

Inspection of safeguarding and looked after children services

London Borough of Croydon

Inspection dates: 8 – 18 May 2012

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Age group: All

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About this inspection

1. The purpose of the inspection is to evaluate the contribution made by relevant services in the local area towards ensuring that children and young people are properly safeguarded and to determine the quality of service provision for looked after children and care leavers. The inspection team consisted of three of Her Majesty's Inspectors (HMI), one Additional Inspector and one inspector from the Care Quality Commission. The inspection was carried out under the Children Act 2004.
2. The evidence evaluated by inspectors included:
 - discussions with 52 children and young people receiving services, 32 parents and carers, front line staff and managers, senior officers including the Executive Director, Children, Families and Learning, and the Chair of Croydon 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 serious case reviews undertaken by Ofsted in accordance with '*Working Together to Safeguard Children*', 2006 and 2010
 - a review of 51 case files for children and young people with a range of need. This provided a view of services delivered 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 2011
 - interviews and focus groups with front line professionals, managers and senior staff from NHS South West London Croydon Borough Team, Croydon Health Services NHS Trust and South London and Maudsley NHS Foundation Trust.

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. Croydon is an outer London borough bordering Surrey to the south. It covers an area of 34 square miles. Croydon is the second most populous borough in London, with a population of 345,600, including approximately 89,200 children aged 0-19. The borough's total population is projected to increase by 22% by 2033, with an 18% increase of 0-19 year olds.
5. Croydon is a socio-economically diverse borough. The borough is ranked 19th out of 32 London boroughs in terms of overall deprivation and 107th out of 326 local authorities in England. The north of Croydon is generally more deprived than the south; Fieldway and New Addington wards in the east also have high levels of deprivation. The wards with the greatest education deprivation and higher proportions of children in poverty are located within these areas. The proportion of children and young people in state funded schools who are entitled to free school meals is 19.9%.
6. In the 2001 census, 29.8% of the population described themselves as from minority ethnic communities. However, according to Greater London Authority projections for 2012, this is estimated to have increased to 43.5%. The largest minority ethnic groups are from the Black Caribbean, Indian and Black African communities. The proportion of pupils with English as an additional language is 29.9%.
7. The Croydon Children and Families Partnership Board is made up of senior managers of organisations working with children and families in the borough. It sets the strategic direction for the services for children in Croydon, monitors performance and promotes partnership working at all levels. The partnership board membership includes representatives of the council, schools, health, police and probation, as well as the voluntary and community sectors. The partnership works closely with Croydon's Youth Council, who attend many partnership meetings. Croydon Safeguarding Children Board (CSCB) is chaired by an independent chair and brings together the main organisations working with children, young people and families in Croydon to deliver safeguarding services.
8. Early years child care and nursery education are provided by: 527 childminders; 98 private day nurseries; one family centre; 26 children's centres; 63 before school care and 59 after school care providers; 58 pre-school play groups; 13 independent nursery units (at independent schools); 45 maintained schools with nursery classes, six maintained nurseries and six special schools.

9. Primary and secondary education is provided by: 76 local authority maintained primary schools (including infants and juniors); nine primary academies; 15 local authority maintained secondary schools; six secondary academies; one City Technology College, six special schools and five pupil referral units. A virtual school is provided for children and young people who are looked after. Post-16 education is provided by: three further education colleges; 17 secondary schools with sixth forms and ten independent providers with post-16 provision.
10. Commissioning and planning of NHS services and primary care are carried out by NHS South West London, which was created in April 2011 and delivers the functions of the five primary care trusts in south west London. Croydon Health Services NHS Trust is an integrated care organisation providing acute and community health services. It also provides a number of health services to children and families including maternity services and health visiting. A hospital education service is provided to children and young people in hospital. South London and Maudsley NHS Foundation Trust is the main provider of specialist mental health services to children and young people. In addition, a range of voluntary sector providers supports children and young people's emotional needs in the borough.
11. Community-based social care services are provided through three intake teams for referral and assessment and eight community teams dealing with child protection and family support. An emergency duty team provides out of hours cover. In addition, the family resilience service supports families with complex needs. At the time of the inspection 285 children were the subject of a child protection plan.
12. The quality assurance service is made up of the independent reviewing officers and the chairs of child protection conferences. The Local Authority Designated Officer (LADO) also sits within this service.
13. At the time of the inspection there were 732 looked after children, of whom 313 were unaccompanied asylum seeking children and young people. They comprised 92 children under five years of age, 420 children and young people of school age (5-16) and 220 looked after young people aged 16-18 who have left school. The council and its partners support 868 care leavers. Children's social care services have 164 fostering households, two residential children's homes and one residential short break children's home for children and young people with learning difficulties and/or disabilities. Residential services and additional foster placements are commissioned from registered and approved independent providers. There are eight looked after children teams, four of which are for unaccompanied asylum seeking children. There are two after-care 18 plus teams, one for indigenous young people and one for unaccompanied asylum seeking young people, and one social care team for children with disabilities.

14. The police service is coterminous with the borough. Services to children and young people who are at risk of offending are provided through a partnership between Croydon youth offending service and the integrated youth support service; services to those who have offended are provided through the youth offending service. There are no young offender institutions in the area.
15. In excess of 60 voluntary and community sector organisations across the borough work with children and young people.

Safeguarding services

Overall effectiveness

Grade 3 (Adequate)

16. Overall effectiveness is adequate. The local authority and its partners are contributing to improving outcomes for children and young people. The Executive Director, Children, Families and Learning and the Director of the Social Care and Family Support Service have been in post for just over a year, and have created a senior management team that has brought much needed strength and stability to children's social care services. They have been equally effective in the partnership in developing strong relationships based on openness and trust, including with the voluntary and community sector, to underpin the development of high quality services. The partnership has a clear understanding of the improvements that are required, and plans are carefully monitored to ensure that progress is secured. Some good improvements to service provision have already been achieved by the partnership, such as work to reduce teenage pregnancy, and the development of early intervention services. Through good partnership work, effective plans are in place, for example to improve outcomes with regard to children going missing and families affected by domestic violence.
17. Quality and performance management processes have been significantly strengthened across the partnership and are helping to drive improvement. This has had a positive impact on children's social care services in particular, although there is more progress to be made, for example with the quality of assessments and the management of contacts and referrals to the service. Staffing resources in children's social care services have been much improved through the appointment of permanent staff, although a high proportion of social workers are relatively newly qualified. There are a number of health visitor posts unfilled, although temporary arrangements are in place to cover current vacancies and active recruitment to permanent posts is underway. Processes for safer recruitment of staff are effective and a range of multi-agency training is supporting staff development. The Social Work Academy provides a wide range of training for social care staff and is highly valued. Resources are being used with increasing effect, with

protection for front line services being a priority, although cuts to child and adolescent mental health services (CAMHS) have had a negative impact on waiting times and joint working.

Capacity for improvement

Grade 2 (Good)

18. The capacity for improvement is good. The partnership is highly ambitious for children and young people, and has developed clear priorities based on analysis of need and listening to staff and young people. The authority and its partners have achieved a good track record of improvement across a number of outcome areas for children and young people. For example anti-bullying work is effective, the family resilience service is successful in reducing anti-social behaviour and offending, and young carers, of which there are many, receive good support. Early intervention services are developing well, and the co-location of social care and family support services has improved the knowledge and understanding of staff about the services that are available. The use of the common assessment framework (CAF) has been slow to develop, but confidence is growing due to recent improvements in the support given; its use is increasing and proving very effective in preventative work with families. The children's social care improvement plan is tightly monitored by senior managers and has been very effective in driving service improvement. Staff are clear about what is expected of them.
19. Workforce planning is effective in developing a more permanent and skilled workforce, for example through the very high level of GPs who have attended safeguarding training, and the appointment of consultant practitioners in children's social care services, who are adding social work expertise to teams. The views of children, young people and their carers are having a positive impact on service improvement. For example, young people have good opportunities to influence services through the Youth Council, and following concerns raised by young people, young people now contribute to police internal training on stop and search.

