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Sheila Smith Director of Children's Services North Somerset Council Town Hall Walliscote Grove Road Weston-super-Mare BS23 1UJ

Dear Ms Smith

Focused visit to North Somerset children's services

This letter summarises the findings of a focused visit to North Somerset children's services on 21 and 22 September 2022. His Majesty's Inspectors for the visit were Steve Lowe and Nhlanganiso Nyathi.

Inspectors looked at the local authority's arrangements for the 'front door', the point at which the local authority, alongside other agencies, considers and responds to referrals about children who may be in need or at risk of harm.

This visit was carried out in line with the inspection of local authority children's services (ILACS) framework.

Headline findings

In two focused visits and a standard inspection over the last three years, weaknesses in the front door were a constant theme. Senior leaders in North Somerset have now taken steps to establish a single front door. The new approach has been welcomed by families but has taken too long to implement and is not yet providing a consistently good enough response to children's risks and needs.

Although new systems are not yet fully consolidated or sufficiently multi-agency, professionals and families do now receive a quicker and more streamlined response to their worries about children. When these concerns are acute and significant, key partners act together and respond quickly to key risk factors. Similarly, when families need early help, the family well-being hub directs them to an expanding range of local support that is having a positive impact, including keeping families together. For children living in more complex and chronic conditions, however, a lack of professional curiosity, specialist resources and information from partners beyond



children's social care results in an incomplete picture of risks to children and how these can be addressed effectively.

A new quality assurance framework and a strategic response to extra-familial abuse are well focused but very much in their infancy and require an acceleration in their focus and impact. Encouragingly, the permanent and extended senior leadership team has pinpointed the same key areas for improvement that inspectors identified during this visit, and has a strategy in place to address them.

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

- The understanding of, and response to, children at risk of exploitation.
- The quality and depth of social work practice when children are in complex or chronic need.
- The quality assurance of decision-making in the front door.

Main findings

Families and professionals now have a single front door to contact for advice and guidance, and to relay their concerns to social workers. The move to one point of contact and the integration of a family well-being hub, the local authority's point of entry for early help, into the front door, has distilled upwards of 20 routes into children's social care into a single, simple process. Families are increasingly making contact themselves, confident that they will get a quick and supportive response.

Managers in the front door make timely decisions that generally point families towards the right level of support. When children are potentially in immediate danger or they need early support, clearly identified pathways work effectively.

Professional dialogue in the front door between family well-being practitioners and social workers informs early help assessments that are comprehensive. These are usually completed alongside families to understand what positive changes are needed for children.

Following an extension to the service to work with all children, not just those aged under five, there is increasingly a positive impact on children, through a widening choice of targeted, face-to-face and group work in the family hubs. Parents speak very highly of the positive difference workers have made to their families, with their underpinning knowledge of attachment and parenting styles, keeping families together, integrating children back into school and strengthening local communities.

At the other end of the spectrum, when children are at immediate risk, the front door decision-makers and partners respond quickly and effectively. Strategy meetings are held quickly and include a broad representation from partners who offer valuable and insightful information and analysis. This leads to clear actions, sometimes in very



complex situations. Consideration of any risks to children who are connected but not living in the same home is routine and thorough. Professional dialogue and consensus are evident in decision-making. Similarly, the decisions to either continue inquiries or to ask for further assessment are in line with the level of risk.

When concerns arise out of daytime working hours, the out-of-hours service responds equally well, including when they are charged with accommodating children in an emergency. Handover actions for the daytime service are clearly communicated.

However, families do not get such a consistently effective response when concerns are chronic or more complex. Social workers often lack professional curiosity into the wider risks to children. They frequently fail to seek out the views of those other than the children's parents and colleagues within the local authority, such as teachers and health professionals, when arriving at decisions about the best way forward. For children, that means decisions are made without a full picture of the situation and the associated risks.

The front door does not yet operate as a fully-fledged multi-agency service, with key partners permanently co-located. Consequently, referrals from partners and subsequent deliberations often lack the pace and detail that is needed to make quick and effective decisions.

Stepping up and down between early help and statutory intervention as the level of risk to children alters is a cumbersome process that involves points where the decision can be overturned. As a result, families are often left unsure as to how this process works and what it means for them and their children. However, this is an issue that leaders are acutely aware of and have a plan to remedy, but it is yet to be implemented.

Families who have arrived from Ukraine are supported well by a network of host families and 'back-up hosts' who offer support, alongside family support workers offering mediation and financial advice.

When situations for families require further assessment, social workers are given clear direction by their managers regarding the areas for focus and further investigation. This helps ensure that social work assessments are linked to the presenting evidence and arrive at recommendations that include a simple plan that parents understand. However, assessments are not as comprehensive as they could be, because they cover ground that could have been looked at earlier and are seldom linked to research or a deeper connection to family history and complexities.

When risks escalate or have changed from previous involvements, scaling and similar techniques are used well to help families understand any new concerns. Children are often engaged in creative activities during assessment to ensure that their perspective, feelings and views are captured.



Work to address the risks to children of being criminally and sexually exploited is underdeveloped. The recently commissioned needs analysis of criminal and sexual exploitation of children in North Somerset accurately describes the areas for improvement. Importantly, children who are at risk of extra-familiial abuse receive support when those risks are already high, but strategically there is an incomplete picture of the extent of the problem. This means that not all children who may be at risk of harm are being identified before risk escalates.

Weekly meetings to discuss children who have gone missing have been introduced but often have insufficient information, resulting in tasks such as information-gathering being prioritised over the focus on the child. Some mapping out of networks of people and places that are both a positive and negative draw for children has begun. This is not sufficiently well coordinated across partnerships in the community and lacks the sophistication necessary to fully understand what the risks are to children. Similarly, the themes arising from return home interviews are not yet being analysed and used to drive improvements in the effectiveness of this work.

Work to introduce and embed a quality and performance framework has lacked pace and urgency. However, a new framework is now in place, and this has enabled leaders to better identify and understand key areas for improvement. However, it is not yet being used to drive up the quality of practice or to measure progress. Importantly, the quality assurance of decision-making in the front door has not been prioritised, despite significant changes. In addition, the use of performance information in the front door and the family well-being service is underdeveloped. This leads to an inability to fully analyse the impact that support is having on children beyond raw data and anecdotal evidence. As with other key areas, senior leaders have added extra resources to further this understanding, but the impact is yet to be realised.

All staff speak very positively about the way they have been involved in the changes to the front door, with regular meetings with managers at all levels and confidence that they have been listened to. Similarly, training is readily accessible to upskill the workforce in issues they are more likely to face due to the ongoing impact of the COVID-19 pandemic.

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

Yours sincerely

Steve Lowe **His Majesty's Inspector**