Rochdale Borough Council

Inspection of local authority children's services

Inspection dates: 29 January to 9 February 2018

Lead inspector: Paula Thomson-Jones HMI

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

Leaders have been successful in making improvements to many areas of the service, often in response to previous inspection findings. Despite this, the quality of practice that children and families experience remains inconsistent and the overall effectiveness of children's social care is not yet good.

An over-reliance on performance data and some ineffective quality assurance has prevented leaders from having an accurate understanding of the quality of practice for all children. This has resulted in some weaknesses not being fully identified and addressed.

Children who are in care, or who are care leavers, get a good service and the quality of practice has improved since the last inspection. Senior and political leaders, who provide strong strategic planning and oversight in their role as corporate parents, have made this happen.

Children in need of immediate protection receive a prompt response that helps to keep them safe. Other children receive help, but many are stepped down to lower levels of support too early, and before sustainable change is made. This leads to some children experiencing neglect or living with domestic abuse for too long. Leaders had not identified this weakness, and did not have effective plans in place to support practice improvement.

What needs to improve

- The quality of practice and management oversight.
- The understanding and evaluation of what life is like for children and an accurate evaluation of the impact that practice has on improving their experience.
- The application of thresholds of need, and decision-making to step down or end care planning, particularly for those children at risk of neglect or domestic abuse.
- Practice to enable all children looked after to understand and to have information about their own histories and certainty about their plan for permanence.

The experiences and progress of children who need help and protection require improvement to be good

1. Many children and families in Rochdale access a range of early help services when they need support. The number of early help assessments completed by partners other than schools remains low. Not enough children benefit from coordinated multi-agency early help and, as a result, the numbers of children referred to children's social care remain high. Senior managers have recognised this and are working with partners to put in place new ways of working. The recently launched family services model includes the establishment of an early help and safeguarding hub, as well as the development of locality-based early help teams. It is too early to evaluate whether this has increased the numbers of children who are benefiting from early help.

2. When children's needs change and risks to their welfare increase, partners make appropriate contacts to the early help and safeguarding hub. Identification of children in need of urgent help and protection is recognised and responded to quickly. However, children who are not at immediate risk do not all get a timely service. In addition, a lack of consistent effective management oversight adds to delays for many children. The local authority responded to these concerns and made some improvements during inspection, but the response to children is not currently robust.

3. Children in need of protection get a timely and effective service to ensure their immediate safety. The majority of strategy discussions show attendance by relevant partners, good information sharing and clear decision-making. For the vast majority of children, the decision-making is appropriate and leads to the right level of intervention. The written records of investigations are not of consistently good quality.

4. While some assessments were of good quality, the majority did not show consideration of the impact of a child's history or the use of information to analyse the capacity of parents to do things differently in the future. The lived experience of children was often not described or considered, and did not always inform analysis of risk. Assessments do result in an offer of appropriate help and support from a range of agencies for children and their families.

5. The majority of child in need and child protection plans are not well written. They are often too focused on measuring the compliance of adults with attending appointments for services, rather than on what needs to change to make a difference for children. The majority of plans lack clear outcomes, and are not focused on measuring children's progress or identifying change.

6. Ineffective assessment and planning leads to many children being moved to lower levels of support too early. This results in repeat cycles of support from different parts of the service without their circumstances improving. When children suffer long-term neglect or live in households in which there is domestic abuse, there is evidence of social workers and managers being overly

optimistic about the situation. Decisions for children to step down from child in need to early help are made before any change can be seen for children.

7. Delays in action being taken when child protection plans do not reduce the risk of significant harm have led to an increase in children coming into care in an emergency. Plans not improving the experiences of children do not always result in timely decision-making. Many children seen during inspection should have come into care at an earlier stage, and prior to another incident taking place.

8. Many social workers know children well and undertake direct work to inform their assessments and planning. This is not true for all children, with some having too many changes of worker. These children have to explain their story too many times and do not have the opportunity to build a positive relationship with a social worker.

9. Management oversight is too focused on compliance, with little evidence of the impact of this on the quality of practice. Managers authorise assessments and plans, but do not ensure consistent quality of this work.

10. The quality of work with disabled children has improved in the last six months as the result of improved management oversight. Assessments are updated regularly, and provide good evaluation of the needs of children. Good quality assessments lead to planning that helps children. Plans for transition happen in time for appropriate support to be in place, as young people become adults.