Areas for improvement

20. In order to improve the quality of provision and services for safeguarding children and young people in the London Borough of Croydon, the local authority and its partners should take the following action.

Immediately:

- ensure effective management oversight of contacts to children's social care services so that contacts are not signed off until the associated tasks are completed.

Within three months:

- analyse the content of contacts to ensure that thresholds are understood and that agencies are clear about levels of risk that require referral or notification
- improve the analysis of risk and protective factors in assessments, and ensure that assessments are completed in a timely way
- ensure that core group minutes are of good quality and are distributed in a timely way
- improve record keeping and chronologies so that they are up to date and of good quality
- ensure that parents and carers fully understand the purpose of social work intervention and that their views are captured and taken into account in service development
- ensure that supervision in the intake and community teams is timely and is of consistently good quality
- ensure that the role of the LADO is widely promoted, and that agencies understand their responsibilities to report allegations to the LADO
- ensure that children and young people have timely access to child and adolescent mental health services
- Croydon Health Services NHS Trust and South London and Maudsley NHS Foundation Trust to review their child protection training programme to ensure all staff receive training to the appropriate level for their role
- NHS South West London Croydon Borough Team to recruit a named GP and Croydon Health Services NHS Trust to recruit a named midwife
- Croydon Health Services NHS Trust to ensure that child protection supervision is fully established in the acute setting.

Safeguarding outcomes for children and young people

Children and young people are safe and feel safe

Grade 3 (Adequate)

21. Safeguarding outcomes for children and young people are adequate. The level of understanding and awareness of safeguarding is satisfactory across partner agencies. Child protection risks and the needs of children and young people who need to be safeguarded are mostly identified and responded to promptly and effectively. During the course of the inspection no children were found to be at immediate risk of harm. Files examined by inspectors show evidence of some effective coordinated work between partner agencies where safeguarding concerns about a child are identified. Child protection investigations are generally thorough, although the number of face to face child protection strategy meetings held between children's social care, the police and health is low.
22. The views and feelings of children and young people are taken into account and inform assessments and planning undertaken at all stages. Some files indicate that children are seen alone, although this is not always consistently recorded. Similarly, issues relating to ethnicity and diversity are not recorded in some cases, although discussion with social workers and managers indicates these are usually taken into account within assessments and planning. In general, children and young people subject to child protection plans understand what is happening to them, at a level appropriate to their age and understanding.
23. The out of hours service meets the safeguarding and child protection needs of children and young people in a responsive and efficient way, ensuring good continuity with day services. Effective working relationships are in place with the police child abuse investigation team.
24. Multi-agency procedures for the referral of allegations against people working with children are established and in most instances followed. Referrals and investigations are conducted thoroughly and strategy discussions and plans are consistently recorded. The LADO has established effective operational links with the police and other partners to ensure the efficient operation of the process, as well as providing information and advice to a wide range of partners. However, the level of recorded referrals over the past two years is relatively low for such a large authority and it is recognised that further promotional work is required. The current recording of referrals, strategy discussions and correspondence does not enable easy data retrieval. Action is being taken to improve the system.

25. Processes to ensure safer recruitment are good, and include evidence of phone verification of references. Criminal Records Bureau (CRB) checks of children's services staff are updated every three years. Robust procedures are in place if positive disclosures are received. CRB checks are carried out on all interpreters.
26. The borough has good and robust systems in place to reduce bullying. Thirty schools in Croydon have taken part in the social norms survey and this is having a positive impact as children and young people are involved in formulating action plans, and parents become aware of particular issues relevant to their school. Schools receive effective training for child protection and safer recruitment. Additional training is also available for schools about domestic violence and sexual exploitation and is tailored to their needs.
27. Safeguarding provision is judged to be good or outstanding in almost all Ofsted inspections of local authority children's homes, fostering and adoption services and children's centres. Good processes are in place to safeguard children who are educated at home.
28. Services for children and young people who are privately fostered are underdeveloped. The number of notifications to children's social care services for an authority of Croydon's size and demography is very low. Plans to raise the profile of this area of work are underway, including the development of a dedicated team, increased awareness raising activities and multi-agency training.
29. Good arrangements are in place to secure the safety of children and young people who are missing from home or placement. The notification and referral protocol is effective, and a robust multi-agency panel and support system have been put in place relatively recently. These are not yet fully embedded, but there is strong evidence of successful partnership between the police, children's social care services, education and health to respond quickly to notifications. Positive outcomes are being achieved as agencies become increasingly responsive in attending strategy meetings, committing resources and delivering protective plans. Partner agencies have a good understanding of the linked threats of sexual exploitation and child trafficking and plans are in place to provide further awareness raising and training in this area.
30. Croydon maintains a strong focus on counteracting the safeguarding threats to children and young people from gangs and gang culture. The integrated youth support team works with the police, the youth offending service and a range of other partners to deter young people from antisocial behaviour.
31. High priority is given to ensure that young carers receive a very good service, and young carers who met with inspectors reported that they feel well supported. About 450 young carers are known to the borough.

Support is available to promote their education and health, and through leisure activities and one to one meetings. Links to adults' services have now been strengthened, as carers' assessments for adults now consider whether there are also young carers in the family. Young carers have been involved in recruiting workers for their project and designing the website.

32. Children and young people generally report feeling safe in Croydon, although they describe some areas and estates as less safe. The Youth Council has prioritised sexual exploitation and transport as the most important areas to address, as many young people have raised these concerns. Subsequently these priorities have been adopted within the priorities of the Children and Families Partnership Board.

Quality of provision

Grade 3 (Adequate)

33. The quality of provision is adequate. Croydon has a number of well established services offering early intervention and family support. The borough has strengthened its arrangements for early help and has clarified thresholds through a four stage intervention framework, published in 2011. The Croydon Information and Support Service (CRISS) provides effective information and support across stages 1-3, which covers all children and young people apart from those in acute need. The multi-agency CRISS panel is providing an effective conduit for more complex concerns related to early help for children and families in the borough, and signposting to other services if appropriate. CRISS is co-located with the children's social care intake team. Plans are in place to create a multi-agency safeguarding hub later this year, which will incorporate CRISS and the intake team.
34. After a slow start, Croydon has made progress in the development of the CAF, assisted by extensive multi-agency training. The number of CAFs completed in recent months has grown significantly. All designated school staff are CAF trained, and are confident to use the CAF and to take on the role of lead professional. Similarly children's centre coordinators feel confident in instigating CAFs. The CRISS team provides effective advice about whether a CAF is appropriate and about the support services available. Face to face early intervention surgeries also offer advice to schools and children's centres about support and planning. The quality of CAFs overall is adequate, with variation in the depth of completion and analysis, but partners anticipate that better and more consistent assessments will develop as staff become more familiar with their use. Good step up and step down processes are in place for CAFs and social care cases.
35. The threshold for children's social care intervention is generally understood but not always followed by partner agencies. The intake service receives about 350 contacts a week, of which only about 20% are

accepted as referrals. The reasons for the high number of inappropriate contacts were not fully understood by the local authority, but recent analysis suggests that this is largely due to the automatic dispatch of unprioritised police notifications on domestic violence and other issues. Joint work between the police and the intake service is underway to develop an effective screening process. Similarly, intake team managers report that closer liaison with CRISS is beginning to improve signposting to more appropriate universal and targeted provision. When intake team assessments are being closed, team around the child meetings are convened to identify and appropriately link lead professionals to CAF involvement where necessary. The children's social care service anticipates that this will reduce the level of inappropriate re-referrals to the intake team.

