1. **Introduction**

1.1 This is the second report on Safeguarding and Family Support Services written as a submission by the Head of Service for and within the Annual Council Reporting Framework. Whilst it is based primarily on self assessment, it has also been informed by feedback and consultations with a range of colleagues within the service, external partner agencies and service users themselves. Consideration has been given to the range, quality and effectiveness of our services with particular attention given to how services are impacting on outcomes for the children and families that we serve.

2. **Context/Overview**

2.1 Safeguarding is an area which we have to get right to ensure that every child and young person living in Bridgend can be as safe as possible, recognising that this is everybody’s responsibility.

2.2 The past two years has seen increased media and public attention on the role of the public services and their contribution to the safeguarding agenda. This followed the tragic death of Baby Peter in Haringey in 2009 and a number of other high profile child abuse cases publically reported both in England and Wales. There is no doubt that this has influenced a steady increase in the number of contacts and referrals made to our Safeguarding and Family Support teams throughout 2010/2011 in line with the national trend. In Bridgend, the number of Looked After Children (LAC) rose from 286 on the 31st March 2010 to 326 in 2011. This is a 14% increase compared to the previous year. Similarly, the number of children on the Child Protection Register (CPR) rose from 127 on the 31st March 2010 to 163 on the 31st March 2011, a 28% increase. This has placed increased pressure on our safeguarding services and the budgets devolved to them. Nevertheless, I am confident that we have continued to respond appropriately by delivering effective, responsive services and interventions that ensure children in need are safeguarded and protected.

2.3 During the past year, a number of important CSSIW inspection reports have concluded that, whilst we have a generally robust safeguarding and family support system in place, there were some areas where service improvements could be made. It is in these areas, coupled with areas noted for improvement in the CSSIW 2009/2010 Annual
Performance Assessment Report that we have continued to focus our efforts for continuous improvement.

3. Priorities for improvement.

3.1 In 2009/10, we identified a number of key service priorities for the following year. These can be found in Appendix I along with the actions taken during 2010/11 against these priorities.

GETTING HELP

4. Access to Services

4.1 Bridgend’s Safeguarding and Family Support Services aim to safeguard and promote the welfare of children and young people who are in need in order to safeguard and promote their welfare. Our services are either provided or commissioned to ensure they are accessible to children, young people and their families in order to allow them to achieve their full potential. We have good arrangements in place for children, young people and their families to access help, advice and support around the clock.

4.2 Our county-wide Assessment team, open during normal office hours, receives contacts and referrals from members of the public and professionals in respect of safeguarding and child welfare matters. During 2010/11 the Assessment team received 3,767 contacts, 99.6% of which were reviewed and a decision made within 24 hours of the initial contact. Of these, 1,021 were assessed as referrals where a form of intervention was required. Of the 1,021 referrals received, 1,156 children and young people received and initial assessment of their needs. All other contacts received within the assessment team were provided with advice/information or were referred on to other means of advice and support from appropriate agencies.

4.2 We provide a comprehensive range of information to children, young people and families about the services available, how these can be accessed and what they can expect to receive. The services actively promote feedback which is used to shape and refine the way we do things in order to achieve improvements. Feedback is gathered through questionnaires, face to face consultations and other participation events with children and young people. When children and young people cease to be involved with the service, “SNAP” questionnaires are sent to parents/carers and the children themselves seeking feedback on how they perceived the service they received. A quarterly report is produced that collates and analyses the returned SNAP questionnaires which is shared with managers so they can understand how service users feel about the service they have received.
4.4 Those who are in receipt of either short or long term services are encouraged to participate in all stages of the care planning and review processes. We take a partnership approach to our work with service users and other agencies in order to achieve more effective positive outcomes for children and young people. We have mechanisms in place for case file audit within a quality assurance framework which implicitly consider how well the child and family are being consulted and engaged in relation to care plans. Case notes are also reviewed by managers as a further means of evidence of engagement and consultation with the child or young person in respect to care planning.

4.5 We recognise that we need to improve our processes for disseminating feedback from service users to managers and practitioners in order that this can further influence and inform policy and practice.

5 Assessment

5.1 Over recent years, we have experienced an increase in the number of contacts and referrals where Safeguarding and Family Support Services are required and this year has been no exception. This has resulted in a steady rise in the number of initial assessments that children’s social care staff have been required to complete. In 2010/11, the number of initial assessments completed by the service rose to 1,156 compared with 1,022 the previous year. This is a 12% increase. The impact of this trend is that our performance in terms of timeliness of completing initial assessments within prescribed timescales has been adversely affected. To address this, in October 2010, I restructured our Senior Management Team to provide greater support to front line team managers to address a number of key areas in our performance (See appendix II). Since October 2010, performance around timeliness of initial assessments has significantly improved. For example, the percentage of initial assessments conducted within timescale rose from 36% in October 2010 to 96% in March 2011 (110 out of 115 initial assessments completed in March 2011 were within timescales). We are confident that this performance will be sustained throughout 2011/12.

5.2 The table below shows the improved performance in terms of the timeliness of initial assessments across the assessment/case management teams between September 2010 and March 2011.
5.3 In 2010 we also recognised the need to improve our performance in terms of the percentage of initial assessments undertaken where there was evidence that the child was seen by a social worker. For example, in April 2010, in 66% of initial assessments undertaken, there was evidence that the child was seen by a social worker. Throughout the year however, this percentage saw a steady increase and by March 2011, in 77% of initial assessments undertaken there was evidenced that the child was seen by a social worker. The year end figure evidences that in 79% of all the initial assessments completed the child was seen by a social worker. In those instances where children were not seen alone by a social worker, there were acceptable reasons.

5.4 During the first six months of the 2010/11 year, we were challenged as a result of having a number of social work practitioner vacancies within the assessment team which had led to an over reliance on agency social workers. This is no longer the case as by the end of the year the assessment team was predominantly staffed with permanent social work staff. Whilst the Assessment team is now predominately fully staffed, there are a number of relatively newly qualified social workers within the team who are working to develop their skills to improve both their competencies and confidence. One social worker recently reported that,

- “I feel that I am fully supported as a newly qualified worker in relation to the case load itself as well as the complexities of the cases allocated to me. I feel that I have been given a varied caseload that is beneficial to my development as well as time to consider and reflect upon the decisions made.”
5.5 We recognise the need to constantly embed quality assurance processes into our assessment work, ensuring that assessments are informed by sound professional and evidenced based practice.

6. **Case Management**

6.1 Throughout 2010/11, the number of children and young people for whom we held open as "cases" within our Safeguarding and Family Support teams dropped slightly to 1,220 on the 31st of March 2011 compared to 1,244 in March the previous year. This is mainly down to the fact that in November 2010, practitioners and managers were tasked with identifying cases that could be closed as a result of care plans being met resulting in certain children no longer requiring a service. Additional support was then made available so that practitioners could prepare cases for closure in line with policy and procedure.

6.2 The number of children on the Child Protection Register rose to 163 on the 31st March 2011, compared to 127 on the 31st March 2010. This is a 28% increase. In spite of this increase, all child protection cases have, at all times been, been allocated to a qualified social workers. Throughout 2010/11, 211 children were registered on the CPR and 163 were deregistered, demonstrating significant child protection activity throughout the year. Our performance in terms of child protection review conferences being held within prescribed timescales has consistently been high, with 99% of reviews being conducted within timescales throughout 2010/11. (380 out of 383 child protection reviews were conducted in accordance with regulation.) This is a significant achievement in the context of increasing workloads and the associated demands on the service. Despite the all child protection cases have been allocated to qualified social workers throughout the year.

6.3 The number of Children Looked After (LAC) in Bridgend increased by 15% from 286 on the 31st March to 328 in March 2011. Despite this, at no point did a LAC case remain unallocated. We acknowledge however that there were occasions when LAC cases have not always been allocated to a qualified social worker. Notwithstanding this, we have increased the percentage of our LAC cases allocated to qualified workers from 78% in June 2010 to 84% on the 31st March 2011. We will continue to improve on this in the coming year as all new LAC cases are now allocated to qualified social workers. This will ensure that the varying needs of Looked After Children and Care Leavers are recognised and taken into account through good quality care planning, review and clear decision making.

