough with specialist children's accident and emergency department and provides all specialist and tertiary paediatric services. Southport and Ormskirk Hospitals NHS Trust provides children's accident

and emergency department within the Ormskirk site alongside some in-patient facilities and services.

Safeguarding services

Overall Effectiveness

Grade 3 (adequate)

12. The overall effectiveness of safeguarding services in Sefton is adequate. Statutory requirements in relation to safeguarding are met. The council and its partners are able to demonstrate substantial improvements in service provision through good use of lessons learnt from inspection findings, audits, outcomes from complaints and learning from serious case reviews. However, some key aspects of service provision have yet to show demonstrable improvement, for example child protection plans are insufficiently outcome focussed and the risk and protective factors identified by assessments are not always clear. Although a good quality assurance framework is in place and a culture of performance management has recently been introduced, it is not yet sufficiently robust to consistently improve practice. The Children's Trust and the LSCB provide effective and active leadership at all levels across the partnership. All staff and partners interviewed spoke very highly of the council's senior managers and of their commitment to develop the service, reporting that their ambition is having a positive impact and that they can see demonstrable improvement in the quality of service provision. The willingness of the council to prioritise and to commit resources to children's services in the midst of a tight budget settlement is a particularly positive feature. There is good cross-party political commitment and support for the prioritisation of safeguarding services which assists stability in medium and longer-term service planning.
13. Partnership working is well-established within Sefton and risk to children is well managed both within the council and across the partnership. The council and its partners have retained and reconfigured local Children's Trust arrangements and have restated their commitment to preventative working through the integrated Think Family model of service delivery, a comprehensive example of which is currently being piloted at a Litherland primary school. The Trust's highly effective processes both for commissioning services and delivering high quality training have contributed significantly to positive outcomes for Sefton's children; for example, the collaborative commissioning process that was undertaken to identify the providers of sexual health services. Following a period of heavy reliance on agency social work staff, the council has successfully recruited and inducted a permanent workforce. This is having a positive impact upon the stability and continuity of the services provided. Safe recruitment practice is embedded across the partnership. The local authority designated officer (LADO) role is established and is effective in ensuring that statutory requirements are met. However, more could be done to learn from the qualitative information that is generated from managing the allegations process.

Capacity for improvement

Grade 2 (good)

14. The capacity for improvement is good. Sefton Council and its partners are clearly experiencing a time of major change. The structures and service configuration for the delivery of children's services have all been introduced recently. In a challenging economic environment, the council has prioritised the needs of children and there is an evident shared ownership amongst elected members, senior managers of the council and its partners. The partnership clearly meets, and in many cases exceeds, statutory requirements. The services provided to safeguard children are at least adequate with many good aspects such as the range of domestic violence services available. Good use has been made of central government initiatives, such as Aiming High, and as a result there are exceptional, safe leisure opportunities available to children with disabilities, for example at the Crosby Lakeside Centre. There is strong commitment from all partners to ensure that the well-being and safety of children and young people are central to service planning and delivery. Early intervention provision is good and is effectively underpinned by use of the CAF. This results in positive outcomes for many children, with good early identification of their needs for safeguarding and protection. A wide range of good quality services are commissioned from and provided by the voluntary and community sector.
15. Systems are in place across the partnership to monitor and evaluate performance and to make continuous improvements, although children's social care service's recently introduced performance culture is still insufficiently robust. An action plan has been drawn up following Ofsted's unannounced inspection of contact, referral and assessment arrangements in October 2010; although timely and appropriate action has been taken to respond to most of the identified areas for development, the council is yet to demonstrate an impact in other areas such as the quality of assessments. However, there are some good examples of effective performance management within the partnership such as the processes adopted by the LSCB's performance sub-group.

Areas for improvement

16. In order to improve the quality of provision and services for safeguarding children and young people in Sefton, the local authority and its partners should take the following action.

Immediately:

- Ensure that social workers use case notes consistently, so that records are readily available to evidence social work intervention.
- Ensure that there is effective management oversight of social work intervention, which is clearly recorded on case notes.

Within three months:

- The LSCB should ensure that it receives effective reports from the LADO that include qualitative information to support the improvement of services across the partnership.
- Sefton Council and the LSCB should ensure that all child protection plans have specific and monitorable outcomes, for which partners can be held to account and that these are regularly reviewed.
- Sefton Council should ensure improvement in the quality and timeliness of social work assessment, in particular in the analysis of risk and protective factors.

Within six months:

- Sefton Council should ensure that the plans for the newly procured electronic recording system are both fully implemented and support effective performance management within its children's services.

Safeguarding outcomes for children and young people

Children and young people are safe and feel safe

Grade 2 (good)

17. The effectiveness of services in ensuring that children and young people are safe and feel safe is good. A strong safeguarding focus underpins all service planning and delivery in Sefton. The majority of children and young people spoken to during the inspection said that they felt safe. In a pupil perception survey undertaken by the council of over 4000 of the borough's children, over 80% said that they felt safe in Sefton. Parents interviewed said that there is excellent work done in the local community by agencies such as the Police, schools, the fire service and voluntary organisations to ensure children feel and are safe. For example Bully Busters, an organisation that works with schools across Sefton, delivers effective peer-mentoring training and targeted presentations on a range of bullying issues. Ofsted inspections of schools, residential settings and colleges in the local authority assess arrangements for keeping children and young people safe as mostly good or outstanding.
18. Children who are the subject of a child in need or child protection plan, receive additional direct work and group work from family support workers who also provide a valued weekend service, undertaking welfare and spot checks on children and families. A number of safe venues and activities are in place for children and young people with learning difficulties and/or disabilities and the range of opportunities for safe leisure and entertainment is good. The Crosby Lakeside centre is a valued resource which provides a range of excellent water sport activities to children and young people with learning difficulties and/or disabilities and there are also dedicated youth centre activities evenings. A local cinema provides monthly opportunities for families with children with an autistic spectrum disorder to enjoy film viewing in a safe and adapted context.
19. Children's social care files which were randomly reviewed by inspectors demonstrate that suitably qualified and experienced social workers take appropriate action to safeguard children and young people. In all cases scrutinised, children and young people were seen alone and spoken to and their views ascertained. However, whilst managerial oversight of these cases is evidenced verbally, this is not always consistently recorded in a structured way and it is not always possible to identify an audit trail of the decisions made on individual cases.
20. The management of allegations against people who work with children is satisfactory, although the strategic role and function of the LADO is currently not fully monitored across the partnership. Although

