



## **Safeguarding Sub (Community & Children's Services) Committee**

**Date:** MONDAY, 30 JUNE 2014

**Time:** 1.45 pm

**Venue:** COMMITTEE ROOM - 2ND FLOOR WEST WING, GUILDHALL

**Members:** Deputy Billy Dove  
Revd Dr Martin Dudley  
Professor John Lumley  
Deputy Joyce Nash  
Dhruv Patel  
Elizabeth Rogula

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**Lunch will be served in the Guildhall Club at 1pm**

**John Barradell  
Town Clerk and Chief Executive**

# **AGENDA**

## **Part 1 - Public Agenda**

1. **APOLOGIES**
2. **MEMBERS' DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA**
3. **ELECTION OF CHAIRMAN**  
To elect a Chairman pursuant to Standing Order 29.  
**For Decision**
4. **ELECTION OF DEPUTY CHAIRMAN**  
To elect a Chairman pursuant to Standing Order 30.  
**For Decision**
5. **TERMS OF REFERENCE**  
To receive the Terms of Reference, as agreed at the 9 May 2014 meeting of the Community & Children's Services Committee.  
**For Information**  
(Pages 1 - 2)
6. **MINUTES**  
To agree the minutes and non-public summary of the previous meeting held on 5 February 2014.  
**For Decision**  
(Pages 3 - 6)
7. **UPDATE ON OFSTED INSPECTION AND IMPROVEMENT PLANNING, CHILDREN AND FAMILIES SERVICE**  
Report of the Director of Community and Children's Services.  
**For Information**  
(Pages 7 - 14)
8. **SERVICE IMPROVEMENT ACTION PLAN**  
Report of the Director of Community and Children's Services.  
**For Information**  
(Pages 15 - 48)
9. **ADULTS SAFEGUARDING SELF-ASSESSMENT**  
Report of the Director of Community and Children's Services.  
**For Information**  
(Pages 49 - 72)
10. **SAFEGUARDING POLICY, AWARENESS RAISING CAMPAIGN**  
Report of the Director of Community and Children's Services.  
**For Information**  
(Pages 73 - 86)
11. **QUESTIONS OF MATTERS RELATING TO THE WORK OF THE COMMITTEE**

12. **ANY OTHER BUSINESS THE CHAIRMAN CONSIDERS URGENT**

13. **EXCLUSION OF THE PUBLIC**

MOTION - That under Section 100(A) of the Local Government Act 1972, the public be excluded from the meeting for the following items on the grounds that they involve the likely disclosure of exempt information as defined in Part I of the Schedule 12A of the Local Government Act.

**For Decision**

**Part 2 - Non-Public Agenda**

14. **NON-PUBLIC MINUTES**

To agree the non-public minutes of the previous meeting held on 5 February 2014.

**For Decision**

(Pages 87 - 88)

15. **STRATEGIC OVERVIEW FOR MONITORING AND IMPROVING THE EDUCATIONAL PROGRESS OF CITY OF LONDON CORPORATION LOOKED AFTER CHILDREN**

Report of the Director of Community and Children's Services.

**For Information**

(Pages 89 - 98)

16. **ANNUAL REPORT ON THE HEALTH OF LOOKED AFTER CHILDREN 2013/14**

Report of the Director of Community and Children's Services.

**For Information**

(Pages 99 - 110)

17. **QUARTER THREE AND QUARTER FOUR ADULT SAFEGUARDING REPORTS PERFORMANCE INDICATOR OUTCOMES**

Report of the Director of Community and Children's Services.

**For Information**

(Pages 111 - 120)

18. **CHILDREN'S SAFEGUARDING REPORT FOR QUARTERS THREE AND FOUR FOR 2013/14**

Report of the Director of Community and Children's Services.

**For Information**

(Pages 121 - 136)

19. **NON-PUBLIC QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

20. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT AND WHICH THE COMMITTEE AGREE SHOULD BE CONSIDERED WHILST THE PUBLIC ARE EXCLUDED**

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## **SAFEGUARDING SUB-COMMITTEE**

### **Constitution**

- The Chairman of the Community & Children's Services Committee
- The Deputy Chairman of the Community & Children's Services Committee
- 4 Members appointed by the Community & Children's Services Committee.

### **Terms of Reference**

To be responsible for:-

1. ensuring, in respect of children entering public care, that the duty of the local authority as a corporate parent to safeguard and promote a child's welfare is fulfilled;
2. overseeing the discharge of the City of London's responsibilities to safeguard children and adults who have been identified as requiring support and protection;
3. monitoring the Community & Children's Services Department's performance in respect of its work to safeguard children and adults and make recommendations to the Grand Committee to bring about improvements as appropriate; and
4. exercising its functions with regard to the views of relevant service users, as appropriate.

### **Suggested frequency of meetings**

A minimum of 2 a year

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## **SAFEGUARDING SUB (COMMUNITY & CHILDREN'S SERVICES) COMMITTEE**

**Wednesday, 5 February 2014**

**Minutes of the meeting of the Safeguarding Sub (Community & Children's Services) Committee held at the Guildhall EC2 at 11.30am**

### **Present**

#### **Members:**

Angela Starling (Chairman)  
Revd Dr Martin Dudley (Deputy Chairman)  
Deputy Billy Dove  
Professor John Lumley  
Elizabeth Rogula

#### **Officers:**

Ade Adetosoye	-	Director of Community & Children's Services
Chris Pelham	-	Community and Children's Services
Peter Corden-Dilley	-	Community and Children's Services
Pat Dixon	-	Community and Children's Services
Emma Goulding	-	Community and Children's Services
Sarah Greenwood	-	Community and Children's Services
Marion Willicome-Lang	-	Community and Children's Services
Philippa Sewell	-	Town Clerk's Department
Jim Gamble	-	City & Hackney Safeguarding Children's Board
Fran Pearson	-	City & Hackney Safeguarding Adults' Board
Rob Stanex	-	City Gateway

### **1. APOLOGIES**

Apologies were received from Deputy John Bennett.

### **2. MEMBERS' DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA**

There were no declarations of interest.

### **3. MINUTES**

**RESOLVED** – That the minutes and non-public summary of the meeting held on 24 September 2013 be agreed as a correct record.

Fran Pearson and Jim Gamble, Independent Chairmen of the City & Hackney Safeguarding Adults' Board and Children's Board respectively, and Rob Stanex from City Gateway were welcomed to the meeting. Ms Pearson and Mr Gamble gave a brief introduction as to the work carried out by the two Boards, the challenges and areas of work common to both and issues that were distinct and required a different approach. They highlighted the need to secure effective communication alongside the need to challenge and scrutinise interpartnership working in order to develop services and ensure successful working practices.

4. **SAFEGUARDING ADULTS AUDIT NOVEMBER 2013**

The Sub Committee received a report of the Director of Community & Children's Services which provided details of an independent quality assurance review of safeguarding adults arrangements conducted in November 2013.

Members discussed the report, noting some suggested improvements and the positive comments made about the competency and knowledge of staff. In response to a question from a Member it was reported that the review had been evaluated using the same matrix as the Care Quality Commission. In response to another Member's question, the Director of Community & Children's Services reported that work was underway to review the safeguarding literature produced by the City Corporation, and that safeguarding would be acknowledged formally as a Corporate Risk by the Audit and Risk Committee in March.

5. **CITY YOUTH PARTICIPATION STRATEGY**

Members received a report of the Director of Community & Children's Services which sought feedback on the draft City Youth Participation Strategy. This had been developed by City Gateway alongside partners who work with young people in the City, and used the 'Silent Voice, Say, Do, Decide' model to engage with a wide cross-section of the youth population in the City.

Rob Stanex from City Gateway answered Members' questions on the strategy, and it was noted that:

- As this strategy would be launched throughout the Corporation and partners, champions would be needed in every department and organisation, to be supported and trained by City Gateway;
- A two-way flow of communication was needed - training would enable young people to effectively address Committees and express themselves as well as help City Corporation and partner agency staff to work intergenerationally;
- As there was difficulty in defining young people from the City (as opposed to travelling through) and accessing City residents who attend schools in other Boroughs, want to engage with as many organisations as possible who work with young people within the City;
- City Gateway were linked to the Challenge network, though they were not currently a partner agency.

**RESOLVED** – that the draft City Youth Participation Strategy be approved, and that updates on the implementation of the plan from the Children's Executive Board be received at future meetings.

6. **OFSTED INSPECTION PREPARATION SELF-ASSESSMENT**

The Sub Committee received a report of the Director of Community & Children's Services, which outlined the strengths based learning review undertaken in January 2014 by two independent experts in the field of Social Care. Members noted that this review indicated 'Good' services with 'Outstanding' features were being delivered to children and families, and that an action plan had been created to address the areas requiring further development.



7. **ANNUAL QUALITY ASSURANCE REVIEW**

Members received a report of the Director of Community & Children's Services summarising the quality assurance activity from the past 12 months. Officers reported that findings had been shared with social workers through team meetings and reflective practice sessions, and improvements were being made as a result of these such as support for remote working and more focus on positive feedback. In response to a Member's question regarding interviews with Looked After Children, the Assistant Director of People reported that although the feedback had been written up in a generic template, the discussions with the children themselves were more flexible; i.e. discussions with a 16 year old were very different than that for a 5 year old, despite seeking the same information.

8. **QUESTIONS OF MATTERS RELATING TO THE WORK OF THE COMMITTEE**

There were no questions.

9. **ANY OTHER BUSINESS THE CHAIRMAN CONSIDERS URGENT**

There was no other business.

10. **EXCLUSION OF THE PUBLIC**

**RESOLVED** – That under Section 100(A) of the Local Government Act 1972, the public excluded from the meeting for the following items on the grounds that they involve the likely disclosure of exempt information as defined in Part 1 of the Schedule 12A of the Local Government Act.

**Item**

11-15

**Paragraph**

3

11. **NON-PUBLIC MINUTES**

**RESOLVED** – That the non-public minutes of the meeting held on 24 September 2013 be agreed as a correct record.

12. **ADULT SAFEGUARDING REPORT - QUARTER TWO**

The Sub Committee received a report of the Director of Community & Children's Services.

13. **CHILDREN'S SAFEGUARDING REPORT - QUARTER TWO**

The Sub Committee received a report of the Director of Community & Children's Services.

14. **NON-PUBLIC QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

There were no questions.

15. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT AND WHICH THE COMMITTEE AGREE SHOULD BE CONSIDERED WHILST THE PUBLIC ARE EXCLUDED**

There was no other business.

**The meeting closed at 12.58pm**

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Chairman

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<b>Committee:</b>	<b>Date:</b>
Safeguarding Sub Committee	30 June 2014
<b>Subject:</b> Update on Ofsted inspection and improvement planning, Children and Families Service	<b>Public</b>
<b>Report of:</b> Director of Community and Children's Services	<b>For Information</b>
<p style="text-align: center;"><b>Summary</b></p> <p>This report updates members on the progress being made to prepare for the Ofsted inspection and to ensure that the services provided to children in need of help and protection, children looked after and care leavers are continuously improving in line with the new Ofsted single inspection framework.</p> <p>The report provides members with information on the work of the Inspection and Improvement Planning Group, which oversees planning across several work streams including:</p> <ul style="list-style-type: none"><li>• oversight of the quality assurance process being employed to prepare for the inspection</li><li>• the updating and maintenance of key performance data that will need to be submitted to Ofsted (Annex A)</li><li>• the role of the Local Safeguarding Children Board</li><li>• the communications planning.</li></ul> <p><b>Recommendation</b></p> <p>Members are asked to note the report.</p>	

## Main report

### **Background**

1. Ofsted's single inspection framework was published in October 2013 and came into effect in November 2013 on a universal three-year cycle. The inspections are conducted under section 136 of the Education and Inspections Act 2006.
2. The inspection will focus on the effectiveness of local authority (LA) services and arrangements to help and protect children, and the experiences and progress of children looked after, including adoption, fostering, the use of residential care, and children who return home. The framework focuses on the arrangements for

permanence for children who are looked after and the experiences and progress of care leavers. The leadership, management and governance judgement addresses the effectiveness of leaders and managers and the impact they have on the lives of children and young people and the quality of professional practice locally.

3. Alongside the single inspection, there will also be a review of the work of the Local Safeguarding Children Board (LSCB).
4. To date, the single inspection framework has assessed 11 LAs under the framework since 20 November 2013 (Derbyshire, Hartlepool, Slough, Sheffield, Hillingdon, Bolton, East Sussex, Essex, Hounslow, Staffordshire and Coventry).

### **Current position**

#### **Inspection and Improvement Planning Group**

5. An Inspection and Improvement Planning Group (IIPG) has been established and meets monthly, bringing together key service leads and partner agencies including the police, schools, health and the LSCB. The Head of Policy, Programmes and Projects is providing programme management support to the group.
6. The work plan of the IIPG is set out in Appendix 1. Leads have been identified for key work streams including the following:

<b>Number</b>	<b>Work stream</b>	<b>Lead</b>
1	Improvement action plan	Pat Dixon
2	Gap analysis against grade descriptors	Simon Cribbens
3	Self-assessment narrative	Simon Cribbens
4	Annex A (lead), Evidence bank/SharePoint site and logistics plan	Sharon McLaughlin
5	Annex A – child-level data	Elizabeth Malton
6	Communications plan	Kaimi Ithia
7	Audit plan and timetable	Janet Bailey
8	LSCB inspection and improvement action plan	Rory McCallum
9	Overarching inspection work plan and programme management support	Nicole Vincent

### Quality assurance and service improvement

7. Due to the low numbers of cases held in the Children and Families Team, it is expected that Ofsted will track all cases held in the service.
8. Within the first four days of receiving the inspection phone call from Ofsted, we will be required to undertake an audit of 18 cases, selected by Ofsted, covering the experience and journey of the child, family, carer and the effectiveness of help and protection. This presents a significant challenge to the service, as a full deep dive audit can take up to one working day to complete. In order to plan ahead for this, additional capacity has been brought into the service to support the department with:
  - a thorough baseline audit and scoring of all open cases to the Children and Families Team
  - observations of practice
  - reviewing the effectiveness of the Early Intervention offer through case-based examples and outcomes
  - reviewing the quality assurance framework and working with the Service Manager for Children and Families to recommend an ongoing quality assurance framework and action plan, including how best to evidence what has changed following audit
  - coaching and guidance to the managers and service managers
  - contributing to the IIPG and to logistics, communications, self-assessment and Annex A
  - providing advice and guidance from recent experience in another LA that has gone through the inspection
  - devising a forward plan to review the baseline audits.
9. A service improvement action plan is in place and is the key tool to drive forward service improvements, supporting the service to move from 'good' to 'outstanding' under the Ofsted grade descriptors.
10. The action plan is a live document, updated on a monthly basis. It comprises key recommendations and findings from the 'Strengths-based Learning Review' undertaken in January 2013 and recent case audits. The Children and Families Team has added to the action plan directly, following a service improvement workshop held on 12 May 2014. The plan is reviewed within IIPG meetings and the Children and Family Team meetings.
11. A thorough gaps analysis is being undertaken against the Ofsted grade descriptors. We are critically evaluating everything we do and asking the questions "What difference has this made?" and "What is our evidence?".

