

Durham County Council

Inspection of children's social care services

Inspection dates: 9 September 2019 to 20 September 2019

Lead inspector: Rachel Holden
Her Majesty's Inspector

Judgement	Grade
The impact of leaders on social work practice with children and families	Requires improvement
The experiences and progress of children who need help and protection	Requires improvement
The experiences and progress of children in care and care leavers	Good
Overall effectiveness	Requires improvement

Following the last inspection of local authority children's services under the single inspection framework (SIF) in 2016, where the local authority was judged to be requires improvement to be good, there was a deterioration in the impact of some services. Substantial work to lay the foundations for positive change had not yet delivered the consistent impact required. The joint targeted area inspection (JTAI) in July 2018 found that multi-agency working and strategy meetings were areas requiring priority action. A focused visit of children in need and those subject to a child protection plan in January 2019 demonstrated some improvements, but weaknesses remained and there was drift and delay for children, as well as in recording and management oversight.

Since that time, the local authority has taken swift and decisive action to strengthen services. Pace has increased since the focused visit, and solid improvements can be seen in many service areas, including at the front door and for children in care. Firm foundations are in place to sustain and build on the improvements made.

There has been a significant increase in workforce capacity and a restructure of children's services, including a restructure of the senior leadership team. The new leadership structure has improved practice oversight, enabling leaders to better challenge weaker practice. However, management oversight, challenge and consistency of social work practice are not fully embedded in all service areas, including those for disabled children, those for children who are privately fostered and those for homeless 16- and 17-year-olds. As a result, some children are not always receiving help at the earliest opportunity. Senior leaders and managers were not aware of some of these shortfalls until the inspection. However, they made plans to address them during the inspection.

Children in care and care leavers get a good service, and the quality of practice has improved since the last inspection. There is strong political and corporate parenting focus, oversight and challenge. Children influence leaders at all levels, and they have an impact on providing good services for children in care and care leavers.

What needs to improve

- The quality and impact of management oversight, including that of child protection chairs.
- The timeliness of assessments and support for children who return home.
- The quality of children's plans, so that they are timebound, and include clear actions and contingency plans.
- The response to disabled children, children in private fostering arrangements, and children who are homeless aged 16 and 17.
- The timeliness of foster carers' reviews.
- The tracking and monitoring of children missing from education.

The experiences and progress of children who need help and protection: requires improvement to be good

1. While leaders and managers have strengthened the responses to children, and these are robust, not all children receive a consistently good response to meet their needs.
2. Children and families benefit from an extensive and well-developed early help offer. The One Point early help service which includes the voluntary sector is effective at mobilising support for children and families. The quality of help and support provided helps to build families' confidence and resilience.
3. Most partners know how and when to contact children's social care. The quality of referrals from partner agencies has improved. The co-location of One Point hubs and Families First social work teams, in 14 localities across the county, means that when needs or risks increase or decrease, cases are promptly stepped up from early help to children's social care or are promptly stepped down.
4. First Contact, including the multi-agency safeguarding hub, is well managed and provides an effective and timely response to contacts and referrals, ensuring that thresholds are applied consistently. Consent is carefully considered. Information is shared effectively.
5. The emergency duty team provides an effective out-of-hours service. Good two-way communication with the First Contact and the Families First teams and close links with the edge of care team help to ensure that, when problems arise

outside of normal office hours, children and families receive a timely and proportionate response.

6. The local authority and its partners take very seriously allegations of abuse or mistreatment by adults who are working in a position of trust with children. Although the designated officer arrangements have historically been under resourced, the energy, drive and determination of the designated officer has ensured that in most cases the response is timely, proportionate and well coordinated.
7. Prompt action is taken to safeguard and protect children who are at immediate risk of significant harm. Partners' engagement in strategy meetings and discussions, core groups and child protection conferences demonstrate the strength of the multi-agency commitment to child protection. Most strategy discussions are well recorded. Most child protection enquiries are timely and thorough. Children are seen in a timely manner.
8. Children are routinely seen and are seen alone. Social workers listen to and take note of what children say. Home visits are purposeful. The quality of the direct work undertaken with children by social workers and family support workers helps them to understand and make sense of children's lived experiences.
9. While the local authority is still in the process of rolling out its preferred model of social work, social workers are beginning to make good use of it to identify risks and protective factors. However, while most assessments are detailed and reasonably comprehensive, the quality of analysis is not consistently strong. Social workers describe risks and protective factors, but do not consistently identify next steps. In some cases, a lack of sharpness means that social workers are not clearly focused on reducing those needs or risks that matter most.
10. The quality of critical challenge provided by team managers, middle managers and child protection conference chairs is not consistently robust or always effective. As a result, the quality of social work practice between and within teams is still too variable and, in the main, requires improvement to be good, although there is some good practice.
11. Good communication with partners helps to ensure that packages of help and protection are generally well coordinated, although child in need and child protection plans are not always sufficiently specific or measurable. On occasions, it is not clear who needs to do what by when, and why, and there is little contingency planning. Some plans lack clarity, are confusing for parents and make it difficult to monitor progress and hold partners rigorously to account.
12. Social workers are alert to the impact of neglect and are generally confident and assured in dealing with parental substance misuse. However, the social work practice model is not fully embedded, and, as a result, social workers and

