

Lorraine Butcher
Strategic Director of Children, Family & Adults
Cheshire East Council
Westfields
Middlewich Road
Sandbach
CW11 1HZ

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Dear Lorraine

Thank-you for taking part in the Children's Services Safeguarding Peer Review. The team received a really good welcome and the co-operation and support throughout the process was greatly appreciated. It was evident to us that all those we met were interested in learning and continuous improvement.

We agreed to send you a letter confirming our findings. As you know the safeguarding review focused on five key themes along with the Key Areas of Focus you provided for the peer team before our visit. This letter sets out our findings on these areas. It includes the good practice we heard about and areas which you might want to consider further during your improvement journey. As you did not have the optional elements of audit validation and a case records review our comments, particularly in regard to the quality of practice are based on triangulation of self-report measures.

It is important to stress again that this was not an inspection. A team of peers used their experience to reflect on the evidence you presented to us on safeguarding vulnerable children and young people. The focus of our feedback was on assisting you to both maintain and improve your current levels of performance.

We highlight areas which were noted by the Peer Review team in terms of:

- Key overall messages
- Key strengths
- Areas for consideration

Key overall messages

Strengths

- **Strong commitment at every level to improve outcomes for children**

We found that the commitment to improve outcomes for children was apparent in both Cheshire East Council and across the wider partnership. Members, officers and partners demonstrated that the needs of the children were at the forefront of their work

- **Good multi-agency working and partnerships**

The peer review team were impressed by the level of positive working relationships across the partnership. This was particularly evident in the work done at an operational level.

- **Strong leadership and management**

We found a high level of confidence in the Senior Leadership Teams across the partnership and this provides a good building block to improve services for children in Cheshire East.

- **Dedicated workforce**

Cheshire East and its partners have staff that are committed to their work and to the safeguarding of children. Morale was reported to be improving and staff were appreciative of the learning opportunities they were able to access.

- **Political will to implement change**

The team met the Leader of the Council, the Lead member for Children's Services and the Chair of the overview and scrutiny function for Children's Services. Although all were new to post there was an early determination evident in getting it right for children and young people. All were active in inducting themselves into the roles.

Areas for further consideration

- **Pace of change**

We found that although there was a clear commitment to making improvements in the service, particularly around early help and social care, the pace of change is too slow. Improvements in front line practice are beginning to take effect but this must happen at a much greater pace to comply with the Ofsted recommendations and maintain the commitment from staff. There are still some actions identified within the July 2011 Ofsted SLAC inspection which need to be fully implemented with a greater emphasis required on clear evidence of impact.

- **Voice of the child**

We found little evidence that the 'voice of the child' was embedded in front line practice in terms of evidencing that children are seen and their views

reflected in care planning and recording. Children and young people also need to be more involved in the development of services that will impact on their lives.

- **Capacity**

The 'right people, in the right place doing the right things at the right time' was a phrase we heard a number of times. There is a need to ensure that this is put into practice across services in order to improve the capacity of the organisation.

- **Outcomes**

An understanding of outcomes and how they are measured is limited in practice. At present, there is not a culture of being outcome focussed. This also applies to areas of partnership working where the development of outcome measures is still being explored.

- **Inconsistency of practice**

Managers and staff reported that there were inconsistencies in the quality of social work practice. They referred to the quality of initial and core assessments, case recording, care planning and ensuring that children and young people's views were incorporated into planning and decision making. We were not able to substantiate this as we did not read case files, review assessments or speak to staff about individual cases. The case mapping did however evidence some inconsistencies in quality of practice. Caseloads in CAT have been high, but are reducing. Improvements in IA and CA timeliness need to be accelerated.

- **Communication**

There is a lack of understanding at some levels of the organisation and across the partnership of what the vision is for the safeguarding of children and how it will be delivered. This is particularly the case around early help and the "front door". There needs to be clear communication and checks made to ensure that the messages are understood at all levels.

- **Partnership commitment to implementation**

Partners, in particular Health, need to commit to the implementation of projects that will safeguard children. This particularly applies to the Early Help offer. Public Health also needs to become more actively involved in the development of services for children and young people.

