

Inspection of safeguarding and looked after children services

Plymouth City Council

Inspection dates

8 March – 19 March 2010

Reporting inspector

Lynne Staines HMI

Age group: All

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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 three of Her Majesty's Inspectors (HMI) from Ofsted, one additional inspector 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 93 children and young people and 28 parents/carers receiving services, front line managers, senior officers including the Director of Children's Services, Chair of the Children's Trust Board, Chairman and Chief Executive of the Primary Care Trust, Chairman of the Acute Trust and the Chair of the Plymouth 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, primary care settings, the acute hospital and day care provision and the evaluation of a serious case review undertaken by Ofsted in accordance with 'Working Together To Safeguard Children', 2006.
 - a review of 19 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 the local authority's contact, assessment and referral service undertaken in October 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. Plymouth has 58,000 children and young people up to the age of 19 years. This is 23.1% of the total population in the city. The proportion entitled to free school meals is above the national average in primary schools and below the national average in secondary schools. Children and young people from minority ethnic groups account for 6.7% of pupils in primary schools and 6.4% of pupils in secondary schools which is significantly below the national average of 24.5% and 20.6% respectively. This includes a very small proportion of children and young people from Black and minority ethnic, Gypsy, Roma and Traveller communities.

5. The Plymouth Children and Young People's Local Strategic Partnership was set up in 2000 and the Children's Trust established in 2007. The Trust includes representatives of Plymouth City Council, NHS Plymouth, Plymouth Hospitals NHS Trust, Devon and Cornwall Police Constabulary, Connexions, Learning and Skills Council, community and voluntary organisations, schools and parent representatives. The Plymouth Safeguarding Children Board (PSCB) is chaired independently and brings together the main organisations working with children, young people and families in Plymouth to deliver safeguarding services.

6. Community-based social care services for children are delivered through the advice and assessment service, four children in the community teams, family support teams, a children with disabilities team as part of a children's integrated disability service, a charring and reviewing team, a youth offending service and an out of hours service. Other family support services are delivered by 16 designated children's centres across Plymouth. Services are provided to looked after children and care leavers by three children in care teams, a designated doctor and nurse, a Child and Adolescent Mental Health Services (CAMHS) children in care team, a 16+ and care leavers team and the permanency and placement service which currently has 144 foster care households and nine private fostering arrangements. Children's residential care is provided through commissioned contracts with independent providers.

7. At the time of the inspection there were 410 looked after children. They comprise of 86 young children (0-5 years), 231 children of school age (5-16 years) and 93 post-16 and care leavers. Plymouth uses a Virtual School approach in its support of looked after children to raise standards of individual achievement and attainment, celebrate their successes and increase the overall rates of progress made by looked after children.

8. Commissioning and planning of health services are carried out by Plymouth Teaching Primary Care Trust known as NHS Plymouth. Acute hospital services are provided by the Plymouth Hospitals NHS Trust. Learning disability and Child and Adolescent Mental Health Services (CAMHS) are provided by NHS Plymouth in conjunction with Plymouth City Council children's services.

The inspection outcomes: Safeguarding services

Overall effectiveness

Grade 2 (good)

9. The overall effectiveness of safeguarding services in Plymouth is good. Since the joint area review in 2006 there has been a significant and steady improvement in the ability of partner agencies to work together to develop and deliver good safeguarding services. The effectiveness of their progress was illustrated in June 2009 when the partnership was faced with a major investigation into child protection issues at a local nursery. This came at a time when demand for safeguarding services had already increased following high profile national events elsewhere. The partnership delivered outstanding work to secure the safety and well-being of young children and provided a high level of support to their parents. This would not have been achievable in 2006.

10. Children's safeguarding needs are strongly prioritised. The Children's Trust has a good awareness of its strengths and areas for further development and is driving forward and securing demonstrable improvements to service provision. Workforce planning is of good quality. In line with the national picture there are shortages of school nurses and health visitors to undertake health promotion work. The quality of multi-agency early intervention is effective such as the Family Nurse Partnership. The Family Intervention Project is good and has achieved positive feedback through its independent evaluation by Plymouth University. The partnership works well with the large military community who are well engaged at both strategic and operational levels. Integrated working has produced improvements in services to children with disabilities and for those children and young people who use the Child and Adolescent Mental Health Services (CAMHS). Good arrangements are in place to identify and intervene with missing children. There is evidence that all these improvements are showing a positive impact.

11. The Plymouth Safeguarding Children Board (PSCB) is increasingly effective, has made significant improvements since the joint area review in 2006 and is now good. It provides effective leadership and there are clear governance structures in place between it and the Children's Trust. The PSCB has been strengthened by extending its membership to the domestic abuse co-ordinator and to headteacher representatives from primary, secondary and special schools. The process for conducting serious case reviews has been significantly improved following receipt of an inadequate evaluation from Ofsted in 2008. New procedures and improved quality assurance arrangements have been introduced. Learning from this review has been disseminated across the relevant agencies.

12. Partners report that the consultative role of, and support from the advice and assessment service has led to improvements in safeguarding referrals. The consistency of response from social care has improved and is now satisfactory

overall. Initial and core assessments are at least adequate although quality varies. The quality of the casework seen by inspectors was good overall but not always reflected in the recordings. Frontline managers provided good informal support but formal supervision recording, robust management oversight and decision making are not always evident on case files. Training arrangements are in place to address this. Participation in assessments and in the reviews of their care plans by children in need and those subject to child protection plans is good overall. The health community is active and effective partners through, for example, CAMHS provision and their lead role in the child development centre. Senior managers have recognised the need to improve recording in dental services, among general practitioners and in the minor injuries unit.

