Northumberland County Council

Inspection of children’s social care services

Inspection dates: 20 January 2020 to 31 January 2020

Lead inspector: Mandy Nightingale
Her Majesty’s Inspector

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Since the last inspection in 2016, the local authority has successfully delivered improved and good-quality operational practice in most areas of service provision, by means of thoughtful strategic planning and determined focus. As a result, children are helped, protected and cared for to a good standard.

Elected members and senior leaders have ensured that children receive a robust and consistent response that meets their needs when concerns are raised. Good partnership work and a wide range of effective resources provide early help services that are a strength. Children are well protected and engaged in effective direct work with social workers. Managers and social workers have been successful in ensuring that children’s voices can be clearly heard. For children with additional needs, practice is child-focused and of a good quality. Edge of care services are effective, meaning that children only come into care when they need to. Children looked after benefit from good standards of care, are well supported in their education and live with carers who look after them well. Prior to this inspection, senior leaders were aware that more needed to be done to ensure that all children’s assessments and plans are of good quality.
Significant financial investment by the council has resulted in an increase in social work capacity, ensuring that social workers have more time to spend with children.

What needs to improve

- Quality of the written plans for all children.
- Quality of analysis in some assessments of impact on children.
- Quality of the recording of management oversight in supervision records.
- Quality and sensitivity in the way that later life letters are written for adopted children.

The experiences and progress of children who need help and protection: good

1. Early help is of good quality and engages children and families in purposeful assessments that recommend what interventions and services will best meet their needs. As a result, children’s experiences improve and the need for statutory intervention is avoided.

2. The ‘front door’ service ensures effectively that children’s needs are identified promptly. Partner agencies provide clear information when referring concerns about children, and this supports decision-making in the triage and multi-agency safeguarding hub (MASH) teams. Decision-making at the first point of contact is robust and proportionate to need, signposting children and families to the most appropriate service.

3. Partner agencies work well together at the front door and this means that thresholds are applied appropriately, the right decisions are made, and next steps are well considered. The need for consent to gather and share information is fully understood, but the rationale for overriding the need for consent is not always clearly recorded.

4. When child protection concerns are identified, they are swiftly progressed for consideration at a multi-agency strategy meeting. Decisions and actions to safeguard children are well considered and result in prompt visits to children and families. Responsive out-of-hours and designated officer services also work effectively to reduce risks for children.

5. Assessments of children’s needs are completed within a timescale that matches the urgency and complexity of the child’s needs. Children are seen at
a frequency that meets their needs. Assessments consider the needs of children as individuals, especially in large families, detail their histories and use the local authority’s well-embedded practice model to identify key risks and protective factors. Most recognise the impact on the child’s lived experience. In some cases, the analysis does not address all identified concerns or assess their impact on the child’s daily life. Children and families are provided with additional support through a wide range of resources once a need has been identified. This means that children and their families do not have to wait until the end of an assessment to access these resources.

6. Disabled children receive a good service. Strong and enduring relationships mean that children’s needs are identified, and the provision of support packages improves their circumstances. The alignment of children’s education, health and care plans (EHCPs) with other plans is beginning to show positive impact. This means that professionals are increasingly considering children’s needs holistically in multi-disciplinary reviews. When safeguarding concerns are identified for children, these are well managed by experienced and skilled social workers.

7. Social workers see children regularly and in accordance with their needs. They use a range of direct work tools to engage and build trusting relationships with children and their families. This supports social workers to understand the child’s wishes and feelings and how their circumstances impact on their daily life.

8. Child protection conferences, core groups and child in need meetings work well. A strong partnership approach to planning reduces risks, and improves the experiences for the vast majority of children. The recorded plans for children do not always fully reflect the support provided to children and their families. The difference between needs and outcomes is not always sufficiently clear; actions are overly generalised and most lack a completion date. This means that families cannot always be clear about what is expected of them. Children’s plans do not always make clear what the contingency plan is if insufficient progress is made.

9. When concerns about children escalate, families are made aware of these through well-crafted and clearly written letters before proceedings. The local authority’s legal gateway meetings are a strength. The completion of specialist assessments and interventions is closely managed. This means that decisions to initiate legal proceedings and to secure permanence decisions for children are timely. The judiciary and Cafcass have high regard for the work of social workers, managers and legal representatives.

10. When 16- and 17-year-old young people present as homeless, services are swiftly put in place to meet their needs. Young people are made aware of their rights and entitlements in relation to accommodation and care. Not all
young people receive an updated assessment of their needs in order to
determine the range of options available.

