

## **Report of the Strategic Director of Children's Services to the meeting of Corporate Parenting Panel to be held on 2 November 2020**

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### **Subject:**

Head of Quality Assurance (QA) and Safeguarding Annual Report Independent Reviewing Officer (IRO)/Child Protection (CP)/Audit

### **Summary statement:**

This report provides an overview of the Safeguarding and Reviewing Unit performance from October 2019 to end of September 2020.

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### **Portfolio:**

**Children and Families**

### **Overview & Scrutiny Area:**

**Children's Services**

## 1. SUMMARY

- 1.1 This report provides an overview of the Safeguarding and Reviewing Unit performance from October 2019 to end of September 2020.

## 2. BACKGROUND

A number of changes have continued to be made in the service including recruitment to strengthen the work of the unit:

- An additional Independent Reviewing Manager
- A Child Protection Co-ordinators Manager
- A Service Manager for the unit

In addition to the above, a further LADO and Regulation 44 post has been agreed; these are currently being graded before they can be advertised.

Since March 2020, all Child Protection Conferences and Child in Care Reviews have been taking place remotely due to Covid 19.

### Child Protection Conferences

The number of Initial Child Protection Conferences (ICPC) being undertaken in Bradford has increased significantly over the last 12 months. It was at its highest at the end of August 2020 at 1040. At 30.9.20, 1009 children were subject to Child Protection (CP) plans showing a slight reduction.

The significant increase in the numbers of children being discussed ICPC has impacted on timeliness; this has reduced to 80% of conferences being held within 15 working days of the strategy discussion, although this remains within the required target. Review conferences have remained steady at 97.6% within timescale. To support service delivery, additional agency capacity has now been agreed for 12 months.

Core group timeliness has remained static at 88.4%. There have been recent developments to the forms used to record core groups and CP plans. These new forms have been designed with practitioners to assist with improving the quality and focus of work to reduce risk but also to make the task of recording these meetings more efficient. These new forms will be launched in LCS in the week beginning the 12 October 2020.

Audit activity has identified that thresholds are being applied consistently when decisions are being made as to whether a CP plan is required to safeguard a child. This audit activity has also highlighted challenges in relation to “step-down” arrangements due to the impact of Covid 19; challenges of seeing children and families, completing the identified work by agencies and there being a clear assessment to evidence the decision making.

There has been clear focus on reducing the number of children subject to plans for more than 2 years; this work has had a positive impact and there are now just 7 children in this cohort; this is the lowest it has ever been. This has been underpinned by the new manager leading and supporting the team with a clear focus on driving performance and practice improvement.

An additional joint review process has also been effectively implemented which requires the Child Protection Coordinator (CPC) and locality service to review the case together at 9 months to ensure that the appropriate arrangements are in place to step up or step down cases.

## Breakdown of Data

<b>Gender</b>	
Female	504
Male	487
Unborn	18

<b>Age</b>	
Unborn	19
0 – 4	303
5 – 9	258
10 – 15	354
16 – 18	75

<b>Ethnicity</b>	
White British	479
Dual Heritage	118
British Asian / Asian	230
Black British / Black	19
Other group	133
Not known	30

One of the areas for development identified in the previous report was the challenge and resolution process. This work has now been completed. The emphasis remains on supporting good communication between the CPC and the social worker. If the issues cannot be resolved they will then be escalated to team manager followed by service manager and then to Head of Service level. This change has proved to be positive, providing a forum for open and transparent communication. A “dip sample” of the challenges that have been issued so far indicates that the most common themes leading to challenge are risks not being addressed and a lack of evidence to support a step-up or step-down process.

The advocacy service provided by NYAS (National Youth Advocacy Service) continues to support children and young people to attend or contribute to their ICPC. This continues to support the aim

to ensure that the service is child centred. Work has now been completed to include participation codes for LCS so that this is something we are able to review and report on internally. It is anticipated that this will be launched in LCS in October 2020 with the reporting pack subsequently being made available.

