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North East ADCS

Self-assessment 2018/19

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| Name of Local Authority | Redcar & Cleveland Borough Council |
| Self-assessment signed off by: |
| Director of Children’s Services | Barbara Shaw |
| Chief Executive | Amanda Skelton |
| Lead Member | Craig Hannaway |
| Date | Friday 16th November 2018 |

**1a. Our story**

Our Children and Families Services were judged as ‘Requires Improvement’ by Ofsted in the SIF inspection that took place in February 2017. We have committed to a journey of continuous service improvement, with aspirations to be good when next inspected and, after an intensive period of service analysis, we were able to share our improvement journey with Ofsted during our annual conversation which took place in March this year.

It was recognised that we had strengthened performance management and oversight of practice and that this had helped to create the right conditions for social work to flourish. We have secured changes to the senior leadership team during the last 12 months, to develop a culture of high support and high challenge. The inspectors recognised this aspect of leadership in the annual conversation.

In respect of social work practice, we have worked hard since the SIF to ascertain social workers’ views about operational delivery. An in-depth consultation exercise was undertaken and a fundamental review of staffing structures and processes to directly address the findings followed, including the introduction of deputy team managers; additional service manager posts; family support workers in each team; and additional business support functions. The general consensus was that staff felt that they had been listened to, understood and proactively responded to; the positive impact on morale was evidenced in our annual staff health check.

The recruitment and retention of social workers continues to be a major issue for the service. This is particularly pertinent in a time of rising caseload numbers and increasing complexity, when the need for experience is paramount. The regional social worker recruitment agreement, introduced in September 2017, has helped somewhat to address the volatility of the market in terms of agency recruitment, but pressures continue due to the ongoing general lack of practitioners available across the region. Geographical isolation is an additional barrier for our Borough, in terms of attracting new recruits to relocate to the area.

Whilst retention did stabilise for a period throughout the last 12 months, we have started to see an increase in the departure of social workers to other local authority areas and agencies in recent months. In response to this, we have just agreed to incentivise current staff to remain with Redcar and Cleveland, whilst also offering a ‘golden hello’ payment to attract external appointments. This decision required careful consideration, considering the current financial climate and budget constraints.

A further strategy to support social work recruitment is our plan to develop a ‘care academy’ for newly qualified social workers. This is part of our vision to attract committed, passionate people, new to the profession; to offer them a package of support that will equip them with the skills, confidence and knowledge they need to practise as experienced, high performing social workers.

We strive to deliver a responsive approach to caseload management however, caseloads continue to be higher than we would like in some parts of the service. In addition, the breadth of the work within the social work field teams was not previously considered conducive to effective working, therefore we have recently introduced an assessment team within our front door. This new approach enables assessments to be undertaken at the point of referral, thus enabling the field social workers to concentrate on developing and implementing the longer-term planned work with families.

We remain disappointed with the level of improvement in the consistency and quality of our assessments and plans. In response to this and overall improvement we delivered a series of mandatory ‘Getting to Good’ sessions over the course of the last year for all social work staff, with workshops covering themes such as what a good case file should look like; good chronologies; quality assessments; what good care plans and reviews look like; and reflective supervision. We are pleased that the use of chronologies has improved since the training; and the teams are now focusing on the quality of these to ensure all assessments are supported by a robust understanding of the key events that shape a child’s life.

We know that when we talk to staff, they are able to demonstrate that they know their children well; they are using a variety of tools and techniques to engage with them. However, we still need to improve our recording of direct work with children to validate this process; we need to ensure we capture the voice of the child and thus evidence their wishes and feelings within the heart of the assessment and subsequent plan.

We have recognised that improving the quality of our assessments and plans will take time to achieve but a wholescale implementation of Signs of Safety is planned to support the direction of travel. Training is due to commence in December, following the initial preparation phase and official launch across the whole of the Directorate.

The increasing number of children in our care places significant challenge in terms of capacity and resource. The recruitment of foster carers remains a priority and we have reaped the benefits of an extremely positive year that has resulted from a robust and attractive new campaign to increase public interest around becoming a foster carer. We are very proud of the fact that the campaign was shortlisted for two national awards recently and are currently planning a second phase, specifically focused around the recruitment of specialist carers, including teenagers and children with social, emotional and mental health issues.

We have seen the launch of our new Regional Adoption Agency, known as Adoption Tees Valley, in May this year; one of the first to be opened across the country. This is a partnership across 5 Local Authority Adoption Services, aimed at improving the experience of all those children and families whose lives are touched by adoption. Early indications are good, but we are still in the process of establishing performance monitoring procedures to establish the impact of the move to the agency in terms of outcomes for children.

In terms of our education services, we have endured a difficult year due to the removal of the Education Support Grant. The team reduced considerably, meaning priorities had to be realigned in order to meet our statutory functions.

On a positive note, we are very proud of the continuing strong performance of our primary schools. Redcar and Cleveland is the highest performing authority in the whole region in terms of the proportion of 11-year-olds reaching the expected standard in reading, writing and mathematics. However, this performance contrasts starkly with pupils’ poor progress at the end of key stage 4, which is well below the national and regional standards, and has unfortunately decreased this year. We have prioritised partnership working as part of an authority wide action to tackle secondary pupils’ underachievement.

The SEND inspection took place in March this year and although some strengths were identified, a Written Statement of Action was stipulated to commit the local authority and its relevant partners to delivery of the required improvements. In summary, the inspection found that, across the partnership, the local area does not have a clear or comprehensive enough understanding of the outcomes of children and young people who have a special educational need and/or disability.

