



## **Self-Assessment of Social Work Practice**

**November 2018**

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## 1. Introduction

Children's social care services in Birmingham are delivered by Birmingham Children's Trust. The Trust is owned by but operationally independent from Birmingham City Council. The Trust Board, chaired by Andrew Christie CBE, is fully operational. A detailed contract which includes finance, performance and governance is in place. Andy Couldrick, the Chief Executive of the Trust, is responsible for the delivery of the contract. Anne Ainsworth is the Acting Director of Children's Services in Birmingham City Council. Anne provides strategic and systems leadership for children's services and education. There are a series of regular performance and contract meetings between the Trust and Council, providing a high support and high challenge environment. These arrangements began on 1 April 2018; the contract is in place for five years.

The Trust vision is to build a service that provides excellent children's social work and social care services for the city's most vulnerable children, young people and families. We aim to always deliver services with compassion and with care, through positive relationships, building on strengths. We work in collaboration with children and young people, families and our partners. We strive to always listen to, involve and include children and their families in our work. We aim to achieve the best outcomes by supporting children to be healthy, happy and resilient.

The last full Ofsted inspection of children's services in September 2016 found that services for children overall were inadequate. Services for children looked after, adoption and care leavers were judged to require improvement. Services for children needing help and protection, leadership, management and governance were judged to be inadequate. Since then, Ofsted have carried out six monitoring visits, all of them demonstrating a positive trajectory, as well as identifying where further improvement is required, in order to deliver consistently 'good' services to children. **Our self-assessment, using the Ofsted ILACS performance criteria, is that overall we require improvement to be good.**

## 2. Progress since the last self-assessment and inspection

The Ofsted inspection in September 2016 found clear progress in a number of key areas. However, the changes at the front door of the service were still new and practice was inconsistent and rarely good. As a result, some children continued to receive inadequate services. Subsequent monitoring visits have seen continuous improvement. We have systematically completed all of the recommendations raised by Ofsted during the inspection, and those raised during subsequent monitoring visits. We now have an effective front door and a fit for purpose multi-agency safeguarding hub. We are completing increasingly purposeful work with children and their families, and this is resulting in better outcomes for more children. Monitoring visits have confirmed that we have an accurate understanding of ourselves; we know that we have areas of practice that we still need to improve.

We are developing a learning and reflective practice culture. The service is calmer, systemic supervision training for team managers and heads of service is in place, caseloads are stable and average 17 children per social worker. Staff turnover and agency staff numbers are lower than statistical neighbours and the England average. There is a strong, targeted early help family support service, a greater focus on practice and on effective social work interventions. We are increasingly seeing good social work practice from committed social workers who know their children well.

### **We have developed a number of key priorities that we are working on now**

- We continue to embed the relationship-based practice model to drive improving practice.
- We continue to build collaboration, understanding, and capacity within the Trust Board.
- We continue to develop and sustain a skilled and confident workforce.
- We are working hard to improve placements, choice and sufficiency for children in care.
- We are developing a practice response to children at risk of contextual harm.
- We are reviewing our service response to disabled children.

**Examples of improvements since the 2016 inspection and the last self-assessment include:**

- An effective front door: the Children's Advice and Support Service/Multi-Agency Safeguarding Hub (CASS/MASH) service is efficient in processing contacts and referrals about children. Police, health, education, domestic abuse specialists, adult and 0-25 mental health staff are located in the MASH.
- Caseloads for social workers are consistently lower and more manageable. Children are seen when they should be, and work is allocated promptly across the service.
- Work with children and their families is more purposeful and focused. Direct work with children routinely takes place and children are seen alone.
- More social work posts are now filled permanently: 86% of social workers and managers are permanent. Three years ago, 33% of social work posts were covered by agency staff.
- Our staff receive regular supervision which is increasingly reflective.
- Assessments of children's needs are timely, and children are routinely seen as part of their assessment.
- The child protection (CP) conference system works effectively. The strengthening families model ensures clear exploration of strengths and risks with parents. Fewer children's plans end too quickly; few plans last longer than they need to.
- Most children in care are placed in stable care arrangements. Placement stability performance is in line with the national average and statistical neighbours. Children's care plans are regularly, thoroughly, and independently reviewed.
- The majority of care leavers are in suitable accommodation and are in education, employment or training at a higher rate than national and statistical comparators.
- The voices of children in care and care leavers are prominent in influencing services and service leaders. No senior appointments are made in the Trust without the involvement of young people.
- The introduction of practice weeks has connected senior leaders to practice as well as enhancing our quality assurance system.
- We know ourselves well.

## **We are not yet offering consistently good services - our challenges**

We continue to have challenges. The numbers of children subject to child protection plans has increased in the last year, especially relating to babies and older teenagers. We understand the reasons for this increase, and we are responding to this by developing a stronger family group conferencing function and an innovative edge of care offer. We know that this is effective in supporting children to remain safely with their families. We are also committed to developing a multi-agency contextual safeguarding hub to address the rising number of teenagers who need to be protected, but not necessarily through child protection planning. The number of children in care has increased steadily by 4% between October 2017 and September 2018 (71 more including 14 unaccompanied asylum seeking children). We struggle to find sufficient placements for children in care, especially for those with more challenging needs - this is a regional issue. We are keen to further develop our own in-house sufficiency to mitigate some of these pressures and we are working with the market to understand how best we can secure high quality placements for our children.

## **3. We know ourselves well**

The Trust Board and Executive were clear in April 2018 that the priority was to deliver a smooth transition that supported transferring staff and ensured the ongoing improvements were not disrupted. This was achieved. All 1900 staff transferred without a problem. Payroll, fostering payments etc. all worked as they needed to post-transfer.

Engagement with staff has been a priority for the Trust, and many events and meetings have taken place, before and since the Trust launch ensuring that the workforce understood the role and purpose of the Trust, the reasons for its establishment, the opportunities it brings, and what it means for staff. Engagement has been successful and we have not seen any increase in leavers. Increasingly we are becoming an attractive employer in the region and, for senior roles, nationally. Strong shortlists for Director, Assistant Directors and other senior posts evidence this.

The Trust has had to fill a number of senior posts since going live, due largely to retirements. The new Director of Practice and the Assistant Directors (one of whom was an internal candidate) have settled well into the roles and are building a strong platform for ongoing service improvement and to begin the Transformation programme the Trust's Executive is developing. The programme is predicated on an improved inspection judgement as this will give us the stable platform needed from which to build change and acceleration in improvement. The programme will be signed off by the Trust Board in January and will inform the next iteration of the Trust business plan.

