

Inspection of safeguarding and looked after children services

Nottinghamshire County Council

Inspection Reference Number: 36564
Inspection dates: 8 to 19 March 2010
Reporting inspector: Gary Lamb HMI

Age group: All

Published: 21 May 2010

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About this inspection

1. The purpose of the inspection is to evaluate the contribution made by relevant services in the local area towards ensuring that children and young people are properly safeguarded and to determine the quality of service provision for looked after children and care leavers. The inspection team consisted of four of Her Majesty's Inspectors (HMI) and two inspectors from the Care Quality Commission (CQC). The inspection was carried out under the Children Act 2004.

2. The evidence evaluated by inspectors included:

- discussions with 94 children and young people and five parents/carers receiving services, front line managers and staff including social workers and healthcare practitioners, senior officers including the Director of Children's Services, Primary Care Trust (PCT) Chief Executives, the Chair of the Local Safeguarding Children Board, elected members and a range of community representatives.
- analysing and evaluating reports 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, data from CQC's assessment activity and submitted by the PCT in advance, and the evaluations of a serious case review undertaken by Ofsted in accordance with 'Working Together To Safeguard Children', 2006.
- a review of 63 case files for children and young people with a range of need. This provided a view of services 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 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. Nottinghamshire has around 179,600 children and young people under the age of 19 years. This is 23% of the total population in the county. The proportion entitled to free school meals is below the national average. Children and young people from minority ethnic groups account for 5.4% of the total population. In January 2010, the proportion of pupils in Nottinghamshire with English as an additional language was 3.9% (primary) and 3.8% (secondary).

5. The Nottinghamshire Children and Young People's Partnership was formally set up in 2007 and was re-constituted as the Nottinghamshire Children's Trust in 2009. The Trust includes Nottinghamshire County Council, Nottinghamshire's seven district councils, two PCTs, Nottinghamshire Police, Nottinghamshire Fire and Rescue Authority, schools, FE colleges, Jobcentre Plus, voluntary and community sector and representation from children and young people. Nottinghamshire Safeguarding Children Board (NSCB) brings together the main organisations that work with children and families, including the County Council, the PCTs and Nottinghamshire Police, and has direct representation on the Children's Trust Board.

6. Social care services for children manage 320 foster carer households, three children's homes, three children's homes for disabled children and a regional Secure Accommodation Unit. There are 31 children's social care teams located across the county, which include specialist teams for fostering, adoption and children with disabilities. There is also a dedicated children's home care service.

7. At the time of inspection there were 578 looked after children and 627 children subject to a protection plan. Nottinghamshire has a virtual headteacher and a range of other specialist services for children in local authority care and care leavers.

8. Nottinghamshire has two nursery schools, 285 primary, 46 secondary and 11 special schools, providing places to over 114,000 school aged children and young people. The Nottinghamshire Learning Centre is an integrated network of four pupil referral units located in different parts of the county. It provides for students at risk or who have been permanently excluded, looked after children without a school place, young people who are home educated and who have severe and complex behavioural, emotional and social needs. There are two hospital teaching units and 58 operational children's centres. A total of 43 families of schools offer extended services for families across the county providing partnership based support for families.

9. Nottinghamshire is served by two PCTs: NHS Bassetlaw, which covers the Bassetlaw District of Nottinghamshire, and NHS Nottinghamshire County, which covers the rest of the county. The PCTs are the lead commissioners for health services, including community, acute and specialised services. The PCTs commission community services from Nottinghamshire Community Health and Bassetlaw Community Health. Acute services are provided by Sherwood Forest NHS Foundation Trust which includes Kings Mill and Newark Hospitals. Nottinghamshire children are also seen by University Hospital Nottingham and Bassetlaw Hospital but apart from Accident and Emergency (A&E) services and the maternity service these were not included in this inspection. Child and Adolescent Mental Health Services (CAMHS) and specialised mental health care are provided by Nottinghamshire Community Health.

The inspection outcomes: Safeguarding services

Overall effectiveness

Grade 4 (inadequate)

10. The overall effectiveness of services in Nottinghamshire to ensure that children and young people are safe is inadequate. The council does not meet all its statutory responsibilities, as set out in national guidance for its core business of child protection relating to contact, referral and assessment arrangements. In June 2009, council leaders and senior managers recognised that front line child protection services were not ensuring that all children and young people are effectively safeguarded. They were quick to respond, identified additional financial resources, and set out a plan for service improvements. In October 2009, the Ofsted unannounced inspection of the contact, referral and assessment arrangements found significant weaknesses in the provision of safeguarding services. These weaknesses included two areas for priority action relating to child protection procedures not being followed and areas for development regarding the quality and timeliness of assessments. Cases had not been allocated to social workers, and there were delays in children receiving the service they need. Although the council has responded swiftly to these issues, their actions have had little or no impact as yet and in one locality office, the situation has not sufficiently improved with more unallocated cases not being assessed and children not receiving the service they need.

11. The findings of this inspection confirm that serious weaknesses identified at the unannounced inspection remain. Workforce planning has not been effective. There is a significant shortage of front line social work staff and the demand for service, particularly referrals and re-referrals, has increased by 43% resulting in children not being effectively safeguarded. The level of skill, knowledge and experience of social work staff is significantly impairing the quality of service provided and in some offices there are too many newly qualified staff carrying heavy caseloads. The threshold for access to children's social care is not always consistently understood or applied by all agencies. As a result some children are not receiving the services they need. The number of children who are subject of a child protection plan has increased over the last year from 430 to approximately 600 at the time of the inspection, with an increasing number of children subject of a child protection plan for over two years. Initial and core assessments are not always completed within timescales with some examples where there are significant delays. The quality of assessments analysed by inspectors was, in most cases, poor. Although there are examples of some effective interventions by social work staff which ensure some children are safeguarded, overall there are too many referrals relating to child protection concerns which are not effectively prioritised and actioned, leaving some children at risk or having their needs unmet. Arrangements for individual case auditing, quality assurance and performance management have only recently been addressed and have yet to have a positive impact.

12. Multi-agency Joint Area Teams (JATs) provide early intervention and preventative services which are increasingly effective in supporting children to avoid family breakdown. Although the implementation of the common assessment framework (CAF) has been slow to develop, the programme has been rolled out across the county and is becoming increasingly effective. Current data show increased use of CAF, particularly by health professionals which is leading to improved outcomes for families. However, the electronic sharing of information between health and children's social care does not support effective communication.

13. The work of the NSCB is led by an appropriate independent chairperson. Joint working between the NSCB and the Children's Trust has effectively produced a shared vision and agreed priorities for improvement across the broad safeguarding agenda. The Children and Young People's Plan clearly sets out the area's priorities, based on a needs assessment which users have helped to shape. The work of the NSCB is supported well through a good range of sub-groups, which include representation from local health providers. The lessons learned from two serious case reviews are understood across agencies. Joint policies and procedures for the protection of children are comprehensive and up to date but these are not embedded in front line practice. Although the NSCB is moving forward on a range of key areas of work, the Children's Trust and the NSCB do not provide sufficient challenge across the sector to ensure that services for the most vulnerable children in need and those in need of protection are delivered effectively by partners.