### 'Annex A' evidence

12. Under the inspection framework we will be asked to prepare and provide a large range of information to inspectors within the first two weeks, classified as 'Annex

A'. Test runs for 'Annex A' child-level data are performed and reviewed monthly. This involves three key strands of data:

- details of planned multi-agency meetings
  - child-level data for the case sample and case tracking
  - performance information required to support the inspection.
13. The data requirements span social care and education, as well as early help assessments, common assessment frameworks (CAFs) and targeted intervention over a six-month period, and cover children in and out of borough.
14. The Commissioning and Performance Officer has undertaken a full risk assessment on the new data requirements in order to identify key problems and solutions to any data supply issues, and work is in progress to address the risks identified. A wider risk assessment for the full inspection planning is in place and updated monthly.
15. An evidence bank has been established with key documents that will be required for the inspection. Over the next month, work will be focused on reviewing the evidence bank and all policies and procedures, to identify gaps and begin to address these.

#### Review of Local Safeguarding Children Boards

16. The Local Safeguarding Children Boards (Review) Regulations 2013 were published on the same day as Ofsted published the new single inspection framework. These regulations enable the Chief Inspector to conduct a review of the performance by an LSCB, opening the way for Ofsted to review and report on the effectiveness of the LSCB at the same time as reporting on the inspection of the local authority.
17. The LSCB review will usually take place in parallel with the single inspection of the local authority. However, as we have a joint board with London Borough of Hackney, there is a chance that the board will be inspected as part of the inspection process.
18. The judgement of the LSCB will be derived from an assessment of its compliance with statutory responsibilities in accordance with the Children Act 2004 and the Local Safeguarding Children Boards Regulations 2006. Inspectors will evaluate: the LSCB's understanding of the strengths and weaknesses of multi-agency practice; the effectiveness of their monitoring and evaluation; and how well they have identified areas for improvement.
19. We will be required to provide a range of information as part of the LSCB review, and inspectors will interview a range of stakeholders including the LSCB chair, the LSCB business manager, the Director Children and Community Services, the Town Clerk and at least two other statutory LSCB partners. They will also, wherever possible, interview the lay members.
20. The City and Hackney LSCB Strategic Advisor is a core member of the IIPG contributing to the planning process, and separate meetings are being held with

him to review the LSCB against the Ofsted grade descriptors and to identify and address any gaps.

### Communications and logistics

21. A partnership event is being planned for 20 June 2014 to involve up to 50 key partners including members, senior managers, front-line staff, key partners from health, police, schools and the voluntary sector, commissioned providers and LSCB partners. The event will provide a detailed overview of the single inspection framework and requirements of partners. It will include a workshop session to map good news stories and to identify any partnership gaps and/or challenges.
22. A logistics plan is being drafted, to ensure that the department is ready to be up and running when Ofsted announce their inspection. A lead officer has been identified, and a team of people are in place to support the process. The logistics plan will set out the detail of key officers and lead responsibilities before, during and after the inspection and will be shared with key partners.

### **Corporate and strategic implications**

23. There are no financial, legal or strategic implications associated with this report.

### **Conclusion**

24. The inspection and improvement planning programme has progressed and is on track to support the department in its aspirations to achieve 'outstanding' services.

### **Appendices**

- Appendix 1 – Inspection and Improvement Planning Group Work Plan, May 2014

### **Background papers**

- Ofsted single inspection framework and reviews of LSCBs
- Ofsted inspection handbook

### **Nicole Vincent**

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## Appendix 1 – Inspection and Improvement Planning Group work plan, May 2014

This plan is monitored by the Programme Manager on a monthly basis and updates are reported to the IIPG Working Group, Children's Executive Board and Departmental Leadership Team (DLT).

No.	Key milestones	Lead person	Timescale
<b>1. ANNEX A</b>			
1.1	Set up forward plan of regular Annex A meetings to progress reviewing and updating of this	Sharon McLaughlin	31.05.14
1.2	Review the evidence base and agree the core documents for Annex A	Sharon McLaughlin	30.06.14
1.3	Continue monthly test runs of child-level data	Elizabeth Malton	2nd week of each month
1.4	Child-level data issues log and action plan to be updated monthly from Annex A	Elizabeth Malton	2nd week of each month
1.5	Identify back-up performance officer/manager to run child-level data report and ensure that they are trained to the level required to perform this task	Sarah Greenwood	31.05.14
1.6	Set up meeting to agree urgent changes to Framework-I system to improve performance reporting and practice issues as raised by audits	Matt Phipps	31.05.14
1.7	Review pre-CAF process, to ensure that procedures are being followed by staff	Pat Dixon and Shaista Afzal	31.05.14
1.8	Build good news stories and case studies into the evidence bank, and ensure that these are recorded at fortnightly team meetings	Shaista Afzal	Once a month
1.9	Children and Families Team to review accuracy of child-level data at team meetings monthly	Shaista Afzal	Once a month
1.10	Create a definitive list of all policies and procedures, review existing policies to ensure that they are fit for purpose and localised, and address any gaps	Simon Cribbens	30.06.14
1.11	Schedule a date for a full test run of Annex A to include all strands	Chris Pelham	Test run by 31.09.14
<b>2. SELF-ASSESSMENT AND GRADE DESCRIPTORS</b>			
2.1	Complete gaps analysis against grade descriptors	Simon Cribbens	30.06.14
2.2	Redraft self-assessment version 2 and present to DLT and Children's Executive Board	Simon Cribbens	31.07.14



3. QUALITY ASSURANCE AND CASE AUDITS			
3.1	Undertake audits of all open cases to the Children and Families Team, using an agreed audit template that can be used as part of the inspection framework.	Janet Bailey	31.07.14
3.2	Provides a 20-day update report to DLT and IIPG members on progress and thematic findings regarding casework and inspection readiness.	Janet Bailey	31.07.14
3.3	Implement the audits alongside the practitioners, providing additional support and challenge for the practitioners by using a mentoring approach to the audit process. All audits and recommendations to be signed off by the social work practitioner and Team Manager.	Janet Bailey	31.07.14
3.4	Review the cases open to each member of the team including Early Intervention and Children's Social Care. The cases that will require a completed audit will be: <ul style="list-style-type: none"> <li>• care leavers</li> <li>• looked-after children</li> <li>• children with Child Protection Plans</li> <li>• children in need</li> <li>• cases open to Early Intervention including CAFs.</li> </ul>	Janet Bailey	31.07.14
3.5	Review cases that have closed in the previous 12 months – since the last inspection – using an agreed tool that provides an opportunity to consider if any immediate action is needed or any learning has come from the case.	Janet Bailey	31.07.14
3.6	Carry out observations of practice – accompanying practitioners on home visits, to multi-agency meetings, on office visits, etc. This is to be part of the audit process and also to support the practitioners, to build up their experience of being observed.	Janet Bailey	31.07.14
3.7	Review the effectiveness of the Early Intervention/Early Help offer through case-based examples and outcomes. This review to include oversight of the recommendations of the strengths based learning review and discussions with key partners as required, including Sir John Cass, and to provide recommendations to the department.	Janet Bailey	31.07.14
3.8	Undertake a review of the quality assurance (QA) strategy.	Janet Bailey	31.07.14
3.9	Update the QA framework, to set out a clear audit programme including a plan for managing the audits during an Ofsted inspection. Plan to include how to best show evidence of what has changed following audit.	Janet Bailey	31.07.14
3.10	Coaching and guidance to be provided to the managers and service managers to use the	Janet Bailey	31.07.14

	new audit tool effectively.		
3.12	All themes and practice issues picked up from audits to be reported to the Service Manager and to be included in the department's improvement action plan.	Janet Bailey and Pat Dixon	31.07.14
<b>4. COMMUNICATIONS AND LOGISTICS</b>			
4.1	Draft version 1 of a communications plan for the full inspection programme	Kaimi Ithia	12.06.14
4.2	Draft version 1 of a logistics plan to be completed for IIPG meeting	Sharon McLaughlin	12.06.14
4.3	Organise a full partnership event to brief and prepare partners for the inspection and improvement journey	Nicole Vincent, Kaimi Ithia and Sharon McLaughlin	20.06.14
<b>5. LSCB INSPECTION PLANNING</b>			
5.1	Agree a way forward with the LSCB strategic advisor	Chris Pelham	15.05.14
5.2	Undertake a review and gaps analysis of the LSCB against the Ofsted grade descriptors and include recommendations from the SBLR	Rory McCallum	30.06.14
5.3	Draft version 1 of a self-assessment of the LSCB	Rory McCallum	31.07.14
5.4	Invite LSCB partners to the partnership briefing event	Sharon McLaughlin	20.05.14

<b>Committee:</b>	<b>Date:</b>
Safeguarding Sub Committee	30 June 2014
<b>Subject:</b> Service Improvement Action Plan	<b>Public</b>
<b>Report of:</b> Director of Community and Children's Services	<b>For Information</b>
<p style="text-align: center;"><b>Summary</b></p> <p>This report will inform Members about the progress of the Service Improvement Action Plan. It will explain how the service has been developed to incorporate the recommendations from previous inspections, audits and more recently the Strengths-based Learning Review, which was an independent review of the Children and Families Team. The outcome of this review identified that the service was 'good' with some 'outstanding' features.</p> <p>To support the development of the service, a workshop was arranged with the Children and Families Team. This workshop looked at the services currently being offered and how these could be improved to move them all towards 'outstanding'. Some of the recommendations from this work will be incorporated within the Service Improvement Action Plan. The monitoring arrangements for this plan will be through the Children's Executive Board, Inspection Planning Meetings and City Safeguarding Sub-Group.</p> <p>The key areas for development within the plan will be the review of the quality assurance framework, which will drive forward improvements in social work practice. In addition, the following are also priority areas: improving the quality of the Independent Reviewing Service, and the participation of young people in developing the service.</p> <p><b>Recommendation(s)</b></p> <p>Members are asked to note this report.</p>	

## Main Report

### **Background**

1. The Service Improvement Action Plan has evolved since it was developed following the safeguarding and looked after children Ofsted inspection in March 2012. Initially, the plan was developed to ensure that the recommendations from previous inspections were addressed. Although the majority of the actions pertain to Children's Social Care, there are other services that are closely linked to the team and therefore have been incorporated into the plan, such as the Early Intervention and Prevention Service.

2. As opposed to being focused on post-inspection recommendations, the plan now encompasses recommendations from other sources, such as case file audits, the Strengths-based Learning Review (January 2014) and the grade descriptors from the new inspection framework. All aspects of Children's Social Care were considered, which included the Children and Families Team, Leadership and Management and the Local Authorities Designated Officer role.
3. The outcome of this review was that the service provided was 'good' with some 'outstanding' features; staff found the constructive challenge of this review helpful in identifying where improvements could be made to move the service from 'good' to 'outstanding'. Recommendations from this review have now been included in the Service Improvement Action Plan.

### **Current Position**

4. A workshop was held with the Children and Families Team on 12 May 2014 to follow up on the themes and recommendations from the Strengths-based Learning Review. Within this workshop, staff were able to reflect on the recommendations, identifying solutions for moving from 'good' to 'outstanding'. The theme of the workshop followed the following six areas:
  - a) service user engagement
  - b) support from the organisation
  - c) work with partners
  - d) Early Intervention and Prevention
  - e) life story and direct work
  - f) case recording.
5. Solutions identified with regard to the recommendations from the review will be included in the Service Improvement Action Plan and this will be monitored monthly within the Children and Families Team Meeting. Social workers within the team will have the opportunity to take the lead on various aspects of the plan, which will contribute to their ownership. The plan will also be monitored through the Children's Executive Board, Inspection Planning Meetings and the City Safeguarding Sub-Group.

### **Key Areas of Development**

6. Three key areas for development have been identified as being of high priority in moving the service from 'good' to 'outstanding'. The first is a review of the quality assurance framework; this framework supports and sustains good practice. The current framework needs to be reviewed as there has been some slippage in the consistency of the quality of the case work produced. The primary challenge is achieving consistent improvements in the quality of practice and outcomes for children and this can only be achieved through effective mechanisms that demonstrate measurable improvements and outcomes for children and families.
7. The second is the effectiveness and challenge from the Independent Reviewing Service. This service has been out to tender and the provider will be Reconstruct which has previously provided this service. However,

Reconstruct has recently had a change in management. The contractual arrangements clearly set out the expectations in regard to this service. Compliance will be monitored through operational and contractual meetings; if any difficulties occur, then these will be arbitrated by the Assistant Director of People.

8. The third key area concerns service user participation. Currently the Children and Families Team is working with City Gateway in the engagement of looked after children and care leavers, ascertaining their views about how they would like to participate and have a voice in the City. This project aims to create stronger connections to the City for our young people so that they can give feedback and contribute to the shaping of future services. Some activities have already taken place and in late June there will be an online consultation with some of the young people.
9. Feedback will also be obtained from Children and Families following social work intervention to ascertain the impact and outcome of social work involvement. The information obtained from this feedback will inform the effectiveness of the interventions and identify areas where further development is required to improve services.

## **Conclusion**

10. In conclusion, the Service Improvement Action Plan clearly sets out the requirements needed to achieve an 'outstanding' service for children and families in the City. The plan will be updated on a bi-monthly basis and will be monitored and reviewed through the Children's Executive Board, Inspection Planning Meetings and the City and Hackney Safeguarding Sub-Group in the City.
11. An essential element of this plan's success is its reliance on the commitment and hard work of the Children and Families Team. To achieve this it is essential that the team has ownership of the plan and this can be assured through its continued involvement.
12. This report has identified three key areas requiring further development if the City of London is to achieve consistent 'outstanding' outcomes for children and young people. Two of the areas requiring development are being provided by commissioned services and this report highlights the expectations placed on these services through the contractual arrangements.

## **Appendices:**

Service Improvement Action Plan  
Strengths-based Learning Review

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# Service Improvement Action Plan

Children's Social Care Team, Department of Community and Children's Service

April 2014 to March 2015

The Service Improvement Action Plan contains recommendations from previous inspections namely the Safeguarding and Looked After Children Inspection in 2012 and the Fostering Inspection in 2013, plus themes that have been identified through case file audits completed on cases open to the Children and Families Team. More recently there has been a Strengths Based Learning Review in January 2014 and the recommendations from this review have been included within the Service Improvement Action Plan. Overall the judgement made on Children's Services was good, with some outstanding features, however the City of London is ambitious for its children and young people and therefore the Service Improvement Action Plan is aimed at moving us towards being an outstanding service provider and commissioner, now and consistently in the future.