Areas of future focus for the CP service:

- Manage the increasing numbers of children subject to plans and driving practice improvement.
- Continuing to support child centred practice by embedding participation codes, supporting children and young people to contribute to their review process and launch child friendly plans.
- Further work to develop the reporting on the reasons for challenge as part of the data pack; this will enable a more detailed understanding of issues that have required a challenge.
- Revising the CP quality assurance forms so that they provide a greater understanding of core issues through the child protection process. This will also need to capture a clear reporting function to ensure that we are able to understand themes and practice to support practice improvement.
- Improve and develop partnership working with external agencies to ensure that conferences are quorate and that are all participating to the process.

#### Independent Reviewing Officers (IRO)

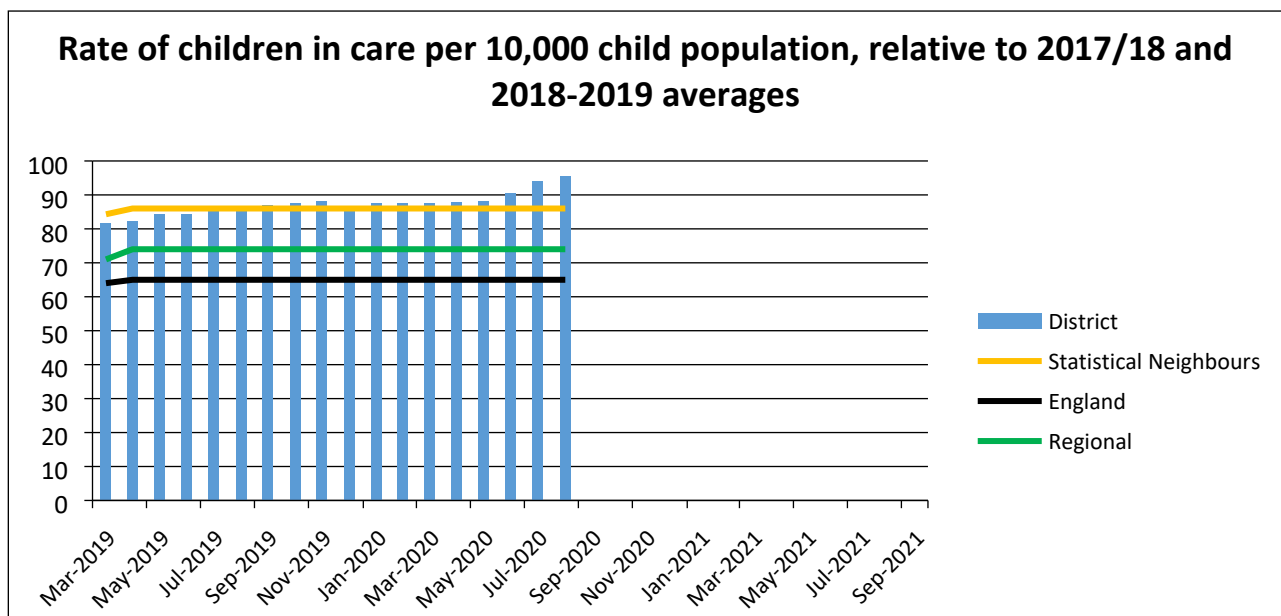
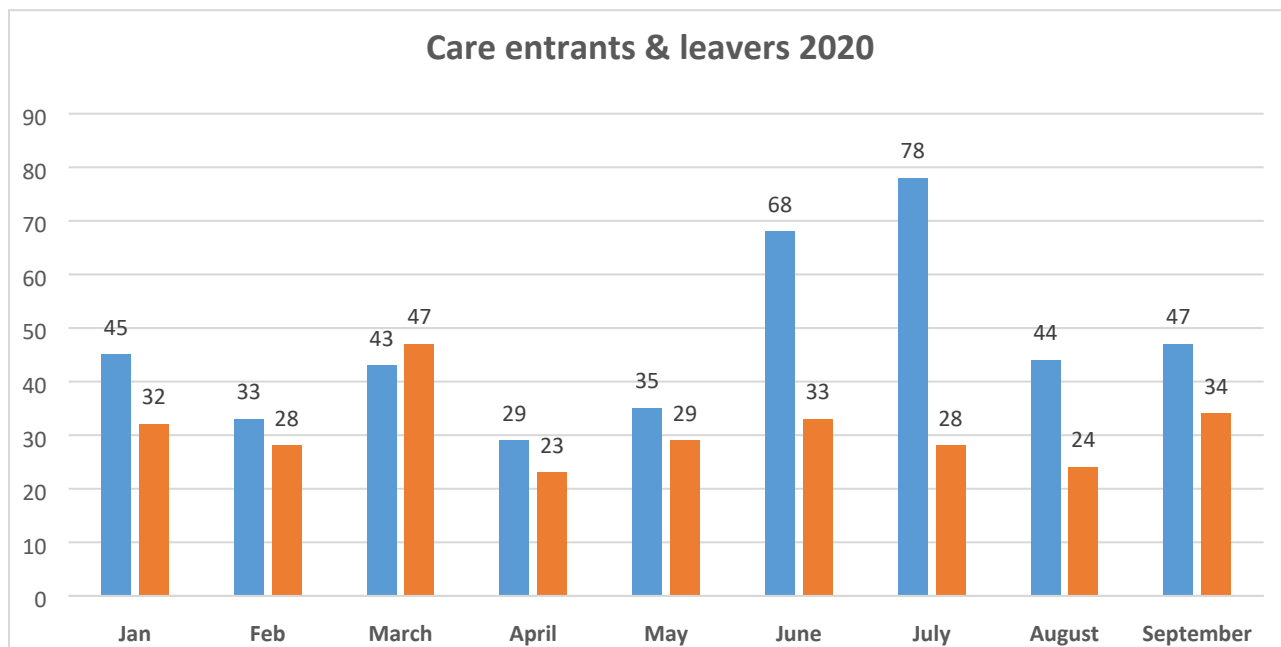
Despite a significant increase in the numbers of children in care, timeliness of reviews is positive with an in-month rate of 97% held within timescale at the end of September 2020.