11. Children who are electively home educated are regularly monitored by the
virtual school and supported if their circumstances change. The virtual school
is aware of all children reported as missing from education and works closely
with the social care ‘front door’ service and the effective Missing, Slavery,
Exploitation, Trafficking panel (MSET) to monitor and track these potentially
vulnerable children. This means that consideration is given to any additional
vulnerabilities that children present, and appropriate action is taken to reduce
and manage risks.

12. Children who go missing or who are at risk of exploitation from others receive
a prompt multi-agency response. This includes well-attended strategy
meetings, referral for consideration at the MSET and the offer of specialised
support to help young people recognise and reduce risks. Better informed
strategic planning is leading to improved, targeted and focused work,
including disruption activity.

13. Children and families at risk of family breakdown benefit from responsive and
intensive edge-of-care services. Work by these services is creative and
flexible, building on the family’s strengths to support them to stay together.

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

14. Children and young people come into care in a timely way when it is in their
best interests. Management oversight, including by senior managers, is clear
and provides guidance that informs the initial plan for the child or young
person. This helps social workers ensure that children’s needs will be met at
this early stage of coming into care. However, for a small number of children
there are missed opportunities to intervene earlier when concerns of
historical, chronic neglect are present.

15. Social workers know the children they work with well. Most children build
trusting and enduring relationships with their social workers, who have
worked with them for a long time. Social workers engage children in a range
of age-appropriate direct work, and this supports children to share their views
and contribute to care planning.

16. Assessments of children’s needs, parenting and carer assessments are good.
They include children’s wishes and feelings and provide direction for care and
permanence planning. Permanence is swiftly progressed for most children.
However, this is not always well recorded on the child’s case records.
17. The multi-agency Northumberland adolescent service (NAS) focuses on children in care who are 14 years old and above, as well as care leavers. The team supports these young people with well-considered interventions that meet their needs promptly and sensitively.

18. Children and young people’s views are sought and gathered well, with increasing use of the mind of my own (MOMO) app. This helps to provide professionals with an understanding of the child or young person’s wishes and feelings. Children and young people’s views contribute to regular and effective multi-agency reviews of care planning. Independent reviewing officers (IROs) maintain regular oversight and will challenge social workers and managers when required.

19. Some children’s care plans are well written, making them easy to understand for the child and their family, and are an effective mechanism to hold professionals to account for their responsibilities. Too many plans lack sufficient reference to permanence, and, in some, needs and outcomes are often confused with timescales that are unclear. Evidence of strong partnership working and social workers’ understanding of what needs to happen mitigates the risk of children’s written care plans not yet being of a consistently good quality.

20. Most children live with carers who provide them with a good quality of care. An increasing number of children are living in stable, secure, long-term homes, and the local authority has recently begun to focus on celebrating the ‘match’ for children with their long-term foster carers.

21. Children are supported to see their family and friends when it is safe for them to do so. Their views are well considered when circumstances change, and existing arrangements are reviewed. Children are supported to actively engage in a range of leisure activities outside of the home and school environment. This often reflects the aspirations that social workers and carers have for children and encourages them to broaden their experiences.

22. Children who are in care are receiving an education tailored to meet their individual needs. This is robustly overseen by the virtual school team. Children who are electively home educated are regularly monitored by the virtual school and supported if their circumstances change. When children’s circumstances change, and they need to move home, the virtual school is a strong advocate for the child’s need to maintain stability in their education. The multi-disciplinary virtual school team means that children can access additional specialist services without delay.

23. All children in care have an up-to-date, regularly reviewed personal education plan (PEP). These are of good quality, based on both a thorough assessment and the views of the child. PEPs give a thorough insight into children’s wider development and their involvement in extra-curricular activities. Older children
aged 16–18 are encouraged and supported well to access and maintain education, employment or training opportunities.

24. Improvement in the quality and timeliness of foster carer recruitment and assessment is ensuring that there is a sufficiency of numbers and types of carers for children in Northumberland. Comprehensive training is provided to prepare foster carers to care for children who may have additional vulnerabilities as a result of childhood trauma. Foster carers spoke highly of the support they receive from their supervising social workers. However, the recording of their supervision lacks detail and does not reflect discussions that take place. Nor does it set out why particular decisions are made about the future care of children.

25. When children’s permanence plan is adoption, comprehensive tracking ensures that children are effectively and swiftly matched with prospective adopters. Matching is well supported by sensitive and detailed child profiles. Not all child permanence reports sufficiently analyse the impact of traumatic early childhood experiences on the child’s emerging developmental needs. Thoughtful and effective child appreciation days give prospective adopters a chance to meet with important people in the child’s life, such as nursery teachers and past and present foster carers. Children’s well-written and personalised life-story books provide them with an age-appropriate, child-centred explanation of their journey to adoption. Later-life letters that are prepared for children to read when they are older are not always written as sensitively.

