

# Inspection of safeguarding and looked after children services

## Blackburn with Darwen

---

**Inspection dates:** 23 January – 3 February 2012

**Reporting inspector:** Pauline Turner HMI

**Age group:** All

**Published:** 9 March 2012

---

© Crown copyright 2012

Website: [www.ofsted.gov.uk](http://www.ofsted.gov.uk)

This document may be reproduced in whole or in part for non-commercial purposes, provided that the information quoted is reproduced without adaptation and the source and date of publication are stated.

Further copies of this report are obtainable from the local authority or at [www.ofsted.gov.uk](http://www.ofsted.gov.uk)

# Contents

<b>About this inspection</b>	<b>2</b>
<b>The inspection judgements and what they mean</b>	<b>2</b>
<b>Service information</b>	<b>3</b>
<b>Safeguarding services</b>	<b>4</b>
Overall effectiveness	4
Capacity for improvement	5
<b>Safeguarding outcomes for children and young people</b>	<b>7</b>
Children and young people are safe and feel safe	7
Quality of provision	8
The contribution of health agencies to keeping children and young people safe	8
Ambition and prioritisation	12
Leadership and management	13
Performance management and quality assurance	14
Partnership working	15
<b>Services for looked after children</b>	<b>17</b>
Overall effectiveness	17
Capacity for improvement	17
<b>How good are outcomes for looked after children and care leavers?</b>	<b>20</b>
Being healthy	20
Staying safe	21
Enjoying and achieving	22
Making a positive contribution, including user engagement	23
Economic well-being	24
Quality of provision	25
Ambition and prioritisation	26
Leadership and management	26
Performance management and quality assurance	28
<b>Record of main findings</b>	<b>29</b>

---

## 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 52 children and young people receiving services, 16 parents and carers, front staff and 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'*, 2010
  - a review of 48 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 March and October 2010
  - interviews and focus groups with front line professionals, managers and senior staff from the local authority and partner agencies.

## 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. Blackburn with Darwen is a small unitary authority which has a population of approximately 140,000, with just over 40,000 children and young people under the age of 19 years. About one quarter of the population comprises members of minority ethnic communities. The proportion of the school population with Pakistani and Indian heritage is about one third. This rises to over 40% in some year groups at primary school age.
5. Blackburn with Darwen is one of the 10% most deprived councils in England. Over 60% of local children and young people live in the most deprived 20% of areas nationally. There is a network of 13 children's centres across the borough based in areas of acute deprivation providing a service to the whole community.
6. There are 10 secondary schools, four voluntary-aided, four community schools and two academies. Three secondary schools have a sixth form and there are two further education colleges. The borough has 55 primary schools, including five infant schools and five junior schools, 28 voluntary aided schools and one foundation school. There are two pupil referral units and three special schools. Work-based learning is delivered through two major providers.
7. Children's social care services are delivered through central teams covering duty and assessment, safeguarding and child protection, children in need, children with disabilities and children in care proceedings. In addition dedicated teams focusing on placement services for younger children in care and a social work practice dedicated to meeting the needs of older children in care. There are five local authority children's residential care homes. Services to children and young people who are at risk of offending or who have offended are provided through the Blackburn with Darwen Youth Offending Team managed within the Children's Services Directorate. Children's services in the area are overseen by the Children, Young People and Families Trust. The trust is made up of representatives from all key partners at both board and sub-group level and the Local Safeguarding Children's Board.
8. A range of hospital and community based health services are provided through East Lancashire Hospitals NHS Trust and Lancashire Care Foundation NHS Trust. Primary care services are provided through 29 GP practices. There is a joint arrangement between the Council and the Primary Care Trust (PCT) through Care Trust Plus which is coterminous with the council area. NHS Blackburn with Darwen Teaching Care Trust Plus is responsible for buying and planning health and social care services for local people, children and young people.

## Safeguarding services

### Overall effectiveness

**Grade 2 (Good)**

9. The overall effectiveness of safeguarding services is good.
10. The local authority and partner agencies have clear ambition and a strong shared understanding of appropriate priorities as reflected in the Children and Young People's Plan. Clear plans are in place to drive improvements and the local authority acts swiftly to respond to changes in service demand. Partnership working is outstanding overall. This ensures that the child protection needs of children and young people are identified and responded to promptly. Some excellent partnership working arrangements for vulnerable groups are in place, such as services for those children and young people subject to sexual exploitation or who live in households where there is domestic violence. Changes within the health sector and the planned transition of the Care Trust Plus in April 2013 are being appropriately managed to ensure priorities identified in the Children and Young Peoples Plan and the Integrated Strategic Needs Assessment continue to be driven forward. The local authority designated officer (LADO) responds appropriately to allegations against professionals working with children, however monitoring and tracking systems are underdeveloped.
11. An excellent range of early intervention and support services are in place. These include a comprehensive children's centre network and the 'Think Family' approach which is beginning to be established across the authority and is achieving good outcomes for children and families. At higher levels of need there are similarly robust arrangements to ensure that children and families receive appropriate services according to assessment of need and risk. The quality of assessments undertaken by social workers is improving overall. Plans are in place but do not always give sufficient focus on how outcomes will be achieved. Some records do not fully record the activity undertaken, for example strategy discussions. Performance management information is used well to inform strategic priorities and service developments. Performance targets are in line with or exceed those in similar authorities. Where this is not the case steady improvements are being achieved. Quality assurance ensures that statutory processes are complied with. The local authority and partners recognise that an increasing focus on quality is now required. Staff feel that they are managed well and that their managers are accessible and offer frequent informal supervision as well as regular formal supervision.
12. Satisfactory processes are in place to ensure that staff that are recruited are safe to work with children. However, not all gaps in employment history are effectively recorded. Health agencies have established safe recruitment practices. Staffing levels are now sufficient following recent

additional investment supported by elected members who are strong advocates for children and young people. Staffing resource in health is sufficient to deliver priorities. Some good examples of involvement by service users in service development were seen with some powerful testimonies from families about the individual support they have received.

