

CHILDREN AND YOUNG PEOPLE SELECT COMMITTEE		
<b>Report Title</b>	Safeguarding Services 6 Monthly Report	
<b>Key Decision</b>	No	Item No. 6
<b>Ward</b>	All	
<b>Contributors</b>	Director Children's Social Care	
<b>Class</b>	Open	Date: 11 July 2019

## 1. Purpose and Summary of the Report

- 1.1 This report provides a summary of safeguarding activity in Children's Social Care Service (CSC) between January and June 2019. The report does not report on Early Help, Child Sexual Exploitation, Local Authority Designated Officer, Private Fostering or Children Looked After as these are subject of a separate standalone reports to either the LSCB and/or CYP Select Committee.

## 2. Recommendations

- 2.1 Members are asked to note and comment on the contents of the report.

## 3. Policy and Legislative Context

- 3.1 Children's Social Care is governed and delivered under the auspices of statutory legislation, regulation and guidance. The key legislative framework and guidance for this are outlined below via:

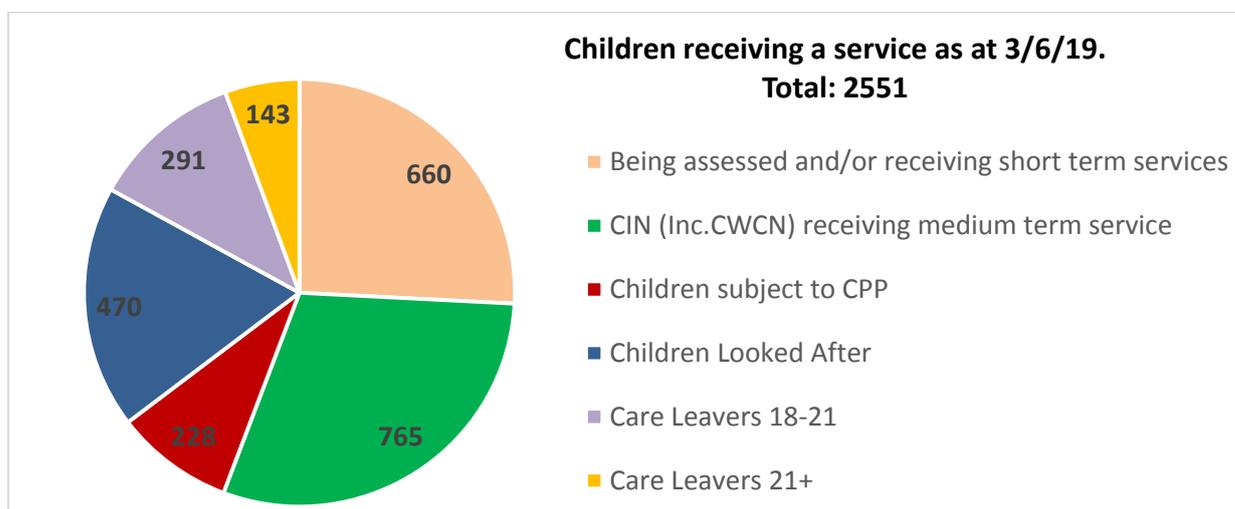
- [The Children Acts of 1989 and 2014](#), and subsequent guidance and regulations, impose a statutory duty on local authorities to safeguard children in their area.
- [The London Child Protection Procedures 2017](#) have been adopted by all London Local Authorities and LSCBs.
- [Working Together to Safeguard Children 2018](#), HM Government, provides a national framework and the core requirements which agencies and professionals must satisfy in order to safeguard and promote the welfare of children.

One of the priorities in the Council's Corporate Strategy is "Giving children and young people the best start in life - every child has access to an outstanding and inspiring education and is given the support they need to keep them safe, well and able to achieve their full potential".

- 3.2 Children Social Care contributes to the Children and Young People's Plan 2019-2022 and its priorities.

#### 4. Children who require safeguarding in Lewisham

4.1 As at the beginning of June 2019, CSC were working with a total of 2,551 children and young people at any one time. 1,653 are either being assessed for, or are receiving safeguarding services as children in need or children subject to child protection plans. The overall number of children open to Children’s Social Care is largely similar to the previous 6 months. The proportions are slightly different with a reduction of children subject to child protection plans and a subsequent increase in children in need.



The CWCN service is working with a total of 348 children.

#### 5. The workforce providing safeguarding services in Children’s Social Care

5.1 The Children’s Social Care teams working with children who require safeguarding are the MASH, x5 Assessment Teams, x8 Family Social Work Teams and x2 Children with Complex Needs teams. In total there are 198 social workers and managers working in these teams. Approximately 68% of the teams are staffed by permanent social workers. Vacant posts are filled with agency staff and there are a small number of vacancies. There is low staff turnover. This is a slight improvement on the previous 6 months.

<b>WORKFORCE - 24 May 2019 (FTE)</b>	<b>MASH &amp; Assessment</b>	<b>Children with Complex Needs</b>	<b>Family Social Work</b>
Total no. of posts	93	24	81
No. perm staff	63	15	55
<b>% perm staff</b>	<b>67.7%</b>	<b>62.5%</b>	<b>67.9%</b>
Vacancies	30	9	26
Agency staff	26	8	27

5.2 Our caseload management provides a guide that social workers should be allocated 15 children. This enables sufficient time for relationships to be developed and good practice to be delivered. On average, social worker caseloads over the last 6 months have been around 15 children. However more recently following an increase in contacts and a slight shift in Multi-Agency Safeguarding Hub (MASH) thresholds, the

assessment service has seen an increase in cases and as at June 2019, this was an average of 20. Attention is being paid to find ways to safely manage this. Overall caseloads are much improved and more stable than in the previous 6 months.

## 6. How we know about the quality and impact of our services.

6.1 The findings from a broad range of performance information and quality assurance activity is scrutinised on a monthly and quarterly basis. Highlights are fed up to the Directorate Management Team, Executive Management Team, the Improvement Board, council meetings, committees and the LSCB as required. Twice a year Listening & Learning events are held, which are concentrated periods of quality assurance. The information gathered from all of this activity is collated to produce a bi-annual self-assessment of the Children’s Social Care service. The latest self-assessment was completed in mid June, following Listening & Learning and a staff conference in early June, in preparation for an ‘Annual Conversation’ with Ofsted on June 21st. This report summarises the key performance for the last 6 months and shares the findings from the safeguarding section of the self-assessment.

