

Inspection of safeguarding and looked after children services Bromley

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Reporting inspector Brendan Parkinson

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) 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 57 children and young people and 36 parents receiving services, front line managers, senior officers including the Director of Children's Services and the Chair of the Local Safeguarding Children Board, elected members and a range of community representatives.
- analysing and evaluating reports from a variety of sources including a review of the Children and Young People's Plan, performance data, information from the inspection of local settings, such as schools and day care provision and the evaluations of a serious case review undertaken by Ofsted in accordance with 'Working Together To Safeguard Children', 2006.
- a review of 25 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. A further eight human resources files were considered in relation to compliance with safe recruitment practices.
- the outcomes of the most recent annual unannounced inspection of local authority contact, assessment and referral centres undertaken in June 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. The London Borough of Bromley has a resident population of approximately 71,200 children and young people aged 0 to 18, representing 23.5% of the total population of the area. In January 2009, 24.6% of the school population was classified as belonging to an ethnic group other than White British compared to 22.5% in England overall. 6.8% of pupils speak English as an additional language. Bengali and Somali are the most recorded commonly spoken community languages in the area. Some 3.9% of pupils are of black African background. Bromley has one of the largest groups of settled Gypsies and Travellers in England.

5. Bromley has 96 schools comprising 74 primary schools, 17 secondary schools, 4 special schools and one pupil referral unit. Bromley schools, particularly those within the secondary sector, make the area a net importer of students from neighbouring local authorities. Early years service provision is delivered predominantly through the private and voluntary sector in over 170 settings; there are 12 local authority maintained nurseries attached to primary schools.

6. The Bromley Children and Young People Trust was set up in 2006, following on from the previous Children and Young People Strategic Partnership, and after the formation of the Children and Young People Department in the same year. The Trust includes representatives of the London Borough of Bromley and Bromley Primary Care Trust services. Other representatives include South London Healthcare NHS Trust, Oxleas NHS Foundation Trust, the Metropolitan Police Service, Bromley Schools, the local Voluntary and Community sector and Early Years and Childcare Providers. The Bromley Safeguarding Children Board became independently chaired in September 2009 and brings together the main organisations working with children, young people and families in Bromley to provide safeguarding services. Social care services for children have 124 foster carers and one jointly commissioned respite care home, for disabled children within Bromley. Community-based children's services are provided by two referral and assessment teams and two safeguarding and care planning teams, supported by borough-wide teams for children in need, children with a disability, adoption, fostering and teams for looked after children and young people leaving care. There is also a youth offending service and emergency out of hours service. Other family support services are delivered through 18 children and family centres and extended services in schools serving identified areas of need.

7. At the time of the inspection there were 277 looked after children. They comprise 45 children less than five years of age, 151 children of school age (5–16), 81 post-16 young people and a total of 136 with care leaver status. Bromley uses a virtual school approach in its support of looked after children. A Specialist Education Adviser for children in care has been in place since November 2008 to fulfil the role of Virtual School Head (VSH). At the time of the inspection there were 259 children who were the subject of a child protection plan. This is a substantial increase over the previous two years. These comprise 142 females and 106 males (11 were unborn children). Some 40% of the children are aged under 5, 36% are 5 to 11 and 24% are 12 years or older. The highest category of registration was neglect at 41% followed by emotional abuse at 39%, physical abuse at 14% and sexual abuse at 6%.

8. Commissioning and planning of national health services and primary care are carried out by Bromley Primary Care Trust (PCT). The main provider of acute hospital services is South London Healthcare NHS Trust. Community-based Child and Adolescent Mental Health Services (CAMHs) are provided by Oxleas NHS Foundation Trust. In-patient CAMHs is provided South London and Maudsley NHS Foundation Trust. The Community Provider Unit of Bromley PCT provides community health services.