quantitative data is available on numbers and types of allegations, which demonstrates that guidelines are consistently followed by some partner agencies and allegations and referrals are appropriately progressed through to strategy meetings and investigations, there is a lack of qualitative information; for example an analysis of trends over time, to support agencies' training and development needs and ensure that all partner agencies have suitably robust allegation management processes in place. Good procedures and protocols for children missing from home, care or school are in place and are effectively implemented. The council's recruitment practice meets statutory requirements and human resources files seen by inspectors are in good order, with all relevant checks undertaken. A rigorous system is in place to consider any concerns arising as part of Criminal Records Bureau (CRB) disclosure checks. Complaints regarding children's social care services are handled effectively, underpinned by clear procedures which are suitably monitored, and an annual report is produced. The most recent report indicates that 93% of complaints were resolved at stage one. However, there has been an increase in complaints regarding the quality and reliability of services with most relating to the quality and accuracy of initial and core assessments. Children and young people are appropriately informed about the complaints procedure and outcomes through a twice yearly newsletter which is distributed to children's settings.

Quality of provision

Grade 3 (adequate)

21. The quality of provision of safeguarding services for children and young people is adequate. Early intervention and prevention services are becoming increasingly embedded and the use of the CAF is having a positive impact in diverting families from statutory intervention. Thresholds for access to services using the CAF are understood by all agencies following an extensive training programme under the auspices of the Children's Trust. Parents and partner agencies interviewed spoke positively about the impact of the CAF process and there is good evidence of multi-agency working, with regular attendance at the CAF multi-agency management panels. However, a number of CAFs seen by inspectors are out of date following significant changes in circumstances since they were initially completed.
22. The responsiveness of early intervention services is good and parents spoken to reported positively on the support and encouragement they receive from the provision. Family support workers based in services across the area provide a range of support to children and families. They work closely with social workers and other agencies to ensure packages of support meet families' needs. Appropriate early intervention strategies are put in place for children and young people with disabilities. A wide range of initiatives target specific diverse groups, which ensures that these groups have full access to services regardless of their background,

gender, and ethnicity; for example for eastern European migrants mostly employed in care and seasonal work in the north of the borough.

23. Some progress has been made on areas for development from the unannounced inspection of contact, referral and assessment services which took place in October 2010. This has resulted in a number of positive changes to practice and outcomes, although further improvement is still required in some areas. The quality of assessments undertaken by both children's social care offices is too variable. In some cases, research is used well to aid understanding of family dynamics. In others, whilst risk and protective factors are identified in assessments, they are not always explicitly stated or clearly summarised. Parenting capacity is not sufficiently analysed to gauge the level of risk to children and young people. A significant number of initial assessments are in handwritten notes waiting to be inputted into the electronic recording system and, as a result, they are out of timescale. Managers are therefore, on occasions, unable to establish whether or not this has resulted in delays in the provision of appropriate services. Some core assessments seen, whilst adequately detailed, were undertaken using hand written templates that are not consistent with current assessment practice as they focus on process and do not contribute effectively to the assessment of risk. Recording confirms that appropriate checks are undertaken and that children and young people are seen and that their views are routinely ascertained. Caseloads are high for some social workers, although these are reducing steadily due to the appointment of agency workers to help with a backlog of work identified during the latest unannounced inspection of contact, referral and assessment.
24. Within social care services, both paper and electronic case records are simultaneously maintained. This makes it difficult to locate up to date information and to gain a swift understanding of the complexities of some cases, as staff do not use case notes consistently so that the flow of work can be easily determined. It also inhibits a clear audit trail of management oversight and decision making. This is generally maintained through monthly supervision where all cases are discussed individually and managers also make effective use of performance management information to track individual cases. However, not all allocated cases seen by inspectors contained evidence of management oversight being effectively tracked to ensure that services are provided in a timely and appropriate way.
25. Child protection investigations are undertaken by suitably qualified and experienced social workers, in timescale with good liaison and involvement with the Police Family Crimes Investigation Unit and, when appropriate, with other agencies including health. Child protection conference reports are appropriately detailed. Statutory visits and core group meetings are regular and records examined showed that most were held within timescales. However, child protection plans often lack

detailed actions with clear outcomes and timescales. From core group recording seen, plans are not regularly updated to identify progress and it is therefore difficult to measure and monitor outcomes and for Independent Reviewing Officers (IROs) to be assured that drift is being avoided in achieving planned outcomes for children. All child protection reviews are undertaken within timescales.

26. Victims and families who experience domestic violence have good access to a range of multi-agency support. Sefton Women and Children's Aid, the vulnerable victims advocacy team, children's services including family support and the Police Family Crimes Investigation Unit all contribute positively to ensuring that victims and their families are well supported and protected from abuse. The well established sanctuary scheme enables women and children to stay in their home environment with appropriate support and safety mechanisms in place to ensure their safety. Representation from both statutory and voluntary partners at the multi-agency risk assessment conference (MARAC) meetings is good, with regular attendance. Good collaboration ensures that information is shared swiftly between agencies and effective actions are promptly taken to ensure that risk to children and families is minimised.
27. The out of hours service is suitably resourced and has appropriate links with day time services. However, not all staff within the out of hours service are able to access the electronic recording system and as a result up to date, relevant information is not effectively shared in some cases. They have good access to team and service managers and ready availability of emergency placements across the area, including the use of out of borough placements. There is good liaison with the Police on child protection enquiries.