Executive summary

In relation to the first area of consideration, that of vision, strategy and leadership the review team found that Cheshire East is well placed to take Children's Services forward. There is an obvious political commitment to improve services for children and a confident well informed leadership team in whom the staff have a great deal of trust. Across the partnership there is a sense of joint ownership emerging which augurs well for future development of integrated services.

In taking Children's Services forward Cheshire East needs to be mindful of the need to induct new Members thoroughly. The council has a new Leader, a new Lead Member and a new Chair of Scrutiny which offers overview for Children's Services as part of a broader remit. Members need to reassure themselves that there are appropriate reporting structures in place. Similarly there is a new leadership team within the council with an interim Chief Executive and recent appointments to the deputy DCS position and Assistant Director. As a consequence of these changes the vision for Children's Services needs to be articulated and communicated more clearly. Greater clarity would also be timely for key partners who are currently in a state of flux due to changes in their own landscape. As part of restating the vision for Children's Services staff should be presented with a clear model for change.

The second area of consideration for the review team focussed on the areas of effective practice, service delivery and the voice of the child. The team found emerging strengths in this area. Staff appreciated the offer of professional training and development opportunities which appeared to address training needs at the level of the individual, the service and the organisation. Associated with this offer was a high level of staff morale and a positive organisational culture. Supervision arrangements were also regarded positively by staff. There were some early indications of effective multi-agency working for example those based in Children's Centres.

It was apparent to the review team that front line practice needs to be developed further and to become more consistent with best practice. Greater understanding of thresholds is required with better signposting to universal services where referrals do not lead to an assessment. A better understanding of early help is required. The quality of assessment is variable and better recording of decision making about intervention and the changes required is needed. The quality of front line practice is affected by the large proportion of agency staff, NQSWs and high caseloads. Practice across the partnership urgently needs procedures to include the voice of the child in decision making which affects their lives and in the development of services generally.

Other areas of consideration for the review team were those of outcomes, impact and performance management. Here the review team found strengths which included an established culture of performance management across Children's Services and an effective performance management framework in use by the CESCIB across the partnership. There is an established culture of regular audit and learning from them is embedded in practice. The SCIE methodology is used to enhance learning.

It is acknowledged that outcomes for children need to be articulated more clearly in important plans and strategies in order to demonstrate that the work being undertaken in Cheshire East is having a positive impact on children. It is also important that the benefits of regular audit are used to improve front line practice. Similarly, the need for a comprehensive dataset which includes qualitative as well as quantitative measures is required in order to assure

senior management that services are fit for purpose post Munro and looking forward to the new multi-agency Ofsted inspection framework.

The review team looked at how well services in Cheshire East were working together to deliver the children's agenda. It was evident that there is a clear willingness to work together and a strong commitment to partnerships such as the CESCIB, the Children's Trust and the Health and Wellbeing Board. Multi-agency training is well regarded and some services were described by staff as very good, such as the CAMHS service at Tier 4, School Nursing Services and the Family Nurse Partnership. There was a healthy culture of informal challenge evident across the various partnerships.

The multi-agency delivery of the early help offer on the whole has been slow to develop, partly because there remains a view that this is the remit of the council. Greater joint ownership of this agenda by the partners is required if it is to bring the benefits intended and offset more expensive intervention further downstream. The Health and Wellbeing Board has been slow to develop and as a consequence the health and wellbeing strategy does not reflect the necessary focus on children's issues. Similarly Public Health remains behind the curve in preparing for the handover of responsibilities to Cheshire East Council next year.

Finally, it is important to consider the effective use of resources and in this regard the plans for the new multi-agency front door including the MASH is a positive development as it should lead to more efficient use of resources. New and intended appointments will bring greater capacity to senior management and the clearly set out recruitment and retention strategy should help to address the problem of a high level of agency staff. Set against these positive developments is the need to address the structural overspend in children's social care, the need to develop a joint commissioning strategy for children's services across the partnership and to invest further in early help services.