6.4 Our annual performance in relation to the completion of core assessments within prescribed timescales has remained an issue of concern during 2010/11. Consequently, in November 2011, we introduced a new strategy to specifically focus on dealing with a significant back log of outstanding core assessments. We have also
put in place measures that provide greater scrutiny to the thresholds used across the service to identify when a core assessment is warranted. The outcome of this work has resulted in the vast majority of overdue core assessments being completed thereby allowing social workers to focus on completing new core assessments within timescales. At the 31st March 2011, 58% of core assessments were completed within timescales compared with 32% in April 2010. Whist the annual percentage figure in terms of completing core assessments within timescales has only slightly improved on the previous year we can evidence that a significant number of overdue core assessments have been completed during the past six months. For example, across our four safeguarding teams, the number of overdue core assessments had reduced from 175 in November 2010 to just 9 at the end of March 2011. We consider this to be a significant achievement which will now allow practitioners to focus on completing new core assessments within timescales. The tables below show the progress made in completing open core assessments in each of our four safeguarding teams between September 2010 and March 2011.

6.5 Throughout the last year, we have continued to benefit from having a LAC Heath Visitor working with our safeguarding teams. We have also benefitted from our established working relationship with CAMHS through monthly triage clinics. Fortnightly legal surgeries are held to consider our duty to apply legal safeguards as appropriate in line with the Public Law Outline (PLO).

6.6 We have created a specific project to review our arrangements for our LAC population. This considers permanency planning for Looked After
Children and identifies where alternative plans are more suitable. As part of this project we have reviewed the terms of reference for our “Threshold of Care Panel” to improve the decision making process with regard to when a child should become Looked After and to ensure robust regular review of permanency plans.

6.7 Our performance against the key performance indicator in respect of children having a care plan in place at first placement has significantly improved during 2010/11. Performance at the end of March 2011 was 90% compared with 60% in March 2010. Throughout the year, 87% of first placements of Looked After Children began with a care plan in place. Similarly, there has been notable improvement in recent months in respect of the number of Looked After Children who have a permanence plan in place at their second LAC review, resulting in 93% of Looked After Children having a permanency plan in place throughout the year. This compares to 88% in 2009/10.

6.8 Performance in relation to the reporting of personal education plans (PEPs) being in place for LAC within 20 days of a child starting school has improved. This has resulted from the introduction of a more robust system that better captures compliance and completion of PEPs. We have also provided training to foster carers, designated teachers, head teachers and social workers to support their understanding of the importance of PEPs. At the 31st March 2011, every Looked After Child had a PEP in pace. Whilst performance in relation to the completion of PEPs has improved, we will be introducing quality assurance checks to monitor the quality of PEPs in the coming year.

6.9 During 2010/11, we recognised the need to improve our performance on statutory visits made to Looked After Children within timescale as this has deteriorated during the previous year. Whilst we know that statutory visits have been undertaken regularly and children are being seen, there remains a performance issue in terms of visits being undertaken within statutory timescales and being promptly written up. Although our annual performance in respect of statutory visits written up within timescales rose to 62% compared to last years figure of 55%, we recognise that this is a priority area for continuous improvement during 2011/12. To address this, we have streamlined the process required and senior managers have facilitated team based training for all social work practitioners. In addition, in partnership with our IT and business support colleagues, we have revised our practice guidance and procedures to streamline our statutory visiting processes.

6.10 We have a Permanency Policy in place which was described in a recent CSSIW inspection as “comprehensive and clear and underpins their proactive approach to supporting a range of options for permanency. Staff are clear about the significance of permanency planning in achieving best outcomes for children and the importance of LAC reviews being well planned and on time.” In 2010/11, 97% of LAC
review meetings were conducted within statutory timescales which is a 3% increase on the previous year.

6.11 The number of Children in Need cases open to the safeguarding teams decreased by 12% during 2010/11. CIN plans have been completed throughout the year on an incremental basis and we will be in a position to report more fully on this area in 2011/12 having introduced a new CIN review process.

6.12 During 2010/11 we have continued to embed new team structures within our case management services. The rationale for this change has been clearly communicated throughout the year, both internally and externally. The outcome of these changes has resulted in reducing the points of case transfer, thereby reducing the number of changes of social workers for children and young people. This has improved both consistency in practice and the relationships between children and families with their social worker. This has also helped in reducing the size of caseloads of social workers in three of the four safeguarding teams. We have introduced a caseload weighting scheme to assist managers in their oversight of individual workloads and in allocating new work to practitioners. Within all our safeguarding and family support teams, supervision is afforded to all social workers and is monitored. A system for auditing the quality of supervision is being introduced this year. During 2010/11 78% of supervision sessions took place within timescales.

6.13 We recognise that we need to do more to streamline our assessment/case management processes to avoid duplication of bureaucratic systems and processes. To this end, a project has been set up to review our current practices and processes, known as ‘Workwise’. This is a lean systems technique, and the project is due to commence in April 2011. It will take the form of a whole system review of children and young people’s assessment/case management processes in order to streamline the way contacts, referrals, assessments and case management are managed. The approach will be service user focussed and based on their needs and improving their experience whilst also eliminating unnecessary bureaucratic internal processes.

THE SERVICES PROVIDED

7. Range of Services

7.1 Assessment and Case Management Services

The overall aim of this service is to assess and respond to concerns about children who will not maintain a reasonable standard of health and development without the provision of services; or, who without intervention, could be at risk of suffering significant harm; or, who are disabled.
7.2 As a result of the work of this service, children will be supported, within their families, wherever possible and their welfare monitored so that they are protected from abuse and neglect. This will help them in developing to be confident and caring adults, within their abilities.

7.3 **Family Support Services**

A family support team works alongside the assessment and case management service to provide interventions focussed on intensive support to prevent family breakdown, parenting programmes and behaviour management. It also manages a volunteer driver scheme linked to a supervised contact service where children have been separated from their parents.

7.4 The service supports families by:

- helping to repair relationships between parents and their teenagers
- building confidence in parents and carers of younger children so that the children can thrive and achieve emotional well-being
- enabling separated children to maintain relationships with their families, while permanent plans are made for their future security.

7.5 A family link service and a short breaks unit provide family support to disabled children with complex needs and their families. These services help to maintain children within their families and enhance the quality of life for them, their siblings and their carers.

7.6 Commissioned services such as the family group mediation service, advocacy and young carer's services enable the Safeguarding and Family Support Service to develop an appropriate range of support services for individual children and their families.

7.7 **Accommodation and Regulated Services**

Where children cannot remain with their families, in the short or longer term, these services provide a range of placements either with foster carers or in residential care. Where long term plans require a new permanent family for a child, the Adoption Team recruits and places them with adoptive parents.

7.8 Other solutions that provide permanence for children include residence orders and special guardianship, particularly in relation to care provided by relatives and friends, with the service carrying out assessments and providing financial support where legislation and guidance provide for this and families meet the requirements.
7.9 Bridgend Foster Care Service provides general, relative and regulation 38 (emergency family and friends) foster carers for children accommodated by the local authority. There remains an average of 70 general foster carers providing around 140 placements, 20 relative carers providing 35 placements and 15 regulation 38 carers providing 28 placements.

7.10 As a result of the work of these services, children and young people are provided with emotional, legal and physical security so that they can live safe and healthy lives.

7.11 Bridgend Adoption Service was reconfigured in 2006 to its current format and benefits from a very experienced manager and a team that is staffed by experienced, qualified and knowledgeable staff members.

7.12 The service is responsible for five key areas of service, namely:

1. adopter assessment, support and matching.

2. non Agency Adoptions (such as step parent adoptions)

3. birth Record Counselling and Intermediary Services (a service for adults affected by adoption, birth relatives and adopted people and may include supporting the adopted adult to make contact with their birth family.

4. adoption Support Services (a range of services for those affected by adoption from birth parents, children, relatives and adopters).

5. twin Tracking and Family Finding. This activity works alongside the Safeguarding teams to provide the Adoption Agency role of looking to ascertain whether adoption is the primary plan for the child. Where adoption has been considered as the plan for the child, this activity then expands to also undertake the family finding and placement support.

7.13 Post 16 Service

This service, working alongside case managers, aims to ensure that plans are in place that will enable a young person to achieve a successful transition into adulthood. Young people are supported to seek training, employment and suitable housing. The corporate parenting role of the local authority and its partners ensures support for care leavers up to the age of 21 and 24 if they are in education.

7.14 Young people leaving care are able to access services that will help them to become confident and caring individuals throughout their lives through receiving emotional and practical support from this service.
7.15 **The Independent Reviewing Service**

This service ensures that appropriate, outcome focussed care plans are in place for all looked after children and young people and children who are deemed to be at risk of significant harm and whose names are on the Child Protection Register.

7.16 As a result of the work of this service, the quality of planning for children and young people is monitored and enhanced where necessary. The independent reviewing officers help raise standards and contribute to achieving permanency in a timely way for looked after children, enabling them to make the best of their talents and helping to keep children safe from harm.

