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**Bridgend County Borough Council**  
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Legal and Regulatory Services /  
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Direct line / Deialu uniongyrchol:  
Ask for / Gofynnwch am: Mr M A Galvin

Our ref / Ein cyf:  
Your ref / Eich cyf:

**Date / Dyddiad:** 30 June 2014

Dear Councillor,

**CORPORATE PARENTING CABINET COMMITTEE**

A meeting of the Corporate Parenting Cabinet Committee will be held in Committee Room 2/3, Civic Offices, Angel Street, Bridgend on **Monday, 7 July 2014 at 10.00 am**.

**AGENDA**

1. Apologies for absence  
To receive apologies for absence (to include reasons, where appropriate) from Members/Officers.
2. Declarations of interest  
To receive declarations of personal and prejudicial interest (if any) from Members/Officers in accordance with the provisions of the Members' Code of Conduct adopted by Council from the 1<sup>st</sup> September 2008.
3. Minutes of previous meeting 3 - 10  
To receive for approval the minutes of the meeting of the Corporate Parenting Cabinet Committee held on 28 April 2014.
4. Safeguarding and Family Support Service - 2012 - 13 Head of Service Annual Report 11 - 88
5. Looked After Children Placements and Permanency Strategy 89 - 118
6. Independent Reviewing Service Report 119 - 142
7. Informal Forward Work Programme - July 2014 to October 2014 143 - 146
8. Urgent items

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To consider any other item(s) of business in respect of which notice has been given in accordance with Part 4 (paragraph 4) of the Council Procedure Rules and which the person presiding at the meeting is of the opinion should be reason of special circumstances be transacted at the meeting as a matter of urgency.

Yours faithfully

**P A Jolley**

Assistant Chief Executive Legal and Regulatory Services

**Distribution:**

Councillors:

H J David  
M Gregory

Councillors

LC Morgan  
M E J Nott OBE

Councillors

D Sage  
P J White

Officers

Invitees

Pages

MINUTES OF A MEETING OF THE CORPORATE PARENTING CABINET COMMITTEE  
HELD IN COMMITTEE ROOM 2/3, CIVIC OFFICES, ANGEL STREET, BRIDGEND, ON  
MONDAY, 28 APRIL 2014 AT 10.00AM

Present:

Councillor H J David - Cabinet Member - Children and Young People and Chairperson

Councillor M E J Nott - Leader  
Councillor D Sage - Deputy Leader  
Councillor M Gregory - Cabinet Member - Resources  
Councillor P J White - Cabinet Member - Communities

Invitees:

Councillor N Clarke  
Councillor E Dodd  
Councillor D B F White

Officers:

D McMillan - Corporate Director - Children  
S Cooper - Corporate Director - Wellbeing  
M Shephard - Corporate Director - Communities  
C Turner - Head of Safeguarding and Family Support  
N Silcox - Group Manager - Integrated Working and Family Support  
M A Galvin - Senior Democratic Services Officer - Committees

59 APOLOGIES FOR ABSENCE

Apologies for absence were received from the following Members/Officers

Councillor R D Jenkins - Other Council business  
Councillor L C Morgan - Recuperating  
S Kingsbury - No reason given  
S Pryce - No reason given  
R Hughes - No reason given

60 DECLARATIONS OF INTEREST

None.

61 MINUTES OF PREVIOUS MEETING

RESOLVED: Councillor Clarke advised that in the beginning of the minutes of the last meeting where it listed the attendees, her name was shown as N C Clarke. She pointed out that she had no middle initial C.

62 CSSIW INSPECTION INTO BRIDGEND ADOPTION SERVICE

The Head of Safeguarding and Family Support introduced the report, the purpose of which, was to present Committee with a summary of the outcome and key findings of the recent Care and Social Services Inspectorate Wales (CSSIW) inspection of Bridgend Adoption Service.

The Group Manager - Integrated Working and Family Support advised that under S.31 of the Care Standards Act 2000 (adoption agency registered under Part 2 Care Standards Act 2000) local authority adoption services are required to be inspected by CSSIW on a three yearly basis. Inherent within the inspection process is a requirement for the Council to provide CSSIW with information about service data and complete a comprehensive self-assessment of the service, in statement form, prior to the inspection fieldwork.

The Group Manager - Integrated Working and Family Support, then gave a resumé for the benefit of Members, of what the CSSIW inspection comprised of including areas of work that this covered.

She went on to advise that the 2013-14 Adoption Service inspection took place during October and November 2013, though the final report was not published until the 19<sup>th</sup> January 2014. Overall, the report was very positive and detailed no non-compliance notices.

The inspection report reflected what the service does well, what has improved since the last inspection and what needs to be done to improve the service in the future. Examples of these, as cited in the inspection report were outlined in paragraphs 4.2 and 4.3 of the report.

The Group Manager - Integrated Working and Family Support confirmed that whilst there were four areas where practice could be improved, there were no major shortcomings identified, and therefore inspectors did not require that the Council provide them with a post inspection action plan. However, the Head of Service would agree with senior officers an action plan to address the areas noted for improvement.

A copy of the Inspection report was attached at Appendix 1 to the report.

The Corporate Director - Children in response to a Member's question confirmed that the Adoption Service Team were moving from Sunnyside to the main Civic Offices, which would mean that all operational teams would be located together in a front facing Hub. Whilst moving did present certain problems and inconvenience, more long term this would benefit and provide more cohesion in terms of collective working.

She added that work and documents of a confidential nature would be protected as was required under statutory regulations governing the protection of children and a number of breakout rooms would be available where Officers could process work of a confidential nature.

A Member noted that in the last such report conducted by the CSSIW eight areas had been identified within the service for improvement, whilst in the latest report this had reduced to four which was positive news. He noted that there had been a total of 88 adoption cases since the last inspection, and 48 in the inspection undertaken previously to this. He asked over what length of period this increase had covered.

The Group Manager - Integrated Working and Family Support confirmed that this increase was over a three year period.

The Corporate Director - Wellbeing asked how many adoption breakdowns had occurred in this period.

The Head of Safeguarding and Family Support advised that there had been just two adoption breakdowns, however, these were cases approved by agencies external to the Local Authority as opposed to the Council's In-House agency.

The Leader and Deputy Leader in turn commended the findings of the Inspection Report, and thanked staff for the hard work they had committed to its positive outcomes.

RESOLVED: That the Corporate Parenting - Cabinet Committee noted the positive information provided with the report, together with the plans to address the areas noted for improvement.

63 CSSIW INSPECTION INTO BRIDGEND FOSTERING SERVICES

The Group Manager - Integrated Working and Family Support presented a report to the Corporate Parenting - Cabinet Committee on the outcome and findings of the inspection into Bridgend Fostering Service.

Section 31 of the Care Standards Act 2000 (fostering agencies registered under Part 2 Care Standards Act 2000) and S.100 of the Health and Social Care (Community Health and Standards) Act 2003 require that Local Authority Fostering Services are inspected by CSSIW on an annual basis. Bridgend Foster Care was subject to this year's inspection during January 2014 and with the final report being published on the 12 of March 2014.

She then gave a resumé for the benefit of Members, of what the CSSIW inspection comprised of including areas of work that this covered.

The Group Manager - Integrated Working and Family Support confirmed that the 2013/2014 Fostering Service inspection took place in early January 2014 with the report being published on 12 March 2014. This report was generally very positive and for the sixth year in a row, no compliance issues notices were issued to the Council.

The inspection report was shown at Appendix 1 to the report. This reflected what the Inspectors believed the service does well, what has improved since the last inspection and what needs to be done to improve the service in the future. Examples of these, were cited in the report in paragraph 4.2.

She proceeded to state that whilst there were a number of areas where certain aspects of the service could be improved, Inspectors reported no major shortcomings. Consequently, they did not direct that the Council should provide them with a post inspection plan. However, the Head of Service would agree with senior officers, an action plan to address the areas for improvement.

The Head of Safeguarding and Family Support stated that since the publication of the inspection report, the registered Fostering Team Manager has been seconded to the post of Interim Group Manager for Regulated Services Provision and a recruitment process was underway to seek a replacement for her substantive role.

A Member of the Committee felt that this was another very positive inspection report, and whilst there had been no major concerns addressed by the CSSIW, he asked if the proposals the Inspectorate had made in order to improve the service further, were being addressed.

The Head of Safeguarding and Family Support confirmed that these issues had either been carried out or were currently a work in progress.

The Committee once more wished that their thanks to the hard work committed by staff in the Bridgend Fostering Service be placed on record, the results of which had been a very good Inspection Report.

RESOLVED: That the Corporate Parenting - Cabinet Committee noted the contents of the CSSIW Inspection Report into Bridgend's Fostering Services.

64 STATEMENTS OF PURPOSE FOR FOSTERING, ADOPTION AND CHILDREN'S HOMES

The Head of Safeguarding and Family Support presented a report seeking approval of the revised Statements of Purpose for the certain service areas in line with regulatory requirements.

He advised that within the Children's Homes Regulations (Wales) 2002, the Fostering Services Regulations (Wales) 2003, and the Local Authority Adoption Service (Wales) Regulations 2007 there is a requirement that each of the children's homes and service areas have a 'Statement of Purpose'.

The Head of Safeguarding and Family Support added that the content was prescribed by the regulations and each 'Statement of Purpose' was shaped by those requirements and provides relevant information on the aims and objectives of each service area and the services and facilities provided by the individual children's home or fostering and adoption service. 'Statements of Purpose' were required for:

- Adoption Services
- Fostering Services
- Bakers Way Short Break Service
- Newbridge House Transition Unit
- Sunny Bank Complex Needs Unit

The report initially gave some background information, upon which the Head of Safeguarding and Family Support commented, and then confirmed that each 'Statement of Purpose' included an outline of the nature and scope of the service provided and gave detail about the processes adopted in order to carry out its functions. Copies of each of these 'Statement of Purpose' were attached as appendices to the report.

The Head of Safeguarding and Family Support advised that the amendments made to each of the five Statements of Purpose in the main related to updates in respect of staffing and changes in relation to developments of the services.

He added that the Fostering Service Statement of Purpose included changes reflected by the recent recommendation to cease delivery of Resolutions Fostering as a partnership service and other changes proposed in the restructuring within the Children's Directorate and Safeguarding and Family Support Services. The main changes relating to this were included in paragraph 4.5 of the report.

The Statement of Purpose for Newbridge House included changes in relation to the development of an outreach programme for young people who have recently made the transition to independent living. This is offered for an eight week period, with workers being flexible with times to cater for the young people's needs.

The Head of Safeguarding and Family Support then stated that the Statement of Purpose for Sunny Bank included the development of a Transition service in conjunction with the Fostering Service. It has developed a structured process to move children and young people from Sunny Bank when their long term plans have been fully assessed and agreed.

He then concluded by confirming the Adoption Service Statement of Purpose that reflected the Welsh Government mandated changes in relation to the developments which were

underway nationally to reshape and reform adoption services, this included the development and implementation of five regional services.

The Chairperson advised that he was pleased to note that Outreach and Transitional programmes were being developed in both Sunnybank and Newbridge House facilities for children and young people.

**RESOLVED:** That the Corporate Parenting - Cabinet Committee approved, the revised individual 'Statement of Purpose' for the named service areas referred to, as shown at Appendices to the report.

65 **STATUTORY INDEPENDENT PROFESSIONAL ADVOCACY AND INDEPENDENT VISITING SERVICES FOR VULNERABLE CHILDREN AND YOUNG PEOPLE WHO ARE INVOLVED IN CHILDREN'S SERVICES IN BRIDGEND**

The Corporate Director - Children submitted a report updating the Corporate Parenting Cabinet Committee on the commissioning of the Statutory Independent Professional Advocacy and Independent Visiting services for children and young people independently of the Collaborative Advocacy Project, following a recent procurement exercise.

The Head of Safeguarding and Family Support, advised that Committee would be aware that since January 2012 the Council had been acting as lead commissioner and project manager to a regional multi agency collaborative commissioning project, which included five local authorities and two health boards details of which were shown in Paragraph 3.1 of the report.

He proceeded by confirming that an audit of needs undertaken identified a number of gaps in current commissioned provision, and the report outlined the groups of children and young people, involved with social services for which the authority has a statutory duty to commission and make available independent professional advocacy or independent visitor services and the current arrangements to meet these duties. This showed that the Council was not meeting all of its statutory duties to children and young people in relation to independent professional advocacy.

He further added that incrementally, partners had withdrawn from the project for their own individual reasons, which resulted in the Council proceeding on its own with the procurement of a comprehensive Independent Professional Advocacy service for all the statutory groups involved with children's social services, and an Independent Visiting service for eligible children and young people, independently to the collaborative approach, with a new contractor being undertaken for this following a procurement exercise and tendering process being carried out.

The Head of Safeguarding and Family Support added that the Independent Professional Advocacy and Independent Visiting contract would be in place for 2 years with an option to extend for up to 12 months following successful evaluation during year 2. The contract/service commencement date was 1 April 2014.

The new service had been widened to include all children and young people aged 0-25, who are engaged with children's social services in Bridgend. This included all Looked After Children (including those placed for adoption), Care Leavers and Children in Need as per the Children Act 1989 definition. These are the children who require the support from local authority children's social care teams, including those on, or being considered for entry onto the child protection register and disabled children and young people.

He further added that the Council was arranging for systems and processes to be put in place to ensure that children and young people in our care are aware of their rights to access advocacy, should they ever need it. This included developing and implementing protocols that ensure that an 'automatic offer' of advocacy is made to all children and young people at the point at which they become involved with Children's Social Services teams and that this offer is repeated at regular intervals.

Finally, he stated that a newsletter had been shared with members of staff within Children's Social Services providing information on this new service. A copy of this newsletter was shown at Appendix 1 to the report

The Corporate Director - Wellbeing added that it was pleasing to see this service up and running, as advocacy also featured in the Social Services Bill.

RESOLVED: The Corporate Parenting - Cabinet Committee:

- (1) Noted the progress made in terms of the procurement of the Independent Professional Advocacy and Independent Visiting Service to ensure all eligible Children and Young People in Bridgend are able to access the service from 1 April 2014.
- (2) Receives a further report in six months' time, detailing the impact it is making on children and young people in Bridgend.

66 INFORMAL FORWARD WORK PROGRAMME - APRIL 2014 - JULY 2014

The Corporate Director - Children submitted a report that sought Committee approval for the proposed Informal Forward Work Programme covering the above period, i.e. this and the next scheduled meeting.

The Informal Forward Work Programme (IFWP), was shown at Appendix 1 to the report.

Members discussed the Schedule and agreed to add to the agenda for the next/future meeting(s).

- LAC Awards.
- Numbers of children who engage in sport, play and leisure activities

In terms of Item 7 of the IFWP the Chairperson asked if this report could be supplemented by a Presentation, and possibly a few case studies.

In terms of Item 8 he asked if an invitee to attend the meeting could be extended to a representative of the Local Health Board and that a representative of the CSSIW be invited to the meeting that considers Item 10 of the IFWP.

RESOLVED: That the Corporate Parenting Cabinet Committee agreed to approve the Informal Forward Work Programme appended to the Officer's report, subject to the further items being added as detailed above, and to invitations being extended to the recommended Invitees also outlined above.