14. The contribution made by schools to the broad safeguarding agenda is good and representation from schools on the NCSB is improving. The issues raised by children in schools, such as bullying, have been tackled and although inspectors spoke with a small number of children who said that they do not feel safe in their communities, the latest local survey completed by a large number of local children demonstrates that this is an improving area of performance. The impact of work by the Road Safety Partnership is good with a reducing number of children involved in road traffic accidents. The use of 'Billy Bollards' (concrete children figures) outside schools is highly effective and serves to raise drivers' awareness of risk to children. There are good arrangements for multi-agency coordination of the management of high risk offenders to protect children and families.

Capacity for improvement

Grade 4 (inadequate)

15. The capacity for improvement is inadequate. The good level of performance for staying safe reported at the joint area review conducted in the summer of 2008 has not been sustained. The unannounced inspection of contact, referral and assessment arrangements, conducted by Ofsted in October 2009, found two areas for priority action. The council's self-assessment of its poor performance on the delivery of child protection services is accurate and consistent with the findings of this inspection. At the time of this inspection, work undertaken by the local authority had not sufficiently

addressed these concerns. The capacity to improve has focused on medium and long term objectives, but short term plans to meet the immediate needs of the service have not been effective and the council has failed to ensure all children are protected. The service does not meet statutory requirements in significant areas such as responding to child concerns in a timely manner, allocation of all cases to a social worker and follow-up work to ensure children continue to be safeguarded. In one office, there were 140 children awaiting an assessment of their needs; these cases had not been risk assessed and this is inadequate provision. There are significant gaps in the capacity and skills within the workforce including children's social care and health. In some parts of the county, health agencies report challenges in recruiting appropriately qualified and experienced front line operational staff. Some social workers are carrying very high caseloads and they are unable to undertake their role effectively and within national guidance and timescales.

16. There are significant weaknesses in the reception and assessment services in some areas of the county and delays across the county in the Children's Services Teams allocating cases to a social worker, when children have been identified as at risk of significant harm. The quality of reception and assessment services offered in one locality office has insufficiently improved since the unannounced inspection and a significant number of cases remain unallocated, have not been risk assessed, and as a result children are not sufficiently protected. Scrutiny of work undertaken on 63 cases was examined by inspectors and in 22 cases the quality of response provided and lack of clarity on whether children were safe were of concern. As a result, the local authority re-opened a number of these cases and identified further work to be completed. Children are not always seen or seen alone when child protection visits are made to families. Multi-agency professional meetings do not always occur on time or have sufficient inter-agency representation. At the time of the inspection Nottinghamshire Constabulary had insufficient resources to ensure that all child protection cases are investigated immediately and although these cases were the subject of a risk assessment there is a backlog of 15 to 20 cases that have not been investigated. The NSCB has undertaken three serious case reviews and although there are some individual examples of early impact many of the lessons learned from these have not yet led to service improvement.

17. There are some areas where the capacity to improve is good. The contribution made by the voluntary and community sector supports improved outcomes for children including with regard to bullying, road safety and domestic violence. Although some newly qualified social workers are carrying complex and high caseloads there are good professional support arrangements for some trainee and newly qualified social workers. Social workers who were interviewed by inspectors report good access to high quality training that meets their development needs. The engagement of health partners is good with senior representation from both PCTs and good attendance on the NSCB and its subgroups. Improving health outcomes for children and young people is reflected in the commissioning strategies of the two PCTs and the service providers have identified children's safeguarding as a priority. All NHS boards

have a safeguarding lead and the PCTs monitor provider performance through contract and review meetings. There have been difficulties in recruiting to the designated doctor roles and the PCTs have made this a priority with the work of this role covered by experienced paediatricians in the meanwhile. Both PCTs have designated nurses and named doctors and nurses.

18. The council and its partners have made safeguarding children their highest priority and commitment to the safeguarding agenda appears to be strong across the political parties, corporate services, senior managers and partner agencies. The political and managerial leadership across the local area partnership provides good impetus for change but this has not yet had an impact on front line child protection services. Managers have a good track record of achieving improvement over time on some of the wider safeguarding agenda such as anti-bullying, road safety and service user engagement. The Disabled Children's Service has been reviewed to make further improvements. It is recognised that there is no published strategy for the Disabled Children Service and the service is being remodelled.

Areas for improvement

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

Immediately:

- Revise the existing child protection, safeguarding and looked after service improvement plan to take account of the priorities for action set out in this report.
- Ensure all children and young people are effectively safeguarded and are not left at risk of significant harm with priority given to tackling the backlog of cases.
- Review and streamline the arrangements for making contacts and referrals to children's social care.
- Undertake a full evaluation of the allocation of children's services resources to ensure that the capacity of the workforce is sufficient to meet the demand for service while applying the published thresholds for access to service.
- Tackle the unacceptably high social work caseloads and insufficient team manager capacity, and ensure newly qualified social workers are protected from carrying high and complex caseloads.

- Improve the quality and timeliness of initial and core assessments.
- Ensure the local partnership provides effective challenge to drive the improvement agenda.
- Ensure all partner agencies are adequately resourced to meet the needs of the most vulnerable children and young people who require safeguarding and are at risk of harm.

Within three months:

- Develop an integrated strategy and joint commissioning framework for disabled children which is agreed with the Children's Trust partners so the service offer is clear and resourced effectively.
- Develop robust systems for the management and tracking of missing children.
- Implement a county wide multi-agency quality audit system to ensure that case work and recording, management oversight and decision making are robust and rigorous.

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)

20. The effectiveness of services to ensure that children and young people are safe is inadequate. The threshold for access to services for children and young people is not embedded or understood across agencies. Although this leads to disagreements about which cases need to be dealt with and children are not receiving the services they require, the council has introduced an escalation process which now provides speedy resolutions to these disagreements. There are significant delays in responding to referrals, including child protection concerns. In one office, there were 140 children awaiting an assessment of their needs and this is inadequate. At the time of the inspection, the police report they are working to reduce a backlog of between 15 to 20 cases of child protection referrals they have not been able to action. Strategy discussions or assessments do not take place in all relevant circumstances or are subject to delays resulting in a lack of multi-agency decision making.

21. An internal audit commissioned by the NSCB, in response to Lord Laming's recommendations, of referrals from Nottinghamshire Community Health in 2009 showed that 50% of referrers in a defined period were not satisfied with the response to referrals by social care. Health visitors interviewed stated that responses were often delayed and, in some cases, disproportionate to the risks identified. Health workers did not receive notification of acceptance of referrals,

although this has improved over the last few months. Health providers reported that where there were concerns about social care response, the escalation process was used, and in these cases health and social care were able to work well together to agree a way forward. CAFs are not being used by health providers for referrals to children's social care and the PCTs have acknowledged that this is an area they are working to improve.

22. Multi-agency core groups are not always held within timescales or with appropriate representation. A number of children have been re-referred into the child protection service before concerns are assessed. Some children who are subject of a child protection plan are experiencing significant delays before they are allocated a social worker to progress their child protection plan. The quality of assessments is often poor. They do not give due consideration to the previous involvement with the family, including interventions by other agencies, and these findings are consistent with the lessons to be learnt from serious case reviews. Social workers do not always meet the required timescales for visiting children and young people and they are not always seen or seen alone. As a result, some of the most vulnerable children and young people do not receive services in a timely manner and they are not safeguarded effectively.