Capacity for improvement

Grade 2 (good)

13. Capacity for improvement is good. Political and managerial leadership across the local area partnership is outstanding and provides a clear direction of travel. There is high visibility of senior managers, welcomed by staff who feel listened to and involved in improving services. All partner agencies meet statutory requirements for services at least adequately with many good aspects and all services are showing clear improvement since the joint area review in 2006. There is a strongly evidenced commitment from all partners to ensure that the well-being and safety of children and young people are at the heart of service planning and delivery. Early intervention provision and partnership work are effective and are resulting in positive outcomes for many children, with good early identification of their needs for safeguarding and protection. The wide range of good quality services provided by the voluntary and community sector further enhances capacity. A range of professionals interviewed during this inspection displayed high levels of enthusiasm, motivation and commitment to ensuring the provision of good quality services.

14. Overall, there are good systems in place across the partnership to monitor and evaluate performance and to make continuous improvements to services. Outcomes from inspections are used to inform and develop service planning and delivery. A peer review in August 2009 of children's social care referral and assessment identified changes needed to improve effectiveness. The major investigation affecting a nursery in the area commenced before these could be implemented and progress was delayed. Ofsted's unannounced inspection of contact referral and assessment arrangements took place in October 2009 and identified three areas for priority action. Good and timely action has been taken to respond to the priority areas for action and development identified both through the peer review and the unannounced inspection. The restructuring of the advice and assessment service is showing positive benefits for service delivery. However, the re-organisation has led to pressures elsewhere in the service which are currently receiving attention. The content of casework records within children's social care does not always receive consistent oversight by first line managers. This is not helped by the electronic recording system that does not provide timely and accurate case performance reports.

Areas for improvement

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

Immediately:

- Plymouth City Council to review and resolve management information systems in the advice and advice service.
- Plymouth City Council to improve and sustain improvements to the quality of social work case recording and to ensure effective performance management including oversight of the content of the files.
- Plymouth NHS to improve and sustain the recording of chronologies and risk management within dental care across acute and primary care settings, in general practitioner practices and minor injury units.

Within three months

- Plymouth City Council to improve and sustain the quality of analysis and recording of initial and core assessments.

Within six months

- Plymouth City Council to ensure that timely and accurate electronic management information reports are readily available to managers.
- Plymouth NHS to review and improve capacity within public health school nursing and health visiting services to deliver public health promotion work.

Outcomes for children and young people

The effectiveness of services in taking reasonable steps to ensure that children and young people are safe. Grade 2 (good)

16. The effectiveness of services in Plymouth to ensure that children and young people are safe is good. Partnership working at the strategic and operational level is outstanding and outcomes show that there is effective identification of children and young people who are in need of safeguarding and child protection services. For example, in June 2009, a high profile safeguarding investigation led by the police demonstrated outstanding work across the partnership in ensuring the safety and well-being of 325 young children. This was further enhanced by the provision of comprehensive and high quality support to their carers. However, the unprecedented volume of

work that ensued meant that between June and October 2009 the implementation of identified service improvements to the advice and assessment team could not be advanced in as timely a manner as planned.

17. Early identification of risk issues and knowledge of the city's diverse communities ensures further effective safeguarding measures are in place. For example, Plymouth has a large military presence with the naval welfare service responsible for the welfare of over 2000 children and young people. The service's close links with statutory agencies and a place on the PSCB have promoted and ensured a good understanding of, and joint working on, safeguarding issues. There is an added benefit in that, through joint working, safeguarding issues specific to service children are better understood by schools, health professionals and other agencies.

18. For children and young people who attend the Accident and Emergency department, staff knowledge and awareness of safeguarding factors ensure that children and young people at risk of harm are promptly identified and referred for further assessment. The minor injuries units has been less effective in identifying risk and is currently implementing the same systems and processes as are already in place in all other areas of NHS Plymouth. To counterbalance this shortfall and as an interim measure, the named nurse safeguarding is undertaking monthly monitoring visits to the unit and is receiving copies of all cases where welfare or safeguarding issues have been identified. This is to review and assist in managing risk during the implementation stage of the new systems.

19. The re-launch of the Common Assessment Framework (CAF) in September 2009, the Family Nurse Partnership, and children's social care family support services are used well to identify need and deliver preventative services. Between September to November 2009, 90 CAFs were undertaken compared to 38 for the same period in 2008. Most schools are now using the CAF and report it is enabling them to work more constructively with families requiring additional support and with other partner agencies. Parents and carers who contributed to this inspection report positively on how these interventions have helped them. For example, 'it has really transformed my relationship with my daughter' and 'I now feel a better parent'.

20. The proportion of good or better safeguarding judgements in Ofsted inspections of primary schools, secondary schools, sixth form colleges and special schools exceeds national averages. Safeguarding in the pupil referral unit is satisfactory overall. A wide range of activities is provided by schools, children's centres, youth service, the voluntary and community sectors designed to raise safeguarding awareness of risky behaviours, divert young people from offending and generally promote their overall safety and well-being. Service provision to address the emotional well-being of children and young people is good. The CAMHS service provides good targeted and universal support. In November 2009, the CAMHS service established a new outreach team in recognition of the needs of children and young people. The

new service is having a positive impact both by reaching out to young people in their own communities and by providing where necessary speedier referrals to acute services for intervention.

21. Safeguarding arrangements are good for the identification and tracking of missing children. The multi-agency missing person support team is having a positive impact on reducing the number of children and young people missing from home and school. For example the 'Talk Don't Walk' programme promotes the dangers of running away and provides alternative interventions. A number of projects are appropriately targeted towards communities where the risk factors for children and young people are known to be highest. For example, the 'Operation Staysafe' project in high risk areas involves a team of police officers and youth and social workers undertaking street patrols on Friday and Saturday nights. This has had a positive impact in keeping children and young people safe through early identification of those involved in risky behaviour and through engagement with them and returning them home or to a place of safety.