67 SPORT, PLAY AND LEISURE OPPORTUNITIES FOR LOOKED AFTER CHILDREN WITHIN BRIDGEND COUNTY BOROUGH

The Corporate Director - Communities presented a report that provided information on the progress being made in identifying the needs of Looked After Children in relation to sport, play and leisure and the development of appropriate programmes of support.

The report gave some background information, following which it advised that Bridgend County Borough Council had invested in surveys of young people's participation in sport, play and leisure since 2006. These surveys have allowed priorities to be established around age, gender, disability and geographical location. The same survey format will be used to gain information on Looked After Children and their households and to compare levels of engagement and barriers to participation identified.

Welsh Government funding is being used to undertake focus group research with Looked After Children that will assist in designing services and activities to meet identified need

Following a survey undertaken by the Bridgend Young People's Survey on sport, play and leisure, this identified that activities and opportunities should be both positive and motivating experiences and that carers may require support to address identified barriers.

In terms of areas for development of the above, the Corporate Director - Communities advised that there were a range of low cost and no cost opportunities being developed including primary school Dragon Sport clubs, secondary school 5X60 activities, free swimming lessons and free holiday play schemes supported by Town and Community Councils.

In partnership with Sport Wales, funding has been secured for a pilot programme for Looked After Children that will target improvements in skills and confidence. This will be evaluated during 2014-15 and will be a feature of the County Sport Plan for future years.

He stated that the annual service development plan of the Healthy Living Partnership with Halo Leisure has recognised the importance of support for Looked After Children and learning from other programmes will inform the design of activities.

The Corporate Director - Communities added that the 'Access to Leisure' scheme providing low cost access for society's most needy has been modified to be available for more hours and more activities and to also support whole households. The relevance of this scheme to Looked After Children and their carers would be reviewed.

A series of partnerships are evolving with professional sports organisations (e.g. Ospreys Rugby, Football Association of Wales) including motivational experiences and invitations to events for households.

He further added that the potential for sport and leisure to support the development of skills linked to employability will also be promoted to case workers and carers. The Bridgend Sports Leadership Pathway has been recognised as sector leading and has mentoring support in place.

The Healthy Living Service has also identified a variety of health and wellbeing programmes that can be promoted via the Looked After Children's teams such as MEND, Family Active Zone, promoting active households and healthy eating.

Finally, the Corporate Director - Communities confirmed, in addition a number of activities have been developed for Looked After Children in the Arts, including a very successful

programme developed with Arts Connect partners. A further specific report on arts activities for Looked After Children can be provided to the Committee if this was of interest.

He concluded his submission by giving a resumé of the report's conclusions.

**RESOLVED:** That the Corporate Parenting Cabinet Committee noted the report and requested that they receive a further report in 12 months' time, to include statistical information as regards how many children and young people are engaging in sport, play and leisure activities including age groups where appropriate.

The meeting closed at 12 noon.

## BRIDGEND COUNTY BOROUGH COUNCIL

### CORPORATE PARENTING CABINET COMMITTEE

7 JULY 2014

#### REPORT OF THE CORPORATE DIRECTOR CHILDREN

##### SAFEGUARDING AND FAMILY SUPPORT SERVICE 2012-13 HEAD OF SERVICE ANNUAL REPORT

### 1. Purpose of Report

- 1.1 To present to the Corporate Parenting Cabinet Committee, prior to its formal submission to CSSIW, the Annual Report of the Head of Service – Safeguarding and Family Support submitted for and within the Annual Council Reporting Framework. This is the fifth Annual Report of the Head of Service following the introduction of the current arrangements for evaluating Social Services in Wales. The process centres on self-evaluation, involves consultation with Care and Social Services Inspectorate for Wales (CSSIW) and will continue to be the major source for CSSIW's inspection programme. The report can be found at Appendix 1.

### 2. Connection to Corporate Improvement Plan / Other Corporate Priorities

- 2.1 The work of the Cabinet Committee is linked to the Corporate plan and priorities:
1. Working together to develop the local economy
  2. Working together to raise ambitions and drive up educational achievement
  3. Working with children and families to tackle problems early
  4. Working together to help vulnerable people to stay independent
  5. Working together to tackle health issues and encourage healthy lifestyles

### 3. Background

- 3.1 In 2010 CSSIW introduced a new "Annual Reporting Framework" requiring all authorities in Wales to produce an Annual Report on the Effectiveness of their Social Care Services. The Annual Reports deliver the council's own assessment of performance in respect of their social services responsibilities and focus on strategic objectives and improvement priorities across the department. This new approach to reporting is intended to:
- see performance management accountability transfer from the national centre back to council members, Chief Executives, Directors, Managers and Officers;

- present a recognisable picture to those delivering and served by their social services locally;
- generate the core set of information needed by CSSIW to deliver their annual performance;
- provide assurance function;
- link much more immediately to business planning for priority improvement.

3.2 One of the longer term aims for the Annual Reporting Framework is that it will serve to address a number of reporting obligations in respect of social care and reduce the necessity for duplication of reporting effort. Work to develop this framework for annual reporting came from a commitment shared by the WLGA and ADSS Cymru to report openly and promptly on the effectiveness of each authority in meeting both needs and statutory obligations in social services, and also to link that report urgently to planned and continuous improvement. The Welsh Government then reflected the duty on the Director of Social Services to report annually in its new Statutory Guidance on the Director's Role, and CSSIW has made it a cornerstone of its modernised approach to regulation and inspection. It represents a move towards a new, mature, relationship between local government and the Inspectorate, which recognises authorities' prime and sovereign responsibilities under law. The Annual Council Reporting Framework places social services firmly at the heart of corporate and democratic local government.

3.3 The Statutory Director for Social Services in Bridgend is completing an Annual Overview Report which has been informed by the annual reports of the Heads of Service for both the Safeguarding and Family Support Service and Adult Social Care.

#### **4. Current Situation**

4.1 The report has been considered by Children and Young People Overview and Scrutiny and any recommendations for change, to improve clarity and readability will be taken on board.

4.2 The attached report will be submitted to CSSIW as a supplementary report to that of BCBC's statutory Director of Social Services' overview report. It reports on a range of issues related to how the authority has discharged its responsibilities to safeguard and protect children and sights the fundamental role that the Corporate Parenting Committee plays by having the same aspirations for Bridgend's Looked After Children as parents would for their own children.

4.3 Key issues note in the attached report include;

- An overview of the primary aims of the Safeguarding and Family Support Service.
- An overview of the range of service provided by the service.
- An overview of performance
- An overview of significant strategic and operational developments throughout 2013-14

#### **5. Effect upon Policy Framework and Procedure Rules**

5.1 None.

## **6. Equality Impact Statement**

6.1 This has been considered but there are no new or changed services/policy/ functions and it is therefore not applicable

## **7. Financial Implications**

7.1 None.

## **8. Recommendations**

8.1 It is recommended that Committee Members consider the attached Annual Report and provide any observations and comments for the Head of Service – Safeguarding and Family Support.

**Deborah McMillan**  
**Corporate Director - Children**

### **Contact Officer**

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Head of Safeguarding and Family Support

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### **Background Documents**

None.

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## DIRECTOR OF SOCIAL SERVICES REPORT 2012 - 2013

### Part Two – Safeguarding and Family Support

#### Context / Overview

1. As Head of Service - Safeguarding and Family Support Services (SFSS) in Bridgend, I am pleased to present this fifth annual report on the effectiveness of our Safeguarding and Family Support Services. The report is written in line with the Annual Council Reporting Framework, which requires us to look each year, in detail, at all our services to judge the quality of the services we provide and the arrangements for delivering them. Based primarily on self-assessment, it has also been informed by feedback and consultations with a range of colleagues within the service, partner agencies and service users themselves. In addition, it has been informed by the outcomes of a number of inspections conducted throughout the year, along with the outcomes of internal reviews and audit activity. 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. During 2012-13, whilst it was acknowledged that the service had shown continuous improvements in both performance and the quality of service provision, it was acknowledged that there were still some areas where service improvements could be made. It is in these areas, coupled with areas noted for improvement in the CSSIW 2012-13 Annual Performance Assessment Report that we have continued to focus our efforts for improvement throughout the past year.
3. Throughout the year we have continued to benefit from having a dedicated Cabinet Member for Children's Services who assumes the role of Chair the Councils Corporate Parenting Committee. Further scrutiny and challenge on the range and quality of our services is provided by our Children and Young Peoples Overview and Scrutiny Committee and through the Councils Corporate Performance Assessment processes.
4. During the year, we experienced a number of changes to our Corporate Management Team which resulted in new appointments to the Statutory Director of Social Services role along with a new appointment to the Corporate Director for Children. Together, both directors take a strong lead in supporting the service by providing oversight of strategic delivery and operational components of the service. In February 2014, we restructured the management structure of the Children's Directorate, within which Safeguarding and Family Support services sit. (The revised management structure can be found at Appendix 1).
5. 2013-14 proved to be another productive and extremely busy year which saw an increase in the number of contact and referrals made to the service, resulting in increasing numbers of children placed on the Child Protection Register (CPR) and an increase in the numbers of Looked After Children (LAC). Pressure on our front line teams has been influenced by high numbers of reported incidence of domestic violence where children have been present, parental substance misuse and the

associated neglect of children. Comparatively higher rates of teenage pregnancies in Bridgend have also resulting in an increase of babies under the age of 2 becoming LAC. Responding, the Council has continued to invest in an array of preventative and early intervention family support services and targeted services which deliver intensive family support to families through our Connecting Families Service and our Integrated Family Support Service.

6. During 2013-14, the service received 3,317 contacts from professionals and members of the public, an increase of 235 on the previous year. Of these contacts 1,107 were assessed as referrals where a form of safeguarding intervention was required. This is a 10% increase compared to the previous year. Throughout the year, the service completed 1,439 initial assessments, of which 498 arose out of new concerns reported on existing open cases. Of the 1,439 initial assessments completed throughout the year 75% were completed within statutory timescales, compared to the previous year's figure of 92.1%. This drop in performance comes within the context of significantly increased work pressures placed on social workers as a result of rising LAC and CP numbers during the year. For the contacts made to the Assessment Team that did not proceed to initial assessment, appropriate advice/information was provided or referrals were made to other means of advice and family support.
7. Initial assessments establish whether a child is in need and additionally whether the child is in need of protection. These assessments must be completed within 7 working days of the referral being received. Once an initial assessment has established that a child is in need, a decision should be made about whether to complete a core assessment. The core assessment builds on the initial assessment and is an in-depth assessment which examines the developmental needs of the child, the capacity of the parents or care givers to respond to their needs within the family and community context. The core assessment provide a sound evidence base for professional judgements on whether services would be helpful to a child and family, and, if so, the types of service most likely to bring about good outcomes for the child. During 2013-14, 646 core assessments were completed. Of these core assessments 63% were completed within the 35 day timescale and whilst this percentage is disappointing for us, this was in the context of having an increase of 142 Core Assessments completed during 2013-14 compared to the previous year.
8. In Bridgend, the number of LAC rose by 6.5% from 387 on the 31<sup>st</sup> March 2013 to 412 on the 31<sup>st</sup> of March 2014. The number of children on the CPR also rose from 161 on the 31<sup>st</sup> March 2013, to 179 on the 31<sup>st</sup> of March 2014, an 11.2% increase.
9. **Service Achievements in 2013-14 include:**

**Timeliness of responses e.g.**

- 99.1% of all contacts made were reviewed within 24 hours.
- 77.4% of initial assessments completed within statutory timescales.
- 91% of reviews of LAC, children on the CPR and Children in Need were carried out within the statutory timescale.
- 91% of reviews of Looked After Children, children on the Child Protection Register and Children in Need were carried out in line with statutory timescales.



- 96.6% of all Looked After Children reviews were carried out within statutory timescales.
- 99.% of reviews on the Child Protection Register were carried out within statutory timescales.
- 99.6% of all child protection cases were allocated to qualified workers. (Only 3 cases remained unallocated for a five day period whilst the case was in transition from our assessment team to a safeguarding team)
- 82.1% of reviews of children in need reviews were carried out within statutory timescales compared to 68.7% the previous year.
- 100% of young carers known to social services were assessed during the year with 91.7% receiving a service.

#### **Improvements in planning for LAC**

- 94% of first placements during the year began with a care plan in place.
- 96.6% of reviews of LAC were carried out within statutory timescales
- 93.4% of LAC had a plan for permanence in place at the second review due date.

#### **Improvements in Permanency Planning:**

- 85% of eligible children had a pathway plan in place as required throughout the year.
- The Adoption Service exceeded its target of 15 children being adopted during the year with 25 children being adopted. 20 new Adopters were approved.
- 22 Care Orders were discharged as a result of Residence Orders being granted, a further 29 Care Orders were discharged as a result of Special Guardianship Orders being granted and 17 Care Orders were discharged where no other order was required.
- New multi-agency “Family Intervention Support Panel” established to streamline of all referrals for Family Intervention Services
- Reduction in the number of “First Time Entrants” into the youth justice system, reduction in the number of re-offending rates and the use of custody.

#### **10. Safeguarding and Family Support – Priorities for improvement 2013-14:**

- maintaining quality in social work practice, through improving workload management, how we share learning, effective supervision and support for the high number of newly qualified staff;
- improving the engagement of service users, including better capture of their views and making more information available;
- extending the reach of integrated family support services to further support both earlier intervention and families with acute and complex needs;
- increasing the number and range of both fostering and adoption placements available;
- continue to implement the improvement activities identified as part of the *Workwise* project and ICT strategy;
- continuing to improve outcomes for children and young people by delivering on key requirements such as timely statutory visits, personal education plans

and health assessments, alongside robust permanence plans that minimise unnecessary moves;

- improved support for looked after children; in particular minimising school moves and the provision of annual health assessments.
- refreshing the strategy to reduce the increasing numbers of looked after children and those on the child protection register.

## **GETTING HELP**

### **Access to Services**

11. Our Safeguarding and Family Support Services (SFS) aim to safeguard and promote the welfare of children and young people who are in need. Services are either provided directly or commissioned to support children and young people who need 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. Our Emergency Duty Team (EDT) responds to concerns about the safety and protection of children raised by professionals and members of the public outside of office hours. During 2013, a comprehensive review of the EDT service was undertaken which resulted in significant improvements in the overall functioning and performance of the service.
12. 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 2013-14 the Assessment Team received an increase of 235 more contacts compared to the year. In all, the service received 3,317 contacts.
13. 99.1% of all contacts received by the service were reviewed, and a decision made about the necessary course of action, within 24 hours of the initial contact. We consider this a significant achievement. This compares with 98.2% the previous year. Where people are eligible for a service, we endeavour to provide good and timely responses to their needs. To ensure this, there are robust screening processes in place which promptly assess needs and the risk of harm in order to ensure that appropriate interventions ensue. In 2013-14, the percentage of referrals that were re-referrals within 12 months was 12.7%, a slight increase from 12.3% the previous year.
14. A joint project established in 2010 with the police to jointly assess, on a daily bases, all reports of domestic abuse which could impact on the welfare of children has continued to effective in the joint screening activity of all reports of domestic violence incidences in Bridgend. Working relationships between police and social workers have strengthened as the project has matured. The table below illustrates the number of domestic violence incidents considered by the project and those that were referred on to social care for a safeguarding intervention.
15. We have continued to 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. During 2013-14, we continued to refresh the information available to children who may become LAC, those who are already LAC and those who have been LAC. This includes new information

about advocacy and how service users can either complain or give compliments about our services. We have continued to disseminate the information available to children and families in respect of our child protection procedures and, in particular, information about what families can expect when attending case conferences, including information on how to complain.