On 12 May 2014 a workshop was held with the Children and Families Service to follow up on the key themes and recommendations from the 'Strengths-Based Learning Review'. The purpose of the session was for the team to meaningfully reflect upon the recommendations from the review, identify solutions for moving from 'good' services to 'outstanding' services and to feed directly into the Service Improvement Action Plan 2014.

There are 100 actions on the Service Improvement Plan, 38 of the actions are currently green and 62 are amber, the amber actions are currently on track to be completed within timescales, there are currently no red actions.

# Service Improvement Action Plan

Children's Social Care Team, Department of Community and Children's Service

April 2014 to March 2015

## Priority One: The experiences and progress of children who need help and protection

Priorities	Action	Who will lead this	Date due	RAG Status
<b>1.0</b> The Common Assessment Framework is used across departments and with external partners.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Needs Analysis of CAF Training.</li> </ul>	EIP Co-ordinator	Complete	Green
	<ul style="list-style-type: none"> <li>Training Schedule for City of London Staff.</li> </ul>	EIP Co-ordinator	June 2014	Amber
	<ul style="list-style-type: none"> <li>New staff to have mandatory CAF Training – to be agreed at CEB.</li> </ul>	EIP Sub- Group Chair	May 2014	Amber
	<ul style="list-style-type: none"> <li>Partnership day to evaluate progress and promote the use of the CAF.</li> </ul>	EIP Co-ordinator	July 2014	Amber
	<ul style="list-style-type: none"> <li>Impact analysis of outcomes on EIP cases to be shared with partners at development day.</li> </ul>	EIP Co-ordinator	June 2014	Amber
	<ul style="list-style-type: none"> <li>Work Plan developed for the delivery of EIP for 2014 /2015.</li> </ul>	EIP Co-ordinator	June 2014	Amber
	<ul style="list-style-type: none"> <li>Practitioners Forum to encourage joint working and support practice issues, reporting into the EIP sub Group.</li> </ul>	EIP Co-ordinator	June 2014	Amber



<b>1.1</b> Children and young People are engaged and contribute to the Child Protection Process.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Clear contractual arrangements are in place with independent reviewing service on expectations in relation to young people's participation. Contract Meeting is due to take place on 29 May 14.</li> </ul>	AD People	May 2014	Amber
	<ul style="list-style-type: none"> <li>IRO service to produce child/young person's participation plan on how they will be engaging young people in the child protection process.</li> </ul>	IRO Service	June 2014	Amber
<b>1.2</b> Child in Need and Child Protection plans are timely and clear about desired outcomes and how these results will be achieved.  <b>SBLR – Feb 2014</b>  <b>IMPROVEMENT PLAN 2013</b>	<ul style="list-style-type: none"> <li>IRO service to use '<i>Think Family</i>' approach i.e. signs of safety in their engagement with children and families.</li> </ul>	IRO Service	July 2014	Amber
	<ul style="list-style-type: none"> <li>IRO Service to be fully compliant with the IRO Handbook. This will be monitored through quality assurance framework and contractual performance measures.</li> </ul>	IRO Service	May 2014	Amber
	<ul style="list-style-type: none"> <li>All Child in Need Plans will be reviewed and signed off by a manager following CIN meetings to confirm clear outcomes.</li> </ul>	TM	May 2014	Green

## Priority Two: The experiences and progress of children looked after and achieving permanence

Priorities	Action	Who will lead this	Date due	RAG Status
<b>2.00</b> That staff in the Children and Families Team are aware and understand what placements are available and how they are sourced.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Team Manger to produce clear protocols and guidance on sourcing placements for children and young people.</li> </ul>	TM	July 2014	Amber

<p><b>2.1</b> That Looked After Children and Care Leavers are supported in achieving their full potential.</p> <p><b>SBLR – Feb 2014</b> <b>IMPROVEMENT PLAN 2013</b></p>	<ul style="list-style-type: none"> <li>Virtual Head to review and produce a report with recommendations to improve educational support offer to LAC and Care Leavers.</li> </ul>	VH	June 2014	Green
	<ul style="list-style-type: none"> <li>Adult Learning will provide advice to care leavers transitioning into higher education evidenced in pathway plans.</li> </ul>	V.H	June 2014	Amber
<p><b>2.2</b> Personal Education Plans reflect the Child young person progress and predicted attainment and Children are supported in attaining their full potential..</p> <p><b>SBLR – Feb 2014</b> <b>IMPROVEMENT PLAN 2013</b></p>	<ul style="list-style-type: none"> <li>Virtual Head to support social workers in knowing what information is required on personal education plans.</li> </ul>	VH	May 2014	Green
	<ul style="list-style-type: none"> <li>Social workers to receive additional training in order to increase their confidence in challenging targets on personal education plans.</li> </ul>	V.H	July 2014	Green
<p><b>2.3</b> All children who are looked After will have Strengths and Difficulties Questionnaire completed. SDQ's.</p> <p><b>SBLR – Feb 2014</b></p>	<ul style="list-style-type: none"> <li>Systems are in place to ensure that all Looked After Children have SDQ's completed and evidenced by National Indicators.</li> </ul>	TM	July 2014	Green
<p><b>2.4.</b> That Children and Young People are placed where their individual needs are best met.</p> <p><b>SBLR – Feb 2014</b></p>	<ul style="list-style-type: none"> <li>Develop a Placement Strategy to ensure that workers have an explicit understanding of the resources available.</li> </ul>	CSC Service Manager	July 2014	Amber

### Priority Three: Adoption Services

Priorities	Action	Who will lead this	Date due	RAG Status
3.0 There are clear protocols and responsibilities between City and Hackney in regard to the Joint adoption panel	<ul style="list-style-type: none"> <li>AD People to sign off agreed joint protocols in regard to the adoption panel and responsibility of Agency Decision Maker in the City of London – a meeting to ratify this is scheduled for June 2014.</li> </ul>	AD People	June 2014	Green
	<ul style="list-style-type: none"> <li>Adoption Consultant to train staff on operational changes to the Adoption Panel. And also raise awareness in relation to the requirements for presenting cases to the panel.</li> </ul>	Adoption Consultant	March 2014	Green
3.1 That Adoption Service offered by the City is outstanding.	<ul style="list-style-type: none"> <li>Self-assessment to be completed against grade descriptors.</li> </ul>	Adoption Consultant	June 2014	Amber

### Priority Four: The experiences and progress of care leavers

Priorities	Action	Who will lead this	Date due	RAG Status
4.0 That every care leave has a Pathway Plans completed to a good standard showing the young person progress towards independence. <b>SBLR - Feb 2014</b> <b>IMPROVEMENT PLAN 2013</b>	<ul style="list-style-type: none"> <li>Pathways plans to be completed to a high standard and within timescales. This will be monitored in monthly supervision meetings.</li> </ul>	SSW	February 2014	Green
	<ul style="list-style-type: none"> <li>Develop protocols to ensure that care leavers have relevant support to make the right choices/decisions in relation to their education.</li> </ul>	SSW	June 2014	Amber

<b>4.1</b> Care Leavers feel connected to the City and feel their achievements are celebrated and supported.  <b>SBLR – Feb 2014</b> <b>IMPROVEMENT PLAN 2013</b>	<ul style="list-style-type: none"> <li>Consultation event to take place with care leaver to encourage their participation. Joint event with care leavers, City Gateway and the Children and Families Team is planned for May 2014.</li> </ul>	SW- ER	May 2014	Green
	<ul style="list-style-type: none"> <li>Residential event to be arranged for care leavers. Arrangements have been made for older LAC and Care leavers to attend the event.</li> </ul>	SW -ER	July 2014	Green
	<ul style="list-style-type: none"> <li>Care leavers to be consulted on how they want to be involved in shaping future services.</li> </ul>	SW-ER	July 2014	Amber

### Priority Five: The Leadership, management and governance

Priorities	Action	Who will lead this	Date due	RAG Status
<b>5.0</b> Have a continuous self-challenging focus which expects the best possible practice.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Quality assurance framework to be updated to encompasses recommendations from Strength Based Learning Review.</li> </ul>	CSC SM	Aug 2014	Amber
	<ul style="list-style-type: none"> <li>Multi-Agency tool developed by CHSCB to be used on City specific cases. Arrangements have been made for audits to be completed on City cases using a multi-agency tool.</li> </ul>	AD People	July 2014	Green
<b>5.1</b> To have increased focus on education for Looked After Children to ensure that they achieve their full potential.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Appointment of a virtual Head Teacher.</li> </ul>	AD People	March 2014	Green
	<ul style="list-style-type: none"> <li>Virtual Head to review and report on support currently being offered to Looked After Children with recommendation on what improvements are required.</li> </ul>	Virtual Head, SM	June 2014	Amber

<b>5.2</b> Raise the profile of Safeguarding across the City of London Corporation and with partner agencies in Education and Early Years Settings.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>• Increase and sustain membership of Schools and Nurseries on the City Safeguarding Sub Group.</li> </ul>	AD People & SM	June 2014	Green
	<ul style="list-style-type: none"> <li>• City specific training to be delivered on the LADO role and organisational responsibilities.</li> </ul>	SM- LADO	Aug 2014	Amber
	<ul style="list-style-type: none"> <li>• Through City of London Safeguarding Awareness campaign for staff and residents and the recruitment of safeguarding champions across the organisation.</li> </ul>	SM'S CSC & ASC	July 2014	Amber
<b>5.3</b> Departments and agencies are aware of the importance of the Corporate Parenting Role.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>• Utilise appropriate publications across the corporation to raise awareness of the Corporate Parenting role.</li> </ul>	Communication Manager	July 2014	Amber
	<ul style="list-style-type: none"> <li>• Meetings involving Looked After Children include information and reporting data for Corporate Parenting.</li> </ul>	DLT	July 2014	Amber
	<ul style="list-style-type: none"> <li>• Corporate Parenting to be included as an agenda item on an established multi-agency children's forum such as CEB or Safeguarding Sub group.</li> </ul>	DLT	July 2014	Amber
<b>5.4</b> There is clarity around strategic lead for EIP, with defined roles and responsibilities between EIP Strategic lead and EIP Sub group.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>• Terms of Reference for EIP sub group are reviewed and roles and responsibilities are clearly defined. A meeting is booked for June 2014.</li> </ul>	AD People	July 2014	Green
	<ul style="list-style-type: none"> <li>• Information about roles and responsibilities for EIP are disseminated across services and to external partners.</li> </ul>	Communication Manager	July 2014	Amber

<p><b>5.5</b> Increase the use of escalation within the department to address blocks in service provision at an earlier stage.</p> <p><b>SBLR – Feb 2014</b></p>	<ul style="list-style-type: none"> <li>There are clear lines of accountability and staff are aware of how to escalate blocks in services.</li> </ul>	DLT	July 2014	Amber
	<ul style="list-style-type: none"> <li>Flow chart showing the escalation process is clearly defined through the management process, from Team Manager through to DLT.</li> </ul>	Communication Manager	July 2014	Amber
<p><b>5.6</b> The City of London Children and Families Team has pride in its achievements and build's on these achievements towards excellence.</p> <p><b>SBLR – Feb 2014</b></p>	<ul style="list-style-type: none"> <li>Through the workforce strategy and knowledge transfer partnership review potential for staff to receive remuneration for additional work and projects.</li> </ul>	A.D People	August 2014	Amber
	<ul style="list-style-type: none"> <li>Staff have the opportunity to be involved in research based projects with knowledge transfer partnership.</li> </ul>	AD People	July 2014	Green
	<ul style="list-style-type: none"> <li>The Children and Families Team achievements are recognised and acknowledged by senior management. DLT met with team to celebrate outcome post SBLR.</li> </ul>	DLT	July 2014	Green
<p><b>5.7</b> The electronic recording system, Frameworki will have the capability to store all case file information.</p> <p><b>SBLR – Feb 2014</b></p>	<ul style="list-style-type: none"> <li>Children and Families Team to have one system of recording case information, which will be Frameworki.</li> </ul>	TM	August 2014	Amber
<p><b>5.8</b> Formal supervision takes place on a monthly basis and both formal and informal supervision is recorded.</p> <p><b>SBLR – Feb 2014</b></p>	<ul style="list-style-type: none"> <li>Revision of Supervision Policy to with clear guidance on regularity of supervision and structure.</li> </ul>	SSW	July 2014	Amber
<p><b>5.9</b> There consistency in the documentation on case files.</p> <p><b>SBLR – Feb 2014</b></p>	<ul style="list-style-type: none"> <li>Clear protocol's to be developed around documentation to be used in the Children and Families Team.</li> </ul>	TM	July 2014	Amber

<b>5.10</b> There is a procedure in place for Children and Families Team to know where to source a placement.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Clear written procedures for sourcing placements to be produced and be accessible to staff.</li> </ul>	TM	July 2014	Green
	<ul style="list-style-type: none"> <li>Staff to be made aware of the considerations needed to source an appropriate placement.</li> </ul>	TM	July 2014	Green
<b>5.11</b> Staff have their views listened to and feel they have a voice in shaping services.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Analysis of feedback from Children and Families team is shared with the senior management team.</li> </ul>	SM	February 2014	Green
	<ul style="list-style-type: none"> <li>Actions identified from feedback are agreed and acted on by senior managers. – Social workers are now able to remote work.</li> </ul>	SM	April 2014	Green
<b>5.12</b> Staff in the Children and Families Team are involved in contributing to the improvement plan.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Overarching improvement plan will be shared with the Children and Families Team. May 2014</li> </ul>	SM	April 2014	Green
	<ul style="list-style-type: none"> <li>Workshops will be facilitated within the Children and Families Team to identify how key operational priorities will be progressed.</li> </ul>	SM.	May 2014	Green

## Priority Six: Effectiveness of front-line practice, decision-making and case recording

Priorities	Action	Who will lead this	Date due	RAG Status
<b>6.0</b> That Social Workers focus on the outcomes achieved through social work intervention.	<ul style="list-style-type: none"> <li>Through identifying desired outcomes for children and families following an assessment/review.</li> </ul>	SSW	July 2014	Amber
	<ul style="list-style-type: none"> <li>Through individual face to face feedback on case closures.</li> </ul>	TM	July 2014	Amber