36. The majority of assessments seen by inspectors are adequate in quality. The analysis of risk and protective factors impacting on children's safety and welfare is variable, though mostly adequate. Some core assessments are significantly delayed. In some instances this is due to the pressure of other incoming casework and in others, insufficient management oversight. In a few cases the delays are due to responses required from partner agencies. Managers have already identified that the quality and timeliness of pre-birth assessments require improvement, with too many changes in social workers before their completion. Most assessments seen record the engagement and views of children, young people and their parent or carers. In most cases examined it is recorded whether children are seen alone, and the local authority is now specifically monitoring this. Through closer management focus and support there has been recent improvement in the quality of the assessments and court reports.
37. There are no unallocated cases in the children's social care service. Among the randomly selected safeguarding cases that were tracked during the inspection, three child protection cases and one child in need case were found to be inadequate with regard to multi-agency working. Although none of the children concerned was at immediate risk of harm, the cases were characterised by weak assessments, poor analysis and plans, combined with drift in achieving planned outcomes and poor multi-agency communication and engagement. The partnership's own audits of these cases confirmed these findings and learning has been identified. Among the cases examined as part of this inspection in the intake service and the children with disabilities team, the child protection needs of children and young people were identified and responded to satisfactorily. However, a sample of closed contacts within the intake service showed that some contacts had been closed before work had been fully completed. The local authority took appropriate action on these contacts during the inspection.
38. The child protection conference system for children in need of protection is well established and enables the timely multi-agency consideration of risks and the formulation of generally clear protection planning.

Independent chairs are active in quality assuring Section 47 enquiries as well as pre-conference reports and proposed protection plans. Independent chairs ensure that children's views are heard and understood prior to conferences where children are unable to attend, and that the outcomes of conferences are explained clearly to them.

39. Independent chairs report improving but still significant variation in the quality of child protection enquiries and the depth and sufficiency of pre-conference assessment reports. Chairs acknowledge that there is an over dependence on them to formulate effective outline child protection plans, which reflects variations in the experience of social workers and the involvement and direction of their supervisors. When chairs have concerns they raise these directly with social workers and their managers and follow a management escalation process where there are repeat concerns. Chairs report concerns about the contribution or practice of workers from other agencies in the same way. Attendance levels and representation at child protection conferences are generally good, with the exception of GPs. The production of conference and review minutes is efficient though child protection plans are not all loaded onto the electronic social care record in a timely way. Chairs report that core group meetings are generally taking place to timescale although the content, quality and timely distribution of minutes are still not consistent. A new approach to more inclusive multi-agency conferencing for children and families is being consulted on with forthcoming training and a launch in September 2012.
40. Record-keeping in the intake service and across all children's social care services is too variable and adequate overall. It is often out of date, incomplete and lacks evidence of managerial decisions or the reasons for decisions, although there is some very recent improvement. Chronologies have not all been kept up to date although again, there has been recent improvement. The electronic recording system is a difficult recording tool for staff and managers to use and makes case audit equally problematic. Senior managers have acknowledged these difficulties and a replacement system is being commissioned later this year.
41. Children and young people involved in child protection and children in need processes mostly report that they are consulted and treated with respect by social workers and child protection conference chairs. Consistent efforts are made to seek the views of children and young people who are subject to child protection plans and ensure they understand the content of assessments and planning. Children with child protection plans are now visited regularly, and most are seen by social workers at least every two weeks.

The contribution of health agencies to keeping children and young people safe

Grade 3 (Adequate)

42. The contribution of health agencies to keeping children and young people safe is adequate. Croydon Health Services NHS Trust and South London and Maudsley NHS Foundation Trust are committed to partnership working to ensure children and young people in Croydon are safe. The trusts are appropriately represented at the CSCB and the relevant sub-groups and on the Children and Families Partnership Board. The designated doctor and nurse are part of the Child Death Overview Panel. Named staff attend multi-agency risk assessment conferences (MARAC) and meetings regarding multi-agency public protection arrangements.
43. Staff recruitment in provider services includes an enhanced CRB check being completed before staff start work, which is updated every three years.
44. A designated doctor and a designated nurse are in post. Both have clear roles and sufficient time to carry out their responsibilities, although they do not have capacity to develop the service. They receive appropriate supervision and support and are trained to the required level in child protection.
45. Named professionals are in post across acute and community services with the exception of a named midwife, although arrangements are in place for this role to be covered by a lead and a link midwife for safeguarding. Named staff provide a variety of training to staff across the community and acute health services.
46. NHS South West London Croydon Borough Team has been unsuccessful in recruiting a named GP. A safeguarding lead for independent consultants has been covering this role for the last 16 months. The number of GPs trained to the appropriate level in child protection has increased during this time and is just above 98%. Supervision arrangements for GPs are currently being piloted, and it is not yet possible to identify impact.
47. The trusts have suitable policies and procedures for identifying and communicating concerns about child protection and appropriate systems are in place to monitor practice to provide board assurance. Good systems are in place across community and acute health services to identify children at risk. Health professionals are appropriately engaged in child protection processes, with consistently high attendance by health visitors and school nurses. However, the attendance of GPs at case conferences is very rare and reports are not always provided. GPs interviewed as part of this inspection said they are generally unable to attend case conferences due to the timing and short notice, although they do send a report. NHS South West London Croydon Borough Team is considering how to improve

GP attendance or routine provision of reports to assist with decision making at case conferences.

48. Good systems are in place in adult mental health services to identify adults who are parents and have parental responsibility, so that potential risks to children can be considered. South London and Maudsley NHS Foundation Trust is developing a system to identify young carers, to ensure that their needs are assessed and that appropriate intervention is provided. Good arrangements are in place to safeguard children who visit their parents who are in-patients on an adult mental health ward.
49. Health staff from provider services have completed child protection training to the appropriate level for their role, with annual updates and opportunities to attend road shows on lessons learnt from serious case reviews. Outcomes include improved recording and better understanding of the importance of partnership working. Croydon Health Services NHS Trust reports that compliance at Level 1 is 100%, although some relevant staff are not yet trained to Level 2. South London and Maudsley NHS Foundation Trust is compliant at Levels 1 and 3, with plans in place to address the need for Level 2 training. The trust is aware of the need to increase the number of staff trained to Level 3 following changes in the guidance, and action is being taken to ensure that a plan is in place.
50. Good progress is being made to reduce the number of teenage pregnancies in Croydon. Figures currently show a reduction of 29% on the 1998 baseline. Pregnant teenagers have access to specialist services. Midwives from the Crocus team at Croydon University Hospital see young women during their pregnancy and after the birth, offer advice on contraception and immunisations and hand over to health visitors. All pregnant young women under 16 years of age are referred to children's social care services to ensure that their needs are assessed. The Family Nurse Partnership service, which was established in 2011, is currently working with 106 young mothers; early indications are that the health of mothers and babies has improved compared with the age-group average.
51. At the time of the inspection there were 8.6 whole time equivalent vacancies for health visitors, covered by agency staff. Croydon Health Services NHS Trust is actively seeking to recruit to these posts. Agency health visitors are completing new birth visits and covering some clinics, with good allocation processes in place to ensure the safety of the most vulnerable children and families in the borough. There are currently five student health visitors with plans to continue with the same number next year. Recruitment is also taking place for three school nurse posts. Community staff nurses have been given extra training to enable them to work in schools. The healthy child programme has continued, despite the vacancies.