16. In Bridgend, we actively promote feedback from service users about the full range of services we deliver. This is used to help shape and refine the way we do things in order to achieve improvements. Feedback is gathered through questionnaires, face to face consultations and participation events with children and young people. When cases are closed, questionnaires are sent to parents/carers and the children themselves seeking feedback on what they felt about 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.
17. During 2013-14 the service received 29 compliments from service users and professionals. This is less than the previous year but is thought to be as a result of compliments not being forwarded by practitioners and managers to our Complaints Office. 93 unregistered complaints were received which were quickly dealt with by Team Managers. We received 11 formal complaints, 2 of which were subsequently withdrawn. All these were dealt with at Stage 1 of the Complaints Procedure, meaning that they were resolved formally by front line managers avoiding further independent formal investigation under Stage 2 of the Procedure. All complaints are taken seriously and investigated as we aim to seek prompt resolution. No complaints progressed to Stage 2 of the Procedure in 201-14 compared to 2 for the period 2012-13.
18. Service users who are in receipt of either short or long services are encouraged to participate in all stages of the care planning and review processes. A partnership approach has continued to be taken with service users and other agencies, such as health, education and the police in order to achieve more positive outcomes for children and young people.
19. Mechanisms are in place within our quality assurance framework, which include consideration of 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. To ensure that our care planning processes for children evidence effective engagement with children and young people and to ensure that their wishes and feelings are recorded, during the past year many of the councils ICS exemplars have been redesigned, including initial and core assessments, to include mandatory data fields to record whether the child has been seen during the assessment process and to record his/her wishes and feelings. In addition, ICS exemplars for LAC, CP and CIN cases now all have mandatory data fields for recording the child's wishes and feelings and to record if a child has been offered professional advocacy services.
20. Efforts are made to ensure that parents and carers provide their views by contributing to written assessments, attending review meetings and providing feedback on the range of services they are in receipt of.

21. We encourage the attendance of children, young people and their parents at all LAC, CP and CIN reviews and their contributions are clearly recorded. Independent Reviewing Officers (IRO) routinely meet with children, young people and their parents prior to review meetings, or outside of such meetings if they are unable to attend.
22. When initial assessments are undertaken, we monitor the percentage of assessments where children are seen alone by the social worker. In 2013-14, this was 51%. The primary reasons that children were not seen alone as part of the initial assessment were that the children were either too young or they refused to meet with the social worker alone. As a significant number of this year's initial assessments were in respect of children under two, it is understandable why this performance indicator has dipped slightly compared to the previous year. To ensure that practitioners are being proactive in engaging and consulting with children and their families, our quality assurance framework implicitly considers engagement and consultation with the child, particularly in respect of care planning.

### **Assessment/Case Management Services**

23. 2013-14 proved to be another busy year for all our safeguarding and family support services. (Appendix 2 provides a table that illustrates the number of initial assessments completed during each month of the year.)
24. Last year, it was reported that significant improvements had been made in performance in relation to the completion of core assessments within prescribed timescales, with 73.3% of core groups being held within timescales. We acknowledged, however, that more effort was required to improve the consistency of the quality of assessment. Whilst we have achieved this, our performance in relation to core assessments being completed within statutory timescales fell from 73% to 63%. The primary reason for this has been attributed to a significant rise in the number of core assessments completed throughout the year rising from 502 in 2012-13 to 646 in 2013-14. Understandably, this placed significant pressure on our frontline safeguarding teams which has inevitably impacted on social workers ability to complete all core assessments within statutory timescales. However, we are confident that the quality of assessments has improved with greater detail recorded of service users' wishes and feelings and the assessment being more outcome focussed. This has been influenced by continued enhanced team based training, individual mentoring, supervision and audit activity. We have also introduced a number of mandatory training events which all practitioners must attend. For example,
  - Professionalism and managing your social work responsibilities – 1 day
  - POVA e-learning module
  - Safeguarding – e learning module
  - DRAIG training - overview, CP, CIN, LAC, & those specific to role of appointment
  - Recognition & referral
  - Child protection conferences & core group,
  - Safeguarding children whose parents have mental health problems

#### Safeguarding children with disabilities

- Initial & Core Assessment- 2 days
- Case recording – 1 day
- Substance misuse – 1 day
- Domestic Abuse for Safeguarding social workers- half a day
- Online Safety – half a day
- Working with parents with learning disabilities – half a day

25. Last year it was reported that our workforce remained generally stable with the majority of social work post being filled predominantly with permanently employed staff. This year we have been particularly challenged with a number of experienced staff leaving the authority. In response we have regularly recruited replacement social workers, the majority being either newly qualified or with less than two years post qualifying experience. Although at the end of this reporting period there were very few vacancies, with a large group of newly qualified social workers, we have faced particular difficulties protecting newly qualified social workers within their first year of practice. This has resulted in our senior practitioners having to carry heavier caseload comprising of the more complex child protection and LAC cases. Notwithstanding this, during 2013-14 the average caseloads for both social workers and senior social work practitioners reduced.
26. During the 2013-14 year, 23 social workers left and 30 new appointments were made, including 22 newly qualified social workers. During 2013-14 17 social workers successfully completed their first year in practice.

#### **Case Management**

27. Throughout 2013-14, the number of children and young people who had open and active allocated cases within our Safeguarding and Family Support teams increased to 1,519 on the 31st March 2014 from 1,441 on the 31st March 2013. This is a 5.4% increase on the previous year. (Appendix 3 shows the breakdown of open cases to each of the service teams on the 31st March 2014.)
28. In spite of the significant increase in open cases across our safeguarding teams, we have managed to reduce the average caseloads of frontline social workers to 18 from what were previously 22. This was achieved by the Council investing in the creation of an additional safeguarding team manager and a number of new social work posts. This has resulted in team managers having fewer social workers to supervise and social workers having smaller caseloads. Now our five safeguarding teams provide services to children and families on a locality patch basis. A map illustrating the localities within Bridgend which each of the five safeguarding team's team serves, along with the Wards can be found at Appendix 4). The Just @sk Plus Team, Assessment Team, Disabled Children's Team Youth Offending Team, IFSS, Family Support Team, Adoption, Fostering and our Connecting Families Team all provide county wide services.

#### **Child Protection Activity**

29. Throughout 2013-14 all child protection cases were allocated to qualified social workers. The names of 255 children were added to the Child Protection register

(CPR) compared to 249 in 2012-13. 237 children's names were removed from the CPR, compared to 220 in 2012/13. This again demonstrates significant child protection activity throughout the year. (Appendix 5 provides a number of tables that show the rate of CP registrations and de-registrations month on month throughout 2013-14.)

30. During 2013-14, 87.7% of initial child protection case conferences were held within 15 working days of the strategy discussion and 87.7% of initial core groups were held within 10 working days of the initial child protection case conference in line with agency and Welsh Government expectations. For CP reviews 99.% were conducted within statutory timescales throughout 2013-14 a slight improvement on the previous year. This is again a significant achievement in the context of increasing workloads and the associated pressures and demands placed on the service.

### **Looked After Children**

31. As stated above previously 2013-14 proved to be a very challenging year for us in responding to yet further increases to our LAC population with number rising from 387 on the 31<sup>st</sup> March 2013 to 412 on the 31<sup>st</sup> March 2014, a 6.5% increase. (Appendix 6 provides a table that shows the pattern of LAC numbers throughout the year compared to the previous year). Despite this rise only six cases remained unallocated for a very short period of time. During this period, the cases were held by a team manager pending the imminent start of a new worker. We acknowledge that there were occasions when LAC cases have not always been allocated to a qualified social worker. On these rare occasions, children placed in long term stable foster placement are sometimes allocated to social work assistants who have held these cases for several years and are closely supervised by qualified senior social workers. Notwithstanding this, we have increased the percentage of our LAC cases allocated to qualified workers from 93% in March 2013 to 96% on the 31<sup>st</sup> March 2014
32. (Appendix 7 provides a table that illustrates where LAC cases are held within our Safeguarding and Family Support Team. Appendix 8 provides a table that show a percentage profile of the ages of LAC on the 31<sup>st</sup> March 2014).
33. (Appendix 9 shows the breakdown of Bridgend's LAC population at 31<sup>st</sup> March 2014.) (Appendix 10 illustrates the number of children who became looked after by age throughout 2013-14).
34. Irrespective of the number of LAC in Bridgend we make a concerted effort to ensure both their health and educational needs are at all times promoted. Consequently each child has a dedicated LAC Health Visitor whose primary responsibility is ensure the health needs of all LAC children are promoted. LAC health visitors are collocated with our independent reviewing service but work closely with social workers to ensure that the specific health needs of all LAC, irrespective of their age, are constantly promoted and considered paramount. Social workers also benefit from our established working relationship with CAMHS through their attendance at monthly triage clinics.
35. To ensure that the educational needs of our LAC are promoted our Looked After Children in Education team (LACE) ensures that the many educational needs of

a looked after child are promoted. This involves a multi-agency approach and close liaison with designated teachers, additional education needs services, social workers and carers. The team provide time-limited and focused educational support and mentoring to LAC who require additional educational support. This has resulted in many LAC being re-integrated into mainstream education and achieving academic qualifications.

36. The increase in both the number of children added to the child protection register and the increased numbers of looked after children during the year has required us to increase the number of legal surgeries held. These meetings are now held weekly to consider our duty to apply legal safeguards as appropriate in line with the Public Law Outline (PLO). Legal surgeries are attended by a senior lawyer, principal officer and key professionals involved in the cases being considered. Between 1<sup>st</sup> April 2013 and 31<sup>st</sup> March 2014, 61 full Care Orders and 47 Interim Care Orders were granted by the courts and during the same period, 1 Interim Residence Orders, 22 Residence Orders and 29 Special Guardianship Orders were also granted by the courts. 17 Care Orders were discharged.

### **Permanency Planning for Looked After Children.**

37. We continue to implement a specific project aimed at ensuring that all LAC have a permanent plan for their long term future. The purpose of permanency planning is to give each LAC a greater sense of security, and, if possible, a stable family life. We have recruited an additional social worker specifically to progress plans for children and young people where it has been identified they would more appropriately be looked after under the auspices of either a residence or special guardianship order.
38. During 2013-14, 93.4% of LAC placements began with a care plan in place at first placement. 92% of Looked After Children had a permanence plan in place at their second LAC review. It is acknowledged that all LAC children require a plan for permanence to ensure stability and to avoid them drifting in care and consequently we will strive to improve our performance related to this in the coming year.
39. Performance in relation to personal education plans (PEPs) being in place for LAC within 20 days of a child starting school has also improved as a result of embedding a more robust reporting system that better captures compliance and completion of PEPs. At the 31<sup>st</sup> March 2014, 56.6% of all Looked After Child had a PEP in place within 20 school days of entering care or joining a new school.
40. Last year, whilst significant improvement had been made in relation to our performance around statutory visits made to LAC within timescale, it was acknowledged that further improvement was required. Whilst we have been able to reassure ourselves that the vast majority of visits have been undertaken regularly and children are being seen, there remains an issue in terms of visits being promptly written up. To address this, we have streamlined the process required and senior managers have facilitated team based training for all social work practitioners. Nevertheless, we were only able to evidence that 69% of statutory visits required to LAC were completed in accordance with regulations. In the coming year, we intend to further revise our practice guidance and

procedures to streamline and simplify the statutory visiting processes to realise continuous improvement.

41. Within Bridgend, we have a comprehensive permanence policy which underpins our proactive approach to supporting a range of options for permanence. All staff are clear about the significance of permanence planning in achieving best outcomes for children and the importance of LAC reviews being well planned and on time. In 2013-14 96.6% of LAC review meetings were conducted within statutory timescales, a significant achievement considering the very high number of reviews that were actually held.

## THE RANGE OF SERVICES PROVIDED

### The Services Provided

42. The overall aim of the safeguarding and family support service is to respond to and assess concerns about children who may 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.
43. As a result of the work of the service, children are 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 into confident and caring adults.
44. Our **Assessment and Case Management Services** currently comprise a county-wide assessment team, five generic safeguarding teams covering geographical locations within the borough and a county-wide disabled children's team. Our five safeguarding teams cover the geographical areas of Maesteg, Ogmore, Pencoed, Bridgend and Porthcawl. The establishment of a fifth safeguarding team during 2013 has resulted in managers having fewer direct reports and social workers having considerably reduced caseloads thereby allowing more time to work directly with children and families. It has also improved management oversight and the support and mentoring afforded to practitioners, particularly those newly qualified.
45. Our **Family Support Team** work 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. 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.
46. Prior to March 2014, our **Services for Disabled Children and Young People** operated a 'wrap around' disability service model which brought the



responsibility for all disability service under one senior officer who now assumed the strategic lead in both the management and strategic development of services for disabled children and young people, including transition to adulthood. However, as a result of our restructure of our senior management team this responsibility has now been separated. The Group Manager for Disability, Transition and Case Management retains the strategic lead for the development of services for disabled children and young people, including transition to adulthood, which includes the responsibility for our disabled children's multi-agency strategy group. This multi-agency forum has continued to meet bi-monthly and continues to be well attended. Specialist services for disabled children and young people are provided by virtue of their status as 'children in need' as defined in S17 (11) of The Children Act, 1989 or as looked after children.

47. The responsibility for the specialist regulated short break services has now transferred to the Group Manager for Service Provision, alongside the other regulated services which are annually inspected by CSSIW.
48. Our specialist disability services seek to:
  - ensure that disabled children have the support they need to live 'ordinary lives' as a matter of course;
  - recognise that all children and young people are unique and may require different levels of support and different types of services such as short breaks depending on their needs and circumstances;
  - acknowledge that needs may change and services need to be reviewed to reflect this.
49. The Breaks for Carers of Disabled Children (Wales) Regulations came into force on 28<sup>th</sup> June 2012 which state that a Local Authority must prepare a 'short break services statement' setting out details of:
  - a) the range of services the local council provides,
  - b) any eligibility criteria for assessment for services,
  - c) how the services will meet the needs of carers in the area.
50. Bridgend's short breaks statement has been reviewed and re-published on the BCBC website. The Group Manager for Disability, Transition and Case Management will maintain responsibility for the annual reviewing of this document, ensuring all key stakeholders are consulted and represented in the publication.
51. Services referred to within the Short Breaks Statement include:

#### **The Disabled Children's Team**

This is an assessment case management team which has specialist knowledge and experience in working with disabled children. The team is based in Glan Ogwr offices in Bridgend and has a county wide remit. The Disabled Children's Team comprises 1 x Team Manager; 1 x Senior Practitioner; 2 x Transition Social Workers; 4 x generic Social Workers and 1 unqualified specialist worker for under 5's. To access the specialist support services, the child/young person's

needs must meet the eligibility criteria for an assessment to be undertaken by the team.

### **Bakers Way Residential Short Breaks Service**

Bakers Way is a 5 bedded residential short breaks home based in the Bryncethin area of Bridgend. The home is regulated and inspected annually by CSSIW. The outcome of this year's inspection was very positive. The home has been specially adapted to provide short break stays (including overnight) for children aged 0-18 years, who have a range of disabilities, including those with more complex medical needs.

