

Inspection of Milton Keynes local authority children's services

Inspection dates: 25 October to 5 November 2021

Lead inspector: Maire Atherton, Her Majesty's Inspector

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

Since the previous full inspection in 2016, while there have been improvements in some areas, this is not the case in all. The lack of focus by corporate leaders on particular areas of standards and practice means that some vulnerable children and families are not receiving services that are consistently good. Milton Keynes has experienced capacity issues in some social work teams, compounded by an increased demand due to COVID-19 and difficulties recruiting agency staff during the period of disruption caused by the pandemic. This has resulted in some delays in allocating social workers to families, as also found at the focused visit in October 2020.

While some of the recommendations from the 2016 inspection have been addressed, some areas of practice remain as areas for improvement. Senior leaders and elected members do not have a wholly accurate view of practice and were not fully aware of all the areas for improvement identified within this inspection. This, combined with the impact of the pandemic, means that there has not been sufficient change for some vulnerable children and families.

There is a strong ethos in Milton Keynes of supporting children early and keeping families together safely, known as the 'golden triangle'. This practice, across the partnership, is underpinned by a strong investment in and commitment to early help services, which are very well developed and provide effective support to many children and families.

What needs to improve?

- The rigour of the local authority's self-evaluation and the quality and breadth of performance information informing this.
- Timely allocation of social workers at the point of transfer between teams or when social workers leave.
- Oversight of children in need plans by qualified social workers.
- The consistency of the quality of assessments and plans for children in need.
- The support and management of children who are privately fostered.
- The quality and frequency of supervision and support of foster carers.
- The understanding and application of placement with parents regulations and permanence decision-making for these children.
- The clarity and implementation of the care leavers offer from 18 to 25.

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

1. The quality of practice with children in need of help and protection remains too variable. In most cases, good work is helping to improve children's circumstances and no children were found to be at immediate risk of harm. However, for a minority, the quality of assessment and planning is not of a good standard. Initial decision-making is robust but the considerable increase in contacts and referrals has led to some delays in the allocation of social workers to families when moving to planned intervention for children in need. There are substantial weaknesses in the arrangements to help and protect privately fostered children.
2. Social workers use strong systems to promptly progress all initial contacts in the multi-agency safeguarding hub (MASH). Early management decision-making is prompt and suitably risk-assessed, and action is taken quickly where necessary. This includes responses by the out-of-hours team, which also has effective engagement with partners to agree appropriate actions to safeguard children. Social workers complete extensive enquiries to inform recommendations that are in the child's best interests. However, an unintended consequence of these extensive enquiries means that some children can experience a delay of up to two weeks before a recommendation is made and then agreed by the team manager. This results in delays in the starting of assessments for some children and families.
3. The effective range of early help services, including children's centres, provides adults and children with the support they need. Children and families receive many of these services swiftly, as workers embrace the 'think family approach'. Most staff can recognise the impact on children of neglect, parental mental ill health, domestic abuse and substance misuse. To address these concerns, and others, at the earliest opportunity Milton Keynes has created and funded

specialist services under the umbrella of the Family Assessment and Support Team (FAST) to meet children and family's complex needs. These services, some of which provide families with support at weekends, achieve a positive impact on reducing risks for children and improving their day-to-day lives. The well-established use of family group conferences has had a significant impact in supporting children to remain in the care of their families. Milton Keynes has also invested in the Family Drug and Alcohol Court (FDAC). Some parents said that the support they receive through FDAC is 'brilliant' and they feel confident that this will enable them to have better outcomes for them and their children.

4. Social workers confidently complete child and family assessments using the preferred model of practice. Assessments of mothers and their unborn babies convey a very real sense of the mother's voice and opinion, using their own words to describe their view of their situations. Almost all assessments engage children well and their voices inform the subsequent work. Direct work is mostly creative and purposeful. Despite this, the quality of assessments is variable. Better assessments include family histories, involve relevant professionals and appropriately identify risk. However, weaker assessments are not always clear about the current circumstances and do not consistently show an analysis of the impact on the child. This means that subsequent decisions or plans are not always based on comprehensively written assessments of risk and need.
5. When an assessment recommends a statutory intervention, some children and families experience a delay in finding out which social worker will be working with them. This was also a finding at the focused visit in October 2020. In response, the senior leadership team successfully made a business case for, and appointed to, a fourth family support team. However, the impact of vacancies in the family support teams means that there are still delays for some children in need between the end of the assessment and the allocation of a social worker to a family. This prevents the multi-agency group swiftly coming together to focus on reducing risks and progressing the longer-term planning for children. These delays also occasionally happen when a social worker leaves a family support team, and their work is not reallocated promptly.
6. When child protection concerns arise, risks to children are mostly responded to promptly. Well-attended strategy meetings are almost always convened in a timely way. Comprehensive information is recorded, and meetings result in appropriate actions being allocated and implemented. Initial and review child protection case conferences are well attended by partner agencies, with children over 10 years old supported by an advocate to express or represent their views. Appropriate decisions about next steps are made by the chair and those attending.
7. The majority of child protection plans are focused on the children's needs and have clear, measurable actions that are understood by parents and professionals and are reviewed in a timely way. For some children in need, their plans often contain generic actions, are overly focused on adults and lack measurable timescales on the identified actions. This makes it difficult for

