



# Inspection of safeguarding and looked after children services

Sandwell Metropolitan Borough Council

**Inspection Reference Number** 

Inspection dates 30 November – 11 December

Reporting inspector Martin Ayres HMI

Age group: All

Published: 13 January 2010



### **Contents**

About th	nis inspection	2
The insp	pecton judgements and what they mean	2
Service	information	3
The insp	pection outcomes: safeguarding services	4
1.	Overall effectiveness	4
2.	Capacity for improvement	5
3.	Areas for improvement	6
4.	Outcomes for children and young people	7
	a. The effectiveness of services in taking reasonable steps	
	to ensure children and young people are safe	7
	b. The effectiveness of services in taking reasonable steps	
	to ensure that children and young people feel safe	8
5.	The quality of provision	9
6.	Leadership and management	10
The insp	ection outcomes: services for looked after children	11
1.	Overall effectiveness	11
2.	Capacity for improvement	12
3.	Areas for improvement	13
4.	Outcomes for children and young people	14
5.	The quality of provision	17
6.	Leadership and management	17
Record	of main findings	20

#### **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 three 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 children and young people receiving services, front line managers, senior officers including the Director of Children's Services and the Chair of the Local Safeguarding Children Board, 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 evaluations of three serious case reviews undertaken by Ofsted in accordance with 'Working Together To Safeguard Children' 2006
  - a review of 31 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, assessment and referral centres, undertaken in July 2009.

# 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	
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. Sandwell, comprising of the towns of West Bromwich, Oldbury, Rowley Regis, Smethwick, Tipton and Wednesbury, was formed in 1974 and is one of seven children's services areas in the West Midlands conurbation. Children and young people aged 0 to 18 years represent almost 25% of the total population of 289,100 (2008 census). The population is diverse and includes children and young people from a wide range of ethnic, cultural and religious backgrounds. Deprivation levels in Sandwell are relatively high and the area is ranked 14<sup>th</sup> most deprived in England with 53% of the population living in areas designated very deprived.
- 5. Strategic partnerships have been established in the area including the Sandwell Local Safeguarding Children Board and the Sandwell Local Strategic Partnership which co-ordinate six thematic partnerships, one of which is the Children's Trust Board. The Children's Trust membership includes representation from the local council, Sandwell Primary Care Trust (PCT), the third Sector, Connexions, Sandwell College, the Learning and Skills Council, West Midlands Police, Sandwell Local Safeguarding Children Board and the Probation Service.
- 6. In October 2009, there were 483 children and young people in the care of the local authority and 185 children and young people were subject of child protection plans. The council directly provides 279 foster care placements, 14 respite and 38 family link placements and commissions 66 more fostering placements through independent agencies.
- 7. A network of 19 children's centres has been established in the six towns in Sandwell, with an additional two centres due to be opened. These are managed by a range of organisations including the council, the PCT and the third sector. The use of the Common Assessment Framework (CAF) has been incrementally developed and is now available across the whole borough.
- 8. Sandwell has nine infant, eight junior and 77 primary schools, eight secondary and two foundation schools, six academies, two trusts and four special schools. There are also seven pupil referral units providing 201 places. Sandwell's strategy for extended schools and children's centres is based on collaboration in seven learning communities. Some 109 schools are delivering the extended school offer.
- 9. Commissioning and planning of health services is carried out by Sandwell PCT. Sandwell and West Birmingham Hospitals NHS Trust provide acute hospital care for children. Specialist children's health care is provided through Birmingham Children's Hospital which was not included in this inspection. Child and adolescent mental health services (CAMHS) are provided by Sandwell Mental Health NHS and Social Care NHS Foundation Trust. Community services, including health visiting, nursing and therapy services, are provided by Sandwell Community Healthcare Services.