### **Our risks for the future**

- The lack of an established strategic children's partnership across the city has been acknowledged by the recently appointed Chief Executive of the City Council. The strategic partnership response has not historically been effective in driving improvement. More recently, we are seeing the emergence of a strengthened commitment to partnership work both strategically and operationally.
- Our current case recording system will be replaced by a new system in March 2019; this major change has the potential to affect social work practice.
- We need to develop new systems and approaches to child exploitation and contextual safeguarding and we need partners to commit to those.
- Partner ownership of their early help responsibilities needs to be consistently in place and embedded.
- The Trust will invest in a pay and rewards structure that offers a more effective framework for progression and helps to strengthen recruitment, retention and best practice.

### **How do we know ourselves?**

We have introduced the Quality Strategy to the Trust. The strategy provides a clear framework for helping us to understand social work and social care practice. In addition to this, the strategy is supported by a clear plan which outlines how we will identify areas of development and areas of good practice. The strategy also states the key drivers to 'what good looks like,' a subject that we have discussed with Ofsted during a number of our monitoring visits. We understand our practice through:

- Management and performance data
- Practice evaluations (audit)
- Practice Weeks
- Thematic audits
- Service diagnostics
- Learning from Ofsted monitoring visits
- Peer challenge
- Feedback from young people and parents
- Staff consultation and engagement activity
- Learning from complaints and compliments
- Serious incidents and serious case review.

### **Practice evaluations**

In response to feedback from within the organisation and from Ofsted, we launched a new practice evaluation (PE) approach in June 2018. This launch was a little earlier than had originally been planned and hence we knew that it would take some time to embed.

Our new approach is predicated upon the practitioner sitting down with a manager other than their own and the two reviewing the case together, in large part in conversation, but also with the practitioner showing the evaluator records on the case file that evidence the work. It is also predicated upon the triangulation of information from that perspective with feedback from a parent, carer or the young person and from a partner who is also working with the family.

This new approach is designed to achieve a number of objectives:

- It aims to move away from a focus on compliance and perusal of the case record alone to a focus on practice and outcomes.
- It aims to be more engaging and collaborative and as such a better vehicle for learning.

- And it aims to be more in keeping with our practice model being relationship-based.

We have learned from our evaluations that:

- There is an ongoing need to remain as sensitive and professionally curious as possible in undertaking culturally sensitive work whilst maintaining robust thresholds and expectations, particularly in a city as diverse as Birmingham.
- When relationships are good they tend to be very good and sometimes this includes having overcome initial barriers due to prior experience of less empathetic workers. When engagement is less good there can be a tendency to “blame” families, seeing them as “non-compliant/resistant”, rather than asking ourselves what we are doing or could do to contribute to the situation. There are times where escalating to CP and pre-proceedings appears to be more about forcing compliance than a careful interrogation of the presence (or not) of significant harm.
- It also appears that matters are escalated more quickly than they are de-escalated thus leading to children and young people remaining on plans and in pre-proceedings for considerable periods where the level of concern would not meet the threshold for those activities to commence. There were also questions raised as to whether CP plans are an effective response to concerns about CSE and a need to explore alternatives, which we are actively pursuing.

### **Practice weeks**

During July 2018 we trialled our practice week approach. Eleven senior leaders each spent three days out in the areas observing practice across the case holding teams. Our aim was to connect senior leaders to front-line practice and to enable both organisational learning and individual learning for those involved.



The findings from the 33 practice evaluations received back are incorporated into the PE section below. Three evaluations included parent views and some evaluators also visited families and gained the views of five parents. We also received back 19 practice observation forms. Findings from these are as follows:

### **Parent and carer views from practice evaluations**

These were all very positive with parents commenting that the practitioners have been supportive and understanding; they have been treated with respect and are clear why the Trust is involved. They have felt listened to and positive relationships have been built. Support is directed at the whole family and is of both a practical and emotional nature. The practitioner has the child's welfare at heart, and the plan has brought family and agencies together and has effected positive change. One family commented they were pleased Trust involvement was ending but sad to lose the relationship they have with the practitioner. Points for reflection identified within the feedback were that: When a parent self-referred support was not offered and it was only later when police referred that support was offered; and one foster carer indicated she felt quite pressured at times to adopt certain strategies she felt were not appropriate for the child/family.

### **Key messages from practice evaluations: quality assurance**

- We are finding very few examples of 'inadequate practice' (randomly selected cases).
- We are confident that social workers know their children and their cases.
- We are seeing many good examples of work with partners – but this is not yet consistent.
- Social workers tell us that they value their supervision.
- Recording does not always reflect the work undertaken.
- Social workers largely feel they have manageable caseloads. The average is still around 17 children, but is higher in some areas. We continue to closely monitor and ensure effective supervision to individual social workers.
- Management and leadership of practice is focused, engaged and effective but there is room for further improvement.

- We are relentless in our focus on practice improvement.

## 4. Quality and impact of practice

### Early help and family support

#### Areas where we are making most progress

- Early Help and Safeguarding Partnership – jointly chaired with West Midlands Police.
- Adoption of a partnership plan with shared outcomes reviewed at the LSCB Quality Impact and Outcomes Group.
- Improved processes for contextual safeguarding with more focus on helping young people and families change behaviour and a more area-based approach. This is alongside a greater focus on disruption by West Midlands Police and partners.
- New multi-agency domestic abuse strategy and more effective police-led screening.
- Good Think Family offer with 1200+ families supported at any one time with a range of effective tools and interventions.
- Family support staff trained in City & Guilds Level 4 working with complex families.
- New multi-agency guidance – Right Help, Right Time, emphasising all agencies' early help responsibilities.
- Increasing number of early help conversations, assessments and plans at Universal Plus, with a requirement to adopt them in the Early Years Health and Wellbeing Service.
- Increased monitoring of quality and performance to ensure an effective city-wide offer.
- Embedded 'step up, step down' processes between Family Support and Assessment and Short Term Intervention (ASTI) teams, safeguarding teams, and the Disabled Children's Teams.
- Developing triage arrangements and panels to address the needs of children not in education and for families who are living in temporary housing.

- Embedded Primary Mental Health Workers (Forward Thinking Birmingham) and Neighbourhood Police Officers into the Trust Early Help Services.

### **Areas for further development**

- Embedding Right Help, Right Time with partners to ensure consistent application.
- Continued encouragement of greater use and reporting of early help assessments and plans from partners.
- Reducing exclusions, particularly with primary school pupils.
- Ensuring effective step down from children in need to Family Support.
- Developing strategic systems leadership partnership across the Council, Trust, Police and Health, and others.

### **Key messages: early help and family support**

- Early Help: the robustness of the early help offer from partners is still not consistently good. Some partners do this well. But too many cases are still referred into the Trust. The Early Help and Safeguarding Partnership is focused on strengthening partners' understanding of early help.
- Over 1110 families (1600 children) are worked with by our family support service at any given time – this includes our Troubled Families programme.