managers are not always sufficiently rigorous in challenging disguised compliance or are not always sufficiently resourceful in overcoming parental resistance. This particularly applies to children who are living with domestic violence. On occasions, there is a tendency to focus on adults rather than children, and an inclination to interpret thresholds too narrowly by concentrating on actual rather than potential harm. This leads to some cases being closed too soon without real or sustainable change having been achieved.

13. The work of the pre-birth and supporting solutions service (edge of care) is strong and effective. Good use is made of family group conferences to develop networks of support or to identify suitable alternative care arrangements for children who cannot continue to remain at home safely. The effective use by the local authority of the public law outline continues to improve timeliness for children.
14. The strength of the local authority's and partners' response to missing children and children at risk of exploitation is helping to reduce risks, disrupt the activity of perpetrators and protect children. Children who go missing from home or care are routinely offered return home interviews. Information is well shared and well used. Actual and potential risks are carefully considered, regularly reviewed and closely monitored.
15. The local authority takes seriously its responsibilities to children who are being electively home educated (EHE). As soon as it becomes clear that a young person is being educated at home, initial screening checks are carried out. However, tracking and monitoring is not sufficiently robust, and managers cannot be assured that all children receive visits, or that, when they do, the visits are effective.
16. When children go missing from education (CME), there is a timely response. Good links between the CME team and Educate and Raise Awareness of Sexual Exploitation (ERASE) team help to ensure that an appropriate range of checks are promptly carried out.

The experiences and progress of children in care and care leavers are: good

17. Most children enter care when they need to do so and live in appropriate and permanent placements that meet their needs. The vast majority of children are developing well and have improving experiences, progress and outcomes. Children receive an equally good service when they are placed close to home and when they live further afield. Children contribute well and understand consistently their life stories. Children in care and care leavers get good support to keep themselves safe, and they benefit from clear and effective risk assessments and multi-agency interventions.

18. When care proceedings are issued, they are concluded within statutory timescales, and timely legal permanence is secured for children. Decisions for children to enter care are mostly timely and in the best interests of the child.
19. Most children benefit from good early permanence planning. Where appropriate, children and young people who are unable to return to their birth families are being supported to live with kinship carers or connected persons, including under Special Guardianship Orders (SGOs). A very small number of children have to wait too long to be matched with permanent foster carers in line with their care plan, either due to a lack of urgency in family finding or due to the lack of available suitable placements. As a result, a few of these children are experiencing ongoing anxiety and insecurity about their future care.
20. Additional support for children with complex needs is readily available and is supporting placement stability. However, a small number of children still experience placement moves unnecessarily. In such cases, more effective matching and planning is needed. As leaders have recognised, sufficiency is a barrier to this cohort of children achieving permanence in a timely manner, and firm plans are supporting the improvement needed.
21. Children who have a planned return home from being in care are able to do so in line with their expressed wishes and an assessment of their needs. Appropriate ongoing support for children and families ensures that children remain living with their families. Assessments of older children subject to care orders who return home in an unplanned way do not always take place quickly enough to ensure that ongoing support is in place to meet children's needs.
22. Children of all ages are well supported to make a meaningful contribution to their reviews, and many young people chair their own reviews. Comprehensive social work assessments inform children's reviews and support detailed care planning. Well-chaired reviews provide effective challenge to prevent delays for children. However, not enough children have their plans for permanence confirmed at their second review. Firm plans are in place to address this.
23. Children and young people benefit from access to effective advocacy, and the need for an independent visitor is well considered in children's reviews.
24. Children's wider health and emotional and well-being needs are well addressed. The therapeutic service provided by Full Circle is invaluable. Using evidence-based research, the service is making a real difference to children who have been traumatised by adverse childhood experiences, as well as supporting their carers. For example, when children and carers are matched for adoption, carers meet with the adviser from Full Circle to advise and support pre-adoption, and this support continues to ensure that the crucial settling period is well supported. When some children come into care, their initial and review health assessments are not timely. However, the reviews do result in effective support

when needs are identified. Leaders are aware of this issue and are working with partners to resolve this.

