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Dear Risthardh

Monitoring visit to Sefton children's services

This letter summarises the findings of the monitoring visit to Sefton children's services on 21 and 22 February 2023. This was the second monitoring visit since the local authority was judged inadequate in February 2022. His Majesty's inspectors for this visit were Lisa Summers and Rebecca Quested.

Areas covered by the visit

Inspectors reviewed the progress made in the following areas of concern identified at the last inspection:

- The local authority's response to children in need of help and protection.
- The application of thresholds.
- The quality of assessments, plans and planning, including the timely escalation into the Public Law Outline (PLO).
- The quality and impact of pre-proceedings interventions.
- The quality of help and protection of disabled children.
- The quality of visits to children, including that they are responsive to need and risk, and that they are purposeful.

This visit was carried out in line with the inspection of local authority children's services (ILACS) framework. A range of evidence was considered during the visit, including electronic records, performance management information, case file audits and other information provided by senior managers. In addition, inspectors spoke to a range of staff, including social workers and managers.

Headline findings

There has been insufficient progress in improving the response to children in need of help and protection. The pace of improvement is too slow and most practice weaknesses identified at the inspection in February 2022 remain today. Recruitment and retention of social workers remains a significant challenge and a barrier to improvement. There continues to be a high dependence on agency social workers, and this is making the service fragile. The director of children's services (DCS) has recently announced that he plans to leave the local authority, and this will bring further change. Too many children continue to experience drift and delay in having their needs met and some continue to experience ongoing harm because risks are not always fully recognised in assessments, and the resulting plans are not supporting timely and appropriate decision-making.

The DCS and a dedicated senior management team are undertaking significant activity to build a sustainable framework for supporting the improvements needed. There is greater stability in workforce at a service and team manager level. Managers' line of sight is improving through a renewed quality assurance framework and routine auditing. The co-location of social work teams in a single office base is supporting a positive change in culture. There is greater visibility of the DCS and the management team, and social workers feel more confident that they are supported in their practice and that they are valued. Social workers have a better understanding of practice expectations, through the introduction of practice standards. The creation of a new social work academy is providing intensive support for social workers in their assisted year.

Findings and evaluation of progress

Most children are seen regularly, and social workers speak with authority about them. Many children have experienced significant changes in social workers and some visits are undertaken by duty social workers, impacting on children's ability to form trusting relationships. Visiting frequency is not consistently responsive to changes in children's circumstances or levels of risk and need, and there is very limited direct work to test the impact of plans and understand children's experiences. Senior managers recognise this, and social workers reported that new tools and templates have recently been introduced.

Most assessments are weak. They do not always fully consider all risks, particularly in relation to males in the household, and assessments do not consistently understand the additional vulnerabilities of very young children. Assessments are not routinely updated following significant events and parental capacity to change is not routinely assessed. Although history is described, this is not used well enough to understand the impact of cumulative harm that children have experienced, including long-term neglect or domestic abuse. There is insufficient professional curiosity to support an accurate analysis of children's experiences. Consequently, some children do not get the right support, as the resulting plans are not suitably individualised to

fully meet children's needs and they do not focus sufficiently on mitigating the harm children are suffering.

Most children's plans are not sufficiently detailed or focused on what needs to change in children's lives. Timescales are often absent. This is more often the case for children in need. There is too much focus on adult compliance in relation to actions being completed and contingency plans are not sufficiently explicit to enable parents to fully understand what will happen should improvements not be made.

Core groups and child in need meetings are not always compliant in their frequency to secure timely improvements in children's lives. Meetings do not sufficiently focus on the impact of interventions or what is changing for children to inform next steps. Attendance by parents and health services or police is not consistent, particularly when parents are receiving substance misuse counselling, mental health support or domestic abuse services. This means some plans do not progress and there are delays in children receiving the right support.

Too many children experience drift and delay in having their needs met. This is due to a number of reasons, including changes in social worker, demanding and complex workloads for social workers, and supervision that is not sufficiently focused on improving children's lives. There are delays in children accessing specialist help for domestic abuse and mental health support due to capacity issues in these services. There are no domestic abuse perpetrator programmes currently available. Some children subject to child protection planning have been placed in unsuitable accommodation for homeless families. This increases their vulnerability.