26. Care leavers benefit from support workers who visit them regularly, understand their needs and help coordinate support and interventions that improve their lives. This good work is clearly evidenced in care leavers’ case records.

27. All care leavers have a pathway plan that contains a good sense of young people’s wishes and feelings. Despite this, they are not always sufficiently clear about agreed actions or timescales, and this can limit their effectiveness. Care leavers are supported to develop appropriate independence skills and live in suitable accommodation which meets their needs.

28. Not all older care leavers aged 19 to 21 are accessing education, employment or training, despite the persistent efforts of leaving care support workers. Health passports for care leavers are not always of a sufficiently good quality and do not support young people to have a full understanding of their health histories.
The impact of leaders on social work practice with children and families: good

29. Elected members and senior leaders in Northumberland work well together, with a child-focused approach that improves the lives of children who need their services. These strong professional relationships support a culture of openness that allows for both constructive challenge and a high level of support. The leadership team knows children’s needs well and is aware of the areas where the greatest demand for their services are located. This understanding is clearly articulated in a detailed self-assessment and supports the local authority to accurately target resources. The impact of this is demonstrated in the improvements to the quality of practice. This, in turn, has benefited the lives of children and families.

30. Evidence demonstrates that senior leaders have responded without delay to the recommendations and areas for improvement identified in inspections. This continued focus had led to positive development in service areas that include the creation of one ‘front door’, improved early help, the inclusion of the disabled children’s team in children’s social care, the development and integration of the NAS, and in increasing the number of social work posts. All of these developments are of direct benefit to children and families.

31. Senior leaders receive comprehensive and analytical performance information that ensures oversight both of strengths and areas for development in frontline practice. In early help services, a consistent tool or system for measuring progress would enhance senior managers’ views of the difference that early help is making to the experiences of children and families, and of how best to direct future service development.

32. Scrutiny of services and performance through the family and children scrutiny committee and the corporate parenting advice group (CPAG) has improved and now offers a strong forum for challenge. The CPAG actively engages with ‘Voices Making Choices’ (children in care council) to hear first-hand about the experiences of children who are in care, as well as those of care leavers.

33. Significant financial investment by the council has resulted in a strong and valued academy for newly qualified social workers that oversees their assessed and supported year in employment (ASYE). This has enabled a culture of high support, protected caseloads and enhanced learning opportunities for social workers. Newly qualified social workers are trained to practise in accordance with the local authority’s chosen social work model that underpins some very positive engagement and interventions with families.

34. Members and leaders recognised the need to increase the number of social work posts across the county and successfully secured funding. This has resulted in a reduction of social workers’ caseloads, allowing them to spend...
more time with children and their families and engage in purposeful and effective direct work.

35. Leaders make good use of the improved performance and quality assurance framework. Learning from audits, practice days and complaints enables leaders to review progress and the impact of practice on children’s experiences effectively. A recent review of auditing has led to the focus of future audits moving from one of compliance to one of quality. Early indicators are that this new model provides an improved focus on identifying learning opportunities for staff, but it is too soon to evidence any direct impact on children’s experiences or outcomes.

36. Leaders have created a strong culture of learning and development for social workers. Specialist bespoke training packages, alongside more generalised training, are provided and lead to a greater understanding of the complex issues that children and families live with. Social workers can clearly articulate how this learning impacted on their practice and positively changed the way they consider parents’ past experiences when they are assessing their parenting capacity.

37. The effectively introduced deputy team manager and advanced practitioner roles have improved the management oversight of practice and also strengthened the retention of social workers by providing an alternative career pathway for those not wishing to progress to a management post.

38. In response to the need to improve services for care leavers, senior leaders doubled the numbers of staff in care leaver teams, as well as strengthening senior management oversight. This, combined with an enhanced focus on engaging care leavers in shaping their own services and a broadening of the offer to young people, has helped to significantly strengthen work with care leavers. Some of these measures, such as the ability to continue IRO scrutiny post-18 or the planned ‘backpack of resources’, are very recent, so evidence of impact is not fully realised.

39. Managers at all levels have good oversight of practice. Social workers receive valued and regular supervision, and report that they benefit from reflective discussions about their casework. However, written records for most supervision do not detail the rationale or reflection that underpins decisions in care planning, and they are often limited to a list of updates about the child’s circumstances and tasks to be completed. Social workers report that they feel safe working in Northumberland.
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