The inspection outcomes: Safeguarding services

Overall effectiveness

Grade 3 (Adequate)

9. The overall effectiveness of safeguarding services in Bromley is adequate. Statutory requirements are met in the delivery of services. While there have been some improvements in some services, these have not been consistent. The impact of the prevention framework through the Common Assessment Framework (CAF) has been positive, particularly within schools, although implementation is yet to take place fully within other agencies, notably in community health services. Currently no services are deteriorating, although those delivering social care services for children most in need, including those in need of protection, have capacity and organisational difficulties. All social care work is allocated and that of high priority is identified through an active risk management process in the early stages within children's social care. The immediate safeguarding and child protection needs of individual children have more recently been addressed in a more assured operational framework with work underway to improve timely responses. The recent social care improvement plan is outstanding, containing many essential and priority actions for immediate implementation. Despite the fact that the plan has not yet been finally endorsed at member level, many of its recommendations are being implemented. Third sector engagement is well embedded through some commissioned services. Children and young people contribute to evaluating the effectiveness of some provision and inform some service improvements. Whilst the service user and engagement strategy is positive, it has yet to demonstrate impact through evaluation. The Community Provider Unit of Bromley PCT has good user involvement in planning services, for example in the commissioning of the provision for short breaks for children and young people with complex care needs. The South London Hospital Trust has an active patient forum and the Trust intends to develop this to enable children and young people to become full participants.

10. Capacity is limited and caseloads too high in parts of the referral, assessment and planning teams despite the recent approval of additional social worker posts. Building a stable, skilled and experienced workforce without the current reliance on agency staff is an essential priority of the council. Staffing resources do not pose the same level of challenge for other key partner agencies. Access to, and take up of, inter-agency safeguarding training is good. Safe recruitment arrangements are in place, although CRB data is retained longer than advised as best practice. Many in the workforce have a good level of morale and a positive regard for the support they receive from managers. Learning from serious case reviews is evidenced through improved communication across partner agencies and developments in some services, such as CAMHS. Council staff and other agencies report positively on their access to joint training around safeguarding, although the wide range of children's services internal training is under-subscribed. The local integrated

children's recording system (ICS) is not effective as it is time consuming to use, and has limited capacity to produce adequate performance data.

11. The Children and Young People's Plan of the Bromley Children and Young People Trust and the business plan of the Bromley Safeguarding Children Board provide good platforms upon which improvements may be made. There are good links from the former to the Local Strategic Partnership and from the latter to the Children's Trust. The Local Strategic Partnership provides good oversight of performance in safeguarding. Trust objectives and Local Strategic Partnership targets are appropriate with quality assurance and performance management systems in place. The Children and Young People Trust partners relate well to each other although joint commissioning of services has not been sufficiently well progressed.

12. The Children and Young People's Plan clearly demonstrates the involvement of health partners such as Bromley Primary Care Trust (PCT) in strategic development planning. Clear objectives for improving health outcomes have been agreed along with milestones for achievement and the identification of the accountable lead agencies. The PCT and local council have established some effective local joint commissioning including mental health and specialist disability services. Bromley PCT has made good progress with performance monitoring of contractors in relation to safeguarding practices. Funding within children's social care services is allocated to activities most likely to be effective, although the capacity and resilience of some services are limited. Costs of services are well known, with a long-standing focus on value for money in the area.

Capacity for improvement

Grade 3 (Adequate)

13. The capacity for improvement in the delivery of services is adequate. While the council's children's services has not sustained its previously positive track record of improvement, this is against the backdrop of large increases in referrals. Furthermore, children with protection plans show an increase of 85% while family court proceedings have almost doubled in the past year. These increases indicate an improved focus on safeguarding children. The recent children's service social care improvement plan provides an ambitious, yet essential, work programme to ensure the council's safeguarding services are stabilised, quality assured and performance managed more effectively. This has an urgency that is fully recognised by senior strategic and operational managers within the council. The Bromley Safeguarding Children Board provides good leadership on safeguarding matters and members of the board are at the right level of seniority to ensure prompt decision making. There is appropriate membership and attendance at the Bromley Safeguarding Board by senior managers, including those from Bromley PCT, Oxleas Mental Health Foundation Trust and South London Hospitals Trust. The Board also actively promotes an awareness of safeguarding across Bromley and actively coordinates a multi-agency audit of safeguarding work. The audit programme within social care provides robust evaluation of the impact of practice, including the effectiveness

of joint working arrangements within the area. The outcomes of this work contribute significantly to improvements in both individual practice and the evidence base for the social care improvement plan.