We have worked closely this year with colleagues from Middlesbrough Council and wider partners across the South Tees area to explore the benefits of collaborative working. Further to the development of the North of Tees ‘Multi-Agency Children’s Hub’ in 2016, we explored the potential for a similar arrangement for the South Tees region. Our Ofsted inspection of Children’s Services in 2017 raised some challenge around the practice of our First Contact Service and similarly, an earlier Inspection of Middlesbrough also identified issues within their own front door arrangements. Unfortunately, the outcome of the inspection process for us was not conducive to a one-team approach through a joint hub with Middlesbrough at that stage; it was agreed to pause all developments in May 2017 and to re-examine the position at a later date. As it is now recognised that practice has developed sufficiently to reconsider the development of a shared arrangement, negotiations were re-initiated in June and a South Tees Multi-Agency Children’s Hub Project Board has now been established. An ambitious ‘go-live’ date of April 2019 has been provisionally agreed.

To further our commitment to ongoing service improvement, we engaged in two peer reviews in September and October of this year: one focused on our practice at the front door, as well as general safeguarding activity; and one around our services to support the education of the children and young people in our care, through the role of our Virtual School.

In relation to the front door, the peer review team identified over 50 strengths and areas for consideration, now incorporated into a corresponding action plan so that we can measure our progress against the team’s recommendations for improvement.

Although we haven’t yet received the outcome letter from the Virtual School peer review, early indications are positive. Lots of strengths were highlighted, with some pertinent points raised for our consideration and further development, including the need to extend our support for early years and young people post-16 years, in respect of personal educational plans.

A further peer audit is planned for the end of November, which will be targeted towards the quality of planning across all safeguarding services from early help to leaving care. We are looking forward to taking the learning from this audit to further develop the quality of our services.

The budget continues to be a major concern for us. With further increased spend projected for the end of the current financial year, the team is working hard to explore ways of reducing non-essential spend across the service, whilst trying to plan strategically for future years. One of our main areas of significant spend is around the use of high cost residential placements. Fortunately, we have seen a small decrease in numbers of young people placed in residential settings in the last few months, which brings some slight alleviation to the problem. However, further overspend is projected in the cost of placements with family and friend carers; therapeutic support for children with complex emotional and mental health needs; and overall staffing costs.

The outcome of a recent benchmarking exercise highlighted that our proportionate spend on early help services is high against that reported by other local authorities. We must, therefore, undertake a stringent service review of non-statutory early help services in the year ahead, to divert money towards the statutory safeguarding functions. This piece of work needs carefully managing to avoid any consequential shift in demand for social work intervention, as a direct result of inappropriate service cuts.

In summary, we have experienced a busy year, with ever-increasing workloads, restrictive recruitment challenges and significant budget pressures. However, with a stable senior leadership team in place and an invigorated structure, we have been able to identify and work towards clear goals for service improvement. Against the difficult backdrop of an impending service review in early help and significant budget challenges, we aim to: stabilise recruitment across the social work teams and create a ‘care academy’ to grow our own social workers; improve the consistency and quality of practice through Signs Of Safety and ongoing quality assurance processes; increase the number and suitability of placements for children in our care; enhance partnership working and embed a new South Tees Multi-Agency Children’s Hub; improve outcomes for children and young people with SEND; and improve educational standards, particularly for our children in secondary school.

**1b. External challenge**

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| **Date** | **Challenge activity** |
| January 2017 | Single inspection framework |
| October 2017 | CQC inspection of health services |
| February 2018 | Local Area SEND Inspection |
| March 2018 | Ofsted Annual Conversation |
| September 2018 | Peer review – safeguarding services incl. front door |
| October 2018 | Peer review – Virtual Head |
| November 2018 | Peer Audit - Planning |
| Due | Focused visit  |

**1c. Our local authority at a glance**

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| 20% (27,519) of the Borough’s 135,000 population are under 18 | 25.4% of under 16s are from low income families | 825 (3.8%) pupils with an EHCP | 20% of pupils are eligible for free school meals | 71.4% of reception age children are school ready |
| 49th (of 326) most deprived Authority with 17.5% of the population living in the borough most deprived wards | 287 Children in Our Care - which is a 93% increase since 2011 | 149 children and young people subject to a child protection plan, a 1% increase since 2016 |  | 2.4% minority ethnic population.3.39% under 18s are from a minority ethnic background |
| 1268 Children in Need, which is a 17% increase since 2016 | 70.5% reach the expected standard at Key Stage 2 | 16.4% of pupils in mainstream primary &15.4% in mainstream secondaryhave an EHCP or SEN Support | 51.1% breastfeeding initiation rate | 21% of Year 6 children are classified as obese |

The arrows next to each fact illustrate if this is higher or lower than the national average.

**1d. Strengths: the four outcomes we are most proud of over the last year?**

1. **Continued Success of Children in Primary Schools**

Young people across the Borough continue to be supported very well by staff working in schools, academies and colleges. We are very pleased with the continued success of children in primary schools and all but 3 of our primary schools are graded good or better by Ofsted.

The graph below shows the percentage of primary schools that are rated at least Good by Ofsted – demonstrating that at primary level our schools are exceeding the England and North East average:

We are particularly proud that our children have excelled themselves again at the new tests at the end of Key Stage 2. We have exceeded the national standard by over 7%, with a result of 68.7% of our children reaching the expected standard in reading, writing and mathematics, against a 61% national average.

1. **Independent Travel Training**

One of the outcomes of a service review in relation to home to school transport was the appointment of an ‘Independent Travel Training Team’. The team have gone from strength to strength; they have worked with a significant number of young people who, with support and encouragement, have made the transition from travelling on door-to-door home-to-school transport, to being able to travel to college independently.