<b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Utilise reflective practice sessions to discuss outcomes based evaluation of children and families and how this is being achieved.</li> </ul>	SSW	July 2014	Green
<b>6.1</b> That all cases have a recorded rationale for decision, which is clear and specific about requirements.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>All decisions need to demonstrate a rationale for any judgement made, and what action, if any is required.</li> </ul>	TM	July 2014	Green
	<ul style="list-style-type: none"> <li>All decision will be on Frameworki as soon as practicable.</li> </ul>	TM	July 2014	Green
<b>6.2</b> Case recordings evidence all the direct work undertaken by social worker with Children and Families.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Case recordings reflect all social work intervention and direct work with children. Compliance reviewed through the audit cycle.</li> </ul>	SSW	July 2014	Amber
	<ul style="list-style-type: none"> <li>There is management oversight on the quality and standard of case recording by line managers and senior managers.</li> </ul>	SSW	July 2014	Green
	<ul style="list-style-type: none"> <li>Learning and development is covered within supervision and reflective practice sessions as to best practice examples.</li> </ul>	SSW	July 2014	Green
<b>6.3</b> Social workers undertake direct work with children and families using a range of methodologies.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Social workers develop skills to deliver a range of interventions i.e. behavioural methodologies and life story work.</li> </ul>	SSW	August 2014	Amber
	<ul style="list-style-type: none"> <li>Evaluate impact and outcomes of intervention through supervision and reflective practice sessions.</li> </ul>	SSW	August 2014	Amber



<b>6.4</b> Case Recordings will have the following; <ul style="list-style-type: none"> <li>• Full Chronologies</li> <li>• Views of service user on impact of intervention.</li> <li>• Stand-alone risk assessments</li> <li>• Analytical rather than descriptive case recordings.</li> <li>• Evidence of direct work with children</li> <li>• Reflect user participation in case recordings.</li> </ul>	<ul style="list-style-type: none"> <li>• All case files will have a full chronology that reflects significant events and up to date.</li> </ul>	SSW	August 2014	Amber
	<ul style="list-style-type: none"> <li>• All children and young people's cases will have a stand-alone risk assessment, which will be reviewed and agreed by line manager.</li> </ul>	SSW	July 2014	Green
	<ul style="list-style-type: none"> <li>• Quality of recordings will be reviewed by line managers and senior managers through the audit process.</li> </ul>	SSW	July 2014	Green
	<ul style="list-style-type: none"> <li>• Case work reflects direct work with children and young people.</li> </ul>	SSW	July 2014	Amber
	<ul style="list-style-type: none"> <li>• Evidence that service users have been consulted about assessments and plans.</li> </ul>	SSW	July 2014	Amber
<b>SBLR – Feb 2014</b>				
<b>6.5</b> Supervision reflects the level of training that social workers have completed and the impact that this has had on practice.	<ul style="list-style-type: none"> <li>• All training completed by staff is correlated to practice and is recorded in one to one supervision record.</li> </ul>	SSW	August 2014	Amber
	<ul style="list-style-type: none"> <li>• Evidence of reflective learning sessions in supervision.</li> </ul>	SSW	August 2014	Amber
<b>SBLR – Feb 2014</b>				
<b>6.6</b> Supervision challenges practice and behaviours and evidences reflection on case work.	<ul style="list-style-type: none"> <li>• Supervision structure will be reviewed to enable appropriate constructive challenge that is consistent.</li> </ul>	SSW	July 2014	Green

<b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Build and develop reflective supervision which is consistent across the workforce.</li> </ul>	SSW	July 2014	Amber
	<ul style="list-style-type: none"> <li>Review compliance and consistency of supervision through the audit process.</li> </ul>	TM	July 2014	Amber
<b>6.7</b> Staff have opportunities to shadow and co- work with colleagues to gain practice experience.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Staff have opportunities to have practice experience in other local authorities.</li> </ul>	TM	August 2014	Amber
	<ul style="list-style-type: none"> <li>Staff to have opportunities to co-work cases with colleagues from other boroughs. Providing learning opportunities for both practitioners.</li> </ul>	TM	August 2014	Amber
<b>6.8</b> Assessments, Reports and recording show evidence of clear critical analysis and decision making which is owned by the practitioner.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Through support for social workers in supervision and reflective practice sessions.</li> </ul>	SSW	July 2014	Amber
	<ul style="list-style-type: none"> <li>Feedback from line managers on assessments, reports and cases recordings.</li> </ul>	SSW	July 2014	Amber
	<ul style="list-style-type: none"> <li>Case file audits completed with social workers as part of the quality assurance Framework.</li> </ul>	SM	July 2014	Green
<b>6.9</b> There clear links and defined roles and responsibilities between Social Care and Commissioning Service  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>There are clearer lines of accountability between Commissioning and Children and Families Team. A review is in process.</li> </ul>	DLT	June 2014	Green

## Priority Seven: Effectiveness of service user engagement to inform service improvement

Priorities	How we will do this?	Who will lead this	Date due	RAG Status
<b>7.0</b> There is evidence that feedback from parents, carers and young people is influencing improvements in service delivery.  <b>SBLR – Feb 2014</b> <b>IMPROVEMENT PLAN 2013</b>	<ul style="list-style-type: none"> <li>Reviewing the feedback that is currently being received through various sources and ascertain whether there are commonalities that may assist in improving services.</li> </ul>	TM	August 2014	Amber
	<ul style="list-style-type: none"> <li>Feedback to be obtained from children and families on case closures.</li> </ul>	TM	July 2014	Amber
	<ul style="list-style-type: none"> <li>Develop opportunities for children and young people to engage with the City so their views are heard.</li> </ul>	SW – ER City Gateway	August 2014	Amber
<b>7.1</b> That children and young people who are Looked After by the City are able to influence and shape the services they receive.  <b>SBLR – Feb 2014</b> <b>IMPROVEMENT PLAN 2013</b>	<ul style="list-style-type: none"> <li>The City of London has Children in Care Council (CICC) which meets the needs of the City i.e. explores social networking and technology to unite population.</li> </ul>	SW –ER City Gateway	August 2014	Amber
	<ul style="list-style-type: none"> <li>That children and young people who are looked after or care leavers, who are placed across London feel part of and contribute to services in the City.</li> </ul>	SW – ER City Gateway.	August 2014	Amber
	<ul style="list-style-type: none"> <li>We can evidence that feedback from Looked After Children has contributed to changes in service delivery.</li> </ul>	SW –ER City Gateway	August 2014	Amber

## Priority Eight: The effectiveness of the Local Safeguarding Children Board and Sub-committee

Our Objectives/Outcomes	How we will do this?	Who will lead this	Date due	RAG Status
8.0 City of London needs and priorities are clearly discernable within the broader joint business plan of the City and Hackney Safeguarding Board.  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Safeguarding priorities to be reviewed for the City and how these priorities fit within the broader joint business plan.</li> </ul>	AD People	July 2014	Amber
	<ul style="list-style-type: none"> <li>Priorities identified from previous reviews, inspections and quality assurance data will form the basis of the intelligence for safeguarding priorities.</li> </ul>	AD People LADO	July 2014	Green
	<ul style="list-style-type: none"> <li>Through consultation with members of the City Safeguarding Sub Group and the broader partnership.</li> </ul>	AD People	July 2014	Green
	<ul style="list-style-type: none"> <li>Revisiting the vision and principles of the joint business plan to ensure that they are representative of the City as well as LB of Hackney.</li> </ul>	DCCS & ad People	July 2014	Amber
8.1 Feedback from service users and front line staff contribute to the City Safeguarding Sub Group agenda  <b>SBLR – Feb 2014</b>	<ul style="list-style-type: none"> <li>Explore (with members of the safeguarding sub group) how the views of service users can be obtained to inform the sub-group.</li> </ul>	AD People	July 2014	Amber
	<ul style="list-style-type: none"> <li>Lay person on the Safeguarding Sub Group.</li> </ul>	AD People	July 2014	Amber
	<ul style="list-style-type: none"> <li>Performance and quality assurance data to be provided to the Safeguarding Sub-Group.</li> </ul>	AD People	July 2014	Green

<p>8.2 Safeguarding Sub Group Member feel confident under scrutiny from Ofsted inspectors.</p> <p><b>SBLR – Feb 2014</b></p>	<ul style="list-style-type: none"> <li>Ensuring Members of the sub group are aware and understand the ToR of the group.</li> </ul>	Ad People	July 2014	Green
	<ul style="list-style-type: none"> <li>Sub-group members understand their role and responsibility within the wider safeguarding agenda in the City.</li> </ul>	AD People	July 2014	Amber
	<ul style="list-style-type: none"> <li>Sub-group members are briefed on what to expect in an Ofsted inspection and receive inspection feedback from inspection readiness group.</li> </ul>	AD People	July 2014	Amber
<p>8.3 City staff and partners are aware of what to do should the suspect child sexual exploitation.</p> <p><b>SBLR – Feb 2014</b></p>	<ul style="list-style-type: none"> <li>City of London staff and partners have access to and attend training on Child Sexual Exploitation (CSE). Training has been provided by City of London Police and is available from CHSCB.</li> </ul>	LADO	July 2014	Green
	<ul style="list-style-type: none"> <li>Consideration to be given on how the protocols on CSE can be disseminated across the partnership.</li> </ul>	AD People	July 2014	Amber
<p>8.4 Staff and partners know and understand the role of the LADO in the City.</p> <p><b>SBLR – Feb 2014</b></p>	<ul style="list-style-type: none"> <li>Communication to staff and partners about the role of the Local Authority Designated Officer (LADO) through existing mediums being used by the City; i.e. appropriate publications, intranet.</li> </ul>	LADO	July 2014	Amber
	<ul style="list-style-type: none"> <li>Through individual communication with agencies and commissioned services through the auditing process.</li> </ul>	LADO	July 2014	Amber
	<ul style="list-style-type: none"> <li>Safeguarding Awareness campaign with City of London staff and residents of the City.</li> </ul>	LADO	June 2014	Amber

## Abbreviations

SBLR- Strengths Based Learning Review  
EIP – Early Intervention and Prevention  
CAF- Common Assessment Framework  
CEB- Children’s Executive Board  
IRO – Independent Review Officer  
LAC- Looked After Children  
SDQ- Strengths and Difficulties Questionnaire  
TM- Team Manager, Children’s Social Care  
VH – Virtual Head  
CSC- Children’s Social Care  
SSW- Senior Social Worker  
SW – Social Worker, followed by initials of Social Worker  
SM-Service Manager  
ASC- Adult Social Care  
LADO- Local Authorities Designated Officer  
DLT- Departmental Leadership Team



## **STRENGTHS-BASED LEARNING REVIEW OF CHILDREN'S SOCIAL CARE**

**CITY OF LONDON**

Review dates: 21 – 24 January 2014

Pam Rowe and Katie Greaves

Internal Officers: Chris Pelham, Pat Dixon, Shaista Afzal

## 1 Rationale for the Learning Review

In order to obtain an objective view of progress made since the last Ofsted Inspection of Safeguarding and Looked After services in April 2012, Ade Adetosoye, Director of People Services, commissioned a Strengths-based Learning Review (SLR) to be conducted in collaboration with two operational managers and two external experts.

The SLR approach to evaluating the impact of services is in line with the new Working Together to Safeguard Children guidelines (2013), which stipulates:

*“There should be a culture of continuous learning and improvement across the organisations that work together to safeguard and promote the welfare of children, identifying opportunities to draw on what works and promote good practice.”*

The Learning Review was intended to assist in providing an independent analysis of strengths and areas for continued attention. Although informed by the revised evaluation and grade descriptors published by Ofsted in December 2013, the review did not include one-to-one meetings with children and young people, carers and parents. There was no scrutiny of Out of Hours arrangements, of the Local Safeguarding Board (LSCB) in full, or commissioning.

It is hoped that the methodology will be of value when completing self-assessments.

To the credit of the team reviewed, they responded in a willing and open manner.

## 2 Methodology

An underpinning principle of the SLR was partnership, and bringing together external expertise with local operational knowledge. In line with Ofsted’s latest guidance, the main focus of the SLR was the child’s journey and experiences through the Social Care system with partners’ contributions also being reviewed.

The process included: pre-site visit reading, data analysis and reading of information submitted in line with Ofsted’s current requirements. There was scrutiny of 17 case files, review of supervision records, discussions with Social Workers linked to case files, and a range of interviews with staff from different agencies, group discussions, meetings, visits and observations.

Details of those involved:

- The Director, Assistant Director, Service Manager Children’s Social Care, Service Manager Early Years and Education, Team Manager Children’s Social Care, Team Manager Adult Social Care, Independent Reviewing Officers.



Others interviewed were:

- Early Intervention workers, representatives from Sir John Cass Primary School, representatives from LSCB, health representatives, police representatives, education representatives. Social Workers and Team Managers responsible for the tracked cases were also interviewed.

Observations:

- A meeting with a young person who had Care Leaver status
- A Child in Need meeting
- A Looked After Child review
- A visit to a family

### **3 The Review Outcomes: Safeguarding Services**

#### **3.1 Overall Effectiveness**

Early intervention services are relatively new so are not yet embedded in the overall service context. The new lead worker, in post since October 2013, knows the area well and has established good relationships with partners. Action has been taken to facilitate all agencies being aware of the early help offer, how it is accessed and the step-up/step-down process.

There are good relationships between social care services and the Sir John Cass Primary School and Children's Centre. There was evidence seen of the Common Assessment Framework (CAF) being used although considered an onerous tool by some agency representatives. There was evidence of multi-agency training (with good analysis) about the use of the CAF and the early help offer.

All referrals were dealt with immediately and there is no delay evident in respect of allocation. Management decision-making was clear, regular and meaningful on case recordings. The Team Manager responsible for the service was readily available for consultation and gave good clear directions.

The duty service was provided on a rota basis by all Social Workers within the team, although because of the low number of referrals at the time of the review, it was not possible to see this work in action. However, evidence was seen of recent referrals into the service, their allocation and subsequent services offered.

The Children's Social Care Team is a small team of committed staff who appear to work well together. Their caseloads were relatively small, all having under 12 cases, providing the capacity for in-depth pieces of work.

All incoming work is allocated immediately by the Team Manager, who has the overview of staff caseloads. All s.47 enquiries and investigations were responded to promptly by an experienced member of the team and where appropriate, evidence of joint working with the local police was seen. Social Workers within the team had been trained in ABE interviews and used the training and skills gained where possible.

The two meetings attended by reviewers provided evidence of good partnership working between social care, police, housing and health services. Statutory visits to all of the children tracked were carried out in a timely manner. Social Workers spent time on their own with children; visiting their homes, having a good understanding of what was happening and recording their work well.

### **Workforce**

Staff interviewed were positive about working for the City of London and viewed it as a good employer. Staff reported good access to relevant training as seen within the supervision files and training evaluation forms.

A comment made to reviewers about training was that in order to cement the learning, practice opportunities needed to be regularly available. Ideas about cross-borough shadowing have not yet been taken forward. It is recommended that these are pursued as there are many authorities that would be pleased to assist.

Staff reported a supportive working culture that has progressed over the last two years. The staff team are settled and appear to function cohesively. There was a high degree of trust and respect for the Team Manager and Service Manager. The senior management team were keen to hear staff views and had set up monthly surgeries where staff attend in order to have their say. A staff evaluation about working in the City was also undertaken. The actions taken as a result were not shared with the reviewers and will be important to outline to staff and to Ofsted.