23. Good progress is being made across the broad safeguarding agenda such as a reduction of children killed or seriously injured in road traffic accidents. The NSCB's arrangements for disseminating learning and research from serious case reviews, include holding multi-agency training events which are well attended across the partnership. There have been good promotional events in local shopping centres to raise awareness on subjects such as the dangers associated with co-sleeping to prevent deaths to babies while their parents sleep. Children are more confident in reporting incidents of bullying in schools and this has led to a reduction in the incidence of bullying. All schools adopt safe practices which have a positive impact on the safety of children. There are clear processes in place for the management of children who are missing from school but the council's self assessment shows areas for development regarding the multi-agency response to missing children. The provision of child protection training in schools is increasing and is seen by schools as being good. Most regulated provision, including private fostering, is judged good or better in staying safe arrangements. Staff recruitment and vetting processes across all partner agencies comply with current guidance and regulation and arrangements are robust.

24. Designated health professionals offer a good level of advice and support to front line health staff to enable them to undertake their safeguarding duties. There is a good awareness of safeguarding issues across health professionals; this was particularly evident in the area of domestic abuse where all health practitioners have been made aware of the need to raise concerns about children and adults. Some good examples of early intervention and preventative work with children and families are improving outcomes, through the JATs and in the increased use of the CAF. The small number of parents interviewed by inspectors reported their satisfaction with these services.

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

25. The effectiveness of services in taking reasonable steps to ensure that children and young people feel safe is inadequate. There are significant gaps in front line services to meet the needs of the most vulnerable children and young people who need protection. Referrals to children's social care and the police do not always result in a timely response and both agencies do not have sufficient capacity to meet demand. Children's social care has a significant number of unallocated cases and the police service also has a number of cases where there are child protection concerns and these have not been investigated. Children who have been identified at risk of significant harm are not always allocated to a social worker. Examination of case files identified that child protection referrals are still not being responded to effectively and within timescales and this has not improved since the unannounced inspection. Thresholds for access to services are often too high and some children are exposed to risk for too long before action is taken. Children are not always seen as part of their assessments and little account is taken of children's age and understanding. However, practice for the involvement of children, young people and their families in child protection conferences is improving and more children and families are attending child protection conferences. The police service and partner agencies work well with vulnerable families where domestic violence and substance misuse might have an impact on children's safety. Young people reported that the WAM (a support service for young people affected by substance misuse by others), provided by Nottinghamshire County Health Care Trust was enabling them to make positive life changes. However, this is not always the case for families with complex needs, where domestic violence is a feature when they are referred to children's social care. More families are engaging with the JATs and these interventions are helping to build resilience.

26. Within the broader safeguarding agenda, there is a good range of initiatives to ensure that most children feel safe. There are examples of effective strategies to promote good behaviour in schools through the Healthy Schools initiative and the Social and Emotional Aspects of Learning (SEAL) programme. Anti-bullying strategies tackle bullying effectively. The feedback from groups and individual children and young people who spoke with inspectors identified that some children and young people do not feel safe in their communities. However, this is an improving picture as a result of work undertaken in schools and a high proportion of children who responded to the local survey said that they feel safe in their schools and communities. The council's self assessment shows areas for development regarding the multi-agency response to missing children and managers have set up a pilot programme in Mansfield and Ashfield to improve data gathering and communication to target the children concerned. Children and young people, including those from vulnerable groups and minority ethnic backgrounds are consulted, they feel listened to and can contribute to shaping the safeguarding agenda. Targeted work with young people to provide them with advice and information on keeping safe is supported well by the Youth Service. Although

the police have undertaken considerable work internally, around the Policing Pledge and the response to vulnerable victims a recent Her Majesty's Inspectorate of Constabulary report has identified the force needs to improve its performance on anti-social behaviour.

The quality of provision

Grade 4 (inadequate)

27. Service responsiveness is inadequate. In June 2009, the council identified issues relating to the quality and timeliness of the front line child protection service. This was confirmed by the unannounced inspection in October 2009. The areas for priority action identified at the unannounced inspection have been made the subject of an improvement plan but this inspection has confirmed that weaknesses still remain in front line child protection services. Although management oversight has been strengthened and auditing of children's social care case files has been introduced, this has not yet had sufficient impact to ensure all casework decisions are rigorous and robust.

28. During this inspection, a number of cases were brought to the attention of managers of children's social care where inspectors were concerned that children are at risk. This has resulted in some cases being re-opened and in other cases additional work is being completed. There are many examples of cases where previous referrals have been received on a family, prior to children's social care taking appropriate action. There are also cases where children at risk of significant harm experience delays in being allocated an individual social worker and this causes drift in the progression of their child protection plan. Examples were seen by inspectors where other agencies such as schools and nurseries had not referred child protection cases to children's services and this is unacceptable and inadequate performance. There have been three recent serious case reviews which have identified failures in services to act appropriately to protect children; these reviews are consistent with the findings of this inspection.

29. Thresholds for access to the service for vulnerable children are unclear and are not widely understood across agencies. Thresholds for the referral of child protection concerns by other agencies to the reception and assessment teams are not consistently applied. As a result some child protection referrals are not responded to in a timely manner by children's social care and some children are left at risk without the services they need. Referrals are sometimes closed too early without children being seen, and referrers, including professionals, are not always contacted regarding the outcome of the referral. There are examples of good professional relationships between health and social care leading to some positive outcomes for children. However, this is variable, as health professionals report some referrals to social care are not actioned in some parts of the county. In all A&E departments, it was reported that all health practitioners know how to make enquiries to social care to determine if a child is the subject of a child protection plan, and interviews with staff confirmed this. Domestic violence specialist nurses work in the A&E

departments and A&E staff are well supported by liaison with health visitors and monitoring of referrals to social care.

30. There has been insufficient progress since the unannounced inspection to ensure children are safeguarded effectively. Capacity issues relating to child protection services across children's social care and the police service are impacting negatively on the timeliness and quality of responses. There has been an increase in repeat referrals to children's social care and increasing numbers of children who are the subject of a child protection plan for more than two years. Access routes to children's social care are unclear. There are at least three different ways to make a referral, dependent on in which geographic location child protection concerns are reported and this is confusing for agencies. The timeliness of the response from the initial contact centre has improved since the unannounced inspection. However, the quality of the information gathering is not consistent.

31. The NSCB has not been sufficiently challenging to ensure the rigour of child protection responses by children's social care and the police service. Weaknesses in the responses made by children's social care service are well known across the partnership and this is acknowledged by the service. However, this knowledge has not translated into improvements. The NSCB child protection procedures provide a sound basis for child protection work, but these are not fully embedded across all agencies. The NSCB has carried out good promotional health improvements raising awareness in the community such as involving general practitioners in peer reviews of their records. The JATs and use of the CAF are increasingly effective and focused on early intervention and prevention. Although county-wide services to support children at the edge of care are available, practice is not consistent and there are delays in assessing risks with some children left too long in families where their needs are not being met.

