

# Inspection of safeguarding

## Nottinghamshire

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**Inspection dates:** 19 – 23 September 2011

**Reporting inspector:** Pauline Turner HMI

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## About this inspection

1. A full inspection of safeguarding and looked after children services in Nottinghamshire took place in March 2010 and found that the overall effectiveness of safeguarding services in Nottinghamshire to be inadequate. The overall effectiveness of services for looked after children was adequate. An unannounced inspection of Nottinghamshire County Council's contact, referral and assessment arrangements in February 2011 concluded that there had been considerable progress since the last inspection of this type in October 2009 and the full inspection of safeguarding and looked after children's services in March 2010. The two priority actions had been addressed and considerable progress made on the areas identified for improvement from both of these inspections.
2. The purpose of this follow up inspection of safeguarding is to evaluate the progress and contribution made by relevant services in the local area since the previous inspections towards ensuring that children and young people are properly safeguarded. The inspection team consisted of three of Her Majesty's Inspectors (HMI). The inspection was carried out under the Children Act 2004.
3. The evidence evaluated by inspectors included:
  - discussions with children, young people and their families receiving services, front line staff and managers, senior officers including the Chief Executive of Nottinghamshire County Council, the Director of Children's Services, the Chair of the Local Safeguarding Children Board, elected members, including the Cabinet Member and the Deputy Cabinet Member for Children and Young People's Services, and a range of partnership representatives
  - analysing and evaluating reports from a variety of sources including a review of the Children, Young People and Families Plan, performance data, information from the inspection of local settings, such as schools and day care provision, and the evaluation of a serious case review undertaken by Ofsted in accordance with *'Working Together To Safeguard Children'*, 2010
  - a review of 45 case files for children and young people with a range of need. This provided a view of services provided over time and the quality of reporting, recording and decision making undertaken
  - the outcomes of the most recent annual unannounced inspection of local authority contact, referral and assessment services undertaken in February 2011
  - interviews and focus groups with front line professionals, managers and senior staff from NHS Nottinghamshire County and NHS

Bassetlaw Primary Care Trusts, the Police and other relevant partners.

## The inspection judgements and what they mean

4. 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

5. Nottinghamshire County has a resident population of approximately 179,500 children and young people aged 0 to 19, representing 23% of the total population of the county. Children and young people from minority ethnic groups account for 6.6% of the population. In January 2011, the percentage of pupils in Nottinghamshire schools speaking English as an additional language was 3.7%. The most recorded commonly spoken community language in the area is Polish.
6. The Nottinghamshire Children and Young People's Partnership was formally set up in 2007 and was reconstituted as the Nottinghamshire Children's Trust in 2009. The Trust includes representatives of Nottinghamshire County Council, Nottinghamshire and Bassetlaw Primary Care Trusts (PCTs) and health providers. Other organisations represented include Nottinghamshire Police, Probation, Nottinghamshire Fire and Rescue Authority, Voluntary Community Sector Organisations and seven District Councils. The Nottinghamshire Safeguarding Children Board (NSCB) became independently chaired in April 2009, bringing together the main organisations working with children, young people and families in the area that provide safeguarding services.
7. Nottinghamshire has 341 schools comprising 284 primary schools, 42 secondary schools and 15 special schools. The Nottinghamshire Learning Centre is an integrated network of four pupil referral units located in different parts of the county. Early years service provision is delivered through the private and voluntary sector in over 270 settings; there are 122 local authority maintained nurseries. Social care services for children have 346 approved foster care households, of which 42 are approved as

short break foster carers. There are three children's homes, three specialist homes for disabled children, and a regional Secure Accommodation Unit. Community-based children's services are provided by two referral and assessment services and children's services teams based in seven localities, together with county-wide services for children with a disability, family support, aftercare, fostering and adoption. There is an emergency out of hours service providing cover for Nottinghamshire. Other family support services are delivered through 58 children's centres and extended services in 43 families of schools. Some services are provided or coordinated through children's services such as young people's services, targeted youth support and youth justice services, teenage pregnancy and Connexions. At the time of the inspection there were 748 looked after children and 905 children who were the subject of a child protection plan.