25. Education outcomes for children in care at several key stages are typically above the national average. The virtual school team is ambitious for children in care and schools spoke highly about the support that they receive from the virtual school. While all children's personal education plans are regularly reviewed, there is more work to do in setting more specific targets for children, particularly those with special education needs, although this is an improving picture.
26. Children experience a wide range of fun activities and hobbies in their local area, which supports the integration of children into their local community. This is supported well by the provision of 'Freedom cards'.
27. When placements become fragile, there is a good support infrastructure for carers and their families, including access to the supporting solutions (an edge of care service) and the Full Circle team. Effective disruption meetings are held to understand why placements break down in order to identify learning to inform wider placement matching and reduce instability.
28. Most children placed out of county receive equitable services in terms of health, education and social work support. The local authority is committed to ensuring that brothers and sisters are placed together. Children's time with important people, such as family, friends or former carers, is well considered, and plans to meet these needs are regularly reviewed.
29. Children in care enjoy spending time with their social workers. For many children, their social workers are important attachment figures who they have known their whole lives. Creative and sensitive direct work is undertaken by social workers and carers with all children to help them understand their life histories. The voice of the child comes through strongly in children's records.
30. The Children in Care Council is dynamic, and it is really making a difference to the lives of Durham's children in care and care leavers. Inspectors heard numerous examples of action taken by the council in response to issues raised, for example the redesigning of the children's care plans and the safety planning document. Positively, they are a force to be reckoned with.
31. Foster carer recruitment and training is child-centred, and the things that matter most to children are understood clearly by leaders and managers. However, sufficiency of carers remains a known service challenge and is being actively addressed through firm planning. Prospective foster carers are carefully assessed and trained and, following their approval, they are well supported by their social workers. The quality of foster carer assessments is good, providing sufficient information for panel to make appropriate recommendations. Some foster carers' annual reviews are delayed, and the fostering service is developing an electronic system to address this issue.

32. Timely decisions are made to secure permanence via adoption. Family finding, and matching are strong. Children are placed in excellent quality adoptive placements that are carefully matched, and they are very well supported. Detailed support plans ensure that children's transitions are successful and that carers are given the right help to meet children's needs. Children all have a well-written and well-presented life-story book.
33. The local authority is clear about its responsibilities to care leavers. The local offer provides a strong base for care leavers to understand their rights and entitlements to support. Most care leavers have an assessment and pathway plan. However, the quality of these is variable, with many needing updating. The more recently drafted plans are stronger, but still too many are not good enough, making it difficult to track care leavers' progress, and for managers to hold workers to account for completion of objectives.
34. Despite these weaknesses in the assessment and planning, most care leavers are well supported by their social worker or young person's adviser to make good progress. Changes of workers and transitions between most teams are sensitively managed, with workers focused on building relationships with care leavers as they coordinate packages of support. However, transitions for disabled children start too late, leaving families unclear about future support and services.
35. Young people are supported to do well and access education, training and employment, with incentivised schemes targeted to support young people in higher education. Care leavers are encouraged to be aspirational and are offered additional chances to return to education. They value the high level of support they receive from 'Durham Works'.
36. The team around the care leavers is well tailored to the needs of individual care leavers. Care leavers' mental health needs are recognised and responded to, with a full range of professional support provided, including both universal and specialist commissioned mental health support services.
37. Care leavers are well supported to learn and develop their independence skills in order to help them to live independently and be more emotionally resilient. They are routinely provided with the opportunity to access important information about themselves, as well as documents, before they leave care.
38. Leaders recognise that there is still more to do to ensure that young people have timely access to suitable accommodation. However, care leavers are fully supported within the range of available placement options. Staying put is considered for care leavers, although the number who stay put is still relatively low. A detailed sufficiency plan is in place to address this issue, with new accommodation choices available in the near future. Where care leavers' placements are at risk or when there are concerns about their accommodation,

they are provided with support and opportunities to move into more supported accommodation or receive additional support to help them prepare for independence. The risk of homelessness is actively responded to. This includes support for those care leavers who experience numerous and abrupt endings to their placements to become settled.