For a small number of children, there are delays in receiving a protective response when concerns increase due to delays in strategy discussions being held. At times, there is no escalation to initial child protection conferences when enquiries identify that children are at risk of ongoing significant harm.

There are high numbers of children who have been stepped down from child protection planning at the first review. Newly implemented processes to secure manager oversight and agreement before this occurs are not being followed and these decisions are being made without fully considering all risks for children. For many, there is necessary work outstanding, and there is a lack of challenge by child protection chairs on the appropriateness of these decisions.

Some social workers lack an understanding of the complexity of domestic abuse. Some decisions to step down from child protection planning are overly optimistic, based on current situations rather than an understanding of the long-term impact of domestic abuse, and necessary work is not always completed. Support for some of these children has ended prematurely.

When children's circumstances do not improve, children's cases are not always escalated into pre-proceedings quickly enough. Effective and timely decision-making

does not take place once children are in the pre-proceedings stage of the PLO. There is a lack of adequate safety planning during pre-proceedings. Parenting assessments are taking too long to complete. Social workers are not trained in completing these, and delays are compounded by frequent changes of social worker. As a result, children remain in situations of neglect for too long. The DCS and his team recently commissioned a full review of the use of pre-proceedings. Work is underway to strengthen the use of pre-proceedings, and dedicated training for social workers is currently being delivered.

Senior managers have focused appropriately on restructuring services for disabled children to support a more proportionate response in meeting their needs. Work is underway to reassess children to inform support packages. Thresholds have been refreshed to include children with a neurological diagnosis, widening the remit of the children with complex needs teams. The introduction of family support workers is positive and has impacted on caseloads. However, this team is only temporary. Ongoing social work capacity issues are impacting on the quality of support and the timeliness of services for these children.

Social workers are positive about the change in culture in Sefton, describing a supportive working environment with a highly visible DCS and senior managers, which has been further enhanced by the co-location of social work teams. Social workers feel listened to and valued and are trying their very best to help improve children's lives. Social workers are positive about the reduction of caseloads and the introduction of relationship-based practice. However, the complexity of caseloads across the locality teams is impacting negatively on the quality of the work, as well as on keeping children's records up to date. This means social workers often work excessive hours, and not all feel they have time to attend training. Those who have attended training value the opportunity and have been able to implement their learning.

Recruitment and retention continue to be a significant challenge in Sefton. High vacancy rates across locality teams mean that there is a high reliance on agency social workers. The retention package has recently been improved. Some progress is being made in recruiting social workers from overseas, with 20 social workers due to start by the end of May. The newly developed social work academy is enabling a considerable number of newly qualified social workers to develop core skills in a supportive environment. Protected caseloads allow these social workers to receive routine training and regular supervision while being able to carry out thorough work with children and their families. The quality of recording and planning in this team is more detailed than seen in other parts of the service. This is assisting the service to grow its own workforce. Despite these actions, vacancy rates in locality teams are very high. Managers report they are being diverted from frontline tasks, as they are required to undertake recruitment administration. They do not feel well enough supported corporately to enable timely recruitment on the scale needed in Sefton, at the same time as supporting the service improvements needed.

Senior management oversight has recently been increasing at key decision points and there is now clearer guidance to social workers to inform next steps to support children. Supervision is now more regular, and senior managers have plans to further strengthen core management skills as they recognise that supervision lacks reflection and is not effective in improving children's lives.

Senior managers have strengthened the quality assurance framework. Performance reporting continues to be developed and senior managers recognise there is still much work to be done to provide accessible performance data at all levels. A lack of key performance indicators, targets, tolerances and analysis makes it difficult for managers to identify areas needing further scrutiny.

Auditing was largely absent at the time of the previous inspection. This is now routine. Although most audits accurately identify strengths and weaknesses in practice, they do not sufficiently consider the impact of these weaknesses and what they mean for children, to inform corrective actions. Audits have been strengthened through the introduction of case discussions with social workers, and parental feedback is routinely sought. Most actions are task orientated and focus on improving the case records rather than specifying what needs to happen to improve children's lives. Corrective actions are not always completed, despite recently introduced tracking mechanisms.

I am copying this letter to the Department for Education.

Yours sincerely

Lisa Summers
His Majesty's Inspector