14. The Council has a recently approved recruitment and retention strategy and authorised additional children's social worker posts. Whilst these are likely to ensure sufficient capacity to meet current demands, these will need to be kept under review in the light of future demands on these services. The council also correctly acknowledges that immediate further work is required to improve efficiency and effectiveness. In this context the council is actively working to ensure that resources are deployed where there is greatest demand. Plans to reduce staff turnover and vacancies and the reliance on locum staff, all of which have a negative impact on timely, consistent, high quality social work interventions, are being implemented.. The recently approved strategy for recruitment and retention of staff within parts of children's social care has the potential to improve the capacity of this service. Some out of hours services have insufficient capacity. The council's Emergency Duty Team is insufficiently resilient to provide a consistently responsive service, while CAMHS provides a limited out of hours service to the Princess Royal University Hospital accident and emergency service.

15. The council has provided funds, appropriately, towards addressing the substantial increase in demand, and it also has an active and strong preventative strategy to further support these efforts. The gradual development of the CAF has been positive in schools and with the third sector. Despite the roll out of training to health professionals in the use of CAF, its use and implementation have been slower across all health care providers in Bromley than in other partner agencies. The staffing levels of health visitors and school nurses within the Community Provider Unit of Bromley PCT are sufficient to ensure that universal, as well as targeted community health services, are available to parents and children in Bromley and good progress has been made in the implementation of the Healthy Child Programme. However, close monitoring by the South London Hospital Trust has identified some staffing pressures within the accident and emergency department. While there are named professionals in safeguarding roles, their continuous availability is a challenge at times.

Areas for improvement

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

Immediately:

- Approve and implement fully the council's draft children's services social care improvement plan as a matter of urgency.
- Improve the quality of assessments, including effective liaison with partner agencies and the timeliness in completion of both initial and core assessments. Sustained improvement will require reduced workloads in parts of social care services.

Within three months

- Fully implement the Common Assessment Framework, particularly across community health services, the youth service and youth offending service.
- Improve the capacity of services to respond to the needs of children and young people identified as a consequence of domestic violence, notably the availability of safe and permanent 'move on' accommodation where needed.
- Improve out of hours CAMHS assessment cover in the accident and emergency department of the Princess Royal University Hospital.
- Improve the resilience of the out of hours emergency social work duty service to provide a consistently timely and effective response.
- Implement best practice in safe recruitment policies and procedures, specifically in relation to the retention period of CRB checks.
- Improve the ICS system making it easier for staff to use and for managers to be provided with good performance information.

Within six months

- Re-evaluate the capacity of the social care service to respond to demands following the implementation of the social care improvement plan.
- Develop, through the Bromley Children and Young Persons Trust, a more effective approach to joint commissioning.

Outcomes for children and young people

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

17. The effectiveness of the council's services to ensure that children and young people are safe is adequate. Services respond promptly in addressing the immediate safeguarding needs of children focussing on those most clearly in need of protection. However services do not yet respond promptly to all children referred as being in need. The use of a risk management matrix to focus and support decision making is helpful.

18. The Bromley Safeguarding Children Board provides active leadership in the protection of children. Performance has been improved following the appointment of an independent chair. Almost all safeguarding provision is judged good or better in service, setting and institutional inspection reports. Bromley has lower than average rates for infant mortality, but these rates contain wide inequalities of health outcomes for infants within the borough. Teenage conception rates in Bromley remain significantly better than the English average. Although the overall percentage change rate for under 18 years conception rates is significantly worse than the national average, improvements can be demonstrated for the reduction in the conception rates for the under 16 years age group.

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

19. The majority of case files seen show that children's views routinely inform almost all assessment and planning undertaken through common assessment, child in need and child protection arrangements. Consultation with children and young people is becoming routine through the implementation of the "Get Involved" tool kit. Surveys undertaken in schools indicate that the majority of children feel safe. Most children seen by inspectors feel safe and know where to access help and advice if needed. The use of playground 'buddies' and school representation has reduced experiences of bullying enabling almost all children to view their schools as a safe place to be. Some children and young people were very positive about the help they have received: one young carer commented that her social worker had "lifted the weight off my shoulders". Consultation with children and young people as users of advocacy and independent visiting reveal consistently positive comments. The Care4me survey revealed no child felt unsafe living with their carers. Almost all children would be able to speak with one or more adults if they felt unsafe.