8. Commissioning and planning of national health services (NHS) and primary care are carried out by NHS Nottinghamshire County and NHS Bassetlaw PCTs. The main providers of acute hospital services are Kings Mill and Sherwood Forest Hospital Trust, Nottingham University Hospital Trust and Doncaster and Bassetlaw Hospital Trust. Community-based child and adolescent mental health services (CAMHS) are provided by County Health Partnerships, which is a partnership of Nottinghamshire Healthcare Trust and Principia, and in Bassetlaw are provided by Bassetlaw Community Health. In-patient CAMHS is provided by Nottinghamshire Healthcare Trust for Nottinghamshire including Bassetlaw. Community health provision is offered through County Health Partnerships and Bassetlaw Community Health.

## Safeguarding services

### Overall effectiveness

### Grade 3 (Adequate)

9. The overall effectiveness of services in Nottinghamshire in ensuring children are safe is adequate.
10. Since the last full inspection in March 2010 the local authority and partners have, through the focused direction and oversight of the Safeguarding Improvement Board, made steady progress in improving outcomes for children in Nottinghamshire. The senior leadership team has welcomed this external challenge and effective partnership working has been re-established at the most senior levels across the county, with improving safeguarding services as a priority for all agencies. The NSCB has shadowed the work of the Safeguarding Improvement Board and is well placed to continue the programme of improvement. There is strong political understanding and substantial additional funding has been secured from the council to support and sustain the improvement programme.
11. As a result of service reconfiguration and increased capacity, arrangements to safeguard children are now in place and working effectively. Thresholds for referral to children's social care are clear and appropriate but not yet fully understood across the partnership, which results in high levels of referrals. However these referrals are responded to promptly and immediate steps are taken to safeguard children where risks are identified. In the cases seen by inspectors no children were found to be left unsafe. Cases are promptly allocated to social workers and there is good management oversight and decision making. Assessment quality is adequate overall with evidence of continued improvement. However assessments are not consistently robust and the degree of focus on outcomes is too variable.
12. Partnership working is improving, with children subject to child protection plans having a full range of relevant professionals engaged in reducing risk. Children spend less time subject to child protection plans and the number of re-referrals is reducing. While there are some good examples of early intervention and preventative multi-agency work, the common assessment framework (CAF) is under used as a tool to support children and their families.
13. Strengths and weaknesses are identified, analysed and understood through a robust performance management framework. Senior managers use audit and performance information to drive improvements. Where deficits are identified appropriate action plans are put in place to promote continuous improvement.

## Capacity for improvement

## Grade 2 (Good)

14. The capacity for improvement is good.
15. In a relatively short period of time the local authority, and the full range of partners, have made significant progress in understanding and improving safeguarding services within the county. Senior managers within the local authority, and at the highest level from across partner agencies, have a shared understanding of the effectiveness of safeguarding services. They have collectively prioritised and progressed areas for development across agencies. Self assessment accurately identifies the progress to date and the remaining challenges are identified and understood. Effective plans are in place to continue with service improvement reflected in the Safeguarding Improvement Plan, the Nottinghamshire Children, Young People and Families Plan and the NSCB Business Plan. The NSCB has successfully shadowed the work of the Safeguarding Improvement Board and it is well placed to continue to provide challenge across the partnership and robustly lead and monitor improvement.
16. The effective and focused work of the independently chaired Safeguarding Improvement Board has ensured that the areas for development from previous inspections have been mainly addressed. The local authority has valued the independent scrutiny that this and a recent peer review have brought and has used the challenge provided to continue to improve services. Front line service delivery has been restructured and the increased capacity has significantly improved practice in relation to assessment and intervention focused on the immediate protection of children. Appropriate action is taken by partners and children's social care to safeguard children. The quality of provision has improved but as yet remains inconsistent. However performance management and quality assurance have been a significant driver to date and are a good basis for continuing improvements.
17. Elected members provide appropriate challenge and support to officers and are committed to sustaining improvements in Nottinghamshire. They have supported significant additional financial investment in social work capacity. Effective workforce planning ensures that this additional funding is deployed to areas where improvement is most needed and will have greatest improved impact on the lives of children and families. Staff have seen the benefit of this investment with caseloads that are now more manageable. The addition of the advanced social work practitioner role to assist and support all staff, particularly newly qualified social workers, has led to improvement in the quality of practice. Although all new posts are not yet recruited to, a rolling programme of recruitment is in place.