## Capacity for improvement

## Grade 2 (Good)

13. The capacity for improvement is good.
14. The local authority and partner agencies have an accurate understanding of their strengths and areas for development. Clear plans are in place to drive improvement. The local authority acts swiftly to respond to changes in service demand, for example a recent restructure has separated the roles of Director of Children's Services from Director of Adult Services as a result of increased national demands on both roles. This included extra investment in a new Director of Adult Services. This leaves the Director of Children's Services more able to focus on and lead children's priorities.
15. There has been significant drive for improvement by senior managers in response to findings from locally identified needs, local and national learning, serious case reviews and inspections. This improvement agenda is shared by partner agencies which, together with the local authority, have developed services that demonstrate better outcomes for children and young people. This includes the Engage Project which demonstrates an innovative, sensitive and very effective response to child sexual exploitation that co-locates a range of statutory and voluntary agencies, including a parent partnership that ensures that children and young people at risk of harm from sexual exploitation are effectively protected and supported. Some individual service users provided inspectors with powerful testimony about the effective and focused help and support that they have received from the local authority and partners in complex situations that has improved outcomes for their family. However the wider views of service users are in early stages of being gathered, collated and analysed by the local authority. This work has not yet had opportunity to influence service delivery particularly in relation to those families that receive child in need and child protection services.

## Areas for improvement

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

### Immediately:

- ensure that recruitment processes are improved to include the recording of reasons for gaps in employment history and that full

information is obtained from volunteers about their previous volunteering and employment history.

**Within three months:**

- ensure that all plans are outcome focused and steps to achieve these outcomes are clearly recorded and reviewed
- ensure that recording of strategy discussions and section 47 enquiries and investigations fully reflect the activity undertaken.

**Within six months:**

- ensure that clear governance, reporting, monitoring and tracking systems are in place to demonstrate the full impact and effectiveness of the role of the local authority designated officer (LADO) in the management of allegations against professionals working with children.



# Safeguarding outcomes for children and young people

## Children and young people are safe and feel safe

**Grade 2 (Good)**

17. The effectiveness of services to ensure that children and young people are safe and feel safe is good.
18. The child protection needs of children and young people are identified and responded to promptly by the multi-agency first response and early intervention teams (FREIST). Robust and highly effective multi-agency systems are in place to locate children missing from home and education. Children missing from home are rapidly located as a result of the good multi-agency information sharing systems developed by the local authority with its partners. Immediate action is taken to safeguard young people who are at risk, for example through forced marriage arrangements.
19. The complaints service is proactive in ensuring that children and families are aware of the complaints procedure. Leaflets specifically designed for children, including those looked after by the local authority, are regularly distributed and children spoken to were aware of the complaints system. All children who complain are offered an advocacy service. Good monitoring and reporting systems are in place relating to complaints, and analysis of complaints and compliments is undertaken and action taken to implement lessons from these. Regular training sessions occur on the lessons learned from complaints.
20. Satisfactory processes, monitoring and tracking systems are in place to ensure that staff that are recruited are safe to work with children. However, while recruiting managers are required to confirm that gaps in employment have been discussed there is no clear record of what discussion has taken place and whether a satisfactory explanation has been offered. Currently insufficient information is required from volunteers about their previous history of employment or volunteering.
21. Children's homes, adoption and fostering services are all judged good or outstanding for safeguarding in their inspection reports.
22. A variety of services provide safe and secure opportunities for children and young people to safely enjoy leisure activities and these are well targeted at specific vulnerable groups such as disabled children or young carers. Educational outcomes for vulnerable children and young people are good. Schools access additional funding through individual pupil resource allocations (IPRAs) thus enabling speedy additional resources to meet the needs of these children and young people.

23. The role of the local authority designated officer (LADO) is undertaken within the safeguarding unit. Training and awareness raising about the role has been integrated into a variety of safeguarding training that takes place and appropriate referrals are made in particular from police and social care relating to adults working with children. Work in mosques is being undertaken by police and children's social care to raise awareness about safe working with children in madrassas. However clear governance, reporting, monitoring and tracking systems are not yet in place to demonstrate the full impact and effectiveness of the role on appropriate management of allegations against professionals working with children.

## Quality of provision

## Grade 2 (Good)

24. The quality of provision which includes service responsiveness, the quality of assessments and direct work with children and families, and case planning, reviews and recording is good.
25. An excellent range of early intervention and support services are in place. These are of good quality and result in good outcomes for children and families. Partner agencies clearly understand threshold criteria for different levels of services and there are robust arrangements through the multi-agency Family Support Panel (FSP) to ensure that children and families are provided with effective early help. The common assessment framework (CAF) is well established. Lead professionals across a range of agencies use this effectively to assess need at an early stage and ensure through the FSP that appropriate services are provided. The 'Think Family' approach is beginning to be established across the authority and is achieving good outcomes for children and families. A comprehensive children's centre network covers the authority and provides opportunities for families to access services to provide their children with the best start in life. These services are accessed well by all sectors of the community.
26. At higher levels of need there are similarly robust arrangements to ensure that children and families receive appropriate services according to assessment of need and risk. FREIST provides an effective multi-agency response to contacts and referrals with a swift response to referrals where children may be at risk of harm. Recent investment in additional staff ensures that the service is now appropriately resourced with staff from the local authority, health, police and domestic violence workers who are able to access a range of information systems to ensure an effective response. Clear information about previous CAF activity is available from the CAF team and this helps inform assessment and decision making. The service works effectively and communicates well with out of hours services. Good transfer arrangements are in place between FREIST and the longer term social care teams to ensure that children and families receive continuity of support and protection. Cases are promptly allocated to suitably qualified

and experienced social workers who feel they are well supported and managed.