The quality of provision Grade 3 (Adequate)

20. The quality of provision is adequate. The threshold for access to the child protection service is appropriate and widely understood. In general, health and education staff are confident in making referrals and are aware of thresholds

for social care intervention. An audit of referrals carried out by the PCT demonstrates that a high percentage is accepted for further enquiries. Community Provider Unit staff attend most strategy meetings and any subsequent child protection conferences and attendance is monitored by line managers. However, there is recognition that further clarification is required so that boundaries between the CAF and children in need services are aligned more effectively, allowing a smoother transition between universal and specialist services. Communication and liaison between agencies are generally effective and reported in recent months as being much improved. Following the findings of a serious case review, action has recently been taken to improve information sharing. Child protection referrals are appropriately prioritised and allocated promptly. S47 enquiries and investigations are timely and are always conducted by a qualified and experienced social worker. However, strategy discussions are not always well focused and some lack specific actions and timescales. Effective arrangements are in place to identify, trace and recover children and young people missing from education, home or care through coordination by the local authority designated officer (LADO). The out of hours emergency social work service provides a generally adequate service, although it has no formal resilience in the event of sickness or vacancy. With its wide remit, including mental health and adult services, it can take some hours to provide an effective response to calls to the service.

21. The timeliness of initial assessments is low but improving, with under a third being completed within seven days. Core assessments are similarly lower in relation to the timeliness of completion at around 40% with 35 working days. The majority of assessments appropriately evidence involvement of the range of professionals involved with subject children. However, while risks and likely impact are identified, many do not demonstrate a sufficiently reflective or analytical approach. Child protection plans are of variable quality with some of those not within legal proceedings being less focused and specific about what families need to do to reduce risks. Some recent improvements have, however, been noted in case files. Children subject to child protection plans are visited regularly and are seen alone by social workers. The quality of recording in social care is variable but is generally up to date. Some recent improvements in the quality of case recording for those most in need of protection are evident, although the local ICS system continues to prove a difficult tool to use effectively. The arrangement of the system also makes it difficult to identify where and when planning, supervision and oversight by managers is undertaken.

22. Following a recent reorganisation of behaviour support services, children and young people excluded from provision receive a good response from the early years services and an adequate and improving service from schools. The CAMHS services have recently responded positively to improve the longstanding difficulties by providing a more timely service to children and young people. Waiting times for treatment now meet the 18-week target. Initial assessments for access to services beyond health promotion (tier 2 services) are prioritised

but the waiting list has increased due to recruitment difficulties and higher numbers of referrals.

23. While there has been a welcome improvement in access to services for families experiencing domestic violence, there are pressures in ensuring timely, safe alternative accommodation beyond crisis provision. Most children and young people are aware of how to make complaints and there is a positive regard for the children's rights and advocacy services. The LADOs engage well across the range of their responsibilities. Clear guidelines in relation to complaints against staff working with children are consistently followed.

24. There is evidence of managerial oversight of safeguarding work in all statutory agencies. Improvements over the recent period have been noted in social care, health and education services. The PCT has robust reporting mechanisms and governance arrangements to ensure that safeguarding is managed appropriately within all services. A programme of annual PCT visits to all GP practices, increased levels of safeguarding training, and an emphasis on providing reports for child protection conferences have supported raised awareness of safeguarding procedures. However, the number of GPs attending case conferences remains low. Oxleas Mental Health Foundation Trust and South London Hospital Trust have well embedded performance management systems in place to monitor and review safeguarding activity relating to children and young people. There are clear lines of accountability and agencies provide a good response where circumstances are complex, costly or require a substantial multi-professional response. Partner agencies contribute effectively to plans and provide venues for meetings such as for the core groups which are designed to maximise member contributions and to provide an environment sensitive to the needs of children and their parents.

Leadership and management

Grade 3 (Adequate)

25. The leadership and management of safeguarding services for children and young people are adequate. The Bromley Safeguarding Children Board has adopted the pan London safeguarding policies, procedures and strategies which comply with statutory guidance. The Board has a full business plan which provides a good focus on the range of challenges for partner agencies. The Board is well placed to continue its leadership role following the appointment of an independent chair who also actively contributes to the work of Bromley Children and Young People Trust in meeting its responsibilities. Information-sharing protocols have been recently revised, contributing to much needed improvements in inter-agency communication, particularly from social care to other partner agencies. The involvement of GPs has improved following a recommendation of a recent serious case review. Partnership working between the agencies is characterised by co-operative and collaborative approaches, including the active promotion and conducting of an inter-agency audit through the Safeguarding Children Board. The specialist support and disability service in

Bromley is a good example of effective integrated service provision. A range of services for children and young people is provided by a large number of agencies located on a site which also provides respite care. Many children related performance targets are being met within good management arrangements by health services. Quality assurance at the first level of management in social care is improving but is yet to be consistently applied.