6.2 A comprehensive review of practice in the January 2019 self-assessment established a benchmark for understanding the quality and impact of the safeguarding services we provide. The key areas that required improvement were identified as follows:

Improve our Early Help services providing a targeted preventative local offer.	Ensure MASH delivers timely responses, maximises good multi-agency information sharing to make consistent threshold decisions.	Ensure the core social work tasks are done consistently well in a timely manner, to minimise drift and delay.	Refocus social work on developing helping relationships, strengthening participation and promoting purposeful direct work.
Develop practice that manages risk proportionately and SMART plans that support families to stay together wherever it is safe to do so.	Develop a multi-agency contextual safeguarding approach and expand edge of care services to help older young people stay safe in the community.	Strengthen the support for vulnerable young people transitioning to adults services.	Increase and improve management oversight and reflective supervision.

A more detailed breakdown of the areas of strength and improvement was provided in the last Safeguarding Report in January 2019.

## 7. The Children’s Social Care Improvement Board and Programme

7.1 The Improvement Board and Programme has driven forward the necessary changes to improve our services to become consistently good. A summary of key strategic achievements linked to improving safeguarding services are listed below.

<b>What we have done</b>	<b>Why we have done it</b>	<b>When</b>
The revised supervision framework, template & accompanying caseload management guidance was revised and re-issued	Promote reflective supervision, aligned to Signs of Safety (SoS) practice framework. Manage caseloads to promote relationship based social work.	Q3 2018
Business Support arrangements across the service were reviewed.	Plan to increase Business Support Officer capacity to better help enable social workers to spend more time with children and families.	Q3 & Q4 2018/19
Performance data scrutiny clinics and SMT scrutiny cycle introduced. Performance data strategy created.	Increase the breadth, depth and accuracy of performance information and how it is used to drive practice and service planning	Q3 & 4 2018/19
An additional layer of management i.e. Group Managers, were recruited	To strengthen management oversight and increase strategic capacity.	Started Nov 2018
Quality Assurance Framework revised and re-launched. Including: <ul style="list-style-type: none"> <li>• ‘Listening &amp; Learning’ events</li> <li>• quarterly learning reports</li> <li>• revised audit formats (SoS)</li> <li>• open days for members &amp; partners</li> </ul>	Strengthen scrutiny and accountability to better understand the quality and impact of services and plan strategic improvements and workforce development	Dec 2018
Re-design programme to improve the Liquid logic Children’s Recording System (LCS & EHM)	Reduce bureaucracy, simplify convoluted systems, to increase capacity for more direct work with children and families	Started Dec 2018
SMT introduced a routine cycle of management meetings for business, workforce, finance & scrutiny.	Increase management oversight and strengthen strategic leadership	Started Dec 2018
New business process for the MASH introduced.	Address issues identified in self-assessment & Ofsted focused visit	Go live Jan 2019
LSCB redrafted the threshold continuum of need	Consistency with the rest of London and clarification thresholds for partners	Jan 2019
The terms of reference for four key decision making and case monitoring panels were refreshed and re-launched.	Provide better scrutiny, oversight of practice and consistency of decision making for children entering court proceedings and coming into care	Jan 2019
Signs of Safety (SoS) practice framework implementation started	Establish shared practice approach aligned with vision and values	Started Jan 2019
A dedicated senior PSW started in post. Transition of Advanced Practitioners to create Workforce Development Team & Partners in Practice arrangement - Islington	Lead on creating stronger workforce development offer linked to quality assurance & SoS practice framework	Started Jan 2019 May 2019

Adjustments made to the 19/20 CSC budget agreed by Mayor & Cabinet (Feb19)  In light of this, the staffing structure was reviewed to realign resources to target the right children, young people and families and develop specialist practice across the service.	Enable the development of: (a) dedicated Leaving Care Service, (b) contextual safeguarding team (c) permanent Group Manager layer (d) enhanced business support (e) academy for CPD and NQSWs. (f) creation of stronger family support, edge of care offer & specialist posts/teams e.g. Domestic violence, family group conferencing, PAUSE	Mar 2019 July 2019 July 2019 Q2 2019 May 2019  Q3 & 4 2019/20
Recruitment campaign for Senior Managers (Group Managers & HOS)	Stabilise leadership team to take forward improvement programme.	Jun 2019

## 8. MASH and Out of Hours Emergency Duty Service

8.1 The Lewisham MASH has representation from the following agencies: CSC, Police, Health, Education, Probation, Drugs Misuse services, housing and Youth Offending Service (virtual). The MASH receives all incoming contacts from members of the public and professionals where there may be concerns about the wellbeing or safety of a child. Advanced Practitioners in the MASH review all contacts to decide the most appropriate service for the child and family (Within 24 hours). Where additional information is required to make this decision, enhanced information sharing will be undertaken with the MASH partners. The Emergency Duty Service is available between 5pm & 9am weekdays and over weekends.

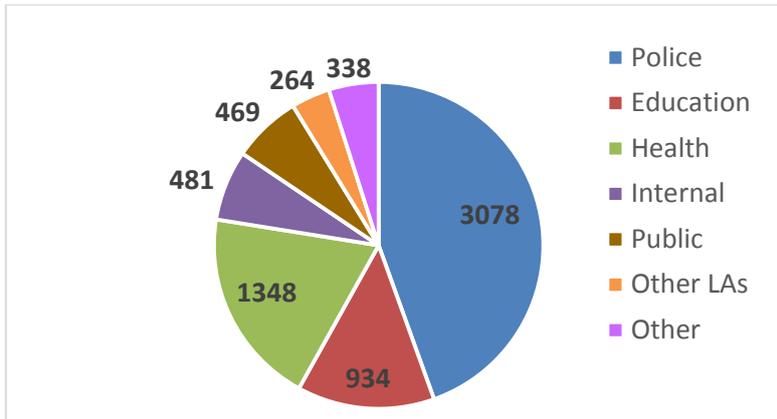
8.2 In September 2018 Ofsted completed a focused inspection on the 'front door' this primarily focused on the MASH and social work assessments, to a lesser degree. They identified the following areas for improvement:

- Simplification of the processes in MASH and integration of Early Help Records
- Range and accessibility of performance data
- Clarification of thresholds
- Effective use of information in the MASH
- Quality and consistency of assessments

8.3 The tables starting on page 14 summarise the operational actions taken to address the practice that required improvement and the impact we believe it is starting to have. The table below shows a summary of key performance data that is now available.