32. Inspectors have been impressed by the dedication and professionalism of social workers and their managers. Some workers seen as part of the inspection reported they have high caseloads and work long hours to achieve the best results they can for children and families. Examples were seen of individual workers making significant difference to improving outcomes and life chances for children. The local authority is operating an effective complaints procedure. There is a high rate of resolution at an early stage and few complaints progress to higher levels. However, there are delays in responses experienced by some service users which managers acknowledge and are working hard to improve.

33. The locality and range of children's centres have led to improved take up of services to support children and their families. Health staff working in special schools report that they feel well supported by specialist health safeguarding advisors. Although considerable work has been undertaken by Nottinghamshire Community Health to introduce a caseload weighting tool which is being used to monitor vacancies and minimise risks health visitors' caseloads are variable and there are difficulties with regard to the recruitment of health visitors in

some parts of the county. The impact of vacant posts is being monitored by the PCTs. There has been some work to improve this situation with staff nurses, nursery nurses and assistants employed so that health visitors can ensure that their core work is maintained. A programme of funding for staff to undergo health visitor training is underway. Midwives reported good arrangements for risk assessing the safety of unborn and newly delivered babies and work with other teams such as substance misuse teams to ensure pre-birth plans are in place. The arrangements for supervision and support for health staff are good and are having a positive impact upon the quality of responses to children and families. Health staff report that they have good safeguarding training and this is mandatory in every NHS Trust. They are able to access the NSCB multi-agency training. Most General Practitioner practices have a safeguarding lead in place and there is an appropriate level of safeguarding training available.

34. Arrangements for the assessment of, and direct work with families are inadequate. Some initial and core assessments seen by inspectors do not demonstrate a clear analysis or evaluation of risk for the welfare and safety of children and some records are incomplete. Timescales for the completion of assessments are poor, with some not being undertaken for some months after the referral has been received. There is a significant number of unallocated cases awaiting action. Visits to children with a child protection plan are not always timely and children are not always seen or seen on their own. There is variability across the county in how the unallocated cases are managed, with some good examples of management and prioritisation. Nottinghamshire Constabulary currently has a backlog of 15 to 20 child protection cases which have not been actioned.

35. There are some good examples of multi-agency contributions improving outcomes for children and families, such as the emergency duty team which works effectively with agencies such as health, to ensure out of hours responses are robust. Good, well co-ordinated work supports some families who experience domestic violence. However, this is not the case when the matter is part of a complex case referred to children's social care when there are delays allocating a social worker. The use of JATs and the CAF is having a positive impact on children's lives in minimising the risk posed to children and this is also helping to prevent family breakdown. The development of locality emotional health and well-being teams is a positive step which has enabled good links with clinical psychologists and joint professional training to promote a good level of understanding of agencies' roles. Schools and Health make a valuable contribution to the social and emotional development of children and young people, with 90% of primary schools and 66% of secondary schools delivering an effective SEAL programme. Mental health support for young people is good across the county and includes a range of services provided by school nurses, emotional health and well-being teams and specialised and targeted CAMHS. There is good monitoring of these mental health services by the commissioning PCTs through contract and quality review meetings. Access to CAMHS services was reported as good, with an out of hours service being provided.

36. Procedures and practice for case planning review and recording are inadequate. The quality and timeliness of some initial and core assessments are poor and child protection plans are not always progressed effectively. The planning and review of the cases seen by inspectors are adequate and all child protection conferences and reviews are appropriately managed by a suitably qualified and trained child protection conference chair. Child protection conferences are held on time, although the quality of the minutes is variable. Issues are identified about casework practice and fed back appropriately to the social workers concerned after the conference. Quarterly and annual reports are produced to identify the issues with cases to promote good social work practice. Some conferences are ineffective, with examples seen by inspectors of a lack of progress being made on previous child protection plans. There are delays in some cases being transferred from the reception and assessment team to the long term teams, and social workers who pick up these cases do not always attend child protection meetings to hear first hand what work is needed. Some strategy meetings are poorly attended, with many examples of attendance only by social work staff, with other agencies absent. The attendance of General Practitioners at child protection conferences is often poor. However, in some areas, the PCTs acknowledge this and state location and timing of conferences as a primary reason for non-attendance, due to clashes with surgery times. Work is ongoing to look at ways to improve access for General Practitioners and to encourage an improved written contribution if attendance is not possible. An audit carried out in December 2009 showed 100% health visitor attendance at case conferences. Core Groups are not always timely and do not always have appropriate multi-agency involvement which results in slow and uncoordinated responses to ensure children's safety.

37. The quality of recording in some initial and core assessments is insufficiently focused on identifying risk and child protection cases are delayed awaiting allocation to a social worker. There has been an increase in the number of children subject to repeat child protection plans and those subject to a child protection plan for more than two years. The recently introduced council-wide system for monitoring and auditing case files is at an early stage of development and has yet to demonstrate impact. Although the council's electronic childcare information system is adequate, it is labour intensive requiring information to be inputted more than once. There are examples of good work to include parents in child protection conferences. The small number of parents spoken to by inspectors felt they were informed and consulted.

Leadership and management

Grade 4 (inadequate)

38. Leadership and management of safeguarding services for children and young people are inadequate. Although agencies tackle the wider safeguarding agenda well, leadership and management by the council and its partners have not applied sufficient rigour to the core task of child protection of children and young people and there are serious weaknesses in the delivery of services which do not meet minimum standards.

39. Ambition and prioritisation are inadequate. While there is a high level of visible leadership to promote safeguarding services, the most vulnerable children who are in need of child protection have not been safeguarded effectively. Although target-setting in relation to safeguarding is given the highest priority and challenges are set out clearly in the Children and Young People's Plan, there is a lack of prioritisation of the considerable weaknesses identified by the council in its front line child protection service. The council has identified additional financial resources this year to improve front line child protection services, although actions have not yet had an impact. The child protection service improvement plan focuses on medium to long term improvements but does not sufficiently target what needs to improve immediately to safeguard children and young people.

40. The Children's Trust provides visible leadership and all key partners including the voluntary and community sector are engaged. The NSCB is independently chaired with appropriate multi-agency membership. There has been a good focus leading to improved outcomes on the wider safeguarding agenda, but there is insufficient challenge to ensure key partners deliver effective child protection services. The council has agreed a planned budget for April 2010 to allocate resources to tackle known areas of poor child protection performance. Although leadership is responsive and proactive, known deficits identified in June 2009 for the core business of the council to provide a child protection service have not yet seen sufficient improvement. The deputy chief executive has adopted the role of critical friend to the Corporate Director for Children and Young People's Services and he provides effective challenge to improve service responsiveness.