52. A relatively new child protection supervision policy and process is in place across Croydon Health Services NHS Trust. Staff have good access to supervision, although this is not fully embedded in the acute setting. A review of child protection supervision was carried out in October 2011. This found some gaps, which are being targeted for improvement this year.
53. Acute hospital services are provided by Croydon Health Services NHS Trust at Croydon University Hospital. A separate paediatric accident and emergency department operates suitable systems to identify children on a child protection plan, and repeat attendances are also identified. Good systems are in place to inform a child's GP, health visitor or school nurse and social worker that a child has presented at the accident and emergency department. A new urgent care centre on the hospital site, managed by a private organisation, has the same policies, procedures and access to details of children on a child protection plan. A minor injuries unit at Purley War Memorial Hospital, which is operated by Croydon Health Services NHS Trust, also works to the same policies and procedures.
54. Services to meet the needs of children and young people who self harm are good. Appropriate joint protocols are in place for young people up to the age of 16 attending Croydon University Hospital NHS Trust to be admitted and assessed by CAMHS staff the following day. A suitable out of hours system is in place if it is not appropriate to admit a young person. Young people aged between 16 and 18 are seen by a psychiatrist. The process includes a seven day follow up to ensure that the young person remains safe.
55. Capacity within the CAMH service has been significantly reduced, and this is having a negative impact on children and young people, although those at highest risk are prioritised. Feedback from social workers and other health professionals indicates that thresholds for CAMHS are high and that some children and young people may have to wait for over a year for a service. The loss of a part-time CAMHS worker in the social care intake team has reduced the quality of joint support that can be offered to parents and carers, which was highly valued by social workers. Good systems are in place for transition from CAMHS into adult mental health services for young people who meet the criteria for ongoing support.
56. Good arrangements are in place to ensure child protection medical examinations are carried out promptly by appropriately trained staff. Medical examinations following allegations of sexual abuse are carried out at the local Haven facility within the first 72 hours following the alleged incident, and by suitably trained consultant paediatricians at the specialist unit at Croydon University Hospital after this timescale.
57. Health agencies provide effective support to children with disabilities, for example through training for parents and carers and through the Portage

service, a home-visiting education service for pre-school children with additional needs, which is highly valued by parents. Parents who spoke to inspectors were positive about their experiences in the special care baby unit at Croydon University Hospital. Some parents of older children and young people felt that they were given insufficient information at diagnosis, while others experienced a lack of information about services and support available to them during the early months when they were feeling overwhelmed. Parents of children who had been more recently diagnosed had had a more positive experience. Arrangements for transferring from children's to adults' health services are effective, with the process starting around the young person's 16th birthday. Health assessments are completed six months before transition and hospital passports and communication booklets are made available to adults' services so that they are clear about young people's medical needs and how to meet them, and how to communicate with individuals.

Ambition and prioritisation

Grade 2 (Good)

58. Ambition and prioritisation are good. Elected members are effective in raising the profile of children and young people across the council. The Lead Member, who has held this role since 2008, chairs the Children and Families Partnership Board, which includes regular meetings with representatives of the Youth Council. He is well informed about the quality of services at a strategic level and at the front line and is committed to improving outcomes for children and young people. Elected members have protected front line services from the most severe budget cuts, and have supported the co-location of early intervention staff and children's social care services, which is enabling better communication and helping to ensure that children and young people receive the most appropriate services for their needs. Plans for a multi-agency safeguarding hub are well advanced and are intended to strengthen further the quality of partnership working and improve outcomes for children and young people.
59. The local authority and its partners are very ambitious for children and young people. The permanent appointments of the Executive Director, Children, Families and Learning, the Director of the Social Care and Family Support Service and three heads of service in children's social care have brought expertise, energy and determination in improving services that had lost direction. Senior managers have prioritised effectively and have had a major impact on service development and improvement from strategic through to operational level. A comprehensive children's social care improvement plan is in place and is having a positive impact. For example the number of children with child protection plans who were seen at least every four weeks rose to 94% in December 2011 from 26% in May 2011, and 70% had had a visit within every two weeks, which is now the council's expected standard.

60. The priorities in the Children and Young People's Plan 2012–15 are based upon a comprehensive self-assessment, analyses of need and equality issues, and feedback from children and young people; this included a commissioned participation project with 3500 young people, and consultation with the Youth Council. Priorities such as improving street lighting have been directly influenced by these consultations. Previous local priorities across the partnership have been successfully acted upon, such as reducing the number of teenage pregnancies, and reducing the number of first time entrants to the youth justice system. Effective links are in place between the Children and Families Partnership Board, the CSCB and the shadow Health and Well Being Board.

Leadership and management

Grade 3 (Adequate)

61. Leadership and management are adequate. Senior managers in children's social care services have a well informed understanding of the weaknesses in services and resource deficits. The local authority recognises that the most significant resource deficit is in the number of experienced social workers and managers. It has been effective in increasing the number of social workers in permanent posts. The proportion of permanent staff has increased significantly and is now at 85%, compared to 40% in 2009. However, many of the social workers are relatively newly qualified. Additional managers have been taken on to support the work of the intake team, an extra senior manager at head of service level is in post temporarily to focus on practice and management and four consultant practitioners have been brought in to enhance the expertise of managers and social workers. The quality of service is improving, but from a low base. Some known weaknesses, such as the quality of work with children in need, have yet to be fully tackled to improve the performance of front line social work services.
62. Social workers report that caseloads fluctuate but are manageable. The quality of supervision is adequate. Case files show that supervision has not been consistently regular in the past, but senior managers have emphasised the importance of supervision to manage and reflect on cases, and this now takes place every three weeks, underpinned by a new supervision policy.
63. Workforce planning and development overall are increasingly effective. The partnership has agreed a broad strategic approach to workforce development, and is clear about its pressures and priorities. The profile of children, young people and their carers is known. In terms of ethnic minority groups, the proportion of social care staff from ethnic minorities is higher than the proportion within the local population. Needs assessments have been used effectively to influence service development, such as the commissioning of a number of services to promote emotional well-being.

64. The Social Work Academy, which was established in 2009, ensures that good quality training and induction, based on current priorities, are provided to children's social care staff. Specific training has been provided on equality and diversity issues, although the local authority has found that this has not yet had sufficient impact on casework and further training is planned, combined with focused supervision. Feedback on multi-agency safeguarding training provided by the CSCB is very positive, although take-up of courses has been variable. A new training strategy has been developed, linked to the partnership's key priorities.
65. The complaints procedure in children's social care services is well established and an annual report includes a summary of learning from complaints. A new complaints/compliments leaflet was published in 2011, which incorporated learning from feedback from children and families, and is being promoted by social workers and child protection chairs.
66. Action plans following serious case reviews have been implemented and training has been provided to staff across agencies. Messages from serious case reviews are fed into social worker training, and into multi-agency and single agency staff conferences, and impact is tested via audits.
67. Financial resources are being used increasingly effectively. The council's Children, Families and Learning Department came in on budget for 2011–12. Impact on front line services has been carefully managed, so that 25 out of 26 children's centres remain open, and family resilience work has been developed well as part of the Community Budgets initiative. The Children and Young People's Plan notes that costs for children's social care are high, compared with other London boroughs, and further efficiencies are planned during the coming year. Joint commissioning has not been a strong feature in Croydon, but a strategic commissioning framework has now been agreed and a joint commissioning unit is being established with health partners.
68. The views of children, young people and their carers are having a positive impact on service improvement. A Together We Matter event, hosted by the Youth Council and attended by nine senior managers from across the partnership, took place following the disturbances in 2011. Members of the Youth Council who spoke to inspectors felt listened to, and this is confirmed by the impact of the event on the priorities within the Children and Young People's Plan.
69. Parents and carers report variable experiences of their contact with social workers. Although some were able to describe social workers who have been effective, committed and courteous, others had had much more negative experiences, and felt that they were not helped by the turnover of social workers that they had experienced.