Indicator	Jan 19	Feb 19	Mar 19	Apr 19	May 19	Target
No. of Contacts received in MASH	1383	1304	1484	1219	1537	No Target
No. of Children <i>(Some events lead to more than one contact being received for the same child)</i>	1086	1008	1147	943	1197	No Target
% Contacts progressing to a CSC referral	18%	17%	15%	20%	18%	20-25%
No. of Contacts progressing to a CSC referral for a social work assessment	244	226	225	244	272	No Target
Rate of CSC referrals (10k pop) rolling 12 months	442	444	440	450	464	No Target
% Re-referrals <i>(In the last 12 months rolling)</i>	7%	7%	15%	15%	15%	No higher than 15%

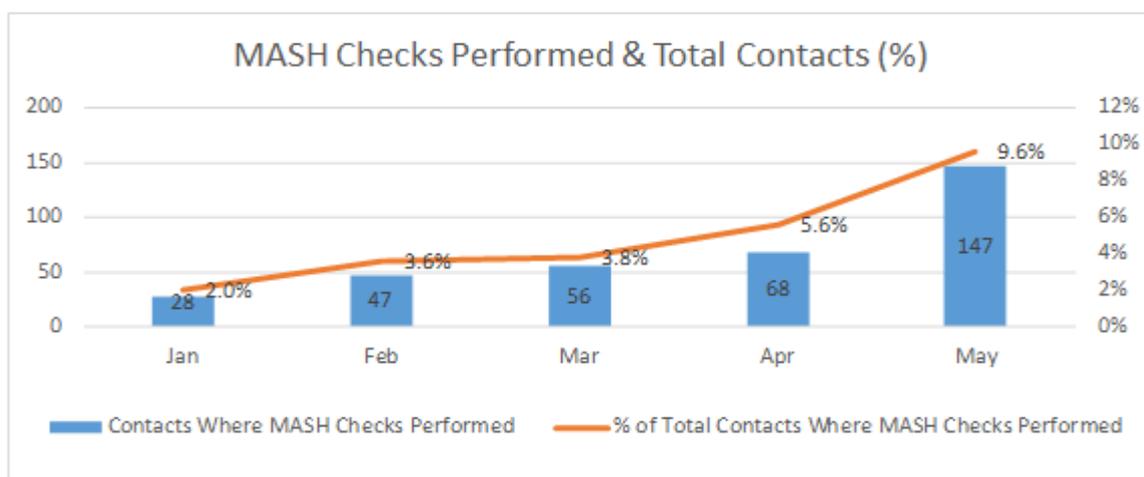
Decision made on Contacts in 24 hours	47%	72%	63%	52%	55%	90%
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Contacts by source. As at Jan to May 2019.

The proportions of contacts from agencies is largely in line with the previous 6 months, with the exception of a moderate increase in contacts from various health agencies.

- 8.4 Police are always the highest contributor of contacts, as all incidents they respond to involving a child and where there may be any kind of safeguarding issue are reviewed by the MASH, police and a social worker. Not all contacts (regardless of the source) result in family receiving a Children’s Social Care service. A percentage are requests for information, a large proportion of professionals and/or families will be provided with information, advice and signposted to an early help service in the community.
- 8.5 Between 15-20% of contacts are converted to a referral for a social work assessment. At first glance Lewisham’s low referral rate (464) suggests thresholds in MASH are high compared to the London rate of 545. Lewisham’s rate is however similar to that of our neighbours in Greenwich and Southwark, according to LGA comparator data we rank 21 out of the 33 boroughs. Furthermore we undertake a comparatively high number of assessments of children (9<sup>th</sup> highest in London). Audits undertaken on this area of work have judged the thresholds to be about right. So we are looking closely at the data to try to better understand this and make sure we are providing services to the right children at the right time.
- 8.6 One of the areas that Ofsted identified as an area of improvement was to make better use of the co-location of the information sharing capability of the multi-agency professionals in MASH. We have been increasing the number of enhanced information MASH checks that are carried out and daily MASH meetings are held to analyse complex cases. Practice has now shifted significantly in this area to maximise the benefits of co-located professionals. This has also been further strengthened by the re-establishment of the strategic MASH Board.



8.7 We were unable to report on the timeliness of MASH decision making within 24 hours until January, therefore there is no comparison data. There is still improvement required to respond to all contacts within the timescale, which is a priority area for the MASH team. A staffing re-structure is due to take place in the MASH to enable this to be achieved. An update will be provided in the next safeguarding report.

## 9. Assessments, Strategy Meetings and Section 47 Enquiries

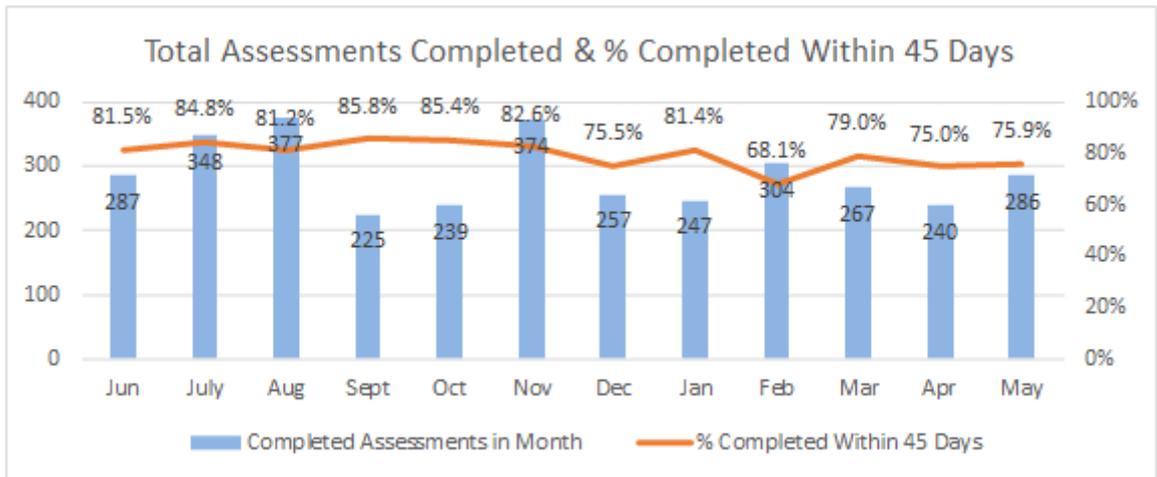
9.1 Lewisham Assessment Service includes five teams of social workers who undertake Child & Family Assessments of children & families to establish whether they are ‘in need’ of services (s17 Children Act 1989) and/or are suffering ‘significant harm’ (s47 Children Act 1989). The length of the assessment should be proportionate to the presenting need but should not take longer than 45 working days (*Statutory Guidance: Working Together to Safeguard Children 2018*).