The Independent Travel Training team have successfully increased the number of young people that they have supported to travel independently throughout the Borough. The number of post-16 young people being dependent on local authority provided transport has decreased by almost 50%. This has increased their independence, confidence and provided them with increased opportunities for socialising and employment.

1. **Health Visiting and School Nursing Service Developments**

We were a trailblazer in the country by being one of the first local authorities to provide in-house health visiting and school nursing services and received excellent feedback from Care Quality Commission (CQC), following an inspection in October 2017. Whilst no official final judgement was given due to this being one of the very first inspections of its kind, the CQC report did not include any recommendations for improvement and highlighted many positive statements around the level of practice observed during the visit.

Inspectors reported that:

“Managers, practitioners and admin staff demonstrated high levels of integrity, drove continuous improvement and held themselves accountable for delivering change”

“Staff protected children and young people from avoidable harm and abuse and they followed appropriate processes and procedures to keep them safe. There was a proactive safeguarding children team and a robust safeguarding supervision model to facilitate learning and reflection, and share good practise”

“CYP and families felt staff communicated with them effectively, kept them involved about care and treatment, promoted values of dignity and respect and were kind and compassionate”

“Staff were very positive about working for the local authority. They felt respected and valued by managers at all levels and described them as approachable and supportive”

More recently, the health visiting services have integrated with children’s centre services to develop an integrated early years’ pathway. Early implementation of the pathway evidenced that a large proportion of referrals (39%) were due to an identified maternal mental health need. In response to this, we are planning to provide a 6-week wellbeing programme, led by specialist Health Visitor for perinatal mental health, which will provide the support required for optimum mother and baby attachment and child development.

1. **Family Time Centre**

A key point raised during the SIF, was the fact that the majority of our supervised contact sessions took place in group settings. Inspectors raised with us their concerns about children and families not being provided with the opportunity to enjoy one-to-one time, in a more relaxed environment.

We acknowledged that the rationale for the group approach was predominantly due to resource pressures and had to concede that the level of service we were offering was not conducive to promoting healthy relationships between children and their families.

As an outcome of this feedback from Ofsted, we undertook a service review which quickly identified the scope of the problem: too many group sessions and a lack of opportunity for families to have individual contact; accommodation constraints, at times leading to disruption and confusion; and staffing issues due to the use of an external provider offering additional support, leading to lack of consistency.

The outcome of the review was that a single, dedicated venue should be sought, with sufficient rooms to enable families to be offered individual family time. A former residential property was identified and refurbished to create the appropriate environment required to meet the service specification.

The new service was officially opened by Isabelle Trowler, during her visit to Redcar and Cleveland in July this year. The brand-new facility is now fit for purpose, thus enabling children and families to access the level of service they deserve.

**1e. Priorities: looking ahead - our top three areas for improvement for the coming year**

1. **To Improve Quality and Consistency of Social Work Practice**

We are committed to tackling the current variability and quality of practice however, in order to address this priority, we need to establish a suitably sized and strong workforce, with manageable caseloads to allow them the capacity to reach the quality standards we demand of them.

We will implement a revised recruitment and retention package to attract new social workers to the team, as well as rewarding the loyalty of the current staff; we will also develop a ‘care academy’ with a holistic package of training and support for a team of newly qualified social workers.

We will implement the Signs of Safety approach across the Children and Families Directorate to improve the quality of practice. We want to see specific improvements in the quality and consistency of our assessments, plans and risk analysis.

1. **To Improve the Support for Children in Our Care**

With no sign of the current growth in looked after children numbers abating in the foreseeable future, we must set ourselves clear priorities to address the increased pressure on our service in terms of capacity and overall resource.

We propose to tackle this in 4 parts:

1. Through a partnership approach with Grandparents Plus, and working to the principles of Signs of Safety, we aim to divert families away from Care Proceedings by strengthening our model of support for informal friends and family arrangements. This piece of work will also include the development of our current policy for all Connected Carers.
2. Through a revised recruitment campaign to attract more people to become foster carers, we aim to shift the balance from IFA to in-house by a further 5% (currently 39% to 61%). This will include a focus on specialist carers for adolescents, sibling groups, parent and child placements and those with social, emotional and mental health needs.
3. We will work to bring our most vulnerable young people back from out-of-borough, residential settings, where it is deemed appropriate to do so. We propose to develop in-house provision to improve outcomes for young people in terms of their emotional wellbeing, educational achievements and future aspirations.
4. We aim to reduce the number of young people entering the care system by enhancing our edge of care offer and introducing a short-term immediate response, accommodation and support service.
5. **To Provide Good Standards of Education, Locally, for all Our Children**

Whilst recognising the exceptional performance of our primary schools, we must prioritise the needs of our children in secondary, as well as those with special educational needs and/or disabilities, or social, emotional and mental health needs.

We will work with our maintained schools and with all academies to help support improved educational achievement of our children and young people.  This will include working with key partners such as DfE, Ofsted, RSC and the Dioceses as well as CEOs from the multi academy trusts.

We want to see an improvement in the rate of permanent and fixed term exclusions and will do this by facilitating new protocols in the Borough and a Pupil Placement Panel.  Additional and enhanced Alternative Education Provisions and Alternative Curriculum opportunities will be created.

We will develop a new school to relocate and extend our current provision at Pathways, providing additional places for children and young people with social, emotional and mental health needs.

We also aim to create a high needs base to extend specialist provision in secondary schools and develop new residential provision for children with a learning disability at Church View in Kirkleatham.

