

Ofsted
Piccadilly Gate
Store Street
Manchester
M1 2WD

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



1 December 2021

Merlin Joseph
Strategic Director, Children's Services
London Borough of Lambeth
Civic Centre
6 Brixton Hill
London SW2 1EG

Dear Ms Joseph

Focused visit to Lambeth local authority children's services

This letter summarises the findings of the focused visit to Lambeth local authority children's services on 27 and 28 October 2021. Her Majesty's Inspectors for this visit were Nick Stacey and Anna Gravelle.

Inspectors looked at the local authority's arrangements for services delivered at the 'front door'.

This visit was carried out in line with the inspection of local authority children's services (ILACS) framework. Inspectors were on site, though used video calls for discussions with some local authority staff.

Headline findings

The integrated referral hub (IRH) continues to provide an effective front door into children's social care services. This maintains the positive findings of the previous inspection of February 2018. Children who have been harmed, or are at risk of significant harm, are immediately identified and appropriate safeguarding measures are instigated without delay. Strong and cohesive multi-agency arrangements in the multi-agency safeguarding hub (MASH) enable relevant background information about children and their families to be gathered and evaluated quickly. Experienced managers review this information swiftly and make clear and balanced decisions regarding any further steps required.

Assessments of children and families are completed promptly in accordance with the complexity of their individual needs. This phase of work with parents and carers often helps them to better understand any concerns and identifies if further help and protection for children is needed.

What needs to improve in this area of social work practice?

- The analysis and impact on children and their families of repeated assessments to better understand why earlier interventions have not achieved sustained improvement in children's circumstances.
- More widespread evidence of the application of the local authority's preferred practice model.

Main findings

Many frontline staff in the local authority are of Black African or Black Caribbean heritage. These communities have been particularly affected during the COVID-19 pandemic. Social workers reported that they have been well supported when they have faced difficult personal circumstances. Senior managers quickly implemented remote working arrangements at the onset of the first lockdown, and staff adapted quickly. Managers have reduced staff isolation through providing consistent support and regular communication. Most staff are still working remotely, but more are expected to start attending the office during the final months of 2021.

All contacts into the IRH about children and their families are overseen by two experienced team managers. They make well-informed decisions about the required next steps. If an onward referral to the MASH is recommended to gather information from other agencies, consent is routinely sought from parents and carers. When concerns about children are serious and urgent, managers record the reasons why they have overruled the requirement to seek consent.

New referrals are carefully prioritised each morning at multi-agency daily intelligence briefings in the IRH. These meetings facilitate effective and timely responses to children who may have been exposed to domestic abuse or overnight police attendance at their homes for other reasons, such as parental substance misuse. Flexible and seamless partnership arrangements in the IRH mean that children and families identified as needing support from early help services are referred for these services promptly and without delay.

When children need urgent help and protection, out-of-hours social workers from the emergency duty team (EDT) intervene appropriately. Unaccompanied asylum-seeking children arriving in the local authority overnight are placed in suitable accommodation with emergency foster carers. Information is routinely and promptly passed by EDT social workers to the IRH each morning.

Immediate child protection concerns are urgently 'red flagged' by contact staff and fast-tracked, without delay, to IRH managers for urgent decisions. Strategy meetings are quickly convened to consider if child protection enquiries are required, through timely communication with the child assessment teams (CAT). Strategy meetings are well attended by the agencies involved with children. This enables immediate risks about children to be understood within the wider context of current and historical information. Immediate safety planning and steps for subsequent child protection

enquiries are clearly recorded. Appropriate joint enquiries with the police are carried out when deemed necessary.

Highly developed operational partnership arrangements in the MASH ensure that information is gathered swiftly and appropriately summarised. Social workers in the MASH gather relevant information about children from a wide range of co-located physical or virtual partner agencies. Prompt and well-considered social work recommendations and management decisions are clearly recorded. This phase of front door work means that decisions on whether further assessment, help and protection are needed are based on a broad intelligence base from the agencies who are currently or have previously been involved with children.

Child protection enquiries are completed quickly and records of them are detailed and clear. Children are mainly seen on their own, and their experiences and worries are sensitively considered. When necessary, early challenging and difficult conversations are held with parents. This demonstrates that the safety and well-being of children are the primary focus. Medical examinations of children are arranged promptly when they are required. Balanced management decisions are recorded following the completion of enquiries that explain the reasons when an initial child protection conference is required or is not deemed necessary.