Performance management and quality assurance

Grade 2 (Good)

70. Performance management and quality assurance are good. Performance management and evaluation are established across the partnership and are leading to improvements in safeguarding outcomes. The strong focus on performance management is threaded through from the partnership board to the front line, demonstrating its importance to improving outcomes. Performance management information is scrutinised quarterly at the leadership meeting which includes the Chief Executive and the Council Leader, and at the partnership board. More frequent scrutiny takes place at senior management level, and accountabilities are clear. Individual social workers are clear about what is expected of them. The CSCB adopted a strengthened, outcome focused quality assurance framework in 2011, to ensure a more comprehensive understanding of the quality and impact of safeguarding work and to hold individual agencies to account. An agreed dataset is now being submitted to the safeguarding board on a regular basis. Data analysis has triggered greater scrutiny of the duration of child protection plans, for example, and on the apparently low levels of referrals from health agencies on children under one year of age.
71. Corporate arrangements for the performance function across the council have been consolidated to improve consistency. A data cleansing exercise has improved confidence in the data. A dashboard of performance information in children's social care services is providing information down to team level, and enabling better tracking of casework. A comprehensive children's social care improvement plan was drawn up early in 2011, as a result of serious concerns by senior managers about social work practice. Monthly performance meetings with middle managers were introduced and these have raised the profile of performance and ensure that managers are held to account for their areas of responsibility. This has had a positive impact on practice. Analysis of data has also identified that further work is required on the screening of police notifications, and joint work is now taking place to understand the issues.
72. Tight performance management and evaluation of the work of chairs of child protection conferences are leading to sustained improvements in safeguarding outcomes for children subject to protection plans. Child protection conference data is regularly analysed with regard to ethnicity and diversity, and information is provided to the CSCB on these issues. Performance with regard to the timeliness of child protection conferences is currently good. The timeliness of initial and core assessments has been variable over the year, with an improving trend. Quality assurance of CAFs by the CRISS team is now leading to improvements in the quality of CAFs, and support is offered for lead professionals when required. Reflective practice is encouraged and developed through the early intervention surgeries.

73. The local authority has carried out a wide range of audits of children's social care services. Audit evidence has been used well to focus attention on the front line through a combination of training, performance management and mentoring. Themes from audits feed in the training provided by the Social Work Academy. Research is currently taking place on families' experience of the child protection process, once plans have come to an end. Early findings from this work have contributed to the design of a children's consultation form for child protection conferences.

Partnership working

Grade 2 (Good)

74. Partnership working is good. The Children and Families Partnership and its sub-groups include representation from all key agencies, including the voluntary sector. The partnership board and the sub-groups have been restructured and accountabilities are clear. Partners describe the development of a positive culture within the board that is self-critical, collaborative and focused. The partnership is keenly focused on improving outcomes for children and young people, producing a comprehensive and fully evidenced self assessment in July 2011.
75. Effective partnership work has had a positive impact on the reduction in teenage pregnancies, on increasing educational standards and on the development of early intervention services.
76. The restructure of the CSCB and the appointment of an independent chair have strengthened the effectiveness of the board. Some members of the board have joined relatively recently, but partnerships are developing well and a culture of transparency and challenge is evident. An agreed threshold document was launched in 2011, which is enabling greater clarity about access to services, although further work is required to reduce the number of inappropriate contacts. Multi-agency arrangements for child protection conferences are working effectively.
77. MARACs are held regularly to share information and develop plans on high risk cases to meet the needs of children, young people and adults affected by domestic violence. Attendance from a full range of relevant agencies is generally good. Good relationships now exist with senior managers in children's services and regular attendance at MARAC by a team manager from the intake team has been secured in the past six months. From this area of joint working there has been a strong developmental link and focus on missing children and children suffering exploitation. Multi-agency public protection arrangements are well established and jointly chaired by police and probation; there is regular attendance from a children's social care representative and good joint working with the council's Head of Safeguarding.
78. The Croydon Information Sharing Protocol was agreed in July 2011 and training is available across the partnership on information sharing, data protection and human rights.

Services for looked after children

Overall effectiveness

Grade 3 (Adequate)

79. Overall effectiveness is adequate. Outcomes for staying safe, enjoying and achieving and economic well-being are good. Outcomes for being healthy and for making a positive contribution are adequate. The quality of provision is adequate. The council and its partners are strongly committed to improving outcomes for looked after children and care leavers. Partner agencies such as the voluntary and community sector report significant improvements in joint working since the appointments of the Executive Director, Children, Families and Learning and the Director of the Social Care and Family Support Service in 2011.
80. Themed audits, surveys and performance information ensure that senior managers have a very good understanding of weaknesses in services. These have contributed to a comprehensive and realistic self assessment of services for looked after children and care leavers. A robust social care improvement plan is targeting serious weaknesses that were identified such as statutory visits not being carried out, poor permanency planning and ineffective supervision. The plan specifies performance targets and accountabilities, and is very tightly monitored by senior managers. A multi-agency complex cases panel was established in November 2011 and has been successful in diverting some children and young people from care. Good arrangements are now in place to monitor admissions, transfers and discharges. A placements monitoring group has been established to improve placement stability further, and an adoption monitoring group is ensuring that plans are progressed swiftly where adoption is, or could be, the plan. Most looked after children and young people are in family placements, and effective action is being taken to increase the number of local authority foster carers through council investment and improvements to business processes.
81. Staffing resources in children's social care are sufficient to deliver priorities, and have been enhanced through the recruitment of permanent staff. The Social Work Academy is providing good opportunities for staff training and development. However, capacity within CAMHS is limited. Thresholds are seen as high by other agencies and children and young people may have to wait for some time for a service. Effective action is taking place to increase value for money through improved commissioning arrangements. A framework contract with independent fostering agencies is due to be in place later this year, and the local authority believes that this will have a positive impact on costs, quality and outcomes. Looked after young people are not currently involved in interviewing staff, but they have been part of an evaluation panel for the commissioning of semi-independent placements for young people aged 16 and over.

Capacity for improvement

Grade 2 (Good)

82. The capacity for improvement is good. The local authority and its partners are able to demonstrate a track record of improvement, for example through the impact on achieving good educational outcomes, the stability of placements, the timeliness of reviews and the consistently low level of looked after children who are cautioned or convicted. The fostering and adoption services are of good quality, and all of the children's homes operated by the local authority are also judged to be good overall.
83. The local authority and its partners have clear vision and ambition for looked after children and care leavers. This is demonstrated through the priorities within the Children and Young People's Plan, which clearly focus on improving outcomes for looked after children and young people, and through the social care improvement plan, to ensure that looked after children and young people experience consistently good social work support. A head of service post was created in 2011 for looked after children, adding capacity at senior management level and leading to the development of the looked after children strategic partnership, and a looked after children strategy and forward plan. This is ensuring good multi-agency engagement at a strategic level.
84. Workforce planning and development are strengthening, and this is leading to an increasingly effective workforce, who have good access to training.
85. In a relatively short period of time a wide range of improvements has been achieved, such as increased visiting to looked after children, an increase in the proportion of completed personal education plans (PEPs) and a significant reduction in caseloads in the 18+ team for unaccompanied asylum seeking young people. The focus in the last year on ensuring that only those children and young people who should be in care are in care is having an impact, with a number of children clearly diverted from care appropriately. Effective action, including a full review of all children accommodated under Section 20 of the Children Act 1989, is leading to clearer permanency arrangements.
86. The Children in Care Council (CiCC) has recently been re-established, enabling good opportunities for children and young people to express their views. The local authority has also carried out a number of large scale surveys of the views of looked after children, which are contributing to service improvement.

Areas for improvement

87. In order to improve the quality of provision and services for looked after children and young people in the London Borough of Croydon, the local authority and its partners should take the following action.

Immediately:

- ensure that looked after children know how to contact their Independent Reviewing Officer (IRO).

Within three months:

- Croydon Health Services NHS Trust to ensure that the emotional and mental health needs of looked after children and young people are fully considered as part of their health assessments
- Croydon Health Services NHS Trust to ensure that looked after children and young people are provided with a comprehensive written summary of their health history when they leave care
- NHS South West London Croydon Borough Team to ensure that looked after children and young people have timely access to CAMHS
- ensure that social care assessments are completed in a timely way and are of good quality
- improve record keeping and chronologies so that they are up to date and of good quality
- ensure that supervision in the looked after children and leaving care teams is timely and is of consistently good quality.