The contribution of health agencies to keeping children and young people safe **Grade 1 (outstanding)**

28. The contribution of health agencies to keeping children and young people safe is outstanding. Health partners have developed and implemented highly effective systems and processes to provide assurance that children and young people are appropriately safeguarded. As a result of learning from a serious case review, all general practises have established a named and lead doctor with specific responsibility for safeguarding within each practice. These doctors have a good overview of safeguarding concerns and activities within the practice and are able to link together relevant issues that need to be addressed. This has ensured that general practitioners (GPs) make consistent and effective referrals when required. This process is proactively monitored by the named doctor for NHS Sefton. Very effective processes are in place within the local emergency departments and the NHS walk-in centre to ensure that all relevant information relating to children and young people's attendance is recorded, monitored and communicated to

- community providers, including GPs. Community staff have developed and implemented clear pathways to ensure effective contribution to strategy meetings. All strategy meetings are notified to the safeguarding children specialist nurse, who will ensure that the health representation and contribution is appropriate. Front line community staff are effective in delivering services that help children to stay healthy and safe. A full staffing complement of health visitors and school nurses is in place throughout Sefton and this service provides very good early intervention support including groups available in some children's centres for non English-speaking families.
29. Designated and named doctors and nurses provide highly effective support and supervision in relation to safeguarding, together with good systems of performance reporting and monitoring. This is provided to key staff within NHS Sefton and to provider organisations. Quality assurance, performance management and the provision of expert advice is provided to other agencies and is integral to the role of these named and designated professionals. Quality contracts with providers stipulate a range of performance indicators that provider organisations must comply with. These include children's safeguarding issues and are monitored by the designated nurse on behalf of the lead commissioner on a monthly basis.
 30. Healthcare Trusts are clear on their responsibility to have appropriately-trained staff, and this is implemented by the provision of training for all relevant staff. This provision is assured by proactive monitoring and reporting to trust boards. Children and young people of Sefton also have easy access to the specialist Children's Trust at Alder Hey. This trust has an excellent reputation in relation to its provision and specialist safeguarding service. It has recently been assessed as providing an exemplary service. Effective arrangements are in place to ensure governance structures remain robust and consistent during a period of significant organisational change within the health service.
 31. Services are very responsive to children's different needs and take good account of children and young people's views to ensure methods of communication are appropriate to the locality. A specialist health visitor is employed in place with specific responsibilities for asylum seekers, migrant and refugee workers, Gypsies & Travellers. This is effective in supporting vulnerable children and families within this vulnerable group. Appropriate and targeted information on services is made available in the community, through a range of locations. The sexual health service in Sefton is accessible through eight community locations and also provides additional access points within further education colleges. Children and young people with learning difficulties and/or disabilities are provided with relevant information. A range of effective forums are in place that enable children and young people who use services to provide feedback.

32. Health partners put into practice a clear, operational commitment to ensuring that the safeguarding needs of children and young people are met. Wide-ranging and appropriate provision supports the safeguarding of children with a disability. Good partnership working is evident within health disabilities teams and with health visitors, school nurses and local authority children services. Depending on the needs of the child, joint assessment visits are undertaken and numerous agencies are involved at the outset. For example children and young people with complex neurological conditions automatically have an allocated social worker and multi-disciplinary team meetings are the norm rather than the exception. Parent and carer engagement is very effective and a range of support, training and development opportunities are accessible to them. In special schools, these have involved joint training of teachers and parents. A range of support services is in place to support young women who are pregnant and appropriate advice and guidance is provided. Health partners ensure children and young people subjected to alleged sexual assault are appropriately examined and assessed by qualified and competent staff in a suitable environment. Maternity services have effective arrangements in place to support children and young people in primary and secondary care. Aintree staff have a very good awareness and understanding of procedures relating to adults presenting with domestic violence, substance misuse, and mental health issues and the potential impact on children in their care and the procedures are effectively applied. The emergency departments have good links with both the drugs and alcohol team and Merseycare mental health crisis team.

Ambition and prioritisation

Grade 2 (good)

33. Ambition and prioritisation are good. The importance of safeguarding children and young people in Sefton is recognised at both strategic and operational levels across statutory, voluntary and community organisations. The council has prioritised its safeguarding services to children for significant further investment with some changes already evident. These include the reconfiguration of services, increased numbers of permanent social workers and the re-commissioning of the council's electronic recording system with a rigorous implementation plan put in place by the Integrated Children's System ICS project board. Arrangements for the LSCB are robust and the Board works well in partnership with the Children's Trust Board through a written memorandum of understanding. The Trust Board has, through a review of its governance arrangements, reconfigured its partnership in a way which both suitably maintains the focus on children staying safe and emphasises its role in commissioning services appropriate to their needs. The arrangements for the two Boards to challenge and support one another are clear and robust.

34. Clear lines of accountability for Children's Services between the Chief Executive of the council and the Director of Children's Services are in place, together with clear shared ownership of business critical financial decisions by the council's senior leadership. For example agreeing to an increase of social work numbers at a time when the council's overall budget is reducing and the decision to re-commission the electronic recording system. There are open lines of communication between the Chief Executive and the independent chair of the LSCB in the event of a critical incident and an evident openness to listen to the independent chair's views and to act accordingly.
35. Good cross-party arrangements are in place for the overview of Sefton's safeguarding services by elected members, through a cycle of meetings of the Director of Children's Services with the Lead Member and the shadow portfolio holders. There are also regular informal meetings to keep the Lead Member informed, including about critical incidents. The Lead Member is an active participant in the LSCB and effective arrangements are in place for the scrutiny of children's services by elected members. The scrutiny committee has an innovative approach to selecting the topics of its annual review programme, which includes performance reports and also listening to the views and opinions of young people on what is important to them.

Leadership and management

Grade 2 (good)

36. Leadership and management of children's services are good. The Director of Children's Services and senior managers know their services well, and strengths and weaknesses are well understood. The council has a track record of responding to the findings from inspections and this has resulted in some improvements to safeguarding services for children.
37. There are excellent arrangements in place for the planning, delivery and evaluation of multi-agency training under the auspices of the Children's Trust. The strategy is the responsibility of a Trust sub-group which operates to an exceptional integrated delivery model in which the common core of training is met through the partnership approach and the 'specialist' requirements of the partners are then met by designated training resources from within their own organisation. The Trust also commissions any training needs identified by the LSCB. Seminars have been delivered across all agencies based on the learning from serious case reviews. The partnership employs a suitably broad range of methods to assess the impact of training and its effectiveness in delivering services to children such as CAF implementation. Budgets for learning and development have been ring-fenced within Children's Services so that a learning culture can be sustained.