7.17 **Child Protection Service (Education)**

This service provides:

- support and advice to schools regarding individual cases
- training to school staff, governors, educational psychologists, ews, access and inclusion service, schools counsellors and the Youth Service;
- information to schools on safeguarding policies, procedures and protocols,
- advice and support to schools and services when dealing with professional abuse allegations.

7.18 **The Youth Offending Service**

This multi-agency service delivers a range of interventions to reduce offending and help support young people involved in the youth justice system. It provides sentence reporting to the courts and oversees orders made following commitment of crimes by young people.

7.19 Children as young as eight can be deterred from committing crimes, learn new skills and benefit from support via the Youth Inclusion Support Panel. The service works closely with the Anti-Social Behaviour Panel to encourage children and young people to benefit from education and employment opportunities and engage in activities that divert them from crime and promote social inclusion.

7.20 One young person, currently being supported by Safeguarding and Family Support and the Youth Offending Service recently wrote the following account in her own words and has given permission for its inclusion into this report;
“8 months ago I used to wake up every morning with a hangover, I used to drink every day, I would drink anything to get off my face, my favourite was vodka, or cider. I drank due to the boredom or at least to escape it. My friends would drink and take different drugs back then, I was addicted to amphetamines and looking back I think all my friends where as well, this lead to the problems I was creating in the house and in Wildmill.

7.21 What has made a difference?

My foster family especially my foster mother, She will listen to me, She will give me advise and direction She will not tell me what I want to hear, it’s straight advise. It took getting out of Wildmill and moving to my faster family to make me realise what I was doing and what shit I was putting myself through.

7.22 8 months ago I felt the YOS did not care for me or perhaps I was not in the right state of mind to take advantage of the support they were trying to offer. Now the support from the YOS is brilliant, they have supported me into activities which I would not have had the opportunity to try, like music sessions at Valley and Vale.

7.23 The YOS and my foster family have helped me see that there is more to life and getting of my face with drink and drugs.

7.24 The music

We have made a CD in the music sessions and I am singing. I was asked to sing in the Valley and Vale AGM. I was shocked to be asked and nervous, I did not believe I could do it but I knew that there were people there who would appreciate it so I thought I would give it a go. I thought the rehearsals leading up to the concert were fun and exciting. At the concert I was bricking it and overwhelmed. During the concert I was nervous but after the first song I was comfortable, I was only asked to do three songs but then I was asked to do another three, when I finished every one was clapping it felt so good.

7.25 How I feel now

I wake up every morning and I have a clear picture of what I want out of life. I want to be successful create something out of music and the arts which I am enjoying at the moment very much.

7.26 I do slip up now and then but I don’t touch drugs, just a drink now and then with my mates.

7.27 This young person, age 15, put together this account as she did not want someone else writing about her. She wanted to do it herself. She has recently started a training course and her work experience placement will be in a Community Arts Centre where her weekly
voluntary sessions have been taking place. During the last four months this young person has found a hidden talent, her voice, not yelling at anyone etc but a beautiful singing voice. What started as a bit of fun for a group of young people, a chance to “have a go” at being a musician, has turned into a life changing experience for her. She has discovered she has a wonderful voice that people want to hear. This has given her self confidence and direction in her life.

8. Quality of Services

8.1 We constantly strive to maintain and improve the quality and range of the services that we provide. In 2010/11, we continued to develop the functionality of the Integrated Childrens System which now delivers a comprehensive set of information that allows managers and practitioners to monitor performance effectively. Management information is produced regularly for managers at all levels is analysed and used to inform decisions and priorities for service change and improvement. We have recently introduced an Adoption module within the ICS that cover CARA and Adoption Plans and reviews.

8.2 The quality assurance framework has allowed us to develop and implement plans relating to the delivery of services. In particular, regular case file audit activity assists in raising standards, improving practice and lends for identifying and sharing good practice. An inspection carried out in 2010 indicated inconsistencies in the quality of core assessment work. Consequently we have provided team based training in respect of core assessments and updated guidance available to all social workers in our interactive practice guide. The quality of core assessments are now routinely considered in case file audits and as stated above the timeliness of the completion of both core and initial assessments have significantly improved during this review period.

8.3 Within the quality assurance framework, we have launched and embedded the supervision policy which now allows for the frequency of supervision to be more accurately recorded, and reported. Should supervision not be taking place on a regular basis, senior managers would be notified and action is taken to redress.

8.4 As with all local authorities, annual inspections are carried out by CSSIW in relation to fostering and residential services and three yearly inspections are undertaken in relation to the adoption service. Our four residential childcare units, Bakers Way, Cartrefle, Maesteg and Pant Morfa and the Fostering Service (encompassing Resolutions Fostering and the Family Link Scheme) have become familiar with the annual inspection regime since 2002 and 2003 respectively. However, 2010 saw the first full inspection for the Adoption Service, which not only considered adoption activity in the Borough but also examined our permanency planning arrangements for children and young people.
8.5 In 2010/11, all Safeguarding and Family Support regulated services in the Children’s directorate were subject to CSSIW inspections. Each inspection activity was reported separately in order to give a summary of the findings for that service. In all cases, full inspection reports have been received and available to the public on the CSSIW web site. A summary of the main inspection findings is given below:

8.6 **Bridgend Foster Care**

Bridgend Foster Care Service was inspected in January 2011 and the report which was received on 7th March 2011 noted no requirements for the service to address. It made two good practice recommendations:

- the review of quality of care report should be further expanded to include the outcomes of consultation and what the service has done to address any issues
- that staff in the fostering service should be provided with mobile phones.

8.7 The Inspector noted that increased staff numbers have impacted positively on the overall stability of the team and has enhanced the service being provided. The inspector was also extremely pleased to note the strong consistent management and positive team morale.

8.8 Of particular note in this inspection was the continued development and success of fostering support services aimed at supporting a range of carers and those they care for with the establishment of a ‘men who foster’ group (covering all three service areas), and the ‘carers own children’ group. The latter, however, has needed considerable input to ensure the much needed group is a success.

8.9 Recruitment and branding for all the services to including Bridgend Foster Care, Resolutions, Family Link Scheme and the Supported Lodging Service continue to be successful with leaflets and advertising activity, such as ‘meet and greet’ events for prospective carers being pivotal to the success for the recruitment campaigns across the service areas.

8.10 Services were noted to now be fully staffed and the quality of the work across services was praised for its “continuing high standards.”

8.11 The continued improvement of the Bridgend Foster Care Service has highlighted greater achievements in areas of matching children to longer term placements, planned placements for children entering the Looked After System and move on to matched placements for children who were accommodated in an emergency situation. Bridgend Foster Care processes have been scrutinised and it is noted that preplacement planning meetings, anti disruption meetings and the commissioning of the Action for Children Service aimed at preventing placement breakdown are all positive developments for the service.
The inspector noted, however, that statutory visits by Safeguarding Staff were not consistent and timely and needed to improve.

8.12 **Bakers Way**

Bakers Way, a service that provides respite care for young people with a learning disability, some of whom also have a physical disability, was inspected during July 2010. The Inspectors found that the unit had benefitted from a second year of a stable management with staff well supported, regular supervision was regular and good practice noted.

8.13 **Occupancy levels** had increased and children and young people were encouraged by the staff to participate in activities in the home, and given choices about the meals and how they spent their time.

8.14 The paperwork has improved with case recordings being more robust, care plans and core assessments were up to date and on file, as were risk assessments which were reviewed and changed in line with the child’s needs.

8.15 There was a view expressed that the referrals to the unit were becoming more complex with an increase in young people with autism, requiring further training for the staff which they were said to have embraced. At the time of the inspection, 28 of the 40 children using the service were diagnosed as being Autistic.

8.16 The inspector’s report identified positive outcomes throughout with no requirements for the service to consider. One good practice recommendation was made that recommended that staff should receive specialist training in Autism.

8.17 **Cartrefle, Maesteg and Pant Morfa residential childcare units.**

*Cartrefle* was inspected in December 2010. Earlier in 2010, inspectors commented that the home benefited from having an experienced registered manager and an established staff group, all of whom are registered with the Care Council for Wales. The report was positive throughout with only one good practice recommendation and one requirement.

8.18 The report set a requirement that the Registered Manager of the unit should have the ultimate say in relation to admissions. This has been addressed and is now common practice at the unit with a significant positive impact being noted by the manager and staff.

8.19 The more recent inspection was very brief with one good practice recommendation related to the document for the monthly key working report needing to be reviewed. There were no requirements at the last inspection.
8.20 **Maesteg Children’s Home**

The most recent inspection took place during June 2010. Both the 2009 and 2010 inspections have been positive with minimal good practice recommendations. There were common themes of good practice which include that there were good processes for providing information on the service to both young people and agencies. Admission processes were improving and that young people’s files were of a very good standard.