11. Rochdale's 'complex safeguarding service' provides a strong multi-agency response for children and adult survivors of sexual exploitation. This service, developed with key partners to ensure an improved response to children at risk of exploitation in the borough, now delivers a range of work to identify, disrupt and prosecute offenders and protect children. The integrated approach also makes links to other forms of exploitation such as modern slavery. Wider risks are considered and good information sharing leads to action from partners to concerns arising about businesses, venues or people.

12. When children are at risk of sexual exploitation, they get a multi-agency response and intervention, including specialist support. Intelligence is gathered and evaluated to find other children at potential risk of harm. This enables preventative work to take place and reduces risk for children.

13. Police undertake safe and well checks when children go missing, and return home interviews are offered to help understand their situation. Children's views and opinions are taken into account and information is used to inform assessment and planning and reduce risk.

14. While the response to children who go missing is strong, there is inconsistency in the quality and recording of this information within the return home interview forms. Intelligence from interviews is used for individual children, and the multi-agency approach ensures that all intelligence is gathered. The overarching collation of data from return home interviews to help leaders understand performance is not well developed.

15. Good systems ensure that managers and 'missing coordinators' have access to live information on the status of children missing from home and care. Mapping of children's peers and hotspot locations helps police officers and social workers to identify patterns of behaviour. Information and intelligence is shared with other agencies, and is used to predict where children might be when they go missing. This enables preventative work to take place and helps children to be located more quickly when they go missing.

The experiences and progress of children in care and care leavers is good

16. When children come into care in a planned way, this is informed by a comprehensive well-written assessment. While the quality of the majority of assessment work is good, cared for children do not all have their assessments updated to inform future care planning.

17. Social workers see children regularly and understand their wishes and feelings. Social workers and managers know them well and can talk about them as unique individuals. Many children benefit from good quality, purposeful direct work to inform their care planning. Children are supported to take part in their reviews and have access to advocates to represent them. There is good use of independent visitors, particularly to support children living out of area.

18. Children benefit from good support to meet their needs from a range of agencies as part of their care planning. This support is helping them and improving their experience. All have an up-to-date written care plan, but many of these plans are not sufficiently focused on outcomes and do not effectively measure progress.

19. Children live in placements that meet their needs. This includes children with complex needs who are placed in specialist provision. Timely health assessments take place for children, including those placed outside the area. There is also evidence of routine evaluation of their emotional health and well-being to inform planning. The experiences of the vast majority of children improve when they are in care. They demonstrate improved health and increased educational attainment, in addition to there being a decrease in risk of harm.

20. The local authority is committed to placing brothers and sisters together, with very few family groups separated. Children have appropriate, well-planned

contact with their families, including their siblings. The needs of children determine the level of contact, and there is evidence of social workers not being afraid to change arrangements if it is in the children's interests to do so.

21. Educational attainment is improving for most children in care. However, personal education plans are not consistently of good quality to support educational planning. Children are not routinely contributing their views in the planning process, and this is a missed opportunity for them to own the plans for their education.

22. Leaders have focused on achieving permanence for those children who had historically been subject to drift and delay. This work has targeted children placed at home on care orders, or in long-term placement with connected carers. Focus on these groups of children has reduced the number of children living with their parents who are subject to care orders, and increased the number of children achieving permanence through special guardianship orders.

23. There remains more work to do to ensure that all children looked after achieve permanence and do not experience drift and delay in their placements being confirmed as their permanent placement. Children in foster placements are routinely waiting too long before the placement is ratified as a long-term match. This delay is preventing children and carers from having confirmation that they are staying there permanently. For a small number of children, there was also delay in family finding taking place to identify a permanent placement. Despite some evidence of good quality direct work taking place, there was no evidence of life-story work being undertaken with children in long-term foster care.

24. The local authority promotes and encourages the participation of children and young people to shape and develop services. Children in care are supported to see their lives in care positively with a range of inclusive initiatives to ensure that they can contribute and influence strategic and individual decision-making. For example, the council decision to exempt care leavers from paying council tax is because of the work of a Rochdale care leaver who was supported by the corporate parenting group.

25. The timeliness and quality of service provided for adopted children have continued to improve. Rochdale continues to place high numbers of children for adoption, including significant numbers of children aged five or over and many sibling groups.

26. Child permanence reports are well written and child centred, with good detail, and including photographs. Decision-making for adoption is well recorded, with clear rationale for ratification of adoption plans. Family finding and matching are strong. Families are carefully matched to children and information sharing is good. In most cases, introductions are well managed, with input from the adoption social worker as well as the child's social worker.