professionals and families to review and track the reduction of risk and progress for children. These weaknesses are mitigated by the provision of timely services in FAST and early help services where the work is specific, and so children often receive effective ongoing support that is not outlined in their plan.

8. Most disabled children have their voices heard and views gained in a manner that reflects their communication style. Disabled children in need and their families benefit from well-considered care packages that are reviewed annually. Disabled children on child protection plans benefit from interventions that support a move to a child in need plan.
9. Partner agencies have a shared understanding with children's social care of thresholds for exploited and missing children. This is strengthened by the collective strategic approach from senior leaders in partner agencies. Not all children at risk of exploitation have appropriate direct work undertaken to reduce risk.
10. Children who go missing are closely monitored by workers in the MASH. Children are offered a return home interview to share their experiences, which many accept. Workers are persistent in their efforts to engage with those who refuse return home interviews. Effective multi-agency procedures ensure that the risks to children are collated and analysed to inform wider strategic planning.
11. When concerns for children's safety and well-being increase, appropriate consideration is given to using the Public Law Outline process. Once children are in this process, they and their families are well supported to effect change and reduce risk. If this is not successful, then concerns are appropriately escalated to proceedings.
12. There are mainly effective systems to monitor and track children who are missing education. The number of children who are electively home educated (EHE) rose during the pandemic, reflecting the national trend. Children who do not have a social worker but do have an education, health and care (EHC) plan are monitored effectively through six-weekly checks by specialist teachers or home visits if deemed appropriate. Children subject to children in need plans who are EHE are not monitored through education services and this means there is no specialist overview and review of their education plans. Their welfare is monitored and safeguarded by the allocated social worker.
13. Allegations of abuse, mistreatment or poor practice by professionals and carers are managed and monitored efficiently and effectively.
14. There is not a full understanding of what arrangements for children constitute private fostering. Some assessments take too long, do not include children's views or consider all the areas required. Some children have been left for too long in arrangements that do not sufficiently safeguard or promote their welfare.

The experiences and progress of children in care and care leavers: requires improvement to be good

15. The experiences and progress of some children in the care of Milton Keynes are not consistently good. The work of the fostering service has recently been scrutinised by leaders and found wanting. A development plan has been drafted. There are many strengths in the work with care leavers aged up to 21 but there is a lack of clarity provided to those aged 21 to 24 about their rights and entitlements. Too many children on care orders placed with their parents do not have decisions about permanence made quickly enough or timely action taken when a decision to apply to revoke the order has been made.
16. When children come into care, there is mostly timely and suitable consideration as to whether their needs can be met within the family network. When children are moved in an emergency, the management oversight and rationale for these placement decisions are not routinely evident on the child's record. This does not help a child understand their care history.
17. Most children benefit from well-considered early permanence planning. However, children subject to a care order who live with their parents do not receive the required assessments, planning, management oversight, decision-making and subsequent actions necessary to secure their permanence arrangements, for example by an application to revoke a care order.
18. Most children live in homes that are right for them, where they have achieved stability in their lives and made progress. For some children, the information that is used to find a home for them does not always capture their needs and vulnerabilities well. This means that these needs are not routinely well considered when looking for the right place for a child to live. This leads to children moving in an unplanned way and prolongs the search for a place that they can call home. On rare occasions, the authority has placed children in unregistered children's homes when it has been unable to find a suitable legal alternative. These cases are subject to close management oversight and providers are suitably encouraged to seek registration.
19. Many children's needs are well considered in their reviews by independent reviewing officers who know them well, gain their views and identify actions to progress children's plans. Nevertheless, these actions have not been addressed for some children. The pandemic has meant that others have not had their care plans reviewed effectively and for a minority, their reviews have not taken place on time.
20. Some children benefit from stable and effective relationships with their social workers, who know them well. Others have experienced changes in social worker and so are yet to form these positive relationships. Not all decisions on visiting frequency are sufficiently child-focused. Some social workers engage with children using age-appropriate direct work tools and activities, which enables children to explore their experiences. Other children do not experience

direct work from social workers and the records of statutory visits do not convey a sense of meaningful engagement with children.