8.21 The inspector commented on the hard work of staff in maintaining a culture where young people attend their educational placement. Young people felt settled and happy in placement. It was also noted that young people felt confident that they could speak out against bullying.

8.22 The inspection noted that the staff team consisted of well qualified and experienced members who work actively to maintain placements. There is a strong team ethos and staff felt supported working in a challenging environment.

8.23 Both inspection reports comment on the physical environment, reporting it to be well maintained and the unit is well run. The staff report that there is good management support to the team. A good practice recommendation related to the need to undertake a training needs analysis including considering the need for refresher training on restraints and Key Work documentation needed to be reviewed.

8.24 There were no requirements identified within the 2010 inspection.

8.25 **Pant Morfa Children’s Home**

This unit was inspected in April 2010 and November 2010

8.26 Over the two inspection periods the unit had just seven good practice recommendations. Good practice recommendations made included a similar theme to those of other units in that the manager should have the ultimate say on who should be admitted to the unit. Menus for young people needed to record their balanced diet and for those young people who are not in education further exploration into provision on site was suggested. There was also a recommendation that some upgrade/ refurbishment be considered to the kitchen/dining room. There was just one formal requirement to be addressed, which was in relation to the need to notify CSSIW of certain activities.

8.27 **Bridgend Adoption Service**

8.28 This service was inspected in July 2010 and was, in essence, in two parts, both conducted at the same time with inspection activity overlapping. The Adoption Service was looked at in its entirety as were
the local authority’s permanency planning arrangements for looked after children.

8.29 The inspectors stated that the adoption service “is staffed by a knowledgeable and experienced team manager who has put into place a sound structure which has led to an improved quality and more productive service. The staff team are experienced and knowledgeable and the service benefits from a stable workforce”.

8.30 The inspectors noted many good practice issues such as the range of adoption support, timely intervention of the adoptions service in case planning and the quality of reports both for children and adopters with examples of excellent work on files. The inspectors also noted areas that could be improved and made good practice recommendations such as the introduction of a permanency panel, review of the monitoring of work to ensure timeliness. The adoption manager highlighted prior to the inspection that there were three key areas for improvement/development which would be addressed in the coming year. These included the review of policies and procedures, review of the adoption support service and the implementation of a quality assurance framework. All three were accepted by the inspectors and largely cover the areas of good practice recommended by the inspection team.

8.31 There was one requirement highlighted which has already been addressed. This related to the training needs of the adoption staff in relation to child protection.

8.32 **Permanency planning arrangements.**

The inspectors noted that at the time of the inspection there had been a recent reconfiguring of the safeguarding teams and that this was having an impact on some teams struggling with increased work demands and new areas of responsibility.

8.33 The inspectors noted that whilst care plans were articulated the evidence of permanency planning was not always present. The inspectors made some good practice recommendations to include the need for the local authority to consider the introduction of an early alert and management of risk system to ensure this results in improved outcomes for care planning especially in relation to permanency for all Looked After Children. Inspectors recommended that senior management should consider how they can effectively monitor the Looked After Children population with regard to both managing drift and forward planning. The re-launching of the Looked After Children Project, with the Councils Supporting Vulnerable 2 Programme, has begun to address this latter issue.

8.34 The inspectors highlighted the monitoring of cases and noted that the high workloads of the Independent Reviewing Officers should also be
addressed in order to ensure sufficient capacity to meet demand.

8.35 The good practice recommendations included a suggestion for the creation of a permanence panel and systematic permanency planning and monitoring to be implemented. In addition they recommended the quality of work be monitored and training for staff on recording to be considered.

9. Transition

In order to support disabled children in having a smooth transition from Children's Services to Adult Services, we implemented a “Transition Protocol” in 2008. This was reviewed in February 2011 by the transition strategy group. This oversees the transition process and has improved multi agency planning. A transition panel meets regularly to agree transition pathways for individual children and young people and the transition team in Adult Services, established in April 2010, considers referrals and works closely with the disabled children's team. Each young person in transition now has an ICS care plan, which is reviewed regularly to enable a smoother, timelier transition.

THE EFFECT ON PEOPLE’S LIVES

10. Safeguarding Vulnerable Children and Young People.

The Children Act 2004 makes it clear that it is everybody's responsibility to safeguard and promote the welfare of children and young people. In Bridgend we have established a local safeguarding children board (LSCB), the purpose being to:

- co-ordinate the work done by various agencies
- ensure that the work the agencies do is effective.

10.1 The Board is made up of representatives from agencies who work with children and their families in Bridgend and it meets every three months. These agencies include the local Council, the Police, the Health Board, schools, voluntary organisations and other relevant bodies.

10.2 The main purpose of the LSCB is keeping children and young people safe within their families and their communities. The Bridgend LSCB is well established and is now in a stronger position to drive forward its vision and co-ordinate its activities following the recruitment of staff deployed specifically to support and carry out its programmes of work.

10.3 Some of the main challenges for 2011-2013 and beyond are:

- to reflect on and cascade the lessons learnt from the Serious Case Reviews conducted in Bridgend,
• to develop the Board’s performance management framework and

• to implement the recommendations made by the National Assembly for Wales Health and Well Being Committee.

10.4 These processes and guidance are part of a wider remit which can only enhance safeguarding activity and accountability throughout agencies and partners working across the county borough.

10.5 Bridgend LSCB is seeking to continue to improve its communication with partners, stakeholders and the wider community. One of the primary means of communication will be through the expansion of the BLSCB website www.bridgendlscb.org.uk which has been targeted as an area for development, as this is often the first point of contact for those individuals and groups wanting to know more about the framework, activities and plans for the future. There will continue to be an emphasis on relationships and communications with other partnerships, in particular, the Children & Young People’s Partnership and its sub groups and the Area Adult Protection Committee.

10.6 Our LSCB has a well established training sub group that coordinates safeguarding training on a multi-agency basis.

11. Promoting Independence and Social Inclusion

11.1 BCBC’s Safeguarding and Family Support Service continues to provide excellent support and services for young people leaving care and entering a life of independence. In order to ensure that young people leaving care are able to achieve secure living arrangements, good training, employment and education opportunities we have created new initiatives to enable those leaving care to be afforded apprenticeships, traineeships and work placement opportunities within BCBC.

11.2 We continue to monitor performance in respect of young people formally looked after with whom the authority is in contact at the age of 19 and known to be engaged in education, training or employment.

11.3 We have established systematic joint planning and decision making for disabled young people going through the transition to adulthood and every young person has an individualised ICS care plan which is regularly reviewed to enable the smooth transition into adulthood. In both children’s and adult services a range of services have been developed to provide support for young people into independent living. These include rest-bite care, play schemes, youth clubs, in addition to accommodation and day care provision where necessary. Many of these services have been developed in partnership with health and the voluntary sector to ensure there is both a range and choice of services available.
12. **Support to carers**

In order to support carers, we aim to provide services that can be easily understood and accessed by service users at a time and place which suits their needs. To improve service availability to include a rapid response arm, more effectively, Family Support Team (FST) structure is being revised, following a pilot scheme. To improve awareness of social workers of the services available for service users, information is being revised.

12.1 To improve access we now offer weekend work. Weekend referral forms and a cover system have enabled the safe operation of weekend visits. Social workers will be able to access services more quickly on behalf of their service users, as their understanding of services available improves. Service users will receive a more rapid response when in urgent need. Rapid response allocation within one day data 60%. We offer support to service users on the weekend when other services may not be available. 288 sessions were offered over the year to families who would include fathers, working families who may not have previously received any support.

12.2 Our multi-agency support panel (MASP) continues to meet on a monthly basis, allowing one point of access for families with social workers.

12.3 Disabled Children’s strategy has been developed and an action plan finalised January 2011. Improved multi-agency collaboration and joint planning –improved understanding of respective roles and responsibilities of partner agencies. The aim being to ensure the service user has access to the most suitable service. “right person, right place at the right time”.

12.4 Transition panel meets on a bi-monthly basis since July 2010 as opposed to the previous arrangements for meeting monthly. This is due to the panel having successfully discussed and agreed plans for disabled young people aged 14-18, and the backlog, therefore, being reduced.

12.5 A successful bid for Welsh Assembly Government / European Social Fund grant to develop transition key working for disabled young people likely to become N.E.E.T. (not in education, employment and training) and unlikely to meet eligibility criteria for adult service provision.