41. Performance management, quality assurance and workforce development are inadequate. Workforce planning has failed to ensure that there are sufficient front line social workers to meet the demand for child protection services leaving children at risk or their needs unmet. Although firm plans are in place to drive improvements with regard to the quality of case planning, the recently introduced system of auditing children's social care case files by managers has not yet had an impact. This results in a lack of robust management oversight of case decisions to ensure that children are safeguarded. Local management information is improving although the partnership's progress against its targets is variable. Some targets have been exceeded, while progress on others is slow, and there has been no impact in some areas, such as on the timeliness of initial and core assessments. Good arrangements exist for external audit of safeguarding systems across health services. These include monitoring by the Strategic Health Authority and through the NSCB safeguarding children progress reports. Clinical safeguarding arrangements are in place across the East Midlands region which enable staff to have an overview of practice. Designated nurses and named doctors are in post, but while the designated doctor post has been recruited to, the post holder is not yet in post. Health service managers have ensured arrangements are in place to cover this post until appointments are made. Most health and social care staff identify they are well supported by their managers and they

receive a good level of supervision, but this is not consistent across the county. Training opportunities and support for staff to achieve professional social work qualifications are good. The processes to ensure safer recruitment meet the statutory minimum requirement are good for children's social care. The PCTs and all other NHS Trusts have declared compliance with the Core Standard 2 for safeguarding children. There are good commissioning arrangements with the voluntary and community sector to promote flexibility and meet individual and specific service needs.

42. Service engagement with users is adequate. Members of the Nottinghamshire Youth Council are effectively empowered to influence and shape the safeguarding agenda. There is evidence throughout the Children and Young People's Plan of the contribution made by children and young people, their parents and carers to the planning processes. This is leading to improvements in some outcomes and promotes the shaping of services in communities to meet local need. Children and young people are increasingly involved in attending their child protection conferences and reviews. However, children are not always seen or seen alone during investigations and this is a serious omission. There is a well established complaints and representation process with a high rate of resolution at an early stage. Young people and their families have been involved in the evaluation of child and adolescent mental health services which includes important information on how this service affects them.

43. Partnership working is inadequate. Multi-agency work to support specialist child protection work is failing to ensure that some of the most vulnerable children are adequately safeguarded. The NSCB and Children's Trust do not provide sufficient challenge to ensure front line child protection services are delivered effectively. The membership of the NSCB is satisfactory and has been further enhanced by the involvement of schools. The NSCB effectively influences the broader safeguarding agenda. Serious case reviews undertaken by the NSCB have been judged adequate and the lessons learned have been used to help shape the improvement agenda, although these lessons have yet to have an impact on service improvements. The development of multi-agency early intervention services is increasingly effective, programmes have been rolled out in localities across the county and these are beginning to have an impact on the lives of children, young people and their families.

44. The promotion of equality and diversity arrangements is adequate. The council is committed to valuing diversity and tackling discrimination and this is shared across the partnership and clearly evident in strategic planning and the Children and Young People's Plan. The council does not have an equality standard rating, but has adopted the framework for the equality and diversity strategy. Specific services are identified for children and young people from minority ethnic groups and for children and young people with disabilities and mental health services. Equality impact assessments are carried out and the results of these have identified areas of learning and development that have been included in strategic planning and development of direct services for

children and families. The Ethnicity and Cultural Achievement Service is effective in supporting schools, which is leading to improved outcomes and social workers report good commissioning for the diverse population. The workforce population reflects the community profile and recruitment and training plans are addressing inequalities to increase the number of Black and minority ethnic staff in senior positions within the department. There are many examples of direct work having an impact and improving the lives and achievements of children and young people across the diverse communities of Nottinghamshire, such as the young pioneers. The roll out of JATs is helping to deliver services at a local level which more closely meet individual need. Young people at risk of offending reported positively about the Youth Inclusion Support Programme scheme and its effectiveness in changing their behaviour and enabling them to remain in school or return to school. The Aiming High for Disabled Children programme is reaping good rewards and effectively enabling their access to, and enjoyment of, services in Nottinghamshire. However, there is no published strategy for disabled children, so it is unclear what services are on offer for this group. Effective arrangements are in place to work with and support the Travellers' communities including a designated health visitor in Newark.

45. Value for money is inadequate. Financial planning has not ensured that there is an adequate number of front line child protection social workers to ensure children are safeguarded effectively. Previous reductions in the funding for discrete children's services and the significant increase in referrals and re-referrals to social care have contributed to the challenges experienced in delivery of these services. Although the council has identified additional financial resources for the development of children's social care to tackle service weaknesses, these have had limited impact and have not yet met the needs of vulnerable children and those in need of protection. Considerable challenges remain to increase the capacity of front line social workers and provide essential support to these services, including management oversight, quality assurance and performance management functions. Joint health and social care commissioning/provider arrangements are in place and the council is offering training to the voluntary and community sector to promote inclusion in the tendering processes to build capacity. There is a high take up of direct payments to children with disabilities and their families and this promotes autonomy, choice and self determination for them. Joint work between health and children's social care is increasingly effective at reducing duplication and for the coordination of services for children, young people and their families. Equality impact assessments are being used effectively to monitor value for money and consultation assists in targeting resources where they are needed to meet local demand. There is no joint commissioning framework for disabled children and these arrangements have not been agreed by the Trust partnership.

The inspection outcomes: services for looked after children

Overall effectiveness

Grade 3 (adequate)

46. The overall effectiveness of services for looked after children is adequate. The staying safe judgement is adequate with the proportion of looked after children being low in comparison with similar authorities and national averages. Recently, however, numbers have been rising and some children remain at home too long before action is taken to ensure their safety. The threshold for access to the children's social care service is not always consistently understood or applied by agencies. Once children enter the care system, their needs are met and they are well cared for and protected. Most looked after children and care leavers say they feel safe. Placement stability is good. Most children are placed in stable placements providing safe and consistent care. The statutory requirements for looked after children are met in most cases, such as reviews where performance is good, but the timeliness of decisions for adoption placements is consistently low. There is a good level of choice and planning which ensures that the needs of children are closely matched. Outcomes for children are supported very well by regulated services including children's homes which are generally judged good or better. The Children and Young People's Plan expresses clear ambition and priorities for looked after children. There is strong leadership at a political level to tackle service weaknesses and drive up performance and this is demonstrated effectively by the Corporate Parenting group. As a result looked after children's outcomes have been sustained and consolidated in key areas. They do very well at school considering their starting points. A high proportion of children and young people are involved in their reviews and they are contributing effectively to help shape services. More care leavers are engaged in employment, education and training which is helping to promote their life chances. However, the arrangements for looked after children's health assessments and immunisations are not effectively managed.

Capacity for improvement

Grade 2 (good)

47. Capacity for improvement is good. Performance across the outcome areas demonstrates that once children are in the care they receive the services they need. Outcomes for looked after children and young people are at least adequate for health and staying safe, although too few children aged five and under receive timely health assessments and immunisations and although all looked after children are allocated to a qualified social worker the deployment of qualified social workers remains a challenge for the local authority at a time when its front line child protection service is under-resourced. Placement stability is good. Most children are placed in stable placements providing safe and consistent care. A rise in the number of teenagers needing placements has

resulted in an increasing use of bed and breakfast accommodation for some young people which does not always promote their safety. Outcomes for enjoying and achieving, positive contribution and economic well-being are good and outcomes in these areas have been consolidated. There is evidence that targeted work has helped to make improvements in school attendance and education achievement is good considering children's starting points. The council has a clear understanding of where improvements are needed in services for looked after children and it uses positive engagement with young people and professionals to review service provision. This demonstrates clear prioritisation of resources for effective service delivery. Managers, staff and carers describe a service that meets the needs of looked after children. There is a strong commitment to multi-agency work to strengthen partnerships including effective work between children's services, the Youth Service, and Connexions.