# The inspection outcomes: Safeguarding services

#### Overall effectiveness

#### **Grade 4 (Inadequate)**

- 10. The overall effectiveness of safeguarding services in Sandwell is inadequate. The Sandwell Local Safeguarding Children Board is not fully functional and safeguarding priorities across the partnership are not clearly defined. The Board's business plan is not robust and joint audit arrangements are not embedded. Communication between the Sandwell Local Safeguarding Children Board and the Children's Trust is inconsistent and neither are providing sufficient strategic leadership for children's services as a whole, and safeguarding in particular. The analysis of safeguarding need within the diverse children's population in Sandwell is inadequate and lacks comprehensive awareness of potential risk to some vulnerable groups within the community. The third sector provides a good range of family support and direct services to children in need and is appropriately included in strategic planning arrangements including the Children's Trust and Sandwell Local Safeguarding Children Board.
- 11. Although most cases of children deemed to be at immediate risk of physical harm are pursued quickly by duty workers, other cases do not receive such attention. The response from children's social care to some referrals is inadequate, with reported inconsistencies in the timeliness and effectiveness of action. Feedback to referrers is not routine. Safe recruitment and joint workforce planning arrangements are adequate, including robust strategies for new recruitment and training. However, referral and assessment pressures and fluctuating staffing levels have led to a degree of turbulence in front line services and responses. The quality of initial and core assessments is inadequate overall and management oversight of casework does not ensure that unsatisfactory assessments and reports are routinely identified and improved.
- 12. Performance management arrangements are not consistently applied across the partnership. There is too great an emphasis on headline indicators rather than service quality and outcomes. A proportion of initial and core assessments are signed off as completed by managers when the quality remains inadequate. The arrangements for joint audit and performance management within the Sandwell Local Safeguarding Children Board are also inadequate. Assessments of need and risk lack necessary detail and do not lead to clear plans for safeguarding. Case recording is of poor quality and made more difficult by the use of the Integrated Children's System (ICS) which does not focus sufficiently on risk. The views of children are not routinely sought or fully recorded. From performance information provided by the local authority, in 8% of cases of children subject to child protection plans in September 2009, the ethnicity, culture and language were not recorded.

#### Capacity for improvement

#### **Grade 4 (Inadequate)**

- 13. Capacity for improvement is inadequate. Improvements that were achieved after the joint area review (JAR) in 2006 have not been sustained and the current structures and strategies for safeguarding are not delivering the changes needed in key areas of service. Quality assurance arrangements are inadequate. The council's own performance report for the period April to September 2009 relating to children with child protection plans highlights the fact that the outcome of 9% of strategy discussions, the outcome of 30% of enquiries and the outcome of 4% of case conferences were not recorded. The Sandwell Local Safeguarding Children Board is unable to assure itself of the quality and outcomes of agreed joint safeguarding policies. The lack of a clearly defined relationship between the Sandwell Local Safeguarding Children Board and the Children's Trust results in a risk of procedural confusion and lack of clear accountability.
- 14. Staffing capacity in referral and assessment services is inadequate. Frequent staff turnover and use of agency social workers has lead to front line managers in social care too frequently having to act down in order to fill practice gaps. This in turn has reduced their own capacity to oversee the quality of work and outcomes for children. Midwifery and health visiting services are managing growing workloads and staffing pressures exist with a current health visitor vacancy rate of 10%. There has been improved training in the health sector in relation to safeguarding and an improvement in the number of staff undertaking training at all levels related to their role. All Family Practitioners have received the safeguarding manual and have a named safeguarding lead. At the time of inspection, the Executive Director of Children's Services was on long-term sick leave and the statutory duties associated with this role had been assumed by the Chief Executive. A new Director of children's social care had recently taken up his post and is starting to develop an analysis of social care performance. The Chief Executive and Director provided a detailed action plan in response to issues raised through inspection in order to strengthen management in key areas of safeguarding.
- 15. The council has made a considerable investment in children's centres, with 19 operational centres and two more under development. The impact of the centres in reducing the pressures on higher level services is yet to be fully evaluated.

#### Areas for improvement

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

#### Immediately:

- Secure agreement across the partnership for thresholds and criteria for service access at different levels and for an urgent implementation plan.
- Improve the quality of initial and core assessments and ensure that managers monitor their quality to agreed standards before 'sign off'.
- Closely monitor that children are being seen alone during assessment processes and that their views are fully ascertained and recorded.

#### Within three months:

- Make the Sandwell Local Safeguarding Children Board fully operational, including the development of a robust business plan and secured effective communication with the Children's Trust.
- Review staff workloads and pressures in referral and assessment services and take action to ensure these are consistently delivered to the required standards and are supported by regular supervision and managerial oversight.
- Take action to ensure children who have, or have had, child protection plans are suitably identified if admitted to Accident and Emergency (A&E) departments, General Practitioner walk-in centres or local hospitals.
- Ensure ethnicity, culture, religion and linguistic needs are fully recorded and acted upon for all children and young people.
- Conduct a joint audit of assessment and planning processes across the partnership to ensure that practice and management oversight complies fully with statutory requirements.
- Establish agreed models for performance management and reporting arrangements to the Sandwell Local Safeguarding Children Board, Children's Trust and scrutiny committees.