**DELIVERING SOCIAL SERVICES**

13. **Workforce Management and Development**

Like many other councils in Wales, we have continued to face challenges in recruiting and retaining suitably qualified and experienced
social workers. In order to attract new staff, we have increased the level of activity in raising the profile of social work as a career and attended various events aimed at engaging with social work students, including job fairs, workshops on recruitment and continued professional development. We have closely monitored vacancy, turnover and starter rates of social workers. Across our Safeguarding and Family Support social work teams throughout the past year, there have been 16 starters and 11 leavers (to end of Jan 2011) compared to 15 starters and 14 leavers in 2009/10. The current vacancy rate is 14.2% (to end Jan 2011) compared to 15.9% in 2009/10. However, following successful advertising and recruitment activity during February and March 2011, we are confident that by June 2011, all our social work teams will be fully staffed with permanent practitioners, significantly reducing our dependency on agency social workers. The BCBC website has until recently had a permanent advertisement for staff and has attracted 22 applications for social work positions of which 5 appointments made; and 7 applications for senior practitioner positions of which 2 appointments made. Whilst the leaver rate remains of concern, there were 10 leavers in the first 6mths of the year whilst only 1 in the second half (to end Jan 2011).

13.1 Throughout 2010/11, we have continued to promote training and development opportunities to equip our social care staff, social workers, managers and foster carers with the necessary skills and knowledge which are essential to ensure effective safeguarding of children and young people. We have ensured that staff and foster carers across the service have had access to significant training at an appropriate level to their needs based on a robust training needs analysis. Staff are required to access core training programmes and any training that is put on in response to local and national changes in policy, procedures and legislation. Staff are also supported to access other specialised training that aims to enhance their knowledge and skills within their role and function. Between April 2010 and September 2010 888 social care staff attended training events. 222 foster carers attended training events.

13.2 During 2010/11, 6 child care social work staff were pursuing post qualifying training awards and there was an increase in the number of child care staff achieving NVQ qualifications in social care at levels 3 and 4.

13.3 An interim management structure has been implemented following the internal appointment of an interim Head of Service. A number of existing managers have been allocated additional responsibilities and new line management arrangements. The new arrangements have set out to address some of the capacity issues identified within the former management team arrangements. This has meant that there is more capacity for managers to spend time on key service performance management issues as well as the management and deployment of employees.
13.4 **Performance Management, Systems and Information.**

DRAIG has continued to be developed by the WALES System Consortium (WSC) and as the development contact with the Software provider comes to a close, the final release of DRAIG has recently been tested and will be implemented in Bridgend in the coming months. Bridgend’s Head of ICT acts as Society of Information Technology Managers (SOCITM) advisor to the WSC and is playing a key role in assisting the WSC in preparing to identify a suitable replacement for DRAIG for a procurement process to replace DRAIG.

13.5 In safeguarding and family support the continual development of DRAIG has ensured that the service remains ICS compliant. During 2010/11 the following developments have been achieved through further development of DRAIG:

- Implementation of Adoption Module including CARA
- Implementation of ICS exemplars including CIN
- Review of all ICS exemplars working on DRAIG including their modification to include CIN Census requirements.
- Initial planning stages to identify costs and benefits of implementing the Care Planning module.
- The introduction of an Adoption module has provided service benefits including improved record keeping. A range of new management reports including validation reports to assist team managers to identify when assessments and reviews have either not been completed or not completed in a timely manner.

13.6 As a result of the DRAIG developments, a greater level of performance and management reports are produced for teams and the service as a whole. This has enabled the senior management team to have a more effective performance management focus whilst also feeding in variation reports to the corporate quarterly business review. As a result of the improved reporting performance information senior managers have put in place programmes of work to improve performance setting targets and aiming for a quarter upon quarter improvement. An example of how this has worked well is in the monitoring of core and initial assessment compliance in terms of their completion within timescales.

13.7 Performance trend reports are also prepared on a monthly basis, which has enabled close monitoring of performance that has contributed to maintaining or improving the majority of national performance measures.
13.8 Performance management arrangements are increasingly more embedded into family support teams. However, there is a need to continue to assist staff to further understand the agenda of change that is driven by efficiency and performance. It is essential that management information is ‘owned’ across the service and that it is effective in evidencing why we are making changes and what is being achieved.

13.9 A project plan has been developed to oversee the steps required to identify a suitable replacement for DRAIG. We have had a development contract with Careworks for the delivery of DRAIG but are now moving into a support and maintenance contract which will come to an end in March 2014. It will be important to ensure that the replacement system is able to meet the future needs of the service as priorities change and we move further into person centred/directed approaches and away from assessment care management processes.

14. Quality Assurance

Within safeguarding and family support service we have established a ‘quality assurance project team’ which has continued to develop and implement a work plan relating to the delivery of the division’s quality assurance framework. The QA project team consists of managers across the directorate (business support and safeguarding and family support); there is also close liaison with colleagues in organisational development; the LSCB audit and evaluation sub group has also developed tools that are consistent with those used by the division and are working towards inputting multi agency audits on DRAIG.

14.1 Case file audits are routinely carried out by business support staff, team managers, senior managers and independent reviewing officers (IRO). IROs also complete feedback forms to social workers and team managers following LAC reviews and case conferences. On completion of individual audits two action plans are developed. The first relates to case management issues and outlines the action that is needed to improve services provided to the user. The second relates to the case manager and highlights any personal development needs and how these will be responded to through supervision training etc. Case file audits have highlighted issues about practice in relation to individual cases for which remedial action has been taken. Multi agency audits have also highlighted cases where lessons can be learned and used to improve future service delivery.

14.2 The service’s supervision policy has been launched and implemented with the frequency of supervision being recorded on an electronic database.

14.3 Staff receive supervision on a regular basis and should this not be taking place the system draws this to the attention of the relevant senior manage.
14.4 In 2011/12 we will develop a more systematic approach to collating the outcomes of audits in order for themes and issues to be identified and remedial action taken across the service. We will also introduce an audit tool which will evaluate the quality of supervision.

SHAPING SERVICES

15. Planning and Partnerships

We have continued to progress the development of a strategic framework for integrated working which will build upon and complement the 4-5-6 Model and Family Support Strategy. The framework will support the identification of potential hub locations in order to develop services in localities and achieve ‘teams around the child / family.’

15.1 The purpose of the framework will be to give a strong steer on how multi-agency working is to become fully effective in Bridgend County so that services are seen to be working as one. In doing so they will:

- recognise and understand the needs of the children and young people of Bridgend County;
- seek to prevent problems arising;
- be quick to respond when the need arises;
- give a single point of access to services;
- provide help and support closer to the point of need;
- break down barriers between agencies;
- be integrated, inclusive and of high quality;
- support parents.

15.2 The development of the framework links closely to other projects in the Supporting Vulnerable Children 2 Programme (SVC2) which includes the Connecting Families project, a project in each of the three areas (community locality networks) in Bridgend County to establish multi-agency teams and community hubs, an ICT project to facilitate information sharing and integrated working, a project to improve the lives of Looked After Children and the implementation of the redesign of residential child care provision.

15.3 The Bridgend Children and Young People’s Plan, sets out the main shared priorities for a range of services and indicates the outcomes we wish to see in terms of improvements in the lives of children and young people. These are expressed in terms of the 6 outcomes for children
and young people which will change their lives for the better. They embrace the Welsh Assembly Government’s 7 core aims. They inform and underpin the rationale for developing principles of integrated working and setting up multi-agency teams.

15.4 The framework is being designed to ensure that each child in need i.e. one for whom some or all of the outcomes are not being met, has a team to support him or her. The forms of working set out in the framework will be geared to supporting children and young people with additional needs at Tier 2 so reducing the number of children and young people who require that more intensive level of support provided by a team around the child. They are designed to bring about continuing improvement for all and to bring an appropriate focus on the children and young people that need support and improvement most i.e. the most vulnerable. Whatever the level of need, therefore, integrated working practices will ensure that:

- support is designed around the needs, progress and development of individual children;
- there is a strong emphasis on prevention and early intervention, turning this from an ambition into actual practice; and
- practitioners reconfigure their services to reflect the particular backgrounds of different groups of children and communities and offer children and young people a seamless service.

15.5 During 2011/12, we will implement the “Connecting Families” project through the LSB partnership. The objectives of this project are to develop and implement a new model of service to address the needs and behaviours of families who place the most demands on public services, i.e. largely Tier 3 and 4, and have a disproportionate impact upon the communities in which they live.