26. Resource deficits are currently actively assessed and risk managed at team and service levels within social care. Strategic and operational managers have achieved some success in tackling significant workforce difficulties in this area of service. The staffing establishment has been recently increased to include additional posts, not yet filled, to address current need. It is evident, however, that resources are unlikely to be sufficient if the area is to meet the increased pace of demand from, and provide a quality service to, the most vulnerable children. Adequate support, guidance and direction for staff are evident in most parts of children's social care. All child protection cases are suitably allocated and most are reviewed in a timely way, although workloads are excessive in some teams. However, transfer arrangements between social care teams are not effective and lead to a loss of focus on the child's needs. Conversely a re-structuring of the health visiting service to target resources to those in most need has supported access to and provision of services.

27. There is evidence that agencies understand the range of ethnic and religious communities and that the diversity and equality strategy has led to improvements in safeguarding provision. The substantial settled Gypsy and Traveller communities are well known to local agencies, with specific support services being provided, for example, through the Gypsy Traveller Project and the "Open the Door" conference. Specific targeting of support towards Somali and Bangladeshi mothers has also contributed to reducing isolation and improving access to services. Partners in the third sector contribute well to provision for some minority ethnic and language groups. Health visitors are using a targeted approach within the universal child health programme to help tackle identified health inequalities in hard to reach groups, such as Roma and Gypsy families. Translators and interpreters are available to all services but are used with varying consistency across services, the best being in health and areas of education. Overall the children's social care workforce broadly reflects a diverse population although it does not consistently record individual identity features, such as religion. The PCT has processes in place to ensure equality and diversity issues are appropriately addressed within commissioned services. The Director of Public Health leads an equality and diversity group overseeing the PCT approach and a single equality scheme is in place across services..

28. Children and young people and their parents and carers, are routinely involved in child protection planning through core groups and reviews. In some cases, the views of children and young people and their parents and carers have influenced plans, enabling them to understand and work in partnership with services. Some service users report that they are heard, and most that they are treated with dignity and respect. Many service users report satisfaction

with, and an improvement in, the quality of current services. They describe good support from behaviour services, from counselling provision, and through their involvement with the youth offending services. However, there are strong views on the negative impact of the number of changes in social worker that children and their families have experienced, although many comment that the situation is improving. There is an increasing emphasis on the involvement of children and young people in service development which is currently satisfactory. Health surveys regularly consult users, including children, leading, for example, to improvements in access to maternity services. Respite care for children and young people with complex needs is well planned with access to a range of short term respite breaks. Services have been commissioned with input from parents and young people reflecting their views about need.

29. Partnership arrangements are adequate overall with some good examples of inter-agency operational working, particularly in schools and early years settings. Through the early support service children with complex needs receive well co-ordinated care from a range of services. The development of care pathways for children and young people with autistic spectrum disorders (by community paediatricians in partnership with CAMHS) has resulted in reduced waiting lists and an earlier diagnosis. An operation led by the Metropolitan Police safer transport team to improve the safety of children and others on public transport is a particularly good example of targeting resources to improve the safeguarding of children in the community. There is motivation and further capacity within the Bromley Children and Young Persons Trust to improve their approach to joint commissioning. Agencies in the area have a long history of focussing on value for money. Costs are well known with additional spending being clearly identified, monitored and managed. Children's services have also consistently been effective in delivering efficiency savings in accordance with local requirements.

The inspection outcomes: services for looked after children

Overall effectiveness

Grade 3 (Adequate)

30. Bromley meets its statutory requirements for the provision of looked after services and is adequate in its overall effectiveness. The area meets or exceeds key indicators against statistical neighbours notably in placement stability, the timeliness of adoptions, attention to health care needs and reduced rates of entry to the criminal justice system. There have been some improvements in performance and no services are currently deteriorating, although those delivering social care services to looked after children have organisational and capacity vulnerabilities at the early stages of children becoming looked after. The Children and Young People's Plan provides a positive platform upon which further improvements can be made within corporate parenting responsibilities. Some progress has been made in establishing and promoting the corporate parenting agenda by strategic partnerships and the council but full and effective engagement of children in care with corporate decision making processes is not yet in place.