#### Within six months:

 Evaluate the current impact of CAF and the consistency of joint working in preventing the need to accommodate children and young people or to

- invoke child protection processes when not appropriate according to the needs of the child and family.
- Undertake a comprehensive needs assessment of the area to develop priorities for joint support and intervention by agency partners for all groups of children and young people.
- Implement a joint information-sharing protocol between agencies.

#### Outcomes for children and young people

## The effectiveness of services in taking reasonable steps to ensure that children and young people are safe. Grade 4 (Inadequate)

- 17. The effectiveness of services in taking reasonable steps to ensure that children and young people in Sandwell are safe is inadequate. Sandwell Local Safeguarding Children Board is not providing a sufficiently strong strategic lead in raising safeguarding awareness or ensuring that joint policies and procedures are effective. Although prompt action is taken to respond to the protection needs of those at immediate risk of physical harm, the needs of some vulnerable groups do not receive sufficient attention. For example, children who had entered Sandwell from overseas had been wrongly categorised as private foster children. As a result they were exposed to potential risks and were not fully safeguarded. Safeguarding action across the partnership is not rigorously targeted within community safety and multi-agency public protection arrangements for some vulnerable groups, including the small but significant number of young people who are the potential victims of sexual exploitation.
- 18. The contact centre which was established to provide a greater consistency of response across the borough is not fully meeting this objective. Referring agencies reported variations in response from social care and a lack of clarity in respect of thresholds. Feedback is not routinely provided to referring agencies, which is contrary to national guidance. The referral and assessment team has been under considerable staffing pressures and several posts have been filled by a succession of short-term agency staff. As a result, thresholds for intervention remain too high and assessments are not routinely completed and lack detailed analyses of need and risk. Assessment and planning processes are inadequate. The use of CAF is not yet fully embedded across the borough, although there are examples of positive use within some schools and by some health professionals. Assessment and planning arrangements for children with disabilities are more robust although some parents and carers of children with disabilities felt their views were not always taken into consideration and they were not always kept informed of developments.
- 19. Multi-agency work to address domestic violence is good. However, the planned introduction of the domestic violence abuse assessment tool has not been supported by training. Safeguarding is suitably embedded in school improvement partnership processes and all children and young people admitted

to hospital because of self harm are assessed for need and risk. The lack of an effective flagging system in A&E services and in the General Practitioner walk-in centre has reduced the ability of staff to check whether children have, or have had, child protection plans. Good arrangements are in place to ensure that children admitted to A&E or hospitals are not discharged without a full medical assessment and that community services are suitably informed. Maternity services work closely with mental health and drugs and alcohol services to ensure that mothers are supported well during pregnancy. Mothers and babies receive two midwife visits before being transferred to a health visitor and this arrangement is adequate.

20. Performance management is improving in health services but few joint measures are utilised across the partnership to monitor the quality and impact of interventions at different points within the overarching strategy for children's services. Sandwell Local Safeguarding Children Board has not developed a business model to ensure that strategic performance is routinely assessed and the relationship between the Board and the Children's Trust is not well defined. There has been too great an emphasis on high level performance indicators which do not provide managers, the Board or the Trust with a clear enough view of service quality, impact or outcomes. Too many assessments are prematurely signed off as completed by local managers and when these data are aggregated for performance monitoring purposes they provide a potentially misleading account of achievement, as the actual quality of assessments is poor overall.

### The effectiveness of services in taking reasonable steps to ensure that children and young people feel safe. Grade 3 (Adequate)

- 21. The effectiveness of services in taking reasonable steps to ensure that children and young people feel safe is adequate. Surveys indicate that most children and young people in Sandwell say they feel safe. Schools are providing good programmes to raise awareness of safeguarding and to ensure staff remain alert to possible concerns about the welfare of children. Safeguarding is routinely on the agenda of all school meetings with children and young people and they are able to contribute well to discussions about aspects of their life including bullying, health care and promotion, and lifestyle and vulnerability within the community. There is good progress in reducing bullying and school exclusions have been comparatively low for several years. Health services contribute well to the provision of information and support to enable children to feel safe.
- 22. Race, ethnicity, religion and language are not recorded consistently in children's social care files. Recent performance information produced by the council shows that the ethnicity of 8% of children with child protection plans was not recorded. Direct work with children and families in ascertaining their wishes and feelings is also inadequately recorded and is not given sufficient priority within individual plans. This is a significant omission given the fact that some vulnerable groups in Sandwell are not sufficiently well identified through

joint processes. ICS and other recording systems in use in Sandwell do not readily assist in gathering data on inclusion or the views of children and young people. This is reducing the efficacy of individual assessments and plans and the capacity to aggregate data for strategic planning purposes.