27. The quality of assessments, particularly core assessments, is improving and some good examples were seen which provided a thorough analysis of a child's situation with good assessment of need. The quality is, however, still variable and, while most seen were of satisfactory quality, a number did not sufficiently analyse risk and protective factors or the role of fathers. Others do not contain clear information about when the child and family have been seen or the contribution of other agencies, with insufficient exploration of the impact of race, culture or other factors. Nevertheless in cases seen families are well supported with a range of services.
28. Child support officers provide frequent practical and other support to children and families. Good support is available in respect of domestic abuse through the Wish Centre including independent domestic violence advocates (IDVAs) who ensure they contact victims at the earliest stage. Two IDVAs work predominantly with families from minority ethnic backgrounds.
29. There are a range of services which provide support to prevent children and young people coming unnecessarily into the care system. Most parents reported they were satisfied with the service they received. Some parents were very positive about the outstanding support they have received from responsive and reliable social workers based on sensitive assessment of the child's and family's needs. This sample included parents who had experience of child protection investigations.
30. Child protection or child in need plans are in place where required. Many plans are over generalised and do not include sufficient detail to make clear what changes are required and how these will be achieved or progress measured. Despite this, parents spoken to understood the plans for their children and understood the changes they needed to make.
31. Child protection conferences and reviews take place largely within timescales. Independent reviewing officers (IROs) play an important role in providing independent scrutiny and challenge to children's plans although the challenge they provide is not always clear from records of review meetings. Core groups meet regularly and are well attended on the whole by the key professionals. However, these meetings are not always sufficiently focused on the progress and impact of the child protection plan. The local authority and partners through the Blackburn with Darwen Safeguarding Children Board have evaluated the impact of core groups and already identified this as an area for development.
32. Case records are largely up to date with management decisions recorded although the rationale for these is not always sufficiently clear. While case files contain chronologies many of these do not clearly outline the key and

significant events in a child's life and often include insignificant detail. Some records of strategy discussions do not make clear who has contributed to the discussion. Similarly, some records of section 47 enquiries do not clarify what information has been obtained from which agency. While in cases seen this did not impact on decisions and outcomes for children this can mean that key information from other agencies could be missed. Some key documents, such as case decision sheets, are currently not held on the main children's electronic recording system. Without a clear link to locate this additional information important information about a child could be overlooked.

## **The contribution of health agencies to keeping children and young people safe** **Grade 2 (Good)**

33. The contribution of health agencies to keeping children and young people safe is good.
34. Health staff at all levels demonstrated a clear understanding of their safeguarding responsibilities, how to identify risks and make referrals and most are participating effectively in formal child protection procedures. Designated and named professionals provide strong leadership and are well regarded by health staff. They attend the Local Safeguarding Children Board (LSCB) meeting and are accessible, provide training and give helpful advice and guidance to staff. The engagement of general practitioners (GPs) in safeguarding arrangements is improving. Although GPs do not routinely attend child protection conferences they do provide a report, usually to the health visitor attached to the practice, who then collates and presents the information to child protection conferences. There is good awareness amongst health professionals of the impact of domestic violence within families on children and young people. Help and advice is provided to staff by a domestic violence specialist nurse.
35. The Lancashire and Blackburn with Darwen Child Death Overview Panel has recently experienced a backlog in its reviews of child deaths. The backlog is currently being appropriately addressed through additional meetings and medical staff resource and the backlog has not impacted upon learning. Health partners are aware of the lessons arising from serious case reviews and have taken positive action to address recommendations.
36. Health staff are alert to the potential risk indicators they should look for in their routine contact with children and families. Robust alert systems are in place to safeguard children and young people who attend the emergency department and urgent care centre at the Royal Blackburn Hospital. Electronic systems alert staff to the number of previous attendances and those children subject to a child protection plan or multi-agency risk assessment conference (MARAC). Children's attendances are monitored by the paediatric liaison nurse who communicates and provides

information to relevant professionals both within the hospital and in community health services. Although there is no dedicated children's emergency department, plans are in place and well advanced to provide this facility which will be in place by April 2012. In the meantime children attending the emergency department have access to nursing and medical staff that are trained in paediatrics. The urgent care centre next to the emergency department does have a designated area for children. Arrangements for children and young people who have been subject to sexual assault are appropriately established.

37. A range of good quality health services are provided for children and young people. The service offered to young people who are pregnant and vulnerable through the Early Start Health Visiting Programme is exceptional. The programme has been in place for two years and is delivering good improvements in health outcomes both for the child and the family as a whole. Health visitors and school nurses deliver the healthy child programme to good effect. NHS Blackburn with Darwen has achieved 95% coverage of the primary vaccination course by a child's first birthday, which is maintained with subsequent vaccinations right on until the child's fifth birthday. Expectant teenagers receive good support from the teenage pregnancy midwife. Sex and relationship education is provided to young people in secondary schools and comprehensive sexual health and contraceptive drop-in services are available. The young people spoken to valued these services. Teenage pregnancy rates are reducing and although they are better than the regional rate they remain slightly higher than the national average. The provision of advice and support to young people around substance misuse is good with drop-in access.
38. Access to and the services provided for children with disabilities are of a good quality. Community paediatrician and nursing teams are in place and work well with other health providers. Clinics are held across the authority's area in children's centres and health centres. If required paediatricians will also see children with complex and severe disabilities at Newfield School so that the child's schooling is not disrupted. NHS Blackburn with Darwen have recognised the need to improve the care and treatment pathways for children and young people with complex needs and have plans in place to develop a 0 to 25 years pathway. The provision of equipment for children with disabilities can appear disjointed to parents because there are two different occupational therapy services; one provided by children's services and the other by health. This can lead to delays in children and families receiving equipment. There is good dental provision within the authority to tackle the poor dental health of children in the area.
39. Appropriate CAMHS arrangements are in place. Clarity in the referral pathway between CAMHS and adult mental health services has recently improved in response to the recommendations of a serious case review. Provision now includes emergency support for young people who self

harm through the hospital's emergency department. Appropriate services have been developed to provide specific in-patient facilities for those young people aged up to 18 years without the need to place young people on adult wards. This was a gap in service provision identified at a previous inspection. Awareness by adult mental health staff of child protection and safeguarding is good.