38. The engagement of service users within Sefton is good. There is a clear commitment to listening to and learning from the views of users of the service including parents. Young people can participate in a variety of forums, such as the Youth Council which is genuinely engaged in the development of services, a recent example being reconfiguration of the youth service. Children with disabilities have also had the opportunity to improve services such as safe access to school buildings and, through Inclusive Solutions, a national organisation promoting the inclusion of all young people in a wide range of initiatives, they have made a positive change to specialist outdoor activities. A young advisers group of young people who wish to actively participate in service improvements has been recruited and is supported by the voluntary sector and this has been consulted on a range of service developments including plans for their involvement in the activities of the LSCB. Children and young people are routinely consulted about their wishes and views as part of individual service assessment and planning processes and this was reflected appropriately in case records examined.
39. Financial resources are used effectively to support the good processes in place for the commissioning of services through the Children's Trust. Children's Services issues receive clear priority from the council and its partners, against a backdrop of council wide budget reductions. One example of this is the procurement of the replacement electronic recording system, which represents the expenditure of a significant amount of capital funding at a time of severe budgetary constraint. Good efforts are being made to secure value for money; for example options are being explored for sharing costs between numbers of local authorities, and for streamlining some of the LSCB functions by working collaboratively. The availability of front line services is being protected to ensure the well-being of children and promote equality of access. For example effective and creative use of resources is enabling the development of high quality leisure space for children with a disability and there is good use of pooled funding, between health, education and social care, to ensure prompt delivery of equipment for children with a disability.

Performance management and quality assurance

Grade 3 (adequate)

40. Performance management and quality assurance arrangements are adequate. The recently introduced quality assurance framework in children's social care supports a satisfactory culture of performance management. A cycle of performance meetings effectively monitors performance indicators and targets and appropriate corrective action is taken to ensure compliance although team managers are not always sufficiently rigorous regarding individual performance; for example the high number of initial assessments that were found by inspectors to be waiting input on to the electronic recording system. The quarterly

performance management information is suitably detailed and is broken down by individual teams. One tangible example of improvement has been a reduction in child protection plans of more than two years duration. Through data monitoring, Sefton Council established that its figure was comparatively high and used a range of safe and robust means to reduce it, including increased monitoring by IROs.

41. Performance management of social work practice within social care services is developing but is not yet sufficiently rigorous as there are evident implications for the reliability of the performance data on which key decisions are based when, in a number of cases examined, key information was not on the electronic system. For example initial assessment timescales and management decision making are not effectively recorded. The consequence is that quality assurance within the council is not sufficiently robust.
42. Good arrangements are in place for monitoring performance by the LSCB performance sub-group. Agencies are 'called in' and their safeguarding performance is scrutinised by partners acting in the role of critical friends. Senior officers present performance details and the sub-committee drill down on the evidence offered. Members report high levels of satisfaction with this approach which has resulted in evidenced improvements in safeguarding practice across a range of services.

Partnership working

Grade 2 (good)

43. Partnership working arrangements are good. The LSCB fulfils its statutory requirements well with good multi-agency representation and a clear focus on the core business of safeguarding. The independent chair provides effective professional leadership to the Board and ensures that there is a good level of challenge between partners. There is good engagement within the Board and its sub-groups by partners including the Police, the voluntary and community sector and health agencies. Designated and named health professionals are effectively engaged with the LSCB and they regularly provide specialist expertise to ensure health issues are interpreted and understood by all agencies involved. An effective cycle of meetings routinely take place which deliver the Board's business plan. The serious case review sub-group is well established with good representation and understanding of the members' roles and responsibilities. Good cross working arrangements are in place with other LSCB sub-groups including the child death overview panel. Serious case review action plans are closely monitored and the sub-group have undertaken a number of internal management reviews to assist learning following serious incidents.
44. As with MARACs, arrangements for multi-agency public protection arrangements (MAPPA) are embedded, with good reporting mechanisms in place to the LSCB and to the strategic governance boards of both

panels. There is good multi-agency representation at the strategic domestic violence partnership forum. All partners are engaged, with information sharing protocols in place, and there is good coordination with MAPPA and MARAC arrangements. However, the good partnership at the strategic level is not always evident at an operational level in producing effective child protection plans that hold partners to account, as their recommendations are not sufficiently specific and monitorable.

Services for looked after children

Overall effectiveness

Grade 2 (good)

45. The overall effectiveness of services for looked after children and young people and care leavers is good. The Children's Trust and Corporate Parenting Board provide robust leadership and share an operational sub-group. This results in good coordination and agreed priorities for improvement within the partnership. Both Boards are chaired by the council's lead elected member demonstrating the political priority given to looked after children within the council. Elected members and senior managers of the council have a clear commitment to corporate parenting and act as champions for looked after children and young people. Elected members offer appropriate levels of scrutiny and challenge in respect of performance. They meet regularly with looked after children and young people, who have an input into the scrutiny committee's innovative programme of review. Statutory requirements are met well, with strong plans in place for further development, such as the placement strategy. The quality of assessment and planning is good. The case files inspected were mostly of good quality, with evidence of good direct work recorded in case records. However, the electronic recording system was not in general use within looked after children's services and this has a clear negative impact on the rigour of performance monitoring and management.
46. Outcomes for looked after children, young people and care leavers are mostly good with some outstanding features. There is a clear focus on a culture of participation and involvement of young people in the planning and delivery of services. The role of the children's participation officer has added exceptional value in this area. Highly effective partnerships are in place to assist looked after children to enjoy and achieve such as through the Positive Futures programme. Excellent virtual school arrangements are particularly beneficial for children of primary school age, but the educational attainment of looked after children and young people at Key Stage 4 requires further improvement. There is good engagement of health agencies in promoting the general health and well being of looked after children and young people and care leavers, although dental health of looked after children is a concern. Children and young people in out-of-borough placements are well managed and monitored. Good arrangements are established for the continuing support of care leavers with priority given to reducing the numbers who are not in employment or training.