## Areas for improvement

18. 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.

### **Within three months:**

- improve the quality of assessments and achieve a consistent standard across the service with particular attention to the analysis of risk ensuring subsequent plans are clearly identified with measurable outcomes for children and families
- reduce the number of inappropriate referrals to children's social care by improving the understanding across partner agencies of thresholds for services as defined in the Pathway to Provision document
- reduce the number of children that are subject to both safeguarding plans and looked after plans so that children have one clear plan that appropriately reflects all their needs
- improve the strategic lead and challenge functions of the Local Authority Designated Officer (LADO)
- improve managers awareness of the range of commissioned services available and their understanding of how to effectively commission safeguarding services.

### **Within six months:**

- increase the use of the CAF as a tool to provide multi-agency early intervention to children and families that need this support
- provide a comprehensive management development programme for all first line managers.

# Safeguarding outcomes for children and young people

## Children and young people are safe and feel safe

### Grade 3 (Adequate)

19. Safeguarding outcomes for children and young people are adequate.
20. Child protection enquiries are undertaken by suitably qualified and experienced social workers. In the majority of cases seen during the inspection, referrals have been responded to in a timely manner with an appropriate response to safeguarding children from immediate risk of harm. Two cases which were referred to managers have now been dealt with to the satisfaction of the inspectors and no children were found to be at immediate risk of harm. Assessments indicate that most children are seen and seen alone and their views are considered and recorded as part of the assessment, however this is not fully undertaken in every assessment.
21. Children who were spoken to during this inspection confirmed that they feel safe living in Nottinghamshire. The Young People's Board are undertaking some work through surveys to develop the local authority's understanding of children and young people's views. The council have developed the tool 'My Protection Plan' to explain to children and young people what a child protection plan is and how this impacts on them. However the local authority recognises that the use of this is not widespread and plans to relaunch it with staff.
22. Senior managers demonstrated a good understanding of the need for safe recruitment practices and the policies and procedures which underpin this. Robust systems are in place to ensure that permanent and agency staff are safely recruited. Criminal Record Bureau checks are regularly updated and staff who fail to reregister with the General Social Care Council on time are removed from post until they have met reregistration requirements.
23. Safeguarding provision is judged as adequate or better in the regulated services. This includes the local authority children's homes, fostering and adoption services. There is evidence that additional educational support is provided to vulnerable groups, for example, young carers, asylum-seeking children and children with disabilities, and that this has improved their educational outcomes. This work is supported by multi-agency responses from the health and well-being teams, speech and language workers and designated teachers. Of the 58 children's centres operating across the county, 10 have been inspected by Ofsted to date, achieving judgements of good or outstanding. Children's centres provide good support and early

intervention work that is welcomed by families and this is improving outcomes for children and their carers.

24. The Safeguarding Improvement Programme sets out a wide variety of actions that have been undertaken over the past two years to narrow the attainment gap for vulnerable children and young people. Targeted support saw the overall gap reduce by 3% in 2011 between those children eligible for free school meals and those not eligible, although the achievement is variable across different areas. A one to one tuition scheme was specifically targeted at children eligible for free school meals and looked after children with a take up of over 70%. Provisional data for 2011 indicates that 58% of all Nottinghamshire children secured more than five A\*–C grades at GCSE, including English and mathematics. This represents a 6% increase from the 2010 performance. The Achievement and Equality team maintain a specialist Education Welfare Officer post to work with Travelling communities in the county. The officer works closely with other colleagues to ensure children are able to quickly access school places and non-attendance is followed up swiftly. The Early Intervention and Prevention Strategy and the Child Poverty Strategy are relatively new projects that build on the initial work to reduce the gap for vulnerable children and young people.
25. The handling of complaints transferred from the children's services department to the corporate centre in April 2011 with the aim of improving responses at stage one of the complaints process both in terms of timeliness and quality and in turn reduce the number of stage 2 complaints. Early evidence indicates that increased numbers of responses have been provided within timescale and the quality of responses has improved with standards met consistently. Managers report that the support that they receive from the complaints team has been effective in improving their performance.
26. The LADO responds effectively to referrals and cases are prioritised to ensure that children and young people are appropriately safeguarded. However, the strategic role of the LADO is not sufficiently developed to ensure that hard-to-reach communities and all faith groups are engaged. There is limited analysis undertaken to examine trends and patterns from referrals to influence service development.