22. The protocols established to share safeguarding information are used well by statutory agencies, the police and the voluntary and community sector. Multi Agency Public Protection (MAPPA) arrangements are good. The Multi-Agency Risk Assessment Conference (MARAC) protocol is well-established with weekly meetings contributing to keeping children and young people safe through good assessment and direct interventions. There are strong links between MAPPA, MARAC and the domestic abuse service. The partnership gives a high priority to work on domestic abuse and there are good awareness-raising activities within the community, healthcare settings and schools. An outstanding example of empowering service users to have real involvement in service planning and delivery of safeguarding is the establishment of the Survivors Educating and Empowering Domestic Abuse Services (SEEDS) project. It has had a positive impact on the safety and emotional well-being of children and young people and led to the establishment of 'Branching Out', a weekly group for child survivors. At the request of younger children, plans are firmly in place to develop a 'Seedlings' group for them and at the request of older young people, their wish to be trained as peer mentors is being followed up.

23. Inspection outcomes indicate that schools are increasingly effective in managing behaviour and offering good support to individual pupils who may have previously been subject to exclusion. Greater support for children and young people is evident through the engagement of learning mentors and increased support for families through parent support advisers. Children missing from education are tracked and monitored. Permanent and fixed term exclusions have continued to reduce. In 2009, there were 21 permanent exclusions, all of secondary school age. Provision for those excluded is satisfactory. These young people experience more severe problems and complex lives and previous interventions have not been successful. A few parents commented that they feel overwhelmed by school exclusion processes

and lack good guidance to help them advocate effectively for their children. All young people excluded are offered a CAF, although low take up is reported. A placement panel meets regularly to review and monitor placements providing good managerial oversight of those children and young people at risk. For the 80 children and young people educated at home, the council has clear monitoring arrangements in place. Home visiting staff are aware of child protection issues and procedures. All children and young people are visited and no settings have been judged to be unsatisfactory.

24. Support for children and young people with learning difficulties and/or a disability is good with robust strategic commitment to joining up services. A well developed and comprehensive 'team around the child' approach is adopted by all agencies. The child development centre, led by the health community, brings together a team of multi-agency professionals to provide a range of assessment, therapeutic and support services to children, young people, their parents or carers. There is a single point of contact and regular information sharing meetings between professionals. All professionals have received safeguarding training at a level appropriate to their role and responsibilities. Support services to parents and carers include short breaks, direct payments, equipment and small grants schemes. Although few in number, parents who contributed to the inspection reported positively on the quality of their children's education, particularly in relation to those with complex needs. They praised highly the support offered by the inclusion service and feel services are becoming increasingly 'child centered.' However, parents identify a lack of local, accessible neighbourhood activities for children and young people and comment that 'many of the opportunities are too sport orientated'. Good tracking and monitoring arrangements are in place to review those young people moving into adult services.

25. Support for children and young people accessing CAMHS and substance misuse services is good. CAMHS provides a range of services through its early years team, severe learning disability team, children in care team, the multi-disciplinary team and its outreach team. Targeted mental health work is provided to schools to support and maintain children and young people who have additional needs. Improved accessibility to the service, a strong focus on the preventative agenda, and its educative and treatment programs are having a positive impact in helping young people stay safe. The young person's specialist substance misuse service has increased significantly the number of young people in treatment from 57 in 2005-06 to 102 in 2008-09 and increased the number of referrals from children's services from 5% in 2007-08 to 30% in 2008-09, thus ensuring better support, treatment and outcomes for children and young people. A new initiative, 'Hidden Harm' is being developed to improve support and outcomes for children and young people living with the impact of parental or carer substance misuse. Children and young people are involved in the service design and have made a powerful training DVD for professionals reflecting their first hand experiences and thoughts.

The effectiveness of services in taking reasonable steps to ensure that children and young people feel safe. Grade 2 (good)

26. Good action is taken to ensure that children and young people in Plymouth feel safe. Through consultation and other activities, children have had the opportunity to raise issues with partner agencies such as policing, bullying, street lighting, safety in parks, transport and bus vulnerability. During the course of the inspection inspectors met with 93 children and young people in a variety of settings. They confirm they feel listened to and their concerns are acted upon. Overall, they report feeling safe in school and in their communities and value the support offered by adults they engage with. All health care settings accessed by children and young people have good security systems in place to protect them from potential harm. Inspectors were impressed by all the children and young people they met with during the inspection who presented as confident, motivated and willing to express their views.

27. The voice of Plymouth's children and young people is at the heart of the Children and Young People's Plan (CYPP) where their concerns and priorities for safeguarding are strongly reflected. As a result of relatively high reported incidents of bullying, the Children's Trust listened to the concerns of its young people and placed a high priority on tackling bullying and e-safety. The Tellus 4 survey identifies that 55% of children in Plymouth reported bullying during their last school year which is higher than in similar areas. The partnership contends that the relative high rates of reporting demonstrate good systems are in place to enable children and young people to report bullying safely and seek help. Children and young people who met with inspectors confirmed that initiatives such as the Bully Busters programme in schools and the training of peer mentors are having a positive impact. Other initiatives through work lesbian, gay, bisexual and transsexual young people through the 'Out' group and through the advisory service in tackling homophobic language help to keep young people safe and promote social cohesion.

The quality of provision Grade 3 (adequate)

28. The quality of safeguarding provision is adequate but has improved significantly since the joint area review in 2006. The workforce across both statutory and voluntary agencies has significantly improved its practice and is responsive to concerns about children's well-being and safety. Professionals at all levels throughout the partnership organisations demonstrate a very child-centred approach and a good awareness of child protection and broader safeguarding issues. However, within children's social care, the quality of assessments and care planning, although adequate overall, is variable. Of the files randomly selected for inspection, no child or young person was judged to be unsafe. There was, however, evidence that some children's or young people's needs had not been fully addressed in a timely way.

29. Since the re-launch of the CAF in September 2009, thresholds for the completion are better understood by all agencies and more appropriate referrals are made to children's social care. The consultative role adopted by the advice and assessment team encourages more open discussion between professionals from other agencies and a duty worker if there are uncertainties about whether the criteria are met for a referral. Schools and healthcare providers have welcomed this new way of working and report feeling more confident in seeking advice on safeguarding concerns. Overall, other agencies report that the advice and assessment service's approach now leads to more consistent responses. The out of hours service is good and provides added value to children's social care daytime services. For example, it will undertake planned weekend visits to children and young people.