Capacity for improvement

Grade 2 (good)

47. There is good capacity to improve services for looked after children, young people and care leavers within the Sefton Metropolitan Borough Council. The council's performance against national indicators for the

- care of looked after children are generally in line with or better than that of similar areas. Good leadership at all levels by the council and its partners results in the vision and priorities for the service being clearly articulated and translated into effective strategies, such as the placement strategy. Effective use of data monitoring enables partners to maintain an accurate awareness of the improvements made in commissioning high quality placements and in identifying areas for further improvement. A good performance framework has been implemented to identify any emerging issues although the performance culture to underpin this is as yet insufficiently robust. The effectiveness of performance management will be further developed by plans in place for the full implementation of the electronic recording system. The effectiveness of a wide range of programmes to support children and young people on the edge of care has been further enhanced by the creation of the Strengthening Families team from the reinvestment of resources released from the closure of a children's home. Despite the challenge of cuts to public sector budgets, investment from the council ensures services to looked after children remain a high priority. The newly stabilised workforce of permanently recruited social workers is working well with partners to deliver good and improving services for Sefton's looked after children, young people and care leavers.
48. The council shows a good awareness of the need to manage the market of out-of-borough placements available for looked after children and recognises that improvements are required to achieve high quality at an acceptable cost. The sign up by Sefton to the regional contract for quality rated placements with independent fostering agencies is planned to increase choice, speed up matching and lead to lower cost. A similar plan for a pan-Merseyside residential contract is being led by Sefton, working with other local authorities and Placements North West to develop a framework for specialist residential placement and short breaks with the aim of achieving savings and retaining a focus on both quality and flexibility.

Areas for improvement

49. In order to improve the quality of provision and services for safeguarding children and young people in Sefton, the local authority and its partners should take the following action.

Immediately:

- NHS Sefton and its health partners should ensure that the dental health needs of looked after children are met.

Within three months:

- Sefton Council and its education partners should ensure the sustained improvement of educational attainment for looked after young people at Key Stage 4 of their education.
- Sefton Council and its partners should improve the numbers of care leavers who are in employment or training.

Within six months:

- Sefton Council should ensure that the electronic recording system is fit for purpose and effectively supports the looked after children's service.

How good are outcomes for looked after children and care leavers?

Being healthy

Grade 2 (good)

50. Health outcomes for looked after children and care leavers are good. Partnership working, both within health agencies and with other agencies, is effective. Communication channels are open and transparent and health staff are clear of different agencies' roles and responsibilities. All health files viewed during the inspection comply with statutory guidance. The structure and content of the files was recently reviewed and this has led to more effective, logical, detailed and relevant recording practices. Clear arrangements are in place and applied for appropriate medical and nursing staff to carry out initial and review health assessments. Initial health assessment statistics indicate higher than average compliance with timescales at 91%. Good liaison with health partners enables assessments to take into account the overall health profile of children and young people.
51. Maintaining the dental health of looked after children remains an area of poor performance. However, NHS Sefton has identified the causes and have plans in place to improve this performance. At present the percentage of children who are recorded as having had an annual dental health check stands at 64.3% compared with 91% for medical checks. Audits on a number of children who appear not to have had a check for more than 12 months indicated this is, in part, an issue of recording rather than children missing appointments; for example foster carers not recording visits to local dentists. Account is taken as part of the audit process where young people over 16 who are beginning to make choices for themselves about when and if they wish to go to the dentist. Health partners are tackling the issues through regular performance meetings between the service manager, team managers and the lead nurse for looked after children. The community dental service has been tasked to target social work teams to give them information about the service and to approach the foster carer support groups to raise the importance of good oral and dental hygiene and promote knowledge of the service.
52. Health files indicate that screening and treatments are carried out effectively. This includes weight and height, hearing and vision, immunisation and vaccinations. Recommendations of health assessments are accurately transferred into health plans with timescales, accountabilities and intended outcomes clearly recorded. This practice results in high levels of performance; for example a high percentage of looked after children continue to have up-to-date immunisations. At 92.7%, it is well above the average for similar authorities of 85.3%. Similarly, the percentage undergoing an annual health check continues

to be high and is at 94.5%, which is above the average for similar authorities of 85.6%.

53. The lead nurse for looked after children and the link nurse have a comprehensive knowledge of issues and concerns relating to providing the required and appropriate health support, treatment and care to looked after children. Quality assurance processes are in place to ensure that the quality of assessments is of the required standard and that all statutory requirements are complied with. An effective notification system enables up to date information to be maintained in relation to newly looked after children and also for looked after children moving between placements. The acute trust and walk in centre have effective systems to provide information to relevant health professionals and any unscheduled attendance by looked after children at local emergency departments and the walk in centre is captured within health files.
54. A CAMHS service for looked after children is embedded within its Tier 3 teams. This offers good support with two dedicated CAMHS workers providing an effective service for looked after children in the north and south of the borough respectively. Group work and consultation slots are provided; carers from both areas can access either and the sessions are also open to adoptive parents. Direct work and support is also provided directly to residential settings such as children's homes and residential schools. Children and young people have good access to Tier 4 day and in-patient beds at two locations.

Staying safe

Grade 2 (good)

55. Safeguarding outcomes for looked after children are good. Of the looked after children and young people who responded to the survey undertaken as part of the inspection, 95% reported that they feel very safe or fairly safe and 94% said that there was at least one person they could talk to if they felt unsafe. In total, 89% found the advice that they received from adults about keeping safe was useful. In regulatory inspections, 80% of the borough's children's homes were assessed to be good overall and none inadequate. Improvements have been made to both the fostering and the adoption services, and regulatory inspections in 2010 assessed that both are now good.
56. In all cases seen, children are safe, in suitable placements and routinely seen alone by their social workers. The improved retention of permanent social workers and reduction in the use of agency workers is having a positive impact and increasing the consistency with which looked after children can build a relationship with their allocated social worker. Long-term placement stability has also improved, with robust plans for further improvement. Good care is taken when commissioning external placements and no residential or foster care placements have been commissioned from independent agencies that have been assessed to be less than satisfactory by recent Ofsted inspections.