15.6 The overriding objectives when creating this multi-agency service will be to:

- strengthen and improve outcomes for children and their families
- improve integrated work practice and reduce duplication of resources
- reduce disorder and crime in our communities
- reduce the longer term costs to public services

15.7 This project will focus on the creation of a co-located multi-agency team to work intensively with high demand families within the County
Borough of Bridgend. It is anticipated that this service will be a wrap-round provision to complement existing services. The Bridgend Local Service Board and the BLSB Delivery Board will form the top level of governance for this project. Connecting Families moved into its operational phase on 4\textsuperscript{th} January 2011 with the appointment of the service manager. ESF funding has been secured to fund part of the structure. A service specification has been written and agreed with partner agencies. Job descriptions have been written and agreed for a number of the posts within the team, and a number of agencies have progressed their arrangements for secondments in kind. Work is under way to identify a property and an IT system for the team. A brief for the evaluation of the project is being devised.

15.8 Progress has been made on the residential review project and there has been agreement to: retain Cartrefle and Pant Morfa as children’s homes to become the transition unit and complex needs unit respectively; and decommission Maesteg children’s home. The aim of the residential review is to identify whether a residential service can improve the outcomes of children and young people who become looked after.

PROVIDING DIRECTION

16. Corporate and Political Support

BCBC’s Corporate Parenting Cabinet Committee was established in 2008 and has continued to provide a vehicle for elected members to consider what needs to be done in relation to primarily, the well-being and progress of Looked After Children and Young People. It has sought to receive information specifically relating to Looked After Children and the Authority’s Corporate Parenting role. The Committee has continued to meet bi-monthly to consider a range of projects and developments associated with Looked After Children and Young People who have left care or are about to leave care. Throughout the past year, the committee has received reports including information and updates on the Looked After Children population, the development of a new integrated post 16 service, the authorities redesign of its residential care, the apprenticeship, traineeship and work experience schemes for Looked After Children and former Looked After Children and various policies, procedures and performance in relation to Looked After Children and Young People.

16.1 Members of the Corporate parenting Committee have continued to benefit from training on their corporate parenting responsibilities to ensure that Members are better informed on the range and scope of the services in place for Looked After Children and Young People. There has been an active interest from Members to learn about the issues facing young people leaving care and a continued commitment
as Corporate Parents to have the same aspirations for Bridgend’s Looked After Children as parents would for their own children.

17. Management Structure

As stated above, in November 2010, an interim management structure was established following the internal appointment of an interim Head of Service. A number of existing managers have been allocated additional responsibilities and new line management arrangements. The new arrangements have set out to address some of the capacity issues identified within the former management team arrangements. This has meant that there is more capacity for managers to spend time on key service performance management issues as well as the management and deployment of employees. It has also provided developmental opportunities for a number of staff. The interim management structure can be found at appendix II.

18. Summary – forward view of 2011/12

This report highlights the full range of safeguarding and family support activities that have taken place in Bridgend during the past year. Whilst it notes a number of areas where improvements have been made and evidenced, we can not become complacent as we continue to face the relativity of restraints on resources, within the context of increasing work demands. This will require us to work smarter and more efficiently to ensure our resources are targeted at those most in need and where we can evidence value for money. Our biggest resource will continue to be our staff and whilst we have welcome many new recruits to the service and reduced our reliance on agency staff, we recognise the need to fully induct and support our staff and we grow a skilful and mature workforce. The challenge we face in the coming year will be to continue to continue our efforts to focus on improving some key areas of our performance, which will ultimately improve better outcomes for the children and young people we serve.
Appendix I

At the close of 2009/10 we identified a number of key priorities for the service to address in the coming year. The chart below lists these along with the action we have taken to progress them.

<table>
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<tr>
<th>Supporting Families: Priorities</th>
<th>Action taken to address this priority in 2010/2011</th>
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<tbody>
<tr>
<td>Better co-ordinate parenting programmes across the county borough</td>
<td>The &quot;Family Support Outline (FSO)&quot; has been piloted over the past year. This has been designed to examine parent’s ability to understand their child’s needs and the actions required to meet these. The tool has been implemented on 35% of cases open to the Family Support Team and 100% of family support staff have been trained in the use of FSO. Two practitioners within the Disabled Childrens Team have completed “early bird” and “early bird plus” training programmes which allowing them to participate in the delivery of multi-agency specialist parenting programmes to parents/carers of children diagnosed with ASD/Autism.</td>
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<tr>
<td>Implement outcome based planning</td>
<td>Managers and practitioners within Safeguarding and Family Support have improved their understanding their responsibilities to improve outcomes for looked after children, children in need and children on the child protection register. An “Outcome Based Accountability” (OBA) programme was rolled out during 2010/11 to embed a culture of outcome based strategic planning, commissioning and service delivery. This has improved understanding of outcome based planning, commissioning and performance management.</td>
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| Further progress the integration of family support provided by the local authority and a wide range of partners | DCT have continued to offer weekly surgeries for children, parents, carers and professionals at Heronsbridge school and links have been made with parent support groups. Parents and carers are represented within planning and development process. Strategically we have continued to progress the development of a framework for integrated working which will include 4-5-6 Model and Family Support Strategy. The framework will support the identification of potential hub locations in order to achieve ‘teams around the
The purpose of the framework will be to give a strong steer on how multi-agency working is to become fully effective in Bridgend County so that services are seen to be working as one. In doing so they will:

- recognise and understand the needs of the children and young people of Bridgend County;
- seek to prevent problems arising;
- be quick to respond when the need arises;
- give a single point of access to services;
- provide help and support closer to the point of need;
- break down barriers between agencies;
- be integrated, inclusive and of high quality;
- support parents.

The development of the framework links closely to other projects in the Supporting Vulnerable Children 2 Programme (SVC2) which includes the Connecting Families project, a project in each of the three areas (community networks) in Bridgend County to establish multi-agency teams and community hubs, an ICT project to facilitate information sharing and integrated working, a project to improve the lives of Looked After Children and one to redesign residential child care provision.

The Bridgend Children and Young People’s Plan sets out a number of priorities for the different services to take on and indicates the outcomes we wish to see in terms of improvements in the lives of children and young people. These are expressed in terms of the 6 outcomes for children and young people which will change their lives for the better. They embrace the Welsh Assembly Government’s 7 core aims. They inform and underpin the rationale for developing principles of integrated working and setting up multi-agency teams.

The framework is being designed to ensure that each child in need i.e. one for whom some or all
of the outcomes will not be met, has a team to support him or her. Such a team should not be one which is prone to frequent and unsettling change but one with which the child and the child’s family can identify and build a relationship. The forms of working set out in the framework will be geared to reducing the number of children and young people who require that more intensive level of support provided by a team around the child. They are designed to bring about continuing improvement for all and to bring an appropriate focus on the children and young people that need support and improvement most i.e. the most vulnerable. Whatever the level of need, therefore, integrated working practices will ensure that:

- support is designed around the needs, progress and development of individual children;
- there is a strong emphasis on prevention and early intervention, turning this from an ambition into actual practice; and
- Practitioners reconfigure their services to reflect the particular backgrounds of different groups of children and communities and offer children and young people a seamless service.

**Safeguarding:**

<table>
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<tr>
<th>Improve the timeliness and quality of assessments through better management of workloads and greater stability in the front line teams</th>
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<tr>
<td>We continued to ensure that robust screening processes are in place to ensure that contacts and referrals made to the service are appropriately assessed and responded to in a timely manner. Performance in respect of the number of referrals received in a month and where a decision was made within 24 hours has been consistently high and at 30/03/2011 this was at 99.6%</td>
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In 2009/2010, it was recognised that performance in relation to the timeliness of both initial and core assessments was an area that required significant improvement. In October 2010, we introduced a number of interim changes to the senior management structure to ensure greater support to front line team managers, which would allow them to improve their scrutiny and management oversight in terms of both the quality and timeliness of initial
and core assessments. This has resulted in a backlog of overdue assessments being completed and a significant improvement noted in the number of assessments completed within prescribed timescales. For example, in terms of completion of initial assessments completed within timescales, these rose from 36% during the month of October 2010 to 96% during the month of March 2011. In respect of timeliness of completion of core assessments, performance continues to rise. In March 2010 the percentage of core assessments completed within the times reached a low of 27%. In March 2011, this percentage rose to 58%.

To ensure that quality in assessments is maintained and scrutinised, we have introduced routine quality assurance audits undertaken by managers and peer audits. Whilst progress has been made in the timeliness and quality of initial and core assessments, we recognise that this is an area we need to continue to focus on in the coming year. To assist in this process, we have recently created and appointed to the post of “Performance and Development Officer”. One of the key responsibilities of this post is to maintain a consistent focus in relation to key performance matters, and especially those we have identified as requiring continuous improvement.