30. The quality of initial and core assessments is variable and most are completed to at least an adequate standard. In the cases sampled not all demonstrated robust analysis. Action has been taken to ensure caseloads are placed at an appropriate level in the advice and assessment service but this has had an adverse impact on the timeliness of completion of initial and core assessments and led to work pressures in the children in the community team. For example, at the time of the inspection 30 initial assessments and 24 core assessments were out of timescale due to a number of operational factors. The electronic recording system does not provide readily available good quality management information and in 12 cases no explanation could be offered for the delay because neither the team manager nor social worker were available and the electronic system could not produce a report. The extent of delays, the lack of management information and, in particular, the inability of the service to provide an up to date assessment on all overdue cases present a risk to the council and undermine its assertion that all children where there is an overdue initial assessment are 'safe and not at risk'. Senior managers are aware of the limitations of the management information systems and the inconsistency in completing the electronic records accurately and are vigorously tackling both issues. A robust action plan has been implemented to ensure that the areas for priority action and development identified in the unannounced inspection of the advice and assessment service are responded to in a timely manner to ensure further safeguarding improvements.

31. Case planning is adequate and well supported by multi-agency partnership working. The quality of child protection plans is variable but at least adequate and demonstrates child-centred practice. However, in the cases sampled, a small minority of plans show a lack of clarity as to how risks will be reduced. Children subject to child protection plans are visited regularly, often in excess of statutory requirements and are seen alone by social workers. Child protection conferences and reviews are held in line with statutory guidance and are well attended by partner agencies, as are the core group meetings. The capacity of the independent reviewing service is stretched due to increasing numbers becoming subject to plans. In a small

number of cases sampled the challenge from protection conference chairs has not been sufficiently robust. This has already been identified by the service and a robust action plan put in place to strengthen the consistency of chairing and quality assurance arrangements. The monitoring of progress is reported to the PSCB. Planning for children who require protection through a court order is good and some cases demonstrated clear planning with good outcomes. There is a good understanding of parallel proceedings in the criminal and civil courts. More recently, the quality of reports prepared by social workers has been commended by judges.

32. There is a good focus on direct work with children and families. Social workers interviewed articulated well the outcomes they were working towards with children and young people and highlighted some very good work. Case notes and reports are completed in a timely way but the quality of recording is variable. Most cases sampled in this inspection did not provide sufficient evidence in social care files of the quality of the work that had been undertaken or include a clear analysis of risks. The standard of recording, including the consideration of children's racial, cultural and religious needs, did not do justice to the quality of practice observed by the inspection team.

33. Good systems are in place to ensure safe recruitment practices are consistently applied. A random selection of staff files provided good evidence that pre-employment checks are effectively undertaken. Decisions regarding any issues arising out of criminal record bureau checks are made at an appropriate senior manager level. The local authority designated officer ensures that appropriate arrangements are in place to consider allegations in respect of adults who pose a risk to children. Agencies are referring cases appropriately and resolution is completed in a timely manner. Voluntary and community sector organisations are aware of, and fulfil, their safeguarding responsibilities in respect of the adults they employ and use as volunteers. Training in safer recruitment and the management of allegations against staff is effective and has made a good impact in raising awareness across partner agencies. All schools have undertaken safer recruitment training and this is now being expanded to other service areas including the voluntary sector. Complaints made by children and families are handled correctly with appropriate support systems in place to assist children and young people to make complaints. However, despite ensuring children and young people know how to use the formal complaints procedure, there is low take up. Where the formal complaints process has been used, good practice ensues with issues followed up by managers and used in supervision to inform an individual's learning as well as being disseminated more widely through training and service improvement meetings.

Leadership and management Grade 1 (outstanding)

34. Leadership and management of safeguarding services for children and young people are outstanding with competent and determined leadership from the council corporately, the Children's Trust and the PSCB. This is complemented by cross-party political support from elected members and the children's portfolio holder as children's champion. The voluntary and community sector in Plymouth is very strong and a full partner of the Children's Trust, PSCB and a number of other cross partnership policy and performance activities. The Children's Trust demonstrates a strong collective ambition and vision for locality working with children, within which safeguarding is rightly prioritised and focused on delivering good outcomes for children and young people. A commitment to supporting vulnerable children and young people is integrated well with equally strong ambitions to raise attainment. From the confidential social workers' survey and inspection interviews, staff in all agencies confirm that senior managers are highly visible and approachable with a culture of openness and listening. They feel able to raise concerns about service delivery with managers at all levels and consider their concerns are taken seriously and acted upon.

35. The updated review of the CYPP is good and based on a thorough needs analysis. It provides a sound analysis of safeguarding performance alongside a very good understanding of local challenges. Priorities are clearly aligned to needs and they reflect children and young people's issues and views well. Three of the council's corporate improvement priorities relate to services for children, with one focused directly on keeping children safe. A fourth priority is focused on improving outcomes for children and young people living in all communities across the city. The Children's Trust Executive meets twice monthly to take forward service developments to meet the 10 priorities in the CYPP. Each priority area is championed by a member of the Executive who has the responsibility and accountability for driving forward the work required to deliver the priority. Service plans are coherent with clear links between them, the CYPP and the Local Area Agreement whose priorities include a focus on core assessments, child protection plans, bullying and children's mental health.

36. Since the joint area review in 2006, the PSCB has significantly improved its effectiveness in providing community leadership. Until the appointment of an independent chair in May 2009, the PSCB was chaired by the Chief Executive of Plymouth City Council. This was a key action for the Chief Executive to take as it gave a high profile to the importance of the Board and strongly encouraged partner agencies to accept their responsibilities and accountabilities for safeguarding. All partners now fully understand and discharge their statutory duties to cooperate and are fully engaged. Governance and accountability arrangements between the PSCB and Children's Trust are now clearly specified and therefore the PSCB is in a good position to develop its leadership role further.