### **How do we understand the quality of practice?**

- From January to July 2018, a total of 105 early help assessments were quality assured. No assessments were judged to be inadequate and the majority of assessments were either good or very good. Assessments clearly outlined the child / families need and the vast majority of assessments identified clear actions that were appropriately focused on improving the child's situation. Managers continue to dip sample early help assessments and plans including those produced by partner agencies to assist us in

understanding the quality of assessments and plans completed across the partnership. We continue to sample work in this part of the service.

## **Children in need and child protection**

### **Areas where we are making most progress**

- Changes to the front door are resulting in improvements in decision-making and flow of work. MASH activity is better focused on children suffering significant harm; our response to children is more proportionate and consistent. ASTI managers now chair strategy meetings for children who are first referred to children's services. This means that the teams are involved in the child's assessment from the earliest point.
- Improved CASS-MASH front door. Work flows better; improved decision-making without delays.
- Good partner information sharing at front door around contacts and child protection enquiries.
- Assessments have improved in both quality and timeliness, with an improved focus on children and young people.
- Shared understanding and implementation of the thresholds for intervention and the further development of effective early help.
- All children are allocated to social workers and their progress reviewed frequently.
- Increase in purposeful work with vulnerable children and their families.
- Use of scaling tool within child protection conference and core groups to give clarity to the family and partners in respect of the change required.
- Effective use of step down when appropriate for children subject to child protection and child in need plans.
- Improved quality of social work practice: we are seeing improved outcomes for disabled children and their families.

### **Areas for further development**

- We are focusing on children subject to child protection and child in need plans for 3 months or less, and children subject to plans for a subsequent time.
- Purposeful visits and the need to link analysis of direct work undertaken to the child's plan and the impact of the plan.
- Management oversight and supervision recording to link back to the child's plan.
- Quality of recording, particularly of reflective discussions with families in worker supervision.
- Use of escalation pathways when change is not being seen eg. lack of school placement.
- Further work on effective partnership working particularly with mental health and other health services, schools and education services.
- Ensuring partners have a clear understanding of children in need and their role in improving children's lives.

### **Key messages: assessment, child protection and children in need**

- Performance continues to be strong around timeliness of assessment; children are seen as part of their assessment.
- Only 25% of child protection enquires result in an initial child protection conference. We know that we are undertaking too many strategy discussions.
- Despite the high volume of assessments and plans, work continues to flow through the system efficiently and in the child's timescale.
- 25% plans are for a second time ever. However, the figure for the last 12 months is 11%.
- Vast majority of plans end within 2 years
- Children are always seen alone at child protection visits, this is good practice.

## **How do we know about the quality of practice?**

### **Contacts to the service**

We closely monitor the timeliness and quality of phone calls into the front door of our service. Managers listen in and assess the call handler (referral and advice officer – RAO) against 14 standards. These standards include appropriate questioning and listening techniques, provision of correct information and advice, control of the call, personalising the call and the use of plain English rather than jargon. In August 2018, managers completed 22 call assessments with all 14 standards being fully met in 19/22 calls and with 13 met fully in the remaining calls. Feedback was given to the call handlers to support improvements in practice.

### **Strategy discussions**

In August 2018, an audit of strategy discussions was undertaken. The audit concluded that practice was within the Right Help, Right Time (RHRT) guidance. In the majority of cases, the key agencies were involved. Outcomes were not always accurately recorded by other agencies. Action has been taken to address this; the chair of the meeting now distributes the key actions immediately after the strategy meeting to ensure all agencies have the same record. The timing and the length of strategy meetings are appropriate to ensure that all information is shared. Strategy meeting minutes are written up and distributed within 48 hours with administrative support.

### **Safeguarding diagnostic**

During May and June 2018, the Heads of Service for Safeguarding and Disabled Children's Social Care (DCSC) undertook a practice diagnostic across safeguarding teams and DCSC. This was followed by a meeting to collate and reflect on the findings. The diagnostic exercise included holding a joint live table top exercise looking at the quality of child protection plans; observation of an initial child protection conference followed by group discussions. A diagnostics audit of 58 children's electronic records was undertaken. There was also a review of caseloads and staffing numbers across the service.

The diagnostic looked at 58 children in need plans and 6 child protection plans. The cases were graded using the Ofsted judgements. Eleven cases were judged to be inadequate, 43 require improvement and 4 were judged to be good. No children were considered to be at immediate risk, but the judgement reflected the lack of focus on the child's lived experience and/or the lack of key documents of sufficient quality on electronic records. The key findings were fed back to the service and an action plan was put in place to support service improvement.

### **Assessment and Short Term Intervention Service (ASTI)**

In April 2018, the Assessment and Short Term Intervention teams undertook an audit of 54 cases to examine progress against the ASTI improvement plan. The plan had identified 5 areas for improvement, leading to 5 core standards agreed by managers. The purpose of the standards was to increase the consistency of social work practice. An audit tool was created that aligned to the improvement areas. Team Managers audited cases and the ASTI Heads of Service dip-sampled the audited cases.

The audits identified areas of progress, but inconsistency against the core standards. Managers undertaking the audit reported that joint audit activity helps managers in their understanding of 'what good looks like.' The process was repeated in August 2018 when 43 audits were completed. The table below demonstrates the rate of improvement. This process will be repeated in November 2018.

Findings in April and August were as follows:

	Good	Requires Improvement	Inadequate
April	12%	52%	36%
August	32.5%	46.5%	21%

## **Families with no recourse to public funds (NRPF)**

### **Areas where we are making most progress**

- All families with NRPF have an allocated worker, an annual assessment and child in need quarterly reviews. There are no unallocated cases.
- Our assessments are robust and where families do not meet our threshold (not destitute) our rationale is clearly recorded to explain how we reached our decision. These families are signposted to other services for help and support.
- There has been a significant reduction in the number of legal challenges. A year ago we were being challenged on the quality of our assessments and the focus has now shifted to our policy as opposed to our practice.
- As a result of the changes we have made significant savings and the budget is more stabilised. We have move from a team of almost all agency workers to all permanent workers. There are no vacant posts..
- Partnership working with CASS ensures that referrals to this service meet the threshold in line with our service offer. A worker from NRPF is based in CASS one day per week to support these arrangements. We are working with partners at a local, regional and national level to continue to improve our service, particularly with the Home Office.

### **Areas for further development**

- Our recording of children's ethnicity, GP, school and extended family although improved is an area we need to keep a focus on.
- Access to specialist legal immigration advice available is a challenge although advice is regularly sought from the range of NRPF partners including the Home Office and DWP.