9.2 Whenever there is reasonable cause to suspect a child is suffering, or is likely to suffer significant harm, a strategy meeting/discussion is held. The Local authority has a statutory duty to lead s47 enquiries, police, health professionals, teachers and other relevant professionals support the enquiries. (*LSCB London Child Protection Procedures 2017*).

9.3 An average of 285 assessments were started every month during Q2-3 of 2018, it is 287 between Jan – May 2019. We have seen bulge in May as thresholds in the MASH are adapting to the new LSCB continuum, new management and systems. In 2019 as a rate, for every 10,000 children we assess 539, in 2018 this was 556. The rate across London is 497, we rank 9<sup>th</sup> highest. We will continue to explore the reasons to ensure our practice is calibrated in the right way.

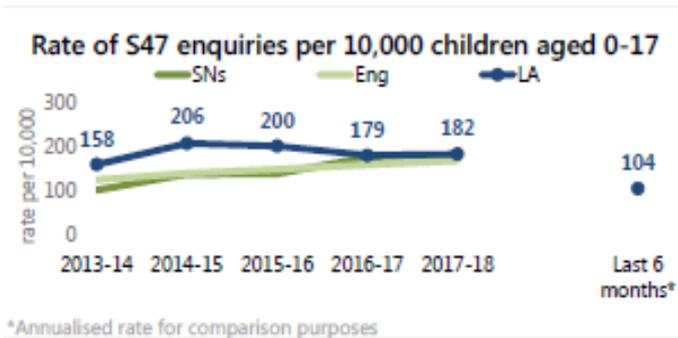
Indicator	Q2	Q3	Q4	Apr	May
No. of Assessments started (NB. Whole service)	837	874	794	268	373

9.4 We aim to see children within 5 working days of them having been referred to Children’s Social Care. Timeliness is of course dependent on the seriousness of the presenting situation and the availability of the family. Reporting on this indicator was introduced in December, therefore it is not possible to show a trend. At present 44% of children are seen within 5 days and this is an area of priority for improvement.



9.5 At present 76% of our assessments are completed within 45 days, with 85% completed within 50 days, 93% within 60 days and a small remainder take longer. This is comparable with neighbours, but we are aiming to improve further to reach our target.

9.6 Between Jan – May, 51% of all families that received a social work assessment went on to be provided with a social work service, the other half were provided with advice and signposted to other services in the community. This is a change from previously, in Q2 & 3 it was 62%, the shift is thought to be as a result of the changes in practice, as SoS encourages practitioners to be less deficit focused and better recognise the strengths that exist within family and community networks and encourage family resilience and access support from local early help services. This approach enables the service to target our finite resources at the most vulnerable children. Across London, practice varies on this indicator within a band of 40-60%. We will be monitoring closely to ensure practice remains broadly within this band in future.



The introduction of the SoS practice framework promotes the management of risk without resorting to more formal processes of intervention. This has impacted on our rate of s47 enquires falling quite significantly over the last 6 months. We are now scrutinising this carefully to ensure we calibrate our practice to be risk balanced. Rate of s47:

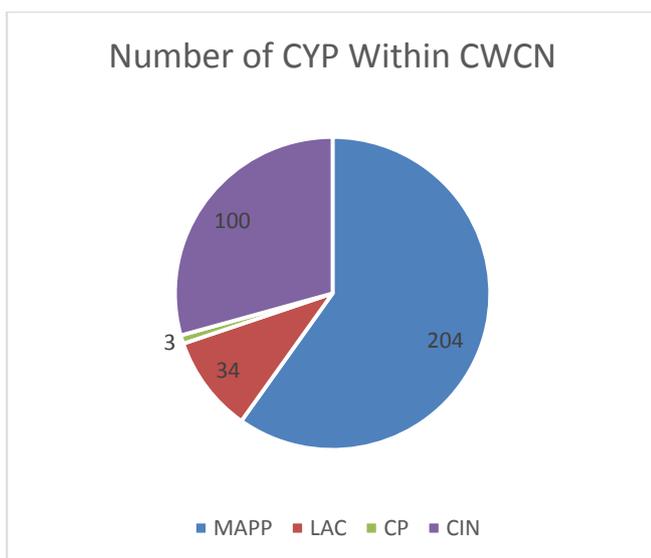
Q2 18/19	Q3	Q4	Q1 19/20
177	170	155	141

## 10. Children in Need (including Children with Complex Needs)

10.1 Where a child has been assessed as being a child ‘in need’ of services the child and family is transferred to one of the eight teams in the Family Social Work Service. Every child will have a CIN plan which outlines the services and support. The plan should be reviewed every 3 months, until the child’s needs are met.

10.2 The Children with Complex Needs Service incorporates two Disabilities Social Work Teams and the Multi Agency Planning Pathway Team (MAPP) which is a social work /care co-ordination team. The Service is located at Kaleidoscope, Children and Young Person’s Centre and sits within the Education Directorate with close links to Social Care. Both social work teams undertake Child & Family Assessments and carry out Section 47 safeguarding assessments. The MAPP team undertakes the reviews of the Short Break packages and works closely alongside the two social work teams. The assessed impact of the child’s disability determines the level and nature of the support the family are provided with.

10.3



The Social Work Service for Children with Disability criteria is as defined in the Equality Act 2010; a disabled person is someone who has a physical or mental impairment, and that impairment has a long term adverse effect on the person’s ability to carry out normal day to day activities.

