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Marium Haque Strategic Director, Children's Services Margaret McMillan Tower Princes Way Bradford BD1 1NN

cc. Charlotte Ramsden, Chief Executive Officer, Bradford Children and Families Trust.

Dear Marium

Monitoring visit to Bradford children and families trust.

This letter summarises the findings of the monitoring visit to Bradford Children and Families Trust on 18 and 19 July 2023. This was the first monitoring visit since Bradford children's services was judged inadequate in January 2023, and the ninth monitoring visit since Bradford Children's Services was judged inadequate in 2018. Bradford children's services transferred to Bradford children and families trust on 1 April 2023, and this is the first monitoring visit under the new arrangements. His Majesty's Inspectors (HMI(s)) for this visit were Matt Reed and Louise Hollick. Michelle Edge, HMI, acted as supernumerary for this visit.

Areas covered by the visit.

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

- The integrated front door (IFD) and initial response to safeguarding and child in need requests for children.
- Assessment and planning in the duty and assessment teams.
- Local authority designated officer (LADO) response to allegations against people who work with children.

This visit was carried out in line with the inspection of local authority children's services (ILACS) framework, inspectors were primarily on site.

Headline findings

Since the last inspection, Bradford local authority have voluntarily transferred responsibility for children's services to Bradford Children and Families. Senior leaders in both the local authority and the trust have worked together to minimise disruption for staff during this time. Overall, staff are positive about the change, and they



recognise that there have been some improvements and greater engagement with the staff. It remains early days for the Trust to have had a significant impact on the quality of services for all children. The response to concerns at the integrated front door have continued to improve since the last inspection. The conversational approach to receiving new referrals has been further embedded, and this is assisting in most children receiving an appropriate and timely response to their needs. The IFD continues to receive a high number of Police Protection Notices (PPNs) which have not been triaged by the police, placing undue pressure on the IFD, and a joint solution is needed. There remain inconsistencies in the assessment and planning for children once work leaves the front door. For some children, this has led to delays in multi-agency plans being formulated. The LADO service provides an appropriate and timely response to allegations against professionals who work with children.

Findings and evaluation of progress

Since the last inspection, there have been improvements in the response to initial contacts and referrals received at the IFD. The conversations-based approach to receiving contact and referrals, initially introduced just prior to the last inspection, is now more embedded. This is having a positive impact on the understanding of concerns for children and the outcomes agreed. Social workers consistently make efforts to inform referrers of the outcome of referrals, and this is promoting more effective working relationships between partner agencies. A weekly referral meeting, in which data and the quality of referrals are considered, is further assisting the improvement of work in the IFD.

Social workers complete detailed checks to inform decision-making. Previous history and involvement with families are considered during initial screening, and there are consistent efforts to speak with parents. Social workers understand the need for parental consent, and this is obtained wherever possible. When needed, parental consent is dispensed with, and, in most referrals, this is appropriate and clearly recorded. This prevents delay in responses when safeguarding concerns are raised.

There are some children who have been subject to repeat referrals. In all children's cases seen, the legacy of poor practice was evident, with failed interventions, overly optimistic assessments, and premature closure. Some children are now re-opened to children's services and more recent responses to referrals are meeting the children's assessed needs.

The responses to concerns out of hours have been strengthened with a dedicated emergency duty team (EDT) for children. Managers in the IFD are alerted to new referrals via the electronic recording system and email. The team manager effectively triages the referrals received out of hours and at weekends to ensure there are no delays in daytime responses.



The conversations-based approach has assisted in developing more effective working relationships with some partner agencies, but collaborative responses to domestic abuse concerns need to be strengthened. The IFD receive a high level of PPNs from the police which are emailed, with limited police assessment of risk for children. Not all PPNs are of a high quality and the outcome of police attendance is not always clear. Practice supervisors and managers spend a lot of time filtering information from PPNs to enable a prioritisation of response due to a lack of initial police triaging. Although they do this effectively, the system is inefficient, and the sheer volume of emails increases the risk of concerns for children being overlooked and delays in response. The daily risk assessment meeting, in relation to domestic abuse notifications observed by inspectors, was adult focused and did not add to the overall safety planning and risk management for children.

Managers' oversight and decision-making in the IFD is timely and appropriate. Managers clearly record direction they give to social workers at the point of contact, and there is clear rationale for decisions. Thresholds are being appropriately applied to ensure that children are directed to the right level of service at the earliest opportunity.