There continues to be a steady increase in the number of Children in Care from 1241 at the end of September 2019 to 1374 at the end of September 2020. This has been impacted by Covid 19; there have been significant delays in court proceedings that are deemed less urgent, typically relating to applications to discharge a Care Order. This has placed the IRO service under increased pressure and to manage this demand, additional capacity has been agreed on a 12-month basis.

IRO Establishment	14 FTE IROs
Posts filled permanently	12
Agency IROs	2
Average Caseload	83

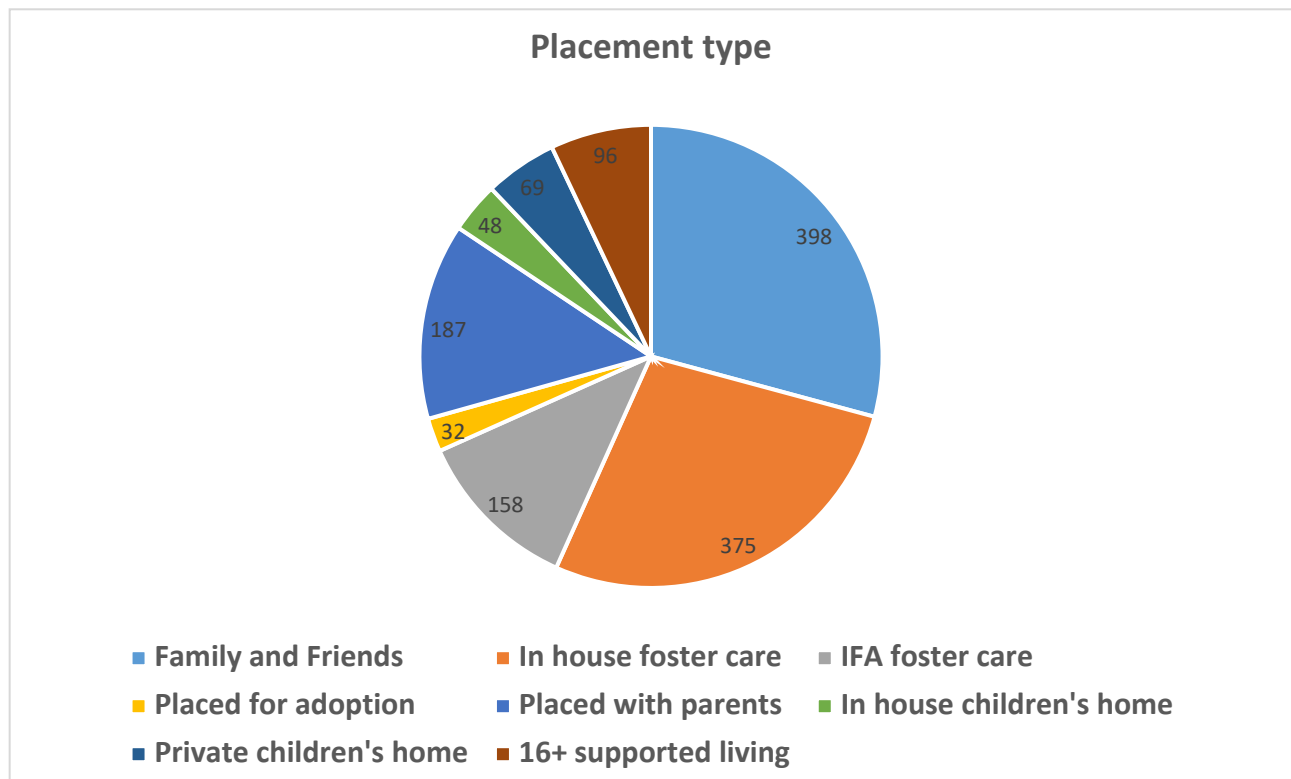