This table highlights the strengths of your safeguarding work:

Effective practice, service delivery and the voice of the child	<ul style="list-style-type: none">• There is a clear understanding at a strategic level of the service delivery issues that need to be improved, in particular around front line practice.• A number of projects are emerging that are demonstrating good practice in terms of Early Help and partnership working. e.g. midwifery, Family Nurse Partnerships and use of the NSPCC Graded Care Profile around neglect.
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	<ul style="list-style-type: none"> • We were told that there are some improvements in the quality of social work practice. The use of Practice Consultants was seen by staff as positive. • The level of professional training and development which addresses the shortfalls in practice issues is well received by staff and participation is good. • There is a positive culture and ethos within Children's Services which is improving staff morale. • Multi-agency working at an operational level was reported as being very good. The Police in particular were seen as providing strong support in a number of areas e.g. PCSO's relationship with schools. • The Transition Group for children and young people with disabilities and complex needs has a clear plan to improve transition processes and access to key services for children transferring from Children's to Adult Services. The review of the Children with Disabilities Team will strengthen safeguarding and transition to Adult Services. • Supervision is seen as positive by social workers. The policy and toolkit has recently been updated to incorporate the LGA's Employers Standards and Supervision Framework and teams are piloting different supervision methods.
Outcomes, impact and performance management	<ul style="list-style-type: none"> • A review of corporate performance management is underway and is member-led. This should provide a Council wide approach to performance management which raises the profile of safeguarding as everyone's business. • Performance management in Children's Services is well established and is used to inform front line practice. • There is a developing performance management framework in place for partner agencies within the

	<p>LSCB which is presented to the Board on a quarterly basis.</p> <ul style="list-style-type: none"> • An established culture of regular audit operates within Children's Services. The audits are reported to managers' meetings. We did see some evidence of implementing changes e.g. managers signing off assessments, transfers and children's views. • The council has made a commitment to invest in a new care management system to replace PARIS which will support social work practice. This is at the consultation stage but staff and partners are involved and a twin track approach will ensure that improvements will be made to the current system to support social work staff in the interim. • The adoption of the SCIE 'Learning Together' methodology to enhance learning across partners has been well received and is being used to inform practice.
<p>Working Together (including Health and Wellbeing Board)</p>	<ul style="list-style-type: none"> • We found a strong culture of multi-agency working at all levels. One partner commented that there was 'caring, professionalism and dedication'. • Multi-agency safeguarding training was well regarded by all partners and participation was good. The training was seen as an opportunity to network with colleagues and build relationships. • There is strong commitment at LSCB and sub-group level to improve the lives of children in Cheshire East. • There is evidence of positive working in the Transitions group which will hopefully lead to better outcomes for those children transferring from Children to Adult Services. • Health has a strong presence in Children's Centres. Midwives and Health Visitors are now based there and linking with Family Support

	<p>Workers.</p> <ul style="list-style-type: none"> • CAMHS are seen as providing good support at Tier 4. • Schools in particular found the work done by school nurses was very positive. In particular representing schools at CAF and CIN meetings. • The JSNA provides data across a range of issues relating to children which could be used to inform services for children. It will need to include specifics on safeguarding and wider determinants of health. • The Children's Trust will feed into the Health and Wellbeing Board which will ensure that Children's issues continue to be addressed.
Capacity and managing resources	<ul style="list-style-type: none"> • The new Recruitment and Retention strategy is clearly set out and a recruitment campaign for social workers is due to begin prior to Christmas. This will assist in the reduction in numbers of Agency staff. A 'Grow Your Own' project will also provide additional capacity in the longer term. • Schools are commissioning services that will assist with Early Help and provide support to vulnerable children e.g. counselling services, Family Support Workers. • The council has made some new appointments and agreed some new posts. This will provide significant additional capacity and focus on social care practice. • The new Front Door arrangements due to take effect in early 2013 will focus resources where they are most needed and address some of the issues relating to initial assessments. The inclusion of the MASH as part of this initiative is seen as a positive development. • There is a stated intention to ensure that the use of resources is more effective. 'The right people, in the right place, doing the right things at the

	right time' was the ideal state.
Vision, strategy and leadership	<ul style="list-style-type: none"> • There is good political support and commitment to the safeguarding agenda. • The Interim Chief Executive has a good understanding of key issues, in particular front line practice, capacity and early help. • Across the organisation there is real confidence in the Senior Leadership Team which will help drive the change agenda. • The Health and Wellbeing Board and the Children's Trust have endorsed the Early Help Strategy which should ensure the commitment of all partners to implement the strategy.