When children require a safeguarding response, decisions to convene strategy meetings and progress to child protection enquiries are timely. Children are transferred without delay to the assessment and duty teams. Strategy meetings are attended by the relevant professionals, who share appropriate information to inform decision-making. However, despite the outcome to progress to child protection enquiry being clearly recorded, specific actions from the strategy meeting could be more evident. The subsequent child protection enquiries focus on presenting risk; children are seen, and their views obtained. Family members are included, and consideration is given to how extended family can offer support. The records of the child protection enquiries vary in the level of detail and analysis of risk, but this did not affect the outcome, which, for most children, is appropriate.

When child protection enquiries result in children needing to enter child protection processes, not all children progress to initial child protection conference (ICPC) in a timely way. The oversight of children waiting to be discussed at ICPC is not consistent. Some children received additional visits with clear management oversight, but this was not the case for all. For others, there is no increase in visiting and a lack of clear management oversight, to provide assurance that children were not at increased risk. Although no children were found to be at immediate risk, there have been delays in effective multi-agency planning for these children. Senior leaders have identified this as an area of concern through performance management. Measures have been put in place, and performance is improving, with a clear acknowledgement by senior leaders that more improvement is required.

The work within the assessment and duty teams is not as consistently strong and there remain inconsistencies in the quality of assessments and management



oversight. There have been improvements to more recent work, but not all assessments are leading to timely multi-agency plans and interventions to support children, although some are detailed and include the child's voice and influence. Some assessments are overly descriptive and lack analysis of children's presenting needs. The views of children are not routinely captured, and when they are, it is not clear how they are influencing planning. Where assessments are delayed, management oversight does not give a clear indication of why or what services are in place to support families while assessments are ongoing. This results in families not receiving the right level of support at the earliest opportunity.

Safety plans are routinely devised with families, but it is not clear how actions in the plan offer additional safeguards to children. Many safety plans place the onus on vulnerable parents to make immediate changes to longstanding behaviours, which previously they have been unable to do. As a result, safety plans are not robust and do not give assurance that children are safeguarded to a greater degree.

In one locality, there has been a brief period, during increased demand and staff shortages, in which some children have not had an allocated worker. This matter has been resolved, and all children now have an allocated social worker. During this time, although the children were seen by duty social workers, there was a delay in plans to meet the children's needs.

When allegations are made people who work with children, the local authority designated officer (LADO) responses are timely and appropriate. In those cases seen, the decision-making was clear and LADOs maintained effective oversight of the progression of investigations. The LADOs are monitoring trends and outcomes of referrals from children's homes, and where additional training or advice is required, this is provided. The outcomes of these referrals are reviewed monthly to ensure that responses are appropriate.

Senior leaders in the trust and the local authority have worked together to minimise the impact on staff during the transfer of responsibility to the trust. There is an expressed commitment to work together as everyone adapts to the new working relationship. The self-evaluation provided by the trust highlights that leaders are getting to grips with the practice issues and the scale of improvements needed. Senior leaders acknowledge that it will take some time before the legacy of poor practice is resolved.

Auditing practice requires further development to assist leaders in identifying the improvements needed. New audit guidance has been developed but is too recent to have significantly impacted on audit activity. Compliance with audit completion is low, and leaders acknowledge that there remains 'over optimism' about what good practice looks like so as to enable the accurate identification of themes for practice improvement.



Some social workers have high caseloads. This is monitored by managers and leaders, and overall caseloads are reducing. Most social workers considered their caseload to be manageable, and they believe they are having more time to complete assessments and support families. Recruitment and retention remain a priority for leaders in order to provide stability in the workforce and consistency for families. The increased social work capacity in one locality has been welcomed.

Most social workers receive regular supervision, which they state helps them to reflect on practice and learning. However, the quality of recorded supervision is not consistent and is not always demonstrating clear direction to social workers, or providing challenge when tasks are not complete. Groups supervision is also available, which is providing additional opportunities to review children's cases and improve learning from rapid reviews.

Overall, social workers and managers in the IFD and assessment and duty teams were positive about the current situation. They acknowledge that there have been some improvements. Workers and managers are encouraged to attend a focus group and contribute to improvement work, which is assisting them to feel more valued. Workers report that managers are visible and supportive, they are consistent in their approach, and they encourage an open and supportive environment.

I am copying this letter to the Department for Education.

Yours sincerely

Matt Reed Senior His Majesty's Inspector