**1f. Signatures of success: provide an assessment of your current position using the signatures in Annex 2.**

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|  | Area of good practice | Area of improving practice | Area requiring further development | Area of priorityfocus | Direction of travel↑ ↓ or = |
| Impact of vision, leadership and governance |[ ] [ ] [x] [ ]  ←→ |
| Performance culture and challenge |[ ] [x] [ ] [ ]  ↑ |
| Outcomes for children and young people  |[ ] [ ] [x] [ ]  ↑ |
| Voice of children, young people and families  |[ ] [ ] [x] [ ]  ←→ |
| Effectiveness of commissioning arrangements |[ ] [ ] [ ] [x]  ←→ |
| Resource and workforce management |[ ] [ ] [ ] [x]  ↓ |
| Partnership and working together |[ ] [x] [ ] [ ]  ←→ |

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| SECTION 2: Children’s Social Care and Safeguarding |

**What our self-evaluation tells us about the impact of leaders on social work practice and how we know**

The political and professional leadership of the Children and Families Service is stable, with a DCS who has worked for the local authority for more than 30 years; 8 years as a Director.

We are also fortunate to have ongoing support from our Elected Member for Children’s Services who demonstrates a real drive and passion for improving outcomes for children and young people.

We are proud that Ofsted recognised the strength in leadership during their inspection of services in 2017. The final report, published as an outcome of the SIF offered the following statements:

*“A leadership culture, based strongly on interpersonal relationships, means that senior leaders across the council, including elected members, can demonstrate a good commitment to and prioritisation of children’s services. The council operates in an ethos of integrity and respect, and this is modelled by its senior leaders.”*

*“Governance of children’s services by elected members and other senior leaders is strong, and the DCS is widely recognised as the pivotal figure in the improvement of children’s services.”*

*“Senior managers have made sure that social workers have enough time and have good training to get to know children and to work with them and their families.”*

The leadership team recognised the need to strengthen practice so appointed a recently retired DCS as an external consultant from September 2017 to May 2018. Her remit was to undertake a whole system review of performance and ultimately assist senior managers in improving quality and practice.

The consultant led a number of thematic audits across the service and proposed key changes in direct response to the findings. Audits undertaken included: an analysis of the conversion rate between strategy meetings and Section 47 enquiries, then S47s to ICPC; an analysis of early help cases and subsequent referrals for statutory intervention; an audit of the management of referrals through First Contact; an audit of Private Fostering compliance; a focus on all CP cases where the plan ended within 3 months; a dip sample to test chronologies; and a range of audits from across teams, including the children with disabilities, leaving care and the fostering team. All key learning points and recommendations for improvement were subsequently captured in an overarching Service Improvement Plan.

The consultant also recommended a fundamental staffing restructure, which included the introduction of new deputy team manager roles, additional service management posts, family support workers in every team and a specific ‘Duty and Assessment’ team, to alleviate some of the pressures in the field social work teams.

Throughout the service review, leaders have listened to staff and involved them in developing ideas; this strength was evidenced in a recent staff survey. Staff reported that they feel supported and better equipped to face the everyday challenges presented in a social care environment.

Further evidence of leaders’ commitment to improve the way in which social work is delivered is through the large-scale investment into the Signs of Safety approach. We have started the process of implementing ‘Signs of Safety’ as a wholescale model of practice, with training due to start in December. We recognise that there is an initial two-year trajectory with this programme but we will not wait until the end of this period to start putting the learning into practice and leaders will be instrumental in empowering teams to progress.

A priority for us and our safeguarding board is to hold partners to account; we have made positive strides forward to engage partner agencies in strategic planning for children’s services. We work inclusively with schools, the police, health professionals and the voluntary sector, which is helping to embed a shared understanding of service thresholds and partner agencies’ responsibilities in supporting children and families.

**What our self-evaluation tells us about the quality and impact of social work practice for children who need help and protection, including early help and how we know**

Audits regarding Strategy discussions and S47 enquiries provide evidence that we identify risks swiftly and by doing so make children safe. Specific cases also provide strong evidence to support this. Good multi-agency involvement in Strategy discussions means that appropriate information is shared.

We allocate all cases within timescales; regular supervision demonstrates timely reviews of children’s plans and reflection on the progress of cases; core group meetings also highlight good partnership working and timely actions.

We commission good legal advice to assist with appropriate decision-making and to help secure the right legal orders to safeguard children without delay. The Safeguarding Service Manager convenes a weekly pre-proceedings panel where cases are presented when Team Managers and social workers consider court action may be needed. The case is reviewed by a childcare solicitor and service manager, along with the social work team manager, and decisions are then made regarding the most appropriate next steps.

Our performance regarding children subject to a protection plan for two years or more is better than the national average. It is only in exceptional circumstances that a child would be subject to a protection plan for any longer. We are committed to making timely decisions and actively supporting families to make the required changes within appropriate timescales, in order to achieve the best outcomes for children.

Our re-referral rates are good when compared to regional and national statistics, which demonstrates that we are able to strengthen resilience in families to enable children to live independently of services, following risk being addressed in the home, prior to closure.

Whilst we know that children are appropriately safeguarded, we remain concerned about the lack of consistency in terms of the quality of assessment and planning across teams. There are strong examples of good work but we need to build on this to increase the skill base of our social workers. The absence of holistic, informative genograms and good quality chronologies continues to be a challenge, however, during our recent peer review some good examples were evident in children’s files. We aim to build upon this positive change by continuing to sample cases and provide protected time for social workers to complete this work. We want to see more plans that have been developed alongside the family, where the outcomes are meaningful, measurable and timely and that can ultimately result in actions that are fully understood and owned by the whole family and the supporting team around them.

We have been working hard to tackle our under-performance around assessment timescales. At the beginning of the year (April 2018), performance in this area was at just 62.2%. Efforts to address this concern have resulted in a significant improvement and we are now able to report that 82.9 % are in timescales.