## Children in care and achieving permanence

### Areas where we are making most progress

- Introduction of revised long term fostering procedures, which includes clear understanding and identification of the matching process.
- Use of technology for children in care to give their views (Mind of My Own app).
- A more stable workforce providing consistency for foster carers and the children in their care.
- Strong Children in Care Council.
- Review of section 20 cases with focus on rehabilitation and permanence planning.
- Annual awards and recognition events for children in care and their foster carers.
- Promoting Staying Put arrangements as children begin to plan for leaving care.
- Direct access to the Therapeutic and Emotional Support Service (TESS is our in-house CAMHS for children in care).
- Regional framework for supported accommodation is offering more choice and better quality.
- External placement review panels are meeting in the 3 geographical areas to review placements and long-term planning for the young person, challenge costs in relation to outcomes delivered and identify options for step down or return home.
- New pathway plan developed with children in care and care leavers.
- New child care review process that is more child-centred is in place.
- Independent reviewing officers are becoming increasingly effective in driving care plans

### Areas for further development

- Specialist training programmes for foster carers and staff in terms of supporting placement stability - now in place.

- We need to strengthen the quality and timeliness of care proceedings.
- We need to ensure that where appropriate children are consistently supported to live with connected carers through alternative orders.
- Need to embed practice around strengths-based placement requests to improve placement matching.
- Access to Tier 3 CAMHS for children, and delivery by Forward Thinking Birmingham of the contract requirement (which includes a service to our children who are placed within 30 miles of the city).
- Scarce capacity for secure welfare is problematic - regional options being explored.
- Review of in-house fostering is required to explore further improvements in recruitment activity, including a focus on carers for teenagers with complex needs and out of hours provision.
- Continue to increase referrals to step down fostering and also explore other step down options such as reunification home and supported accommodation.
- Encouraging more delegated responsibility for foster carers and embracing learning from DfE fostering stocktake.
- The legacy of frequent changes of social worker persists as a real experience for some of our young people, we need to continue to focus on maintaining a stable workforce.

### **Key messages: children in care**

- The Numbers of children in care are rising: increase of 40 in last 6 months. This is a significant cost-driver.
- 43 new unaccompanied asylum seeking children in care in the last 3 months (currently 145).
- 12% of children exiting care were adopted (lower than statistical neighbours and England average); 39% returned to family; 12% into independent living.
- 98% of children had their latest review on time.
- 69% in foster care or placed for adoption; 7% in residential care; 6% living with parents; others in supported accommodation.
- Short-term placement stability good. Long-term stability above SN average and at national average.

### **How do we understand the quality of practice?**

- 81 care plans were sampled between August and September 2018. 96% of children had a permanence plan in place at their second review. Only 3 children did not have a plan of permanence, 2 of whom were older young people UASC and one child was subject to an escalation by an IRO. This provides evidence of effective care planning.
- Practice evaluations in the period include over 100 children in care cases evaluated. Themes emerging from evaluations include evidence of child-centred practice, increasing stability and consistency of social worker and IRO for children in care and interventions increasingly purposeful. In some cases, planning and management oversight was identified as in need of improvement. Parents' feedback indicates understanding of Trust involvement and that they are largely involved in decisions about their children. A lower proportion felt listened to or felt Trust involvement had helped.
- Pathway plans are quality assured by managers and samples of health plans for care leavers have led to meetings to explore improvements in the health offer.
- The voice of care leavers and children in care drives practice improvement (for example the new health passports and Care Leaver Offer) and acts to inform leaders about practice.

### **Children in education**

- An Education Children in Need of Protection (CNP) team has been developed over the last year and became operational on 22 October 2018, funded through dedicated services grant.
- Its purpose is to ensure that the most vulnerable children in Birmingham have the same access to education and therefore positive educational and life outcomes, as do other children do. Children with child protection/child in need plans are particularly disadvantaged in terms of poor school attendance which in turn impacts their life chances and the ability of professionals to monitor their well-being. Schools are generally places of safety for children experiencing difficult home lives, and can provide much needed stability, friendships, positive adult relationships and educational opportunities.

- The team comprises of three Pupil Attendance Advisors, providing advice, guidance and challenge to colleagues working in safeguarding and family support teams and in schools. The team are supported and supervised by the Lead Attendance Officer for the city. Once a month, the team receive a report of all children in the city with CP/CIN plans and proceed to review the children's attendance data in relation to those of compulsory school age and reception age.
- If colleagues from Social care have done all they can to encourage better engagement in education, conversations will switch to discussions with Head teachers in terms of next steps relating to possible legal action against parents when they have failed to ensure their child receives a full time education.
- Schools will also be challenged if the appropriate support hasn't been offered or the necessary steps have not been taken to improve the child's engagement in education, for example failing to refer to James Brindley School or failing to use FAST-track to Attendance.
- The Education CINP team also provides a support and advice service for colleagues in youth offending, safeguarding and family support teams who are struggling to improve a child's engagement in Education. Queries can include children who are vulnerable under 'Right Help, Right Time' but are being assisted under Early Help so do not have a CP/CIN plan. If the team are unable to resolve queries (which are followed up 4 weeks after the query was made) the colleague from social care will be asked to complete a referral to the Attendance and Children Out of School Panel. Queries from schools are answered by the Court Section.
- Social workers understand and use this process. They are making referrals, referrals are being triaged, challenged and discussed. As a result of the triage process this work is focused on the most significant cases.
- In 2017/18 there were 1538 children in the city of compulsory school age (also including reception children) who were in receipt of CP/CIN plans, with 90% or less attendance and progress from there if there is time before the next list is released.
- The work of the team will be evaluated independently from Easter 2019. The aim is that the numbers of children with CP/CIN plans with the poorest levels of educational engagement will improve. If the numbers at that level fall significantly, the team will be able to start their work each month at a higher attendance threshold.

- In June 2018 Ofsted and the Care Quality Commission (CQC) undertook an inspection of Birmingham's services for children with special educational needs and disabilities. In response to identified weaknesses a Written Statement of Action needs to be submitted by the City Council and Clinical Commissioning Group by 7 December 2018. Birmingham currently has 9659 children with an education, health and care plan (EHCP) and the number has been increasing, with applications for around 55 new EHCPs per month.
- 66 children with an EHCP are out of school currently of whom 47 are receiving interim provision. The remainder may be newly arrived to the city, or currently not engaging. Cases are monitored weekly to resolve any placement challenges but there are sufficiency and capacity issues around special school placements. The team are up to date with safe and well checks/home visits.
- There are 660 children and young people educated out of Birmingham in independent and maintained provision. The City Council is undertaking a sufficiency assessment to ensure that children are in the right placements, the designations of special schools and resource bases are correct and respond to demand, and the Council is undertaking the appropriate place planning in line with projected increases for some conditions.