#### The quality of provision

#### **Grade 4 (Inadequate)**

- 23. The quality of safeguarding provision in Sandwell is inadequate. A good framework setting out the criteria for access to services has been developed but this is interpreted differentially across the partnership and thresholds are not universally understood. The response from children's social care to some referrals is also inadequate. The timeliness and effectiveness of action are inconsistent and appropriate feedback to referrers on the decisions and actions taken is often lacking. Most cases of children deemed to be at immediate risk of physical harm are pursued quickly by duty workers but other cases of less obviously immediate concern do not receive timely attention. From a sample of cases self audited by children's services shortly before the inspection, issues were identified which warranted immediate attention. Although this showed good self awareness, it also highlighted the fact that some safeguarding needs were missed by managers and during the internal monitoring processes. Additionally, other aspects of safeguarding were identified in the course of the inspection which had not been appropriately pursued within the area. Contact and referral arrangements are not robust and agencies reported inconsistencies in contact or referral definition, responsiveness and feedback. Arrangements for collaboration across the partnership in the completion of comprehensive assessments of need and risk are not embedded and the overall quality of assessments and plans is inadequate. The quality of recording is also inadequate and not aided by the lack of integration in recording systems. Some records are held electronically within ICS and others are stored in other systems making cross referencing difficult.
- 24. In many instances, thresholds for access have been set too high and, as a result, some forms of harm to children and young people are not fully identified. Children and young people are not routinely involved in assessments and planning and recording systems do not reflect the voice of the children in sufficient depth or understanding. Managerial oversight is not always evident on files and, in some cases seen during the inspection, written management direction had not been actively followed and this had not been identified. Processes to respond to children missing from home, school and care are in place and operating adequately.
- 25. CAMHS have an input into youth offending and drugs and alcohol services, but there are gaps in services and the average waiting time is 16 weeks which is slightly below the national minimum target of 18 weeks. Some lower level services, such as counselling, social and emotional aspects of learning and educational psychologist support, are available during the waiting time for specialist services but access to specialist services for some vulnerable young people is not sufficiently timely or fully responsive to their immediate needs.

#### Leadership and management

#### **Grade 4 (Inadequate)**

- 26. The leadership and management of safeguarding services in Sandwell are inadequate. The strong ambition held by all agencies to safeguard vulnerable children and young people is not translated into concerted strategies or action, nor is this reflected in the day to day practice in key areas of safeguarding, including awareness, assessment and individual planning. There are too many projects in place which have spread capacity too thinly in key areas. Elected members and senior managers have clearly worked hard to improve safequarding since the JAR in 2006 but the effort and improvements made have not been fully sustained. The processes for information sharing between agencies remain under developed and priorities for action are not gleaned from aggregated data or sufficiently well defined by the Sandwell Local Safeguarding Children Board or the Children's Trust. Communication between the Trust and Sandwell Local Safeguarding Children Board is not clear and respective accountability requirements have not been achieved. The Sandwell Local Safeguarding Children Board is not fulfilling the full range of responsibilities set out in national guidance. The Sandwell Local Safeguarding Children Board struggles to fund and provide the full range of activities to the required level, including the well received joint training programme. Three serious case reviews have been commissioned by the Sandwell Local Safeguarding Children Board and evaluated by Ofsted as adequate. Agencies report that learning from these reviews has been disseminated and included in training programmes.
- 27. The council has been responsive to staffing pressures in front-line safeguarding through the use of agency staff and a number of acting-up arrangements. However, this has contributed to a degree of turbulence in the workforce which has resulted in variability in the quality of planning for vulnerable children. Adequate systems are in place for financial control but performance management arrangements across the partnership in respect of safeguarding are inadequate and do not lead to sustained improvements in outcomes. Joint workforce planning processes, including safe recruitment, are satisfactory but struggle to keep pace with increased work pressures and rapid staff turnover. Supervision in social care and health services is available to staff but there is limited evidence that this is regular and helping to support improvements in the quality of practice. Training of staff across the partnership is adequate with good feedback on the range of training made available However some staff commented that owing to day to day work pressures they were not always able to avail themselves of the training they feel they need.
- 28. Systems to enable users of services to complain and to comment on services are adequate and this is reflected in the surveys on participation and involvement. However, user views are not routinely recorded on electronic records and it is therefore impossible to ascertain whether views have influenced individual and strategic plans. Case recording does not demonstrate that children are being seen alone and their views taken into full consideration.