## Quality of provision

## Grade 3 (Adequate)

27. The quality of provision is adequate.
28. A range of appropriate, early preventative services are in place to divert children and families from statutory intervention. Flexible and wide-ranging Sure Start services engage some hard to reach families, and service users seen by inspectors were very positive about the services that they receive. There is some effective interagency working, evidencing good partnerships with Police, health and education partners. This

includes the significant improvement in the arrangements to identify and find children that are missing from home, school and care by all agencies. The work of the Joint Action Teams (JATs) is welcomed by professionals across agencies and provides an effective forum for multi-agency cooperation and planning for early intervention. Staff from the children's social care area duty teams attend these meetings to support and advise professionals on risk and thresholds. However there remains variable evidence of the impact of the range of early interventions and the local authority are mindful of the need to analyse further links between practice and improved outcomes.

29. As part of a wider service restructure within children's social care, a dedicated Referral and Assessment Service was established in 2011. This has two dedicated area duty teams of qualified and experienced social workers who cover the county ensuring that referrals are prioritised and receive a timely response. These teams are supported by a further seven duty teams that undertake the majority of assessment work. Specialist safeguarding nurse advisors and domestic violence resource workers spend time each week in the area duty teams advising and supporting the work of the service. CAF coordinators are also based in the same worksite and are readily accessible to support signposting recommendations made by the referral and assessment service. Each area duty team benefits from having two team managers who effectively split the tasks to ensure staff are regularly supervised, quality is improved and timeliness is sustained alongside the strategic aspects of the role including engagement with partners. Newly established duty protocols have further enhanced the capacity to respond to the continuing high demands upon the two area duty teams and have strengthened the management oversight of practice. The area duty teams provide a firm foundation to progress the plans for multi-agency safeguarding hubs that are being developed by the Police, local authority and partner agencies. Contacts are generally responded to appropriately, although inspectors saw two examples of contacts being closed prematurely without sufficient assessment of risk, including liaison with relevant involved agencies. When this was brought to the authority's attention, swift and appropriate action was taken. The emergency duty service provides an appropriate county wide response out of hours with good links to the daytime service.
30. There continues to be a high number of inappropriate referrals to children's social care that place additional pressure on the referral and assessment service, indicating that thresholds are still not fully understood across agencies. Children's social care is becoming more effective at clarifying the appropriateness of referrals reflecting the Pathway to Provision threshold guidance and signposting partners to more relevant services. The CAF, however, is not yet widely used across agencies, and too often is still used as a means of referral.

