

Inspection of Surrey local authority children's services

Inspection dates: 17 to 28 January 2022

Lead inspector: Alison Smale, 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

Services for children and families in Surrey have improved since the inspection in 2018, when they were judged to be inadequate overall. While improvements are evident and children are safer, some inconsistencies remain. Some children benefit from helpful services at an early stage, which make a real difference to their lives; others receive a less effective service. Most social workers listen carefully to children and make sure that children's views inform decision-making. When children come into care, they are placed within their wider family if this is possible and in their best interests. Most children in care live in long-term homes and make good progress. Many care leavers are supported well to live independently, developing confidence and skills to assist them into adulthood.

Leaders are determined to continue the trajectory of improvement, building on strong partnerships and routinely taking children's views into account as part of service development. Leaders are implementing a clear and comprehensive improvement programme, based on a thorough understanding of current performance. They have established a strong foundation on which to improve services. They understand that the quality of frontline practice varies across teams. During the COVID-19 pandemic, staff working with children and families have felt well supported, which, in turn, has enabled them to continue to support children and families.

What needs to improve?

- The quality and effectiveness of assessments and plans for all children, including disabled children, homeless 16- and 17-year-olds and privately fostered children.
- Partnership work to secure support for children and young people's mental health and well-being.
- The provision of essential information to carers about children, and viability assessments to inform placements with friends or family.
- The sufficiency of suitable accommodation for young people, including care leavers.
- The quality and impact of supervision to ensure that decisions are timely and support the progression of children's plans.
- The proportion of permanent staff, to reduce turnover.

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

1. Children and their families benefit from effective early help services. Thresholds are well understood, although some families experience a short delay in allocation before they receive the right support, meaning that some children's needs may escalate.
2. The children's single point of access service responds effectively to most contacts and referrals, ensuring that the vast majority of children are signposted for support and information, or have their needs assessed more fully. A small number of children are subject to repeated contacts and referrals before they receive the support that they need. Managers provide a clear rationale for decision-making and identify the next steps for social workers in most cases. When there are concerns about children's exposure to domestic abuse, risk identification and safety planning are evident. However, the current police practice of submitting lower risk notifications in batches leads to a backlog within the service. This means that some children exposed to domestic abuse do not receive the support that they need soon enough. The emergency out-of-hours service has been significantly strengthened and enables effective support to be provided to families when offices are closed.
3. Most assessments are thorough, and some children and families benefit from excellent assessments. However, for other children, their needs are not so well articulated, and the assessments are overly focused on the adults, meaning that children's needs and experiences are less well understood.
4. Most assessments and reviews for disabled children accurately identify their needs. However, some plans focus primarily on the child's disability, resulting in a less robust response to wider needs. For a small number of disabled children, there is insufficient attention to the capacity of their parents or carers to

support them. This means that these children experience delay in getting the right support to address their safeguarding needs at the right time.

5. When there are concerns about children being at risk of significant harm, effective multi-agency strategy discussions are held, at which information is shared and appropriate decisions are made to protect children. Child protection investigations are comprehensive and ensure that risks to children are well understood and addressed.
6. Child protection conferences consider progress and ongoing risk for children, but critical evaluation and challenge of information are not sufficiently developed. Actions recorded at conferences lack clear purpose or timescales, resulting in some drift and delay in achieving progress. Child protection chairs carry out midway reviews, which is good practice, although their impact is limited, as the focus is more on compliance than the effectiveness of the plan for the child. Regular multi-agency review meetings are held, but the impact on the progress of the child's plan is variable.
7. Family safeguarding teams are multidisciplinary. The implementation of the local authority's practice model has significantly strengthened work to tackle domestic and substance abuse, which is highly effective for many families. In many cases, persistent, long-standing risks and needs are being addressed and reduced effectively, often through parents engaging with services for the first time. In some teams, this work results in insightful and effective multidisciplinary interventions for children and families. In others, the understanding of the child's experience is not well enough developed, resulting in some over-optimism. This means that the experiences and progress of children vary. The frequency and quality of supervision of staff are too variable and contribute to this inconsistency in social work practice.
8. The effectiveness and impact of interventions for children living in neglectful situations are not consistent. Senior managers have introduced a new assessment tool and trained all staff, as well as professionals from other agencies, but practice is not well embedded or applied across all teams or organisations. While some practice is highly effective when practitioners use this tool with families, other practitioners and partners have not adopted this better practice, meaning that some children continue to live in neglectful situations for too long.
9. The quality of direct work with children varies. Many children benefit from creative direct work which informs ongoing intervention and support. However, for other children, particularly those who have experienced several changes of worker, their views are not reflected well enough in assessments and plans. The frequency and the quality of direct work with disabled children are variable. For some, the child's voice is almost absent, while for others, creative, carefully considered direct work ensures that their wishes and feelings are known.
10. The local authority's approach to the pre-proceedings phase of the Public Law Outline (PLO) has been strengthened. Many children are successfully diverted from care, as social workers work effectively with parents and risks to children