57. Good support is made available to individual children and to foster carers, which contributes to the improved stability of placements. In addition to support from their social worker, support is also available through direct work and Theraplay from CAMHS and from Positive Futures, through the work of life coaches. CAMHS provide dedicated support to foster carers through regular group meetings which are focussed on strategies to improve carers' ability to understand and meet children and young people's behavioural needs.
58. Multi-agency arrangements for children and young people missing from care are effective, with good practice by the Police in building a rapport with all young people newly placed in care homes. A designated Police Officer meets and greets all young people, gets to know them as individuals and explains the risks of becoming missing from care.

Enjoying and achieving

Grade 2 (good)

59. The impact of services that enable looked after children and young people to enjoy learning and achieve well is good. The leadership of the virtual school is good, with some outstanding features. Particular strengths are the in-depth knowledge that the headteacher and her team have of each child, the good quality of challenge and support they provide to schools and the very good monitoring of progress from early years to post-compulsory education. Partnership working between the looked after children education service (LACES), schools, social workers, health agencies and the education welfare service is exemplary. This has contributed to improved education outcomes for children and young people, including those placed out of Sefton. The comprehensive 2010–11 action plan demonstrates that strengths and areas requiring further improvement are known and resources are targeted well. The children and young people who responded to the pre-inspection survey and those who met with inspectors said that they are getting a good education and receiving a lot of help.
60. Early years providers, LACES and the Families and Schools Together teams help the younger looked after children develop good social and emotional skills before they start school and ensure that the best possible placement in nurseries and access to outstanding children centres are sought. Early signs of concerns, such as learning difficulties, are addressed promptly. Children make good progress in their primary school and results have improved year on year. In 2010 they were well above the national average. GCSE results are rising and the gap in attainment between looked after young people and all 16-year-olds in Sefton schools is closing. However, too few young people obtained high grades at GCSE including English and mathematics.
61. Personal education plans (PEPs) are of good quality. They include clear targets for improvement and evidence that young people are involved in discussing their plan. All children and young people have a current PEP.

The local authority provides a wide range of resources to improve literacy and numeracy skills and the personal education allowance is used to good effect to support revision classes, provide one to one tuition or to purchase equipment

62. Attendance by looked after children at school is good. Immediate action is taken if a young person is absent or late for school and looked after children and young people with behaviour and attendance difficulties are prioritised for specialist support. Fixed-term exclusions are below the national average and no looked after child has been permanently excluded over the past three years.
63. There is good access by looked after children to a wide range of recreational activities both in and out of school. Sefton Active provides a large number of fun programmes. Free passes to leisure centres enable young people to participate and those who have a disability are supported well to access activities. The annual No Limits Celebration Award provides a very good forum to recognise achievement and promote enjoyment and learning. Young people and families said that they value this event.

Making a positive contribution, including user engagement **Grade 1 (outstanding)**

64. Children and young people who are looked after have outstanding opportunities to make a positive contribution. Young people say that they are given opportunities to express their views at their reviews and are supported to do so. Advocates are used effectively to ensure that children and young people who require additional support have their say and are listened to. Of the children and young people who took part in the pre-inspection survey, 84% reported that they felt their reviews worked well.
65. The corporate parenting strategy states a strong commitment to listening to looked after young people. The service provided by the children's participation officer is very good. The Children in Care Council, called Making a Difference, is formed of a strong group of very articulate young people who use their care experiences and insight to improve services. Young people say that they were fully involved in the development of Sefton's Pledge for children in care and that it covers issues relevant and of concern to them. The Pledge is user-friendly and written in accessible language.
66. A culture of consultation is well established. A variety of mechanisms are effectively used to seek the views of young people about their care, the quality of placements and how to improve services further. Young people are involved in a range of activities such as interviewing staff, including senior posts, and in delivering training. Young people have also been involved in projects such as the apprenticeship scheme, the self-

improvement fund for care leavers and the peer mentoring project, Me2. Participation newsletters are sent quarterly to all looked after children, and surveys are conducted regularly to gather their views on service development.

67. The percentage of looked after young people cautioned or convicted of an offence has fallen significantly, after rising for several years to a level double the average for similar areas, and is now broadly in line with the average of similar areas. This is a result of very effective action undertaken in partnership with the Police, the youth offending service, the targeted youth support service, the youth service and social care, in particular the leaving care team. A range of highly effective preventative strategies are in place to divert young people from criminal behaviour at an early stage. Young people and their carers said that targeted support had kept them on track. The use of restorative justice and the opportunities provided through the youth work programmes develop young people's understanding of rights and responsibilities.

Economic well-being

Grade 2 (good)

68. The impact of services to improve the economic well being of looked after young people and care leavers is good. Care leavers who met with inspectors are pleased with the support they get to help them move to independent living. Those who have done well at GCSE are positive about the support they receive to continue their education. Aspiring further and higher education applicants visit colleges and local universities and have access to good mentoring, academic and welfare support. In the past three reporting years, from a cohort of 34 care leavers in Year 13, between five and eight young people have accessed higher education. The availability of vocational courses locally is good. Connexions advisers know young people well and signpost them to relevant courses. A range of programmes such as Positive Waves, Superstars, Aim Higher and the Scholars scheme raise aspiration and attainment post-16 and improve the confidence of young people.
69. Care leavers have a good understanding of their pathway plans which are sufficiently detailed to provide clear direction for them. Partners ensure that care leavers with a disability are helped to access to the best possible pathway and support for them, including those with complex needs. Plans for transition are started early and involve the young person, their parents or carers as well as relevant staff, in particular those from Connexions, education and health services.
70. After three years of performance above the average for similar areas, the percentage of care leavers in education, employment and training dropped below average in 2010. However, the most recent data shows improvement. The leaving care team keep in touch with almost all young people and know the routes they have chosen to follow. A dedicated Connexions personal adviser tracks all looked after young people as a

matter of priority from Year 9. The Sefton 101 Apprenticeship programme supports care leavers well and 10% of placements are ring-fenced for them. The employability scheme, the good links with the regeneration department and the business education partnership have provided increased number of apprenticeship and work placements. However, this has yet to show full impact on the number of young people in employment or training when compared with care leavers nationally. Seven care leavers are currently employed by Sefton Metropolitan Borough Council.