40. Child mortality is a key priority for the local authority and partners due to the high prevalence locally. A review led by the Director of Public Health has examined underlying reasons and trends resulting in a robust action plan and investment in services to support families. Initial feedback from families is very positive.
41. A range of initiatives evidence that young people have been involved in the development and delivery of some health services. This ensures services are welcoming to young people. For example young people influenced the design of the 'Everybody' young person's resource centre which provides various health services to young people aged 14 to 24 years old.

## **Ambition and prioritisation**

## **Grade 2 (Good)**

42. Ambition and prioritisation are good.
43. Senior managers in the local authority are robustly supported by a full range of partner agencies and there is clear evidence of shared vision and ambition with many highly effective co-located services and joint partnership arrangements that demonstrate successful outcomes. Priorities are shared and owned by managers and staff and the recent restructure has brought further focus with the establishment of a children's social care service that is separate from adult services. A clear action plan was put in place after unannounced inspections of contact, referral and assessment services in March and October 2010. Progress against the action plan has been driven and monitored by senior managers and as a result safeguarding outcomes targeted by the action plan are improving.
44. Strong joint working arrangements lead to a shared understanding of priorities that are appropriately focused on improving safeguarding outcomes that are reflected in the Children and Young People's Plan. These include suitable focus on domestic violence, community cohesion and embedding the 'Think Family' approach across all agencies. The LSCB plan should also focus on early intervention, in addition to child protection, in future business priorities. A review of the LSCB is planned in the next few weeks and this is aimed to inform future LSCB plans.
45. Elected members are committed and clearly share in the vision to improve services to children and young people and have supported this through increased funding to meet rising demands and have effectively advocated

for innovative plans to drive improvement. Consistently robust scrutiny by elected members is underdeveloped, however training is planned to further assist elected members to provide increased scrutiny.

## **Leadership and management**

## **Grade 2 (Good)**

46. The leadership and management of safeguarding services across the partnership, including workforce development and use of resources, is good.
47. A clear and strategic approach has been taken to address the children's social care and wider children's workforce capacity issues to ensure appropriate staffing levels. Social workers and staff spoken to report manageable caseloads and that they are well supported by their managers with good access to regular consultation as well as regular formal supervision. A similarly strategic approach to staff development is in place to achieve the right balance of skills and qualifications and secure future staff retention. A process to evaluate the impact of training and development on practice is in its early stages but is beginning to reveal important information about what supports or blocks effective learning and development. Social care staff confirm they feel valued and that there is good investment in their training and development. Newly qualified social workers are well supported to ensure that they are not expected to work beyond their skills and capacity and there are effective arrangements for ongoing professional development. Operational staff are from a variety of ethnic backgrounds and are representative of the diversity of local communities, although this is not the case at more senior management level. This is recognised by the local authority and partners and a workforce development task group is currently planning a response.
48. The views of young people about services are integrated well into commissioning practices. The successful and effective young carers service has been sustained and future developments will ensure that their views will be taken into account. The LSCB ensures it is focused on the views of children through the work of the participation officer. Outcomes of consultation are presented to the board. The lead member is also very active in meeting children and representing their views. Some examples of service users impacting upon service delivery were seen, such as the Appletrees youth group for disabled young people which has been developed in response to consultation with parents of disabled children to provide safe positive activities and opportunities to socialise for their children.
49. IROs ensure that parents and carers are individually spoken to and welcomed prior to a conference or review. Where appropriate children and young people are enabled and supported to attend and participate. Feedback is verbally gained after the meeting and has led to some changes in how meetings are conducted. Occasionally written feedback is

requested after meetings but this is not regular and overall feedback is not collated or analysed. There is outstanding participation of parents in the 'Think Family' project. For example one parent said, 'I went in with a closed mind. I'd had services before and they just told me what to do. With 'Think Family' they said this is what we're going to offer you and you decide what you want. I started thinking for myself about things. They were giving me options and got me thinking. Before I was hitting a brick wall, with 'Think Family' I actually smashed through and broke that brick wall!'

50. Leaders and managers have taken effective action to ensure that front line child protection services are suitably resourced and have increased capacity to meet increasing demands on services. Good use is made of multi-agency approaches such as the multi-agency safeguarding hub (MASH) in the initial response teams to secure efficient and effective targeting of resources. The local authority and partners have prioritised continuing investment into effective preventive and support services, for example through development of the 'Think Family' model in recognition of the potential longer term savings which can be achieved through this approach. Although in the current economic situation this has entailed some cut backs and changes to the way services are delivered, key services have been prioritised. Sound commissioning processes ensure that services are developed according to key local priorities, based on clear performance and management information and are informed by feedback from children and families. Learning from a number of serious case reviews which have taken place over recent years has been implemented and monitored through action planning overseen by the LSCB and this has informed service development, for example in relation to improved and robust responses to domestic violence.