The timeliness of Initial Child Protection Conferences and Review Conferences is good. Children have plans devised around their needs that recognise risk quickly and implement actions to reduce the risk.

We remain committed to maximising the participation of children and young people in their own conference meeting. We introduced the use of the newly developed packs from February 2018 and are seeing an improvement in the depth and meaning of the information gathered through this tool and general increased participation of children and young people in the planning and review process.

Child Protection Conferences are chaired well and risks and protective factors are fully considered. There is strong, multi-agency commitment to information sharing and child protection planning. Conferences are also well attended and multi-agency partners play a central role in providing services that reduce risk.

**Early Help whole-family casework**

Audit and inspection findings evidence that early help referrals are appropriate and proportionate. We are also able to evidence that early help is making a difference: a recent audit identified that 73% of families who had an early help assessment between January and March 2017, did not require their cases to be escalated into children’s social care in the following months up to 12th October 2018. Of these 68 children who required a social work assessment, only 7 (2.8%) came into our care.

We have worked hard on improving the quality of the case work and early help assessments and corresponding plans. Key-working teams have embedded the use of chronologies and a recent Voice of the Child audit showed significant improvements in demonstrating evidence of this in their casework recordings, assessments and plans. In addition, in a recent Q2 audit of key-working early help assessments and plans, we were able to demonstrate that the team were producing more consistently ‘good’ quality cases and less were considered to be ‘inadequate’. The average score from the previous year’s audits was a 3 ‘requires improvement’, whilst the average score for cases looked at in this quarter of 2018, is a 2 ‘good’.

In addition, a child’s voice audit undertaken in Q1 of 2018 evidenced that in the majority of cases (73%), early help staff were able to show that the voice of the child is central to the assessment and plan and there was good evidence of the use of tools to capture this. The Principal Social Worker has had oversight of these audits and has provided assurance that the quality of the audits is as reported. Learning is being shared through children’s services practice improvement clinic.

The Troubled Families programme is embedded into early help services and to date we have been able to engage with 1199 families which represent 93% of our target number over the life of the programme until 2020. In addition, we have been able to show significant and sustained progress for 43.54% of the families with whom we have worked. To claim that this progress has been made requires very stringent and strict monitoring and involves us tracking individual children and parents for 12 months after they have been closed to early help. Amongst other factors, we have to be able to demonstrate that the children’s school attendance has remained above 90% for three terms and that there have been no further police reports of crime or domestic violence.

**Health Visiting and School Nursing Service**

The School Nursing Service has a pathway which ensures that School Nurse expertise and resource is employed to optimum effect. In summary, the pathway states that School Nurses should attend all Safeguarding Strategy discussions and share appropriate information to inform decision making; and that they should complete an Initial Health Assessment either prior to, or within 10 days of, the initial child protection case conference. School Nurses attend all initial conferences. The school nurse continues to attend all review case conferences and remain active where there is a specific health need that the service can impact on.

The Health Visitor attends and contributes to all child protection safeguarding strategies, initial and review child protection case conferences. Health Visitors remain active with all young people aged 0-5 years who have an early help, child in need, child protection and children in care plan.

The School Nursing service has recently implemented a Single Point of Contact. The impact of this is that a school nurse or school staff nurse is available to respond to all queries from young people, parents / carers and professionals at the point of contact.

The School Nursing service also has a contract with South Tees Hospital Foundation Trust, providing staff with safeguarding supervision, training and support.

**What our self-evaluation tells us about the quality and impact of social work practice for children in care and care leavers and how we know**

Outcomes for Children in Our Care are good overall and improving; we can evidence that children are happy and healthy and achieving in line with their peers. Placement stability is improving and the quality of placements is good. All Children in Our Care are supported by an appropriate care plan with timely visits. We strive to ensure that they have positive relationships with their social worker. We celebrate the achievements of Children in Our Care and Care Leavers at an annual award ceremony, which is supported by our Lead Members, executive leaders, and our partners.

Some examples of good practice include: strong health outcomes, assisted by a dedicated health team; children have good quality health plans, built from close multi-agency working including children’s emotional well-being and mental health. We receive positive feedback from foster carers regarding the support they receive; care leavers are very well supported, with effective partnership working across a range of strategic partners. Joint supervision is established between social care and the Youth Offending Service and other agencies to ensure that we are working effectively to manage risk and meet the needs of young people.

By increasing the number of in-house foster carers, we avoid an over-reliance on IFAs and this enables better placement matching. Long-term placement stability is improving, with 72.8% of Children in Our Care who have been in care for more than 2.5 years, in a steady placement for at least 2 years. Although this still needs to improve, it is significantly better than previous performance in this area and can be attributed to a number of factors, including the early identification and monitoring of placement issues; increased numbers of matched long term placements; additional support and interventions including commissioning of therapeutic services; and committed and experienced social workers who know the children well and work closely with carers and placement providers and a dedicated foster carer training officer.

12.2% of Children in Our Care are living in residential care, which is lower than some of our neighbouring authorities and in line with the national figure of 12.5%. However, this has increased in the last 3 years and has impacted significantly on our overall budget. Although these figures may be comparatively low, we struggle to identify and secure placements to meet the needs of young people with complex needs or risk-taking behaviours.

The development of our offer for Care Leavers was co-designed by Children in Our Care, young people, Care Leavers and Elected Members. As a result, we have developed a jargon free, easy to read offer that is framed around key themes and which sets out the eligibility criteria for the different elements of the offer.

The process of developing our local offer has enabled the team to secure ring-fenced apprenticeships and free leisure passes for our care leavers.