The table below highlights areas the Peer Review Team felt would benefit from further consideration.

Effective practice, service delivery and the voice of the child	<ul style="list-style-type: none"> • The voice of the child is still to be embedded in front line practice. In particular engaging children and capturing their views. This includes evidence of the child's journey. The involvement of children and young people in developing services is also underdeveloped. • There was a lack of understanding amongst some employees and partners about thresholds, the Early Help offer and what services were available from other agencies. This often resulted in inappropriate referrals to Social Care with a high percentage (40%) leading to 'No Further Action'. The effectiveness of plans to introduce a new 'front door' from January should be monitored. • The quality of front line social work practice is inconsistent. It was reported through interviews and the case mapping undertaken that the quality of social work practice is still variable. Case files were not looked at as part of the peer review.
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	<ul style="list-style-type: none"> • Agency staff and new qualified staff are impacting on the quality of practice. This leads to relationships between children and their social workers being affected, an inconsistent approach to front line practice and limited time for adequate supervision. • Caseloads in CAT are at times high, but are reducing. Timescales for both Initial and Core Assessments are concerning. Improvements in IA and CA timeliness need to be accelerated. • Practice consultants are well regarded but some are holding high caseloads which impacts on the effectiveness of their role. • It was reported that there are issues around care planning, for example the voice of the child; a culture of using costly placements; capacity of in-house foster placements, care planning not being robust, children at home on care orders and whether children are on the right order. • The current IT systems do not allow for structured workflows to be readily followed. Work to improve the quality and consistency of recording needs to continue. • Information relating to private fostering is available but numbers are still low. The impact of current strategies needs to be evaluated to ensure that communication and awareness of private fostering is reaching those involved in this arrangement.
Outcomes, impact and performance management	<ul style="list-style-type: none"> • The clarity of outcomes for children and young people is not evident. Plans currently focus on actions and need to become more outcome focussed. Further work is needed to ensure that all partners understand what 'outcomes' mean in practice. • A more comprehensive LSCB performance pack is needed to become meaningful. All partners need to contribute information to this pack. At present there is a lack of Health related data.

	<ul style="list-style-type: none"> • There is a need for performance information to be consistently applied to improve front line practice. This would link the strategic aims to actual practice and would enable practitioners to quantify the difference they are making to clients. This was being used in the 16-19 years old CAMHS project. • A comprehensive data set across the partnership needs to include qualitative measures as well as quantitative information. This will give a much richer picture to inform decision making. • There is a need for performance information to be used intelligently to inform multi-agency priorities and needs led services across all service areas and partner agencies. • The revised Scrutiny arrangements around policy development may not give children and young people the necessary profile. In particular the role of overview and scrutiny should extend to more than challenge in relation to policy • Partners are often unable to demonstrate the impact of their work which means it is difficult to measure success.
Working Together (including Health and Wellbeing Board)	<ul style="list-style-type: none"> • The LSCB needs to ensure that challenge of partners is formalised and recorded to demonstrate strong governance and performance management. • It was noted that the Health and Wellbeing Board has been slow to develop compared to other areas resulting in a health and wellbeing strategy which lacks detail. • At this stage, there is no detailed Health and Wellbeing strategy or action plan for the next three years. Partners should ensure that children continue to be a key priority within the health and wellbeing strategy and feature strongly within their respective organisational plans. • The application of data from the JSNA needs to inform multi-agency service development in order