## **Performance management and quality assurance**

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

51. Performance management and quality assurance arrangements are good.
52. Strong partnership arrangements between agencies have developed a shared performance management and quality assurance framework across the key strategic groups and boards with clear reporting requirements. Performance management information is used well to inform strategic priorities and service developments. Performance targets are in line with or exceed similar authorities. Where this is not the case, improvements have been achieved, such as reducing the rate of repeat referrals to social care.
53. Across children's services a multi-agency case file auditing process has been established with action then taken to ensure that learning points are implemented in practice. This means that senior managers have regular oversight and quality assure cases, findings are then integrated into the



service development framework. The local authority and partners demonstrate a strong culture of self evaluation and improvement, for example by undertaking peer review or evaluations of specific themes and issues with action taken to achieve improvements. The auditing activity has so far focused predominantly on front line child protection practice to ensure compliance with statutory processes. The local authority and partners recognise that an increasing focus on quality is now required. Social work staff are familiar with the auditing process and confirm that this helpfully contributes to their development and improving practice quality. Regular supervision takes place and is of satisfactory quality although records do not demonstrate sufficient focus on recording the developmental aspects of supervision, nor do they always demonstrate effective challenge or direction. Staff feel that they are managed well and that their managers are accessible and offer frequent informal supervision as well as regular formal supervision.

## Partnership working

## Grade 1 (Outstanding)

54. Partnership working is outstanding.
55. Partnership working is outstanding with many excellent examples at both strategic and operational level. Health and children's services are well integrated through the Care Trust Plus which is led by the local authority chief executive. This ensures a good focus on joint priorities and the achievement of these. Strong partnership working arrangements are in place with voluntary, community and faith organisations who are fully engaged strategically and in the delivery of front line services. At operational level strong partnership working improves outcomes for children, for example in the recent development of the MASH approach in FREIST with co-location of police, health and domestic violence coordinator posts. The impact is swift and accurate risk assessment based on effective information sharing enabling a prompt response to children at risk of harm. Excellent work to safeguard young people at risk of sexual exploitation through the work of the multi-agency Engage initiative has resulted in reducing risks to children and successful prosecution of offenders. Similarly robust joint agency working to raise awareness, support victims and reduce domestic abuse has resulted in reductions of repeated incidents of domestic abuse. There are good support services available for victims with effective oversight and safety plans developed through well established MARAC and multi-agency public protection arrangements (MAPPA).
56. A wide range of agencies understand and fulfil their child protection responsibilities effectively by appropriate referral to social care, information sharing and contribution to child protection processes. The LSCB fulfills its statutory functions. Partner agencies contribute well and report an effective board with impact. A well established voluntary independent chair has made effective community links. The board is

committed to continuous improvement and an independent review is to take place over the next few weeks.

## Services for looked after children

### Overall effectiveness

**Grade 2 (Good)**

57. The overall effectiveness of services for looked after children, young people and care leavers is good.
58. The local authority and partner agencies have a clear ambition and a strong, shared understanding of appropriate priorities for looked after children that are reflected in the Children and Young People's Plan. Partnership working is well established and good commissioning arrangements are in place for looked after children, young people and care leavers. Significant investment has been made in services to support families on the edge of care. This is achieving good outcomes for those families. When required, decisions to place children in the care of the local authority are sound, timely and case planning is generally good. However, the current ethnic profile for looked after children is not constant with that of the local population and the reasons for this have not been sufficiently analysed.
59. Robust commissioning arrangements are in place that ensure children are provided with good support and care. Appropriate arrangements are in place to ensure that the health needs of children and young people are appropriately met. The achievements and attainment of looked after children and young people of school age are closely monitored by the local authority with improving outcomes. However the quality of recording of this information within the personal education plan, so that it can be shared with and understood by the child, is not consistent. While children and young people have the opportunity to share their views about the individual plans for their care through their review meetings and in discussions with their social worker, there is less opportunity for the wider views of looked after children, young people and care leavers to impact upon service planning and delivery. For example, young people do not routinely take part in recruitment or training of staff that work directly with them. Elected members are good advocates for looked after children and young people. A wide range of good quality services are in place to meet the needs of care leavers and they report high satisfaction with the support that they receive. Trends within the care leaver population are not sufficiently analysed to ensure that the strategic delivery of services for this group is effective.
60. Staff report that they feel well supported and recent additional capacity has helped to reduce caseloads. Robust quality assurance systems are in place that contributes to improving practice. Record keeping is generally up to date although records for looked after children and young people are held on electronic case record systems and paper files, no one system clearly identifies where all records are held.

## Capacity for improvement

## Grade 2 (Good)

61. The capacity of the council and its partners to improve services for looked after children, young people and care leavers is good.
62. Multi-agency partnership working is strong at senior managerial level and significant co-location arrangements are in place at operational levels and working well. Good commissioning arrangements are in place for looked after children. Despite financial constraints partners have worked effectively together to deliver innovative, and in many cases, co-located services that are highly valued by children, young people and care leavers. Outcomes for looked after children, young people and care leavers are generally good and improvements have been sustained. While there has been very recent priority and focus given to the participation of looked after children, young people and care leavers, this remains under developed and has yet to show impact on service planning and delivery.
63. Senior managers across partner agencies have a proven track record of sustained improvement and developed services that have targeted specific areas of need. For example, the adolescent support unit and the social work practice team effectively demonstrate improved placement stability for looked after children and young people. Children's homes, adoption and fostering services are all judged good or better and current performance is in line with similar authorities or better.
64. The local authority and partner agencies have an accurate understanding of their strengths and areas for development. They are open to challenge and see this as a key driver to improve services for looked after children, young people and care leavers. Action plans from self evaluation, inspections and a recent peer review are developed. Swift action is taken to address, when identified, any gaps and weaknesses in service provision. Staff capacity is regularly reviewed and where demands begin to exceed capacity prompt action is taken, supported by elected members.

## Areas for improvement

65. In order to improve the quality of provision and services for safeguarding children and young people in Blackburn with Darwen, the local authority and its partners should take the following action.

### Within three months:

- ensure that personal education plans collate a full record of the young person's achievement
- ensure that looked after children and young people know how to make a complaint, understand the role of an advocate and know how to access advocacy provision.

- ensure that robust arrangements are in place to analyse the impact of health services provided to care leavers to ensure that strategic delivery of services for this group is effective
- improve participation of all looked after children, young people and care leavers in service planning
- undertake robust analysis of the numbers of minority ethnic children and young people looked after by the local authority so that patterns and trends can be better understood
- ensure that all plans are outcome focused and steps to achieve these outcomes are clearly recorded and reviewed.