We have a dedicated Council for Children in Our Care who have been involved in a variety of activities and projects in the last year, for instance: the opening of the Beach House alongside Isabelle Trowler, Chief Social Worker; redesigning the child protection family room to make it more friendly for children and young people; and taking a central role in the Regional Child in Care Conference in October 2018. Following the success of previous Regional CICC Conferences, our young people have been involved in presentations to the Regional LA Chief Executives Forum, and the Regional LA Council Leaders’ network.

We are ‘in-touch’ with all our care leavers and are confident that the majority are in suitable accommodation. We could do better in terms of their engagement into education, employment or training and therefore this is a focus of our overarching service improvement plan.

**Summary of plans to maintain/improve practice over the next 12 months**

Our quality assurance processes have been reviewed and we identified, corroborated by our recent Peer Challenge, that whilst we have robust processes in place with some effective audit tools, we still need to improve how we then evidence the learning from this. Learning from audits, direct observations of practice, complaints and service user feedback will now be tracked through our Children’s Practice Improvement Meetings. We have improved our responses to compliments and positive feedback from people using our services and ensure these are shared with individual practitioners and managers.

Our learning plans and CPD offer for staff within Children and Families have been reviewed this year to ensure we continue to commission high quality, cost effective training that meets the needs of each service area. This is a dynamic process that needs to respond to the changing needs of the workforce and equip staff with the right skills and knowledge to undertake their roles.

Redcar and Cleveland offers a well-established Assessed & Supported Year in Employment (ASYE) programme, for our Newly Qualified Social Workers, which includes a mandatory training offer, protected development time and independent reflective mentoring sessions.

A series of Practice Workshops has been launched across the service. These will be facilitated by the PSW, team and service managers. Each session focusses on a different practice topic and the purpose is to share good practice examples and offer a safe space for practitioners to meet and discuss what works well and what potential barriers to good practice may be.

Some specific priorities for improvement include: implementation of Signs of Safety as a whole-system approach; introduction of a ‘care academy’ for newly qualified social workers; development of South Tees Multi-Agency Children’s Hub; development of a robust strategy to support children and young people on the edge of care; exploration of in-house residential provision; a revised strategy to increase the number of in-house foster placements (specifically specialist carers); a strategy to decrease the number of care leavers who are NEET; and the implementation of a robust offer for connected carers.

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| **SECTION 3: Effectiveness of SEND arrangements**  |

**What our own analysis tells us about our effectiveness in identifying the needs of disabled children and young people and those who have special educational needs**

Redcar and Cleveland’s Local Area had its SEND inspection in March 2018. Whilst a number of strengths were identified within the published report, the inspection determined that a Written Statement of Action (WSOA) was required to address areas of weakness within the local area’s practice. The inspection takes into account Health, Education and Social Care services and found that there had not been enough progress made over the last 4 years since the reforms were introduced. There were a number of areas where practice was found to be strong and it is important to highlight that no children were found to be in situations of unassessed or unmanaged risk of significant harm.

The Local Area SEND inspection reported that the early identification of SEND through our early years SEND pathway is good and that parents value the services offered by the team for their pre-school aged children with complex needs. In responding to younger children, education, health and social care professionals are working in a joined-up and highly effective way. The multi-agency panel meets monthly to consider referrals for support both in terms of family support groups, multi-disciplinary assessments and portage home visits; as well as consideration of supported access to funded 2,3 and 4-year-old nursery provision.

In primary schools, children’s needs are generally identified accurately and in a timely way. From their different starting points, this group of children make progress which is better than other children nationally. Also, special school provision, and the additionally resourced provision in primary schools, meets the needs of children and young people who have SEN and/or disabilities well and is highly regarded by families.

However, effective identification is not as strong in our secondary schools, where the inspectors highlighted issues with the number of children on a SEN support plan and the quality of these plans. This hinders schools’ ability to identify and respond to needs at the earliest opportunity. What we know is that perceived behaviour issues sometimes mask underlying, yet to be diagnosed difficulties, which aren’t always recognised or understood by our secondary schools, and which can lead to absence and exclusion.

**What our own analysis tell us about our effectiveness in assessing the needs of disabled children and young people and those who have special educational needs**

The inspection highlighted improvements needed around the Education, Health and Care Plan process, noting that the quality of EHC plans is too variable. We recognise that further work is required to ensure that plans clearly evidence the impact of children’s needs on their day to day life, that provision matches those identified needs, that there is stronger contribution from health and social care colleagues and that outcomes are specific and measurable. Back in March, the CCG led on a Rapid Process Improvement Week, looking at how to streamline and refine processes to improve the quality and timeliness of health contributions to assessments and plans and an action plan is in place to progress and embed the necessary changes. We have also recently been through a service review in the SEND team and this, coupled with targeted training and the development of more robust quality assurance processes, should, in time, result in improvements in this area.

We have recently looked to streamline and improve our Education, Health and Care review process for those children who also have a social worker involved in their lives. The social worker will now lead on the education, health and care review process, aligning this to existing social work processes. This reduces the need for the child / young person and their family to attend multiple meetings and improves joint working between the two teams.

**What our own analysis tell us about our effectiveness in meeting the needs of disabled children and young people and those who have special educational needs**

The inspection found that, across the partnerships, the local area does not have a clear or comprehensive enough understanding of the outcomes achieved by children and young people who have SEN and/or disabilities. This limits the ability to jointly plan, commission and provide services and also to evaluating their impact. Following this, the importance of having robust governance and reporting arrangements in place in respect of SEND has been recognised and these have been strengthened with the SEND work streams being reviewed and the recently established Children and Young People’s Partnership Board. This board has helped to agree and refine the 10 priorities for the Borough, these being breastfeeding, parental risk factors, increase in care proceedings and repeat adoptions, secondary school progress and attainment, school absence and exclusions, NEETS, social and emotional wellbeing, child sexual exploitation, obesity and reoffending.