### **Family Link Short Break Service**

Family Link is a short break fostering service which is based with the Disabled Children's Team. Family Link is a regulated service which is annually inspected by CSSIW as part of the annual fostering inspection. The Family Link scheme recruits, assesses and supervises short break foster carers who provide regular, planned short break stays (within their own homes), to disabled children and young people on the open caseload of the Disabled Children's Team.

### **The Complex Needs Play scheme**

The Complex Needs Play scheme is a specialist therapeutic play scheme which operates from Herons bridge school. The play scheme provides a specialist play and short break service to children with the most complex health needs and disabilities who would be unable to access any other play provision within the County Borough of Bridgend, due to the complexity of their needs. The play scheme operates for three days per week for two weeks in the Easter school holidays and four weeks of the summer holidays.

### **Trinity Care and Support**

Trinity Care and Support is a registered charity commissioned by Bridgend County Borough Council to provide a siting service to the parents of disabled children and young people. The service also provides personal assistants to accompany disabled young people to engage in community based social activities.

### **Direct Payments**

Direct payments are monetary payments made by local authorities directly to individuals who have been assessed as having community care needs that are eligible for certain services (including to people who care for others). Direct payments enable individuals to purchase the assistance or services that the local authority would otherwise provide. They therefore give individuals control over their own life by providing an alternative to social care services provided by a local authority. This helps to increase opportunities for independence, social inclusion and enhanced self-esteem. Since the original legislation was passed in 1996, Direct Payments have gradually been extended to include carers, parents of disabled children, and disabled 16 and 17 year olds. Parents of disabled children and young people on the active caseload of The Disabled Children's Team are provided with packages of Direct Payment support following the outcome of an assessment. These Direct Payments are often used to employ personal assistants who can provide care to the disabled child within their own home, or to assist disabled children and young people to engage in social activities.

The table on the next page illustrates the number of children receiving disability services during the period December 2013 to December 2014.

| Name of service          | Numbers of children   | Average frequency of visits/hours per month   |
|--------------------------|---|---|
| Bakers Way               | 41  | Overnight stays range from 1-4 per month.<br>Average stays per month = 2.<br><br>07 - 10 transition aged young people receive a fortnightly Outreach service. |
| Family Link              | 13  | Average of fortnightly visits/overnight stays.  |
| Trinity Care and Support | 20  | A range of hours and flexible packages of support matched to identified need.   |
| Complex Needs Playscheme | Up to 15 children<br>(15 attended Easter 2013 and 15 Summer 2013) | Offers a service for three days per week during Easter School holidays, and three days per week for four weeks in the Summer.                                 |

**Y Bont day care centre**, a commissioned service, provides specialist day care, after school and play scheme activities for children with additional needs and disabilities aged 0-18 years. In 2011, this service was successful in its tender to become the lead provider for the disability element of the discrete disability funding within the Families First programme. The programme ensured the continuation of the delivery of the specialist Early bird and Early bird Plus parenting programmes. The Families First programme was re-tendered at the end of 2013, and this time the lead provider for Disability programme 6 has been awarded to Barnardos (Cymru). Y Bont will continue to work with Barnardos (Cymru) in the delivery of services to families with disabled children who meet the Families First criteria. Part of this work will be to further develop early intervention approaches with Tier 1 and Tier 2 families, with the aim to strengthen parenting capacity and the management of challenging behaviours.

52. We are continuously seeking to improve our transition planning arrangements to ensure that disabled children including LAC are supported to have a smooth transition into adulthood. During 2013-14 funding has been awarded from the Western Bay Project Board to scope a service model to improve Transition to adulthood for disabled young people. This funding has enabled the commissioning of an independent consultant who has been tasked with scoping the feasibility of developing a multi-agency 14-25 Transition team. The Group Manager for Disability, Transition and Case Management continues to work closely with Adult Services in relation to this development. This has been achieved in establishing a social care pathway between Children's and Adults Services. Challenges remain in engaging partner agencies in order to establish corresponding pathways. The Western Bay development work will seek to address this issue as the development of a multi-agency team will require multi-agency sign up.

Decision making for the funding of college and specialist placements for young people up to the age of 18 years is agreed at the Children's Out of Authority panel. The Group Manager for Disability (Adults) continues to participate in this monthly forum. The Transition panel continues to provide an effective forum for joint decision making between Children's and Adults services.

The role of our Keyworker based within the Disabled Children's team has expanded to encompass all disabilities and all age groups, without losing the focus on Transition planning. Funding for a further twelve months has been agreed which includes an element of investment from the Youth Justice Board. Recognising the value of the keyworker skill set and role, the plan is for the keyworker to provide specialist training and joint working with the Youth Offending Service in relation to those young people with learning disabilities, in particular high functioning Autistic Spectrum Disorder.

53. The roll out of the new Guidance for Continuing Care for Children has commenced and this is being led by colleagues in ABMU Health Board. A pilot quality assurance panel has been established but is at present in an embryonic stage. Our Group Manager for Disability, Transition and Case Management has participated in the Quality Assurance Panel process representing Children's social services across the ABMU footprint. Progress will be monitored during 2014-15 via the Disabled Children and Young People's Strategy Group and the Transition Strategy Group.
54. The Just @sk Plus team continue to participate in the bi-monthly Transition panel and there is a plan to review and expand the role of the panel. Within our Adult Services, a more Person Centred Planning approach has been integrated into the Care Planning process ensuring that all young people who are approaching the time when they leave care are supported through their transition to independent living.
55. Our **Family Group Mediation Service** and our **Advocacy Service** are commissioned through the third sector and have enabled us to develop an appropriate range of support services for individual children and their families.
56. Our **Accommodation and Regulated Services** provide a range of support and resources to children who cannot remain with their families, in the short or longer term. These services provide placements either with foster carers or in residential care, where possible, helping children to mainstream within their families and enhancing the quality of life for them, their siblings and their carers. Where long term plans require a new permanent family for a child, our adoption service recruit and place children with adoptive parents. Other solutions that provide permanence for children include residence orders and special guardianship orders, particularly in relation to care provided by relatives and friends. The service will undertake an assessment of need and will provide financial support where legislation and guidance provide for this and families meet the requirements. During 2013-14, all our regulated service received CSSIW inspection, all being very positive, with no non-compliance notices issues. These are available for the public to read on the CSSIW web site.
57. The **Adoption Service** provides a range of services and interventions across five key areas affected by adoption. The areas are:

- assessing and supporting prospective adopters;
- assessing non-agency adoption (also known as step parent adoptions);
- birth record counseling and intermediary services (BRC and IS);
- adoption support (assessments and support to anyone affected by adoption);
- twin tracking and family finding, which involves working with birth families of children in or following care proceedings and once a Placement Order has been granted by court, searching for an adoptive placement.

The Adoption Service was created as a distinct service, separate from Fostering, in 2006 and has since that time strengthened not only its identity but also performance.

58. In April 2012, a set of local performance indicators (PIs) were agreed, in the absence of any national PIs. The targets reflected the number of LAC at the time and the trend in Wales to place approximately 4%-4.5% of LAC in adoptive placements. The targets also reflected the national shortage of adopters and provided an aspirational target for approval of adopters. The targets we set for the 2013-14 year were exceeded as in previous years. The targets are not overly simple or artificially low but are realistic yet challenging. Achieving the targets has involved prioritising the placement of children for adoption and approving adopters over other aspects of the service.
59. The 2012-13 targets, achievements and performance of the Adoption Service are set out in the table below;

#### Summary of targets and achievements in 2013-14

|  | Target Set | Number Achieved |
|--|------------|-----------------|
| Number of Children Placed for adoption | 15         | 28              |
| Number of Adoption Orders granted      | 15         | 25              |
| Number of adopters approved            | 15         | 20              |

The increase in the number of LAC children each year continues to be the position nationally. This has placed increased pressure on the Adoption Service as more children require adoptive placements year on year.

60. **Bridgend Foster Care Service (BFC)** provides general, relative and Regulation 38 (emergency family and friends) foster carers for children accommodated by the local authority. During 2013-14 we increased the number of general foster carers by 9 to 94 with general foster carers providing an increase of 26 placements to 194 placements. On the 31<sup>st</sup> March 2014 we had 35 relative carers providing 59 placements and 10 Regulation 38 carers providing 14 placements. Bridgend Foster Care's, general foster carers are members of the public who apply to become foster carers for the local authority. Relative foster carers are relatives who have been approved specifically to care for named children who are looked after by the local authority. Regulation 38 carers are people who have children placed with them in an emergency situation by the

local authority for a period of up to six weeks or whilst further assessments are undertaken, again normally people who are family members and occasionally family friends.

61. The Support Care scheme which seeks to prevent children who are considered to be at high risk of entering the looked after system now has 3 sets of approved carers who can support parents in their own homes in an attempt to avoid their children becoming looked after. During 2013-14 we launched our refreshed Regulation 38 carer and Relative foster carer handbooks which are now distributed routinely. In addition we have continued to review and update our general foster carer handbook. The Childrens guide to placements for young children has been written and will shortly be launched along with a new guide for teenagers.
62. Our “Delegated Authority” policy has been written and following extensive consultation with staff and foster carers and has now been agreed by Cabinet. IRO’s and Safeguarding Team Managers have received briefings about the purpose and mechanism for using the policy. All staff teams have been provided with the policy and a clear explanation of their roles and responsibilities within it to ensure safe and appropriate usage.
63. In 2013-14, Bridgend Foster Care (BFC) was again commended by CSSIW inspectors within a very positive inspection report which noted the ongoing good performance of the team overall. Recruitment of new foster carers has been strong, and almost all of the (previously established) Resolutions Fostering Service foster carers have chosen to transfer to Bridgend Foster Care. We have also seen an increase in the number of foster carers transferring in from Independent Fostering Agencies.
64. During the year, South Wales Improvement Collaboration (SWIC) produced a best practice guide for recruitment and marketing for all Local Authority Fostering Services within its membership. The SWIC fostering group is currently working on proposals to establish a regional marketing centre for all fostering enquiries across Wales and are considering the potential for harmonisation of payments across the SWIC region.
65. Our **Just @sk Plus Service**, based within the town centre of Bridgend brings together ‘leaving care’ services and various aspects of the Council’s youth service provision. It provides a universal drop in service for young people aged 16-25 years, offering a range of services from sexual health advice, careers guidance and counselling. In addition to the “universal entitlement”, there are additional targeted services including the council’s leaving care service, a homelessness service for 16 and 17 year olds and case management services for young people 16 and over who are LAC. The service works alongside case managers to ensure that plans are in place to enable a looked after 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. 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. A recent evaluation of this service can be found at Appendix IV of this report.

66. Our **Independent Reviewing Service** has an important Quality Assurance function and works towards ensuring all children within the care of Bridgend County Borough Council has a robust effective care plan. This plan is aimed towards improving outcomes for children and young people in providing a stable and secure childhood where their health, education and emotional wellbeing is promoted through effective care planning. It is the function of the Independent Reviewing service to ensure the care plan is appropriate and progressive in Safeguarding whilst meeting all identified needs.
67. Independent Reviewing Officers (IRO) are required to independently review the Care Plans of all Looked After Children and those children with a Child Protection Plan and have their names on the child protection register (CPR). The Review will include consultation with and attendance of relevant agencies (health, education and Police etc.) and will usually include the child/young person, their Social Worker, carers and family members. Timescales for Reviews are set out in the Children Act 1989. First Review will take place within 28 days, next Review three months following the initial and then six months from the second Review. Subsequent Reviews are held every six months unless there has been an unplanned change of placement where a Review will need to be held within 28 days.
68. Within Bridgend County Borough Council, the IRO Service has the following roles and responsibilities;
  - To Review and oversee the effectiveness and the appropriateness of Care Plans for those Children and Young People the Council has responsibility for. This includes the chairing of all Child Protection Conferences, Looked After Children Reviews, including children placed for Adoption and Pathway Plans for young people moving towards independent living.
  - To ensure all LAC Reviews and Children Protection Conferences take place within compliance of the legal timescales.
  - To Chair all Child Protection Conferences on behalf of Western Bay Safeguarding Children Board.
  - To provide a report on each Review held which includes recommendations to any changes to the Care Plan and to monitor the progress of the Care Plan by tracking cases between Reviews.
  - To ensure the child/young person's rights are protected.
  - To ensure the voice of the child is heard throughout the care planning process and to monitor the child's wishes and feelings have been recorded.
  - To support and advise through a mentoring and coaching role to social work staff in relation to effective care planning.
  - To raise IRO concerns where they have been identified through the agreed protocol and to escalate unresolved concerns regarding care planning to the appropriate level of the Local Authority's management structure.
  - The quality assurance function of the IRO service aims to highlight concerns around specific cases and also any trends relating to care planning practice. It also has a duty to highlight good practice.

- All LAC are subject to Health Plans to promote their health and development. The IRO's have responsibility to ensure the Health Plans are monitored and meeting the children's needs within the LAC reviewing process.
  - All LAC children are subject to a Personal Education Plan (PEP). The IRO is responsible for ensuring this is in place and regularly reviewed to ensure all educational needs are being met.
69. 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 permanence 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. The independence within the role of the reviewing officers has been promoted by developing closer links with CAFCASS. The Service has also developed and introduced monitoring and reviewing forms which are used prior to and after conferences and reviews. These documents are reviewed monthly and promote better standards of practice and allow more comprehensive scrutiny and tracking of care plans. As part of induction the IRO manager delivers information to practitioners and managers within the safeguarding service aimed at enhancing the quality of care planning.
70. Our **LACE Service (looked after children in education)** ensures that the many educational needs of a looked after child are addressed and to safeguard and promote their education. This involves a multi-agency approach and close liaison with designated teachers, additional education needs services, social workers and carers. The team provide time-limited and focused educational support and mentoring to LAC who require additional educational support.
71. Our **Child Protection Service (Education and Youth Service)** provides support and advice to schools regarding individual cases, training for school staff, governors, educational psychologists, Education Welfare Officers, access and inclusion service, schools counsellors, school transport and the youth service. It ensures that schools are clear about safeguarding policies, procedures and protocols and it advises and supports schools and services when dealing with professional abuse allegations. During 2013-14, the Child Protection Co-ordinator for Education and the Youth Service delivered child protection awareness training to over 1,200 schools and youth service as part of a three year rolling programme. Business support for training is provided by SCWDP.
72. Training for governors is arranged twice yearly via governor support as well as the availability of sessions organised for school governing bodies at the schools. Over the last year 30 governors have participated in training.
73. The Child Protection Team for Education and Youth Service are involved in delivering multi-agency training on safeguarding children – recognition and referral and child protection conferences and core group working.
74. **Bridgend's Youth Offending Service (YOS)** is a multi-agency service that works in partnership across Bridgend to deliver a range of interventions to reduce anti-social behaviour, offending and re-offending/repeat offending amongst children and young people between the ages of eight and eighteen years of age.



The YOS is involved in early intervention and prevention work through to the management of young people who pose a high risk of harm to others.