All managers had taken up training opportunities. The Service Manager and the Team Manager are both undertaking postgraduate training.

### **City, Hackney Safeguarding Children's Board (CHSCB) *based on only one interview with the chairperson***

The CHSCB chairperson was very positive about relationships with senior managers in the City of London, commenting on how the leadership style of the Director adds value. He outlined the strengths including the ability to Peer Review, with the City of London being scrutinised the same as Hackney. He planned to spend one day per month understanding the particular issues for the City.

The chair stated the intention to improve the Board's focus on the impact of safeguarding services. Service user and front-line staff feedback should also be a priority. In relation to the priorities of the LSCB, the chair acknowledged that the current joint Business Plan needed further work to draw the key issues for attention. Work was underway to revise the vision and principles.

## **Local LSCB**

The local LSCB meeting, held quarterly, had good representation from partners in schools (private and public), Health Police and other agencies. The group had been working to address a communication strategy.

There had been work to get in place Child Sexual Exploitation Procedures and some discussion about embedding the role of the LADO. It is recommended that further work is undertaken with this group before the Ofsted inspection as it was not possible to get full responses, perhaps because the meeting with the reviewer was only for an hour. The chair of the wider LSCB may also want to make an explicit link with this local group.

### **3.2 The experience and progress of children who need help and protection**

#### **Thresholds and the Interface with Early Help**

From the observations undertaken and scrutiny of cases, it appears that children and young people who are, or who are likely to be at risk of harm, were promptly and appropriately identified. The role of universal tier 1 and 2 services in identifying safeguarding appeared to be well-understood. Thresholds were good, consistent and appropriate but different to neighbouring boroughs which were responding to higher levels of need and demand. An example was the CAMHS service commissioned from a neighbouring local authority, which appeared to want to end their involvement with a child without pursuing the concerns to the depth that was required.

Early help staff had a clear understanding of their roles and responsibilities, with good communication being evident between them. There is still work to do to secure the use of the CAF as a positive tool for responding to need at the Children's Centre, although it was clear from observation and interviews that the Children's Centre is viewed very positively in the community. There was clear evidence of the 'Team around the Family' model being used within the early help arena, validated by feedback from other partner agencies.

The operational management of the Early Help Co-ordinator rests with the Team Manager for the social care team. It appears that the strategic lead was shared between the Social Care Service Manager and the Service Manager for Education and Early Years, the rationale for which was unclear with some evidence of confusion for operational staff. Attention is required to secure clarity and understanding for all.

#### **3.3 Children in Need (CIN)**

Four cases were fully scrutinised including an observation of a Child in Need meeting. There was evidence that work with Children in Need was given priority by Social Workers with all cases having up-to-date plans with appropriate other agencies involved. The plans were detailed, outlining roles and responsibilities. All plans should have included timescales and did not.

It was clear from the recording and through discussions, that reviews of CIN plans were held regularly. However, records revealed a lack of focus in respect of pathways out of the social care service with work possibly being longer than necessary.

The records show that children and families were well engaged. Social Workers could articulate the difference they were making during discussions but not as much in recordings. It was less clear that service users' views had been sought about the impact of services. It would be of value to get feedback differentiating between children, young people, parents and carers, showing evidence of service development as a result.

### **3.4 Children subject to a Child Protection Plan**

At the time of the review, two children were subject to a Child Protection Plan with the chairing service being delivered by an independently commissioned organisation whose child protection chairing function was not scrutinised during this review. The Child Protection Plans accurately reflected the concerns and showed evidence of good partnership working to reduce risk. The plans were lengthy but included expected outcomes for the children. There was evidence of good core group meetings being held regularly and being attended by parents and partner agencies.

On one of the cases tracked, a young person had attended a part of the initial conference and the first core group. However, a decision had been made for her not to attend subsequent core group meetings, the rationale for which was not clearly recorded. In discussion with the reviewers, the allocated Social Worker was able to give the reason for the decision. It is recommended that such reasons are outlined on the case records. Such decisions should also be reviewed in the event that the situation changes.

It was clear from the case recording and through discussions with Social Workers that the children are at the centre of their work. Children and young people appear to be well known to Social Workers who talked about them at length with warmth and a clear desire to make a difference. However, recording did not sufficiently reflect this passion for children. This is not a comment about writing more, it is a comment to encourage Social Workers to be confident about recording their work in a succinct way, including the difference they want to make and then track the extent to which they are achieving it.

None of the files tracked related to children subject to court proceedings. Experience of this type of work may be helpful to seek from another local authority, perhaps via shadowing opportunities or even co-working.

### **3.5 Looked After Children**

Six records of Looked After Children were scrutinised along with discussions with the relevant Social Worker and the Team Manager. The case recording on the files was up-to-date and of a good standard. The basic information record was comprehensively written with information on the child or young person, along with helpful subsidiary information relating to other important people in the child's life. There were also full chronologies. There were copies of Form Fs relating to carers on some of the children's files. There was no stand-alone risk assessment for Looked After Children and workers considered that this was implicit in documentation. It is recommended that Appendix 1 to this report be considered and developed further.

Placements for Looked After Children are commissioned using two preferred providers with whom there are long-standing relationships. Children and young people appear to have been provided with good quality placements with the foster carers who gave feedback, articulating how much they valued

working for the City of London due to the level of responsiveness and engagement with them. One carer stated that she did not want to work for any other local authority because of this.

If the two providers are unable to find placements, the Pan London arrangements are triggered. However, the process used for finding a foster placement was not formally outlined and should be.

Decision-making was generally clear and regular on Looked After Children records, particularly in relation to decisions about movement of children, legal status and other significant changes. On two of the tracked children files, a decision had been made that contact should not be held at a parent's home address. The rationale was vague, outlined as "in the child's best interests" with no further explanation recorded. In addition, there were no details given about whether the decision would be reviewed in the future. Such decisions should be clearly outlined and kept under review.

There was evidence that statutory visits were being carried out and Social Workers knew the children they were working with. Social Workers visited placements, viewed children's bedrooms and saw the children on their own. Some evidence of direct work with children and young people was seen, however, this could be more in-depth and focused. There was evidence of Strengths and Difficulties Questionnaires (SDQs) being undertaken but not for all children and young people.

The reviewing of Looked After Children is independently commissioned. The observation of a Looked After Child review evidenced chairing that was competent and professional. The young person was seen prior to the review. An interpreter was used because English was a second language, the foster carer was seen on their own and the young person was clearly 'at the centre' of the review. The review addressed actions agreed at the previous review and progress made. New actions were identified in line with the young person's current circumstances with decisions about who was responsible for taking them forward and the timescale. The review took account of the young person's cultural and religious needs.

Discussions with an IRO about the areas for attention and strengths yielded feedback that progress has been made in recent times. Social Workers conveyed children's views, and considered them separately where there were sibling groups, although there is still more work to be done on this. In one case it was thought that the Social Worker needed to develop greater confidence in articulating the rationale for decisions.

There is not a discreet Children In Care Council (CICC) reportedly because of the size of the Looked After Children population. However, a service called Gateway has been commissioned to assist. This area requires further thought including whether a virtual CICC is needed, using social networks and technology to unite the looked after population. It would be an example of good practice if Looked After Children were engaged with service improvement and there was clear evidence of the impact of their views.

There is awareness that the educational achievement and tracking in respect of Looked After Children requires development. There is no current Head of the Virtual School. The PEP forms were completed and on the files although they were very lengthy and not education focused enough with achievement targets needing to be outlined. In addition, feedback from the reviewing service was that Social Workers were not sufficiently involved in children's schools. The Virtual Head's role should help with ensuring education expertise is applied to discussions with schools.

The records viewed and discussion with Social Workers suggests that the health services involvement with Looked After Children had improved. Health assessments were carried out within timescales and were regularly reviewed.

On all of the six tracked cases no life story work was seen. This was discussed with Social Workers and the Team Manager. All were aware of the need, which given the manageable caseloads, should be achievable.

### **3.6 Care Leavers**

Care Leavers are a high proportion of Looked After Children, a number of which are unaccompanied asylum seekers with additional complex needs. Recording on their files was of a good standard with the front sheets being completed and helpful information giving a snapshot of who was involved with the young people. All of the chronologies were up-to-date and completed in a meaningful manner.

There was no discreet Care Leavers service but until recently most of the care leavers were allocated to one worker. This changed in 2013 and now all Social Workers hold a mixture of cases, including care leavers – the rationale being to spread expertise and prevent the reliance on one person.

There was clear evidence of Social Workers knowing the young people they were responsible for and they were able to give a good account of the work being carried out and the young person's situation. The verbal account matched the electronic records. During a meeting with a Care Leaver the Team Manager demonstrated that she was aware of the young person's history, having discussed and read the recording.

Partnership working was seen on Care Leavers' files and through discussion with the Social Workers but it appeared that communication with Housing needed to be strengthened as evidenced via observation of a meeting. The Care Leaver had been waiting for four years for Housing from another local authority which angered him and could have been resolved if alternate plans had been made about City of London accommodation. This one issue had affected the young person's view of the local authority. Senior Managers undertook to act on this matter during the review.

All of the tracked children had pathway plans that were good, regularly updated and had been completed with the young people. There was strong evidence of children remaining in fostering placements post-18, in response to their emotional and educational needs. One of the care leavers was living in a Staying Put arrangement which was the right decision for that young person. However, the difference between the foster placement and the Staying Put arrangement was not clear on the file. There should be a Staying Put agreement in place so that young people can understand the difference for them and the carer can also be clear.

There was evidence of post-18 education for Care Leavers and some level of social work support for these arrangements. Tracking of the achievements was lacking, along with an emphasis on Care Leavers attending higher education such as university. A view was expressed that care leavers could not afford to go to university. Little effort was evident of tenaciously pursuing relevant funding. There was also no stand-alone risk assessment.

#### 4 Casework Recording

In the different areas of Children's Social Care there were numerous examples of good casework recording. Chronologies of a good standard being full, relevant and up-to-date were seen on all but one file. There should be chronologies on all files.

The recording showed good evidence of children being seen on their own; in their own environments and their views being gathered. However, further work to reduce the amount of descriptive narrative should be undertaken.

Evident in some of the case recording is the difference that services are making to children's lives – although the descriptive nature of recording made it difficult to see this.

#### 5 Leadership and Governance

Senior Managers were committed to supporting the service and to its continuous improvement. The Director has been in post for less than a year and is well-regarded by partners who appreciate the leadership he has been providing. Staff consider that the service is more valued now than ever before, although the history is still impacting on their confidence.

Together with the Assistant Director, the Director has given a firm commitment to understanding what is working well within the service and what requires further development in a drive to achieve the best service possible, moving the external judgement from good to outstanding.

The context for children services in the City of London is unique. The population is small with under 800 children. Business is at the heart of the operating environment with a concentration of affluent dwellers, lower levels of need and challenges as a result.

A possible obstacle to achieving the stated aspiration of being judged as an outstanding service was a lack of confidence about the strengths and expertise that Social Workers and managers have developed as a result of working with the population in the City of London. Specifically, these include how to work with affluent service users who can challenge from positions of knowledge and confidence; how to overcome the challenges faced by working with Private Schools and Nurseries to secure their understanding of their safeguarding roles, including understanding the role of the LADO. Another strength was the competence of the Police at responding to their Safeguarding responsibilities. In short, the City of London could share its expertise.

A factor that appears to contribute to the lack of confidence was the limited opportunity to get experience of different types of work such as court proceedings, the new PLO and perhaps other challenging situations, although managers had that experience prior to working in the City. An easy remedy would be to shadow workers in other Local Authorities. Co-working could also be arranged.

Celebrating the opportunities afforded by working in the City of London including manageable caseloads, good training opportunities, and the potential for good in-depth practice such as those seen in the MST or similar models, should yield good returns.

Another area in which the City of London should strive to excel because of the size of the service user cohort, is user involvement and contribution to service delivery and improvement.

The Corporate Parenting drive, which appears to have been lacking, now requires attention to join up all services from agencies including housing and education. The understanding of other departments about their responsibilities to Looked After Children and Care Leavers was not ascertained during this review.

The Virtual Head expertise is required. This gap was acknowledged with feedback that appointment to the role was imminent. The gap appears to have impacted educational aspirations for Looked After Children and Care Leavers. Tracking of achievement and attainment should be routine. This post could also be outward facing with the schools and educational establishments and should assist the Social Workers to complete more impactful PEPs.

The arrangements for finding placements, including the Pan London arrangements, appear to be working well. A written procedure would be helpful particularly as placement finding is not an everyday task. The placements scrutinised appeared to be of a good quality, however, it would have been useful to have seen unannounced visits completed by Managers, randomly testing out the quality of the service being provided.

It was unclear to the reviewers whether there was a Sufficiency Strategy and/or Placements Strategy in respect of placements, and if not in place it requires attention. These should help the team to know their options for placements, including the Staying-Put Scheme, Supported Lodgings scheme and other accommodation. It would also be useful for young people.

It was made clear to the reviewers that much of the placement finding activity is provided by the commissioning team (not reviewed). The links between the commissioning service and social care should be well evidenced for the Ofsted inspection.

### **Quality Assurance**

The quality of audits undertaken by Senior Managers was generally good in so far as they were detailed and identified issues for attention. If these audits are to be the main quality assurance endeavour, auditors may also need to focus on the voice of the child in casework and the impact of interventions on the life of the child. Peer and line-management auditing should supplement the cross-directorate auditing that is in place.

There appeared to be little evidence of follow-through actions after audit, a matter to be remedied as it will be important to explicitly outline the actions taken in response to audit findings and the difference made as a result.

The records of supervision generally evidenced good quality. The supervision meeting observed was conducted well with appropriate challenge provided by the Team Manager. To improve further, audits should be undertaken with periodic analysis of what has changed/improved as a result.

The quality assurance role of the independently commissioned chairing and reviewing service is beginning to get attention from internal managers. An IRO shared a desire to engage with senior managers at regular intervals to give feedback about what could improve.