Areas for improvement

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

Immediately:

- Ensure that the health team are immediately notified once a young person enters the care system so that coherent health support is provided.

Within three months:

- Ensure that NHS Nottinghamshire County and NHS Bassetlaw develop robust management information systems for looked after children's health assessments and health outcomes are audited.
- Improve immunisation rates for children in care.
- Implement and embed the plans for the Virtual School to ensure data are used effectively to identify underachievement and record and monitor fixed term exclusions effectively.
- Ensure that systems are in place to engage looked after children aged 16 and 17 years old who are not in education, employment and training.
- Improve arrangements for the accommodation of looked after teenagers who enter the care system late and for care leavers who are difficult to place.

Outcomes for children and young people

49. Services to promote health outcomes among children in care are adequate. Health assessments for children over the age of five are generally completed, but only 59% of children under five have undertaken a health assessment, which is unacceptable. Immunisation rates for children over five years old are only at 63% and only 52% of under five year olds have received their immunisations, which is poor. Over 80% of children aged five and over are registered with a dentist which is good. Although the PCTs have governance arrangements in place, health outcomes are not supported by comprehensive data and management information is not routinely collated, which makes it difficult to track which children have had an assessment. Most children placed with a foster parent are registered with a general practitioner and dentist and have access to health visitors and school nurses. Good practice has developed to ensure professionals are sensitive to the needs of looked after children, who, in the main, have their health assessments at home. Health assessments for children over ten years of age take place without carers being present so children and young people are free to express their feelings. All the young people interviewed reported they had received a health assessment, regarded this as routine and felt the assessments were done in a non-stigmatising way. Good arrangements are in place for the designated nurses to support children who are adopted and those who are placed in local authority foster placements. This is effective in promoting a strong focus on improving health outcomes and healthy lifestyles. There is good targeted sexual health service for looked after children demonstrated by the low levels of teenage pregnancy in this group. Arrangements to support health outcomes for unaccompanied asylum seeking children who are looked after are good. There is a special fortnightly health clinic, an immunisation clinic and specific protocols in place to meet immunisation requirements for these young people. There is a good CAMHS service for looked after children.

50. Safeguarding arrangements for looked after children are adequate. The proportion of looked after children is low in comparison with similar authorities and national averages. Although recently numbers have been rising, some children remain at home too long before action is taken to ensure their safety. Once children enter the care system, safeguarding of their needs is promoted well. Nearly all looked after children have a named social worker, but the turnover of staff means that there are periods of time when some cases are allocated to team managers and work is carried out by duty social workers or unqualified support workers. The large turnover of field social workers means that sometimes the most consistent person in the child's life is likely to be the foster parent, teacher, some other professional or a support worker. The timeliness of decisions for adoption placements is consistently low and below the national average. Overall, looked after children and young people report that they feel safe. The survey conducted for this inspection identified 83% of children and young people feel very safe and a further 12% feel fairly safe. The arrangements for looked after children's reviews are good with 91% completed

on time which is better than the national average. There is a wide range of support for children in their placements, such as CAMHS, play therapy, dedicated youth workers, and various voluntary and statutory agencies such as the Drug Awareness Action Team. The consultation and support provided by CAMHS to social workers, carers and children have become increasingly flexible but are not always provided until the child is in a stable placement. This therefore compromises support for some children, such as those children who self harm. Placement stability is good. Most children are placed in the county in stable placements providing safe and consistent care. There is a good level of choice and planning ensures wherever possible the needs of children are closely matched. External placements are used appropriately for a relatively small number of children with specialised or complex needs. Although the quality and availability of accommodation for care leavers have improved, a sufficient number of placements are not always available. A rise in the number of teenagers seeking placements has resulted in an increasing use of bed and breakfast accommodation for some young people which does not always promote their safety. There are low numbers of permanent exclusions for looked after children which reduces their opportunity to offend or become a victim of crime or exploitation.

51. The impact of services to enable looked after children and young people to enjoy and achieve is good. Looked after children have access to a broad range of services to support their education. Although the achievement for looked after children is adequate, there are some examples of effective targeting of individuals and groups which is leading to improved outcomes, such as raising school attendance. The Designated Teacher plays a vital role to ensure the needs of individual children are met. Pupils are given priority for inclusion in projects to support specific learning such as the 'every child a reader' project and through 'springboard' meetings. School attendance by looked after children is very good. Highly effective procedures are in place to ensure that absence is followed up swiftly and good attendance is given a very high priority. The latest validated data show that the percentage of looked after children missing 25 or more days of school for any reason is only one quarter of the national figure. Permanent exclusions are rare for looked after children with only two episodes during the whole of 2008/09. Taken as a whole, the rate of permanent exclusions for looked after children both within Nottinghamshire schools and those taught in other local authorities, is below the national average. However, the local authority acknowledges its systems for the collation of fixed term exclusions is not robust enough and action is being taken to tackle this.

52. The level of attainment by looked after children is broadly in line with similar authorities and the national average. The trend of improvement in standards achieved is variable. At Key Stage 2 the results for English and mathematics in 2009, reveal the gap has narrowed in terms of the percentage gaining the expected level in each subject between looked after children and the non looked after population. This is also the case when looked after pupils are compared with the national results. Attainment at the end of Year 11 shows

that the percentage of looked after children achieving five GCSE A* - C grades is just above the national average for this group. However, the gap here between looked after children and the non-looked after population has widened. As a whole, schools in the county have been improving at a greater rate than the national average since 2006. In 2009, the progress made by Year 11 looked after children was good, taking into account their starting points when they began at their secondary schools. Indeed, their progress was greater than the figure for all pupils in this cohort. Schools are challenged effectively to ensure that looked after children achieve well and make appropriate progress in their learning. Progress is robustly monitored by school improvement partners and intervention strategies are available to tackle underachievement. Children's personal education plans are of good quality and reviewed within timescales. Following the recent appointment of the Virtual Headteacher, the Virtual School is developing a more structured role in terms of support and challenge, particularly using outcome data. This is supported well through the engagement of the Corporate Parenting Panel in the development of the overall planning and direction of the Virtual School.

53. Unaccompanied asylum seeking children who are looked after have prompt referrals to schools and colleges to assist their learning. Headteachers are very positive about the work of the ethnicity and cultural achievement service. They promote the heritage of minority ethnic groups of children and young people from other countries who arrive at school, often without notice. Children in care are involved in planned conferences to celebrate the heritage of cultural groups. Young people are involved in the planning of these events and they lead some aspects. An example of this is a recent conference on issues surrounding dual heritage which was effective in developing the themes surrounding the lives of this group. Opportunities for leisure activities are an important part of provision for looked after children. Funding is available and members of the Youth Service ensure that children's skills and interests are supported well. Young people appreciate these opportunities and residential visits are organised to support a range of interests. However, children and young people who are looked after are sometimes stigmatised by the bureaucracy of completing consent forms and are subsequently missing out on school trips. Foster carers say that there are lengthy delays in getting the consent of social workers for school-related activities and subsequently places are filled. This does not serve children well in promoting their enjoyment.