75. To work effectively, the YOS engages with other service providers, the local community, parents, carers and family members and the victims of crime and anti-social behaviour. The YOS supervises children and young people within the community and those within the secure estate providing a service that is available every day to ensure that high risk and vulnerable young people are appropriately managed within the community.
76. The Youth Offending Service reports quarterly to the Youth Justice Board on six Key Performance Indicators the first being in relation to how well they stop young people from entering the Youth Justice System in the first place. The YOS have seen another successful year in relation to this indicator and this is attributed to effective partnership working and the "Bureau".
77. Initially in 2011 Bridgend Youth Bureau was set up specifically to deal with young people aged 10 – 17 who were arrested for the first time for offences considered less serious in nature by the custody sergeant and Crown Prosecution Service. However over the past 12 months, with the implementation of new legislation and guidance (Legal Aid, Sentencing and Punishment of Offenders Act 2012), the Bureau now deals with approximately 85% of all crime committed by young people in Bridgend. The decision to refer to the Bureau is made at the Police Station and takes into account the nature of the offence, acceptance of responsibility, number of offences and current circumstances of the young person.
78. The Bureau is a panel that meets weekly and consists of the Bureau Co-ordinator (YOS), a Police representative, victim representation and a community volunteer. When a young person is bailed to the Bureau, the panel have several disposals available to them:
  - A non-criminal disposal – a restorative disposal that can include a face to face apology, a victim workshop, community reparation and specialist agency referrals e.g. substance misuse. There will be no record of this disposal held on the Police National Computer against the young person's name.
  - A Caution – the above elements are all available but not enforceable but a record will be held on PNC
  - A Conditional Caution – as above, however there is a statutory obligation for the young person to comply. Failure to do so may result in the matter being referred to Court
  - Recommend Prosecution – if the offence is deemed too serious for a Bureau intervention or if young person does not co-operate with the Bureau process then the case can be referred to the Youth Court
79. During 2013, 205 young people have been through the Bureau process. Of these: 163 have received non-criminal disposals; 32 received cautions; 5 received conditional cautions; 5 were referred to Court.

80. Of the 205, 15 have reoffended – a success rate of 93%. Taking twelve months statistics can be over optimistic so 115 randomly chosen cases have been tracked since the inception of the Bureau in 2011, 65% have not gone on to reoffend.
81. South Wales Police are so impressed with the process that they have made a submission to the Howard League for Penal Reform for the Bureau to be considered for national recognition.
82. Reducing re-offending amongst children and young people who enter the youth justice system is also a key performance measure and has remained a focus for the YOS. Less young people are entering the Youth Justice System as a result of the Bureau interventions but those who do are presenting with more complex needs. Bridgend YOS has over the past year worked closely with partners, in particular Police and Probation supported by the Police and Crime Commissioners Office to pilot new approaches to working with 18-21 year olds, many of whom have been previously known to the YOS. The YOS have been keen to undertake this work as it will directly impact on reoffending rates if successful. One strand of the pilot project involves working with the custody sergeants. The YOS has been engaging young adults entering the custody suite in attempt to stop the offending behaviour escalating using a solution focused approach. The project has been running since September 2013 with early yet positive results so far. The pilot will be evaluated by Swansea University. Also within the pilot project is the development of diversionary approaches similar to the Bureau for young adults who have offended for the first time. The Police and Crime Commissioners aim is that, if the evaluation is positive, the Bridgend approach will be shared across the South Wales Policing area.
83. With the numbers entering the Court system reducing the YOS has continued to keep the use of custody low, being one of the lowest custody areas in Wales. The use of secure remand has also been low maintaining the Courts confidence in the YOS's ability to supervise young people within the community effectively.
84. Reduction in first time entrants, reducing reoffending and reducing the use of custody are UK national performance indicators. There are also three Wales only indicators i.e. access to accommodation; access to substance misuse services and access to education, training and employment. The YOS performs well in all areas but are particularly proud of the Skills Development Programme. This has been further developed over the year with the project being commissioned by local primary schools to build outdoor classrooms and school play-ground equipment. This has allowed schools the opportunity to have structures within the school grounds built to a high quality specification at a fraction of the price it may ordinarily cost, allowing better use of resources. It gives the opportunity for young people to give something back to the community and be very proud of their achievements. The YOS has recently completed a feasibility study in relation to the project becoming a social enterprise and one young man previously open to the YOS is about to start a six month paid work placement with the project with the aim of securing continued employment.
85. The YOS seem to be constantly going through change and this year has been no exception with the ongoing development of the Western Bay Youth Justice and Early Intervention Service which is an amalgamation of Bridgend, Neath Port

Talbot and Swansea Youth Offending Services. This has been led by the YOS Managers identifying the need to be proactive in how they meet the challenges ahead, one of which being the need to find efficiencies. The amalgamation has been approached positively with the view that that this gives the opportunity to take three well performing services to produce an exceptional one.

86. **Family Intervention Services**

In Bridgend we have a number of Family Intervention Services including our **Connecting Families Service**, a Local Service Board led initiative that has further refined different ways to work more effectively with families that have the most chronic and complex difficulties and who draw on a wide range of multi-agency services. It provides intensive multi-agency, evidenced-based interventions similar to the IFSS model. The service was designed locally using the evidence of good practice from other areas including IFSS pioneering authorities in Wales and the Westminster recovery programme. The main features of the service are that it;

- is a multi-agency team;
- uses evidence based interventions;
- is extremely intense in the early phase;
- works with every individual within the family unit.

87. Connecting Families is a multi-agency, co-located team and consists of personnel from the following agencies: Safeguarding, Wellbeing, Education, SMAT (substance misuse), Mental health, Health visiting, Police, Probation, Job Centre Plus, Voluntary sector (domestic abuse charity). There continues to be a number of principals which underpin the delivery of the service.

- The service is delivered in the family's home and/or community.
- The service is intensive, this can mean daily visits.
- The service uses evidence based interventions which are motivational and use the family's own perception of the issues and their motivation to create a preferred future.

88. During 2013-14 the Connecting Families (CF) information pack was revised and re-written to reflect positive developments within the service and during the year service user and professional's feedback informed the re-launch of the CF information. A DVD was also produced during the year which included families giving their feedback on the service they received from CF and how that has impacted on their situation. It is envisaged that information gained via this process will be used to further inform the development of this service. An "open space" event (participation event) invited all service users to share their view and offer ideas for further development. Arising out of the "Open Space" event a group has been established comprising of former service users who have volunteered to continue to meet and assist with identified service enhancements. All subsequent service users will be invited to join and/or contribute. Consequently, parents and families are now better informed of the range of services available to them and their families and how to access them.

89. With a view to increasing active service user participation Connecting Families adult service users, dating from the commencement of the service, were invited

to assist the service to more clearly understand what the service was offering that was of tangible benefit and what could be done improve our service. 43% of service users responded to the outcome based questions asked and were subsequently invited to an event to assist the service understand and theme the responses received. The key themes emerging in respect of improvement being;

- Increased emphasis on the importance of the timeliness of service offer i.e. when change is most likely and family members are willing to engage,
- having clear understandable and relevant information in respect of the service and specifically the manner of delivery.

90. The responses provided significant insight into what was valued and considered to have made positive differences in the lives of families this has reinforced the evidenced based values and practice of the service.

91. During 2013-14 we commissioned an independent, outcome based, process and impact evaluation of our Connecting Families service to sit alongside the extensive data collated indicating a substantial cost aversion within public services. The evaluation gave clear indications of the positive benefits the service was having in respect of safe and healthy family functioning, specifically in the domains of parenting practice, parental wellbeing and confidence, improved family relationships and the broader wellbeing of the family. Additionally reported were improved relationships with other agency service providers. Both professionals and parents reported examples of positive changes being sustained. Positive outcomes were directly linked to the multi-agency, evidence based process and practice delivery i.e. the whole family, strengths based, motivational approach of Connecting Families. The evaluation identified the manner of delivery as a specific strength a recurrent theme being the trusting and respectful relationship established between worker and family which held families at the centre of the process. The evaluation highlighted areas which would improve the effectiveness of the Connecting Families service, for example;

- Improved awareness of the service and referral process.
- Ensure families are matched with the 'right' worker.
- Maximise the capacity of the service
- Involvement of partner agencies.

92. This year we intend to build on the positive outcomes reported in evaluation and address identified areas for development through continued consultation with service users and further embedding the (RT) Resilience framework into service delivery. We will also review and build the capacity and input of multi-agency partners within Connecting Families.

93. In order to improve service access at the most productive time for families, facing complex needs, Connecting Families have carried out a profiling exercise to pre-identify families who may benefit from the service. This year the service aims to develop an 'active invitation' process in respect of identified families. (Appendix 11 provides a case study of a family that has benefitted from CF interventions).

94. Our **Intensive Family Support Service (IFSS)** became operational on the 1<sup>st</sup> of February 2013. The operational activity of the service is being monitored and reviewed as it progresses. IFSS is based on a highly skilled staff cohort and all practitioners are either qualified social workers or nurses. The Western Bay IFSS consists of:
- 8 consultant social workers
  - 2 senior practitioner social workers
  - 2 health visitors
  - 2 substance misuse nurses
  - 2 Lead trainers
  - 3 business support
95. IFSS is a statutory service with a prescribed model of intervention which requires all staff to be trained in the model and for a number of staff to achieve 'train the trainer' status in the model. IFSS is a model of working in a very intensive way with families where there is substance misuse. The prescribed model is very well evidenced although the actual model as a whole is still subject to early evaluation. Like CF, IFSS use a motivational model of intervention which is client led. The model ensures that both children and adults in families are given the opportunity to air their views about their future and decide what steps need to be taken to achieve these preferred outcomes.
96. Within IFSS and CF the development of the family plan is undertaken with the full involvement with each member of the family taking a motivational and solution focused approach. Where the families objectives are in direct contrast to the child's care plan a mediation exercise is undertaken to try and find a solution agreeable to both social worker and family. Families are involved in Core Groups, Conferences and review meetings to ensure that their views are heard and acted upon and their goals set are achieved.
97. Following an IFSS intervention families and professionals are requested to complete a feedback form that details their views (positive and negative) on the service provided. Feedback forms from service users indicate that this model feels good for service users and that the empowering approach makes them feel they are able to direct their own preferred future. Any recommendations to improve the service are taken on board during any reviews.
98. Since IFSS became operational in February 2013, a number of positive outcomes have been identified for families that have received the service. The process of reviewing these cases to determine success continues. IFSS are further developing a "cost benefit analysis tool" that will establish how cost effective the service has been too to various organisations.
99. The Welsh Government target for the number of families that IFSS have to be involved with was 100 within the financial year. However high numbers of referrals to the service meant that this target was met by December

(Appendix 12 provides a case study of a family that has benefitted from IFSS interventions.)

100. All our family intervention service teams have continued to use work plans which are written in consultation with the child / young person's social worker this enables outcomes and interventions to be measured. Scales and measures to measure progress are routinely used. Routine scaling is undertaken with every family involved in the CF and IFS service before and after intervention in order to measure progress and outcomes. There is an annual outcomes report produced which collates that information giving an overall picture of the outcomes achieved across a variety of measures for the service as a whole. We recognise that further work needs to be done within Family Support Services on routinely capturing and utilising the views of service users. As such we have begun collecting service user feedback which will become more routine over the coming year and methods of collating and utilising this information will be developed. Family Support Team now use feedback forms at the end of intervention with all families.
101. Over the past 2 years we have developed four new family support services within Safeguarding and Family support (Invisible Walls, IFSS, Connecting Families and Improving Futures ) resulting in the range and quantity of services available to support families in need has been extended significantly. This has led to a reduction in waiting times for families to access services and improved connections between services, ensuring that families receive the service that they need seamlessly and also that those families move from service to service without the use of waiting lists.
102. To ensure that people are able to find information about available services and where people are eligible, they receive a good and timely response to their needs we have streamlined the referral process to include referral via FISP (Family Intervention Support Panel) to include a wider range of agencies. Consequently there is now greater understanding amongst practitioners of how to access family support functions with an easier process for practitioners to refer families through a single point of access. FISP meetings now held on a weekly basis which ensures that there is an improved response for support for families.
103. Information regarding FISP and its functions has been widely disseminated. Included in the development of FISP has been a process to ensure that information regarding families is shared more effectively. Partner agencies now as a result provide information as well as receive information. Decision making following FISP including all the information shared at FISP is recorded within ICS within 24 Hrs. Improved information sharing between agencies has also ensured that referrals are allocated to the most appropriate agency which has ultimately led to an improved coordinated multi-agency response to the child and family need. The refining of the FISP process has achieved improvements in streamlining access to service. This has also helped avoid drift and duplication of services. There is now 1 referral pathway for all Family Intervention Services based in Bridgend.
104. As the process of FISP is fully embedded the Panel will be able to determine if there is current unmet need. The development of FISP as a single point of referral has ensured that referrals for Family Intervention Services are processed quickly, meaning families receive a more timely service when needs are identified. Much development has been done in ensuring our existing FS services dovetail well with the new and developing services (e.g. CF, IW & IFSS)

this includes the co-location of all these services. It has already been acknowledged that the Consultation Surgeries currently offered by IFSS will be extended and the sessions will be led by a consultant social worker who will provide information on all the family intervention services.

105. Our **Invisible Walls Wales Project** is a new initiative which seeks to integrate the support and interventions offered to specific men in custody alongside the whole family. The range of services are tailored to individual families and will include mentoring support, group work, mediation, family group conferencing, parenting and other related services according to need. The support is available for a period of 12-18months. The project is funded by the Big Lottery for a period of 4 years and has 3 core aims, to reduce re-offending, reduce inter-generational offending and improve outcomes for children and families affected by imprisonment. The project is a partnership between G4S, Barnardo's, BCBC, Gwalia and the Welsh Centre for Crime and Social Justice. It works with children and young people who are affected by parental imprisonment. An interim report has been published which demonstrates a number of positive outcomes for Service users and families (including children). On a number of occasions during the past year, service users have given presentations at multi agency events. A single point of contact (ACCORD) has been developed within schools and as part of this there is a nominated link provided for children to access who are affected by parental imprisonment, therefore increasing awareness on how children and families can be supported. Active research is ongoing as part of the project and which includes feedback and involvement from families. Invisible Walls Wales are developing a participation strategy to ensure the involvement of service users in service delivery. The service is also developing peer mentor/volunteering opportunities within the project to once more develop service user participation. (Appendix 13 provides a case study in respect of one family who have benefited from accessing the service.)

## Quality of Services

106. We constantly strive to maintain and improve the quality and range of the services that we provide. During 2013-14 we will continue to embed changes made to the functionality of the Integrated Childrens System which continues to deliver a comprehensive set of information that allows managers and practitioners to monitor performance effectively. Management information is produced regularly for managers at all levels and is analysed and used to inform decisions and priorities for service change and improvement.
107. The quality assurance framework has supported the effective delivery of services. In particular, regular case file audit activity assists in raising standards, improving practice and lends for identifying and sharing good practice.
108. Within the quality assurance framework, we have continued to monitor how our supervision policy is implemented which allows for the frequency of supervision to be more accurately recorded and reported. In 2013-14 84% of formal supervision sessions were conducted and recorded by managers with social workers within agency expectations, i.e. at least at monthly intervals.
109. 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 three residential childcare units, Bakers Way, Sunnybank, Newbridge House and our Fostering Service (encompassing Resolutions Fostering and the Family Link Scheme) all received positive CSSIW inspections during 2013-14.

#### 110. Key Areas for Improvement noted for 2013-14

- Maintain a focus on the quality of decision-making, ensuring the reasons for decisions are consistently recorded, including better capture of service users' views.

In 2013-14 we made changes to a number of ICS exemplars which now have mandatory field for recording and reflecting on children's wishes, views and feelings.

- Improve how we share the learning that comes out of quality assurance activities with front line social work practitioners, managers and other staff.