10.4

Examples are physical or mental impairments which might (depending on the individual’s circumstances) fulfil the criteria for the children with disabilities social work team: Multiple and complex health needs;

The following conditions would not normally lead to a child being considered as disabled, but as having additional needs:

- A significant learning disability (likely to require specialist provision)
- Autism (Autistic Spectrum Disorder) and Communication Disorders with significant impairment of communication or intellectual functioning;
- Sensory impairment: hearing loss, visual impairment, deaf-blind
- A chronic physical illness
- Child would usually meet the eligibility threshold for DLA (usually higher rate)
- Emotional and behavioural difficulties that are not due to one of the areas listed above (this includes ADHD)
- Mental Health conditions
- Dyslexia
- Dyspraxia
- Speech and Language difficulties.

Indicator	Q2	Q3	Q4	Apr	May	Target
No. of open CiN cases ( <i>Excludes CPP and LAC</i> )	1630 (av)	1515 (av)	1256 (av)	1288	1411	No Target
Rate of CiN per 10K population ( <i>AS per DfE definition</i> )	239	221	184	192 YTD		Under review
% CiN in FSW service only with an up-to-date plan	62%	50%	61%	70%	68%	85%

% of CIN in FSW service only visited within 20 days	-	54%	69%	73%	63%	85%
% of CIN review meetings held in last 3 months.	Data not yet available					

10.5 The numbers of CIN fluctuate, the drop in Q4 followed a concerted review of CIN cases in that period, where we found a number of families that could be safely stepped down to community services. An extension of the Early Help contract with Core Assets has also been actioned to enable the family social work service to 'step down' families to their service, which had not been available before. The senior managers in Family Social Work are continuing to review CIN children to scrutinise and improve the quality of the plans, check the frequency of visiting and assess whether families are best supported by social work or early help services.

## 11. Young Carers

11.1 Young Carers are children under 18 who provide regular practical, personal care and, or emotional support to a family member who has a physical, learning or mental disability, or who misuses substances, or where there is domestic violence. The term young carer does not apply to the everyday and occasional help around the home, a young carer becomes vulnerable when the level of care-giving becomes excessive or inappropriate. Local authorities have a duty to carry out a Child & Family Assessment of young carer's and provide services where the child is in need. Lewisham currently has a specialist worker based in the Assessment Service. There are also two small services funded by the council who provide support:

- Carers Lewisham provide advice, information, support and holiday activities for young carers aged between 5-18 years.
- Family Action run a family support project offering holistic family intervention to young carers aged 8-18 years and other family members.

11.2 We do not yet have reliable performance information on the number of Young Carers being assessed and supported in Lewisham. Measuring the number of young carers in Lewisham is challenging, in part because young carers often wish to remain hidden. It can also be difficult to identify where there are children or young people with caring roles, as it is often the adults in each situation that come into contact with services. In 2017 Carers Lewisham estimated that there were likely to be around 3,500 young carers in Lewisham (<https://www.carerslewisham.org.uk/1944/>)

11.3 We do know that:

- As of Dec 2018 Carers Lewisham had 300 young carers on their database.
- In 18/19 our Family Action carers service worked with 32 young carers
- In 2016-17 the specialist social worker for Young Carers identified 236 notifications received.

11.4 At this point in time it is not possible to say whether the same children feature across these services and are double counted. There is insufficient performance and quality assurance information on this area of practice to understand the full impact and reach of our current offer and the needs our young carers face, and this will be considered through the development of Lewisham's Early Help Approach and ongoing social care improvement programme.

## 12. Private Fostering

- 12.1 A privately fostered (PF) child is 'a child who is under the age of 16 years old (18 if disabled) and who is cared for, and provided with accommodation, by someone other than: the parent, a person who is not the parent but who has parental responsibility, or a close relative defined in this context as a brother, sister, aunt, uncle, grandparent or step-parent. The Local Authority has a duty to assess and monitor the PF arrangements when a PF notification is received or the local authority becomes aware that a PF arrangement already exists.
- 12.2 Lewisham currently has one specialist PF social worker in the Assessment Service, who conducts the assessment and monitors PF arrangements (where children are not also CIN for the first year). Longer term PF arrangements are monitored in the CLA Service. We are in the process of reviewing this arrangement and plan to assess and support PF arrangements differently in future. An update on this will be provided in the next safeguarding report.
- 12.3 A separate annual report is due to be submitted to the LSCB/Partnership in August, this provides an overview of practice in this area. A summary will be provided in the next safeguarding report. At present we are aware of 17 private fostering arrangements.

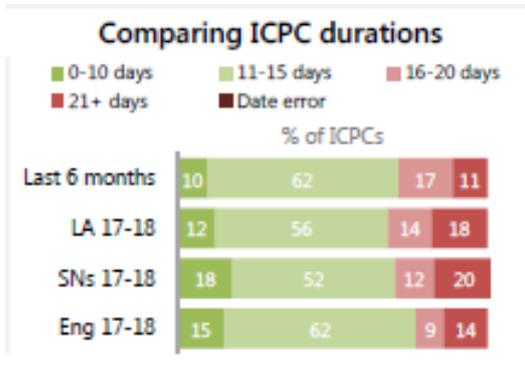
## 13. Child Protection Conferences, Child Protection Plans & Core Groups

- 13.1 Where a child is judged to be suffering harm an initial child protection conference (ICPC) is convened and should take place within 15 working days of the strategy discussion at which s47 enquiries were initiated. The ICPC brings together the family, supporters, advocates and professionals involved with the family, to plan for the child's future safety. If it is decided at ICPC the child remains at risk of significant harm a Child Protection Plan is put in place to support the family to safeguard the child. Where a child has been made subject of a Child Protection Plan the child and family is transferred to the Family Social Work Service.