- 29. Partnership working at practice level on some cases is adequate but inconsistent across the area. CAF is used well by some groups of professionals but is not yet fully embedded across the borough. Partnership working at a strategic level to ensure services are integrated, embedded and fully evaluated is inadequate. Service planning and delivery do not take effective account of the outcome from equality impact assessments, and diversity and equality are not integrated in assessment and intervention. Recording of culture, religion and identity is inconsistent and does not show that the individual needs of all children are assessed and taken into account.
- 30. Value for money is adequate. The costs of services are known and are suitably monitored. Additional resources, particularly in response to staffing pressures, are allocated where necessary. There has been considerable investment in preventative services including children's centres. There is evidence that this has had impact in reducing the numbers of children who enter care although formal evaluation of the impact on safeguarding and child protection has not been undertaken by the Sandwell Local Safeguarding Children Board or the Children's Trust. Contracting and commissioning arrangements are adequate and ensure that safeguarding requirements are included.

# The inspection outcomes: services for looked after children

#### Overall effectiveness

**Grade 3 (Adequate)** 

- 31. The overall effectiveness of services for looked after children and young people is adequate. Statutory requirements for visiting and case review are met, although in some cases only to a minimal level. The corporate parenting board is working well and providing a driving force to improvement, which is reflected in improving trends of performance against key indicators. However, the Children's Trust is not ensuring that looked after children services are sufficiently well targeted and mechanisms for performance management relating to quality, user engagement and outcomes are under developed.
- 32. Outcomes for looked after children are adequate overall with some good examples of effective health and education support, including the proactive role of the looked after children nurse, the impact of health improvement programmes and the provision of targeted education support through virtual school arrangements. Offending rates amongst looked after children have reduced significantly with effective work by the Youth Offending Service in conjunction with Connexions, the police, housing and schools. There is an increasing trend of young people leaving care entering higher education and there has been commendable progress, in a high unemployment area, to ensure young people are in employment, education or training.

- 33. The quality of case planning is adequate but the rigour of planning is variable. Some individual planning aims and objectives, which appear to have been well considered, are subsequently changed without sufficient explanation or recording of evidence. Management oversight of planning is not always obvious and in the sample of cases seen by inspectors, there was evidence of planning drift. This included the timeliness of plans, changes in original objectives without suitable commentary and lack of engagement of stakeholders. A permanency planning policy is in place but this is not ensuring in all cases that robust plans for young children are adhered to and that all stakeholders, including parents, are absolutely clear about their roles and responsibilities within the plans.
- 34. Adequate user engagement and participation procedures have been developed but are not consistently ensuring that the voices of looked after children are heard and acted upon. Independent reviewing processes meet statutory requirements but have not established a planning culture whereby children and young people and other stakeholders are empowered in their own planning. Strategies to promote equality and diversity are in place but monitoring arrangements are not effective in ensuring records contain relevant information on individual children and families and that full weight and consideration are given to these aspects in the delivery of services across the partnership.
- 35. Staffing resources to support looked after children are adequate although some children and young people have commented on the frequent turnover of social workers. There is good commitment to meeting the holistic needs of children and young people at practice level with good examples of collaboration by health, education, social care and third sector representatives. Nevertheless, some aspects of service remain stretched and increasing demands and pressures are having an impact on the quality of assessments and planning.

#### **Capacity for improvement**

#### **Grade 3 (Adequate)**

- 36. The capacity for improvement is adequate. The quality of looked after children services and partnership working is improving and this trend, overall, is being sustained. Elected members and senior managers are ambitious for the service and committed to improvement and there are good examples of effective partnership working in practice. These include education, health and youth offending services. The corporate parenting board functions well and is backed up by a committed scrutiny panel of elected members. The joint workforce strategy group is working adequately to ensure that staffing capacity and skill are available to meet the needs of looked after chidren across the partnership.
- 37. Quality assurance and performance management systems are substantially and inappropriately focused only on high level indicators. The Children's Trust, the corporate parenting board and scrutiny panels do not receive sufficient information on service quality, user engagement, the impact of local strategies

and key outcomes. Adequate systems and structures are in place to commission services for looked after children. However, there is a lack of clarity regarding the balance of agency placement use, including fostering and residential care. Residential care commissioning is less developed and an existing large and costly contract with an independent provider of service is being re-negotiated. Overall, value for money is adequate and there is sufficiently tight monitoring of service costs.

#### Areas for improvement

38. In order to improve the quality of provision and services for looked after children and care leavers in Sandwell, the local authority and its partners should take the following action:

#### Immediately:

- Record the ethnicity, race, culture, religion and language of all looked after children and young people accurately and fully.
- Include an up to date photograph on the records of all looked after children.