31. There is clear strategic commitment from the Police at the highest level to improving joint safeguarding practices and protocols. The reorganisation of the Police Child Abuse Investigation Unit (CAIU) has resulted in section 47 strategy discussions between the Police and the local authority occurring in a timely manner. Police involvement in joint visits is improving from a low base and the Police and the local authority recognise that there is still room for improvement. Strategy discussions do not always involve a suitably wide range of professionals and actions arising from these discussions are not always sufficiently specific.
32. There has been an improvement in the timeliness of initial and core assessments, with performance either meeting or exceeding local targets, however the quality of assessments remains variable. Although some good examples were seen, analysis often lacks sufficient depth and does not always clarify risk and protective factors. The majority of assessments had contributions from relevant partner agencies and staff report that information is now received promptly. Child protection conferences are chaired by suitably qualified and experienced staff and due to the considerable increase in demand for conferences the service has increased capacity to 7.5 full-time equivalent conference chairs. In recognition of the need for increased strategic oversight of child protection planning and conferences an extra service manager post has also been approved. Additional posts are yet to be filled on a permanent basis but recruitment is underway. There is excellent, locally reported, performance in the timeliness of initial children protection conferences and reviews. A range of key agencies regularly provide reports to child protection conferences with improved attendance by the Police and general practitioners.
33. All children subject to child protection plans are allocated promptly to suitably qualified and experienced workers. Children are seen and work is undertaken in line with their child protection plans. This work is appropriately case-managed and changes in family circumstances are risk-managed effectively by the local authority and partner agencies. However planned actions, including those within child protection plans and arising from core group meetings, are not consistently specific, timely and focused on improving outcomes.
34. A small number of child in need cases remain unallocated for short periods of time following assessment while capacity is identified within long term teams. These cases are risk assessed, prioritised and well managed, with necessary action taken to support children and families. However specific plans to manage unallocated cases are not always explicitly stated on individual case files.
35. Inspectors saw some good examples of the attention given to the diverse needs of children, including a sharper focus on the protection needs of disabled children, but practice in this area is not of a consistent quality. Assessments do not consistently address the cultural, ethnic and religious

needs of children and their families. When a child is part of a sibling group, assessments do not sufficiently focus on the individual children. Families are generally involved appropriately in assessment and planning, although this is not consistently evidenced on case files and the sharing of reports with parents prior to case conferences is not always timely. Children's views are recorded, and there is evidence of these views influencing service delivery.

36. Recording is generally up to date, with strong evidence of management oversight, including supervision discussions. While the absence of some case chronologies does not comply with the authority's case recording policy, significant events are easily identifiable on the electronic case file records.

## **Ambition and prioritisation**

## **Grade 2 (Good)**

37. Ambition and prioritisation are good.
38. The local authority and partners provide visible leadership and the vision and ambition for the future work of children's social care is known and shared by all staff groups. The work of the Service Improvement Board has robustly focused on key areas for improvement which has led to significant reengagement of partner agencies at the most senior level, and this has driven engagement and ambition at all levels. Priorities are clear and consistently promoted by the senior leadership team, elected members and the NSCB and reflected in the Children, Young People and Families Plan 2011–14 and the Children's Social Care Transformation Programme. Partners are committed to improving services in conjunction with the local authority. A number of examples of service improvement were seen including the development of the multi-agency safeguarding hub.
39. Health practitioners, in particular specialist midwives, health visitors and school nurses, have improved communication with social care. This collaborative working has improved pre-birth assessments and planning and earlier referrals of mothers and their babies at risk.
40. The Police have taken effective steps to strengthen their contribution to protecting and promoting the welfare of children. This has included a restructuring of the staffing and management arrangements in the CAIU, increase in the number of officers in the unit and access to training for officers at all levels including local Police officers on domestic violence.
41. Elected members are fully aware of the challenges facing children's social care. They share the vision and ambition of the leadership team and have taken appropriate steps against the backdrop of cuts to many other council services, to secure an additional £22.6 million to support the improvement programme within children's social care over the last two years. This includes funding for an additional 26 social workers, 11



advanced social work practitioners, five team managers, a group manager for children with disabilities and two child protection coordinators. There is ongoing commitment to sustain this funding with £17.6 million allocated as a permanent increase to the service budget. The Cabinet member for children and young people and the two deputies provide challenge to senior managers and they are good advocates for the work of children's social care. They have regular meetings with managers, the NSCB, front line staff and the safeguarding unit to test out performance data. There is evidence that this challenge has led to changes in service delivery. For example, following feedback from social workers to elected members, team managers moved to the same floor as their teams improving communication between managers and staff. Elected members meet regularly with a range of children and young people and visit services and settings to increase their knowledge and understanding and assure themselves that there is continuous service improvement.