## Adoption

### Areas where we are making most progress

- We are now registered as a VAA.
- Weekly permanence advice meetings, facilitated by the family finding service are running in each area to improve the timeliness of care planning and to raise the profile of adoption.
- Stage 2 adopter assessment timescales have improved from 85% in 2016-17 to 88% in 2017-18.
- We work in partnership with a Voluntary Adoption Agency (VAA). We hold quarterly exchange events specifically for our children and this has resulted in a number of positive matches.

- We have a strong adoption support offer, creating national interest.
- The percentage of children who wait less than 14 months between entering care and moving in with their adoptive family is 56%. This is a significant improvement from 2016-2017 of 40%. This is better than England average of 53% and statistical neighbours of 46%.

### **Areas for further development**

- We need to strengthen the sufficiency of our adopters to ensure placement choice.
- The Trust is yet to join a Regional Adoption Agency, discussions are taking place but we do not yet have a firm plan in place.
- The number of plans for children aged over 4 years was 17% compared to 29% in 2016/2017, we need to work with the judiciary to support adoption as a positive option.

### **Key messages: adoption**

- The number of children with a plan of adoption agreed has increased from 145 in 2016-2017 to 161 in 2017/2018.
- 92 children were placed for adoption in 2017-2018 compared with 103 children in 2016-2017.
- 40/319 (12%) children who ceased to be in care were adopted in last 6 months.
- Performance against A2 measure (time between court order to place and decision on a match) has improved significantly and is now better than national and statistical neighbours.

### **How do we understand the quality of practice?**

- There were 3 adoptive placement disruptions involving 4 children in '17-'18. This figure represents only 3.72% of the 93 children who were adopted in 2017-18, reflecting positively on matching processes in Birmingham and the resilience and commitment of our adoptive families.

- Stage 2 assessment timescales have improved from 85% in 2016-2017 to 88% of the assessments meeting the target of 4 months from starting assessment to agency decision.
- The Trust's policy is to always seek permanence for all children in care. This depends on securing the right placement for the right child at the right time. One of the key functions is to ensure that each child in care has a plan for permanence by the time of the second review, as set out in the statutory guidance to the 2002 Act. This is progressed in all our care planning through to Adoption if required. This means that adoption is considered for all children where this is in their best interest.
- The Adoption Support Fund has supported 69 families accessing therapeutic support to the value of £331,606.68, with 92 claims made and only 1 rejected as it was deemed to be out of scope.
- Permanence Advice Clinics run weekly in Hubs across the city to support timely identification of children needing a plan of adoption or long term fostering. The impact is increased confidence amongst area social worker in planning for permanence and understanding the range of options and process. This positive impact can be seen in the in-year and 3 year improve A1 scorecard.
- Last year, we were one of the first Local Authorities in the country to pilot a brand new therapeutic parenting programme written by Kim Golding (Consultant Clinical Psychologist) based on the principles of Dyadic Developmental Psychotherapy & PACE parenting (Hughes, 2016) and we are now able to offer this group on a rolling programme to both pre and post order adoptive families in Birmingham. Groups take place throughout the year, excluding school holidays. 'Foundations for Attachment' is a 6 week therapeutic group specifically developed to support parents of children who have experienced significant attachment disruption, loss and complex / developmental trauma. The group is facilitated by our Principle Clinical Psychologist, Dr Marie Kershaw, along with a Senior Social Worker from the Adoption Service. Since the launch of the group last year, we have seen it go from strength to strength. We have now supported 26 families through the programme, and the feedback has been overwhelmingly positive.

## Care leavers

### Areas where we are making most progress

- At the end of September 2018, the percentage of care leavers aged 17 to 21 who are in employment, education or training is 61%; this is better than the national average of 48% and better than our statistical neighbours at 52%.
- We are currently supporting 94 care leavers at university which is 13.6% of the current cohort. In 2015 The National Audit Office reported just 6% of care leavers being in higher education. The breakdown of the 94 students is as follows:
  - 53 continuing students
  - 36 new starters this academic year
  - 4 new MA students
  - 1 continuing MA
- The percentage of care leavers aged 17 to 21 living in suitable accommodation is 87%, against a national average of 83% and against our statistical neighbours at 80%. The implementation of the revised City Council housing allocation policy in which care leavers are in the highest banding as well as the current supporting people funded accommodation that is available from a number of city-based housing providers is sustaining this performance.
- The council tax exemption for care leavers has now been implemented and young people have appreciated and welcomed this financial support. As for all authorities this is currently ring-fenced to those care leavers who are liable for council tax payment to Birmingham only. However exploratory cost modelling has been undertaken to support care leavers who are liable for council tax but living in other local authorities.
- There are currently 85 (12%) of care leavers living with their former foster carers in staying put arrangements, this represents good practice.
- The Trust offers a dedicated emotional wellbeing support to care leavers in the form of 'case consultation' which has been secured through 'TESS / CAMHS' and Forward Thinking Birmingham.



- The Care Leavers Forum continues to grow both in terms of numbers and their engagement and ‘contribution’ on operational and strategic issues. Most recently, 18 care leavers have contributed to the revision of the pathway plan that has now been formatted on a strengths-based, solution-focused and ‘signs of safety’ approach. The forum is also assisting in developing a communication strategy using text, e-mail, letters and WhatsApp.
- The Trust has co-produced the formal ‘Offer to Care Leavers’ which has been fully supported by the Care leavers Forum, we are making sure that all care leavers understand their entitlements.
- The Trust has signed up to the Care Leavers covenant and has pledged to support up to 20 Trust apprenticeships during 2019/20.

#### **Areas for further development**

- There is a robust monitoring system to ensure that all care leavers have a health passport.
- Birmingham is currently supporting 119 unaccompanied asylum seeking children (UASC) care leavers, with another 121 UAS children in care aged 16-17. In response to this substantial and rising cohort, service development work is planned to both capture their collective voice and create a ‘virtual’ multi-disciplinary support hub to support the young people.
- We are reviewing the caseloads in leaving care teams as numbers have increased as a result of the changes in care leaver regulations ( April 2018).

#### **Key messages: care leavers**

- 844 care leavers: number rising due to legal change in age eligibility.
- 61% in education, employment or training (EET); 87% in suitable accommodation.
- Care leavers have a strong and influential voice through the Care Leavers Forum.
- More access to apprenticeship and City Council opportunities are needed for care leavers.