The average IRO caseload is higher than the nationally recommended maximum.

The graph below shows care entrants and leavers since January 2020:



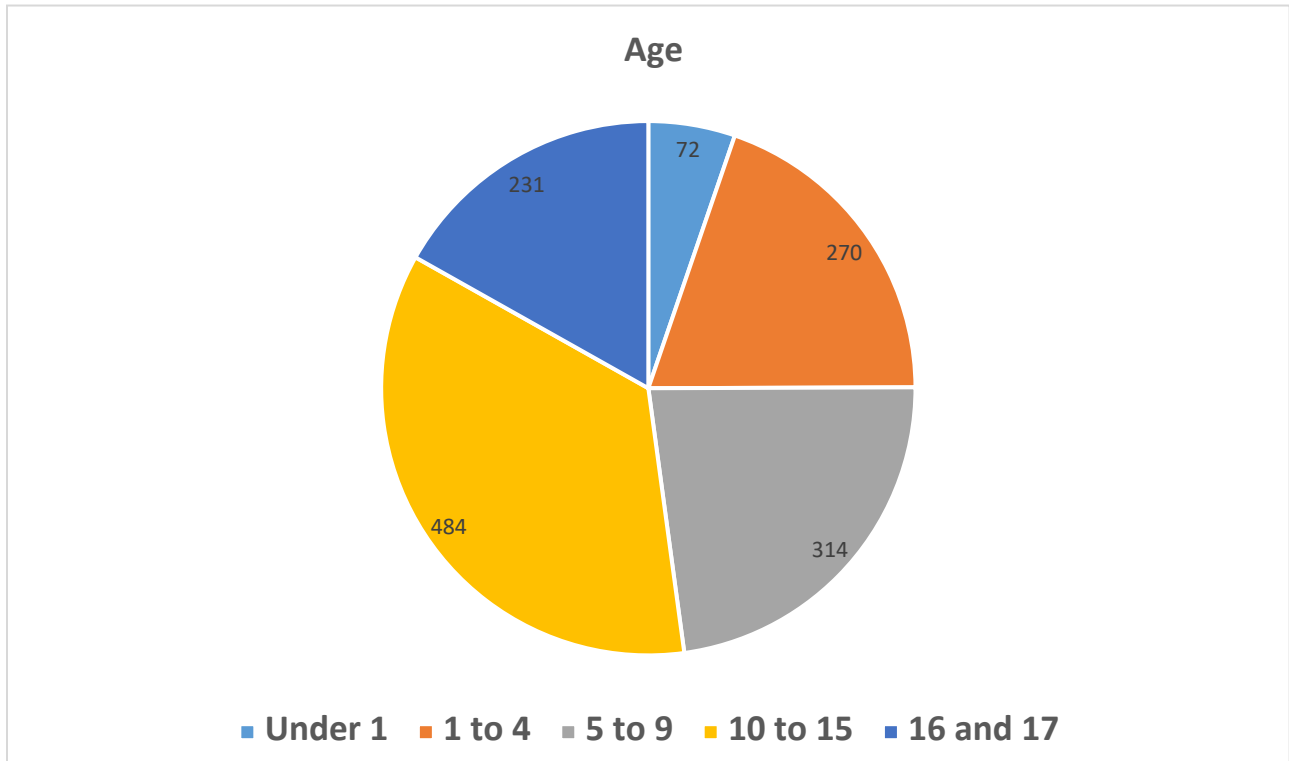
The Ofsted monitoring visit in February 2020 highlighted that there is still work to be done in achieving timely permanence for children in care. This has been a focus for the IROs but has again been impacted by Covid 19 and court capacity. To support this work further, the LCS forms have been amended to capture information regarding plans for permanence so that this can be monitored more effectively. This was launched in September 2020 and the data reporting is being developed.