## **Leadership and management**

## **Grade 3 (Adequate)**

42. Leadership and management are adequate.
43. The council has, through a steady recruitment programme over the last 12 months, increased the number of suitably qualified and experienced staff to meet their statutory requirements. The current work force development plan recognises the diverse nature of the county and additional resources have been allocated to the Mansfield and Ashfield areas where the demand for services is higher. Some teams still have a significant number of newly qualified social workers (NQSWs) but as time goes on this will reduce as they gain more experience supported through the NQSW training and mentoring programme and from advanced social work practitioners. Team managers are now consistently using the caseload weighting tool. As a result, caseloads of social workers are reducing but a small number still remain too high. Staff retention is improving and a number of experienced agency social workers are taking the opportunity to secure permanent posts with Nottinghamshire. However too many team manager posts remain covered by agency managers and this does not provide a sufficient level of stability for staff.
44. The local authority has recently established a corporate learning and skills department which is council wide. The relationships with children's social care are developing and current work is intended to lead to a service level agreement. Training and development needs of the work force are supported through a calendar of training opportunities. The training programme for NQSWs is well developed and recognised throughout the region and is well received by staff. However the local authority recognises that further work is required to ensure that training and development opportunities for all staff are targeted to ensure that there is a sufficient number of staff with the right skills and experience to meet service need. It is recognised that the Employment Performance

Development Review process needs to be more dynamic and influence training and development opportunities more effectively. The local authority offers some management development programmes, but these are less well developed, particularly at team manager level, and require some greater coordination if they are to have universal and sustained impact on practice.

45. The local authority recognised through the research for the workforce development plan that too many children were waiting to be adopted. As a result of this a permanence team was very recently created to target this need. It is anticipated that this team will gradually take on more cases where a plan for permanency is required. However the work of the children's and families teams currently remains very broad with most social workers carrying a full range of cases including child protection, child in need work, care proceedings and looked after children.
46. Following learning from a serious case review, the Children With Disability service has recently restructured to provide increased management support, including a duty manager, to ensure safe and consistent decision making for all referrals, with a focus on the impact of long term neglect on children with disabilities. As a result of this, all cases were reviewed and there are increased numbers of children now appropriately safeguarded by child protection plans. There is a greater emphasis on safeguarding children alongside providing services to support children and families through short breaks and direct payments. Staff across the partnership are aware of the learning from serious case reviews and have amended practice and policy accordingly. Within the health service changes brought about by learning from serious case reviews include the development of an escalation process, focused recording logs, improved sharing of health information and colocation of specialist nurses in the referral and assessment teams and children with disabilities teams. This work is effectively led by the NSCB. Action plans have been implemented and findings are integrated into the training provided by the NSCB. Recent evaluation has been undertaken to explore the impact of this learning on practice.
47. Learning from complaints is analysed for trends and changes have been made to services as a result. For example, changes have been made to the payment structure to special guardians as a result of complaints. In conjunction with the NSCB, young people and service users have been involved in the design of information materials for child protection conferences as well as on a leaflet about self harm. However this learning is not coordinated sufficiently or transferred into other service areas to avoid duplication. This is recognised by the local authority and the transfer of complaints handling to the corporate centre should provide this focus.
48. Commissioning of safeguarding and preventative services is underdeveloped and the range of services already commissioned by



children's social care is not widely known to staff, as a result some services are under used. Team managers are not aware of the range of services they can use, for example the family group conferences commissioned from Action for Children and the CAMHS provision of emotional health and well being teams rarely receive referrals from children's social care.

49. A significant number of children in care are subject to parallel review processes whereby they remain subject of a child protection plan that is reviewed separately from their looked after plan. This subjects children and their families to unnecessary statutory intervention and duplication of meetings that is not an effective use of resources.

## **Performance management and quality assurance**

### **Grade 2 (Good)**

50. Performance management and quality assurance are good.
51. The council and its partners carry out a wide range of performance and quality assurance functions, providing the necessary challenge to drive improvement across agencies and within individual services. At strategic level, the NSCB, the Children's Trust Board and elected members systematically monitor key performance areas providing strong challenge. Since the last inspection, the local authority has implemented a robust quality management framework, which outlines responsibilities for managers at all levels within children's social care, addressing audit, supervision and reporting mechanisms. Compliance with this framework is high and the framework has made a significant contribution to the overall effectiveness in safeguarding. The framework includes quality audits of case files by managers at all levels, including the service director. The local authority is taking steps to amend the audit tool to provide further rigour.
52. Performance in key performance indicators is improving. Targets in regard to the timeliness of initial and core assessments, set within the improvement notice from the Department for Education, from a significantly low base, have been met and exceeded. Management information is scrutinised regularly and this has led to overall improvements in service delivery, particularly in the timeliness of assessments and the reduced rate of re-referrals. While the target has not been met for re-referrals, the rate has reduced steadily and there is a good analysis of the underlying reasons for this. The local authority has a good understanding of performance and is able to target appropriate intervention accordingly, including training to address the quality of recording, assessments and supervision. Practitioners receive regular feedback on overall performance.