	<p>for it to be meaningful</p> <ul style="list-style-type: none"> • Multi-agency delivery of the Early Help Strategy has been slow to develop and in order to demonstrate outcomes engagement from all partners needs to be progressed. • Public Health is not fully integrated and the opportunity now exists for this to progress to the benefit of all partners.
Capacity and managing resources	<ul style="list-style-type: none"> • There is a high percentage of agency staff (30%) and newly qualified social workers (24%) working in CP/CIN/CAT (October 2012 data). This is resulting in difficulties with some partners looking for continuity in social workers and being able to build relationships e.g. schools. • High levels of sickness absence in Children and Families has resulted in increased costs around the use of agency staff. The management of sickness absence policies needs to be rigorously applied. • A check to ensure that resources are effectively deployed needs to be carried out. It is acknowledged that the Front Door project will assist some of the resource issue but there may be other areas that need to be addressed. It would be advisable to use a needs assessment model to identify areas and groups of greatest need. This to be supplemented by a mapping and gapping exercise to identify gaps and re-allocate resources. • There has been a culture of high cost placements in the authority and in the current financial climate it may be advisable to look at this in detail. In particular, ensuring that at the care planning stage social workers are aware of the costs. It is acknowledged that the council is beginning to address this issue. • The team identified that there may be some gaps in Early Help provision. There was a lack of clarity on what the early help offer was and how this linked to the continuum of need. For example

	<p>there was some uncertainty about what support Children's Centres offered, the 0-19 offer and the 0-11 Family Support Teams. In addition, there was some confusion about how the 11-19 offer would be developed with a review of Youth covering 15-19.</p> <ul style="list-style-type: none"> • Joint commissioning with Health is still underdeveloped. There are memorandums of understanding but actual joint commissioning is still to commence. • There is a structural overspend in Children's Social Care resulting in Early Intervention Grant funding being used to plug the gap. • It is likely that the Public Health allocation will be relatively low resulting in no additional services being commissioned over and above what already exists. • The level of CAMHS support at Tiers 1 -3 needs to be clearly communicated to ensure that the expectations of those requiring these services are managed. • There is an inconsistency in the way that Adult Services are picking up children's disability cases at transfer despite a policy being in place.
<p>Vision, strategy and leadership</p>	<ul style="list-style-type: none"> • The Lead Member for Children's Services, Council Leader, Chair of Scrutiny and the LSCB Chair are all new in post. There is a lack of familiarity with the Children's agenda and support for these roles will assist in their understanding of key issues. • Staff are unable to articulate the vision for Cheshire East Children's Services. This needs to be communicated to everyone involved in delivering services. This will help to engage the hearts and minds of staff. • Major changes are taking place in the service and across other partner agencies. There is a need for greater clarity on what these changes mean for individuals and their service. A documented

	<p>change and communication plan would be useful to assist in everyone understanding their role.</p> <ul style="list-style-type: none">• Corporate Parenting would benefit from further development. In particular, the training and development of members around their Corporate Parenting responsibilities.• The LA and partners have experienced significant changes in key positions and structures and it is important to ensure that these changes do not impact on the priorities relating to the safeguarding of children.• A formal reporting structure to Members and the Chief Executive by the Director of Children's, Families and Adults Services needs to be re-established to ensure that there are checks and balances in the performance management system.
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At the action planning workshop on Friday 7 December 2012 you discussed the feedback presented by the Peer Review Team. Whilst improvement work is ongoing, you identified the following key priorities:

- Embed the voice of the child
- Continue to improve the quality of practice
- Further develop corporate parenting/private fostering arrangements
- Increase the pace on the implementation of the Early Help Offer and ensure partners are fully committed, especially around targeting of resources
- Accelerate the pace of change and be able to articulate the impact of interventions
- Implement a comprehensive communication plan

The Local Government Association would be happy to discuss how we could help you further.

You and your colleagues will want to consider how you incorporate the team's findings into your improvement plans, including taking the opportunity for sector

support through the Children's Improvement Board. Howard Cooper, your regional broker, has been sent a copy of this letter and will be in touch with you to discuss the options for support and how best to share notable practice identified. He can be contacted by email: howard@howardcooper.co.uk or by phone on 07508 430056

The Local Government Association is offering a follow up visit nine months to a year after the Peer Review. This would give us both an opportunity to evaluate the process and assess impact. The Principal Adviser for the North West is Gill Taylor. She can be contacted by email: Gill.Taylor@local.gov.uk or by phone on 07789512173

Thank-you again for agreeing to receive a review and to everyone involved for their participation. In particular, please pass on thanks from the peer review team to Gill Betton and Peter Thorley for their support during the preparation stages and organising the on-site requirements.

Paul Curran

Children's Improvement Adviser (Peer Review), Local Government Association