31. Quality assurance and performance management processes are adequate and improving. Staffing resources within social care are sufficient to deliver statutory functions, although this is unlikely to be sustained if the recent growth in the looked after children population continues. While the looked after children team has a relatively experienced and stable workforce, the workforce of the safeguarding and care planning teams continues to suffer from staff turnover and locum arrangements, making stability and consistency difficult to achieve. Staff morale is generally good in most social care teams, although the proportion of social workers who consider that Bromley is responsive in making service improvements is lower than the national average within the survey.

32. There are some examples of good work in identifying and working with children on the edge of care notably with health, education and housing agency services who give priority to meeting the range of needs of looked after children. It is also a notable achievement that the rate of teenage conception among looked after children and young people is low following universal and targeted health interventions, it is even below that of the local population, which itself is better than the national average.

33. Some recent improvements in the quality and content of case recording are noted but more needs to be done: children and young people report that they are not routinely provided with a copy of their care plan, and carers are not consistently provided with essential information at the start of placement episodes. Contracting and commissioning of looked after placements are effective with appropriate financial arrangements in place. Placements are commissioned with the needs of the child being paramount.

Capacity for improvement

Grade 3 (Adequate)

34. The capacity for improvement of services to looked after children and young people is adequate. The council has experienced a significant increase in the number of children looked after and an even greater proportionate increase in those subject to public law proceedings. While statutory functions are being met, the area has limited capacity to respond well to the assessed increase in levels of need. Almost half of all placements are outside of the council boundary and high proportions of children are placed in independent provision. Rates of stability are good in comparison to statistical and national averages. Managerial oversight of the work is adequate and improving with Independent Reviewing Officers (IROs) being increasingly effective in ensuring a focus is maintained on the implementation of review recommendations.

35. Corporate parenting functions are not fully established. Statutory responsibilities are, however, appropriately fulfilled at operational and strategic levels. The alignment of the responsibilities of the chair of the Bromley Children and Young Persons Trust with those of the portfolio holder provides an effective coordination between the two responsibilities. Considerable progress has been made in the key objectives of reducing non-school attendance and exclusions while improving achievement through the establishment of the virtual school approach within the schools advisory service. However, this progress is unlikely to be sustained in the longer term as the capacity of the virtual head teacher is limited due to the breadth of her current role which extends beyond the educational attainment of looked after children. A range of services to support and encourage looked after children is effective; notable amongst these are Bromley Y counselling and the independent visiting and advocacy services. Each is, however, limited in capacity with waiting lists. Funding is available to meet the placement and other needs of individual children. However, forward service planning for the expected sustained levels of the looked after population has not been made.

36. The social care staffing establishment is sufficient but teams responsible for looked after children at different stages of being in care do not ensure consistency and continuity for children. Recruitment and retention have proved somewhat easier to achieve in this part of the service than in others. Most staff are positive about the supervision and support they receive from their immediate managers. The workforce is well supported by the availability of a range of training, although take up and attendance within social care require improvement. The ICS system's limited functionality has a negative impact on ensuring that carers are provided with a placed child's biographical information in a timely way and children with copies of their care plans.

Areas for improvement

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

Immediately:

- Allow children of an age to consent to attend assessments without their carers.
- Ensure that all looked after children have a copy of their care plan and foster carers are provided with essential information about the child or young person at the start of each placement.

Within three months:

- Reduce the number of planned changes of social worker experienced by children who become looked after.
- Increase the pace of activity in engaging more effectively with looked after children and young people around service development.
- Ensure there is sufficient capacity to provide timely and responsive specialist services to looked after children.

Within six months:

- Begin to decrease the numbers of externally sourced and located placements, through an additional emphasis on the recruitment of locally-based foster and other carers.