71. At the time of inspection all young people who were in need of accommodation had a suitable place to live. The small numbers of young people who need temporary emergency accommodation receive good support. Care leavers spoken to by inspectors say that they are fully involved in the choice of accommodation and that these meet their needs. They receive effective advice on how to stay safe, can stay in their foster family should they wish to and their move to independence is handled very sensitively.

Quality of provision

Grade 2 (good)

72. The quality of provision in Sefton for looked after children is good. All staff and carers seen indicate that the organisational change which led to the creation of dedicated teams for looked after children and young people leaving care has worked well. Social workers and family placement social workers seen have manageable caseloads and the transfer of cases is an established process which generally works smoothly. There is a good understanding amongst staff about the needs of the looked after population which is shared across all partners. Regular monitoring of individual placements and of specific cohorts of young people within the looked after population informs well the commissioning and procurement of appropriate services and effective partnership working with key agencies also contributes positively to good outcomes.
73. The council's placement strategy is sound with realistic targets to increase in-house placement choice, move children on from care appropriately, achieve permanency, improve commissioning and fulfil the council's duty to have sufficient accommodation available for looked after children and young people. The strategy is effectively underpinned by the fostering and the broader looked after children strategies which are progressing well. The redistribution of resource from the closure of a council children's home into the Strengthening Families team is beginning to have a positive impact, by targeting resources on supporting young people who are in placements at risk of disruption. There are plans to extend the use of the team to work with families and young people aged 10–16 at the edges of care, to supplement the good support already available from Family Support Workers. These workers

- are tasked to visit the home during evenings and weekends and to take appropriate action to safeguard children if they are at risk. The targeted youth support service responds effectively to referrals to work with young people on the edge of care with tailored packages, and provide group activities. The out of hours service together with partner agencies also have strategies in place for managing risk for those children who are on the edge of care.
74. Looked after children are supported well in placement by the looked after children teams or, where appropriate, the leaving care team and there is an effective focus on identifying needs and providing suitable support to children and young people. Social workers receiving training that enables Life Work to be undertaken with all looked after children in addition to those for whom the plan is permanency.
 75. The regular multi-agency planning meeting is effective in targeting resources for those who are most in need and social workers are required to provide good reasons why young people need to come into care, supported by evidence of what has been done previously to support them and their families. The meeting is chaired by a senior manager, advised by the legal department and all decisions and actions are appropriately recorded. Emergency arrangements are in place to deal with urgent cases.
 76. The views and ideas of young people are listened to when planning or reshaping services, such as the bid for the leaving care centre which has been developed by the voluntary sector. Young people's views and preferences about where they live are also listened to. They are routinely seen alone and their wishes and feelings about aspects of their care are recorded in case notes, statutory visits and on relevant looked after children documents, including reviews. Where cases involve babies and young children social workers observe their behaviours and interactions and listen to their carers when assessing their needs, for example their reactions to contact. Contact arrangements with family and with siblings are effectively in place, facilitated by social workers, foster carers and placement support workers as appropriate, and are reviewed regularly.
 77. Support for young people and their carers from social workers is good and is enhanced through effective partnership. For example, Positive Futures respond to referrals from social workers to provide tailored support packages to young people using leisure activities, then at their pace support the young person to find a club or gym where they can continue to keep up the activity. Young people spoken to say that this has helped them to keep healthy, to change their behaviour including offending behaviour and to stop having contact with risky people. The placement of looked after children is considered on a case by case basis and issues of ethnicity and background are given high profile. Training of

foster carers includes equality and background issues and they receive one to one support to address the diversity needs of children in their care.

78. Good scrutiny of the quality and appropriateness of service provision in meeting looked after children's needs is undertaken within permanency planning meetings and looked after children reviews. These are informed by care plans and child placement reports which have improved as a result of training input and good support from the legal team and IROs. Applications to court are mostly successful and social workers have received positive feedback about their work from the judiciary. Permanency planning meetings are chaired by senior managers who oversee and effectively ensure that all aspects of a child's care plan are progressing in a timely way to achieve the permanency plan, to minimise delays, prevent drift and ensure concurrent planning. This has resulted in 14% of children being adopted from care in 2010–11, which is above the average for similar authorities of 11.7%. There has also been good promotion of Special Guardianship Orders with 13 foster carers becoming special guardians in 2010–11 and 18 applications currently before the courts.
79. The timeliness of looked after children reviews is excellent at 100%. All looked after children have a named IRO, who plans reviews to take place at the most suitable times and places for children and young people. IROs are appropriately aware of their responsibilities to see and consult with young people before reviews and have a range of strategies in place to achieve this. Young people generally attend their reviews. The children's participation officer monitors this and the council's most recent data indicates that 96% attend. Where young people choose not to attend, they are encouraged to express their views in writing, through their social worker or an advocate. The letters to young people following their review are written in an appropriate style and reflect the discussion, the recommendations and the plans agreed, including who was responsible for doing what and timescales. IROs indicate that children's needs are at the centre of the reviewing process and any changes in care plans or placement are based on this.
80. The vast majority of case recording seen for looked after children was up to date and the content was at least satisfactory, with some of good quality. Children and young people's views are routinely recorded and the records convey a picture of the child and tell their story. The views of carers and of parents are also noted well in case records. However, this recording is only on paper case files and is not transferred on to the electronic recording system. The electronic system is not used effectively by looked after children social workers and IROs and hardly used at all by adoption and fostering social workers. Many of the report templates on case files are out of date and not ICS compliant. Most of the case files seen contain a significant amount of hand written records and the

degree of legibility varied. Looked after children documentation and care plans are typed, but because completed forms and other case recording is not readily accessible on the electronic recording system, IROs are not able to effectively prepare to challenge any issues arising from the previous review.