Within six months:

- ensure that the Pledge is reviewed by the CiCC and by the Corporate Parenting Advisory Board so that it becomes a meaningful document, and ensure that all looked after children and young people are made aware of the Pledge and of the CiCC
- consult with unaccompanied asylum seeking children on information that would help newly accommodated children to adapt to life in care
- increase the capacity of the independent visitor service so that looked after children have access to an independent visitor if required
- ensure that foster carers have access to independent support when allegations are made against them.

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

Being healthy

Grade 3 (Adequate)

88. Outcomes for being healthy are adequate. Performance indicators for 2010–11 show that the percentage of looked after children up to date with their immunisations is higher than both national and statistical neighbours, the percentage of children who have seen a dentist is slightly higher than the national average, and the percentage of children with up to date health checks is slightly lower than the national average. The most recent health assessments seen by inspectors were all within timescales and of adequate quality. However, files showed that there had been some significant delays in previous initial and review assessments. Ambitious plans are in now place to ensure that all initial health assessments are completed within the four week timescale. The emotional and mental health needs of children and young people are not well considered as part of their health assessments, and this has been identified by the service as an area for improvement during the coming year. Quality assurance of assessments is adequate. The designated doctor for looked after children and young people checks all assessments and the designated nurse for looked after children identifies health issues to be put forward for health action plans at looked after children reviews.
89. The looked after children's health team has good formal links with the homeless health team who oversee the health needs of unaccompanied asylum seeking looked after children. Children and young people are encouraged to attend their health assessments and given choices about where they should take place. Health professionals have good access to interpretation services and young people who spoke to inspectors confirmed that they have an interpreter to help with the assessment when required.
90. Staff in the looked after children's health team do not yet have oversight of the strengths and difficulties questionnaire, an assessment tool that considers behaviour and psychological attributes, and which is completed by social workers. This has already been identified as a concern by the partnership and appropriate action is being taken. A substance misuse screening tool is also used by social workers and any concerns raised are fed back to the looked after children's health team. A new substance misuse service, Love Your Future, has recently been commissioned and provides a service across a number of hubs within the borough.
91. The looked after children's health team provides an annual report to the Corporate Parenting Advisory Panel. Appropriate objectives have been identified for the year 2012–13 including reducing risk taking behaviour, delivery of sex and relationship education and assessing the emotional

health of looked after children. Capacity issues within the looked after children's health team have been reported to the looked after children's strategic partnership, to be addressed during the forthcoming review of services.

92. The looked after children's health team has good access to training and support to carry out their role, attending both London and national groups for designated looked after children nurses and doctors.
93. Care leavers are provided with a final care plan at their looked after children review, that includes health information. The looked after children's health team passes information to GPs, but does not routinely give care leavers a comprehensive written summary of their health history.
94. Children with disabilities receive a health assessment six months before transition and have a hospital passport and 'All About Me', a booklet that details the young person's communication methods, which are provided to adult services to ensure good handover of information.
95. CAMHS offer a 12 week course to foster carers to help them to understand and respond effectively to the emotional needs of looked after children. The course is designed to support placements and prevent breakdown. However, foster carers report that the training is not sufficiently practical, and also report that thresholds to CAMHS are very high, so the service is difficult to access. For other health specialists including speech and language therapy, physiotherapists and occupational therapists, the wait time is within reasonable timescales.
96. Targeted health promotion for looked after children, including those in the local authority children's homes, includes sexual health, contraception and substance misuse. Training is provided for foster carers through public health three times a year, and this similarly includes training on sexual health and contraception for young people. One of the nurses for looked after young people works with young people and care leavers who are pregnant, and targets are in place to reduce the number of pregnancies in the leaving care population through health promotion and outreach work.
97. The looked after children's health team is working with the CiCC to find out how the service can best meet their needs and as part of this work a 'Listening to young people' survey is due to be completed later this year.

Staying safe

Grade 2 (Good)

98. Safeguarding arrangements for looked after children and care leavers are good. Of the looked after children who responded to the Ofsted pre-inspection survey, most reported that they felt safe or fairly safe, and almost all stated that there was at least one person they could talk to if they felt unsafe. A large majority of children and young people who

responded to the survey found that the advice they received from adults about keeping safe was useful. Ofsted's inspection of local authority fostering services in January 2011 judged the service to be good, and an inspection of local authority adoption services in March 2012 also judged the service to be good.

99. Risk is managed to ensure that children and young people only come into care if it is in their best interests. A staged intervention strategy safely supports children within their families and includes the use of children's centres, the family intervention project and the family resilience service. Thresholds for these services are clearly established and senior managers ensure that these are consistently applied. A multi-agency complex cases panel was established in November 2011 with a view to identifying community based alternatives for children and young people on the cusp of care. At the time of the inspection 27 young people had been presented to the panel, 15 of whom were diverted from care. The panel also now reviews emergency admissions into care, to look at any lessons that can be learnt.
100. Robust arrangements are in place between the United Kingdom Border Agency and the local authority to identify and support unaccompanied asylum seeking children and young people. Close links between these agencies and the police also enable children at risk of being trafficked to be identified and protected. Immediate and effective arrangements are in place to identify need and to place young people safely and appropriately, usually in foster care. Unaccompanied asylum seeking children acquire looked after status and a core assessment is completed to determine levels of support required. Unaccompanied asylum seeking children are placed in foster care if they are less than 16 years old, and a change in the local authority's policy means that they can now choose to remain in placement until they are 18 years old. This means that young people continue to receive support in a familiar environment at a critical and vulnerable time in their lives when judgements regarding their immigration status are being made.
101. Rigorous checks are undertaken to monitor the quality of service offered by independent fostering agencies and residential homes. This includes reviewing reports of management visits to homes, and pre-placement visits by the access to resources team and social workers. Additional visits are undertaken by the access to resources team to ensure that children are safe, should a service be judged by Ofsted to be inadequate. At the time of inspection no children were placed in services rated inadequate by Ofsted, and most of the services commissioned were judged to be good or better. Most looked after children and care leavers who spoke to inspectors and those surveyed by Ofsted as part of this inspection, reported feeling very or fairly safe in their placements, and that the care that they received was good.

102. Most looked after children and young people are in stable placements. Short-term stability of placements is consistently better than similar authorities and England. This indicates good placement matching and is a notable achievement given the high number of unaccompanied asylum seeking children, many of whom have suffered significant trauma before arriving in this country. Longer term stability of placements has been similar to other local authorities, but local performance information indicates that this has improved over the last year. A placements monitoring group has been set up recently, to improve placement stability further.
103. Robust arrangements are in place to monitor children missing from care. Performance information on children going missing is regularly reviewed and those children and young people who are deemed to be at higher risk are reviewed through a multi-agency panel. The multi-agency panel also reviews incidents of children and young people placed in Croydon by other local authorities, and has recently decided to invite the allocated social worker to panel meetings, to improve the quality of communication and planning. Good arrangements are in place to inform the CSCB of children going missing, current activity and areas for improvement. Agencies have very good awareness of the links between children going missing, sexual exploitation and child trafficking and further joint work is planned to enable earlier intervention.

Enjoying and achieving

Grade 2 (Good)

104. Outcomes for enjoying and achieving are good. At Key Stage 2 there is an upward trend in attainment, and attainment levels are above those for looked after children nationally in both English and mathematics. The percentage of looked after children attaining five A* to C at GCSE is below other looked after children nationally. This is due to the large percentage of unaccompanied asylum seeking children that arrive in the borough in Year 10 or Year 11 with very little or no English and often no experience of formal education. The borough has analysed the attainment of indigenous looked after children in Croydon at Key Stage 4 and they attain above national expectations. The gap is narrowing between the achievements of looked after children in the borough and all pupils nationally, but at a slow rate, and improvements year on year are not significant.
105. All looked after children make good progress from their starting points. This is due to the rigorous tracking undertaken by schools and the support put in place to ensure that looked after children achieve their best. This year the virtual school has become significantly more proactive in tracking pupils' progress both within and outside the borough and this is further raising expectations for the achievement of looked after children. The borough has recognised that personal education plans (PEPs) need improvement and until recently were inadequate. Additional training has

been given to social workers and this is beginning to have an impact on the quality of PEPs. The virtual school is planning joint multi-agency training on PEPs for social care, health professionals and designated teachers to ensure that all have a shared understanding of the process and quality required. Good joint work takes place between schools and children's social care services in developing PEPs. The timing of these meetings within the school day is being reviewed so that looked after children do not miss out on activities they particularly enjoy.