Outcomes for children and young people

38. Health outcomes for children and young people looked after are good. Partner agencies in Bromley work well together to promote health outcomes for looked after children in which there has been a year on year improvement. Access to the specialist CAMHS service is prioritised for looked after children, with assessment and treatment provided within eight weeks of referral, a rate considerably faster than for other children. Most children and young people are satisfied with access to counselling services. It is positive that levels of teenage pregnancy are lower in looked after girls than the general young person population in Bromley which itself is lower than the national average. Looked after children and young people value the substantial health advice and information received through their schools and the sexual relationship and contraceptive advice which is easily accessible within the area. While looked after children and young people are given reduced rates to access leisure and sport facilities within Bromley, take up is low among those young people who met inspectors. Almost all looked after children's statutory health assessments

are carried out in a timely way. However, young people were clear that, as soon as they reached the appropriate age of consent for medical treatment, they wished to exercise choice about whether they were accompanied by their carers during clinical consultations. Dental checks and immunisations are completed in a timely way. Arrangements are in place for health assessments and support for children placed outside the area, with the looked after children nurse making direct contact with these children appropriately.

39. The impact of services for looked after children and young people to stay safe are adequate. Most looked after children report that referral and assessment services had been effective in taking appropriate action to help them stay safe. Newly-arrived asylum seeking young people receive sensitive support from health and social care professionals enabling them to feel safe. Looked after children have access to, and report positively about, independent visitor and advocacy services as well as the children's rights officer. However, there is a small waiting list for advocacy services pending further recruitment to ensure a good match with the individual needs of the children. Clear joint protocols are in place to manage risk and respond to children who go missing from care. Community police officers provide a responsive service to foster carers in Bromley when the small number of young people who go missing from their care are located and returned. This is additional support to the missing children procedures. Children and young people report positively that they feel safe in their care placements, in supported housing and in independent living arrangements. Effective action has been taken to act on safeguarding recommendations made in regulatory inspections of fostering and adoption.

40. Outcomes overall for looked after children to enjoy and achieve are adequate. The leadership and management arrangements provided through the advisory service (virtual school for children in care) to support looked after children in achieving their potential are good. Arrangements put into place over the last 18 months have secured a trend of improvement in a number of areas: there have been no permanent exclusions in the past year with the rates lower than the general school age population in Bromley; a good range of enrichment opportunities is provided; and raised achievement for looked after children and care leavers, in line with statistical neighbours. Personal educational plans are in place, are reviewed regularly and most are up to date. Absence rates for looked after children are in line with similar authorities and are continuing to improve. The progress of looked after children and care leavers is monitored closely, and support is provided where the child does not make the progress expected. The majority of looked after children make at least adequate, and some make good, progress. However results for looked after children overall are not consistently improving at all key stages, with GCSE attainments being below the national averages. Looked after children in Bromley are given high priority for school places within the borough. The great majority of looked after children enjoy school. There is very good partnership work between schools and the behaviour services to ensure a focus on high quality provision for those excluded.

41. Services enabling looked after children and young people to make a positive contribution are adequate. Looked after children, whatever their needs and abilities, are effectively involved in making decisions about their own lives through reviews. A good range of support is in place for those with special educational needs and/or disabilities as well as those who are unaccompanied asylum seekers. Agencies consult occasionally with looked after children and care leavers and young people describe increased self confidence and self esteem as a result. They report involvement in the design and content of information leaflets and in some recruitment processes. The contributions by young people with disabilities have led to improvements in service provision through the Aiming High initiative. The Children in Care council remains at an early stage in its development, particularly in its links with other representative and participative forums for children and young people. Multi-agency action to prevent looked after children and care leavers offending and/or re-offending is leading to improved outcomes with significant reductions noted in recent months, with almost half the rates in the previous year and now below the national average. While there is a good range of diversionary activities in Bromley, work targeting looked after children and care leavers is at an early stage of development.

42. The impact of services to improve the economic well-being of looked after children and care leavers is good. The performance gap between looked after children and the national average for all pupils post-16 is closing. Care leavers receive good support to access provision that enables them to continue their education or training post-16 and they are prepared well for the next stage of their education, training or employment. Transition plans for young people with learning difficulties and/or disabilities receiving services are thorough, timely and regularly updated ensuring a smooth transition to adult services, further education, employment or training. All care leavers, including older care leavers, contribute routinely to their pathway plan reviews. The number of care leavers, including those with learning difficulties and/or disabilities, not in education, employment or training is low. The large majority of care leavers have access to decent, affordable and permanent accommodation. Care leavers receive good advice to manage their finances and additional support is offered. Services overall are matched to individual needs.