54. Opportunities for looked after children and young people to make a positive contribution are good. Looked after children and care leavers including children with learning difficulties and/or disability are consulted on a wide range of issues. They have helped to shape and improve services through their involvement in the Children in Care Council and the wider Children's Council. This has ensured they can make an effective contribution to the Children and Young People's Plan. The Virtual School uses consultation with the Children in Care Council to mirror the function of a school council and this is helping to steer service development and improvement. The performance of regulated services, including children's homes, local authority fostering and adoption

services, in enabling looked after children to make a positive contribution is good. Young people are routinely consulted and involved in how these services are run through reviews and engagement events to contribute to planning their own care and in shaping services. Disabled children who are looked after are actively involved in consultation events to assist in the review and shaping of services. The local authority organises many celebratory events which are well attended and enjoyed by looked after children. Members of the Corporate Parenting Group support these events well and this encourages looked after children to develop interests, hobbies and aspire to achieve and feel good about themselves. Examples were seen of creative work such as art and poetry which were presented at showcase events which the children were very proud of. Local data confirm that 99% of looked after children are involved in their reviews. Although the level of participation varies, social workers and carers are totally committed to ensure the views of the children in their care are represented at their review. Children and young people surveyed, and those interviewed by inspectors, said professionals take notice of their wishes and feelings. Looked after children who spoke with inspectors said they feel empowered and that their views are taken seriously and acted upon, such as their involvement in the Children in Care Council and their contribution to the Children in Care Pledge. Unaccompanied asylum seeking children have been encouraged to join the Children in Care Council and they have good access to interpreters. Looked after children's involvement in the criminal justice system has been consistently low and preventative services, including the support provided by the Youth Service, is effective.

55. The impact of services to enable looked after children and young people and care leavers to achieve economic well-being is good. Services are becoming increasingly effective in this area. There are particularly good partnerships between the local authority and Connexions which have had an impact and is making a difference to care leavers' lives. Focused work by after care personal advisers, Education, Employment and Training Advisers employed by the local authority and Connexions has been highly effective and good planning based on shared data has ensured resources are targeted well. The decline in the proportion of 19 year old looked after children in employment, education and training has been tackled and the latest local authority data for 2008/09 show this is at 66%, slightly above the national average. Predictions for the current year show a further improvement to 81%. However, early engagement with 16 and 17 year olds remains a challenge in order to ensure there is consistent provision of services to meet their needs across the county. Projects such as Aiming High are also raising the aspirations of looked after children and care leavers, including those with a special educational need or disability. Nottinghamshire Community Health is the first community provider to offer both clinical and business apprenticeships for young people, including looked after children. Care leavers make appropriate contributions to their Pathway Plan reviews. These plans are detailed and help young people work towards their aspirations in adulthood. Currently 12 care leavers are being supported in higher education across the country. This includes bursaries and practical support such as transporting belongings and setting up in accommodation. The

local authority has good links with a number of local higher education institutions. The percentage of care leavers at age 19 in suitable accommodation has improved by 10% since 2007 and is now over 95% which is above the national figure.

The quality of provision

Grade 3 (Adequate)

56. Service responsiveness is adequate. There are low numbers of looked after children in proportion to the population and compared with statistical neighbours. Some children remain at home too long before action is taken to ensure their safety. Looked after children experience too many changes in their social worker and this is impacting on the quality of the relationships. Interviews with a small number of children and young people for this inspection and the survey completed by looked after children revealed that very few children had retained the same social worker for the period of time they were in care. The average number of change of social workers was 4.5 which is poor. There were examples of some children who had experienced up to 12 social workers throughout their period of being looked after and this is unacceptable. Over recent months, the number of children becoming looked after has increased and due to limited resources already available, this has further impacted on the level of service they receive. Nottinghamshire reports that their latest figures show the rate of looked after children is set to rise further in line with the increased numbers of referrals and cases subject to court proceedings. This is a challenge for the local authority at a time of acute shortage in social worker capacity across children's social care. The authority provides an effective response to the increasing number of unaccompanied asylum seeking children. The support from after care workers is good and valued by young people. Most looked after children are aware of how to make a complaint. Young people surveyed for this inspection who had made a complaint felt it had been resolved to their satisfaction. The Children's Rights Services is commissioned through a large voluntary organisation which promotes a good level of independence and this service is available to all looked after children. There are regular advocacy sessions for young people living in the council's children's homes. Advocacy services are widely used and are available both to children from other authorities and Nottinghamshire children placed outside the county. Bed and breakfast accommodation is still being used for some older first time entrants in to care and for those young people who are hard to place. Although there is a responsive CAMHS for looked after children, which ensures their needs are met, there are difficulties with access for some children who are not in stable placements such as those who display self-harming behaviours.

57. Assessments and direct work with looked after children and young people are adequate. In the cases seen by inspectors, there were some examples of good practice and direct work with families and some children interviewed by inspectors said services were making a positive difference to their life. However, the quality of social work practice is variable and there were examples from a small number of parents who were interviewed by inspectors of poor quality work. Some parents reported that they were unable to contact their social

worker, others said they did not feel properly consulted and informed particularly regarding assessments. Some initial and core assessments were poor and while there were many adequate assessments, many lacked depth and analysis and the views of extended family members are not always evident. However, most parents said they felt involved in statutory reviews conferences and that their contribution was valued. The county-wide family resource worker team offers short term intervention to support families, including foster parents, where there is a risk of the placement which is helping to prevent family breakdown. This service contributes to the good level of stability, for looked after children in their placements but the demand for this service is high. Good partnership work between schools, health professionals, social care and youth services is providing a more holistic service to looked after children and young people. This work helps to support their social and emotional development, achievement at school and how they enjoy their free time. Dedicated play therapists and play workers provide a service specifically for looked after children which is well used. The Youth Service provide a dedicated service for looked after children that is run by well qualified and experienced youth workers who provide a range of activities, including residential courses for group and individuals. These are highly valued by young people, who are able to work through issues at their own pace and in a way that suits them. Caudwell House offers an outstanding service to children with disabilities and their parents, through its short break service. They also offer a range of outreach services which is well used and valued.

58. The arrangements for case planning, review and recording for looked after children are adequate. Records are up to date, including children and young people's care plans which are reviewed regularly. However, records do not always include a holistic analysis of the longer term needs of the child to inform future planning. The competing demand for child protection work impacts on the quality of looked after children's reviews. Independent Reviewing Officers said they do not have sufficient time to conduct looked after children reviews when the child is also being simultaneously reviewed because they are on the child protection register. This compromises the planning process and an ability to meet the holistic and changing needs of children. Some children and their carers experience long delays receiving minutes of their looked after review and children and their carers feel devalued by this. The foster carers interviewed by inspectors said they experience long delays receiving review minutes and sometimes the minutes are not received until the day before the next review which can be up to six months. Children's views are taken into account when their plans are reviewed and advocates support for looked after children well through the review process. This includes additional support for children and families from minority backgrounds and the use of interpreters and specialist organisations such as Horizon. Workers are sensitive to the needs of children and young people and encourage them to attend their reviews. Reviews sampled by inspectors were clearly written and understood with good follow up on previous actions and clear recording of future actions and responsibilities. Independent Reviewing Officers provide sufficient challenge to support looked after children and young people's plans, but senior managers acknowledge

more needs to be done to increase the managerial effectiveness of the Independent Reviewing Officers to improve the level of challenge provided for area social work decisions. The arrangements to ensure young people's placements are closely aligned to their needs are good and this is promoted effectively using externally contracted independent chairs for fostering and adoption panels.