are reduced. For a small minority of children, there is drift between the decision being made to initiate care proceedings and the lodging of the application with the court. This means that those children's needs are not met as swiftly as they could be.

11. Arrangements for the local authority designated officer to manage allegations against professionals are effective.
12. Homeless children aged 16 to 17 years do not consistently receive an appropriate response. As a consequence, too many children are diverted to early help and do not receive a social work assessment soon enough. This can delay decisions for them to come into care, and children aged 17 may miss the opportunity to be supported as care leavers once they reach adulthood. Senior managers have recently implemented new protocols, but there are no effective systems in place to ensure clear oversight of this vulnerable group.
13. When children go missing from home, they receive timely return home interviews which lead to insightful assessments of vulnerability to inform plans that reduce risk. When risks to children experiencing exploitation or radicalisation are identified, strong multi-agency plans and intervention help to reduce those risks.
14. Risks to children who may be subject to female genital mutilation are not sufficiently recognised or understood.
15. Senior managers have expanded the capacity of the inclusion team to respond to the increased number of children who are missing education or moving to elective home education. These children and young people are supported appropriately and according to their individual circumstances.
16. Not enough is done to identify children living in private fostering arrangements and, as a result, the number of such children known to the local authority is very low. Managers do not critically evaluate or challenge the poor quality of private fostering assessments, or the delays in visits to these children. This means that their needs are not addressed quickly enough.

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

17. Decisions for children to come into care are timely, well considered and based on comprehensive risk assessments. Senior managers have effective oversight of these and other key decisions, such as when children are to be subject to court proceedings or placed with connected carers. However, initial placement plans are not completed when children move to a new home. This makes it difficult for their new carers, as they lack essential information about children, and makes it hard to understand the rationale underpinning the matching and suitability of the placements.
18. Early permanence is achieved successfully for many children. Effective planning ensures that children are returned home when safe to do so, through phased, carefully assessed work, under the auspices of interim care proceedings and

assessments undertaken in the PLO phase. Some children are directed by the court to be placed at home during care proceedings. This results in some being placed before assessment and approval of the placement. However, the subsequent return home is carefully planned for these children. For most children, risks are thoroughly assessed and lead to plans that include a range of professionals to help to protect children when they return home. Pre-birth assessments inform timely and appropriate decisions, culminating in positive early permanence outcomes for babies and infants.

19. When connected carers are being considered, initial viability assessments are often not completed at the outset. This means that the suitability of these placements is not well enough understood at the earliest opportunity. Despite this, children living with families and friends in connected carer arrangements are settled and well supported.
20. On the very rare occasions when a child is placed in an unregistered setting, managers monitor the child closely through risk assessments and safety plans to ensure that their needs are met. Urgent and persistent efforts are made to find placements in regulated and registered settings.
21. Independent reviewing officers (IROs) monitor and evaluate the suitability and progression of children's care plans through timely looked after reviews. IROs write sensitive and child-focused letters to children about their progress and decisions, providing an informative and accessible record of decisions to read at the time or when they are older. Children are involved in their reviews and IROs make determined efforts to speak to children at, and between, their reviews to understand their views and experiences. IROs undertake midway reviews, which is good practice. However, a focus on process means that their understanding of children's progress in their placements is limited.
22. Children placed for adoption and some living in long-term placements benefit from good-quality life-story work that helps them to understand their history, while other children in care do not have life-story work. When life-story work is carried out, children are involved with the work and their voice is clearly documented.
23. Children are seen regularly by social workers, who are predominantly child-focused and ensure that they understand the perspective of the child through direct work. They tailor their communication to meet the child's needs through direct observation, or feedback from others. The quality of recording of statutory visits to children is inconsistent. Better records emanate warmth and interest in children's circumstances, but others are more impersonal and written about the child, rather than with them or to them.
24. The Children in Care Council is a constructive forum for children to share experiences and ideas. The council has brought about changes in practice. For example, children now receive a letter when permanently matched with their foster carer and they have influenced the title of the new child and adolescent mental health services (CAMHS). Young people clearly value and derive mutual support from a very well-managed, regular and inclusive care leavers forum.