The chart below shows the placement arrangements for our current child in care cohort:



Breakdown of Data

Gender	
Female	673
Male	703



Of the 234 young people aged between 16 and 17, 146 are subject to Care Orders with 76 accommodated by the Local Authority under Section 20 arrangements.

<b>Ethnicity</b>	
White British	821
Dual Heritage	187
British Asian / Asian	157
Black British / Black	36
Other group	150
Not known	25

As part of our improvement work, the challenge and resolution process for children in care has also been reviewed and relaunched providing a three tier system similar to that for children subject to CP plans. A dip sample of the challenges has evidenced that challenge most commonly relates to delay in care planning. It is also noted that the challenge process does result in issues being addressed.

Involvement of children in their reviews continues to evidence a high level of child participation. Feedback from IROs has highlighted that during “lockdown” children and young people have been more engaged in their remote reviews through the use of technology. From 1 October 2020 to 30 September 2020, 3451 children and young people have had the opportunity to participate in their review; it is positive to note that when children and young people have not attended, they have sent their views to the meeting so that their wishes and feelings can be considered for long term

planning. Out of 3451, only 15 children and young people did not attend the review and did not send their views.

Children and young people are still encouraged to use Viewpoint to relay their experiences of being looked after. There is a piece of work being undertaken to look at other programmes available to engage our children and young people using smarter technology, that provide apps for example that can be easily accessed from any device. We need to ensure that the right platform is provided to ensure that children and young people are able to share their experiences.

As part of continued service improvement, the Fostering IRO role has now moved under the Safeguarding Unit. We have 3 posts to undertake statutory annual foster carer reviews and to support the quality of foster carers and placements available to our children and young people; we have successfully recruited one individual permanently with another post being covered by an agency worker. The posts have been submitted to regrading panel to ensure that we have the right level of experience before we advertise the remaining vacancies. This is a new area of work for the unit and is being supported by ensuring that we have the right forms and pathways developed in LCS. The independent reviews now ensure that we are the necessary oversight and challenge to our fostering arrangements.

Areas of future focus for the IRO service:

- Manage the increasing numbers of children in care by ensuring that when children have a clear exit plan this is delivered as quickly as possible within the challenges of Covid 19. This includes looking at particular cohorts of children and young people such as those subject to Placement with Parents and those who are living with family and friends on long term fostering arrangement to ensure that the right arrangements and legal orders are in place to support long term plans of permanence.
- Review the platform that we use to capture children and young people views through the commissioning of the right platform.
- Further work to develop the reporting on the reasons for challenge as part of the data pack; this will enable a more detailed understanding of issues that have required a challenge.
- Revising the IRO quality assurance forms so that they provide a greater understanding of core issues at different points of the child's journey. This will also need to capture a clear reporting function to ensure that we are able to understand themes and practice to support practice improvement.
- Recruiting and embedding the independent fostering IRO role into the unit.