**Within six months:**

- ensure effective signposting is in place within the electronic case recording system to locate other records not held on the electronic system.

## How good are outcomes for looked after children and care leavers?

### Being healthy

### Grade 2 (Good)

66. Health outcomes for children and young people are good.
67. The health team for looked after children and young people consists of a designated nurse and acting doctor for looked after children. They provide strategic oversight and quality assurance functions with the majority of health assessments undertaken by universal services within the community. The designated nurse is co-located within the leaving care service. There are effective processes in place to ensure the initial and review health assessments on a child or young person that are looked after are carried out in a timely manner, and as a result performance is better than the national average. Findings from health assessments inform plans to ensure that children and young people's health needs are met. As a result all looked after children are fully immunised against communicable diseases and all have access to dental checks within six weeks of being referred. There are robust arrangements in place for children and young people who are placed out of the area to ensure their health reviews are of a high quality. The designated nurse quality assures all health assessments undertaken both within and out of area. Any that do not meet requirements are addressed directly with the respective practitioners.
68. Good access arrangements are in place to support the emotional and mental health of looked after children and young people and care leavers. The supporting carers and young people together (SCAYT) service supports workers and carers to address the mental and emotional health needs of children. The service also provides face to face support to children and young people. A single referral process is in place to the East Lancashire children's psychological services & East Lancashire child and adolescent service (ELCAS). Services are based on priority and waiting times are not significant.
69. Sexual health support to all children and young people, including those who are looked after and care leavers, is readily available. Advice and support is provided via a number of settings including drop-in sessions at various facilities within Blackburn. There is outstanding support for new families (both young expectant dads and mums) from the Early Start Health Visiting programme which looked after young people and care leavers are referred into if they are expecting a child. A teenage pregnancy midwife is also available to provide support and advice to expectant looked after young people and care leavers. However, trends in looked after young people and particularly care leavers who become pregnant are not sufficiently analysed to focus future service delivery.

70. There is good access to substance misuse advice and support for all young people including those that are looked after and care leavers. Young people can self refer to the service or can be referred by a professional. Looked after children over the age of 10 years and care leavers are provided with a booklet that is designed to record their individual significant health events and gives advice and contact details of where they can obtain local health and social care support.
71. There is good evidence of a range of appropriate health services for care leavers and clear evidence of individual impact through case studies. However the local authority does not collate information to ensure its strategic delivery of services for this group is effective.

## Staying safe

## Grade 2 (Good)

72. Safeguarding arrangements for looked after children and young people are good.
73. In the cases examined by inspectors the decisions for children and young people, including those from ethnic minority backgrounds, to become looked after by the local authority were sound. Examples were seen of timely action and robust decision making by the local authority resulting in good case planning. For example, swift action is taken to reduce delay in placing children for adoption where family circumstances are previously known and no significant change is made in family circumstances. There is an under-representation of the children and young people from ethnic minority communities within the looked after children population. Managers spoken to provided reasoned and credible speculation for the causes of this, however there has been insufficient analysis of the reasons for the figures. There is overall sufficient choice to meet local need and while a number of young people are placed outside the geographical boundaries of the local authority, inspectors saw no examples where this did not reflect the young person's particular needs.
74. The local authority ensures that all commissioned provision for looked after children is good or better regarding staying safe and no provision which is inadequate is used. Commissioned organisations are required as part of the tendering process to ensure that looked after children are safeguarded appropriately and robust monitoring systems are in place to ensure that this standard is sustained. All looked after children and young people have an up to date risk assessment and arrangements for working with looked after children and young people who have gone missing are outstanding, with individually planned prevention packages put in place by the Engage project to reduce escalation in risk taking behaviour by children and young people.
75. Placements stability is better than in similar authorities and the local authorities projected figures for 2011-12 show further improvement. Good partnership and multi-agency arrangements are in place with SCAYT and

the adolescent support unit (ASU) to enhance placement stability. Social workers are seen by foster carers as responsive when placements have difficulties. The majority of the looked after children and young people that responded to the Care4Me survey reported that they are in the correct placements. They and care leavers feel safe in their placements and are aware of the efforts the local authority takes to maintain their safety.

## Enjoying and achieving

## Grade 2 (Good)

76. The impact of services on enabling looked after children and young people to enjoy and achieve is good.
77. Looked after children and young people that responded to the Care4me survey and those spoken to during the inspection, report that they receive an enjoyable and good education. Robust monitoring arrangements are in place to track children and young people's progress and schools are held to account both within the area and those out of the area where looked after children and young people are placed. Each child's individual progress is monitored and any under achievement is identified rapidly and addressed through effective oversight by designated teachers and the virtual school arrangements.
78. The local authority have a good understanding of looked after children's achievement through careful analysis of trends over time. The attainment of looked after children is broadly in line with national looked after children figures at Key Stage 2 and above at GCSE level for both minority ethnic and white British children. There is evidence that the attainment gap between looked after young people and other young people at GCSE level is closing slowly although attainment for looked after young people remains well below those of other young people in the local authority and young people nationally. The progress of looked after children from their starting points is good overall. For example, at Key Stage 2 in 2011 progress was in line with all young people nationally in mathematics and above in English indicating outstanding progress, however this represents only one years data and does not represent a sustained pattern of improvement. The school attendance of looked after children and young people is above that of statistical neighbours and national figures for the last three years and absences have been reduced. There have been no permanent exclusions of looked after children and fixed term exclusions have reduced over the last three years, which is a good performance. Schools are rigorously held accountable by the local authority for exclusions and designated teachers are proactive in developing packages of support for looked after children and young people who are at risk of exclusion. The pupil referral units work effectively to ensure that looked after children and young people on fixed term exclusions are integrated back into mainstream schools as soon as possible.