#### Within three months:

- Review the functioning of the independent reviewing service to ensure that it is providing the impetus for effective user participation and that it is robust in reviewing and monitoring the implementation of care plans.
- Review the use of the 'Social Work Pilot' project for looked after children and young people and ensure they have a full voice in any service changes or developments.
- Develop a quality assurance framework which provides performance information to the Children's Trust, Sandwell Local Safeguarding Children Board, the corporate parenting board and scrutiny panels on assessments and plans, user engagement and outcomes for looked after children and young people.
- Improve access to support services for children and young people with lower levels of mental health and emotional need.

#### Within six months:

The Children's Trust, in collaboration with the corporate parenting board, to jointly agree monitoring and evaluation arrangements of the impact of looked after children services to reduce the need to receive children into care and to promote their long-term welfare.

#### Outcomes for children and young people

- 39. Services to promote good health amongst children in care are adequate. Performance on targeted health support has significantly improved over the last year. Health support is now received by 88% of children and young people. Improvements in access to behavioural and support services has been slower and is currently only 55%. Looked after children are appropriately 'fast tracked' into CAMHS where a specific need is identified. Access to CAMHS through educational psychologists in Sandwell schools is good but is significantly reduced for children and young people placed out of the borough. Some care leavers indicated that the provision of mental health services at the transition stage from children to adult services is less effective, with delays in service provision and problems in contacting appropriate support professionals at times of need. The designated nurse for looked after children provides a responsive service to children and young people placed out of borough. Care leavers report good satisfaction with the health support they receive, including optical and dental care. The co-location of drugs and sexual health workers within the leaving care service is seen by young people and their carers as a positive development and providing good access to key health services. Looked after young people who are pregnant or caring for their child receive good support through the family nurse partnership until their babies are over two years old. The virtual teenage pregnancy team works in a cohesive and enthusiastic manner and is good. It has taken effective steps to ensure it has a good profile amongst the teenage population. Communication is good amongst staff members and they have identified and taken opportunities to engage young people through school and specialist nurses and maintained a presence at various outreach and consultation activities such as residential trips and specific looked after children events.
- 40. Children and young people in care are adequately safeguarded. Placement stability is comparatively good and services are in place to reduce disruption and breakdown. The Barnford project provides focused therapeutic services to looked after children and young people to support placement stability. Joint protocols, to identify and track children and young people who go missing from care, are adequate. However, not all looked after children and young people have their photographs on record as procedures require. Children and young people report that they feel safe in their placements and all looked after children have an allocated social worker and care plan. The quality of care plans is variable, with some good examples but there are also others which lack detail in respect of needs and services to improve outcomes. Decision making in care planning is not always clear. Some plans are changed without the rationale fully recorded, despite the original objectives having been agreed in the best interests of the children concerned. This includes permanency plans where adoption had been seen as a priority for young children. Although arrangements for looked after children are reviewed in accordance with statutory requirements, the quality of reviews and participation of children, family and other stakeholders is inconsistent. Independent Reviewing Officers (IROs) do not provide the impetus to planning envisaged in this role or act

together to aggregate important data for strategic planning purposes. This aspect of the service is therefore inadequate. There is a lack of clarity regarding decision making and ownership of care plans leading to drift in the achievement of agreed planning actions in some cases. IROs have not developed the service to empower children and young people to have a major voice in their own planning.

- 41. Services to enable looked after children and young people to enjoy and achieve are adequate. The ambition and prioritisation of educational achievement of looked after children by partners are adequate. The Looked After Children in Education (LACE) service functions adequately as a virtual school. The strategic placement of the LACE service within the multi-agency looked after children service is satisfactory although the development of an integrated, multi-agency looked after children service has not yet fulfilled the potential envisaged by the Children's Trust. Evaluation of LACE, including performance management, quality assurance and workforce development, is adequate. Performance targets for the educational attainment of looked after children and care leavers are mostly met and achievement is at least in line with statistical neighbours. There are sufficient posts in the looked after children team but, due to vacancies, work has to be continually re-prioritised to ensure that children and young people in greatest need of support are helped promptly.
- 42. Satisfactory support and guidance are in place for looked after children to promote their engagement in learning. Carers and social workers receive sound help and guidance when considering school placement for looked after children. There is sufficient guidance to carers of looked after children in the early years age group. Looked after children are given suitable priority for admissions to Sandwell schools and with good guidance from the LACE service. LACE does not provide the same level of guidance about school placement and education quality when children and young people are placed out of the area, although adequate support and monitoring are given to individuals once admitted to schools out of the area. Good attention is given to stability of education for looked after children by the LACE service, social workers and partners in Sandwell and when children and young people are placed out of the area. The targets for achievement, attainment and the progress made by looked after children are monitored effectively. Most looked after children make adequate or better progress across most key stages and subject areas, considering their starting points. Looked after children achieve very well at Key Stage 2, doing better than in other comparable areas and nearly as well as their peer age group in Sandwell schools. The attainment of looked after pupils at the end of Key Stage 4 (at age 16) is adequate.
- 43. Up to date personal education plans are in place and are monitored adequately. Children and young people are routinely involved in the preparation of plans. Audit processes are at an early stage of development and the outcomes of the plans are not yet used to inform wider planning for each individual. The attendance of looked after children has been given very close