#### Quality Assurance (QA)

Work is underway to restructure the service to establish a permanent team which will allow all audit activity from Early Help, Fostering, Social worker and Youth Offending Service to be centralised. This will allow a better understanding of the child's journey whilst providing a consistent approach to auditing that will enable us to understand the service delivery. New forms and quality frameworks are being developed alongside an electronic database to provide all the information in on place.

Monthly audit compliance was 78% in June (highest return to date) but this fell back to 70% in July.



### Service area breakdown of audit return rate (last 3 months)

Service Area	May	June	July	6 month Average
Central Services	60%	100%	75%	59%
CCHDT	33%	33%	67%	53%
Children in Care	100%	71%	63%	77%
East	90%	90%	89%	84%
Front Door	86%	-%	-%	77%
Keighley & Shipley	86%	86%	71%	89%
Safeguarding & Review	60%	100%	80%	88%
South	40%	43%	50%	42%
West	67%	88%	71%	77%
16+	33%	75%	33%	62%

The front door service completed audits from their own service in June and July.

There has been a committed focus on moderation to improve the consistency and quality of the audits to ensure that we are all working to the same definition of “what good looks like”. The moderation process has been strengthened by advising auditors that the discussion following moderation is mandatory. An analysis of moderations, including compliance with feedback, is being shared with heads of service to enable them to be sighted on the staff in their service who are struggling and ensure additional support is provided

For recent audits completed, more than half are now judged as satisfactory or better in terms of the quality of the actual audit and it is evident that the coaching that has been offered as part of the moderation process is being effective.

Month	Same grade at moderation	Reduced 1 grade	Reduced more than 1 grade
January	57%	38%	5%
February	53%	40%	8%
March	72%	25.5%	2.5%
April	62.5%	31%	6.5%
May	69.8%	25.6%	4.7%
June	76.7%	23.3%	-

As part of the learning process, all case files audited in June were reviewed again in August to identify whether audit actions had been completed. 10 audits in the cohort (10%) had no recommendations; this is generally because the file is considered good and no actions are required, or because the file was closed at the time of the audit. Actions for social workers focus predominantly on process rather than quality.

There is evidence from many audits that work to improve case files, especially quick fixes, is undertaken during or immediately after the dialogue between the social worker and the auditor, and auditors do sometimes regrade audits accordingly. This underlines the positive impact of the collaborative audit process.

What is not evident on the vast majority of files is management oversight or supervision records acknowledging the audit findings and setting a plan of action to address them. Only 2 files had a record that referenced the audit.

Overview and themes across key performance areas:

Performance Area	February	March	April	May	June	July
Assessment	63%↑	61%↓	64%↑	68%↑	64%↓	70%↑
Planning	48%↑	52%↑	44%↓	40%↓	54%↑	39%↓
Management Oversight & Supervision	69%↑	72%↑	70%↓	64%↓	72%↑	81%↑
Child's voice and lived experience	50%-	51%↑	48%↓	43%↓	46%↑	40%↓

Assessment compliance averages at 64% over the past six months, and approximately one-fifth are highlighted as good. Auditors need to make more detailed comments on the quality of the work when it is graded as good, so we can achieve a fuller understanding of what we are doing well. The new Single Assessment has now been launched which will help to continue this area of work.

The audits recognised that 10 plans (out of 70) were highlighted by auditors as good in June and July 2020. Rationale included “clear about expectations” “Tailored to the young person’s needs”. “Clear with outcomes and timescales”. There continues to be a challenge to understand plan quality across the different types of plan. An average taken over 6 months since January 2020 indicates that Child Protection Plans continue to be considered the most comprehensive. In terms of learning, auditors continue to highlight that plans are not SMART. To support this area of work, new templates for plans have been launched in the LCS system.