37. A strategic commissioning framework is established and is particularly well supported by the high level of collaboration and integration between health, voluntary organisations and the children and young people's service. Joint commissioning and alignment of resources include services for children with disabilities, child and adolescent mental health services, substance misuse, teenage pregnancy and missing children. Contract monitoring is regular, outcome focused and robust. All of the services commissioned by NHS Plymouth are subject to a detailed service specification that includes safeguarding. Significant work has been undertaken jointly by health and children's social care to re-model council-provided special school provision.

38. Performance management and evaluation arrangements are good at the strategic level. Performance against national and local indicators is scrutinised by the Children's Trust and the council's cabinet and scrutiny committees. However, at an operational level within children's social care, managerial case management information is not readily available to all managers. Quality assurance and auditing of files is improving. Supervision structures are good and supervision within social care is generally held at the required frequency although the quality of recording is inconsistent. Too much reliance has been placed on informal consultation between worker and manager and therefore robust management oversight and decision making are not always evident on case files. Within health communities child protection support, advice and supervision is good with some areas having a dedicated supervisor and other areas able to seek advice from the named and designated professionals. However, this support and supervision is not consistently accessed by staff from different services across the health community. This is recognised by senior managers and is being addressed with first line managers across the partnership through the children's workforce development training plans. Single agency and partnership training is well resourced and valued by staff. It includes comprehensive child protection training at levels appropriate to the recipient's role.

39. Recruitment practice across the partnership is compliant with statute and guidance, and good progress has been made in attracting children's social care staff to Plymouth. Good workforce development planning, career progression opportunities and support for newly qualified workers have helped attract and retain staff. At the time of the inspection there were no headteacher vacancies and children's social care was fully staffed. The commissioning of services from the voluntary and community sector further enhances the capacity of statutory services. The recruitment of health visitors and school nurses reflects the national picture and remains a challenge. Because of capacity issues, both school nursing and health visiting services are targeted to meet safeguarding demands and therefore there is a shortfall in their ability to deliver the wider health promotion agenda.

40. The voice and active participation of children and young people in service planning are outstanding. There is a significant body of evidence and examples of the work they have done to influence the council and the work of

the Children's Trust. Examples include young people leading and managing the delivery of the Youth Capital Fund and the Youth Opportunities Fund, the children and young people's shadow trust board, involvement in the recruitment of education, social care and some health care staff and in scrutiny. Their voices and involvement have impacted on the provision of resources to help children and young people feel safer. For example, the deployment of a network of park rangers to ensure children and young people feel safe when using play areas, community police undertaking out of school and bus patrols, and the design of schools, parks and play areas. A number of DVDs with powerful messages have been made by children and young people for use in staff training to inform officers and others how they feel and what they want from services. However, although the views of children and young people including those with additional needs are taken into account well, they are not always recorded in assessments and care plans.

41. Partnership working is outstanding at both the strategic and operational level. The Children's Trust goes much further than just fulfilling its basic duties. Together with the PSCB they are providing visible and effective leadership and demonstrate their influence across all areas where the safety and welfare of children and young people need to be considered. At an operational level, front line staff reflect the strategic position by working collaboratively with partners to deliver children's plans. Information-sharing protocols are well established to good effect, with positive outcomes in individual cases. The Parent Partnership, the Family Intervention Project, a range of parenting programmes and the multi-systemic therapy project, initiated by the Department of Health with Plymouth as only one of two places where the programme is delivered by the voluntary sector, are all examples of partnership working that are having a positive impact on safeguarding outcomes for children and young people. Overall, user feedback is positive.

42. The promotion of equality and diversity is good. There is a good strategic focus on equality and diversity from the local strategic partnership and the Children's Trust. One of the key priorities relates specifically to improving outcomes for children and young people by tackling inequality. A council-wide system is in place for reporting, recording and following up on discrimination incidents. Although the council has achieved level 3 of the race equality standard as a city it scores low on the national perception indicator that people from different backgrounds get on well together. However, vulnerable groups are identified early and where necessary receive sensitive and targeted services. Similarly, in cases sampled there was good evidence of how agencies meet individual need. Within the wider community and schools much work has been undertaken to combat homophobic bullying and to promote faith awareness courses. Good work is undertaken with unaccompanied asylum seeking young people.

43. Safeguarding services provide good value for money. Good partnership working, joint commissioning and budgets aligned through the Children's Trust ensure that resources are well linked to priorities and that key priorities are

soundly translated into service delivery. Financial mapping is being undertaken to ensure an efficient fit between resources and need across the city. The most recent Use of Resources assessment of the council found that it delivers good value for money, budgets are well managed, efficiency targets have been met and that there is a strong focus on improving the service user's experience and of being more efficient. The Children's Trust places a strong emphasis on the importance of commissioning services effectively in partnership and in getting the right balance between cost and value. For example, Plymouth led the local region in the commissioning of the Connexions service provided by Careers South West. Significant efficiencies have been achieved across the region in savings and for Plymouth a significant increase in service delivery aligned to CYPP priorities. Corporate support within the council for children's services has ensured the budget is not reduced and there is shared acceptance across the council that its safeguarding function must not be compromised.

The inspection outcomes: services for looked after children

Overall effectiveness

Grade 2 (good)

44. The overall effectiveness of services for looked after children, young people and care leavers is good overall. The Children's Trust provides robust leadership resulting in a good shared vision and agreed priorities for improvement. Statutory requirements are met including those for care assessment, health management, planning, review and social worker visiting. The quality of case work recording and of some assessments is variable and does not reflect the quality of work undertaken directly with looked after children, young people and care leavers. Since the joint area review in 2006, there has been steady improvement in all areas of service provision. Corporate parenting arrangements are good with a shared responsibility across all agencies. Elected members demonstrate a strong commitment to corporate parenting and are champions for looked after children and young people. They offer appropriate scrutiny and challenge in respect of performance and meet regularly with looked after children and young people.