79. Schools have a variety of means of recording looked after children and young people's achievement and there are robust and effective transition plans for looked after children when they move from one class to another or from one school to another. However, personal education plans completed by social workers fail to collate a full record of achievement and often lack evidence that the views of the child regarding their progress and achievement have been discussed with them.
80. Within the area there is good provision for looked after children and young people's leisure needs through the 'beeZ' card. Looked after children are given excellent guidance on how to plan their leisure time and how to use the 'beeZ' card to meet their individual sporting and leisure interests and needs. However, these same comprehensive arrangements are not offered to the small number of children and young people that are placed out of the area.

### **Making a positive contribution, including user engagement Grade 3 (Adequate)**

81. Opportunities for looked after children and young people to make a positive contribution are adequate.
82. Most looked after children and young people report that they know the name of their independent reviewing officer (IRO), that the IRO talks to them prior to review meetings and they say that they have a voice in their reviews. A few looked after children take up the opportunity to chair their reviews. Some children that responded to the Care4Me survey reported that they do not know how to contact their IRO between reviews.
83. The local authority had a service review of the quality of participation by looked after children and young people by leading improvement for looked after children (LILAC) with a report provided in January 2011. Five of the seven participation strands were judged to be met in this review. An action plan that reflects the recommendations, although delayed, is now in place but there is limited evidence of progress on a number of actions. For example, the re-launched looked after children's care council have not yet been engaged in addressing the issues raised by the LILAC report or in developing their role in influencing changes to services. As a result of this, looked after children, young people and care leavers are not yet consistently involved in interviewing or inducting and training new staff, including foster carers. The local authority has recently appointed a member of staff to focus specifically on improving the participation of looked after children and young people but the impact of this development is not yet evident. However, the local authority fund an annual celebration event for looked after children which the young people are fully involved in organising.
84. There has been some general learning from complaints and they are dealt with speedily. The Care4me survey indicates that not all looked after

children know how to make a complaint and over half did not know what an advocate is.

85. Partnership working regarding looked after children and young people who offend is good. There is an effective partnership between the youth offending team (YOT), a voluntary agency and the police to ensure community reparation arrangements are in place. There are good examples about how this has diverted looked after children from the youth justice system. Engagement of the YOT with services for looked after children and young people is good with robust tracking and monitoring of cases where looked after children and young people have offended. Offending outcomes for looked after children and young people have been variable over the last three years however figures have reduced sharply in 2011.

### **Economic well-being**

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

86. The impact of services in enabling looked after children and care leavers to achieve economic well-being is good.
87. The gap between the numbers of looked after children, young people and care leavers in education, employment and training and the national average for all pupils post-16 has closed in the last two years but not significantly. The local authority has retained its Connexions service and all young people, including looked after children and young people, have a personal adviser from the start of Year 9. This has made a positive contribution to the improving picture for those in education, employment and training. The Blackburn with Darwen College has good systems in place to monitor and support students on their courses. Any disengagement with courses is picked up very quickly and students are rapidly re-engaged through careful review of the young person's requirements. Opportunities for employment for looked after children and young people with the local authority have diminished recently. However this has been recognised and the scheme for local authority apprenticeships has been re-launched this year.
88. The local authority is in touch with all care leavers. This is assisted by a new drop-in centre where young people can, for example, access the internet. The social work practice team complements the leaving care team and offers specific support to care leavers with complex needs. All looked after children and young people are given good advice and support regarding where they will be housed on leaving care. There are good systems in place to evaluate their emotional as well as housing needs and there is robust evidence that they move from supported housing to independent living. All say the housing is of good quality and some speak very highly of their supported housing managers.
89. Pathway plans are satisfactory and although they give an account of the care leavers' current health, emotional well-being and education, they are

not sufficiently focused on establishing clear goals with steps to achieving these goals being identified and with a clear account of how the young person will be supported to achieve their goals.

## Quality of provision

## Grade 2 (Good)

90. The quality of provision overall in services for looked after children and young people is good.
91. There has been considerable investment in services to support families on the edge of care. This has created a range of high quality and accessible services. These services, for example the Engage project and the adolescent support unit, deliver a timely and flexible response to families, thus reducing and preventing unnecessary admissions into care and supporting young people in placement avoiding disruption. These services have an appropriate emphasis on the evidence base for evaluating service and are effectively able to demonstrate good outcomes.
92. Capacity in fostering and adoption services is generally adequate. The local authority is appropriately seeking more adoptive placements and to increase fostering capacity, especially for older looked after young people and those with more complex needs. Recent recruitment of foster carers and adopters has been good and the local authority purchase placements as needed to supplement in house provision. The local authority's fostering services ability to meet the diversity needs of the current minority ethnic looked after population is good. Based on performance information when they become looked after, children and young people are normally placed closer to home than in comparable authorities. This ensures established relationships with schools, friends, community and family contact can be sustained. The local authority ensures that looked after children and young people are placed in good quality provision of care. The local authority adoption and fostering services and children's homes are all judged good or outstanding and commissioned placements are at least good.
93. Looked after children reviews are timely, give good consideration to most areas and consistently include the views of young people. However, examples were seen by inspectors of action plans that were not clear and in a small number of cases this has led to drift in care planning. The quality of chronologies and histories on the electronic case recording system are not well recorded. Chronologies often contain unnecessary detail and give a poor sense of the child's experience and journey through their life and their time as a looked after child. The local authority is aware of this and is addressing this through staff training. Not all records and information relating to the child are held on the electronic case recording system, and while the electronic system is reliable there are no signposting arrangements to indicate that other records exist and where these may be found. Case records are generally up to date and reflect

appropriate decisions and actions needed but do not always demonstrate thoroughly how plans are being implemented.