Indicator	Q3	Q4	Q1	Apr 19	May 19	Target
Rate of children becoming subject of a CPP (rolling) per 10,000	65	59	55	56	54	No target
% of children becoming subject to a CP plan for a 2nd or subsequent time ever (rolling 12 months)	8%	12%	15%	14%	15%	No more than 16%
No. of CP plans lasting 2 years or more	TBC	TBC	12	0	0	No target
% of children visited within 10 working days (Average across the quarter)	74%	79%	65%	66%	64%	90%
Core group meetings held within 6 weeks	69%	69%	69%	56%	69%	90%

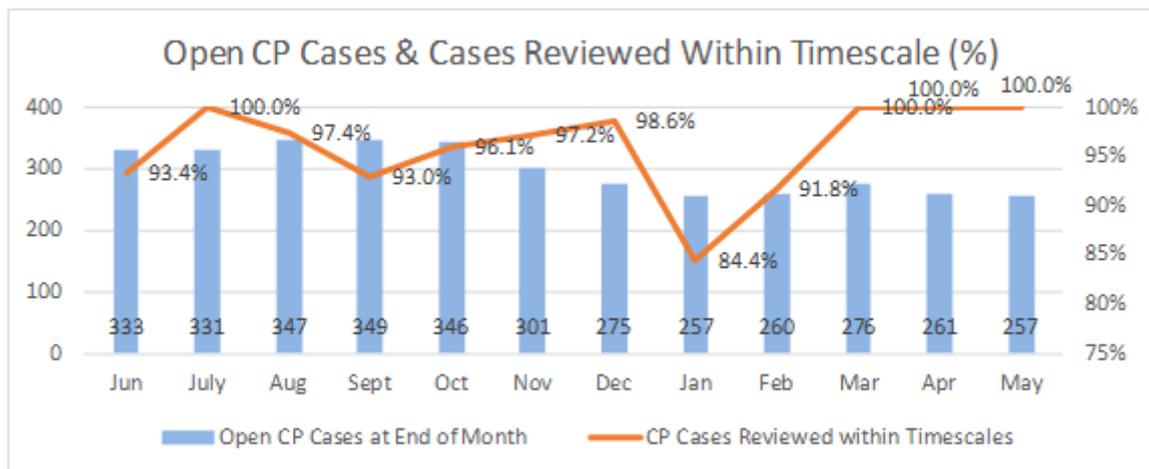
- 13.2 This shows how we have reduced our rate of CPP to come in line with other boroughs.

	2017/18	2018/19				
		Q1	Q2	Q3	Q4	May
Lewisham	57	59	65	65	59	54
SN Average	54	-	-	-	-	-
Inner London	53	-	-	-	-	-



The national indicator timescale for an initial Children Protection Conference (ICPC) to be held from a child protection strategy meeting is 15 days. This data shows performance between Dec – May compared to others. This is a slight improvement on previous performance. In 2018/19 Q2 = 81%, Q3 = 62% in 15 days.

- 13.3 Lewisham locally determines that children on CPP should be visited no less than every 10 working days, we require further improvement to hit our targets on this. London wide children protection procedures only requires visits every 20 days, on this indicator over the last 3 months 86% of children were visited in timescale.



- 13.4 There has been a slight increase in children becoming subject to CPP for 2<sup>nd</sup> time or subsequent time. In May all the cases reviewed, it was found they had not been stepped down from CPP in the last 6 months, therefore there is no link between reducing our numbers of CPP and an increase in second time re-registrations.

#### 14. Public Law Outline: Pre Proceedings & Care Proceedings in Court

- 14.1 The Local Authority can initiate care proceedings (s31 Children Act 1989) where a child is suffering or is likely to suffer significant harm attributable to the care being given to the child, or because the child is beyond parental control. The Public Law Outline initially came into force in 2010 and aimed to streamline court procedures by introducing a pre-proceedings period to divert the need for proceedings in some instances and to ensure preparatory work facilitated the smooth running of court cases, within a 26 week timescale. Before a decision can be made to initiate Care or Supervision Proceedings, a Legal Planning Meeting is held where a decision is made about whether the threshold criteria have been met and whether a legal order is

necessary to protect the child. Children subject to pre and care proceedings are allocated in the Family Social Work Service.

Source: CAFCASS

Care Applications Rate per 10,000	2015-16	2016-17	2017-18	2018-19
England	11.0	12.5	12.2	11.4
London average	8.4	11.1	9.8	8.6
<b>Lewisham</b>	<b>13.4</b>	<b>13.8</b>	<b>14.1</b>	<b>13.2</b>

Average duration	2017/18	2018/19
England	31	29
London	31	29
Lewisham	27 weeks	28 weeks

- 14.2 Through the 2018/19 reporting year Lewisham took proceedings on 152 children. Lewisham's number of care applications is 4<sup>th</sup> highest in London according to CAFCASS. However since the introduction of the SoS practice framework and the Access to Resource & Care panel in January 2019 the numbers of applications has reduced. Q1 = 28, Q2 = 26, Q3 = 19, Q4 = 20 (*Note cases not children*)
- 14.3 The timeliness of our proceedings falls just outside the court recommended timescales, but this has been a challenge across the country. Delays are most commonly caused by the late presentation of family members coming forward to be assessed for suitability as carers. We hope the emphasis on family networks in SoS and the intention to introduce Family Group Conferences (DfE innovation grant dependent) will contribute to reducing further the need for and delays in, court proceedings.
- 14.4 If cases transferred to other local authorities are excluded, approximately a half of all proceedings result in the child remaining in local authority care, these tend to be children of secondary school age. The other half are resolved with the child being cared for by family/friends. This year 7 cases/8 children had older sibling(s) who were subject to previous proceedings (recurrent), and 8 cases/13 children had previously been subject to care proceedings (repeat). With the assistance of our Islington Partners in Practice, through 2019 we will be exploring the feasibility of introducing the PAUSE programme, which aims to reduce repeat care proceedings to try to reduce these numbers.

Outcomes for Children	TOTAL
No order	9
Child Arrangement Order (CAO)	7
CAO/Supervision Order (SO)	22
Special Guardianship Order (SGO)	9
SGO & SO	5
SO	20
Care Order (CO)	42
CO & Placement Order for Adoption	24
Case withdrawn	3
Transferred to other LA	17
Family Assistance Order	1
<b>TOTAL</b>	<b>156</b>

**Summary of our progress to improve the way we help and protect children living with their families and improve the experiences, progress and permanence arrangements for children in our care and our care leavers.**

The following table is an extract from the updated self assessment completed in June, in preparation for the annual conversation with Ofsted on June 21<sup>st</sup>. It shows the key areas for improvement identified in the January self-assessment, the actions taken and progress made during Q4 & Q1, between January and early June 2019. It also references the impact we think we are making on practice and with children and families.