45. Outcomes for looked after children, young people and care leavers are good and demonstrate that the council and partnership are meeting their individual needs and providing them with safe care. Partnership working at all levels and across all agencies is committed, creative and robust. This results in well tailored support packages to meet individual need. The quality and comprehensiveness of health and educational support are particularly good. Access to leisure activities is good. The talents and levels of achievement of looked after children and young people are celebrated and rewarded. This is well received and appreciated by young people. Looked after children and young people participate well in their health assessments and case reviews and they report that they are fully involved in the process. Inspections carried out in 2008 judged the adoption service and the fostering service to be good and private fostering arrangements to be outstanding. Since then, these services have continued to develop further. However, despite focused attention on the recruitment of foster carers within the city sufficient placement choice remains limited. Commissioned residential services are closely monitored and evaluated through individual review and contract monitoring. A high priority is given to ensuring commissioned services are of good quality, that robust safeguarding systems are in place and providers can demonstrate improved outcomes for the children and young people cared for.

Capacity for improvement

Grade 2 (good)

46. The council and its partners have good capacity to improve services for looked after children, young people and care leavers. They have a strong and accurate awareness of their direction of travel, of the improvements made and areas for improvement. Since the joint area review in 2006, partnership

working has improved significantly and is now outstanding. There is effective leadership at all levels with shared ambition and prioritisation to meet the needs of Plymouth's looked after children and care leaver population. Vision and priorities are clearly articulated and translated into practice. Performance against indicators for looked after children are generally better than similar areas with improvements continuing to be made. Good performance systems are in place to identify early any emerging problems. The effectiveness of a wide range of programmes to prevent children and young people entering the care system, the quality of looked after children services, and ongoing work to minimise children and young people needing to remain in the care system result in improved outcomes for children, young people and care leavers. There is a good record of the partnership securing key improvements in the quality and costs of provision. The voice of looked after children, young people and care leavers is given prominence when important decisions are made. Their contribution to service planning and delivery is outstanding with tangible evidence of them effecting change. Across the partnership workforce there is evidence of good practice and dedicated and committed practitioners working well to deliver good quality services for Plymouth's looked after children, young people and care leavers.

Areas for improvement

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

Immediately:

- Plymouth City Council to improve the quality of social work case recording and ensure effective performance management oversight of the content of the case records.

Within three months:

- Plymouth City council to improve the quality of up to date assessments and care plans for looked after children, young people and care leavers with recommendations and required actions documented in measurable ways within set timescales.

Outcomes for children and young people **Grade 2 (good)**

48. Overall the health of looked after children and care leavers is good. Healthcare partners give priority to looked after children and once an assessment of health needs has been undertaken, they have good access to appropriate and timely healthcare services. The designated nurse has established good links with those in foster care, children's homes and young people moving towards independence. Effective arrangements are in place for children and young people in external placements. The looked after children's

nurse is proactive in following up health assessments for looked after children and young people placed outside of Plymouth, but achieving a timely response remains a challenge. Some health assessments can take up to four months to report. A recent audit of health support for external placements indicates that a child or young person's health needs are met but not in as timely a manner as those living within the city. Systems are in place to alert the looked after children's nurse to any missed appointments so they can be followed up swiftly.

49. The number of annual health assessments completed within statutory timescales at 96% is good and above the national average. The quality, comprehensiveness and recording of completed health assessments seen during inspection are good. There has been improved take up by young people aged 14 and over through an increasingly flexible approach to see them at their request in their place of choice, for example, at The Zone, Frederick Street or children's centres. Seeing young people in these settings has the added benefits of reducing any stigma they experience and of them being in a place where, if necessary, they can access other health care services. Outcomes for looked after children under five are good and improving. There are good rates of immunisation at over 90%. Access to dental health care has improved with the council reporting 92% of dental checks completed. All looked after young people aged 16+ are offered and encouraged to undertake a health assessment. Sexual health well-being is addressed with good service provision across a variety of safe sites including schools and youth centres.

50. Good and timely intervention is provided by health professionals to support placements and prevent breakdown. For example, early CAMHS intervention to both foster carers and the individual child or young person is provided to help support and maintain placement stability. Foster carers receive formal training in their preparation and development programme to ensure they are aware of their role in promoting healthy lifestyles for the children and young people they care for. Looked after children surveyed for this inspection confirm they have useful advice from adults on healthy diets and exercise. The impact of health care investment for looked after children and young people has led to a greater awareness of health issues and provided young people with more confidence to access services once they leave care. Young people seen by inspectors confirm they feel well supported and receive good health promotion advice.

51. Children and young people who are looked after benefit from good safeguarding arrangements. All looked after children and young people are allocated to qualified social workers. The adoption and fostering services have been judged as good and the private fostering service judged as outstanding. All residential and some fostering provision is commissioned from the independent sector. There is a strong focus on promoting and maintaining placement stability with some good outcomes noted. A new payment for skills scheme for foster carers is starting to have impact by increasing the number

of level four placements within Plymouth enabling some children and young people to remain nearer to their local communities. While placement stability has improved, overall there is very little placement choice locally. Children and young people surveyed and met with as part of this inspection confirmed that the advice they receive from adults about keeping safe is valued and if they were being harmed there are people they would be able to tell about it. The Missing from Care Policy is implemented well for Plymouth children who go missing from placement both within the city and outside its boundaries. It clearly defines situations where a child is missing as opposed to an unauthorised absence, gives clear timescales and actions, and includes a risk assessment for carers to complete. Where the child or young person is missing for an extended period, it specifies the review processes to be undertaken by senior managers and the director. The Out of Hours services provide foster carers with appropriate levels of support. The safety of children in external placements is effectively monitored through robust contracting arrangements and regular statutory visits from social workers.

52. The impact of services on enabling looked after children and young people to enjoy and achieve is good. The establishment of a virtual head in 2008 has had a positive impact in improving the attainment of looked after children and young people. The role is highly valued by schools, and acts as a key reference point for accessing other services and support systems. All looked after children and young people have a personal education plan. However, the quality is variable and actions are in place to address this issue. Good mechanisms are in place to track the individual progress of looked after children and young people with increased opportunities for educational support. For looked after children and young people placed outside Plymouth, the virtual head monitors and follows up educational achievement, home work arrangements, attainment, attendance and punctuality. There is good use of learning mentors for looked after children and young people alongside a teacher with encouragement for foster carers to take on this role. The use of the personal education allowance provides children and young people with a range of additional activities tailored to meet their individual needs. There is good access to a range of leisure activities and looked after children and young people are encouraged and supported to engage in a range of hobbies and extra-curricular activities. For looked after children and young people with complex needs a designated Plymouth Looked After Children Education (PLACE) team member coordinates the additional support required.