21. Those children who have accessed life story-work have benefited from the exploration of their identity, history and stories. However, too many have not had this opportunity because there is a high demand for this service and a lack of capacity to provide it.
22. Family time is promoted effectively, and all children are encouraged and meaningfully supported to maintain links with family and friends.
23. Children are not routinely offered advocacy or access to an independent visitor and so they do not have the opportunity to have support, or their views independently represented at meetings. Some care leavers do access mentoring services that help them develop life skills.
24. The local authority celebrates children's achievements and organises a variety of events and activities that children and young people are invited to attend. These activities enable them to participate in and contribute to wider service improvement for children in care and care leavers. These include True Triumph, at which inspectors had the opportunity to meet with children and care leavers at a venue and type of celebration event chosen by them, and the New to the UK Football Group for unaccompanied asylum-seeking children. Members of the Raise Your Voice group for children in care and care leavers say that they feel heard by senior leaders and managers.
25. Children are helped and supported when there is an identified risk of harm to them outside their homes. The effective multi-disciplinary missing and exploited hub service provides children with an intensive level of support tailored to their individual needs, and for some children this reduces risks for them.
26. Most children and young people's physical and mental health needs are being assessed and met through support from specialist services, which is having a positive impact on their well-being. However, some children are not receiving emotional support quickly enough. Care leavers do not routinely gain access to their health histories. There is a plan to address these issues but the impact is not yet evident.
27. While some children are achieving success in their education, there is an overall corporate lack of ambition for children in care. Not all have appropriate packages of education and there is a lack of evidence of effective support from the virtual school. Children's views are not always considered when planning takes place. The work of the virtual school with young adults leaving care who are not in education, employment or training is not strong enough to promote their engagement effectively. Those who are in education, employment or training are well supported to maintain this, including those accessing higher education.

28. Senior leaders and managers have recognised that work is needed to improve the fostering service. The quality of support provided to foster carers is variable; some are not regularly visited or supervised. This does not provide carers with the support or direction necessary to care for children to the best of their ability. Some foster carers' annual reviews are not taking place on time. This delays the opportunity to fully evaluate the work of foster carers considering children's views, carers' use of the relevant training available and determine their suitability to continue fostering.
29. Social workers' assessments of foster carers are of good quality. However, they are not all completed in a timely manner. For a few children, this means that they are living in unapproved arrangements within their family networks. Some foster carers are caring for children outside their approval status when decisions to place children are made, without recourse to the fostering panel or the agency decision-maker for a change of approval. Children are then placed in homes that have not been fully assessed as able to meet their needs. The new panel chair has identified changes necessary to develop the panel. These include the recruitment of new panel members to increase the breadth of expertise and experience and an update and review of documents and guidance for the fostering team, with the aim of reducing the number of applications that are deferred. These changes are in the early stages of being implemented.
30. Adoption is carefully considered for all children where it has been decided that they are unable to return home. Work with children is sensitively planned and re-evaluated where necessary. The appropriate assessments are completed to ensure that decision-making is well informed regarding plans for brothers and sisters as to whether they should be together or apart.
31. The local authority has a variety of effective systems in place which support its staff to have good-quality oversight of the work completed by its regional adoption agency. Prospective adopters are thoroughly assessed and trained, which gives them good insight and understanding through their preparation. They are also well supported through the matching and adoption processes. The clear recruitment strategy supports the agency in securing a variety of forever homes for children, in which adoption is the agreed plan.
32. Some children's records and documents are written directly to the child and these will benefit children in their later years when they wish to read their records, although this is not yet consistent practice.
33. Milton Keynes is ambitious for care leavers, as set out in the care leavers' offer. However, some of these ambitions have been stalled because of COVID-19, for example family group conferences.
34. Care leavers say that they benefit from committed social workers and personal assistants who know them well. Their work with young people often helps them to reduce risks and improve their lives. Pathway plans are generally written well and include young people's input, and they are regularly reviewed.

35. Young people who are approaching the age of 21 years are not routinely given the opportunity to continue working with personal advisers. It was not evident to inspectors that all young people are informed about their rights and entitlements from 18 to 25 years of age.
36. Care experienced young people live in a variety of settings that mostly meet their needs. A very small number of young people who need emergency accommodation are put up in bed and breakfast establishments, when they have refused an alternative offer. Leaders recognise that this is not suitable accommodation and are developing an enhanced offer to avoid use of this as a temporary option.