Areas of improvement identified in the January self assessment	What we have done to improve	What is the impact on practice, children, young people and families
<p><b>Ensure MASH delivers timely responses, maximises good multi-agency information sharing to make consistent threshold decisions.</b></p>	<p>The LSCB Continuum of Need Threshold document was refreshed and brought in line with the London guidance. The new continuum was piloted through Jan'19 and introduced in Mar'19, in parallel with changes in MASH. This is an interim arrangement, scheduled for a further update in 2020 after the Early Help Review is completed and the new partnership arrangements are established.</p>	<p>Clarity provided on thresholds, this assists partner agencies working across different London boroughs. Greater clarity about the threshold for Early Help and Children's Social Care services.</p> <p>Threshold decision making in the MASH has started to adjust accordingly, more children are being visited and assessed by a social worker.</p>
	<p>A number of improvements were made to the MASH, starting with the redesign of the ICT (LCS) processes which went live on Jan. 7<sup>th</sup>. Since then:</p> <ul style="list-style-type: none"> <li>• The Operational Protocol has been refreshed</li> <li>• Business processes have been simplified to reduce the number of practitioners that deal with a referral and improve recording practice.</li> <li>• The new threshold continuum is being applied</li> <li>• A new referral form has been launched</li> <li>• A performance dashboard is being developed and performance is being used routinely to manage throughput.</li> </ul>	<p>Management oversight has been increased and decision making is being more frequently quality assured to attain more consistency.</p> <p>Daily MASH meetings now take place and better use is being made of the co-location of partners. The number of MASH checks is increasing.</p> <p>Recording practices have been simplified to improve the timeliness of decision making.</p> <p>All activity is now recorded on EHM/LCS within the existing business processes, historical activity is now properly captured on the case file and can be used to inform decisions.</p>

	<ul style="list-style-type: none"> <li>• The Group Manager has been introducing practice changes to strengthen threshold decision making.</li> <li>• The staffing structure has been reviewed and will be subject to changes through Q3 to better deliver practice.</li> <li>• Audits on threshold decisions are routinely undertaken</li> <li>• All social workers now have access to EHM to view all history.</li> </ul>	<p>Thresholds have been lowered, particularly as different responses to domestic violence have been introduced. More children are being seen and assessed by a social worker.</p> <p>Audits of practice are identifying that decisions are not delayed when children are at risk. There is a gradual improvement in the timeliness of contacts having a decision within 24 hours, audit judges the practice requires further improvement to be consistently good.</p> <p>Feedback from schools (Director of Education) is that improvements are being noticed in the MASH particularly in informing referrers of the outcome.</p>
<p><b>Ensure the core social work tasks are done consistently well in a timely manner, to minimise drift and delay.</b></p>	<p>A cycle of monthly performance reviewing has been in place since January'19 driving improvements in core areas of performance / practice.</p> <p>All managers and social workers have received 2 days foundation SoS training. Practice guidance core practice areas i.e. analysis, chronologies, case notes, management oversight and plans has been issued.</p> <p>Increasingly monthly manager audits involve a practice conversation with the social worker/PA In Apr &amp; May, 70% of audits included a learning discussion with the practitioner.</p> <p>LCS assessment and child protection recording formats have been re-designed to encourage more risk balanced and child focused practice. Planning formats for CIN and CP plans were re-designed and went live in Feb'19.</p>	<p>Incremental visiting targets for Q4 were met and gradual improvements can be seen:</p> <p>LCS forms reduces bureaucracy and improved efficiency – more time for direct</p> <p>In April 24 cases across the service were generically audited and moderated, 54% were judged to be good, 36% required improvement. 2 were inadequate. Strengths in practice were identified as: timely visits, participation, direct work, multi-agency working, recognising diversity. Most of the cases were judged to have made a positive impact.</p> <p>There is still more work required to improve the performance and quality of core social work tasks to be consistently good. In the assessment service there is more improvement required on visiting, which is a priority for the service.</p>

**Refocus social work on developing helping relationships, strengthening participation and promoting purposeful direct work.**

SoS foundation training delivered through Q4/Q1 emphasises the child’s lived experience and the importance of engaging the family network and identifying and promoting safety in families. The senior leadership team have been promoting the vision, values, supporting the implementation of SoS, creating opportunities in service meetings for more discussions about the importance of performance and core practice and sharing the learning from collated QA activity.

Through Q1 the participation officer was moved to be part of the QA and improvement service to raise their profile and create a stronger link between participation and learning. They have been revising the Participation and Engagement Strategy, to strengthen our use of service user feedback and engagement in design.

Changes to LCS promotes a different focus and style in recording, which aims to encourage more child focused analysis and planning.

Listening and Learning (Jun’19) had a focus on gaining more service use feedback, over two days 58 children and parents were spoken to. The majority of feedback was positive about communication, relationships with their social worker, feeling supported and helped, and children said their social worker had made them feel safer.

Score	0-3	4-6	7-10
TOTAL	1 (2%)	12 (20%)	46 (77%)

In the January self assessment strengths of practice were identified as practitioners knowing their families well, they were committed, tenacious and culturally competent and there was many examples of good direct work taking place. In contrast, there was also many examples of practice that could be experienced as punitive and overly interventionist. The quarterly QA report for Q4 and Q1 found similar themes and emerging evidence of practice being influenced by the SoS practice framework, but there is still a wide degree of variation in practice across the service that requires further improvement to be consistently good.

**Develop practice that manages risk proportionately and SMART plans support families to stay together wherever it is safe to do so.**

The focused visit by Ofsted identified the quality and consistency of assessments was an area for improvement. Performance information also shows variation in outcomes of assessments, s47 enquiries and the length of time families remained in the service amongst the five assessment teams.

There have been several audits of assessment practice and discussions across the management group about performance, thresholds, quality, purpose and transfers through Q4 and Q1.

Operation Encompass live in schools (May)

There is now more equitable caseloads across the assessment teams, gradually improving consistency in threshold decision making, a reduction in the rate of s47 enquiries and more proportionate risk management. More assessment cases stepping down to Early Help community services now have a TAF plan in place.

Audits in Assessment and direct observations (22 in L&L) shows a move towards more consistency in recording, but practice and the quality and consistency of assessments and plans requires further improvement to be consistently good.