53. The educational attainment of looked after children and young people has continued to improve. Unvalidated data for 2009 show good progress for looked after children from Key Stage 1 to Key Stage 4. At Key Stage 2 in English, 55% achieved level four compared to 41% in 2008. This is the highest score ever recorded by Plymouth's looked after children. In mathematics 50% achieved level four compared to 32% in 2008. At Key Stage 4 progress has been variable, although there is evidence that the gap is narrowing between looked after children and the wider population. While fewer young people were entered for one GCSE in 2009, unvalidated data

show significant improvement with 82% of looked after young people gaining 5 A*-Gs. This is 10% behind what all children achieved nationally in 2008-09. For the first time, 11% of young people in care achieved the benchmark of 5A*-C GCSEs including English and mathematics. The attendance of looked after children is good, consistently above the national average for looked after children, and compares favourably with attendance rates for all children. No looked after children or young person has been permanently excluded for the past three years.

54. Opportunities for looked after children and care leavers to make a positive contribution are outstanding. Members of the Listen and Care Council have been proactive in developing the Pledge. The young people who contributed to the inspection were clear that the objectives included in it were their own, that the commitment made by the Council was appropriate and gave examples of what had changed. Consultation with looked after children and care leavers is well embedded. There are good examples of their contribution to service design and delivery both in health and social care. Young people felt they had had a significant impact on the selection process through their involvement in interviews of social workers, service managers, team managers, CAMHS and Youth Offending Service workers. They feel this is a positive development and that this demonstrates the council and other agencies take their views seriously. Older young people are willing to take on lead roles and represent the views of others. An outstanding example of the influence looked after children have had on service design is the newly established Shadow Foster Panel. Young people had previously been involved in sessions on the skills to foster course but felt they had no say on who were approved as foster carers. The council responded and now foster carer applicants also attend a shadow panel made up of looked after children and care leavers who interview the applicants and have some influence in the decision making process. One young person stated 'it's ridiculous that someone can become a foster carer without meeting a young person who is in care, this has changed'.

55. The impact of services to improve the economic well-being of care leavers is good. The vast majority have an up to date Pathway Plan which is regularly reviewed although the quality is variable. Care leavers who met with inspectors are positive about the support they receive from the 16+ team, a well-motivated group of staff. They receive good preventative health support, in relation to their sexual health and to help them stop smoking. Fewer young people are choosing to leave care at 16. From a baseline position of 40% of 16-18 years olds in 2007 it has reduced to 8.6% in 2009-10 signifying better support in preparing young people for eventual independence. Of the group who completed their statutory education in 2009, all but two young people are in further education, training or employment. All care leavers receive financial support to help them access further and higher education opportunities. Currently there are nine young people at university. The proportion of former care leavers continuing in full-time education is 78.6%, an increase from 66.7% in 2008. Nine care leavers without qualifications have been supported

to re-engage in education and have achieved entry level 2 qualifications. The proportion of care leavers living in suitable accommodation has improved and is good at 95.2%. Partnership working with housing is developing placement choice through provision of transition flats, Raglan Court housing, commissioned supported lodgings and the opportunity to remain with foster carers. This is good practice. The council demonstrates strong commitment to act as a good corporate parent to young people leaving care.

The quality of provision

Grade 2 (good)

56. Service responsiveness is good. There are good preventative services in place for children and young people on the edge of care. Increased use of the CAF, multi-agency support such as that provided by the Family Intervention Project, Family Nurse Partnership and the family support worker service are all showing effectiveness in improving parenting capacity and supporting children and young people to remain at home. Parents who contributed to this inspection spoke positively of the support they had received. Increased use of Family Group Conferencing has had a significant impact on reducing the number of children and young people entering public care. A review of data demonstrates that of the 60 children and young people referred to the family group conferencing service, following the meeting, 40 were maintained within their families. Decision making in respect of children becoming looked after by parental agreement is at an appropriate level of seniority. There is a good resource panel in place that ensures all alternative safe options have been considered before a child or young person becomes looked after.

57. There are currently 410 looked after children and young people. Numbers have risen by 40 during 2009-10 reflecting the national picture of an increase in demand for public care for very young children and older teenagers. There is good partnership working at all levels to meet individual and changing needs. Looked after children and young people are positively encouraged to develop good self-esteem and high aspirations. Young people seen during the inspection describe how they feel respected and valued. All looked after children are allocated to a qualified social worker. At 16 years of age many looked after young people transfer to the 16+ team which provides services more appropriate to their needs. Most looked after children and young people who completed the pre-inspection survey indicated they know how to make a complaint. Nine reported having used the process in the previous 12 months with 89% considering their concerns had been dealt with fairly. Most young people knew how to access an advocate but report having made their complaint themselves.

58. Assessment and direct work with looked after children and young people are good overall but are not always carried out in a timely manner. However, outcomes for looked after children and young people are good overall. Improved commissioning and procurement practice is leading to better outcomes in relation to health, education and placement stability. Placement stability is supported through direct work by professionals with foster carers

such as that provided by the looked after children's nurse, CAMHS, substance misuse services, PLACE, and the youth service. All looked after children and young people are reviewed on time through statutory processes. Transition arrangements are improving with some evidence of the CAF and children in need plans used to support children and young people to return home.