Each of these priorities will be considered for the whole population in Redcar and Cleveland and the information in respect of the children and young people with SEND will be disaggregated. There is also a lot of work being undertaken around joint planning and commissioning which is described in more detail below, where we set out our plans to improve outcomes over the next 12 months.

There are some effective and creative arrangements in place in relation to how we prepare and support young people towards adulthood and independence. New pathways into independent living and an increasingly effective programme of supported internships and travel training are helping some young people who have SEN and/or disabilities to achieve better outcomes. This group of young people are developing the knowledge, skills and confidence needed to work, live independently, be healthy and feel valued and included in the communities where they live. We have a range of specialists to support young people through transition – this includes SEND Careers Advisors; an Employment Development Officer; and a Transitions Health Facilitator (for those young people with a learning disability). The work of our transitions specialists is resulting in improved outcomes, with a greater proportion of young people gaining independent skills and moving into employment, education and training over the past year.

**Summary of plans to maintain/improve outcomes over the next 12 months.**

Over the next 12 months, the local authority will be working closely with the CCG and Education Partnerships on actions set out within the Written Statement of action (WSOA) to improve SEND arrangements across Redcar and Cleveland’s local area.

The recent appointment of the Early Years Area SENCO demonstrates the local authority’s investment in SEND in the pre-school years and the role will seek to further refine identification and data sharing processes across LA teams and further develop partnerships with both school-based and private inclusive nursery provision for children with SEND. Regular audits of SEN support plans and EHC plans in PVI settings will take place which will support children having a robust SEN Support Plan/EHC Plan in place and enable them to experience a better transition as they progress.

We are dedicated to working in partnership with schools and colleges to make secondary and further education in this Borough as good as our high performing primary education. The partnership response to the SEND inspection has provided a good opportunity to secure improvement in this respect.

To improve children’s experience of educational transitions and ensure that these are successfully managed, we will be reviewing the expectations of the primary high needs bases so that young people are developed and integrated into mainstream classrooms as much as possible. Transition protocols are being produced which will mean a personalised transition plan is in place for every child and will support the identification of need at all transitional points throughout all educational settings. A number of investments are also being progressed, which will increase capacity in- Borough, including: the development of an autism base in one of our high performing secondary schools; the demolition and rebuild of a specialist SEMH school that is expected to open by September 2020 and which will increase capacity from 66 to 100; and a capital project to increase capacity at Kirkleatham Hall Special School. We are also in the process of exploring the development of a 6-bed residential and short stay/crisis provision for children and young people with challenging behaviour and complex needs, which we aim to open by Autumn of 2019.

We are committed to improving the ways in which our mainstream secondary schools meet our children’s needs. A new cross phase strategic educational leadership board has been created to share good practice from primary, secondary and post-16 settings and work with the Educational Improvement Partnership (EIP). It has agreed to prioritise support for SEND, will meet 6 times a year and, importantly, will include representatives from Health and Social Care, as well as Education. Following the inspection findings, SEND Reviews are being undertaken across our secondary schools. We are also working with the London Leadership Programme who have committed resources to allow our school leaders to access SEND training to increase their awareness. This will enable them to better identify needs and target support and to implement whole school strategies in respect of SEND.

The production of a Joint Commissioning Strategy will set out how the CCG and the Local Authority will work together to review services for children and young people that could potentially be jointly commissioned. Public Health is leading on a refresh of the children and young people JSNA so that the local area can utilise the information from it to inform the future commissioning and delivery of services. Commissioners from Middlesbrough and Redcar and Cleveland are working with the CCG around the Speech and Language Therapy contract to ensure that children and young people are provided with a good service The CCG is also looking to implement a centralised children's specialist equipment service to ensure that young people will receive the equipment they need within the appropriate timescales. The mental health pathways for children and young people are being reviewed, including CAMHS and the ASD pathways, and a commissioning officer has been appointed on a fixed term basis to develop these pathways and ensure that children and young people with SEND are able to access services irrespective of an autism diagnosis. This post is being funded by the CCG with Future in Mind monies and will work across the South Tees with Redcar, Middlesbrough and the CCG.

In order to address issues around the quality of SEN Support Plans / Education, Health and Care Plans, we are reviewing our SEND quality assurance framework and have introduced additional steps which will improve the management oversight of completed EHC plans. In addition, we will be establishing a peer review audit programme for SEN Support plans across the SENCO networks and setting up an annual rolling programme of multi-agency audits of EHC plans; the aim of both is for measurable improvements to be seen in the quality of plans.

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| **SECTION 4: Education and vulnerable learners** |

**What our analysis tells us about education outcomes for children in the early years and primary education**

Take up of Early Years education places for 2, 3 and 4 year olds is good. As at the point of the national Early Years Census in January 2018, 79% of those eligible had taken up a free two-year-old place compared, to 72% national average; and 100% of eligible 3&4 years olds had taken up their nursery place, compared to 94% national average.

The successful uptake of places and excellent quality of our early years’ provision is starting to play out in our Early Years Foundation stage data; 71.4% of children now achieve a good level of development by the end of reception. This is a year on year improvement from 53.6% in 2014 and now our results are in line with regional and national peers.

The performance of primary schools in Redcar and Cleveland continues to be very strong. Outcomes against Ofsted ratings remain very high and end of key stage assessments are well above national averages

**What our analysis tells us about education outcomes for young people in secondary education**

The performance of some secondary schools is a cause for concern. Whilst some outcomes remain strong and improving, 4 out of 10 secondary schools were inadequate in their last Ofsted inspection and overall pupil attainment is below average in some key indicators.