The quality of provision

Grade 3 (Adequate)

43. Service responsiveness to children and young people who need to be looked after is good. Children's cases are suitably allocated to qualified and experienced workers. Children receive additional support for their individual needs. Services such as Bromley Y provide a good range of therapeutic and support services which are child focussed and encourage active and positive engagement. Positive outcomes for many children and young people reflect the quality of their care and some effective direct work to meet their identified needs. Safeguarding needs and risks in relation to looked after children are assessed and addressed well. Performance management and quality assurance arrangements are evident and children's cases are reviewed in a timely way.

Managerial supervision, guidance and direction are valued by workers but are inconsistently noted within case files. Arrangements to commission good quality placements that meet the needs of children are well established. These have a positive impact on placement stability which is a key factor underpinning positive outcomes. Too many initial and core assessments, however, lacked sufficient rigour and analysis leading to less focused or timely plans for rehabilitation, although this has improved over the past year.

44. Assessment and direct work with children is adequate. All children and young people seen said they were helped to do their best and were encouraged to achieve their goals. However, most had found it hard to develop trusting relationships with social workers who changed frequently during the early stages of their care career. Children commented favourably on the help they have received from the children's rights officer and independent advocacy. These are good service features. The identity and needs of looked after children and care leavers are well known, accurately and fully recorded with the analysis used to achieve the best possible match of placement to needs. The service does not, however, aggregate and learn systematically from complaints.

45. Case planning, review and recording are adequate. Most looked after children and care leavers have up-to-date plans. However, some cases show considerable evidence of drift in the early stages of the care experience. IROs are effective in ensuring that review recommendations are fully implemented. The format of care and pathway plans produced using the ICS system cannot be provided in hard copy to children and young people in an outcome focussed, user friendly format. As a consequence, IROs and social workers discuss the content with them in detail. Action is taken to minimise inappropriate and unnecessary changes of placement with consequent very good performance in this area. Permanency planning arrangements are clear and well established for children who cannot return to their birth family or extended family. For example, placement stability is a priority for the looked after children health team and is supported through weekly meetings of looked after children health and CAMHS workers.

Leadership and management

Grade 3 (Adequate)

46. The leadership and management of services for looked after children overall are adequate. The Bromley Children and Young Persons Trust partners share clear ambitions for looked after children and care leavers and there are effective lines of accountability in this area of service. The portfolio holder is a strong advocate for looked after children as well as those in need of protection although corporate parenting is not yet integrated or strongly profiled across the council. The Children's Trust, Bromley Safeguarding Children Board and the corporate parenting group provide effective leadership and contribute to the development of services, which are regularly audited for effectiveness.

47. There is a range of good services effectively targeting children on the edge of care. Children in need currently receive a targeted social work service with increasing numbers of children receiving good support through the CAF arrangements. Family Group Conferencing, offering a solution focused approach to supporting families, is a positive development that has begun to take place. There remains capacity in the third sector for additional commissioning of specific support services for looked after children within a broader commissioning strategy. Steps taken to engage looked after children in individual planning and decision making are adequate, although their involvement in service planning overall is under-developed.

48. The social care workforce broadly reflects a diverse population and an active approach is taken to the recruitment of carers to match the diverse identities of children and young people in care. The profile of the looked after children population and their parents and carers is known and understood. Feedback from looked after children and their views in plans and reviews are beginning to be analysed differentially for equality and diversity. This is, however, at an early stage of development. IROs are viewed positively by children who have been looked after for lengthy periods, providing some much needed consistency for looked after children, by ensuring continuity as well as being effective listeners to their views, wishes and feelings. The Children in Care Council and a magazine for looked after children are new and their contribution to the development of services is yet to be established.

49. There is good commissioning of placements in both the private and voluntary sectors of the social care market. Placement quality and continuing suitability are kept under review and services are decommissioned when appropriate. Costs of services are known and monitored and the area has a good understanding of the capacity and quality of the broader market in social care placements. The council provides value for money while ensuring that the most appropriate placements are commissioned; cost is not the determining feature in commissioning specialised placements. Accountability through the 'complex case panel' provides an increasingly valued mechanism for professional support as well as a clear focus for joint commissioning with health and education services of potentially high cost individual placements.

Record of main findings: Bromley

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

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