Leadership and management

Grade 3 (Adequate)

59. Leadership and management of services for looked after children and young people are adequate. Ambition and prioritisation are adequate. Senior managers acknowledge service improvement in children's social care lost pace following the Joint Area Review. There has been a refocusing of resources and priorities to tackle known weaknesses, such as social work capacity to improve the quality of services for looked after children. Elected members, senior managers and front line staff display a clear commitment to improve outcomes for looked after children and care leavers. Areas for prioritisation are identified and understood at senior level. The service has responded to external factors, for example, the findings of the recent Lord Laming report and the unannounced inspection of contact, referral and assessment services. The strategic plan for the delivery of looked after children services has been reshaped and the deputy chief executive has adopted the role of critical friend to the Corporate Director for Children and Young People's Services and he provides effective challenge to improve service responsiveness. Good outcomes have been sustained for 'enjoy and achieve'; 'positive contribution' and 'economic well-being' and other outcome areas are at least adequate. The school improvement service, together with Virtual School staff, has been at the forefront of developing challenging targets for looked after children and closely monitoring their progress through school improvement partners and this has led to improved outcomes. There has been extensive consultation on the looked after children pledge with young people; their involvement has helped shape the Children and Young People's Plan and improvement is being rolled out through a range of strategic plans. However, not enough health assessments and immunisations are carried out for looked after children under the age of five and there is an over reliance on the use of bed and breakfast accommodation for young people over the age of 16.

60. Evaluation, including performance management, quality assurance and workforce development, is adequate, although quality assurance, case file auditing and performance management systems have been poor. In October 2009, the local authority piloted a children's social care quality assurance and auditing system, which is now being rolled out across the county and performance management systems have been refreshed to collect essential data on key areas of performance. Early indications show that these systems are beginning to identify poor performance and this is leading to improvement such as care leavers' engagement in employment, education and training. Data are being used increasingly by managers to inform their decisions about improvements but some gaps remain in the use of data and quality assurance

across key outcome areas such as health. Workload management remains a challenge, with too few social workers and managers available to carry out all social work tasks. The social work survey undertaken as part of this inspection, identified a number of responses where workers expressed concern about staffing numbers and insufficient time to complete assessments, which is impacting on the quality of their work. Designated teachers are positive about training for the looked after children role. JATs now cover all the schools in the area. The NCSB has ensured funding is available for training to support improvements in looked after children outcomes and there is also good support from the educational psychology service.

61. User engagement is good. Action taken to consult with and encourage the participation of looked after children and care leavers is good. A wide range of consultation has taken place and many looked after children have helped to shape services. The views of looked after children and young people are represented on the Young People's Council as well as the views of the Children in Care Council. This has helped to inform priorities set out in the Children and Young People's Plan and the council's Pledge for looked after children and services has changed as a result, such as in the improvements in the level of support provided for care leavers. Looked after children and care leavers have also been involved in the Young Inspector initiative to help improve services, such as education outside the classroom, leisure and arts provision. Consultation and involvement of children and young people can be seen in decisions about their care in their reviews and this improves the planning process as young people take ownership of decisions. Young people's wishes are documented and acted upon and these help inform future planning. However, some carers say they have difficulty attending meetings and would like a more flexible approach to appointment times.

62. Work in partnerships is adequate. Partnership working at a strategic level is good and some good work at a local level has resulted in good outcomes for 'enjoy and achieve', 'positive contribution' and 'economic well-being' for children and young people. The contribution made to partnership working by schools, the Youth Service and Connexions is good and this ensures looked after children and care leavers receive the support they need. However, the contribution made by the Health service with regard to health assessment and immunisation for children aged under five does not sufficiently ensure their needs are met. The use of JATs and the CAF is having a positive impact on children's lives in minimising the risk posed to children and this also helps to prevent family breakdown. The development of locality emotional health and well-being teams is a positive step and has enabled good links with clinical psychologists and joint professional training to promote a good level of understanding of agencies' roles. Schools and Health together make a valuable contribution to the social and emotional development of children and young people, with 90% of primary schools and 66% of secondary schools delivering an effective SEAL programme. Mental health support for young people is good at all tiers across the county, which includes a range of services provided by

school nurses, emotional health and well-being teams and specialised and targeted CAMHS.

63. Equality and diversity is good. The council is committed to valuing equality and diversity and tackling discrimination and this is shared across the partnership and clearly evident in strategic planning and the Children and Young People's Plan. There is a strong focus on diversity at all levels for looked after children and specific services for unaccompanied asylum seeking children are well coordinated to meet their needs. This is a particular strength of the council. The council works collaboratively and effectively with multi-agency providers to meet the needs of looked after children and young people from minority ethnic groups; advocacy and translation services are good. Headteachers value highly the Ethnicity and Cultural Achievement Service in providing responsive individual support to looked after children and young people. Within residential services for looked after children, there is a strong emphasis on positive role images of people from minority backgrounds. However, children's social care case recording does not always reflect equality and diversity, and heritage issues are generally not identified or reflected in planning for some children's future needs. The council has been successful in recruiting and matching foster carers to account for cultural and diversity differences. Social workers report good commissioning for the diverse population to help match looked after children's needs.

64. Value for money for looked after children is adequate. Most children are placed in local authority foster care which is cost effective, there are few expensive external placements and where they do exist, these are under continual review to ensure services are closely aligned to need. There is a high take up of direct payments by children with disabilities and their families, and this promotes autonomy, choice and self-determination. The council demonstrates effective local commissioning with the voluntary and community sector who are well represented at a strategic level, although this is not always followed through at an operational level. Arrangements for effective service purchaser/provider commissioning arrangements are in their infancy and this limits the potential to unlock resources and hampers efficiency. Cuts in some services following the joint area review has left gaps in service. There has been a refocusing of resources and priorities to tackle known weaknesses, such as social work capacity to improve the quality of services for looked after children. The level of unmet need is acknowledged by the council and although new financial resources have been identified this year to tackle this, it is too early yet to measure any impact. Looked after children and young people, carers, families, and employees state that the number of social work staff is insufficient to ensure effective service provision. Good performance on outcomes for looked after children has been sustained and consolidated. Key outcome areas for enjoy and achieve, positive contribution and economic well-being are good although not all looked after children receive a health assessment or immunisations.

Record of main findings: Nottinghamshire

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	Inadequate
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	Adequate
Partnerships	Inadequate
Equality and diversity	Adequate
Value for money	Inadequate

Services for looked after children	
Overall effectiveness	Adequate
Capacity for improvement	Good
Outcomes for looked after children and care leavers	
Being healthy	Adequate
Staying safe	Adequate
Enjoying and achieving	Good
Making a positive contribution	Good
Economic well-being	Good
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	Good
Partnerships	Adequate
Equality and diversity	Good
Value for money	Adequate