94. Performance in providing permanency through special guardianship orders has recently improved sharply from a low base and is now good. The rate of providing permanency through adoption is in line with similar authorities, again with significant performance improvement in the last year. The fast track system linked to the adoption panel provides a prompt response to children with complex needs and examples were seen of the swift placing of hard to place children.

## **Ambition and prioritisation**

## **Grade 2 (Good)**

95. Ambition and prioritisation of services for looked after children, young people and care leavers are good.
96. Senior managers in the local authority are robustly supported by a full range of partner agencies and there is clear evidence of shared vision and ambition with many highly effective co-located services and joint partnership arrangements that have demonstrated successful outcomes for looked after children, young people and care leavers. A range of appropriate plans are in place that reflect the Children and Young People's Plan which gives a specific focus on placement stability and improved outcomes for looked after children and young people.
97. Elected members are committed to and clearly share in the vision to improve services for looked after children, young people and care leavers. The lead member for children and elected members from the corporate parenting board and overview and scrutiny commission undertake Regulation 33 visits to children's homes and are members on fostering panels. They also effectively raise awareness of the corporate parenting responsibilities to all elected members. Children, young people and care leavers are appropriately represented on the corporate parenting board and elected members have various opportunities to meet with looked after children, young people and care leavers to hear their views. Due to recent membership changes in the corporate parenting board and overview and scrutiny commission not all elected members have yet had sufficient training to enable them to provide consistently rigorous challenge to the local authority and partner agencies. However, the local authority recognise this and training is planned.

## **Leadership and management**

## **Grade 2 (Good)**

98. Leadership and management of services for looked after children, young people and care leavers are good.
99. Partnerships between the local authority, other agencies and the voluntary sector are well established and effective in promoting the welfare of looked after children, young people and care leavers. Agencies have a

clear understanding of the 'Think Family' approach which is encouraging the development of services which complement each other at a strategic level. Effective co-location of operational teams with health staff based in the leaving care service has improved the accessibility of a range of comprehensive services to young people. Partnerships with YOT for looked after children and young people who offend have reduced the entry of looked after into the Youth Justice system whilst ensuring that the rate of offending is decreasing.

100. The local authority has responded well to the challenging financial environment and managed to substantially sustain the range of services for looked after children, young people and care leavers and in some areas expanded provision. A number of services are appropriately commissioned by the local authority, including foster care placements and an independent advocacy service which have provided some substantial reductions in cost. Clear and rigorous expectations of the quality expected of commissioned services are in place and monitoring of the performance is regular, consistent and experienced by the commissioned services as fair. The local authority's internal mechanisms effectively balance the demands of quality and cost. Jointly commissioned services have been highly effective in improving outcomes in a number of areas such as children missing from care and the innovative, targeted services in the multi-dimensional treatment foster care service. Specific services such as the social work practice team, adolescent support unit and the families first service have benefitted from low and targeted caseloads which has reduced pressure for higher demand services and shows a good use of resources.
101. There are some examples of gathering of service user views such as in the adolescent support unit but this is not comprehensive across all services and there is insufficient evidence of the impact of service user views on service development. The results of complaints are monitored, aggregated and developed into action plans but there is as yet limited evidence of the impact of these action plans on service development. There is increasing usage of the re-launched advocacy service where early indications are of good satisfaction with the service. Young people feel well cared for by social work staff and by carers.
102. An effective strategic approach including joint working arrangements across partner agencies ensures appropriate staffing levels are in place. Social workers and staff spoken to report manageable caseloads and that they are well supported by their managers with good access to regular consultation as well as regular formal supervision. Staff have appropriate access to training and work has recently commenced to evaluate the impact of training on practice. Newly qualified social workers are well supported by advanced practitioners and are not expected to work beyond their skills and capacity.

## Performance management and quality assurance

### Grade 2 (Good)

103. Performance management and quality assurance arrangements are good.
104. Systems for ensuring senior management oversight are well established. The recent objective to achieve increased compliance with procedures and guidance which has been successful. Management oversight is now focusing on consistently improving the quality of practice. The local authority has a good understanding of its strengths and areas for development. A robust range of mechanisms such as the Transfer Panel tracks cases, makes appropriate and timely decisions and approves additional resources which work well to enhance quality assurance and management oversight. Despite the high number of looked after children and young people, senior managers often have a good knowledge and understanding of individual children and their needs. Management information has been used to create a well considered projection of likely demand for the next five years using the existing looked after children population and examining key factors such as entrance, duration and exit patterns. This has assisted future placement planning but has not taken account of the representation of children and young people from minority ethnic communities in the looked after children population.
105. The well established multi-agency case file audit system generates considerable activity and discussion at senior level demonstrating senior management commitment to improvement of services. Some action plans seen however, such as the LILAC action plan, are not sufficiently focused and not always clear how the local authority will know that desired goals have been achieved. Outcomes for children when measured against the performance of similar authorities are in line with or better in many instances.

## Record of main findings:

<b>Safeguarding services</b>	
Overall effectiveness	Good
Capacity for improvement	Good
<b>Safeguarding outcomes for children and young people</b>	
Children and young people are safe and feel safe	Good
Quality of provision	Good
The contribution of health agencies to keeping children and young people safe	Good
<b>Services for looked after children</b>	
Ambition and prioritisation	Good
Leadership and management	Good
Performance management and quality assurance	Good
Partnership working	Outstanding
Equality and diversity	Good
<b>Services for looked after children</b>	
Overall effectiveness	Good
Capacity for improvement	Good
<b>How good are outcomes for looked after children and care leavers?</b>	
Being healthy	Good
Staying safe	Good
Enjoying and achieving	Good
Making a positive contribution, including user engagement	Adequate
Economic well-being	Good
Quality of provision	Good
<b>Services for looked after children</b>	
Ambition and prioritisation	Good
Leadership and management	Good
Performance management and quality assurance	Good
Equality and diversity	Adequate