## **How do we understand the quality of practice?**

- Young people said that they did not know enough about their health histories. A long term collaborative piece of work was undertaken with health as it became apparent that there was minimal use of the current health passports. Young people discussed and agreed the content and the design of the new health passport and were present at a formal launch. The passport was launched successfully in May 2018 and is now being rolled out. CICC and CLF together developed a resource that was bigger and better than expected. Through our young people's involvement all children in care now have access to a passport to health and NOT just care leavers.
- Young people worked alongside the Care Leavers Service to develop our local Offer to Care Leavers. Young people are currently working alongside the head of our care leaver service to develop and review the offer – this has been ongoing and has taken much of the forum's time. Young people have contributed 40 plus hours to ensure the information is appropriate and meets young people's needs. The CLF have supported this piece of work to make a difference for all 21 – 25 year olds who may not have been able to have support from the Trust. The extended offer will allow those young people to still feel they can 'lean' on the Trust.
- Young people wanted to make more use of social media and YouTube. Young people have produced several short videos that are uploaded onto our YouTube account. This is ongoing and we have developed a YouTube plan to take us into 2019. We hope to make more use of this, reach more young people, reach more professionals and support the Trust's intranet and website to raise the profile of both our Children in Care Council and Care Leavers Forum as well as children's rights and entitlements. This is a resource we can grow and develop and encourage more young people to be involved in as it develops.

## **Missing from home and care**

### **Areas where we are making most progress**

- Daily missing triage is resulting in a timelier response to children who are missing.
- We have reviewed our recording processes. The outcomes of return home interviews are sent directly to social workers to inform children's plans.

- Dip sampling of over 100 return home interviews have been undertaken to identify any themes. These have been shared with the workforce.
- Weekly reports of children going missing from care and home are distributed twice a week to senior managers and team managers to support management oversight in relation to our most vulnerable children.
- The Chief Executive of the Trust and the Director of Practice receive a weekly briefing on children who go missing.
- Increased use of child sexual exploitation (CSE) screening tools and risk assessments which are reviewed and updated when new information comes to light, therefore risk being considered as situations change.
- We are developing good partnership working and engagement with Barnardo's, Aquarius and the Police.
- There is growing evidence that social workers are undertaking relationship-based work with children, demonstrating persistence and flexibility in maintaining contact with children who go missing – this is evident in the dip sampling of return home interviews and practice evaluations undertaken.

#### **Areas for further development**

- To strengthen our performance reporting to help give greater insight and intelligence to managers to analyse what is working well, challenges, trends and impact – moving to a more outcome-led approach, which informs our commissioning of services and strategic approach.
- To work alongside partners to develop a multi-agency approach to all children who are being exploited and to better understand the difference between vulnerability and risk and seek to provide a co-ordinated response to risk that looks at disruption and enforcement activity, alongside care planning for children as opposed to placing the responsibility on the child.
- Continue to deliver training to educate and challenge culture/practice regarding victim's status and associated language.
- Develop a consistent offer in relation to return home interviews (RHIs) for those children who are placed outside of the city.
- Social workers to use the information and intelligence gathered during RHIs consistently and use this to inform planning for children.

- Develop the use of missing action plans in line with the missing guidance to understand why children go missing and to reduce the risks of this happening.
- With the ending of the Children's Society contract in April 2018, we have developed a stronger 'Missing' team, part of an enhanced child exploitation and missing team, to support good practice with area social workers and increased take up and learning from return home interviews.

## **Domestic abuse, radicalisation, female genital mutilation (FGM)**

### **Areas where we are making most progress**

- A multi-agency domestic abuse strategy has been implemented.
- The Police and Crime Commissioner has funded a Respect programme for perpetrators of domestic abuse focusing on fathers of children subject to child in need and child protection plans.
- Family support workers in the north of the city are piloting a second Respect programme supported by Bristol University with plans to cascade Respect training across the city.
- We are in our third year of funding for a Prevent Early Help lead managed through the Head of Service for Early Help and Family Support. The Prevent lead and Head of Service both attend the Channel panel and meet regularly with Education, Youth Offending Service and Safer Communities leads around Channel and radicalisation. This has led to an increase in partnership work on cases and pathways of support.
- A guidance and screening tool have been developed for all services and partners to use. This is now on the LSCB website. It was developed alongside Early Help, Education, Health, Police (CTU) and Children's Trust colleagues. These have both been embedded into practice and teams have started to use both the screening tool and guidance. There are good working relationships developing across the partnership such as Police, Health, Education, YOS, Mental Health and the Department for Work and Pensions through the Channel panel, case discussions and direct work with individual social care cases.

- The Prevent lead continues to develop a process to monitor the quality of interventions and practice through working with the guardians and case dip sampling and offer WRAP 3 training and awareness-raising as part of the offer.
- Awareness of female genital mutilation (FGM) has been raised through continuous work of Birmingham against Female Genital Mutilation (BAFGM) working in partnership with the local safeguarding children board (LCSB).
- Level 2 and 3 training sessions have been supported by the LCSB to enable front-line staff to have half day sessions promoting an understanding of FGM multi-agency procedures.
- A lesson pack has been designed for KS2 pupils and training for staff on delivery has been provided for schools in Birmingham
- BAFGM have designed a screening and risk assessment tool available to all agencies via the website [www.bafgm.org](http://www.bafgm.org) which has received positive feedback from agencies.
- A manager with the lead for FGM in CASS is now in place and sits on BAFGM group to ensure effective communication and work across agencies wishing to make a referral to children's social care.
- We receive quarterly data reports on referrals and open cases related to FGM.

## **Child sexual exploitation (CSE) and child exploitation (CE)**

### **Areas where we are making most progress**

- Over the last twelve months we have strengthened the focus around children at risk of being sexually exploited, particularly around the need to incorporate risks into children in need and child protection plans, improving processes and performance management arrangements, and moving into an area-based CSE panel approach.
- We have a team manager and three CSE co-ordinators who work closely with the area-based social work team to offer support and consultation and to share intelligence on locations and disruption.
- Clear referral pathways are in place where there is a CSE concern and in the majority of cases risk is appropriately assessed and considered within multi-agency sexual exploitation (MASE) meetings.

- All children who are considered to be at medium or high risk of CSE are subject to statutory services receiving support that is proportionate to risk.
- A Local Government Association (LGA) peer diagnostic undertaken in 2017 highlighted strengths and areas for development. We have completed the action plan associated with this.
- Police and health are co-located alongside the CSE co-ordinators within CASS, which has afforded opportunities to develop improvements with partners, to make referrals easier and to be more responsive.
- Joint chairing arrangement in place (Children's Trust/Police) of the CSE Operational Groups reporting into the strategic group.
- We are improving our safeguarding activity to support children who are affected by criminal exploitation, 'county lines' and gang affiliation. Right Help, Right Time practice guidance has increased awareness of the extra familial risks. We have strengthened our multi-agency responses in strategy discussions in CASS/MASH and have established new city-wide multi-agency arrangements with the purpose of increasing partnership offers to children and families alongside statutory responses, and to increase disruption activity. New Criminal Exploitation and Gang Affiliation practice guidance has been written to embed these arrangements

### **Areas for further development**

- To strengthen our performance reporting to help give greater insight and intelligence to managers to analyse what is working well, challenges, trends and impact – moving to a more outcome-led approach to practice, which informs our commissioning of services and strategic approach. To work alongside partners to develop a multi-agency approach to all children who are being exploited – linked to the multi-agency work on gangs and violence and county lines.
- Develop a robust approach to educate and challenge the culture and subsequent use of language which can place responsibility on the child. This will result in planning which looks at mitigating the actual risk and disrupting perpetrators.
- Improved mapping required: commitment from the LSCB to deliver. An analyst started at the beginning of October 2018.
- Deliver, with partners, the recommendations of the LGA Peer Review.
- To further strengthen our response to children who are at risk of contextual exploitation.