53. There is strong evidence of effective management oversight with most assessments and plans appropriately signed by managers. Supervision is regular and considers casework effectively with clear decision-making recorded. However records of reflective casework discussion or professional challenge are inconsistent. Supervision has recently been audited for frequency and quality and this has led to a plan for improvement. A formal framework for child protection coordinators to escalate practice concerns to senior managers is in place but is not used consistently.
54. Staff report that managers are visible and are easily accessible for support as required. Since the introduction of a caseload management tool, social workers report that caseloads have decreased to more manageable levels. Newly qualified social workers have protected caseloads and mentor support. The Advanced Social Work Practitioner role, established in 2010, is a creative model of support, guidance, and training to social workers. Practitioners receive regular feedback on overall performance.

## **Partnership working**

## **Grade 3 (Adequate)**

55. Partnership working is adequate.
56. There is some evidence of productive multi-agency working, supported by appropriate NSCB and Children's Trust Board arrangements. The NSCB fulfils its statutory duties. It has worked well with the Safeguarding Improvement Board and a clear joint protocol is established with the Children's Trust Board, to whom it provides effective challenge. Supported by a wide ranging work plan, the NSCB is now well positioned to advance further partnership working in the county. Joint commissioning arrangements are in place for disabled children services, substance misuse provision and CAMHS.
57. At an operational level, examples of multi-agency cooperation that improves outcomes for children and families include suitable safeguarding support to schools from the local authority, and positive joint working between social workers and health professionals. Sure Start services provide a range of initiatives that help children and families, including proactive support to pre-nursery children, in partnership with schools. Joint Access Teams (JATs) offer effective multi-agency forums to identify most appropriate early intervention. Work is underway to ensure that links are developed and maintained between the JATs and other relevant partnership groups, including Multi-agency Risk Assessment Conferences (MARAC).
58. MARAC and Multi-Agency Public Protection Arrangements are robust with active involvement of key partner agencies that ensures plans are put in place in a timely manner. For example, there are now more than 30 single points of contact within agencies that support an efficient and consistent response to higher risk domestic abuse cases. Arrangements to address

the needs of children missing from home are clear. Developing links between agencies have led to improvement in reporting and data collection relating to missing children. Local issues are well understood and have informed service delivery.

59. The Designated Teacher for Safeguarding role within schools is now well-established and schools receive sound advice and reliable support from the local authority. However both schools and social work teams report that communication between them is not always effective. Although there remains room for improvement, Police attendance at strategy meetings is increasing, as is their availability to undertake joint visits with social workers and attend child protection conferences.
60. Despite extensive training provided to a wide range of agencies and the production of a CAF handbook for professionals, the effective implementation of the CAF as a consistent tool of assessment and intervention remains a significant gap. There remains some inconsistency across agencies in the understanding and application of thresholds for services, as evidenced by a persistently high number of inappropriate referrals to the Referral and Assessment service. The Pathways to Provision threshold guidance, launched in September 2010, is welcomed by professionals and provides a firm basis for improvement, along with continued development of the JATs. The colocation of two CAF project workers with social work teams offers further opportunities for closer monitoring of engagement with the CAF process across all agencies.

## Record of main findings:

Safeguarding services	
Overall effectiveness	Adequate
Capacity for improvement	Good
Safeguarding outcomes for children and young people	
Children and young people are safe and feel safe	Adequate
Quality of provision	Adequate
Ambition and prioritisation	Good
Leadership and management	Adequate
Performance management and quality assurance	Good
Partnership working	Adequate
Equality and diversity	Adequate