Where issues of significant learning are identified through audit and evaluations of safeguarding activities, mandatory training and staff briefings have been introduced to ensure that learning is cascaded to all relevant practitioners.

- Launch an audit tool for use by senior managers to examine the quality of supervision.

As stated above, the frequency of supervision sessions conducted between managers and social workers are recorded to allow senior managers to ensure that supervision is being delivered in line with agency expectations. In 2013-14, 84% of supervision sessions were held within agency expectation timescales.

- Ensure Elected Members have support to undertake their corporate parenting responsibilities and that scrutiny arrangements maintain their robust approach.

During 2013-14 a number of briefing sessions were held with Members of Corporate Parenting Committee and Overview and Scrutiny Committee. In addition all Council Members received training on the Council's commitment to offering professional advocacy for children and young people.

## **THE EFFECT ON PEOPLE'S LIVES**

### **Safeguarding Vulnerable Children and Young People**

111. The Children Act 2004 makes it clear that it is everybody's responsibility to safeguard and promote the welfare of children and young people. On the 1<sup>st</sup> of April Bridgend's Local Safeguarding Children's Board was disbanded with the establishment of the Western Bay Regional Safeguarding Children Board (WBSCB) following the direction from Welsh Government to respond to the white paper: Sustainable Social Services: a Framework for Action and the



development of the Social Services and Wellbeing (Wales) Act 2014. It works with three local authorities, three Youth Offending Services, one Health Board, one Police force (two Basic command units), the National Probation Service, Welsh Ambulance Service, Public Health Wales and voluntary sector organisations. Since its establishment it has been chaired by the Local Authority Director for Social Services from Neath Port Talbot.

112. The Terms of Reference developed for WBSCB promote the requirement for accountability and are clear in their definitions of professional challenge and holding to account. These Terms of Reference are reviewed annually to ensure they remain fit for purpose. Each Board member is required to sign up to a member Role Profile to which they are individually accountable in relation to their contribution to the Board and attendance at Board meetings. The Board also has measures within its Performance and Impact Framework which assists in reporting activity of Board members against elements within their role profiles which also allows the Board to demonstrate multi agency working at a strategic level.
113. The Board's business is managed through a dedicated Business Management Unit which is financed through the Board's budget. The Business Management Unit currently consists of one Strategic Business and Development Manager, one Strategic Business Coordinator and two administrators and within these arrangements the unit provides support to both the WBSCB and the Western Bay Safeguarding Adult Board. The Business Management Unit was established alongside both the regional Boards in April 2013 and is carefully monitored by the Strategic Business Manager to ensure its structure and functions remain fit for purpose.

## **WBSCB - Summary of activity**

### **Governance:**

114. The WBSCB has spent the first 12 months of its existence establishing itself in governance, business arrangements and strategic priorities. The Performance and Impact Framework requires the Board to monitor its performance against standards set by Welsh Government within the SAITv6 Tool and against its own strategic priorities. These standards assist the Board in its assurances that arrangements are in place to support the business and structure of the Board in terms of membership, finance and process. Membership is checked to be compliant with the requirements within Chapter 4 Safeguarding Children: Working Together under the Children Act 2004 and attendance is monitored. Each member has a signed role profile and at establishment all members were offered an opportunity for induction. Due to members' experience and membership at other SCBs not many members took up the offer. Since implementation however, where new members have been identified, each has received an induction and signed a role profile.
115. Since its establishment each statutory agency has been represented at each meeting with only 3 members sending deputies on one occasion. Individually most members have achieved their agreed attendance record of two thirds however there are some members who have not fulfilled the agreed attendance as signed up to in their role profiles.

116. The Board has a structured agenda and status reports from each of its management groups is provided in written format with the Chair attending as a Board member to outline progress. Activity for each of the management groups is monitored via the Business Management Unit using action registers and activity is high in most groups:

**Child Practice Review Management Group (CPRMG)**

117. The CPRMG is chaired by the Designated Nurse within Safeguarding Children’s Services Public Health Wales. In January 2013 the Child Practice Review Guidance which replaced Chapter 10 Safeguarding Children: Working Together under the Children Act 2004 was implemented. The Child Practice Review Management Group has developed referral and decision making processes to manage cases consistently across the region. The processes are aligned to the National Child Death Review processes and PRUDIC processes to ensure that all child deaths are reported via this group.

118. In interpreting the new guidance the CPRMG has a process by which Multi Agency Professional Forums take place in specific cases where it’s identified that lessons for future practice can be learned. These processes allow a much more transparent and robust approach to reviewing cases that do not meet the threshold for a concise or extended child practice review however there is an identified risk of exhausting capacity very quickly through this process.

119. Since its implementation the CPRMG has considered 20 separate cases for review at the time writing the status of each is outlined below:

|                                 |   |
|---------------------------------|---|
| Historic CPR                    | 1 |
| Extended CPR                    | 1 |
| Concise CPR                     | 4 |
| Multi Agency Professional Forum | 4 |
| No review                       | 6 |
| More information required       | 4 |

In accordance with the WBSCB’s Performance and Impact Framework the performance information is recorded below:

| <b>Measure</b>   | <b>Number</b> | <b>Comment &amp; Analysis</b>  |
|--|---------------|--|
| How many cases have been considered for Review during the year               | 20            | There has been a significant increase in referrals since the new guidance has been implemented.                                |
| How many cases considered were referred to multi agency professional forums? | 4             | These cases were identified as not meeting a threshold for review but had identified opportunities to improve future practice. |
| How many were recommended to WBSCB Chair for concise or extended             | 6             | Just over a quarter of all cases referred were identified as meeting the criteria in the new guidance.                         |

|   |     |  |
|---|-----|--|
| review?   |     |  |
| How many reviews were completed during the year?                                  | 0   | The historical, extended and concise reviews are at different stages of completion based on a start date.  |
| How many concise or extended reviews were completed within the 6 month timescale? | 0   | The CPRMG is continuing to learn lessons in relation to how to manage the reviews. The date of first panel meeting to drafting the output report may very well meet the timescales set out in guidance however; coordinating reviews in an environment of restricted resources and capacity has impacted on establishing panels and bringing the reports to Board.   |
| Were all learning events attended appropriately?                                  | No  | Not all learning events have been attended by all required attendees. This has been mainly due to sickness absence or practitioners who have moved on. There does appear to be a theme of nonattendance from primary care services from within the Health Board.   |
| What proportion of staff evaluation from learning events was positive?            | 95% | Evaluations of the learning events have identified that practitioners found attendance at learning events to be positive, helpful and reflective. Practitioners have said that the overall experience has assisted closure and that they feel safe and supported in their contributions to identifying practice improvements. The evaluations which were not positive focussed on accommodation issues or missed opportunities from absent practitioners which would have increased value. |

### Policy Procedure Practice Management Group (PPPMG)

120. The PPPMG is chaired by the Assistant Nurse Director for Safeguarding within ABMUHB and has a focussed work plan and library. In its first year of establishment the group has considered/developed and recommended ratification on 14 separate pieces of work and has implemented the following protocols/practice guidance documents:

- Managing Neglect
- Guidelines on the Production of Policies and Protocols
- Working with Uncooperative Families
- Children Visiting Secure Psychiatric hospitals

- Resolution of Professional Differences
- Birth Planning Guidance
- Safeguarding Protocol for non-statutory organisations
- Protocol for the Supervision of Children with Child Protection Concerns in Hospitals
- Risk taking Behaviour Practice Guidance

### **Audit and Evaluation Management Group (AEMG)**

121. The audit and Evaluation Management Group is Chaired by the Safeguarding, Reviewing and Quality Assurance Principal Officer in Children and Young People's Services (NPTCBC). Upon establishment of the new regional arrangements outstanding audit requirements arising from serious case reviews were collated. Local priorities for audit were also considered and a 15 month audit plan has been developed to address legacy audit requirements, local requirements and statutory requirements. This busy group meets monthly to address a key area for audit.
122. Audits began in earnest following the development of the audit plan and agreed audit tools and so far this group has produced 3 evaluation reports on the following areas:
- Pre-birth core assessments which have led to initiating care proceedings;
  - Cases considered under the statutory guidance of Children at risk from Sexual Exploitation; and
  - Children on the Child Protection Register for over 2 years.

### **Strategic Training Management Group (STMG)**

123. The STMG Group has faced significant challenge over the previous 12 months particularly in its attempts to provide effective levels of safeguarding training over such a large workforce area. This group is working closely with the CPRMG to deliver a multi-agency shared learning event in May 2014 based on the findings of recent serious case reviews and child practice reviews and is currently reviewing its terms of reference and strategic direction.
124. There is a call to merge the group with that of the WBSAB to develop a more strategic approach to safeguarding training for the Board. This will focus on identifying areas of training and areas of need, developing and quality assuring consistent packages of training and even branding to assist smaller and voluntary organisations in the training they deliver.

### **Communication & Engagement Management Group (CEMG)**

125. This group did not exist in previous structures prior to regionalisation and was developed in response to the previous CSSIW and Joint Inspection reports into LSCBs in Wales.
126. The group is chaired from within the Business Management Unit however staff turnover and continued debates on membership have had an impact on progress.

127. There is currently a draft communication strategy and media protocol which is being developed but requires consideration in its widest sense to promote the work of the Safeguarding Boards whilst also managing media interest in the publication of reviews. This group is also responsible for understanding and establishing mechanisms for engagement and participation with young people and has a developed work plan to address its business and core functions.
128. The Communication & Engagement Management Group has achieved the following:
- Development of a website for both WBSCB and WBSAB: [www.wbsb.co.uk](http://www.wbsb.co.uk)
  - Coordinated a successful launch of the SCB
  - Planned and arranged the launch conference for the SAB including securing a speech from the Deputy Minister in Welsh Government
  - Developed a routine newsletter for the whole workforce
  - Designed and produced promotional merchandise to promote the Boards

### **Review of WBSCB Strategic Priorities**

129. At its establishment the WBSCB agreed a set of Strategic priorities for its first year. (These can be found at Appendix 14). At the time the Board recognised that some areas for priority were actually set out in core function however to ensure a stable and successful establishment to regional arrangements made them a priority over the first 12 months of development.

### **Multi-agency Safeguarding Activity in Bridgend**

130. Our Safeguarding Manager and case managing teams actively contribute to local Multi-Agency Public Protection Arrangements (MAPPA) and to Multi-Agency Risk Assessment Conferences (MARAC) to ensure potential vulnerabilities are recognised and children and young people safeguarded appropriately. People will be able to find out where and how to get hold of the help they need when someone may be at risk. Children and adults are supported by staff from all agencies that understand and carry out their safeguarding responsibilities effectively. In Bridgend we aim to ensure that staff across the whole council are aware of safeguarding issues and respond appropriately to specific requests for services for/from children and young people. A new Council-wide policy on Safeguarding has been written to ensure that every member of staff within the Council is aware of their duties to safeguard and promote the welfare of all children and adults with whom they come into contact with.

### **Safeguarding Training.**

131. During 2013-14 we carried out a training needs analysis which has informed the Social Care Workforce Development Programme (SCDWP). Throughout the past year our Child Protection Co-ordinator for Education and the Youth Service delivered child protection awareness training to all school and youth service staff as part of a three year rolling programme. Bespoke training sessions can also be arranged if a need is identified. Business support for training is provided by SCWDP and this involves liaison with schools and others to set up dates,

sending training packs and certificates and collating evaluations.

132. Training for governors is arranged twice yearly via governor support as well as the availability of sessions organised for school governing bodies at the schools.
133. The Child Protection Team for Education and Youth Service are also part of the training local delivery group and co-facilitate multi-agency training on safeguarding children – recognition and referral and child protection conferences and core group working. Such training also includes some the dissemination of headlines information from SCR's and audits. We recognise that it is important to ensure that training delivery leads to improved practice through reinforcing the links between induction, appraisal, supervision and training.
134. To ensure that children and adults are protected from harm and abuse wherever possible, we ensure that there are clear multi-agency procedures and processes for both assessment and decision-making which are consistently implemented across agencies. Such practice continues to comply with Welsh Assembly Government 2006 guidance document: Safeguarding Children: Working Together under the Children Act 2004 and the All Wales Child Protection Procedures 2008.
135. All multi-agency procedures and protocols are added to the WBSCB' website and in Bridgend, our Interactive Practice Guide which offers 'one stop shop' access to these materials for practitioners. In procedures there are a range of opportunities for professionals to meet with families to assess and manage risk, create and review care plans with the benefit of multi-agency input. These include strategy meetings, children in need planning meetings and reviews, child protection conferences and core group meetings.

### **Promoting Independence and Social Inclusion**

136. 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 through the Just@sk Plus service and its transition planning arrangements. 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.
137. We have continued 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.

### **Support to Carers**

138. 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. Our Family Support Team (FST) structure has been revised and social workers' awareness of the services available for service users has been heightened.

139. We have continued to offer weekend services when other services may not be available. Weekend referral forms and a cover system have enabled the safe operation of weekend visits. Social workers are able to access services in a timely manner on behalf of their service users who can now receive a more rapid response when in urgent need.

## **DELIVERING SOCIAL SERVICES**

### **Workforce Management and Development**

140. Throughout 2013-14, 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 the effective safeguarding of children and young people. We have continued to ensure 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 the learning from serious case reviews and local and national changes in policy, procedures and legislation. Core areas of training events are delivered on a rolling programme. Seven mandatory training events for foster carers are delivered every three years and new areas are being considered. Staff are also supported to access other specialised training that aims to enhance their knowledge and skills within their role and function.
141. A number of our safeguarding and family support teams have participated in team development days and considered a variety of topics including theories in assessment and analysis and reflective models to interpret information gathered. A number of events have been held which have had on lessons learnt from the outcomes of serious case reviews.
142. We have increased the opportunities for staff to access training opportunities across the Western Bay collaborative region. The Western Bay Safeguarding Children Board training sub-group sets the strategic direction and priority areas for safeguarding training across the region.
143. Specific training on “direct work with children” has been delivered to a number of locality teams on a workshop basis.
144. Evaluation forms are issued for all training events and attendees are encouraged to provide feedback. These evaluations are closely considered by the workforce development team and inform training practice, commissioning and development. In addition staff and foster carers are enabled to identify their learning needs through the supervision and appraisal processes and this in turn informs each team’s individual training needs analysis. Workforce development officers liaise with individual teams to ensure that the team’s training needs analysis thoroughly reflects the whole team’s areas of learning and development. Staff and foster carers are encouraged to discuss any issues regarding training within team meetings, supervision and foster carer’s group meetings. Views of children and young people resident in local authority registered Childrens Homes are consulted on their care experience during Regulation 32 visits as are children

placed in foster homes during statutory visits by their social worker and these responses inform the identified training need across the service.