The impact of leaders on social work practice with children and families: requires improvement to be good

39. Following the last inspection in 2016, there was a period where some services for children and families deteriorated. The JTAI in 2018 found that areas of priority action were needed in relation to the multi-agency response to children. The focused visit earlier this year found that although there was some improvement, weaknesses remained in relation to drift and delay, management oversight and case recording. Caseloads were high, and the restructure of children's services was not fully embedded.
40. There is a strong commitment to children's services within the council, and this has been demonstrated through significant investment in increasing workforce capacity both at a managerial and social worker level. This has led to reduced caseloads. A well-developed and detailed workforce plan has increased workforce capacity and created staff stability. Progression planning has resulted in teams having the benefit of different levels of experience and support, which has had a positive impact on morale and is starting to improve the quality of social work practice.
41. The restructure has now had more time to embed, and this is having a positive impact on practice. The number of changes in social workers who children have experienced has reduced, and integrated early help and locality teams are promoting better working together. Effective specialist services such as the pre-birth team and the supporting solutions services are making a difference to children and families, and services at the front door are now robust. An evidence-based practice model is supporting better identification and response to risk. The membership and structure of the senior leadership team have changed, and along with a new principal social worker role, this change is improving oversight of practice and accountability. However, despite an improving culture of learning, managers at all levels are not sufficiently self-challenging, and this is not helping them to address shortfalls in practice.
42. The introduction of a new electronic case recording system has been welcomed by staff and managers. It has transformed the performance information available in most areas. Managers' line of sight is improving, and this has improved compliance in most areas of performance. However, the system is relatively new and has not yet achieved full functionality to support managers' and leaders' grip on all areas of performance.

43. Leaders were not aware of some of the areas of improvement identified at this inspection, including weaknesses in practice in the children with a disability team, private fostering and homeless 16- and 17-year-olds. The checks and balances that are currently in place have not been sufficiently robust to identify this weaker practice. The local authority has made plans to address the shortfalls identified during the inspection.
44. Staff supervision and management oversight at all levels are not sufficiently challenging or reflective to improve the quality of social work practice further, and are not consistently effective in enabling staff to recognise deficits in practice. In some cases, managers focus on process rather than children's experiences. Audit activity is at times over-optimistic and needs to be more sharply focused on the experience of the child, but a strengthened quality assurance framework is embedding, has increased the regularity of case supervision, and is beginning to help managers and leaders understand what is happening at the frontline and identify where remedial action is required.
45. There has been improvement in some but not all areas identified at the last inspection. Strategy meetings are now well attended and recorded. The timeliness in the response to children and the gathering of children's views is much improved, and children are influencing their plans. A new quality assurance process is increasing the oversight of the quality of social work practice, and a new practice model has been implemented, although not fully embedded. This has improved the quality of services and practice for children in care and care leavers. Adoption services are excellent, and planning for permanence is improving for most children. However, children's assessment, plans, records of decision-making, management oversight and case supervision still require improvement to be good, particularly for those children in need of help and protection.
46. There are effective partnership arrangements and an improved and robust multi-agency response for children and families.
47. The senior leadership team is open to challenge. Senior leaders have responded positively to critical challenge from Ofsted and external consultants, and the pace of change in some areas in the last nine months has been significant. While senior leaders recognise that there is much to be proud of, they know that some practice remains too variable, and, for some children, needs are not fully identified or effectively met.
48. The previous director of children's services (DCS), who came into post following the SIF in 2016, was instrumental in laying the foundations for the positive changes that have taken place. A new DCS has now taken up post, following the retirement of the previous DCS at the end of August 2019. The chief executive is an effective advocate for vulnerable children, and is committed to improving children's experiences, including being the care leavers' champion. He has a clear line of sight to front line practice and provides effective challenge. He

attends social work practice meetings, shadows home visits and meets with front line practitioners to understand the issues that they and the families they work with face. He regularly meets with and uses the views of children and young people to inform service developments. This has, for example, resulted in an increase in access to council jobs. Children's participation within the services and influence at all levels is strong. There are numerous mechanisms to ascertain service users' feedback, such as surveys, collaborative audits, and through the children attending key meetings. Through this feedback, positive changes in services have occurred.

49. The council has a strong commitment to children's services. The council's lead member holds the senior leadership team to account. She is well informed about service delivery. She is effective at using performance data, listening to the feedback from staff, children and young people and seeking the views of other committee chairs such as those of corporate parenting and scrutiny.
50. The corporate parenting panel is effective and is maintaining good political and strategic governance of children in care and care leavers.



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Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
W: www.gov.uk/ofsted

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