Supplementary Papers for Children's Services Overview and Scrutiny Committee

Date: Tuesday, 22 November 2022



11. Appendix 2 – Updated Exceptions Performance Report

Please note an updated version of the exceptions report has been included in this pack. Senior Officers have reflected further on the content of the report and considered that more focussed information and the inclusion of identifiable and measurable actions would provide greater clarity for the Council and improve future monitoring.

Published: 16 November 2022

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Exception Performance Report

Indicator Description: Social care: % of repeat referrals in 12 months

2022/23 Q2 outturn: 26.5% **Quarterly Target:** 20%

Reason for level of performance:

We are aware that currently there needs to be further work to ensure both internally and externally application of threshold is consistent.

To consider the reason for re-referrals, a dip sample of 21 children were considered, out of the 266 re-referrals received during the quarter.

- 165 closed by assessment teams- 10 deep dives undertaken
- 52 closed by CFF- 5 deep dives undertaken
- 29 Closed by MASH- 3 deep dives undertaken
- 10 were closed by other agencies (CHAD/ Private Fostering/ Eden Brown/ Legal)- 3 deep dives undertaken

Findings:

Of the 21 deep dives undertaken, only 2 of the contacts were felt to be inappropriate by the auditor- one was a school referring despite Early Help services already being involved, and one was where a decision had already been made that there were no grounds to escalate to S. 47, ad therefore S.17 assessment could not progress due to consent. On both these occasions greater support could have been offered via the MASH to ensure better understanding of the work undertaken and the decisions made.

All but one re-referral related to the same concerns as identified during the previous involvement, suggesting our pracrice had not created change for families. In these cases there was evidence of over-optimism in assessment and decision making, rather than professional curiosity and analysis of caapcity to change and sustain change.

For families open for longer periods, frequent changes of social worker impacted on the quality of the relationship between workers and families.

With the deep dive sample taken from MASH, Assessment and CFF (18 children) Domestic Abuse was the primary concern (8 children). We know we have a gap in BCP to deliver domestic absue work to families, and waitign lists to access any specialist support. This cohort evidenced workers using safety plans or 'contracts' with families in order to reduce risk, however this does not result in sustained change, nor assess the caapcity to change. The limited resources available to offer intervention was evident on the cases looked at, and there was a tendency to see parental separation as a positive, reducing the risk despite research showing risk increases at this time.

Action: domestic abuse training has been offered to all staff, and further bespoke training is proposed to be offered to staff. The domestic abuse tool kit is currently being designed by the QA team with staff and will then be made available to all staff.

Neglect was the second most common concern within the deep dive cases in the MASH, Assessment and CFF cohort (5 children). Assessments were more likely to recommend Early Help support and there were good examples of Early Help work, including workers recognising when risk was increasing. There were, however, incidents where Early Help appeared to have been recommended at closure but there was no evidence of this on the child's record.

Action: At the moment, we do not use any tools in assessing neglect, and the majority of cases do not have an impact chronology which would help identify long-term neglect cases. The use of chonolgies for neglect are key, as it also evidences capacity to change and the lived experiences for the child. All staff are aware that an impact chronology must be undertaken for all children. Alongisde this, our practice

fundamentals addresses analysis/ neglect however further work is needed to imbed good practice within services.

Action: For step down cases, there needs to be more clearer summaries, to include good analysis and the plan, plus the contingency plan.

One case evidenced that the worker had considered the need for on-going support via a TAF in the community, however this had not been communicated with the parent or lead professional and concerns subsequently escalated. If the communication/ liaison had been stronger, it is unlikely to have need to have been re-referred.

One Private Fostering case was reviewed, which highlighted proportionate involvement from the Local Authority. Equally the case held in CHAD evidenced listening to parents and respecting the need for consent.

It was of note that for many of the children there had been several contacts created in MASH prior to a referral being re-opened which raises the question about whether action is taken early enough when futher concerns are received.

Action: The Practice learning review will use some of these re-referrals to look at learning and to ensure internal and external staff are able to understand what is happening within the system itself.

Summary of financial implications: None identified.

Summary of legal implications: A safe and effective front door service is essential for Children's Services to fulfil our statutory duty to safeguard and promote the welfare of children in the area who are in need, as set out in the Children Act 1989.

Summary of human resources implications: None identified.

Summary of sustainability impact: None identified

Summary of public health implications: Safe, effective and timely decision making in front door services is essential to ensure the health and welfare of children and young people. This includes keeping them safe from harm, abuse and maltreatment.

Summary of equality implications: The impact of this performance was indiscriminate, in that it affected all children and young people in the same way, including those from protected groups. However, some groups of children are more likely than others to be referred to social care services. For example, disabled children have been found to be at greater risk of abuse and neglect, and recognition and assessment can be delayed for this group, as signs of neglect and abuse may be confused with the underlying disability or condition. Disabled parents, and parents with a learning disability, may require additional support to engage with children's services. The ways in which abuse and neglect manifest differs between age groups, but some forms of neglect may be less well recognised in older young people, or indeed those who are pre-verbal. There is a growing recognition of the role of fathers as protective factors, although there remains a focus on mothers. There is a strong correlation between abuse and neglect and deprivation. Unaccompanied asylum-seeking children are without parental protection and may face language barriers.¹

Actions taken or planned to improve performance:

Action: Ongoing deep dives into re-referrals and then sharing of any learning from this with services

Action: domestic abuse training has been offered to all staff, and further bespoke training is proposed to be offered to staff.

¹ NICE Social Care Guideline Equality Impact Assessment

Action: The domestic abuse tool kit is currently being designed by the QA team with staff and will then be made available to all staff.

Action: All children must have an impact chonology, as well as good analysis and and understanding of caapcity to change.

Action: All staff to attend the practice fundamental addressing analysis/ neglect.

Action: For step down cases, there needs to be more clearer summaries, to include good analysis and the plan, plus the contingency plan.

Completed by: Shan Searle / Nanette McVeigh

Service Unit Head approval with date: Juliette Blake 14/11/2022

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