145. Staff and foster carers have access to varied, comprehensive and specialised training that aims to enhance their knowledge and skills as appropriate to their role and function.
146. Between April 2013 and March 2014, there were 2,636 attendances at Children's Services learning and development events including 328.5 attendances by Foster Carers/Adopters.
147. 15 Foster Carers have achieved a Level 3 Qualification Credit Framework (QCF) Diploma in Health and Social Care (Children and Young People.) And 10 Safeguarding and Family support staff have achieved a QCF Health and Social Care Diploma relevant to their role at level 3 or 5. 100% of our residential services staff have achieved or are working towards the required qualification.
148. 18 Social Workers are currently in their first year in practice, they are being supported via a combination of team based support and a group mentoring programme which is being facilitated by Senior Practitioners and Consultant Social Workers. These staff will go on to undertake the Continuing Professional Development & Learning Consolidation Programme commencing September 2014. With reference to social workers in their second year of practice, 8 are accessing the Consolidation Programme which is delivered by the CPEL Consolidation Programme, approved by the Care Council for Wales. Bridgend is part of Consortiwy Y De, a partnerships between the University of South Wales, Cardiff Metropolitan University and 10 Local Authorities in the SE South East Wales Region. In relation to social work post qualifying accredited training eight staff have undertaken modules / programmes of study at Level 6 & 7. (Appendix 15 contains a Social Worker Testimonial to evidence this).
149. Throughout 2013-14 our Safeguarding and Family Support Service continued to face the recurring challenges in relation to the recruitment and retention of qualified and experienced social workers. Whilst it is acknowledged that this is a national problem, with all authorities facing particular issues in this area, we firmly believe that having a qualified, stable and appropriately experienced workforce in place will contribute to the quality of services provided and the achievement of a number of Improvement Priorities identified in the our Corporate Plan 2013-2017;
  - Working together to make the best use of our resources
  - Working with Children and Families to tackle problems early.
150. To proactively address the current challenges we have in recruiting and retaining experienced social workers, we have recently established a Recruitment and Retention Project with membership including:
  - Safeguarding and Family Support Group Managers
  - HR Trainee
  - HR Business Partner
  - SCWDP Manager



- Communication and Marketing Officer
- Business Support Officer

151. In addition to the above, other officers are co-opted on to this board as required.
152. The aim of the project is to establish a stable, confident and competent workforce with an appropriate mix of skills and experience within the Safeguarding and Family Support service which is able to meet statutory responsibilities and achieve positive outcomes for children and young people. The primary objectives of the project is to develop strategies to tackle issues affecting the recruitment of social workers in Children's Social Services, as well as improving our ability to retain those social workers already working for the Authority. In achieving this, the Project will:
- Identify the key factors that are contributing to the current issues experienced in recruiting and retaining Children's Social Services Social Workers e.g. Candidate attraction, turnover levels, absence levels.
  - Increase Bridgend County Borough Council's presence within the labour market, promoting BCBC as an employer of choice.
  - Develop a range of targeted recruitment campaigns aimed at ensuring that applicants have the correct skills and experience levels to meet service requirements.
  - Gain a clear understanding of BCBC's pay position in relation to other Welsh Local Authorities.

### **Systems and Information**

153. Our current social care ICT system 'DRAIG' continues to be developed by the Wales System Consortium (WSC) in liaison with the software supplier 'Careworks'. There is currently a national project to replace this system and this has been presented to local authorities in Wales in order to reshape the current configuration of Social Care systems used in Wales. Bridgend CBC is leading this collaborative project and involvement includes 8 local authority members as well as NHS Wales Informatics Service (NWIS).
154. The WSC is now proceeding with NWIS to procure a single supplier National Community Health and Social Care system, and the option for other participants to join at any stage during the first term of contract has been included.
155. Bridgend's Head of Service for ICT continues to act as the Society of Information Technology Managers (SOCITM) advisor to the WSC. The Business Support managers for the Wellbeing and Children's Directorates sit on the Project Board as LA representatives for BCBC. The role of chair has passed from Bridgend to Ceredigion Council. BCBC is acting as lead authority for the procurement of the new system.

### **Performance Management**

156. Performance management within the Children's Directorate, which includes Safeguarding and Family Support, is directed primarily by our Corporate

Business Planning Processes. This includes the development of the Council's Corporate Plan and associated Directorate Business Plans as well as the Council's approach to monitoring performance through the quarterly Corporate Performance Assessment (CPA). In order to monitor performance with the Safeguarding and Family Support Service, we use the national suite of performance indicators (PIs), supplemented by some local PIs. Furthermore, individual ICT systems hold performance related information which is used to identify achievements against outcomes for individual service users, in particular our social care system Draig.

157. Throughout the past year, Bridgend has continued to lead at a national level on the procurement on behalf of the WSC (Welsh System Consortium) and NWIS (NHS Wales Informatics Service) a single National Community Health and Social Care system for Wales. It is planned that the contract for the new system will be signed in December 2014 and implementation/transition from our current Draig system will take place thereafter. Improvements envisaged from the new system include the ability to better present performance information to both operational users (social workers) on their caseloads as well as managers on a dynamic basis.
158. During the year we appointment a Principal Officer for Business Systems and Quality Assurance within to improve our approach to managing performance and in the development of a quality assurance framework for the Directorate.
159. A number of staff across the Children's Directorate have received training on outcome based accountability (OBA). A register of these staff is available from the OBA area of our Children's Directorate Information Zone. There is also information about the actions to be taken and the support available to apply the approach, together with information resources.
160. We have involved children and young people in the shaping a number of our service e.g., professional advocacy service. Here we sought and listened to their views in respect of what the service needed to provide and we developed outcome focussed service specifications for both an Independent Professional Advocacy Service and an Independent Visiting Service based upon the information received.
161. Our Families First (Programmes 1 & 4) have recently embraced the Outcome Focussed Commissioning Model to re-enforce best practice regarding outcome based accountability, it has supported them to respond effectively to the needs of children and young people and to work effectively towards improved outcomes. It has also been used as a reference for best practice in contract management, partnership working, undertaking gaps analysis, monitoring and evaluation and has been the basis of the commissioning process for the next tranche of funding. Third sector providers of Families First programmes have been provided with access to a common Management Information System and supported in the use of common quality assurance reporting systems. This has enabled the accuracy of reported data to be verified and supported benchmarking across providers. Benefits to service users include the clear identification of interventions provided by multiple services, to inform more holistic planning of all interventions.

162. We have taken a more robust approach to ensuring sickness monitoring takes place in liaison with corporate HR and have put enhanced processes in place to ensure that staff appraisals are completed on time and are actively used to ensure staff are meeting personal and organisational objectives.
163. Performance management arrangements are increasingly more embedded into our case management 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. We will endeavour to continue to ensure that we have effective performance monitoring arrangements in place that will help drive forward business improvement and that ensure staff and services meet the standards that have been set. In addition, our Quality Assurance Framework has been designed to inform service and organisational learning. We have also delivered training to managers on the use of the Council's new PM system and framework.
164. Whilst performance management arrangements are becoming more embedded with Safeguarding and Family Support, there is a need to assist staff to further understand the agenda of change that is driven by efficiency and performance and the essential role that management information plays in evidencing what is being achieved. There will need to be a greater focus on outcomes in future and we will need to develop appropriate mechanisms for collecting more outcome focused data in line with both statutory national and local reporting requirements.
165. The full range of our statutory performance indicators are reported to the Council and as part of the Continual Performance Assessment (CPA) process on a quarterly basis. In addition, our performance is regularly presented to the councils Children and Young People's Overview and Scrutiny Committee and the Corporate Parenting Committee.

## **Quality Assurance**

166. Within the safeguarding and family support service, the quality assurance project team 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.
167. Case file audits have routinely been carried out during 2013-14 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.

168. The service's supervision policy is now embedded into 'business as usual' with the frequency of supervision being recorded on an electronic database.
169. 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 manager.

## **SHAPING SERVICES**

### **Planning and Partnerships**

170. Partnerships are explicit in both our Family First and Early Intervention approaches and consequently, third sector agencies are key stakeholders and provide important services on behalf of the LA. Our partnership with Health, let alone in the development of the National Community Health and Social Care system for Wales, is critical, as it is with a range of other partners such as South Wales Police, the probation service etc.
171. We have continued to progress the development of a strategic framework for integrated working.
172. The purpose of the framework is to provide 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.
173. The development of the framework linked closely to other projects 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 to ensure we have a clear Placements and Permanency Strategy in place to ensure robust care planning for all LAC.

## **PROVIDING DIRECTION**

### **Leadership and Culture**

174. Throughout the year we have continued to benefit from having a dedicated Cabinet Member for Children's Services who assumes the role of Chair the

Councils Corporate Parenting Committee. Established in 2007, the Committee has continued to provide a vehicle for elected members to consider what needs to be done in relation to the well-being and progress of looked after children and young people. It seeks 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. (Appendix 16 provides a table that details the full range of reports that went to Corporate parenting Committee during 2013-14.) Members of the Corporate Parenting Cabinet Committee have continued to benefit from training on their corporate parenting responsibilities to ensure they are better informed on the range and scope of the services in place for looked after children and young people.

175. Further scrutiny and challenge on the range and quality of our services is provided by our Children and Young Peoples Overview and Scrutiny Committee and through the Councils Corporate Performance Assessment processes.
176. During the year, there were a number of changes to our Corporate Management Team which resulted in new appointments to the Statutory Director of Social Services role along with a new appointment to the Corporate Director for Children. Together, both directors take a strong lead in supporting the service by providing oversight of both the strategic operational components of the service.

#### **Summary – Forward View of 2013-14**

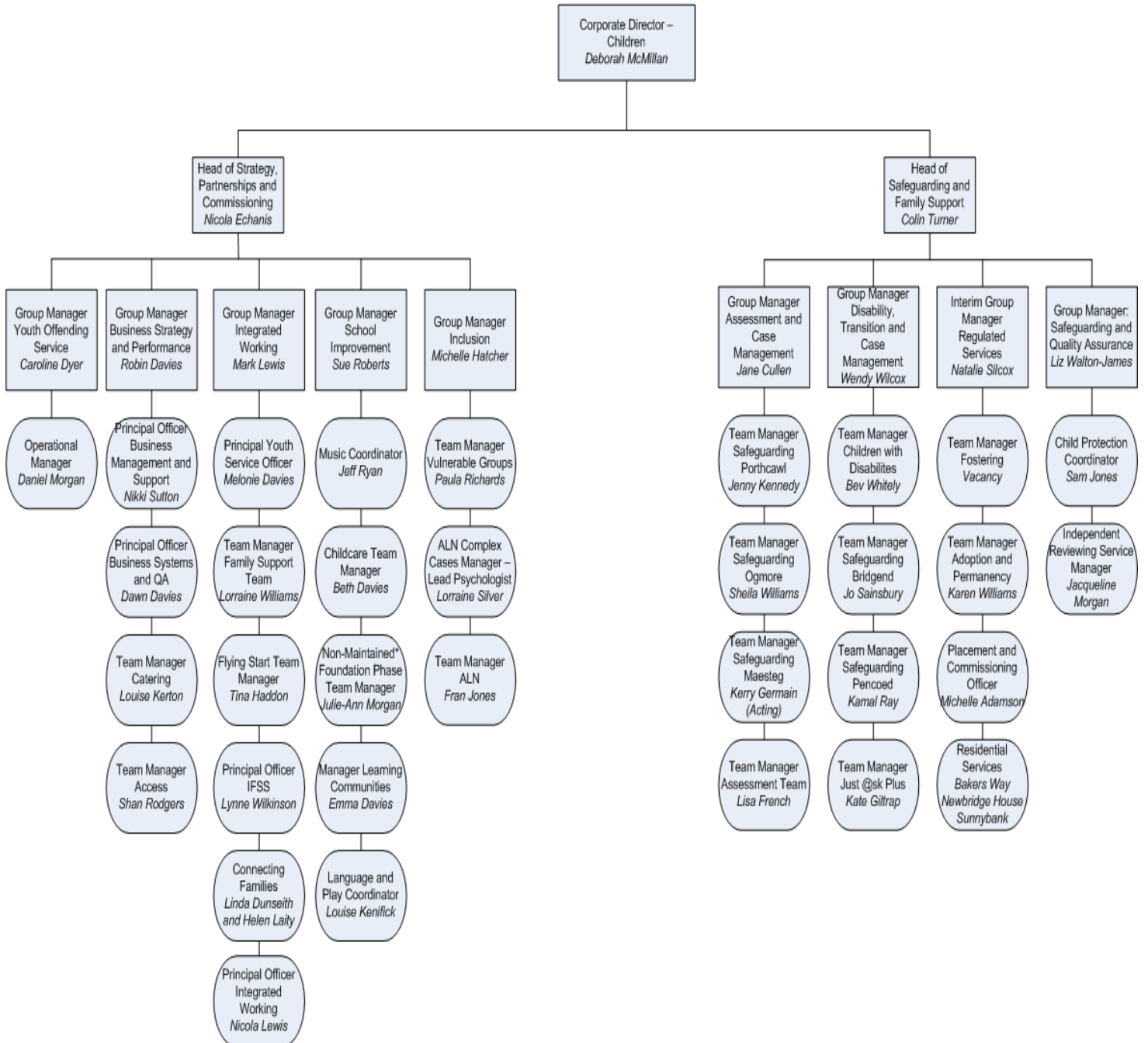
177. This report highlights the full range of safeguarding and family support activities that have taken place in Bridgend during the past year. Whilst it notes a number of areas where improvements have been made and evidenced, we will not become complacent as we continue to face the reality of restraints on resources, within the context of increasing work demands. This will require us to continue to work more smartly and efficiently to ensure our resources are targeted at those most in need, where we can evidence value for money and improved outcomes for children. Our biggest resource will continue to be our staff and whilst we have welcomed many new recruits to the service and have eliminated our over reliance on agency staff, we recognise the need to continue to support our staff as we grow a skilful and mature workforce. The main challenge we face in the coming year will be to continue our efforts to build upon progress we have made in the past and address the areas noted for improvement in this report.