attention. Disruptions to education for appointments outside school are kept to a minimum and attendance rates are very good in comparison with the national average. The rates of fixed term and permanent exclusions for looked after pupils are very low compared with similar areas and are good. Arrangements for continuing education are effective in ensuring that looked after children receive their entitlement.

- 44. Recording of uptake of leisure, recreation and voluntary learning opportunities taken up by looked after children is unsatisfactory. Inadequate use is made of the recording headings for achievement and qualifications on individual records and insufficient use is made of the information by social workers in wider case planning. Looked after children benefit from a good range of activities in the borough and children and their foster carers are entitled to receive a card to enable them to access affordable leisure activities in the borough. Satisfactory numbers of children and young people take up the activities. Children and young people placed outside the borough have more limited access to activities. Case records do not routinely show in which leisure activities and pursuits children and young people participate, except where these activities are highlighted in personal educational plans.
- 45. Opportunities for looked after children and young people to make a positive contribution are adequate overall. Good action is taken to enable children and young people to build positive relationships with adults and their peers. Children and young people in care have good access to advocacy services and information on making representations or complaints about services is accessible. The Youth Offending Service and schools have worked well together to help reduce the rate of offending amongst looked after children and young people and rates are comparatively low. The contribution of other agencies to reduce offending is less obvious and the focus on antecedents is not given sufficient joint attention in respect of the impact of wider community safety strategies affecting vulnerable young people, including the risk of sexual exploitation. Looked after children and young people have some good opportunities to comment on matters affecting them, although a large group of looked after children potentially affected by the planned social work pilot project has not been fully consulted about the project. The information derived from these processes is not always used to best effect to develop strategies. Scrutiny reviews on services for looked after children have been well managed and have led to good decisions and recommendations. However these have not been consistently enacted or monitored.
- 46. The impact of services in enabling looked after children and young people to achieve economic well-being is adequate. There is a sustained improvement in the number of care leavers placed in suitable accommodation from 80.6% to 94.9% in three years. However, a small number of care leavers are still placed in bed and breakfast accommodation although these placements are suitably supervised. The leaving care team works systematically and proactively to track and support care leavers. There is good and effective communication between the team, Connexions, Youth Offending Services, Housing and colleges.

47. Transition plans for looked after young people with disabilities are in place and are timely. Care leavers aspire to achieve and an increasing number go on to higher education. However, the quality of pathway plans is variable and in too many cases processes for planning have not been timely. Insufficient attention is given to targeted support for employment. The number of care leavers in education, employment or training at age 19 has increased and is now at 73.5% which compares positively to similar areas.

#### The quality of provision

#### **Grade 3 (Adequate)**

- 48. Service responsiveness is adequate with active effort made to understand the needs of the looked after children population. The corporate parenting board works well and is helping to drive some improvements in outcomes for looked after children, as demonstrated in performance trends against key national targets. However, insufficient attention is given to data quality, measuring outcomes for individual children and the engagement of users in planning processes. Overall, outcomes for looked after children and young people against the five Every Child Matters dimensions are adequate although levels of aspiration remain too low in some aspects. Health and education partners are making sustained contributions to meet the needs of looked after children but commissioning arrangements are generally under developed and not sufficiently well informed by outcomes and quality information on service impact. Access to advocacy is good and statutory guidance in respect of representation and complaints systems is met. The Children's Trust board is not monitoring the quality and impact of different services which contribute to improved outcomes for looked after children and does not have systems in place to evaluate the quality of provision.
- 49. Placement contracting arrangements are generally well managed with adequate attention to the quality of out of borough placements for vulnerable looked after children and young people. However, the council is engaged in renegotiations with a voluntary organisation providing residential care in the borough in order to ensure that the service is sufficiently focused on current need and is delivered to the highest standard.
- 50. Assessment and direct work with looked after children are improving although the quality of case recording is too variable. Management oversight is not consistently evident and the role of IROs is not effective in raising standards and ensuring plans are sufficiently robust and are fully delivered in timescales pertinent to the ages of the children concerned. Permanency planning procedures are in place but the rigour of plans and practice remains only adequate.