## Recommendations

### Leadership and Strategic Focus

- Develop a continuous self-challenging focus which expects the best possible practice
- Increase the focus on education of Looked After Children and Care Leavers, in particular including the Virtual Head Teacher
- Increase the focus on embedding awareness of the safeguarding agenda, particularly in relation to the Private schools and nurseries
- Consider how to convey the importance of Corporate Parenting across departments and agencies
- Address the roles and responsibilities of the two strategic leads for early help and make it clear to operational staff

### Operational and Strategic Leadership Matters

- Take the time to consider the identity of the City of London social care service in relation to its strengths, facilitating pride and confidence in the work being undertaken, pushing further to achieve excellence
- Progress with the use of the electronic recording systems, thereby reducing the need for hard copy files as well
- Ensure that all supervision is held monthly with reasons outlined if not
- Regularly record the informal supervision that is provided
- Ensure consistency in the documentation on all files i.e. if permanency is underway, place a Form F on file together with the matching document, the permanence report and risk assessment (*if adopted*)
- Produce placement finding procedure for the social work team

### Social Work Practice – Team Manager Leadership

- Encourage Social Workers to consistently talk about and record the difference their work is making to the lives of children and families
- Make the rationale for decisions clear, specific and recorded
- Consistently record the direct work completed by Social Workers
- Give deliberate thought to achieving more in-depth work (particularly given the manageable caseloads and the fact that Social Workers have good relationships with the children)
- Address differentiated feedback from children and young people, parents and carers to inform service improvement and delivery

### Workforce Development

- Make clear the impact of the very good training opportunities (via supervision)

- Progress the plan to link with other Local Authorities (perhaps wider than neighbours to secure shadowing/co-working so as to help with experiences that may not be possible because of the service user profile)

### **Supervision**

- Take action to ensure all supervision is held monthly and if not record the reason
- Audit all files to ensure compliance with standards by all
- Continue with the work to make supervision more reflective
- Work to ensure that records of supervision outline more clearly how it challenges practice and behaviours

### **Quality Assurance**

- When undertaking auditing, do so alongside workers so that the best possible understanding of the challenges and strengths can be secured.
- Consider Social Worker peer auditing
- Ensure that there are records of follow-through of the actions required by audit
- Consider observation of practice by managers as part of the quality assurance framework
- Consider how the IRO and CP chairing service could better fulfil their quality assurance role by engaging with them further

### **Child Protection**

- Strengthen involvement of children in child protection conferences/core groups
- Inform service development with feedback from parents, carers and children

### **Children in Need**

- Work to secure more focused Children in Need plans
- Make clear to parents and children the routes through the service
- Make explicit to all the step-down pathways

### **Looked After Children and Care Leavers**

- Develop a Sufficiency/Placement strategy to enable workers to be explicit about what is available
- Address educational achievements and attainments of Looked After Children and Care Leavers supported by the role of the Virtual Head Teacher
- Take action to get the role of the Head of the Virtual School in place and embedded in the service
- Take action to obtain feedback from Looked After Children, ensuring they can convey the difference made as a result

- Complete SDQs for all Looked After Children
- Undertake unannounced visits by managers to placement

#### **CHSCB**

- Progress with the work planned to get a clearer focus on priorities and impact (making explicit the priorities for City of London)
- Consider ensuring a strong focus on feedback from service users and front-line staff across all agencies
- For the City Safeguarding Board – consider better preparation for scrutiny under inspection conditions before the Ofsted inspection

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<b>Committee:</b>	<b>Date:</b>
Safeguarding Sub Committee	30 June 2014
<b>Subject:</b> Adults Safeguarding Self-Assessment	<b>Public</b>
<b>Report of:</b> Director of Community and Children's Services	<b>For Information</b>

## **Summary**

This report provides members with an overview of the Safeguarding Adults at Risk Audit Tool, which is attached as an appendix.

This report provides a review of the findings from the City of London's perspective, and describes how the tool will inform the strategic vision of the City and Hackney Safeguarding Adult Board. This work is especially pertinent in light of the political focus that safeguarding adults has had in recent times and which will indeed increase with the Care Act, placing Safeguarding Adults Boards on a statutory footing. With significant changes happening in the NHS, local authorities and the Metropolitan Police, it remains crucial for London-wide assurance that organisations continue to have robust governance and processes in place that lead to positive outcomes for adults at risk.

The report highlights that the self-assessment process has identified that the City of London Adult Social Care service meets 18 of the 22 requirements, with 4 assessed as requiring additional action. No reds were identified.

## **Recommendation(s)**

Members are asked to note the outcome of the completed self-assessment tool.

## **Main Report**

### **1. Background**

1.1 NHS England in conjunction with the Safeguarding Boards Network has introduced a new Safeguarding Adults at Risk Audit Tool as part of the Safeguarding Adults assurance process to strengthen inter-agency working and processes.

1.2 The City and Hackney Safeguarding Adults Board agreed to employ this tool following a development day in February 2014. There is an expectation that all London Safeguarding Boards will sign up to use this tool.

1.3 The tool aims to ensure that there is a common purpose to safeguard adults whose circumstances place them at risk and to protect them from avoidable harm across the different sectors in London, which are health, the police and local authorities.

1.4 The aim is to provide Safeguarding Adults Boards with a consistent audit tool in London and across the sectors. It will allow for benchmarking, and identification of themes, improvement needs and best practices according to localities and sector, and at sub-regional and London-wide level.

1.5 The tool will support the Boards in ensuring effective safeguarding practice across their localities, identifying:

- strengths to facilitate the identification and sharing of good practice
- common areas for improvement where organisations can work collaboratively with support from the Board
- single agency issues that need to be addressed
- partnership issues that may need to be addressed by the Boards.

1.6 The findings will then inform the Boards' action plans. All organisations are asked to make a judgement based around 22 questions, framed around the following topics:

- Leadership
- Organisational responsibilities
- Workforce
- Inter-agency working
- Issues of diversity
- Empowerment.

1.7 How well each area is being achieved is based on the following ratings:

- Green rating – the organisation meets the requirement consistently.
- Amber rating – the requirement is met in part; there may be pockets of excellence and areas for improvement.
- Red rating – the organisation does not meet this requirement.

1.8 Each senior management team will complete its own self-assessment to decide where they think their organisation lies in relation to each statement. The completed self-evaluation will then be opened up for discussion with the Board Chair and with partner agencies at a Board 'challenge and support event'.

1.9 The challenge and support event will help to identify:

- single agency actions, which will be monitored by that agency and updates on progress notified to the Board
- partnership issues requiring action by the Board or its sub-groups.

1.10 Thereafter the Board will facilitate and monitor improvement via these annual challenge events and regular Board meetings as necessary.

1.11 The Safeguarding Adults Board will keep this audit under review and may change it to reflect changes in legislation and best practice and to ensure continuous improvement of Safeguarding Adults.

## **2 Current Position**

2.1 The audit tool has 7 sections. The total score for the Adult Social Care service was 18 green and 4 amber.

- In Section A. Leadership: There was a score of 4 green and 1 amber.
- In Section B. Organisational: There was score of 2 green and 1 amber.
- In Section C. Workforce: There was a score of 4 green.
- In Section D. Inter-agency: There was a score of 4 green.
- In Section E. Diversity: There was a score of 1 green.
- In Section F. Empowerment: There was a score of 3 green and 2 amber.

2.2 The strong evidence of a green rating illustrates the priority and commitment shown towards Safeguarding Adults at risk, through the golden thread of the Corporate Safeguarding strategy, highlighted within the Department of Community and Children's Services (DCCS) business plan, through to the core business and professional practice of the Adult Social Care service.

2.3 The 4 amber ratings show a need to improve in the following areas, around:

- a clear quality assurance framework for safeguarding
- update of the Adult Social Care safeguarding pages
- the need to develop a challenge session within our sub committee structure
- a more robust adherence to safeguarding throughout the commissioning cycle, together with Mental Capacity Act issues within commissioned services.

2.4 As noted in the areas of Workforce, Inter-agency working and Diversity, Adult Social Care has self-assessed as meeting all the requirements consistently,

2.5 The strong green ranking can be externally validated through the quarterly performance reporting and annual safeguarding report mechanism, the independent safeguarding review of the Adult Social Care team, together with the Care Quality Commission inspection of the Reablement service in 2013, all previously reported to this Committee. Additionally, sound organisational governance exists through the framework of the Safeguarding Sub Committees, which have been commended by the main Safeguarding Board.

### **3. Proposals**

3.1 The main area for ongoing development will be the need to support a continuous development plan for Safeguarding Adults. It is planned that as well as recommissioning the full independent review of safeguarding in Adult Social Care, we will additionally be developing the implementation of a quality assurance framework for all future auditing of safeguarding systems and practice to operate within. This will ensure that with the addition of the annual Board audit tool, regular internal audits will be specific, measurable, time specific and reported on.

### **4. Conclusion**

4.1 This report has provided a summary of the main findings of the audit of arrangements within the City of London to safeguard and promote the wellbeing of adults at risk. The purpose of this tool is to provide all organisations who are partners of the City and Hackney Adult Safeguarding Board with a consistent framework to assess, monitor and/or improve their Safeguarding Adults arrangements. In turn this will support the Board in ensuring effective safeguarding practice across the localities of responsibility. The process will involve the coming together of all partner agencies to attend a challenge and support event, which will promote objectivity and support from the Board. Subsequent audits will take place annually, with the purpose of informing the Board's action plan on a yearly base.

### **Appendices:**

Safeguarding Adults at Risk Audit Tool

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## Safeguarding Adults at Risk Audit Tool, Final Version, 16 January 2014

Audit of arrangements in individual organisations to safeguard and promote the wellbeing of adults at risk

The purpose of this tool is to provide all organisations in the Borough with a consistent framework to assess, monitor and/or improve their Safeguarding Adults arrangements. In turn this will support the Board in ensuring effective safeguarding practice across the Borough. The process, which involves a *challenge and support event*, will promote objectivity and support from the Board. The framework has been developed so that it can be used by a wide range of organisations from varying perspectives and to varying degrees.

This audit tool incorporates elements of the Section 11 audit framework from government guidance *Working Together to Safeguard Children*, March 2013, and elements of the NHS Safeguarding Adults Self-Assessment Framework. It is based too on an audit tool produced by the Borough of Solihull and incorporates elements of the methodology of an audit tool produced by Sheffield for use in Adult Safeguarding in 2004 and referenced in ADASS, 2005, *Safeguarding Adults*.

The process for Board discussion and preparation for this is described in more detail on page 11 and includes the following:

Senior management of each partner organisation will complete its own self-assessment for internal action and then for discussion with the Board Chair and **with partner agencies** at a Board *challenge and support event* to be held before 30 June 2014 and subsequently by the end of each financial year.

- Organisations are required to make a judgement as to how well each statement is being achieved based on the following rating:

**GREEN** rating – the organisation meets the requirement consistently across the organisation.

**AMBER** rating – the requirement is met in part; there may be pockets of excellence and areas for improvement.

**RED** rating - the organisation does not meet this requirement.

- Areas with an amber or red rating must be supported by action to be taken to ensure improvement and by whom.

The *challenge and support event* will help to identify:

- single agency actions – which will be monitored by that agency and updates made to the Board
- partnership issues for action by the Board or its sub-groups.

Each organisation will be required to complete the audit by an agreed date for reporting to the Board *challenge and support event* before 30 June 2014 and by the end of the financial year thereafter.

- Thereafter the Board will facilitate and monitor improvement via these annual challenge events and regular Board meetings as necessary.
- The Safeguarding Adults Board (through its sub-groups) will keep this audit under review and may change it to reflect changes in legislation and best practice and to ensure the continuous improvement and strengthening in arrangements of safeguarding adults at risk.

All partner agencies represented on the Board will be encouraged to complete the self-assessment audit. It could be taken wider if that is felt worthwhile.

Commissioners may encourage providers such as care homes and domiciliary home care providers to complete a self-assessment by using this tool at appropriate provider forums.

This tool could be used to inform commissioners undertaking contract monitoring across all sectors. Clinical Commissioning Groups and NHS Providers will complete the audit in full. This will be monitored by NHS England (London Region).

The purpose of the tool is to help the Board get an overview of the Safeguarding Adults arrangements that are in place across the locality, identifying:

- strengths, so that good practice can be shared
- common areas for improvement where organisations can work together with support from the Board
- single agency issues that need to be addressed
- partnership issues that may need to be addressed by the Board.

The findings should inform the Board's action plan.

## SECTION A: LEADERSHIP, STRATEGY, GOVERNANCE, ORGANISATIONAL CULTURE

The boxes within each section can be expanded to facilitate an answer however comprehensive or detailed it may be.

Discussion points/comments	RAG rating	Evidence to support RAG rating	Additional action to ensure improvement and by whom	Progress or date completed
<p>*A1 The organisation has a senior staff member who has received training in Adult Safeguarding and, where appropriate, Prevent, and who has responsibility to 'champion' safeguarding throughout the organisation. They keep senior managers informed of all issues relevant to safeguarding and promoting wellbeing. They have sufficient time and training to carry out this role. This senior staff member may be the designated individual to whom concerns about an adult at risk are reported, or there may be an additional role in the organisation for this purpose. This person will have a job description reflecting this specific role.</p> <p><i>Please specify the post holder</i></p>				
<p>Marion Willicome-Lang, Service Manager            Ian Tweedie, Team Manager</p>	Green	<p>Service Manager and Team Manager Adult Social Care (ASC) hold lead responsibility for all adult resident population safeguarding, reporting and quality assurance. Service Manager lead for Corporate Adult Safeguarding and support to Champions.</p>		<p>City of London (COL) Safeguarding campaign to be launched to staff on 23 June 2014. Support to 14 departmental designated Champions throughout corporation to commence on 14 June 2014. Safeguarding review audit of COL ASC team due November 2014 following initial audit undertaken in November 2013.</p>
<p>*A2 The organisation is committed to Safeguarding Adults and promoting wellbeing, and this is explicitly reflected in the organisation's mission statement/guiding principles as well as in strategic documents. <b>The organisation is able to evidence how it is implementing the strategic aims of the Board's safeguarding strategy.</b></p> <p>This commitment is reflected in the level of participation of the organisation in actively supporting the Safeguarding Adults Board (SAB) in</p>				

taking actions in the context of its business plan.					
A2	Director COL Department for Community and Children's Services (DCCS) and Assistant Director (AD) People sit on the C+H SAB.	Green	Business plan 2014–17 strategic aim one: To safeguard adults from abuse and neglect and deal with it appropriately and effectively where it does occur. COL Corporate Safeguarding Sub Committee: Additionally COL has developed a Safeguarding Sub Committee within the governance structure of the C+H SAB.		Safeguarding campaign to staff commences 23 June. Safeguarding campaign to COL residents commences September 2014.
A3 There is demonstrable commitment at Board level (or equivalent) to Safeguarding Adults. Governance arrangements make relevant connections to support identification of organisational concerns relevant to safeguarding (such as complaints and serious incident reviews). The service has a system for reviewing alerts and referrals which is integrated with complaints and serious incident reviews. The organisation recognises safeguarding as integral to quality and best practice, and relevant connections are made at all levels between related issues such as dignity in care; equality; balancing choice; and safety.					
A3	COL complaints process clear. Safeguarding placed on corporate risk register. Clear alert process.	Green	COL ASC underwent independent safeguarding review. Improvement plan and audit framework under way, with independent review to be set in train. Quarterly performance monitoring reports to Safeguarding Sub Committee.		