## Youth offending

### Areas where we are making most progress

- Birmingham is maintaining good performance against the national youth justice indicators: reducing re-offending and reducing the use of the Secure Estate. Birmingham has sustained one of the lowest re-offending rates of all core cities (36.1%) and is below the national average (41.6%); the number of young people (96) sentenced to custody in Birmingham continues to fall year on year and is comparable with other core cities.
- Birmingham Youth Offending Service (YOS) utilises a range of evidence-based assessments and interventions including AIM2, Triple P Teen, Multi Systemic Therapy, Restorative Practices, Family Group Conferencing, Good Lives, Dialectical Behaviour Therapy, Motivational Interviewing, and Female Gender Specific Interventions. The YOS has adopted a whole family response under the city's 'Think Family' approach and provided training and clinical supervision to all front-line YOS workers in trauma informed practices.
- The YOS leads or contributes to effective Integrated Offender Management (IOM), Youth Multi-Agency Public Protection Panel (MAPPP), reducing gang involvement and criminal exploitation arrangements that recognise the differences in managing the risk of children and young people including extra familial risks.
- There has been a reduction in the number of children in care who re-offend; this is in line with the national average.
- Birmingham continues to perform well against the national average and other core cities in the percentage of young people in full-time education, training and employment at the end of their order (84.4%). All young offenders sentenced to custody with special educational needs (SEN) are tracked, to ensure they are being provided with an appropriate education in accordance with their Education, Health and Care Plan. This process established in Birmingham has been lauded in the Youth Justice SEN 'bubble' as an example of best practice.

- There is a well-regarded Harmful Sexual Behaviour Service 7-17 years. Following a programme of work, 99% of young people were no longer engaging in the referral behaviour.

### **Areas for further development**

- The number of young people who entered the youth justice system for the first time has decreased in 2017/18 but remains above the national average.
- There continues to be an over-representation of Black young males and young people from a mixed heritage background within the criminal justice system.
- Whilst the outcomes for training and employment in the YOS are better than the national average, only 69.2% of young people above school age are being engaged in education, training and employment by the end of their court order.

## **5. Workforce**

Support to our workforce is of huge significance to the Trust leadership team. We strive to create an open and transparent culture, where our staff feel empowered to carry out their roles in a safe and inclusive environment. The Chief Executive of the Trust runs a regular Employee Forum. The aim of the Employee Forum is to provide an active, open and positive two-way communication process involving and engaging employees and enabling them to contribute to the development and success of the Trust. It also offers the Trust Board and Executive Team the opportunity to have direct engagement with the voice of its workforce, to consult over business-related issues and to gain commitment to change and improvement. The Employee Forum acts as a communication platform for all employees, enabling them to voice their ideas as well as their concerns. The Forum has a valuable impact across the Trust, involving and engaging employees by listening and responding to matters which directly affect them in their place of work. Although in its infancy, the Forum has already identified a number of internal processes and practices which are overly burdensome and detract from efficient



working. The Trust has been able to address these to reduce the administrative burden on staff and speed up routine processes, for example enabling managers to use electronic signatures as approval (in place of manual signing of printed off requests which are then scanned back into the system). A recent social work and social care survey is providing us with some key messages about what social workers and their managers think about working for the Trust. The senior leadership team continues to be very visible to the workforce.

### **Areas where we are making most progress**

- Turnover has reduced to 11% and we have more permanent staff and team managers.
- Reduction to 14% agency social work staff and managers.
- Successful recruitment of large numbers of our students and other newly qualified staff this year.
- A strong assessed year (ASYE) offer with dedicated support.
- An 'always on' recruitment pipeline.
- 5 Frontline units and 13 students completed their social work training in 2017/18 and are beginning work as ASYEs.
- 6 Frontline units with 24 students started in September 2018.
- Completed fourth cohort of systemic practice training for team managers.
- Manageable caseloads and stability have helped retention since the 2016 inspection and the move to the Children's Trust.
- Positive engagement with and support for Children's Trust across the workforce.
- Held to West Midlands agency cap rates.
- Good staff development/ASYE offer linked to 6 key practice documents and using Tri-X and RiP to disseminate and build a culture of continuous learning and reflection.
- Series of academic speakers at quarterly team manager events.
- An emerging social work and leadership academy as we further develop our relationship with the University of Birmingham.

### **Areas for further development**

- Build staff engagement and ownership as part of Trust development.

- Strengthen front-line staff engagement in our improvement journey.
- Strengthen and make more comprehensive our workforce development plan.
- Strengthen our recruitment media and offer, and make our process speedier.
- Improved Trust induction programme.
- Review offer to social workers who have completed ASYE and for senior practitioners to improve retention.
- More strongly define and embed senior practitioner role.
- Develop offer to non-social work staff moving to the Trust.
- Participate in WM ADCS Future Social programme and regional step up to social work.
- Explore innovation (e.g. flexible working over 7 days; stronger personal assistant support for social workers/teams).
- Explore the benefit of social workers completing the National Accredited Assessment Award.

## 6. Feedback

### Feedback from children and families

**What difference are we making? What our children are telling us** (this section was written by children)

Birmingham Children's Trust has two large and vibrant groups of young people who come together regularly to share their experiences, their views, discuss issues relating to care and other matters. They work alongside the Trust as supportive friends AND at times critical friends.

CICC and CLF told us they wanted to meet regularly as a group of care experienced children and young people. CICC meet every three weeks and Care Leavers Forum every four weeks. Between April to September our CICC met 9 times and CLF 6 times. Both groups have met separately as well to review different areas of work and campaigns and have been involved in one off pieces of work including

visiting a neighbourhood Trust to see how they engage with their children in care. Our CICC and CLF make a difference to the Trust every day. They have held the Trust to account, they have challenged the Trust, they have praised the Trust and worked alongside the Trust to make sure that children and young people's views and experiences are always central to its thinking.

CICC and CLF told us they wanted dedicated campaigns to focus on. We supported the young people to identify areas they would like to focus on and shared appropriate data and links to professionals to support campaigns. Young people have hosted a range of professionals at their meetings and asked them to share information. Young people have benefitted from these meetings and are working hard to get to know the care process not just from their own experiences. CICC and CLF continue to make a difference by leading the agenda. Birmingham Children's Trust and Corporate Parent Agenda are led by *real* children in care and *real* care leaver issues.