In June, 72% of children’s case files indicated that supervision is taking place regularly. This has continued as an improving picture. In July 81% of case files were considered compliant and 19% considered good. Case files are evidencing that action tracking is becoming more evident and that good supervision is providing a clear oversight of the case with consideration of impact. There is also clear decision making recognised on a number of case files in July 2020. In terms of learning, supervision needs to be supported to be more reflective to understand the approach taken and the child’s voice. To continue to support this area, a new supervision policy was launched in September 2020 with new forms in LCS that will promote reflective and engaged supervision to

capture what difference our intervention is happening.

July has the lowest report to date for compliance for this standard. This is likely in part to reflect greater rigour on the part of auditors and in part to the challenges of Covid 19 visiting, which will now influence 3 months of record keeping. Audits are reflecting that there are challenges with capturing the lived experience for children under the age of 4. Observation of very young children will be particularly difficult under social distancing visiting practice. However, auditors also raised concerns about focus being directed at the adults and older siblings. Children are not always seen alone or spoken to individually, especially in sibling groups. To strengthen this area of practice a number of actions have been completed or identified:

- Practice guidance has been completed and signed off for Heads of Service to drive improvement in this area of work.
- Mandatory induction training will include a section on how social workers can capture the voice of the child.
- Consideration is being given to look at how practice supervisors can be involved to support learning and development.
- A new thematic work stream has been created to look at how we can improve the voice and participation of children. The group will involve representations from across the service.
- A focussed practice discussion will take place in each locality in order to further emphasise the importance of obtaining and clearly recording the child's voice and lived experience.

Areas of future focus for the QA service:

- Complete restructure and recruitment for a permanent quality assurance team, bringing together all audit activity for Children's Services.
- Embed the new audit social work audit form which will form part of the new electronic database that will capture audit activity and outcomes linked to the social worker to improve learning and development for the individual.
- Continue to drive audit compliance to increase the return rate to reach the target of 80%; as of October 2020 practice supervisors will also be completing monthly audits which will provide a greater oversight and understanding of practice.
- Continue to track actions to fulfil learning cycle alongside audits being completed with the social worker.
- Measure the impact of new forms that are being launched in LCS to understand the impact of this on practice.

- Complete and embed identified actions with regarding to improving the voice of the child and understanding of the child’s lived experience during Covid 19.

**3. OTHER CONSIDERATIONS**

3.1 None

**4. FINANCIAL & RESOURCE APPRAISAL**

4.1 N/A

**5. RISK MANAGEMENT AND GOVERNANCE ISSUES**

5.1 N/A

**6. LEGAL APPRAISAL**

6.1 N/A

**7. OTHER IMPLICATIONS**

**7.1 EQUALITY & DIVERSITY**

It is critical that these services are well established and a beacon of good practice to provide the quality assurance needed of children social work services to support the improvement journey.

**7.2 SUSTAINABILITY IMPLICATIONS**

N/A

**7.3 GREENHOUSE GAS EMISSIONS IMPACTS**

N/A

**7.4 COMMUNITY SAFETY IMPLICATIONS**

N/A

**7.5 HUMAN RIGHTS ACT**

N/A

**7.6 TRADE UNION**

N/A

**7.7 WARD IMPLICATIONS**

N/A

**7.8 AREA COMMITTEE ACTION PLAN IMPLICATIONS  
(for reports to Area Committees only)**

N/A

**7.9 IMPLICATIONS FOR CORPORATE PARENTING**

Challenging and strengthening services to improve outcomes for children across Children's Services.

**7.10 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT**

N/A

**8. NOT FOR PUBLICATION DOCUMENTS**

8.1 N/A

**9. OPTIONS**

9.1 To work with colleagues to implement processes and changes to the structure to support effective service delivery.

**10. RECOMMENDATIONS**

10.1 To identify further areas of work as actions for the service to focus on over the next 12 months.

10.2 For the Safeguarding and Reviewing Unit to ensure that the voice of the child is central to the work that is undertaken and captured as part of the Quality Assurance arrangements.

**11. APPENDICES**

11.1 None

**12. BACKGROUND DOCUMENTS**

12.1 None