			Annual report to SAB.		
*A4 The organisation evidences candour and openness internally and in its relationship to the Board. It identifies challenges to this open culture and puts plans in place to addresses these <i>(Identify, in the comments/evidence sections, those challenges and how you intend to address these)</i> .					
A4	Challenge session to SAB. More evidence to be collated through QA framework.	Amber		Internal challenge session to COL Safeguarding Sub Committee to assess progress made internally.	November 2014.
*A5 The organisation ensures that high quality legal advice is made available to staff on both Safeguarding Adults and the Mental Capacity Act (MCA), including making available to managers and staff regular updates from the Court of Protection (COP).					
A5	Internal legal advice, with specialist spot-purchased advice when required.	Green	Specialist MCA/DOLS training day for ASC and Finance around capacity and COP and appointeeship.	Supreme Court ruling operational workstream in place with DLT briefing, including budget forecasting.	

## SECTION B: THE ORGANISATION'S RESPONSIBILITIES TOWARDS ADULTS AT RISK ARE CLEAR FOR ALL STAFF AND FOR COMMISSIONED SERVICES

The boxes within each section can be expanded to facilitate an answer however comprehensive or detailed it may be.

	Discussion points/comments	RAG rating	Evidence to support RAG rating	Additional action to ensure compliance and by whom	Progress or date completed
*B1 Organisational policies make reference to Safeguarding Adults and Prevent where applicable. There are specific organisational policies and procedures in place reflecting your organisation's responsibility to safeguard and promote the wellbeing of adults at risk. These reflect and cross-refer to the pan-London Policy and Procedures. They include clear lines of accountability, from an individual employee up to the most senior person in your organisation, and this is shown diagrammatically. They include reference to the importance of keeping accurate records as well as guidance to support staff in this. This in turn links in to the organisation's policy on sharing information.					
Page 58 B1	<p>Corporate responsibility through golden thread through business plan to staff appraisals.</p> <p>Corporate-wide safeguarding awareness raising.</p> <p>Corporate risk register.</p> <p>Commitment from members and chief officers group.</p> <p>Partnership links with Children's team work on Prevent and Channel alongside COL Police.</p>	Green	<p>COL Corporate Safeguarding policy.</p> <p>Business plan.</p> <p>ASC policy and procedures – online tri-ex manual.</p> <p>Accessible pan-London Policy and Procedures.</p> <p>Clear lines of reporting (see department organogram).</p>	Record keeping was fully audited in 2013 and reviewed in line with improvement plan and full implementation of framework i.	
*B2 Where services are commissioned, agreements reflect the requirement between commissioners and providers to have regard to the need to safeguard and to promote the wellbeing of people who use services. Invitations to tender, contracts and contract monitoring reflect this and reflect relevant standards and regulations.					

B2		Green	All contracts contain adherence to need to comply with safeguarding, standards and regulations. Commissioner receives all alerts regarding commissioned providers and attends safeguarding strategy meetings and conferences.	To check QA on Safeguarding Adults as regards contract monitoring templates and post safeguarding follow-up with the Disclosure and Barring Service (DBS) etc. Monitoring forms being updated in line with commissioning review part 1 to ensure that ALL services report safeguarding concerns at monitoring meetings.	
B3 All commissioned services have contracts which require that services can demonstrate that the Mental Capacity Act is complied with. Examples of how contract monitoring addresses this are shared with the Safeguarding Board when requested.					
B3	To assess WFD aspects around MCA and DOLS and to work in partnership with ASC on this in relation to contract update.	Amber		Reporting to Board needs to happen. Contract register and how it complies. Monitoring forms being updated in line with commissioning review part 1.	October 2014.
*B4 All NHS commissioned services are adhering to the NHS standard contract under service conditions 32 in relation to Prevent.					
B4	N/A				

## SECTION C: THE ORGANISATION'S APPROACH TO WORKFORCE ISSUES REFLECTS A COMMITMENT TO SAFEGUARDING AND PROMOTING THE WELLBEING OF ADULTS AT RISK

The boxes within each section can be expanded to facilitate an answer however comprehensive or detailed it may be.

	Discussion points/comments	RAG rating	Evidence to support RAG rating	Additional action to ensure compliance and by whom	Progress or date completed
*C1 Your organisation has robust and safe <b>recruitment procedures and practices</b> in line with guidance from the Adult Safeguarding Board. This includes: policies on when to undertake checks and the level required with the Disclosure and Barring Service; the responsibility for all staff in relation to safeguarding and to promoting wellbeing is stated within all job descriptions; professional standards in relation to safeguarding are underlined; induction standards include the need to ensure that new staff are made aware of their responsibilities to safeguard adults at risk and promote wellbeing.					
C1	HR.  DCCS, including Housing.	Green	Sound HR policies and procedures as regards recruitment and induction. Clear DBS protocol for all staff. Corporate Safeguarding policy. Golden thread. Safeguarding Champions and awareness raising campaign. Ongoing support to Champions.		Launch due 23 June 2014.  Quarterly meetings, commencing December 2014.
*C2 The organisation's staff supervision policy supports effective safeguarding. Your organisation has a policy that sets out the frequency that employees in contact with adults at risk receive regular supervision and an appraisal. All staff have regular reviews of practice to ensure they improve over time and are competent to carry out their safeguarding responsibilities. Discussion on safeguarding issues is specifically facilitated in supervision so that staff feel able to raise concerns and are supported in their safeguarding role.					
C2	Professional capabilities framework	Green	Supervision policy and	Independent audit review	November 2014.



	(PCF). Knowledge transfer programme (KTP) with Goldsmiths University.		appraisals all reflect safeguarding across the service as evidenced by independent Safeguarding Adults audit in 2013.	with QA framework. Supervision template, team audit and Safeguarding Adults Clinic in progress.	December 2014.
*C3 All staff working with adults at risk should receive training appropriate to their role to ensure competence to meet the needs of adults at risk of harm and to respond to safeguarding concerns. This will include training on the Mental Capacity Act and (where relevant) Prevent and also equality and diversity issues. A framework to assess competency in Safeguarding Adults and the Mental Capacity Act is integrated into existing supervision and appraisal systems.					
C3	All staff groups, Intake, Reablement and SAMs found to be knowledgeable and competent to carry out work with adults at risk, evidenced through independent Safeguarding Adults audit.  PCF and KTP.  Partnership working with Children's team and COL Police around Prevent and Channel when applicable.	Green	Specialist training on MCA implemented.	To develop Reablement teams in conjunction with Skills For Care NMDS framework and through full access to Hackney mandatory safeguarding training as SAB partners. Corporate Safeguarding policy, Champions and campaign roll-out.	August 2014.  June 2014.
*C4 Your organisation has written guidance and procedures for handling complaints and allegations against staff and this is clearly accessible to staff. This includes a whistle-blowing policy and a culture that enables issues about safeguarding and promoting the wellbeing of adults at risk to be highlighted and robustly addressed. It includes appropriate referral to the Disclosure and Barring Service. Your organisation has a code of conduct for staff working directly with adults at risk, concerning acceptable and unacceptable behaviour including discrimination and bullying.					
C4	HR.	Green	KTP work. Reflective practice group. Staff handbook. HR policies and procedures.	To raise the LADO role in ASC at SAB level.	June 2014.
*C5 Your organisation takes steps to ensure that information is obtained from staff about their experience of working in the service, including					

the practice of exit interviews. This information is used by the organisation to make improvements. *(Note down in the comments/evidence section key messages and improvements arising from this.)*

C5	HR.  WFD group helping shape staff training and development within the service.		Through ongoing supervision and at team meetings and staff and senior management development days. Exit interviews when applicable.		
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## SECTION D: EFFECTIVE INTER-AGENCY WORKING TO SAFEGUARD AND PROMOTE THE WELLBEING OF ADULTS AT RISK

The boxes within each section can be expanded to facilitate an answer however comprehensive or detailed it may be.

D	Discussion points/comments	RAG rating	Evidence to support RAG rating	Additional action to ensure compliance and by whom	Progress or date completed
*D1 Your organisation is represented at the Safeguarding Adults Board and/or its sub-groups. Frequency and participation during attendance at Board meetings and sub-group meetings is noted. The Board representative reports back to the right level in the organisation, ensuring that the broader organisation engages with the partnership and its objectives.					
D1		Green	Director and AD are SAB members. Cascade through COL sub committees, supervision and team meetings.		
*D2 The organisation evidences its engagement and transparency with the partnership in Safeguarding Adults: in appropriately recognising and reporting Adult Safeguarding concerns to the Local Authority for coordination of response. It engages appropriately in multiagency efforts to prevent and intervene in safeguarding concerns (attendance at strategy meetings/case conferences and finding effective outcomes). The organisation evidences that action plans from SCRs nationally and locally drive improvement internally and across the partnership. There is evidence that internal action plans/learning (e.g. from SIs, SCRs, complaints) are shared with the Board to facilitate learning across the partnership. This will include triangulation of data that will inform decision making.					
D2	Two ELFT/COL SCRs.  Performance reporting on data to sub committees.	Green	Work evidenced in full partnership with ELFT. Ongoing collaboration with partners from Health.	To enhance the incorporation of COL SCRs/SIs at SA Board level.	To be raised at Board level.
*D3 Your organisation has policy/procedures/guidance setting out clearly the process and principles relating to sharing information across agencies. The protocol is in accordance with the pan-London Safeguarding Procedures. All relevant staff are trained in applying this, including in the context of Safeguarding Adults. Local and national learning from serious case reviews informs learning about the principles to be applied.					
D3	Tri-ex online.	Green	Tri-ex online manual sent out to all staff on their		

	COL data sharing policy.		desktop the pan-London Procedures.  SCRs with ELFT have enhanced protocols on information sharing.		
*D4 Your organisation can demonstrate active engagement with raising alerts and multiagency partnership working for Prevent, including supporting the Channel process.					
D4	Via partnership work with children's service and designated officer in COL Police.	Green	Joint work well advanced in children's services around Prevent, and access to this as required. Development session planned for service leads.		SMT and presentation.

## SECTION E: ADDRESSING ISSUES OF DIVERSITY

The boxes within each section can be expanded to facilitate an answer however comprehensive or detailed it may be.

E	Discussion points/comments	RAG rating	Evidence to support RAG rating	Additional action to ensure compliance and by whom	Progress or date completed
*E1 Your organisation records gender, age, disability, faith, sexuality, language and ethnicity of service users where a safeguarding response is necessary/offered. This is used to inform safeguarding strategy.					
E1	As part of ASCOF and annual safeguarding PIs and annual report.	Green	Quarterly reporting and annual report highlights trends and helps shape future need and outcomes-based commissioning.		

## SECTION F: THE SERVICE CAN DEMONSTRATE THAT PEOPLE WHO USE SERVICES ARE INFORMED ABOUT SAFEGUARDING ADULTS AND EMPOWERED WITHIN THE ORGANISATION'S RESPONSES TO IT

F	Discussion points/comments	RAG rating	Evidence to support RAG rating	Additional action to ensure compliance and by whom	Progress or date completed
*F1 The principle of person centred care is at the heart of the organisation's practice. Give examples of how this is demonstrated and the difference it makes.					
F1	FWi qualitative post safeguarding service user evaluation.	Green	Joint work in 2012 with Hackney under the Making Safeguarding Personal (MSP) project through ADASS.	Simple evaluation post safeguarding exists to ascertain how people felt about the process and if they feel safer as a result. Workstream devised on Framework i for reporting purposes. Outcomes shape future interventions.	
*F2 The organisation demonstrates a clear working understanding and competence in applying the Mental Capacity Act and of the core principles within it.					
F2	Service all appropriately MCA aware based on grade and type of work undertaken.	Green	Evidenced via independent audit. Whole team training undertaken via external specialist MCA lawyer. QSWs experienced in MCA/MH SW, and one BIA.	Utilising Skills for Care modular training and development for non-social work trained staff. Full access to Hackney training as SAB partners.	August 2014.
*F3 Your organisation has written information available to adults at risk and their families about Safeguarding Adults, including who to contact if they are concerned about an adult at risk. Arrangements are in place to support those for whom English is not their first language. Information is provided in a range of formats and languages.					

F3	<p>Safeguarding leaflets.</p> <p>Service Directory.</p> <p>COL website.</p> <p>Awareness campaign to residents.</p>	Amber	<p>Leaflets and directory are currently up to date and formatted according to service user need.</p>	<p>Closer links via Public Health being developed with community engagement officer as regards formats and dialects required within Bangladeshi community. COL website presently being updated.</p>	October 2014.
<p>*F4 Your organisation takes steps to ensure that information is obtained from individuals who use your service about what outcomes they wish from the safeguarding process and whether they have received this. Their experience is recorded and the organisation learns from it. Individuals who use services and their carers/families also influence and inform more broadly the development of the organisation's strategic approach to safeguarding and related agendas. <i>(Note down in the comments/evidence section key messages arising from engagement with service users, families, carers, public.)</i></p>					
F4	<p>FWi service user feedback.</p> <p>Simple numerical scale of 1–10 about feeling safer and engagement with the process.</p> <p>Feedback from service users in letters and during work on the MSP project was as follows: feeling safer now. Feeling included and consulted as part of the safeguarding process.</p> <p>ASCOF.</p> <p>Safeguarding awareness raising campaign to COL residents.</p> <p>Service user representation at the Safeguarding Sub Committee.</p>	Green	<p>Part of the qualitative feedback approach to safeguarding that ASC adopted following the MSP project.</p> <p>All commissioned services have service user representation as part of the tender and review process and protecting adults at risk is part of this process.</p>	<p>Community engagement and co-production to be re-evaluated at the Safeguarding Adults audit.</p>	November 2014.

	Safeguarding matters brought to the Adult Advisory Group (AAG).				
*F5 Within your organisation's quality assurance process and its practice there is a strong outcome focus identifying the outcomes that those that use the services expected, having been consulted on these and those outcomes that were achieved.					
F5	<p>ASCOF reporting processes.</p> <p>Quarterly performance reporting to sub committees.</p>	Amber	Working towards a stronger outcomes focus in Safeguarding Adults.	To be formally reviewed through independent audit and the development of a QA strategy and framework.	December 2014.



### **Completing the audit and preparing for a Board *challenge and support event***

- Discuss with appropriate colleagues/managers where you think you are in relation to each statement that applies to your organisation.
- Identify key strengths and areas where progress is most needed. Think about any constraints you face.
- Note down key points of discussion as a helpful reference for future action/discussion.
- Reflect on discussion and agree your position on the rating scales for each statement:
  - *What have you found that is good about your organisation's approach to safeguarding that you could share with partners?*
  - *What have you found that gives you cause for concern – including evidence from Serious Untoward Incidents or other worrying events?*
- It may be helpful to ask organisations to present the top three things where they are doing well and three areas where they need to improve when you get together at a *challenge and support event*.