59. Care planning, review and recording are adequate overall. A majority of looked after children and young people have an adequate care plan but on the cases sampled not all care plans were documented in a sufficiently clear style. In some, there was a lack of analysis, contingency planning or updated assessments. However, in a number of cases sampled, the quality of work being undertaken was significantly better than that recorded in the care plan. Senior managers are aware of this, and the role of the independent reviewing officers has been strengthened to provide more challenge and quality assurance. All looked after children and young people are reviewed on time through statutory processes. Of the 78 children and young people who took part in the pre-inspection survey, 90% reported they felt their reviews worked well or very well to make sure the care they receive is what they need and 85% reported that they felt their wishes were taken into account well or very well. In cases sampled, the frequency of social workers' contact and visits to looked after children is good and in some instances exceeds statutory requirements. Case recording, however, is variable in quality. Social workers interviewed articulated well the outcomes they were working towards with children and young people and highlighted some very good work.

Leadership and management Grade 1 (outstanding)

60. The leadership and management of services for looked after children and young people are outstanding with competent and determined leadership from the council corporately, the Children's Trust and the PSCB. This is complemented by cross-party political support from elected members and the children's portfolio holder as children's champion. A child-centred approach and the promotion of their safety and well-being are at the heart of the partnership's ambition and priorities for looked after children and young people. Elected members who undertake corporate parenting responsibilities are passionate about championing looked after children and young people, meet regularly with them and are proactive in promoting their interests. They will challenge the suitability of service provision and actively follow up and monitor any concerns they may have. For example, one young person gave inspectors an example of change as a result of a corporate parent's intervention. The young person had moved to Plymouth as a care leaver from another council area and found it difficult to be allocated a 16+ worker. A councillor on the corporate parenting group was told about it and, 'they championed my cause and a worker was quickly allocated'.

61 Performance management at the strategic level within the looked after children's service is good. The Children's Trust, PSCB and the corporate improvement board all receive and scrutinise management information on the

service and hold officers to account. At an operational level performance management systems for managers, to ensure statutory visits are made within timescales that children are seen alone, and reviews are held on time, are adequate. Monitoring of commissioning arrangements is good and has led to improved outcomes for children and young people. Working in partnership with other areas, Plymouth has developed a detailed commissioning strategy which ensures good quality placements that offer value for money. Services are selected through a rigorous initial pre-qualification process followed by a cost and volume test. The initial selection includes policy evaluation, assessment of how well embedded these policies are, their impact on practice and finally a site visit to every children's home which has over five beds and a sample of foster homes, if an independent fostering agency. Supervision of staff within children's services is generally carried out in accordance with the policy. However, the quality of decision-making is not consistently reflected in the records. Through the children's workforce development training, programme plans are in place to address this issue with first line managers.

62. The engagement of looked after children and young people in service planning, training events, consultation events and service delivery is outstanding. Children and young people who met with inspectors confirm that the Director of Children's Services and elected members are very visible, listen to them and they feel valued. A 'date with the Director', a series of keeping in touch meetings with looked after children and young people, in addition to other formal consultation processes, is highly acclaimed by them. The young people report they 'like having the chance to put questions to the Director, feel they are listened to and can say what they want'. There is good and tangible evidence that looked after children and young people are listened to and they are proud of the influence they have on service delivery. For example, they told the partnership they wanted more informal access to health services and better venues. Consequently, health care staff are operating from youth centres. This has impacted positively on the take up by young people of health information, advice and guidance.

63. Partnership working to meet the needs of looked after children and young people is outstanding and well established at both the strategic and operational level. Strategic planning through the work of the Children's Trust is effective, child-centred and focused on keeping looked after children and young people safe, maintaining and further extending their levels of educational attainment and making in-roads into promoting and improving healthy lifestyles. At an operational level and in order to support and improve outcomes for looked after children and young people, a wide range of services works very effectively together to deliver good outcomes.

64. The promotion of equality and diversity for looked after children, young people and care leavers is good. The shadow Children's Trust Board is inclusive of looked after children and young people who have the opportunity to develop strategic leadership skills. Needs arising from racial, cultural and religious backgrounds are well and sensitively met at an individual level,

although not always reflected well within care plans and recording. Joint agency work coordinated by the 16+ team is effective and has led to positive outcomes for young unaccompanied asylum seekers resulting in 86% of young people having secured education or work placements and over 90% having secured safe accommodation. The Ethnic Minority Advisory Service provides training for foster carers with a good focus on broadening children and young people's horizons.

65. The contribution of partners to achieving value for money is good. Improvements in commissioning and procurement have been achieved through a peninsula-wide partnership. This has improved the range and quality of placements available to looked after children and young people. The recent rising numbers of looked after children, including those whose needs are best met in external placements, have created recent budget pressures. However, appropriate management oversight is in place to monitor the situation and take timely action. Strong corporate and cross-party political support has identified shared resources and support to make sure that children are able to remain in stable placements and that the looked after children and young people's service is appropriately funded.

Record of main findings: Plymouth

Safeguarding services	
Overall effectiveness	Grade 2
Capacity for improvement	Grade 2
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	Grade 2
Children and young people feel safe: effectiveness of services in helping to ensure that children and young people feel safe	Grade 2
Quality of provision	
Service responsiveness including complaints	Grade 2
Assessment and direct work with children and families	Grade 3
Case planning, review and recording	Grade 3
Leadership and management	
Ambition and prioritisation	Grade 1
Evaluation, including performance management, quality assurance and workforce development	Grade 2
User engagement	Grade 1
Partnerships	Grade 1
Equality and diversity	Grade 2
Value for money	Grade 2

Services for looked after children	
Overall effectiveness	Grade 2
Capacity for improvement	Grade 2
Outcomes for looked after children and care leavers	
Being healthy	Grade 2
Staying safe	Grade 2
Enjoying and achieving	Grade 2
Making a positive contribution	Grade 1
Economic well-being	Grade 2
Quality of provision	Grade 2
Service responsiveness	Grade 2
Assessment and direct work with children	Grade 2
Case planning, review and recording	Grade 3
Leadership and management	Grade 1
Ambition and prioritisation	Grade 1
Evaluation, including performance management, quality assurance and workforce development	Grade 2
User engagement	Grade 1
Partnerships	Grade 1
Equality and diversity	Grade 2
Value for money	Grade 2