The group's wishes and priorities lead to tangible changes, such as a refreshed and more accessible local offer, better signposting and earlier transition planning.

25. Children's health needs are identified well. When there is delay for children accessing CAMHS, including those who self-harm, many children are offered packages of support for their emotional health and well-being through alternative specialist provision. The health needs of disabled children are considered well in plans and reviews, ensuring that children receive the most appropriate services. Unaccompanied asylum-seeking children experiencing post-traumatic stress disorder and other conditions are supported to access routine appointments and therapy.
26. Most children in care make good progress in education, employment and training. Learning and leisure activities are explored well in plans and reviews. Children's educational needs are well considered, and many make sound progress. However, despite effective work to improve personal education plans, they are not yet of a consistently good quality. Staff at the virtual school are having a positive impact on the educational progress of children in care.
27. Most children in care live in stable placements with carers who meet their needs. However, there are some delays in identifying suitable placements. A small number of older children experience early placement disruptions before they are placed in residential care that is better able to meet their more complex needs. Gaps in information on their files make it hard to follow the journey of some of these children. Additionally, a small number of older children live in unsuitable accommodation, and senior managers have not acted soon enough to address this. Most unaccompanied asylum-seeking children are quickly matched with carers who meet their cultural needs.
28. Most children benefit from quality time with family members. Family time is generally well promoted and actively planned, despite the challenges of the pandemic.
29. The recruitment of foster carers has been more successful recently, but there remains a continued significant shortage of local foster placements. The hub model supports some foster carers very effectively, but the initiative is not available for all of the local authority's foster carers. Leaders and managers have provided opportunities to involve foster carers in consultations. However, some foster carers report a lack of outcomes arising from these initiatives. Therapeutic parenting training has been well received.
30. Assessments of potential adopters are completed promptly. The wider coverage of the regional adoption agency, Adoption South East, provides increased opportunities to find adoptive carers for children with complex needs, leading to successful adoptions. Adopted children are helped to make sense of their journey with the use of later-life letters and life-story books. Professional and compassionate support is provided by skilled adoption workers, helping adopters to understand the process from enquiry to placement. Increasingly, permanence is achieved through children being placed with connected carers or

through special guardianship orders. Although relatively few children are adopted, they are matched and placed promptly, including family groups and older children. However, adopters have encountered barriers in accessing support when crises occur.

31. Care leavers are supported by committed personal advisers who work with them from the age of 16 to ensure that their needs are met through advice, support and access to the right services. Contact with young people is mostly proportionate to their needs. Most pathway plans are comprehensive and are completed collaboratively with care leavers, but they do not routinely include the input of other relevant agencies. They are updated every six months, but not always when the young person's circumstances significantly change. Care leavers' views are reflected strongly in their plans. Care leavers are made aware of the local offer.
32. Direct work with unaccompanied asylum-seeking care leavers is thoughtful, sensitive and person-centred. Risks specific to unaccompanied asylum-seeking care leavers are understood well and carefully addressed.
33. When there are community-based safeguarding concerns about care leavers, the approach is inconsistent between teams and workers, meaning that some care leavers receive a less rigorous response.
34. The health needs of care leavers are well understood, and personal advisers work well with care leavers and health professionals to ensure that specific health needs are addressed. The emotional and mental health needs of some care leavers are met through bespoke packages of support, but some care leavers do not receive help promptly when they need it.
35. The majority of care leavers are prepared well for independent living. Most of this work is carried out effectively by commissioned semi-independent providers. Most care leavers make progress with their education, independence and overall development.
36. Most care leavers are in accommodation that meets their needs. While many care leavers are supported to get permanent housing which is suitable and safe, the sufficiency and availability of accommodation for some care leavers are limited. Supported accommodation often ends abruptly when care leavers reach 21 years of age and pathways for young people to access social housing are inequitable. A very small number of adult care leavers live temporarily in bed and breakfast or hotel accommodation. Although progress has been made in working with the local housing authorities, senior managers have not been sufficiently proactive in tackling the use of inappropriate accommodation for care leavers by a very small number of district councils.