Children aged 16 and 17 years of age who are at risk of homelessness due to strained family relationships have received improved support since the previous inspection. Comprehensive joint assessments, involving social workers from a dedicated team, are conducted with housing officers. Children who cannot return home are placed in suitable emergency supported accommodation while assessments proceed. Commissioned mediation workers quickly engage with families to explore if children can safely return home. Children are encouraged to voluntarily enter the care of the local authority and receive persistent and diligent social work support when they choose not to do so. Some children decide to become 'looked after' later when they better understand the benefits of doing so.

Social workers in the CAT teams complete informative and evaluative social work assessments of children's unmet needs that identify any harm they may be experiencing. Assessments skilfully draw out strengths in families. Social workers are empathetic to entrenched parental difficulties. They exercise appropriate caution in not allowing complex adult needs to overshadow the primary importance of children living in families where they are safe and where all their daily needs can be consistently met.

Some assessments generate significant positive changes in parental behaviours and rapid improvements in children's experiences. The damaging impact on children and their mothers through experiencing domestic abuse is well understood and sensitively addressed. In some cases, proactive and decisive protective interventions with fathers and male partners appropriately locate responsibility for protecting children on perpetrators. Women are offered prompt support by an accessible and prominent domestic abuse service.

A lack of reflection and curiosity in some assessments results in a failure to explore why previous interventions by children's social care have not achieved enduring improvements in children's circumstances. Some children have been the subjects of repeated referrals and assessments, often over periods of many years. In some of these cases, social workers merely record these recurrent episodes and do not sufficiently analyse why these repeated patterns continue. These children and their families experience too many unnecessary assessments and do not receive well-targeted help that leads to enduring improvements.

Serious youth violence (SYV) and the associated dangers of gang affiliation are highly prevalent in work coming through the front door. This predominantly, although not exclusively, affects Black boys. Sadly, children frequently sustain life-threatening knife injuries and loss of life. Social work with children and their families in this field is very difficult and sometimes overwhelming and upsetting for frontline staff. Leaders and managers are well-informed about SYV and are refining and strengthening strategic and operational responses. Plans are in development to provide a borough-wide public health approach to attempt to intervene much earlier with vulnerable children at potential risk.

Child-centred decision-making and appropriate clear directions for continuing work are provided through regular management oversight across the front door. Team managers had reflective discussions with inspectors about decision-making in a demanding, fast-paced service. They learn from a small number of decisions that they might, with hindsight, have made differently. Social workers in the CAT teams completing assessments receive consistently thorough and well-recorded management oversight. Decisions to hold initial child protection conferences or recommending child in need plans are clear and well founded. Children are not unnecessarily placed on child in need plans if their families are already engaging with early help and universal support services that address their children's primary needs.

Social workers' workloads, although highly complex and demanding, are manageable. Their caseloads feature many children at acute risk and with highly complex needs. Many social workers are skilled at building early relationships with children during the early stages of engagement with their families, often in adversarial and stressful conditions. This enables some children to share difficult and sensitive information about their lives. Most social workers appreciate the training they received in a relationship-based approach of social work with families. Social workers do not consistently evidence the use of direct work tools with children in their assessments. Social workers and managers at the front door do not use systemic practice, despite this being the local authority's preferred model of practice.

A large minority, comprising 40% of social workers, are temporary staff, indicating a degree of fragility in the frontline workforce. However, many of these staff have worked in Lambeth for long periods. Some social workers employed by agencies are intending to apply, or have successfully applied, for permanent positions. Social workers in their assessed and supported year of employment, and those who are newly qualified, are offered structured workforce development support. This provides

a plentiful supply of newly qualified staff. Continuous recruitment programmes try to attract more experienced social workers, and career advancement opportunities encouraging social workers to remain in practice have been introduced.

Senior managers have an informed understanding of the quality of social work practice in the front door. They have a realistic plan to achieve consistently solid practice standards across the children's service. Quality assurance work is being developed further as a major cornerstone of this imperative.

Ofsted will take the findings from this focused visit into account when planning the next inspection or visit.

Yours sincerely

Nick Stacey
Her Majesty's Inspector