#### Leadership and management

**Grade 3 (Adequate)** 

51. The Children's Trust and corporate parenting board have high ambitions for looked after children but this is not consistently translated into joint action in practice. Outcomes for looked after children in the borough are adequate

overall and there is evidence of improving performance in health and education. However, the Children's Trust does not have a clear enough view of the impact of all the services for looked after children within the wider children's strategy and joint resources are not utilised in the most effective ways. The corporate parenting board and scrutiny panels work well and are pushing hard for sustained improvement but their recommendations for action are not systematically followed and monitored.

- 52. Foster care services are adequate and are appropriately commissioned. Residential care provision is less well developed and commissioning in this field is not well focused on the needs of groups of young people in the borough, including young women who may be exposed to sexual exploitation. Work is currently being undertaken at a senior level to strengthen placement options and choice.
- 53. Performance management processes are in place but these are too focused on data-based high level indicators and too little attention is given to quality, user engagement and outcomes. Performance reports for the boards provide useful trend information, including the increasing rate of young children entering care, but this is not leading to concerted action to examine the services available to children and families on the cusp of care. Joint workforce planning arrangements are in place and good training support to all staff is provided. All looked after children are allocated to social workers, although some looked after children and young people expressed concerns about high turnover of social workers.
- 54. The culture of engagement and direct work to ascertain wishes and feelings of looked after children and carers are under developed, including within the Independent Reviewing Service. Recording of direct work with children remains inconsistent and it is often difficult to see from case records how the wishes and feelings of looked after children and young people are contributing to planning. A scrutiny review required the use of a good information pack for all looked after children in the borough but the low use of this is not closely monitored. IROs have been commissioned to develop new consultation tools but these are currently not available.
- 55. Partnership working at a case level is generally effective; practitioners show a strong commitment to co-operate in the interest of children. Third sector organisations provide a valuable input to services and are able to offer innovative solutions to individual cases. Third sector partners commented that local commissioning seems to be too rigid and risks a reduction in opportunities for innovation. There are some good examples of shared budgeting to meet the needs of individual children and service costs are known. Value for money overall is adequate.
- 56. The promotion of equality and diversity for children and young people who are looked after is adequate. However, this aspect is not given sufficient attention by IROs and case recording of ethnicity, race, culture and language is

inconsistent. This is pertinent in the context of the diverse community in Sandwell and fast changing demography. Good work is being undertaken within children's centres to respond to the needs of local communities and to ensure that all children and families have equal access to services including prevention and care. Health and education services respond appropriately to individual need but their contribution to care planning is not always clearly defined.

### Record of main findings: Sandwell

Safeguarding services			
Overall effectiveness	Inadequate		
Capacity for improvement	Inadequate		
Outcomes for children and young people			
Children and young people are safe: effectiveness of services in taking reasonable steps to ensure that children and young people are safe	Inadequate		
Children and young people feel safe: effectiveness of services in helping to ensure that children and young people feel safe	Adequate		
Quality of provision	Inadequate		
Service responsiveness including complaints	Inadequate		
Assessment and direct work with children and families	Inadequate		
Case planning, review and recording	Inadequate		
Leadership and management	Inadequate		
Ambition and prioritisation	Inadequate		
Evaluation, including performance management, quality assurance and workforce development	Inadequate		
User engagement	Inadequate		
Partnerships	Inadequate		
Equality and diversity	Inadequate		
Value for money	Adequate		

Services for looked after children			
Overall effectiveness	Adequate		
Capacity for improvement	Adequate		
Outcomes for looked after children and care leavers			
Being healthy	Adequate		
Staying safe	Adequate		
Enjoying and achieving	Adequate		
Making a positive contribution	Adequate		
Economic well-being	Adequate		
Quality of provision	Adequate		
Service responsiveness	Adequate		
Assessment and direct work with children	Adequate		
Case planning, review and recording	Adequate		
Leadership and management	Adequate		
Ambition and prioritisation	Adequate		
Evaluation, including performance management, quality assurance and workforce development	Adequate		
User engagement	Inadequate		
Partnerships	Adequate		
Equality and diversity	Adequate		
Value for money	Adequate		