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

37. The senior leadership team and council leaders, including the director of children's services (DCS), the leader of the council and the chief executive,

have achieved a significant change in the culture of leadership through strong and credible commitment and drive to improve services for vulnerable children and families in Surrey. They are implementing a clear and comprehensive programme of improvement, building on changes to the model of practice initiated by the previous DCS, who died in service in June 2020. Services are no longer inadequate, but despite accelerated improvements since 2018, overall progress has been slow since services were first judged inadequate in 2015.

38. Leaders have established a strong foundation, but recognise that they have yet to deliver consistent, high-quality practice for children and their families. In some teams, the model of practice is contributing to a positive and transformational difference for many children and families. However, more needs to be done to ensure that the improvements achieved in some parts of the service are now embedded and benefit all children who need help, protection and care.
39. Leaders at all levels actively provide effective scrutiny and challenge. They have a comprehensive and up-to-date range of performance reports, although data is less reliable regarding care leaver accommodation and placement plans.
40. Effective partnerships enable the progression of joint initiatives and joint approaches to improve practice. The impact of this can be seen in the shared understanding of need and the commitment to the multidisciplinary model of practice. This includes the co-location of specialists with social work teams across the service, which increasingly benefits vulnerable children.
41. Effective corporate parenting board meetings feature strong engagement of elected members and professionals. Leaders clearly value hearing the views of children, who are supported by a robust participation service. Children in care and care experienced young people are actively involved, which ensures that their views influence service improvement. As a consequence, for example, children in care teams are now co-located with care leaver teams. However, the corporate parenting strategy is not up to date and does not reflect current practice.
42. Leaders know the service well and have a well-informed understanding of its effectiveness and what still needs to improve. Senior managers have embedded a comprehensive quality assurance process which provides them with an accurate measure of the quality of practice across the service. The involvement of social workers, combined with moderation and re-audit, are all helping to improve learning and practice.
43. Senior managers embrace opportunities to learn, and they ensure that lessons are learned and disseminated in a range of different ways. Following a number of tragic incidents, leaders are working with partner agencies to increase understanding about how to support young people who may be considering taking their own life. Joint action has been taken to enhance and increase services for children's mental health and well-being, resulting in some highly effective services. While some children have benefited from specialist support,

which has transformed their lives and mitigated delays in receiving support from CAMHS, others have not received effective support.

44. A comprehensive sufficiency strategy is being implemented. The strategy is based on a detailed understanding of the gap between identified needs and resources. This is leading to an increased range of suitable accommodation options for children, although some gaps remain, especially for care leavers.
45. Caseloads have been reduced in many parts of the service, although they vary significantly between teams, resulting in inequities in the level of service to children and families. Some parts of the service are more fragile, impacted by higher turnover of staff and frontline managers, and staff sickness. Although staff find supervision helpful, the quality varies significantly. To mitigate this, senior manager oversight is consistently evident at key decision points to strengthen management oversight and decision-making.
46. Senior managers have established an academy which is valued by staff and provides a range of learning opportunities for their continuous professional development. The social work career progression pathway provides a number of routes for social workers to progress, in addition to management. Social workers from overseas have been well supported, benefiting from a thorough induction which has enabled their successful transition into a very different culture of practice.
47. Social workers report that they have felt well supported during the pandemic, both emotionally and professionally. They value the changes made by senior managers to improve the service, as well as the action taken to enable continuity of service to children and families during the pandemic. Practitioners appreciate the recognition that they receive from senior managers when they have gone above and beyond expectations or completed a good piece of work.

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