

Piccadilly Gate Store Street

T 0300 123 1231 **Textphone** 0161 618 8524 enquiries@ofsted.gov.uk Manchester M1 2WD www.gov.uk/ofsted

11 March 2019

Chris McLoughlin, Director of Children's Services Stockport Metropolitan Borough Council Floor 3 Stopford House Piccadilly Stockport Cheshire

Dear Ms McLoughlin

Focused visit to Stockport children's services

This letter summarises the findings of a focused visit to Stockport children's services on 14 and 15 February 2019. The inspectors were Sheena Doyle, Her Majesty's Inspector and Mandy Nightingale, Her Majesty's Inspector.

Inspectors looked at the local authority's arrangements for contact, referral and assessment, including the provision of early help and statutory services.

Inspectors looked at a range of evidence, including case discussions with social workers and other staff from the multi-agency support and safeguarding hub (MASSH). The quality of social work practice in the locality teams was explored, and children's progress was assessed. Inspectors looked at local authority performance management, quality assurance information and children's case records.

Overview

Stockport children's services were last inspected by Ofsted in July 2017. All areas were judged to be good, with adoption judged to be outstanding. Since the last inspection, the local authority has further strengthened services for children who need help and protection, including more robust arrangements in the MASSH. Expert advice on early help services ensures that children and families who need support, but do not require an urgent response, are considered promptly and linked to appropriate support without delay. The 'team around the child' and 'team around the school' approach is embedded across Stockport. Children who have complex



safeguarding needs, such as those at risk of sexual exploitation or who go missing, receive expert attention from the multi-disciplinary Aspire team. There is increased capacity across the MASSH to effectively manage all the work they receive, including triage of all domestic abuse contacts. Victims assessed as high risk are considered at daily multi-agency risk meetings.

Multi-agency strategy meetings are held promptly, but some children are subject to repeated strategy meetings when other information-sharing mechanisms would suffice without invoking section 47 procedures. Children's plans take account of their needs, but some still contain targets that are too vague and do not make it clear to families exactly what needs to change and by when.

Some high caseloads exist in the locality social work teams. Workload pressures on senior practitioners and team managers continue to impact negatively on the quality and depth of supervision, including the quality of recording.

What needs to improve in this area of social work practice

- The clarity of actions recorded in children's plans, to help families understand who is responsible for each action and what success looks like.
- The recording of supervision sessions to include reflection, challenge and agreed next steps.
- The appropriateness of strategy meeting arrangements when children are already subject to protection plans or other appropriate interventions.

Findings

- There is a strong and well-understood early help offer. All agencies understand and support early intervention using the team around the child (TAC) and the team around the school model, referred to as 'Stockport Family'. This boroughwide approach enables agencies to work together effectively in order to provide services for children and families early when concerns arise. Because all professionals use the same electronic recording system, they can see how their joint working is supporting the family and assess how progress is being made.
- Professionals understand very clearly how to access early help support for children and their families via the MASSH. Thorough information-gathering and analysis occurs once a request for support has been received, to determine the most appropriate service. Requests for early help support are facilitated by the weekly early help hub panel.
- Children and family's needs are met by a wide and varied range of suitable services. Regular, well-attended TAC reviews ensure that children's progress is monitored regularly and in collaboration with parents. Early help assessments (EHAs) contain relevant information and are analysed well. The actions arising



from the EHAs are too often not specific, measurable, time-bound or ascribed to individuals. They often contain broad aims which do not make it clear to the parents and children exactly what needs to happen to effect change.