	<p>In Jan/Feb an independent auditor reviewed a large sample of CIN and provided an external view about thresholds. Team managers also reviewed cases and observed CIN reviews.</p> <p>An Early Help contract increased capacity to work with families 'stepping down' from CIN.</p> <p>Plans on LCS were re-designed to simplify and associated practice guidance was distributed (Feb)</p>	<p>Improved CIN throughput, more manageable caseloads and smoother case transfers. Improvement activity is still ongoing to be consistently good.</p> <p>Next steps are to strengthen planning the CIN reviewing processes and management oversight, improve practice in the quality of planning and expand family support options providing help to families.</p>
	<p>In 2017/18 Lewisham's rate of ICPC and CPP was high. During the December L&amp;L event CP practice was scrutinised, direct observations of CPC's and audits took place. Simultaneously with the introduction of SOS, CP chairs engaged in practice review sessions. A pre-ICPC threshold consultation was introduced to discuss whether risk could be managed safely with a CIN plan.</p>	<p>Where risk was manageable and families were engaging they were not placed on a CP so, the CPP rate was brought down over a period of 4 months to be more comparable with other London boroughs and statutory neighbours.</p> <p>Performance on Core Group Meetings started to be reported in Dec'18 which enables management oversight. There is yet to be a shift in practice in the timeliness of core groups (69%)</p>
	<p>Scrutiny of pre-proceedings and getting to grips with drift in PLO and high rates of applications, led to change in processes in relation to LPM's, the inclusion of agreement to enter PLO through the Access to Care and Resources panel (Implemented Jan) and the expansion of the remit of the legal tracking panel to include cases across the whole service (not only FSW) and monitoring of PLO. Legal colleagues sit on the ARC panel, to better understand our threshold debates and subsequently applications have begun to reduce.</p>	<p>In Q1&amp;2 of 2018/19 we issued proceedings on 54 families. In Q3&amp;4 this fell to 41.</p> <p>In Feb'19, 11 audits of pre-proceedings cases identified risk was managed and responded to well. Risks were identified as having consistently reduced; the participation and engagement of children and their families was strong, so too was partnership working and management oversight which was judged as good.</p> <p>Changes in performance are indicative that the landscape is changing and we are beginning to managing risk more proportionately, but more improvement is required to be consistently good.</p>

<p><b>Develop a multi-agency contextual safeguarding approach and expand edge of care services to help young people stay safe in the community.</b></p>	<p>Through Q3 &amp; 4 2018/19 practice in relation to our response to missing and exploited children was strengthened, with the introduction of specialist posts and new tracking mechanisms.</p> <p>Rescue &amp; Respond service has been commissioned to support children at high risk of gang activity.</p> <p>Planning for the introduction of a dedicated vulnerable adolescent team was undertaken through Q1 and the specialist 'Safe Space' team is due to be operationalised in July '19, in phase one this includes our 11+ years edge of care team, missing officers, homeless 16/17 year old SHIP workers and a CSE specialist. The commissioned service for RHI's will cease and RHI's will be absorbed in this team. Safe Space will be closely aligned to the newly developed multi-agency Concern Hub (Jun '19) which co-ordinates multi-agency responses to children at risk of exploitation and gang violence.</p>	<p>Safe Space Team is scheduled for July '19. The aim of this service is to better support young people who go missing, are homeless and are at risk of harm through exploitation, violence and trafficking. The development of a specialist team is intended to:</p> <ul style="list-style-type: none"> <li>• improve intelligence and understand are local profiles, networks and geographical hotspots, in order to best respond and target particular areas of the community.</li> <li>• improve multi-agency information sharing and partnership working, especially with the PRU.</li> <li>• provide a holistic service to groups of young people, with enhanced support to keep them safe with family</li> </ul>
<p><b>Increase and improve management oversight and reflective supervision.</b></p>	<p>An additional layer of management (Group Manager) was introduced in Nov.'18. Recruitment for permanent posts commenced in June.'19.</p> <p>The breadth and depth of performance information has been expanded. Monthly performance clinics and a cycle of senior management performance reviewing is established.</p> <p>The updated QAF introduced a monthly and quarterly PQA cycle of auditing, observations and feedback.</p> <p>Monthly manager reports were introduced in Jan'19</p>	<p>The introduction of the group managers has significantly strengthened the capacity to drive improvements in performance, have more oversight of decision making, quality assure and develop practice.</p> <p>Performance and learning from all QA is now being used to inform service and workforce development planning, which is enabling the senior management team to focus on the right areas and enabling us to monitor progress and forecast demand intelligently.</p> <p>Completion rates of managers monthly auditing is improving after a dip in Jan &amp; Feb:  Mar – 55%, Apr – 73%, May – 71%</p>

	<p>The supervision framework/policy and associated templates and practice guidance were realigned to SoS and re-launched in Oct'18.</p> <p>Threshold decision making / management oversight panels were refreshed and a gateway to CLA panel (ARC) was introduced in Jan'19.</p> <p>6 weekly manager forums have been refreshed, covering key areas of management and consulting on improvements e.g. appraisal, vision &amp; values.</p> <p>Scheme of delegated decision making was developed in May'19 – to be introduced in July'19</p>	<p>Progress on management oversight is mixed and requires improvement. The Q4 QA Report identified: The independent CiN audit (Jan'19) noted supervision needs to be more reflective and drive children's plans forward. The Young Carers audit (Jan'19) also noted that it was difficult to see management oversight in records. However in CP Cases (Mar'19), it found a growing use of the new supervision template and this appeared to be improving the degree of reflective supervision. In the PLO audit (Feb'19) management oversight was rated at good.</p>
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## **15. Legal Implications**

15.1 There are no specific legal implication arising from this report other than the legislative framework outlined in the body of the report. Lewisham CSC provides children's safeguarding and support serves in accordance with the statutory framework provided by the Children Act 1989 and successive statutory requirements.

## **16. Financial Implications**

16.1 There are no specific financial implications arising from this report. A report is going to Public Accounts Committee on 10<sup>th</sup> July 2019 updating on the CSC budget. All the improvements described in this report are being delivered within the allocated CSC and early help budgets.

## **17. Crime and Disorder Implications**

17.1 The police are key partners in safeguarding children.

## **18. Equalities Implications**

18.1 Equalities factors are addressed in the body of the report. Further scrutiny of ethnicity in local populations versus those children's ethnicity when entering safeguarding and child protection processes is required to better understand over representation in comparison to local demographics.

## **19. Environmental Implications**

19.1 None.

## **20. Background documents and originator**

20.1 If there are any queries on this report, please contact Lucie Heyes, Assistant Director, Children's Social Care on  
Tel: 0208 314 8140  
Email: [Lucie.Heyes@Lewisham.gov.uk](mailto:Lucie.Heyes@Lewisham.gov.uk)