106. All schools have an induction programme for unaccompanied asylum seeking children although practice varies. Unaccompanied asylum seeking children who met with inspectors reported that a welcome pack in their own language of rules and expectations both at school and in their foster homes would help with settling in.
107. The attendance of looked after children is above the national average and data indicate an upward trend for the past five years. The percentage of persistent absentees has reduced over the last five years and is below the national figure. This is due to the tenacious approach of the education welfare service, with good support from schools and foster carers. Fixed term exclusions have reduced and no permanent exclusions were made this year due to robust preventative systems including the fair access panels, which offer rigorous challenge as well as support when cases are brought to the panel. Schools have also put in place a range of provision to support looked after children with complex needs, for example the Place2Be pilot, which offers a variety of effective early intervention strategies.
108. Looked after children have access to a good range of leisure activities. Schools, foster carers and social workers work together to encourage looked after children to participate. The pupil premium is used effectively to enable all to have access to the resources they need. Leisure activities are a focus in review meetings and PEP reviews. Placement officers take the leisure interests of looked after children into account when looking for foster placements so that there is a good match with adults and children in the family. The new Journey Strategy is helping older looked after children and care leavers to structure their free time and try leisure activities they have not attempted before. Perpanata, a theatre based project in Croydon for refugees, is providing good opportunities for asylum seeking children to develop their interest in theatre and the arts. Over 250 unaccompanied asylum seeking children have taken part so far, with a positive impact on their confidence and skills. Achievements of looked after children are celebrated at Achievement Award events, and are valued by the children and their carers. Looked after children also value the personal e-mails sent to them by the Executive Director, Children, Families and Learning when they achieve well.

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

109. Outcomes for making a positive contribution are adequate. The Children in Care Council (CiCC) was established in 2010, but has recently been re-formed to increase its impact. The CiCC has a clear agenda and a full schedule, meeting fortnightly to address a backlog of issues. Members of the CiCC feel that they are listened to and that they have good access to senior managers. The CiCC has designed a flyer which social workers are sending out to inform other looked after children of its role and to increase membership. More than half of the looked after children who responded to the Ofsted survey before the inspection reported that they had not heard of the CiCC.
110. A Pledge, setting out the key promises that the local authority makes to children and young people, was developed by the original CiCC and the Corporate Parenting Advisory Panel in 2010. However, most looked after children and young people who responded to the Ofsted survey before the inspection had not heard of it. The current members of the CiCC were also unaware of the content of the Pledge or its relationship to the local authority's strategic plan for looked after children.
111. Looked after children and care leavers are not currently involved in interviewing staff. However, a number of looked after young people have been part of an evaluation panel for the commissioning of semi-independent placements for young people aged 16 and over.
112. The timeliness of reviews of looked after children has improved significantly over the last two years, according to local performance information, and is now good. About 70% of looked after children and young people attend their reviews. Children and young people who spoke to inspectors knew of the purpose and process of reviews, but expressed dissatisfaction with their format, frequency and content, and not all of them received the minutes. Just under half of the looked after children and young people who responded to the Ofsted survey reported that they did not know how to contact their IRO. The local authority recognises that there is need for improvement, and the CiCC has met with IROs to explore ways of boosting participation, with IROs themselves encouraging young people to jointly chair their reviews, although currently there is a very low rate of take up. Although advocates are available to children and young people, almost half of the looked after children and young people who responded to the Ofsted survey said that they did not know what an advocate was. Action is being taken to promote the advocacy service, including attending a meeting with the CiCC.
113. The local authority is highly committed to improving practice and ensuring that the views of looked after children and young people are sought and acted upon. Almost 400 children and young people completed a

questionnaire between February and April 2012, following their reviews. This followed a smaller survey in 2011. The analysis in the recent survey provides a balanced picture of what is working well and what needs to improve, and feeds into the social care improvement programme. All unaccompanied asylum seeking children who met with inspectors said that they had been consulted about their religious needs and affiliation.

114. The percentage of looked after children and young people in Croydon who are cautioned or convicted has been consistently below the level of both similar authorities and England for the last five years. Triage has been developed successfully as a strategy to divert young people from the criminal justice system, and a range of responses is available if a risk of continued reoffending is identified.

Economic well-being

Grade 2 (Good)

115. Outcomes for economic well-being are good and are above those of similar areas. Following the disbanding of Connexions, figures for targeted groups of young people not in education, employment or training (NEET), including looked after children, have increased. The borough has responded very robustly to these issues and a new, extended information, advice and guidance (IAG) system is beginning to have an impact on reducing NEET figures. Schools now have the core responsibility for IAG and the borough has supported them through training and development. Every care leaver has a dedicated personal adviser or a social worker who has been trained in IAG, including career pathways. This ensures that care leavers have good quality advice and access to appropriate vocational and higher education courses. This has resulted in the majority of the recent cohort of care leavers taking part in further training or education. Care leavers with complex needs have a social worker and personal adviser.
116. Pathway plans overall are good and young people who met with inspectors are positive about them. The employment skills strategy group works closely with local employers to review the key skills young people need to be employable. These key skills are taken into account in pathway plans to support care leavers in improving their employment opportunities. Plans also take into account young people's cultural and religious needs. A high number of care leavers, including unaccompanied asylum seeking young people, go on to further training and university. The borough provides good financial advice through the income maximising officer to those going to university. Care leavers already at university act as peer mentors to those about to start their courses.
117. Robust systems are in place to ensure care leavers and looked after children are accommodated in placements that closely match their needs. All care leavers in shared accommodation or independent accommodation who met with inspectors say this meets their needs and is of good quality. Young people over 18 can also remain with their foster carers where this

is possible, and if it supports them in securing their educational outcomes. The borough works effectively with private and third sector providers to ensure a good range of housing options. For care leavers with more complex needs, the multi-agency housing panel meets three months in advance of placements being needed, to allow time for making good arrangements. Peripatetic support workers have a very positive impact on enabling young people to maintain these placements. The service is highly flexible with good connections to adult social care, and can respond rapidly if a placement is not working.

Quality of provision

Grade 3 (Adequate)

118. The quality of provision is adequate. All looked after children have an allocated social worker. Cases examined by inspectors demonstrate that some social workers know the children well, but other children and young people have had several changes of social worker. New senior managers in the local authority specifically focused on improving the frequency of visits to looked after children to exceed statutory requirements, as children and young people were not being seen regularly. As a result, visiting frequencies rose from 18% of looked after children visited within four weeks in May 2011 to 58% in December 2011.
119. Assessments seen on files are of adequate quality, and include the views of the children and young people and their carers. Cases examined demonstrate that the cultural and religious needs of looked after children and young people are identified, and connections are made to faith and community groups when required. Some assessments have not been updated for some time, even though the needs of the children and young people have changed. Improving the quality of assessments is a priority within the social care improvement plan, particularly within the unaccompanied minors service, where an audit in 2011 found several practice deficiencies.
120. Care planning has not been sufficiently robust, resulting in drift for some children and young people. Senior managers instigated a comprehensive audit between July and November 2011 of all of the children and young people in care at that time. Deficits in care planning were found in a number of cases, resulting in plans being improved or rewritten. Securing permanence for children has now been given high priority and is being achieved in a number of different ways. A review in 2011 of all children and young people placed under Section 20 of the Children Act 1989 resulted in improved permanence arrangements in 26 cases. An adoption monitoring group has met every fortnight since July 2011 to monitor cases where adoption is, or could be, the plan; 93 cases have been reviewed so far and the local authority expects that the number of adoptions will increase significantly in the coming year. An increasing number of Special Guardianship Orders is being made, with 15 agreed between April 2011

and March 2012. Planning for permanence is now clearly expected at the second looked after children review.