<table>
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<tr>
<th>Task</th>
<th>Description</th>
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<tbody>
<tr>
<td>Ensure that our records evidence effective child protection processes and that the wishes and feelings of children have been listened to</td>
<td>During 2010/11 we have continued to refine our ICS exemplars to ensure that they now have mandatory data fields to record whether the child has been via the assessment process. LAC, CP, and CIN. ICS exemplars now capture children’s wishes and feelings and ensure they are recorded. Independent reviewing officers also routinely meet with children and young people to elicit their wishes and feelings in respect of their care planning. The result of these initiatives is improved performance in terms of evidence that children’s wishes and feeling are being recorded.</td>
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<tr>
<td>Establish training for chairs and authors of management and overview reports regarding serious case reviews</td>
<td>Training was established and delivered to prospective authors of serious case review reports on the 15th of February 2011. 9 senior officers from a range of agencies attended. This has resulted in the LSCB now having a greater pool of trained authors to call upon, should the need arise.</td>
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<tr>
<td>Finalise and implement the multi-agency protocol/guidance on the management of</td>
<td>A multi-agency protocol and guidance is in the final stages of being produced by the LSCB</td>
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<tr>
<td>neglect</td>
<td>training sub group. An LSCB conference on neglect was delivered in March 2011 when 190 delegates attended from a range of safeguarding agencies and the feedback was very positive.</td>
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<td><strong>Corporate Parenting:</strong></td>
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<tr>
<td>Revise the materials used to record children's views prior to holding a case plan review</td>
<td>Children’s views are now recorded on ICS documentation prior to LAC, CP and CIN reviews. Whilst not all children and young people attend their reviews, those that do also have their wishes, feelings and views elicited by independent reviewing officers either prior to or during the reviews.</td>
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<tr>
<td>Increase the number of local authority foster carers through further targeted marketing and support for existing foster carers</td>
<td>During 2010/11 we have increased the overall foster care population by 12, which include 5 new mainstream sets of carers and 7 relative fostering households. We have benefitted from a level of consistent fostering enquiries made and applications to the service, which coupled with a stable workforce within the fostering team, has resulted in an increase in carers availability and placement choice, lessening reliance on IFA’s.</td>
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| Accelerate work and training opportunities within the council for care leavers | During 2010/11 we have embraced the opportunity to support our young people leaving care to access appropriate development and employment opportunities through an apprenticeship, traineeships and work experience opportunities. Funding was secured from the “Best Change Programme” which is a joint funded initiative supported by the Welsh Assembly Government (WAG), Business in the Community (BitC) and leading businesses. This programme is a structured and holistic activity which aims to work alongside the local authority to identify suitable young people, provide them with pre placement training, match their specific interests and abilities to local businesses and to support and mentor the young people while on the programme. This is now at an advanced stage and prospective young people have been interviewed for suitability for the scheme and have attended a two day group training event aimed at improving confidence, self esteem and communications skills. When these young people take up a work placement, they will have an individual action plan, setting out with and for them what further work experiences opportunities or training initiatives they will be
invited to engage in.

**Traineeship:**
This scheme was re-launch in November 2010 and subsequently one young person was has commenced her post in January 2011 in the Restorative Justice Anti-Bullying Initiative, located in the Bridgend Youth Offending Service. This young person will have the opportunity to work towards achieving recognized qualifications in either youth work or youth justice, depending on their preference.

**Work Experience:**
A number of work experience placements have been secured and three young people have successfully engaged in work experience placements. All three have been considered for other opportunities following their work experience.

**Apprenticeships:**
We have been able to secure one apprenticeship opportunity for a young person and we are currently recruiting to this post.

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<tr>
<th>Improve the range and choice of placements by collaborating with the regional commissioning unit established by a coalition of 10 local authorities in South East Wales and implementing the residential services review</th>
<th>Improvements have been made in the authorities’ access to a greater range and choice of placements through the SEWIC collaboration. In Bridgend we have established a placements team to co-ordinate all placement requests in conjunction with SEWIC. Individual Placement Tendering forms have been refined to ensure that children requiring placements are appropriately matched with carers who will be able to meet the intended outcomes for the child.</th>
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<tr>
<td>Improve the tracking and reporting of educational progress of looked after children by integrating the education and social services databases and using data to track looked after children at key stages 2 and 3</td>
<td>We have a well established “Looked After Children Education Team” (LACE) which has worked to improve joint working between professionals within the safeguarding and family support service and educational settings to progress performance in key performance indicators linked to the education of Looked After children. To complement this work, we have improved systems for capturing compliance and completion of Personal Education Plans (PEPS). This has led to improved performance in terms of timeliness of the completion of PEPS. In addition PEP forms</td>
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<td><strong>Strengthen the role of independent reviewing officers in reviewing and assessing the quality of care planning</strong></td>
<td>have been redesigned to be more child friendly to assist their engagement within the process. We have also provided additional support to Looked After Children through introducing monitoring arrangements for those children undertaking key stage 2, 3, 4, and transition. We are now utilising additional support from Learning Support Officers and increasing the frequency of PEP reviews. Training has been delivered to designated teachers, head teachers, foster carers, residential staff and social workers to support their understanding of the PEP process and their importance.</td>
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<tr>
<td><strong>Youth Offending:</strong></td>
<td>Following a review of capacity of the IRO team an additional IRO was recruited to the team, which is now fully staffed. This has resulted in improvements in the timeliness of LAC reviews. IRO’s engagement with children and young people as part of the reviewing process and children and young people’s wishes views and feelings inform care planning. IRO’s have led the review of the existing DOH consultation papers in favour of the development of more user friendly paper tools.</td>
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<tr>
<td><strong>Evaluation of the prevention panel in terms of measurable outcomes</strong></td>
<td>IRO’s are now more involved in quality assurance aspects of their role and routinely carry out case file audits. Feedback forms are now completed at the end of LAC reviews and case conferences that seek views concerning review preparation, process and quality of documentation.</td>
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<tr>
<td><strong>Improvement in the quality of risk assessments by identification of officers who will be responsible for monitoring all assessments</strong></td>
<td>The panel has evidenced a reduction in non compliance and reoffending of those leaving custody. This is a positive outcome for young people and potential victims of crime. The reduction in the use of custody has further benefits as the cost of the secure estate takes resources away from community based interventions therefore a reduction in custody leads to an increase in resources for community based interventions.</td>
</tr>
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<td></td>
<td>The YOS was inspected in 2010 and the completion of ROSH was a major focus of the inspection process. Every young person subject to statutory order has an asset assessment and</td>
</tr>
</tbody>
</table>
If certain criteria are met, then a ROSH assessment (risk of serious harm to others) is triggered. The case officer completes the assessment and this is countersigned by management. Depending on the level of risk a risk management plan must be agreed and Multi Agency Public Protection Arrangements and processes followed if appropriate. A ROSH screening exercise in all cases inspected and a full ROSH completed in 85% where one was required. At the time of the inspection there was an absence of an operational manager post resulting in a lead practitioner assuming responsibility for areas of practice, ROSH being one of them. An operational manager has subsequently been appointed and has taken up his post.

### Reduce the use of custody by developing an action plan based on the findings of the National Association for the Care and Rehabilitation of Offenders (NACRO) Custody Study which is currently underway

The launch of the Prevention Panel in November 2009 brought with it the opportunity to share resources and jointly commission resources through the panel membership and funding streams than can be accessed through the multi agency approach. The panel has already evidenced the reduction in non compliance and reoffending of those leaving custody. This is a positive outcome for young people and potential victims of crime. The reduction in custody has further benefits as the cost of the secure estate takes resource away from community based interventions therefore a reduction in custody leads to an increase in resources for community based work.

An action plan to reduce the use of custody has been agreed by the YOS management Board in relation steps being taken by the YOS, however, this will be further informed by the NACRO study which is due to be published in April 2011.