CICC have recently voted for their next campaign to be about helping social workers to better support children through puberty and adolescence in general. CICC are currently looking forward to working with training and development colleagues to produce online resources and also speaking to professionals to get a better understanding of support that is currently offered to children in care. Young people have also identified other bite size training packages they would like to be involved in such as MOMO. CICC and CLF are making a difference by influencing Birmingham Childrens Trust training packages offered to front-line staff. We want staff to be able to say 'I've completed this training because our young people asked me to!'

Young women involved on CICC have asked for a specific young women's group to focus on periods. Young women want to create a wish for all young women in care to be supported each month appropriately and not to feel embarrassed. Young people have only just started this piece of work but already through conversations with colleagues we can hear them say '*I hadn't thought of that before*'. CICC and CLF are making a difference by encouraging discussion and reflection within our workforce.

Some young people told us they would like to meet as young parents. This group has met twice and their experience shared with colleagues. That has initiated lengthy discussion and now a group of professional are meeting to explore how we can better support our

care leavers who become young parents and our corporate 'grand parenting' responsibility to their children. This piece of work and our young people's experiences will help colleagues focus on how we can improve our practice to support these young people.

CICC and CLF asked to take the lead in launching the Trust and the Trust formally recognised all the hard work and commitment young people played in supporting it. Our young people made a difference to the launch by being centre stage and leading with confidence and authority. The launch was delivered as the Trust means to go on - in the spirit of children and young people being centre to our thinking.

Both groups received an award from our Virtual School to recognise their commitment. Young people were asked to contribute to the Trust business plan and wrote the forward including these 'top tips' and their direct challenge to the Trust

*We challenge Birmingham's Children's Trust to say 'WOW' more often and really make a difference!*

*Our top tips for Birmingham Children's Trust are:*

- 1. Listen to real first hand experiences.*
- 2. Work alongside me, work with me, explain things, and explain things again! Remember I am at the centre.*
- 3. Don't think you know what I am trying to say, don't second guess me, use the words I choose to use.*
- 4. Talk to children and young people, have conversations, properly listen and please take an interest in my life.*

Young people wanted to have more meaningful involvement in recruitment and selection. Young people have been involved at all senior appointments including the Director and most recently two new Assistant Directors. Best practice has now been agreed including a new rewards and recognition document that will support young people's engagement and recognition for their commitment to this process. Young people made a difference in a very evident way by having a say in the most senior appointments we have. Our young

people started a relationship with those successful appointments before they were even in post. This has kept CICC and CLF at the forefront of senior managers' minds and priorities.

Young people raised again the use of social workers language and 'jargon'. This work was shared but had not been embedded in to practice as much as we hoped. There was a wide breadth of feelings around language and no common consensus on what terms should be used. Young people questioned many 'common' phrases and a paper was shared with front-line staff and included in training. This work is being shared constantly and the Trust is now embedding 'children in care' and stopped using 'LAC'.

Young people tell us they want social workers who see them as individuals and not just a 'case'. By taking the time to think about language and words our young people feel heard and listened to. Our CICC and CLF are making a difference to children and young people's relationships with social workers on a daily basis with this one piece of advice!

## **Complaints and compliments**

The Customer Services Team respond to complaints and compliments on behalf of the Trust. As one of a number of sources of information, complaints helpfully highlight specific concerns at particular times allowing remedial action to resolve issues. In the period April to June 2018 we received 87 complaints and 43 compliments. There was a spread of complaints across social work teams without a notable concentration in any one team/service. 32% of complaints considered at Stage 1 were either upheld or partially upheld and 14 complaints were registered at Stage 2. Three complaints were referred to the Ombudsman who declined to investigate two cases and found no fault in the third. While the complaints received in this period were relatively disparate, there were a number of recurring themes.

The Customer Service Manager produces quarterly reports where the themes are shared with the Executive Team and with the operational service.

Some examples of learning and changes to practice for the Trust are:

- Completion of a review of Staying Put arrangements in the event of placement breakdown and carer conduct issues.
- A review of practice to ensure that correct information is recorded on the distribution sheet for child protection conferences, with clear instructions about who is to receive minutes. In addition, a review of how we use the confidential section of meeting minutes for redacted information to ensure there is consistent practice across the service.
- A reminder to Team Managers to share meeting minutes with all relevant parties.
- Guidance to staff on Child Arrangement Orders and Special Guardianship Orders, and the support associated with these, and a review of the arrangements for CAO and SGO allowances.

## 7. Conclusion

### Transformation

**Looking ahead**, the key elements of transformation will include:

- Care, Edge of Care and alternatives: strengthening and extending hours of the Edge of Care team; investment in family-based decision-making and in families' ability to find solutions and build plans for their children; releasing resource properly to support family plans.
- More generally, we will embed family meetings and family group conferences (FGCs) as a key plank of our decision-making and ensure resources are oriented around supporting family plans.
- Family Placement Transformation: recruitment and retention; fee structures; developing an innovative proposition for working in a regional adoption agency (RAA) model; exploring different strategic partnership models for delivering and supporting more Trust carers.

- Contextual Safeguarding: implementing new models for delivering service to, and managing risks faced by, vulnerable adolescents at risk from exploitation, gangs, drugs, 'county lines'. We recognise traditional models are not fit for purpose and we are developing models with partners for a new and different approach.
- Transforming the children's judicial system in Birmingham: we have agreed with the senior District Judge a system review to support swifter and more effective decision-making in the courts. Trust and confidence between stakeholders needs to be rebuilt. Work begins in November and will conclude in January 2019.
- A review of our structural arrangements. They have served improvement well since 2015-16, but we are stronger now and need to review these in the context of:
  - Exploring different management roles within the team structure
  - Reducing the number of changes of social worker that children and families still experience
  - Exploring the introduction of allied professionals into social work teams: Adult Mental Health, Domestic Abuse, Substance Misuse: we see the impact this has had in CASS/MASH and want to exploit wider opportunities across the service
  - Building stronger local connections with our partners in schools, Health, Police etc
- We need to review and improve progression pathways for social workers, linking pay and non-pay rewards, the development of a social work academy with higher education (HE) partners, improving our Learning and Development/Continuing Professional Development offer.
- We are seeking to develop a bespoke leadership and management development programme for all practice leaders and senior leaders in the Trust. We will not get the traction we need through small numbers of managers gaining places on nationally accredited programmes. We are in discussion with a national provider around delivery of the first element, for practice leaders.

We recognise the importance of timing and phasing of this programme of significant change. We would have hoped to have begun the implementation in autumn 2018 but the changes in the leadership and other events have led us to delay until Quarter 4 of 2018-19.

**19 November 2018**