Ambition and prioritisation

Grade 2 (good)

81. Ambition and prioritisation of services for looked after children, young people and care leavers are good. There is competent and determined corporate leadership from senior managers, underpinned by cross-party political support from elected members and by the Children's Trust. The trust has developed a sub-group for looked after children that serves as the operational group for the Corporate Parenting Board and both boards are chaired by the Lead Member for Children's Services.
82. The Corporate Parenting Board is highly committed to getting the best for all looked after children and listens well to what young people tell them about what works best for looked after children. Strong awareness of, and commitment to, the role of being a corporate parent is demonstrated at all levels and permeates how services are planned, setting high expectations on the achievement of good outcomes for looked after children. The Corporate Parenting Board considers that it is accountable to looked after children, and view the Pledge as their baseline commitment. They appropriately carry out an annual survey of all looked after children to seek their views about how well the Pledge is being met and respond positively to their comments.
83. Sefton's overall strategy to stabilise the size of the looked after population reflects their prioritisation of the needs of children, so that they only come into care when it is necessary, they remain looked after in the best quality placements with clear plans for achieving permanence and the quality and costs of placements are robustly monitored to ensure young people are receiving the level of service they need. The council's key processes and strategies effectively underpin this overall strategy.

Leadership and management

Grade 2 (good)

84. Leadership and management of Sefton's looked after children and leaving care services are good. Managers have effectively commissioned and decommissioned care provision based on local need whilst maintaining front line services. Further investment in key areas has been confirmed by elected members. However, the strategy is recently introduced and has yet to deliver the planned savings which have been identified for reinvestment.
85. Children's Services have a comprehensive learning and development plan which is suitably focused on the capacity of the workforce to deliver the

looked after service's key priorities. Good workforce planning has been a significant factor in the recruitment and retention of a stable workforce and members of staff comment favourably on the value senior managers place on their skills and experience. Managers regularly attend action learning sets where they bring issues to work through with their peers; managers report that they find this extremely helpful in providing supervisory support to social workers. Social workers report good availability and access to a range of training to help them develop, including training on assessment skills and achieving best evidence. Their attendance is closely monitored and they are actively encouraged and enabled to attend. Social workers also comment positively on the support they received from managers to learn both informally and through formal supervision. Foster carers are positive about the training they received during their assessment and that it prepared them well for the task. Foster carers also value the training sessions delivered through their support groups. The standards development officer has effective plans in place to ensure that carers receive training on the recently introduced national minimum standards and care planning regulations and they understand the impact.

86. Sound plans have been developed to enable the council to meet its sufficiency duty and progress is being made in line with the aims and targets set out in the placement strategy, although some elements are challenging particularly in the light of the increase of permanent care arrangements such as Special Guardianship amongst what were former foster placements. The fostering team is proactive and is currently reconfiguring to meet these targets and some social workers will focus on recruitment and assessment to enable assessments to be allocated and completed more quickly.
87. The engagement by managers of looked after children and care leavers within Sefton is very good and there is a clear commitment from managers to listen to and learn from the views of users of the service. Young people participate in a variety of forums on which senior managers and elected members are represented and joint decisions are made and held to. There is good engagement of vulnerable groups and young people are very aware of their impact upon equality and access issues.

Performance management and quality assurance

Grade 3 (adequate)

88. Performance management and quality assurance arrangements are adequate overall. Within Children's Services, the comprehensive quality assurance framework that has been introduced includes looked after children and is clear on the quality assurance activities to be undertaken, which lead officer will undertake them and their timescale for producing reports. Accountability for service improvements is therefore suitably

identified as arrangements for collating reports are clear, together with which meeting the collated findings are to be presented to and in which cycle. The council appropriately benchmarks itself against similar authorities and takes corrective action where its performance is not in line with statistical neighbours.

89. The framework is supported by a satisfactory but recently established culture of performance management operating within Sefton children's social care services. Teams hold their own performance meeting from which specific points identified are raised within the cycle of management meetings. An example was offered of increased scrutiny by managers of children's plans and the way that this has impacted positively on avoiding drift in delivering care plans. Performance information flows into and from a service-wide performance meeting chaired by the Director of Young People and Families. This meeting not only routinely monitors data and compliance with key performance indicators but also proactively pursues progress by children's services against service targets.
90. Satisfactory audit pro forma are in use but they are mainly used to record compliance with process rather than quality. Managers are responsible for individual staff performance through clear line management and supervision processes. IROs have a discrete role within the quality assurance framework and hold regular workshops for social workers to discuss plans and to suggest improvements. The safeguarding and quality team undertake quarterly themed audits. However, none of these audits has as yet been concerned with looked after children.
91. There is good evidence of management oversight of written documentation for example at permanency planning meetings and looked after children reviews. Fostering and adoption assessments are effectively quality assured by managers and also by the panels. Social workers interviewed clearly stated that they received highly experienced and knowledgeable advice and support from team managers, including through using a genuine open door policy. They also stated that service managers and other senior managers were approachable and provided advice and direction. However, social workers in the looked after service predominantly use paper records and some of the paper documents are outdated. Senior managers are aware of this and there are plans in place to address this issue through the ICS project board but there are obvious implications for the integrity of the performance data on which key decisions are based when key information was not on the electronic system. The consequence is that quality assurance for Sefton's looked after population is insufficiently robust.

Record of main findings:

Safeguarding services	
Overall effectiveness	Adequate
Capacity for improvement	Good
Safeguarding outcomes for children and young people	
Children and young people are safe and feel safe	Good
Quality of provision	Adequate
The contribution of health agencies to keeping children and young people safe	Outstanding
Ambition and prioritisation	Good
Leadership and management	Good
Performance management and quality assurance	Adequate
Partnership working	Good
Equality and diversity	Good
Services for looked after children	
Overall effectiveness	Good
Capacity for improvement	Good
How good are outcomes for looked after children and care leavers?	
Being healthy	Good
Staying safe	Good
Enjoying and achieving	Good
Making a positive contribution, including user engagement	Outstanding
Economic well-being	Good
Quality of provision	Good
Ambition and prioritisation	Good
Leadership and management	Good
Performance management and quality assurance	Adequate
Equality and diversity	Good