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

37. While there is evidence of some good practice, there is also evidence of insufficient leadership oversight and direction to achieve service improvement for some children and families. The local authority self-evaluation was over positive about services overall and omitted areas that managers were working on to secure improvement. There are also additional significant weaknesses identified by this inspection which leaders and managers were not aware of.
38. Systems, performance data and other processes that should support the identification of areas for improvement have not proved as effective as they should be. Senior leaders have recently taken steps to address shortfalls in the fostering service, but these shortfalls have existed for too long without effective action being taken. In addition, there are further shortfalls that senior leaders were not aware of, for example private fostering, timeliness of child care reviews and the lack of support for care leavers over 21 years. This has meant that elected members have not had a wholly accurate understanding of practice quality and the areas of work that have development plans in place.
39. The sufficiency and suitability of placements available to children are significant challenges in Milton Keynes. The number and availability of in-house foster carers have decreased in the past 18 months, as foster carers have resigned for several reasons, including COVID-19. As a result, some children are living further away from Milton Keynes than the local authority and children would like. A new fostering manager, seconded from within the service, is buzzing with creative ideas to attract new carers. The newly appointed head of commissioning and her team are also thinking widely about how to engage with providers to improve the range of choice of places for children to live.
40. Challenges in management and staff capacity to undertake audits as requested are evident; this means that the number of audits is not as high as hoped for. Audits are not currently robustly evaluating practice. The development of quality assurance processes, described as 'a work in progress' at the focused assurance visit a year ago, had stalled as the impact of COVID-19 continued. Work has started on a recent plan for the development of the quality assurance

service, using learning from the South East Sector Led Improvement Programme partners.

41. All staff, including senior leaders, strive to gain the views of children and their families in their interactions with services. Audits include actively seeking the views of parents and children, and the voices of children are heard at the corporate parenting panel in which they are active participants.
42. As at the last visit, there remains considerable variation in management oversight and supervision of practice. Recent, stronger records show management decision-making and oversight of children's cases that is well analysed, takes account of history and current circumstances and provides children with information that will contribute to their life story effectively. In other records, it is not clear why decisions have been made and they do not include reflection of the impact of the support or intervention so far. This means that written records do not consistently provide the depth of information that is necessary to understand the decisions made about children's lives. There are also differences in the frequency of supervision across the service, without a clear rationale for this. However, staff are positive about the quality of their supervision and many can articulate how it supports them to engage with children and families and reflect on their next steps. They also appreciate how accessible and available managers and senior leaders are across the service.
43. There is a strong commitment to the retention of staff. This is demonstrated by a comprehensive training programme, a clear progression framework and active encouragement of and support for staff development. Staff were unanimously positive about the training and development opportunities offered, which are tailored to their needs. Overall, there has been stability in the staff team but the COVID-19 effect has seen a slight increase in the turnover in the last year in frontline management. This has been covered by staff stepping up into interim positions while posts are advertised.
44. Recruitment to vacant posts has been a substantial challenge. There has been a concerted effort to address this, for example increasing the number of preferred recruitment agencies, but this has not been successful in attracting the experienced calibre of staff wanted. As a result, there is not the full social work capacity necessary to fully deliver the clear vision for the service. The local authority, as part of the teaching partnership with neighbouring local authorities and the University of Bedfordshire, is trying to improve recruitment in the local area; a social work conference is planned, for example.
45. There is effective joint working with the teaching partnership. Social workers in their assessed and supported year in employment, social work apprentices and Step Up to Social Work students are supported effectively by mentors, practice educators and the Signs of Safety lead, and many stay with the local authority after qualifying.

46. There are some cases where social work apprentices and social work assistants are named as the allocated worker for children in need. They are responsible for the statutory visits, chairing child in need plan reviews and general day-to-day management of the case. The rationale for such allocation is clear; for example, a previous involvement with the child or a match between the worker's skill set and child's need. Close oversight by a qualified social worker is described by staff but this is not routinely evident in the records. These do not show how social workers are involved in the coordination of services and review of children's plans.
47. The council's leaders are committed to their responsibilities for children. This is demonstrated by the strong commitment to the preferred social work model and underpinned by investment in non-statutory services that are making a real difference to the lives of children and families, for example the services and interventions provided by FAST and FDAC.
48. Relationships with a range of partners, both statutory and voluntary, at a strategic and operational level are strong. For example, both the Children and Family Court Advisory and Support Service (Cafcass) and the judiciary were fulsome in their praise for the senior leadership team, whom they describe as available, accessible and open to productive working relationships.
49. The chief executive, council leaders and the senior leadership team convey a real sense that children in care are their children and are working to ensure that this responsibility is shared by the whole council, not just those who work with and for children's services. For example, housing, which is a challenging area, now sits with the commissioning team and it is anticipated by the council that this new approach will benefit children and families, and they already have an example of this. The leadership team is committed to all leaders being corporately more ambitious for their children.



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