### Consolidating management and staffing capacity

In November 2010, an interim management structure was established following the internal appointment of an interim Head of Service. A number of existing managers have been allocated additional responsibilities and new line management arrangements. The new arrangements have set out to address some of the capacity issues identified within the former management team arrangements. This has meant that there is more capacity for managers to spend time on key service performance management issues as well as the management
and deployment of employees. It has also provided developmental opportunities for a number of staff. The interim management structure can be found at appendix II

<table>
<thead>
<tr>
<th><strong>Transition to Adulthood for Disabled Young People &amp; Young Carers:</strong></th>
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<tbody>
<tr>
<td><strong>Evaluate the effectiveness of out transition protocol to ensure that the improvements we expected are being achieved</strong></td>
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<tr>
<td>The transition protocol, introduced in February 2008 was reviewed in February 2011 at a multi agency workshop. The transition strategy group and a sub group have continued to meet to oversee the transition process and enable improved multi agency planning. The transition panel has also continued to meet monthly to agree the transition pathway for individual children and young people.</td>
</tr>
<tr>
<td><strong>Establish a transition team within adult social care services in order to respond to the growing number of young people coming through the transition process</strong></td>
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<tr>
<td>In April 2010, a transition team was established in adult services which now considers all referrals and closely dovetails with the disabled children’s team within the safeguarding and family support service. A transition key worker has recently been appointed.</td>
</tr>
<tr>
<td><strong>Improve assessments for young carers to ensure their needs are considered in their own right</strong></td>
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<tr>
<td>Currently in Bridgend there are 54 young carers accessing support following assessments and reviews conducted with each young person by the young carers project. 100% of the young carers have reported reduced *****reduction as a result. Between December 2009 and January 2011, 32 young cares were referred to the young carers project and since being engaged with the project 80% reported that they enjoyed the break from caring, 40% reported being helped to cope with caring skills, 90% attended school regularly and 44% reported feeling able to cope with school related issues.</td>
</tr>
<tr>
<td><strong>User &amp; Carer Engagement:</strong></td>
</tr>
<tr>
<td><strong>Establish and implement a user and carer engagement plan</strong></td>
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</table>
| We have established a service user/carer engagement framework to supplement existing practice. Within the safeguarding and family support service we actively strive to engage users and carers in all aspects of the service that impact upon their lives. This is recognised as being central to the assessment, care planning and review process and allows for improved outcome based planning for children and young people and those in transition. All Looked After Children are afforded opportunities and encouraged to express their views, wished and feelings in respect of the services they receive. This is the case with the full range of
<table>
<thead>
<tr>
<th>Ensure the capture of informal feedback</th>
<th>Informal feedback is captured on a regular basis and will be described throughout the body of this report.</th>
</tr>
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<tbody>
<tr>
<td>Explore the use of new technology and media to effectively engage with young people and older people</td>
<td>Each stage 2 complaint now incorporates an action plan to ensure that the recommendations are taken forward. The complaints officer is working with managers to ensure there is timely feedback to teams and the opportunity for ‘lessons learnt’. Team based training in respect to responding to and investigating complaints is now mandatory for all frontline and senior managers.</td>
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<tr>
<td>Improve the learning from complaints and compliments into the service</td>
<td>Workforce management and development:</td>
</tr>
<tr>
<td>Support all staff in evidencing post registration training and learning (PRTL) via a planned roll out of the Continuity Professional Development Portfolios</td>
<td>During 2010/11 a comprehensive training programme was coordinated to meet identified need. Membership, Terms of Reference &amp; strategic plans for the Executive Strategic Group &amp; associated subgroups have been reviewed to ensure proportionate stakeholder representation and responsiveness to local workforce development needs. 3. A presentation was made on Continued Professional Development (CPD) to the Training and Development Partnership and an electronic copy of the portfolio template has been made available to all Partners.</td>
</tr>
<tr>
<td>Increase third sector representation on the Practice Learning Partnership (PLP) and to increase diversity in practice placements</td>
<td>During 2010/11 two third sector organisations joined the PLP and further links have been established with Bridgend association of Voluntary Organisations (BAVO). Fourteen third sector placements will be provided to social work students during 2010 -2011 academic year.</td>
</tr>
<tr>
<td>Continued management action to further reduce sickness levels</td>
<td>A robust management information process has been established, sickness absence has been reduced and Safeguarding and Family Support now adopts a proactive response to the management of all sickness.</td>
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<tr>
<td><strong>Leadership &amp; Culture:</strong></td>
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<td>--------------------------------------------------</td>
</tr>
<tr>
<td><strong>Empower managers throughout the services to increase their leadership roles</strong></td>
<td>Managers across Safeguarding and Family Support have been given the opportunity to access leadership and managerial training.</td>
</tr>
</tbody>
</table>
| **Implement the Connecting Families project through the LSB partnership** | Project objectives  
To develop and implement a new model of service to address the needs and behaviours of families who place most demands on public services and have a disproportionate impact upon the communities in which they live.  
The overriding objectives when creating the multi-agency service will be:  
1. To strengthen and improve outcomes for children and their families  
2. To improve integrated work practice and reduce duplication of resources  
3. To reduce disorder and crime in our communities  
4. To reduce the longer term costs to public services  
This project will focus on the creation of a co-located multi-agency team to work intensively with high demand families within the County Borough of Bridgend. It is anticipated that this service will be a wrap-round provision to complement existing services.  
**Deliverables:**  
- An integrated multi-agency service that deals with the whole family and addresses their problems, including their impact on the community, in a single co-ordinated way.  
- An evaluation framework that can accurately assess the impact of the service, against an agreed set of outcome measures.  
**Governance:**  
The BLSB and the BLSB Delivery Board will form the top level of governance for this project. It is assumed therefore that the Senior Suppliers for this project are the representatives on the BLSB or BLSB Delivery Board. In addition, the project will report progress to BCBC’s Programme Management Board within the project portfolio of the Children’s Directorate.
Supporting Vulnerable Children Programme. Connecting families moved into its operational phase on 4th January 2011 with the appointment of the service manager. ESF funding has been secured to fund part of the structure. A service specification has been written and agreed with partner agencies. Job descriptions have been written and agreed for a number of the posts within the team, and a number of agencies have progressed their arrangements for secondments in kind. Work is under going to identify a property and an IT system for the team. A brief for the evaluation of the project is being devised. The LSB and project sponsor are addressing the risks and the threats to successful implementation. Implementation is on track for June 2011.

| Ensure strong communication through periods of re-modelling and service change |

| Performance Management & Use of Information: |

| Embed the performance culture throughout the service so that frontline staff are involved in the discussions about the performance of the service and work with managers to identify areas for improvement |

| DRAIG continues to deliver and add to an extensive library of management reports that assist services to monitor performance and service delivery. Consequently, performance and management information is produced regularly for management teams and is made available to managers via a range of reports. In addition more detailed analysis of service delivery is available and has been critically used to inform decisions that are determining service change. For example, within Children’s Directorate all initial and core assessments as well as statutory visits for adoption, assessment, the Youth Offending Service, our disabled children’s team and our four safeguarding teams are updated and reports prepared and disseminated on a weekly basis. The introduction of direct input by social work staff has resulted in improvements in our ability to use DRAIG to produce real time data on the Assessment and Care Management process. |

| Better measure the impact of our intervention at a partnership level |

<p>| Improve accessibility to policy and The interactive practice guide has been regularly |</p>
<table>
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<tr>
<th>procedures for care managers and staff through on-line access</th>
<th>updated throughout the year with new policies, procedures and practice guidance and is available to all safeguarding and family support managers and practitioners.</th>
</tr>
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<tbody>
<tr>
<td><strong>Quality Assurance:</strong></td>
<td><strong>Supplement with a shorter version the comprehensive audit tool being used in safeguarding and family support to support a greater level of audit work being undertaken on a routine basis</strong></td>
</tr>
<tr>
<td>This has been accomplished and is fully operation. The outcome being an increase in the number of audits carried out during the year.</td>
<td></td>
</tr>
<tr>
<td><strong>Adapt a quality assurance framework for Adult Social Care services</strong></td>
<td>(Speak to Judith)</td>
</tr>
</tbody>
</table>
Appendix II


CHILDREN’S DIRECTORATE
SAFEGUARDING AND FAMILY SUPPORT STRUCTURE

Interim Head of Safeguarding and Family Support
Colin Turner

*Service Manager Case Management
Vikki Watkins

*Manager Assessment and Family Support
Jane Cullen

Team Manager Safeguarding North
Greg Jones

Team Manager Safeguarding South
Rhian Lewis

Team Manager Safeguarding East
Steve Whyte

Team Manager Safeguarding West
Liz Walton-James

Performance and Service Development Officer
Linda Dann

Team Manager Assessment
Fay Evans

Team Manager Family Support
Bun Harrison

Manager Independent Reviewing Service
Annamie Lloyd

Independent Reviewing Officers
Philippa Adanah
Trina Morris
Jonny Kennedy
Kevin Watkins
Peter Wheeler
Lisa French

Manager Youth Offending Service
Caroline Dyer

Operational Manager Youth Offending Service
Danai Morgan

Principal Officer Service Development, Disability & Early Intervention
Family Lives
Bakers Way
Wendy Wilcox

Team Manager Resolutions
Mandy Jenkins
Team Managers x 3
Fostering
Natalie Sitch
Adoption
Karen Williams
Post 16 Service and Supported Lodging
Steve Downell
Supported Lodging
Officer
Phil Kirkham

Group Manager Service Provision
Val Jones

*Service Manager Accommodation and Regulated Services
Lynne Williamson

Placement Coordination and Commissioning
(Co-ordinated by Michelle Adams)