Exclusion levels remain amongst the worst in the country for our secondary schools and are not acceptable at both fixed term exclusion rates and permanent exclusion rates.

**What our analysis tell us about outcomes for young people post-16**

Both colleges within Redcar & Cleveland and its one sixth form have reported very positive outcomes for their students. Redcar & Cleveland College has recently amalgamated with Stockton College and has expanded its offering. In particular, it has widened its SEND offer and increased the number of SEND pupils as a result. A different approach is being taken to support NEETS, with greater emphasis on those likely to become NEET whilst in their final years at school.

**Summary of plans to maintain/improve outcomes over the next 12 months.**

It is a clear priority for the service to improve standards of performance in the secondary sector. The main strategies around this will be:

* Increasing high quality support and challenge to schools causing concern, in partnership with the Regional Schools Commissioner, Ofsted and other key partners, including the Diocese and regional programmes;
* Implement a transition programme that enables the expectations and progress of KS3 pupils to be raised and improved;
* Commission more opportunities for children and young people to engage with meaningful alternative provision and alternative curriculum pathways; and
* Work closely with all schools and academies to reduce the number of fixed term and permanent exclusions. The new Pupil Placement Panel will be pivotal in this with revised protocols for managing pupils vulnerable to exclusion.

The service will also be focussing on improving outcomes for our vulnerable learners and Children in Our Care. This includes those with special educational needs, where new enhanced provisions are being sourced and a programme of professional development and challenge is in place. The Virtual School has plans to expand PEPs into early years and Post 16 and improve its governance and staffing to ensure robust challenge and support to schools, to provide, nurture and secure better outcomes for our children in care.

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| SECTION 5: Directors’ challenge |
| Your self-assessment will be peer challenged by Directors within your peer network. This section should be completed by the peer directors as a record of key points raised during the challenge including any recommendations made by your peers. Once this section is complete, it should be signed off by both peer directors. |

**Summary of Directors’ challenge.**

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| **Key points raised by North Tyneside** | **Recommendations** |
| High repeat contacts but low re-referrals | Consider timeliness of case closures and the relationship between the two |
| Duration of CiN cases | Consider the drivers for the duration and review the approach to managing risk |
| Redcar are confident about thresholds – they have looked at decision making including with neighbouring LAs and inspection findings suggest decision making around thresholds is appropriate. | NFA |
| Explore opportunities to develop robust packages of support for Kinship Carers within the Tees Valley.  | Tees Valley ADs to develop a single framework for kinship support to enhance any financial offer.  |
| Redcar able to describe the steps they have taken to mitigate risk around introducing a shared children’s hub with Middlesbrough. | NFA however if required this could be a potential area for PiP support from North Tyneside? |
| S.47 numbers high but lower conversion rate. Audits suggest numbers are appropriate. | Review the position to give further reassurance |
| The edge of care offer proposed could prevent some young people coming into the care system. Redcar are making progress with partners and have an understanding about the factors associated with the rise in LAC. | NFA |
| The importance of ensuring that managers are clear about what good looks like to support the consistency of practice.  | Explore with first line managers their understanding of good assessments and plans. |
| Drivers for investing in Signs of Safety as a model of practice should be emphasised and understood across the organisation in order to support cultural change. | Consider North Tyneside’s pace and scale in implementing SoS and their ‘what, why and how’ diagram to focus on emotional commitment.  |
| Suggest that further work is needed to engage schools in early help  | Consider NT’s mental health first aid in schools. |
| Redcar able to describe model for edge of care which has drawn on practice elsewhere in the region.  | Consider reliance on FGC as it may not be responsive enough. |
| Profile of foster carers brought about by the successful campaign and whether there are any specific gaps in provision.  | Consider whether there is a need to target existing foster carers to support the more challenging cohort rather than trying to recruit new foster carers for this cohort. |
| The PRU referral process has been strengthened and a new behaviour policy developed but exclusions are high  | Review work elsewhere in the Region where there has been success in reducing exclusions.  |
| An area of strength in Redcar is improving the quality of family interactions that have been brought about by the launch of the new family time centre. | NFA |

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| Date of directors’ challenge: |  |
| Directors’ challenge signed off by: |
| Peer Director: |  |
| Peer Director: |  |

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| SECTION 6: Regional SLI offer |
| Complete the section below taking sections 1 to 5 of this self-assessment into account. This information will inform the Regional Improvement Alliance ‘regional offer’.  |

What offers of support can we make to others in the region? What good practice can we share? Please list a maximum of five ‘offers’.

1. We have successfully transitioned and integrated health visiting and school nursing.
2. We have created a bespoke environment for Family Time (Supervised Contact).
3. Although we are in the process of implementing Signs of Safety we have already developed our strategy and have learning that we can share.
4. Adoption Tees Valley has successfully been created which bring together the adoption services for 5 Local Authorities.
5. We have developed our independent travel training service and have successfully transitioned many young people from home to school transport to travelling independently.

In which areas would we like support from the Regional Improvement Alliance and what kind of support do we need? (e.g. peer challenge, peer audit, diagnostic review). Please list a maximum of five.

1. Schools peer challenge to assist with the growing number of exclusions.
2. Kinship care – good practice in the development of frameworks and policy.
3. Sharing good practice, advice and guidance in developing ‘Edge of Care’ Services and crisis residential facilities.
4. Quality assurance of processes of EHCPs and SEND Support Plans.
5. Social work recruitment and retention – sharing best practice.

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| Please ensure this self-assessment has been signed off by the DCS, CX and Lead Member on the first page.Send a copy of your completed self-assessment form to **abigail.holder@newcastle.gov.uk** by FRIDAY 16TH NOVEMBER 2018 |