#### **You will want to consider:**

- **How will you review progress on necessary actions on issues of concern?**
- **Should these actions be integrated into other action plans for individual organisations or for the Board or the Health and Wellbeing Board?**

<b>Organisation:</b>	City of London		
<b>Senior officer responsible for safeguarding adults:</b>	Name: Marion Willicome-Lang Ian Tweedie	Designation: Service Manager Adult Social Care Team Manager Adult Social Care	
	Tel no: 020 7332 1224	Email: marion.willicomelang@cityoflondon.gov.uk	
<b>Name of person completing this audit:</b>	Name: Marion Willicome-Lang	Designation: Service Manager Adult Social Care	
	Tel no: as above	Email: as above	
<b>Name of person authorising this audit:</b>	Name: Chris Pelham	Designation: Assistant Director People	
	Tel no: 020 7332 1224	Email: chris.pelham@cityoflondon.gov.uk	
<b>Date audit completed:</b>	20 May 2014	Date audit authorised:	2 June 2014

Summary of audit findings and identified issues of concern:	
List of red and amber areas:	
1	A4
2	B3
3	F3
4	F5
5	
6	
7	
8	
9	
10	

<b>Good or best practice examples you would like to highlight</b>	<b>Refers to section in audit tool (e.g. A1, F5)</b>
Corporate responsibility for Safeguarding Adults at risk/campaign and strategy	A2
ASC team recording and safeguarding practice indicating sound understanding of safeguarding principles, and adherence to policy and protocols	B1
PCF and KTP. independent audit and planned review and upcoming QA framework	C2
Director and AD members of SAB cascade model through COL Safeguarding Sub Committee	D1
Sound reporting on gender, age, disability, sexuality, ethnicity, faith, etc.	E1
Strong evidence of ASC team's understanding of MCA principles in relation to Safeguarding Adults evidenced through independent audit	F2

<b>Committee:</b>	<b>Date:</b>
Safeguarding Sub Committee	30 June 2014
<b>Subject:</b> Safeguarding Policy, Awareness Raising Campaign	<b>Public</b>
<b>Report of:</b> Director of Community and Children's Services	<b>For Information</b>

## Summary

This report presents Members with an overview of the Safeguarding Policy's awareness raising campaign, '**Notice the Signs**'.

The campaign is targeted at two distinct audiences: (1) City of London employees (including Members and partner agencies); and (2) City of London residents.

The employee campaign will run for six weeks starting on Monday 23 June until Friday 8 August 2014. The primary aims of the campaign are:

- to improve general knowledge, understanding and awareness of the City of London Corporation's role in safeguarding children and adults at risk
- to ensure that City of London Corporation employees understand their responsibilities and roles in protecting and promoting the welfare of children and adults at risk
- to raise awareness among local residents of what constitutes abuse of children and adults at risk and provide information and advice to ensure that they know what to do and who to call if they are concerned.

A key element of the Corporate Safeguarding Policy is the introduction of departmental Safeguarding Champions, who will take on the strategic and operational responsibility for implementing the policy and raising awareness within their respective departments. The Notice the Signs campaign will support the champions to raise awareness of their role and their localised reporting functions.

The campaign will deliver a range of activities and opportunities for employees and residents to engage in throughout its duration. At the heart of the campaign is engagement through conversations, and it is hoped that Members of the Safeguarding Sub Committee will become champions among elected Members in order to ensure maximum awareness of the Notice the Signs campaign.

Members are being invited to champion the campaign by:

- taking the pledge
- talking to other elected Members about the key messages of the campaign

- identifying opportunities for the campaign team and/or departmental Safeguarding Champions to meet with other elected Members to talk about the campaign and deliver the key messages
- retweeting/posting campaign tweets and posts to their followers
- raising awareness of the campaign (and its importance) with residents and community leaders within their wards and supporting the campaign team to identify key individuals and established groups to engage with to ensure maximum coverage of the key messages
- becoming spokespersons for the campaign.

### **Recommendations**

- Members are asked to note the Notice the Signs campaign and consider the role they could play in championing it with other elected Members and local residents.

## **Main Report**

### **Background**

1. This report brings to Members' attention the '**Notice the Signs**' awareness raising campaign that has been developed by Community and Children's Services' Adult Social Care and Children and Families service managers (as part of the Director's Roadmap to Outstanding transformation programme) to embed the Safeguarding Policy across the organisation and to raise awareness among City residents.
2. Under section 11 of the Children Act 2004, all agencies working with children are required to have a Safeguarding Policy in place. Additionally, the 'No Secrets' guidance, issued by the Department of Health under section 7 of the Social Services Act 1970, requires that a framework is put in place for the safeguarding of adults at risk of abuse.
3. In January 2014, safeguarding children and adults at risk was added to the Corporate Strategic Risk Register. Following this the Corporate Safeguarding Policy was produced and signed off by the Chief Officers Group and Community and Children's Services Grand Committee.
4. The Corporate Safeguarding Policy put in place a Safeguarding Champions function to devolve strategic and operational responsibility for implementing the policy and raising awareness among staff to a departmental level.
5. Chief Officers nominated individuals within their departments to become Safeguarding Champions.
6. It was acknowledged that Safeguarding Champions would require support to deliver some of the key strategic messages from the policy to colleagues.
7. In addition, the low levels of safeguarding alerts/referrals from the community to the Children and Families team was identified as a driver for some awareness raising activities among City residents.

8. Notice the Signs was developed as an engaging way of raising awareness of the processes the City of London has in place to protect adults and children at risk of abuse, ill treatment or neglect.

### **Challenges**

9. The challenge for the City of London Corporation in relation to putting in place a single and seamless reporting function for safeguarding concerns is the diversity of the work it does and the geographical locations of the departments and services, many of which are outside the City's local authority boundaries.
10. This is extremely challenging because although the Corporate Safeguarding Policy addresses the City of London's role, departments that provide services in other local authority areas will have to follow the procedures for the local authority in which they are located.
11. The Safeguarding Policy and Notice the Signs campaign aim to overcome these challenges by supporting departmental Safeguarding Champions to develop and promote their local processes to colleagues.

### **Target Audiences**

12. The campaign is aimed at three primary audiences:
  - employees of the City of London Corporation (including elected Members)
  - local residents who live in the City of London
  - partners and commissioned service providers who provide services to City of London residents and service users.

### **Campaign Objectives**

13. The primary objectives of the **Notice the Signs** campaign are:
  - to improve general knowledge, understanding and awareness of the City of London Corporation's role in safeguarding children and adults at risk
  - to ensure that City of London Corporation employees understand their responsibilities and roles in protecting and promoting the welfare of children and adults at risk
  - to raise awareness among local residents of what constitutes abuse of children and adults at risk and provide information and advice to ensure that they know what to do and who to call if they are concerned
  - to make sure that City of London employees and residents know how to report any safeguarding concerns they have.

### **Key Messages**

14. The key messages of the campaign are:
  - The City of London provides high quality safeguarding and protection services to children and adults at risk.
  - We all have a responsibility to make sure children are safe and protected from harm and neglect.
  - Safeguarding is everyone's business: if you notice something that concerns you don't ignore it – report it.
  - Safeguarding isn't just about physical harm.

- We need your help to prevent child abuse and to keep adults at risk safe from harm.

### **Campaign Dates**

15. The campaign will run in two parts: the employee campaign will run from Monday 23 June to Friday 8 August 2014; and the City residents campaign will run sometime during September to December 2014.

### **Campaign Activities**

16. The campaign will include a range of face-to-face, digital and traditional media activities such as:
  - a poster and screen saver campaign
  - online training courses
  - briefing sessions and attendance at key events and meetings
  - train the trainer training
  - use of email and social media to create conversations and encourage active engagement
  - dedicated intranet and internet pages
  - promotion and information sharing with Members
  - community-focused briefings, using established groups.
17. One of the proposed campaign activities is an attempt to get people to show support for the campaign by taking a verbal, visual or virtual pledge to report any safeguarding concerns they have. The campaign will attempt to use social media platforms such as Twitter and Facebook to generate interest in the campaign by asking people to post pictures of themselves holding a Notice the Signs pledge card or badge.
18. As noted above, there will be Safeguarding Champions in each department. The champions will play a key role in delivering the campaign messages to colleagues in their departments. The champions will be trained in how to use the campaign materials to hold briefing sessions for staff; the sessions have been designed to be informal and engaging.
19. In addition, it is hoped that Members of the Safeguarding Sub Committee will become champions among elected Members in order to ensure maximum awareness of the Notice the Signs campaign.
20. Safeguarding Sub Committee Members are invited to champion the campaign by:
  - taking the pledge
  - talking to other elected members about the key messages of the campaign
  - identifying opportunities for the campaign team and/or departmental Safeguarding Champions to meet with other elected Members to talk about the campaign and deliver the key messages
  - retweeting/posting campaign tweets and posts to their followers



- raising awareness of the campaign (and its importance) with residents and community leaders within their wards and supporting the campaign team to identify key individuals and established groups to engage with to ensure maximum coverage of the key messages
- becoming spokespersons for the campaign.

### **Corporate and Strategic Implications**

21. The City's Corporate Strategy seeks a world-class City that supports our communities through the appropriate provision of high quality services for residents and Londoners. The safeguarding awareness campaign supports a safer and stronger City by ensuring that the welfare of vulnerable residents is promoted effectively and by protecting children and adults at risk of harm. The Corporate Safeguarding Policy and Notice the Signs campaign will ensure that the City of London meets its statutory duties.

### **Implications**

22. There are no additional legal, financial or HR implications arising from this report.

### **Conclusion**

23. The Safeguarding Policy and Notice the Signs awareness campaign will firmly embed the City of London's corporate approach to safeguarding children and adults at risk. The awareness raising campaign will ensure that City of London Corporation employees have a greater understanding of their roles and responsibilities in regard to safeguarding; and the promotion of the Safeguarding Champions will ensure that all employees know how to report any concerns they have.

### **Appendices**

- Draft campaign designs
- List of Safeguarding Champions

### **Kaimi Ithia**

Strategic Communications Manager

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**DID YOU  
NOTICE  
THE SIGNS?**

It's not always this easy to notice the signs of abuse. Children and adults at risk are often abused or neglected by people who look after them, and this can be hard to discover until it's too late; but, the signs are usually there, we just don't notice them.  
If you notice something that concerns you, don't ignore it, call us

**020 7332 1224**  
[cityoflondon.gov.uk/noticethesigns](http://cityoflondon.gov.uk/noticethesigns)  
In an emergency call 999







I'm scared my parents  
will still be shouting  
if I go home.

**DID YOU  
NOTICE  
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city & hackney  
safeguarding  
children board

CITY  
OF  
LONDON



I wish my parents  
cared, I'm hungry  
and feel so alone.

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CITY  
OF  
LONDON





My nephew keeps coming over to borrow money, I wish he'd leave me alone.

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He came to my house and exploited me for my savings. I fell for it now I have nothing left.

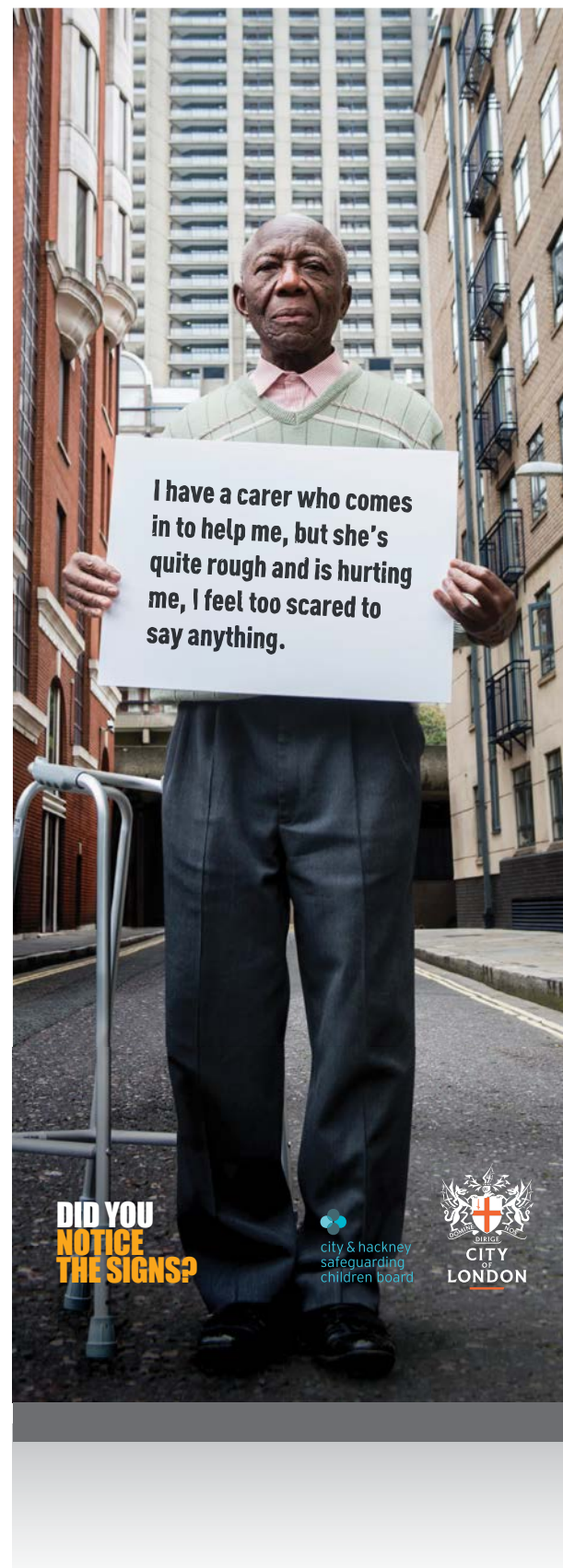
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## Safeguarding Champions City of London Corporation

<b>Position</b>	<b>Area</b>
Chris Pelham – Assistant Director People  Pat Dixon – Service Manager Children and Families and Safeguarding lead Children and Young People  Marion Willicome-Lang – Service Manager Adult Social Care and Safeguarding Lead for Adults	Community and Children's Services
Sean Gregory .- Director of Creative Learning is the Lead for the Barbican Centre with Thomas Hardy as his deputy	Barbican Centre
Natasha Dogra.-.Committee and Member Services Officer	Town Clerk's
Amanda Owens - Assistant Librarian	Culture, Heritage and Libraries
Grace Rawnsley - Community Education Officer	Open Spaces
Tony Macklin - Assistant Director – Public Protection	Markets and Consumer Protection
Elisabeth Hannah - Chief Planning Administrative Officer	Built Environment
Gary Griffin – Acting Head teacher and Safeguarding Lead	City of London School
Andrew Douglas – Deputy Head teacher and Safeguarding Lead	City of London School for Girls
Alison Mears – Head of Junior Music Courses and Safeguarding Lead	Guildhall School of Music and Drama
Mrs V Buckman – Deputy Head teacher and Safeguarding Lead	City of London Freeman's School
Ciaran Rafferty	The City Bridge Trust

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