121. Independent reviewing officers (IROs) are experienced and knowledgeable and have manageable caseloads. Almost all reviews are carried out within expected timescales. Robust monitoring by new senior managers has led to each review being subject to a quality assurance check and an increased focus on compliance. The dispute resolution process has been strengthened and this has resulted in earlier resolution of concerns and a reduction of drift in some cases. Agency attendance at reviews is monitored and appropriate action is taken if attendance is poor. The IROs produce an annual report. The most recent report, covering 2010–11, shows a significant improvement in the timeliness of reviews and in the completion of PEPs and pathway plans, which had each been below 10% in the previous year.
122. Improvements have been made to the quality of social work reports and filing times for court reports. The legal services team rigorously tracks progress and reports on any areas of concern and meets with service managers on a monthly basis to review practice. Concerns raised by the team have reduced significantly from 45 in June 2011 to six at the time of the inspection.
123. Case recording on files is mostly adequate, and identifies when children and young people have been seen alone. Recording does not generally reflect the good case knowledge demonstrated by the social workers interviewed by inspectors. Chronologies are in place on some files, and this has been identified as an area for improvement in the current phase of the social care improvement plan.
124. Parents of looked after children and young people who met with inspectors were positive about the outcomes for their children following support and intervention by children's social care services. All confirmed that they participated in reviews and were kept informed of changes in plans. They were clear about what was required of them in order for their children to return home, and the consequences of not doing so. One parent commented on the benefits of having the same social worker over a two year period so that the social worker could assess the progress she had made. Other parents commented on the rapid turnover of social work staff. Parents were supported with interpreter services if required so that they understood the legal process. All unaccompanied asylum seeking children who met with inspectors were aware of independent visitors and the advocacy service, and had access to interpreters.

Ambition and prioritisation

Grade 2 (Good)

125. Ambition and prioritisation are good. Elected members are well represented on the multi-agency Corporate Parenting Advisory Panel. The panel includes a foster carer representative, and professionals such as the

designated nurse and the head of the virtual school attend as necessary. Members are well informed about the experiences and challenges that looked after children face, and meeting minutes demonstrate good consideration of the outcomes for looked after children and the improvements that are required. Two elected members from the panel are now part of the looked after children strategic partnership board, enabling good links between the two groups. The Lead Member and other elected members also meet with senior officers on a regular basis to monitor performance and ensure a continued focus on improving outcomes. The panel has met on two occasions with the re-formed CiCC.

126. The Joint Strategic Needs Assessment 2010–11, which included consultation with children and young people, provides comprehensive information on the profile of looked after children in the borough and their health needs, together with recommendations for improvement. This has helped agencies to develop a shared understanding of need, and the findings have contributed to the Looked After Children Strategy and Forward Plan published in December 2011. The forward plan includes a detailed action plan against each outcome area, identifying accountabilities for each section. The plan has been presented to the Corporate Parenting Advisory Panel, and links to the priorities identified in the Children and Young People's Plan 2012–15. The looked after children strategic group is a sub-group of the Children and Families Partnership Board, ensuring that looked after children have a high profile within the partnership. Good partnership work across agencies and clearer accountabilities are ensuring that staff understand priorities and are ambitious for looked after children and young people.
127. Senior managers in children's social care services have clearly identified and tackled key priorities on a number of fronts. This is demonstrated for example, through improved frequency of visits to looked after children, more rigour in considering alternatives to care, improved planning for permanence, and additional investment in the care leaving service for unaccompanied asylum seeking young people, enabling caseloads to be significantly reduced.

Leadership and management

Grade 3 (Adequate)

128. Leadership and management are adequate. The Executive Director, Children, Families and Learning, the Director of the Social Care and Family Support Service and the Head of Service for looked after children are providing strong, visible leadership that is driving improvement to services. Weaknesses and service deficits are well understood and appropriate action is being taken, although it will take some time before services are of consistently good quality.
129. Sufficient numbers of qualified social workers are in post. The local authority has been successful in recruiting to permanent posts, and

significantly reducing the proportion of agency staff. Consultant practitioners are providing additional expertise to support managers and social workers, as some social workers are relatively newly qualified. Although case supervision is now more frequent, some cases have not had sufficient management oversight, and this has contributed to drift in care planning. The local authority is taking action to improve the quality of supervision.

130. Partnership working is increasingly effective, particularly between schools and children's social care services, where longstanding communication issues have been successfully resolved. Partnership working with the voluntary and community sector has also improved significantly, for example with good improvements to housing options for care leavers.
131. The local authority does not have sufficient capacity in its independent visitor scheme. Only 25 arrangements are in place at the moment, but case audits carried out during the inspection identified a number of looked after children who might benefit from the scheme.
132. The complaints process has not been promoted sufficiently to looked after children and care leavers. Fewer than half of the looked after children and young people who responded to the Ofsted survey before the inspection were sure about how to make a complaint, and of those that did make a complaint, only half of them thought that it was sorted out fairly. The local authority has made a concerted effort to promote complaints using a new leaflet distributed by IROs and social workers, and IROs check at reviews that the young person knows how to make a complaint. However, this has not yet had an impact on the number of complaints received. Learning from complaints has been used to improve services, for example with the leaving care policy that was reviewed and relaunched earlier this year, resulting in greater clarity of entitlements and support. All unaccompanied asylum seekers who met with inspectors confirmed that they knew how to make a complaint and that their IROs checked with them prior to meetings if they had any concerns.
133. The commissioning of services is becoming increasingly effective. Work is well advanced to recruit 25 new foster carers by June 2012, and 50 carers per year after that, which will enable children and young people to be placed more locally, and offer better value for money. This is being achieved through the introduction of a more efficient recruitment strategy, aiming to reduce the recruitment process to 12 weeks instead of an original target of eight months, coupled with an increased package of remuneration and support.
134. Foster carers who met with inspectors were positive about the rigorous approach that is now being taken to improving the service to looked after children. Communication with senior managers has improved through representation on the Corporate Parenting Advisory Panel, and a foster

carers' handbook has been produced. However, foster carers report feeling very vulnerable when allegations are made against them, as they receive no independent support during the investigation.

135. In the Ofsted survey that took place as part of this inspection, most looked after children and young people said that the care that they were receiving was good or very good. In the survey carried out by IROs in 2011, 92% of looked after children and young people felt positive about how their lives had changed since becoming looked after.

Performance management and quality assurance

Grade 2 (Good)

136. Performance management and quality assurance of services for looked after children and care leavers are good. Performance management and evaluation are given high priority and are being used effectively to drive performance. Surveys and audits are being used well to improve practice and to ensure that the views of looked after children and young people are known; these ensure that senior managers are clear about what is working well and what needs to improve. Since December 2011 a placements monitoring meeting has taken place every two weeks, focused on admissions, discharges, transfers, adoptions and complaints. Information from this meeting feeds into a monthly performance dashboard, and informs the looked after children strategic partnership, so that all senior managers are fully informed about activity and trends.
137. The comprehensive social care improvement plan is strongly focused on improving outcomes for looked after children and care leavers and has been an effective tool in driving performance. The plan is tightly monitored by senior managers and has had a profound impact on social care practice and joint working with education and health partners.
138. Social workers are clear of the strategic direction of Croydon and the expectations for their own performance. Staff feel increasingly valued by Croydon and appreciated the achievement awards presented by senior managers at a recent social work conference.
139. IROs report that the dispute resolution protocol is now more robustly applied and monitoring arrangements for reviews are much clearer. The role of the IRO has been strengthened through increased quality assurance and this is enabling them to provide appropriate challenge to social workers and managers so that quality improves and cases do not drift.

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