27. Life-story work takes place to help children understand their experiences. Post-adoption support is agreed and provided immediately, as required. Adopters speak very positively about all aspects of the adoption service. Use of fostering to adopt as an option is underdeveloped, with only one child placed in a fostering-to-adopt placement in the last six months.

28. The service for care leavers has improved significantly since the last inspection. Children leaving care benefit from proactive work by personal advisers, who work hard to maintain relationships with them. All care leavers have an up-to-date pathway plan that is written in language that young people can understand. Young people are involved in the development of their own plans. Each plan contains appropriate identification of their needs and the support they would require both now and in the future.

29. The majority of care leavers live in good-quality accommodation, and there is evidence that they have a choice from a range of options. The vulnerability of individuals is considered and care leavers are supported to find suitable accommodation. Personal advisers are tenacious in exploring options and supporting young people to be successful in achieving independence.

30. Care leavers receive assistance and support to strengthen their journey into full independence. The proportion of young people aged 16 to 18 who are not in education, employment or training is decreasing. This is supported by a coherent strategy, with implementation that is led by the headteacher of the virtual school. Despite this, 50% of young people aged between and 19 and 21 are not in education, employment or training. This is in line with statistical neighbours and the England average.

31. A significant number of young people have secured apprenticeships with the council. This is due to a number of innovations that have created incentives for different departments to employ care leavers. These young people are usually successful on these schemes. The virtual school has not been as successful in increasing the number of pupils on apprenticeships with employers beyond the council.

32. More than double the number of young people aged between 19 and 21 attend higher education in Rochdale compared to care leavers nationally.

The impact of leaders on social work practice with children and families requires improvement to be good.

33. When a weakness or an area of development is identified by external sources, for example previous inspections, leaders in Rochdale are able to respond and take appropriate action to improve it. The experience of care leavers, identified as the weakest area of service at the last inspection, has improved significantly. Leaders' energy and efforts in responding to concerns around some complex and contextual safeguarding issues have resulted in Rochdale

being made a safer place for some children and adult survivors of exploitation to live.

34. Areas of poor practice identified during this inspection resulted in an immediate response from leaders. Weaknesses in management oversight at the early help and safeguarding hub were responded to with a change in systems and additional management capacity to strengthen arrangements. Where concerns were raised about the work with specific children, the review of practice undertaken by senior leaders was accurate and led to action to help children.

35. Leaders are over-reliant on performance data to evaluate services. Data is used well to identify possible weakness, but the evaluation of casework that follows this is not good quality and does not lead to detailed understanding of the improvement needed. There is a continued focus on measuring compliance rather than quality of practice. Leaders and managers are not consistently evaluating what life is like for children and what impact work is having.

36. The majority of quality assurance activity in the local authority is poor. It does not give an accurate understanding of the quality of practice, and does not lead to learning. While there has been recent recognition by leaders that change is needed, this should have been identified at a much earlier stage.

37. The quality of management oversight across the service is inconsistent. In some teams, it works well, but in others, it does not improve the quality of practice. Frontline managers provide support, but there is insufficient scrutiny to ensure that there is good quality work with children and families. Independent reviewing officers are not yet providing enough challenge to support practice improvement. The impact of middle and senior managers is not always clear in work with children. In some areas of service, such as adoption, there are robust systems to monitor practice. In other areas, practice does not benefit from such systems, and, as a result, there has not been enough improvement.

38. Since the last inspection, the service for children in care, particularly for care leavers, has improved. There have also been positive developments in the experiences of children who go missing and those at risk of exploitation. In these services, clear improvement plans, careful monitoring and strong leadership and management have had a positive impact on social work practice for children. Improved practice in these areas is leading to a better experience for these children and to improving their outcomes. The local authority has strengthened its role as a corporate parent, and the scrutiny and support of political and senior leaders in this work have supported a range of improvements.

39. The local authority has worked hard to stabilise and maintain the workforce. There continues to be some challenges in some teams, which have resulted in some children in need of help and protection experiencing changes in worker and managers. This has led to a lack of continuity of workers and inconsistent

practice for some children, and this has affected the progress of their care planning. The rate of staff turnover and the use of agency staff have reduced. As a result, caseloads are manageable, and staff report feeling supported in their work. Greater stability has been achieved in those teams working with children in care.

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