- Children at risk of complex safeguarding receive a good service from a well-informed multi-disciplinary team, Aspire. Team members work well together and collaborate effectively with professionals outside the team, ensuring that their expertise is disseminated widely. Children who might be at risk are identified at the earliest opportunity within the MASSH and passed to Aspire for detailed assessment of their needs. Each child's individual needs are considered sensitively, for example safety plans are translated into their first language. When children and families receive support from more than one practitioner through coworking with Aspire, respective roles and responsibilities are explained verbally, but often families are not given written information to confirm this. Aspire staff offer accessible and useful consultation to social workers and other professionals who may be concerned about the risk of criminal exploitation.
- A tightly organised and well-functioning system is in place to ensure that children who go missing do not 'slip through the net'. Effective work by the police, children's social care and a commissioned voluntary agency has led to a reduction in the number of children who go missing. The length of time children go missing for has also reduced. Strategy meetings and return home interviews are prompt and of good quality. Intelligence gathered from interviews informs safety planning appropriately. Children who persistently go missing are scrutinised regularly, and tenacious efforts are made to promote their safety.
- The First Response service in the MASSH is well managed and provides a timely and thorough response to all new contacts to children's social care. The team benefits from being multi-disciplinary, with expertise in social work, education, health, housing and disabled children. These specialist workers ensure that all known background information on children is collated to inform appropriate next steps.
- Contacts are dealt with promptly; trained staff upload information to the children's electronic recording system swiftly. Children who might need urgent action to protect them are prioritised. Strategy discussions include all relevant staff and are convened swiftly. Some children have been the subject of multiple strategy meetings to consider additional information as it emerges, despite already being the subject of safety and support plans. This means that some children are unnecessarily subject to statutory procedures when other information-sharing arrangements would suffice.
- There are clear routes by which requests for services and concerns about children can be raised. Partner agencies make good use of electronic referral routes and this reduces delay in responding to children. The emergency duty team log their activities promptly, and promised actions by the daytime staff occur swiftly. Daily



First Response team meetings keep potential drift in check and maximise expertise on case decision-making. Careful and routine attention is paid to ensuring that parental consent has been obtained when necessary. Schools refer all children who have missed 10 consecutive school days, and they are followed up promptly to determine the reasons why.

- The police domestic abuse specialists in the MASSH ensure that there is no backlog of domestic abuse incidents. Useful daily risk meetings consider the most serious incidents and are attended by a wide range of agencies, including adult services. Relevant information is shared, enabling the best possible understanding of victims' and perpetrators' circumstances to inform next steps.
- All 16- and 17-year-olds who present as being in need of accommodation receive prompt and careful consideration of their needs. Mediation is used to good effect, with joint assessments undertaken by housing staff and social workers. Those who are unable to return home, including unaccompanied asylum-seeking children, receive accommodation and support in line with their needs.
- Effective multi-agency working in social work teams is a routine feature of all cases and positively contributes to decision-making and planning. Additional help is often provided from other agencies to deal with specific issues. This includes services to address poor mental health, substance misuse, domestic abuse and help with parenting. Services are provided promptly as soon as the need is identified.
- Most social workers spoken with demonstrated sensitive and thorough analysis of each family and child's situation. They described creative but realistic plans to improve children's outcomes. Because of the this work, children are better protected, and some had other improved outcomes within relatively short timescales. Actions are timely and based on legal and clinical advice, where necessary. Medical examinations and paediatric opinion are sought promptly when children are suspected of having non-accidental physical injuries.
- The quality of social work assessments varies. The better ones take good account of histories, involve non-resident fathers, and culminate in a clear analysis which informs the planning for the child. A few assessments are too focused on the presenting issue and do not take enough account of the child's broader circumstances. This means that some risks may be overlooked.
- Plans derived from good-quality assessments lead to positive outcomes for children. In the best plans, adults' and children's needs are considered in tandem. Social workers benefit from accessible case consultation from a clinical psychologist. This helps them to determine appropriate interventions and next steps, particularly on complex cases. A few plans focused too heavily on the adults involved, with little reference to the children. Some plans include actions which are not specific or measurable enough. Overall, case records do not always reflect the complex work being undertaken by social workers.



- Due consideration is given to children's voices. Their views, wishes and presentation demonstrably influence assessments, interventions and plans. Good consideration is paid to issues of ethnicity and cultural practices, and interpreters are used when required.
- All social workers said that they feel well supported. While they were positive about their supervision, including group supervision, some records seen were brief, did not contain any reflection, or review progress against previous actions. Staff report caseloads to be manageable but said that high caseloads affected the quality of their recording, including maintaining chronologies. Caseloads of 25 to 33 were seen in one team. The local authority is fully aware of caseload pressures and reduces these as quickly as possible.
- Senior leaders in the local authority have a well-developed and varied approach to ensuring that the quality and timeliness of practice with children is known and kept under close review. Data analysis, audits, staff consultation, dip sampling and practice weeks all contribute well to ensuring that senior managers have a good understanding of frontline practice, and what hinders and helps it. There is a clear, continuous improvement cycle, informed by constant learning and enquiry.

Ofsted will take the findings from this focused visit into account when planning your next inspection or visit. This letter will be shared with the Department for Education and published on our website.

Yours sincerely

Sheena Doyle **Her Majesty's Inspector**