Colin Turner  
Head of Safeguarding and Family Support

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CHILDREN'S DIRECTORATE MANAGEMENT STRUCTURE

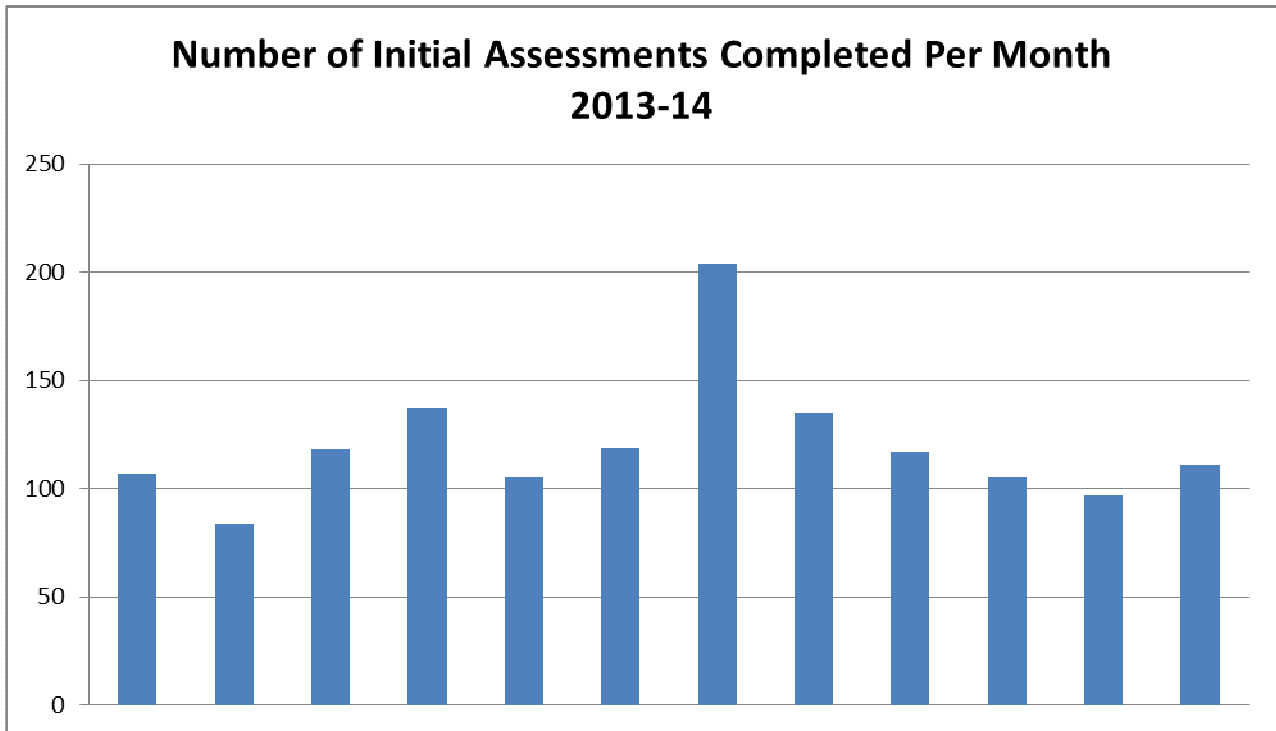
# Children's Directorate Structure



\* These functions will transfer to the consortia during 2015

**APPENDIX 2**

**INITIAL ASSESSMENTS COMPLETED THROUGHOUT 2013/14**



| Apr<br>2013 | May<br>2013 | Jun<br>2013 | Jul<br>2013 | Aug<br>2013 | Sep<br>2013 | Oct<br>2013 | Nov<br>2013 | Dec<br>2013 | Jan<br>2014 | Feb<br>2014 | Mar<br>2014 | <b>Total</b> |
|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------|
| 107         | 84          | 118         | 137         | 105         | 119         | 204         | 135         | 117         | 105         | 97          | 111         | <b>1439</b>  |



## APPENDIX 3

CASES OPEN TO EACH SAFEGUARDING TEAM ON 31<sup>ST</sup> MARCH 2014.

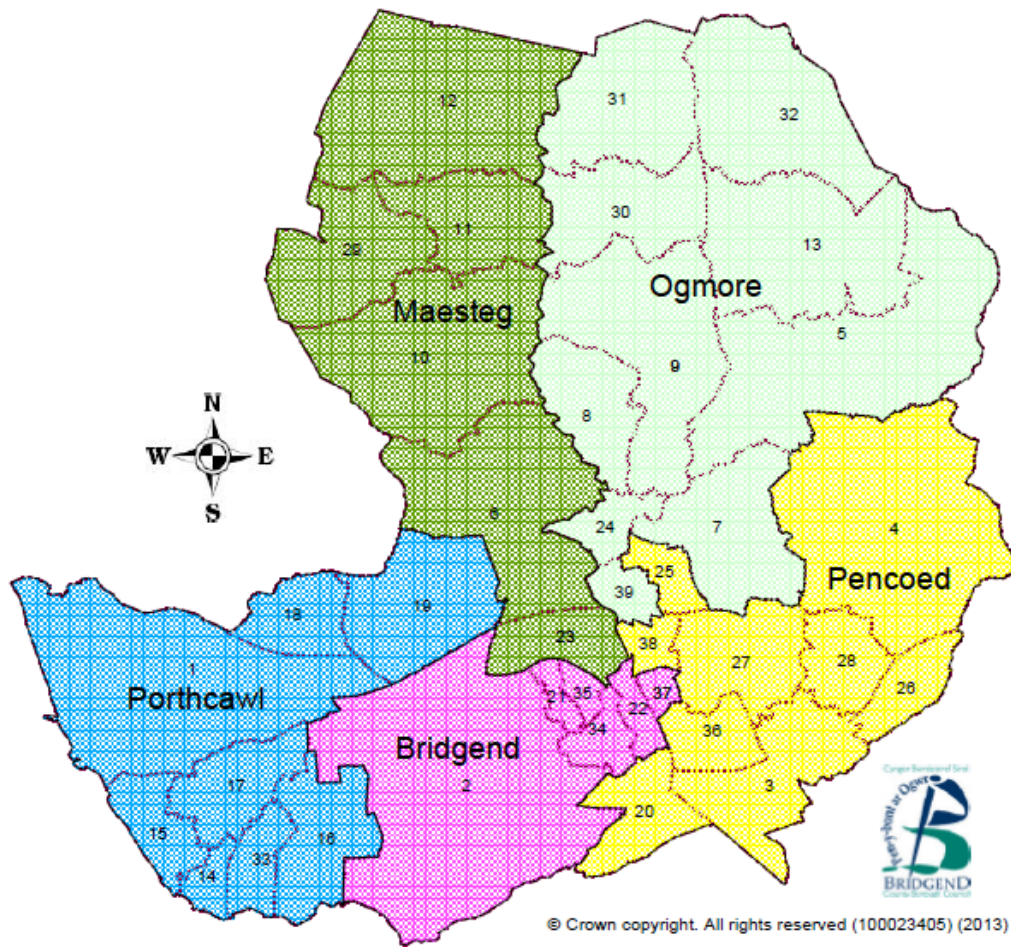
### SAFEGUARDING AND FAMILY SUPPORT SERVICE TEAMS

| Team                         | Children in Need | Child Protection | Looked After Children | Grand Total |
|------------------------------|------------------|------------------|-----------------------|-------------|
| CS Adoption Team             | 6                | 0                | 2                     | 8           |
| CS Assessment Team           | 186              | 7                | 12                    | 205         |
| CS Bridgend Foster Care Team | 7                | 0                | 0                     | 7           |
| CS Disabled Children's Team  | 184              | 1                | 17                    | 202         |
| CS Just @sk Plus             | 90               | 2                | 49                    | 141         |
| CS Permanence Team           | 81               | 0                | 0                     | 81          |
| CS Safeguarding Bridgend     | 81               | 28               | 71                    | 180         |
| CS Safeguarding Maesteg      | 83               | 38               | 60                    | 181         |
| CS Safeguarding Ogmore       | 100              | 41               | 53                    | 194         |
| CS Safeguarding Pencoed      | 62               | 23               | 55                    | 140         |
| CS Safeguarding Porthcawl    | 86               | 39               | 54                    | 179         |
| CS Youth Offending Team      | 1                | 0                | 0                     | 1           |
| <b>Grand Total</b>           | <b>967</b>       | <b>179</b>       | <b>373</b>            | <b>1519</b> |

APPENDIX 4

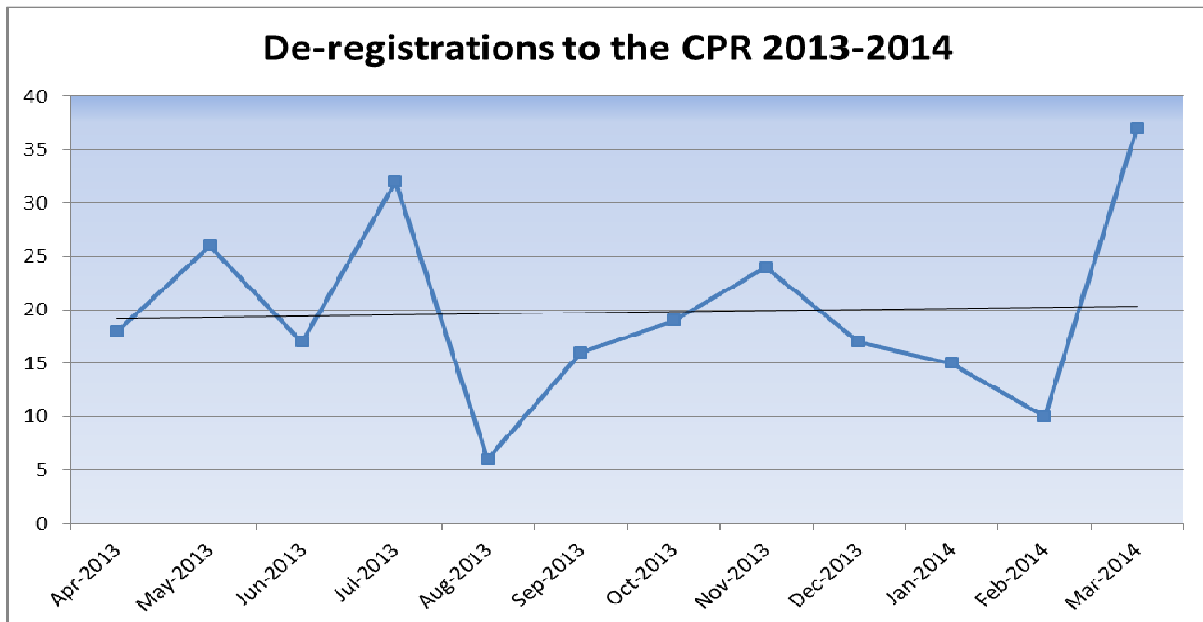
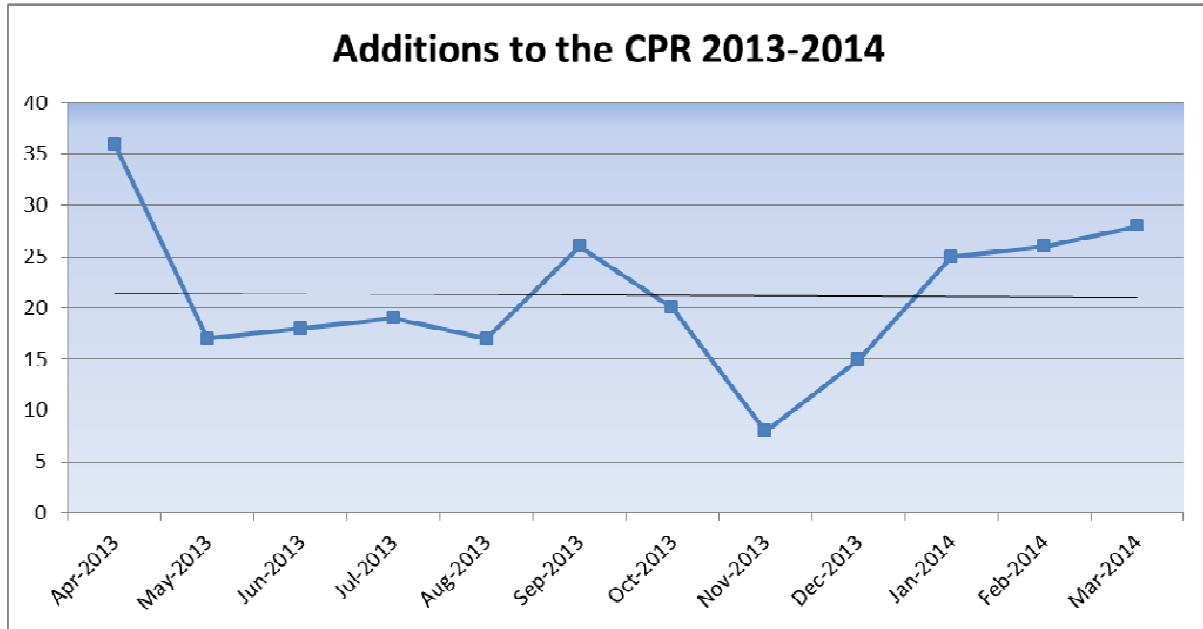
MAP ILLUSTRATING GEOGRAPHICAL PATCHES COVERED BY THE FIVE SAFEGUARDING TEAMS

## Safeguarding 5 team structure



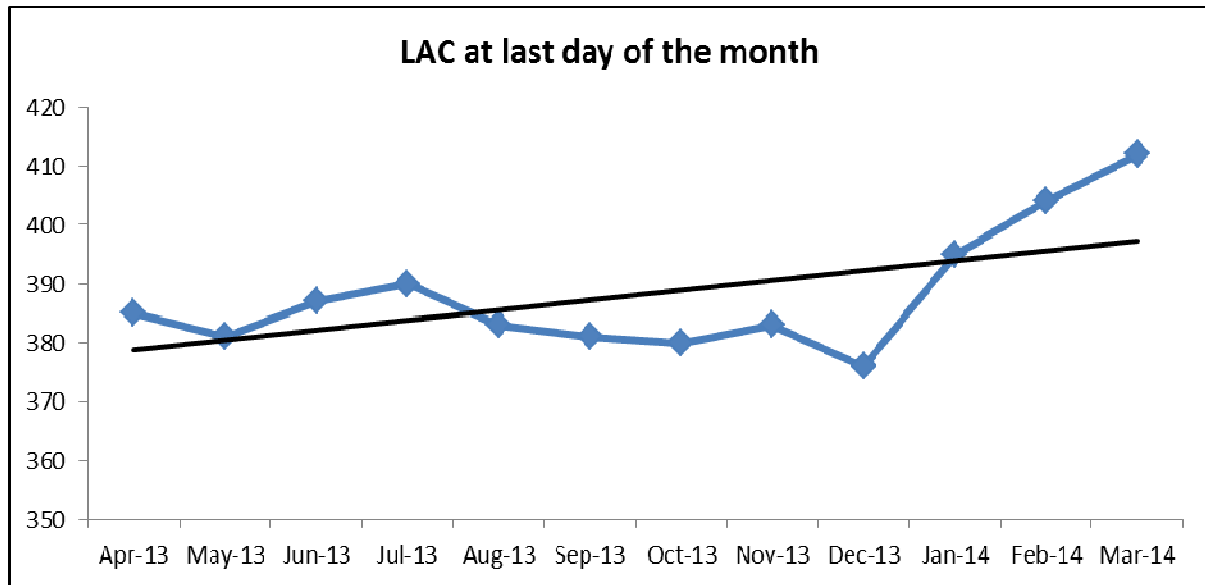
| <b>Id</b> | <b>NAME</b>                           | <b>Id</b> | <b>NAME</b>               | <b>Id</b> | <b>NAME</b>            |
|-----------|---------------------------------------|-----------|---------------------------|-----------|------------------------|
| 1         | Cornelly                              | 14        | Porthcawl West Central    | 27        | Coity                  |
| 2         | Bryntirion, Laleston and Merthyr Mawr | 15        | Rest Bay                  | 28        | Hendre                 |
| 3         | Coychurch Lower                       | 16        | Newton                    | 29        | Maesteg West           |
| 4         | Penprysg                              | 17        | Nottage                   | 30        | Pontycymmer            |
| 5         | Blackmill                             | 18        | Pyle                      | 31        | Blaengarw              |
| 6         | Aberkenfig                            | 19        | Cefn Cribwr               | 32        | Nant-y-Moel            |
| 7         | Bryncethin                            | 20        | Oldcastle                 | 33        | Porthcawl East Central |
| 8         | Bettws                                | 21        | Llangewydd and Brynhyfryd | 34        | Newcastle              |
| 9         | Llangeinor                            | 22        | Morfa                     | 35        | Cefn Glas              |
| 10        | Llangynwyd                            | 23        | Pen-y-Fai                 | 36        | Brackla                |
| 11        | Maesteg East                          | 24        | Ynysawdre                 | 37        | Pendre                 |
| 12        | Caerau                                | 25        | Bryncoch                  | 38        | Litchard               |
| 13        | Ogmore Vale                           | 26        | Felindre                  | 39        | Sarn                   |

CHILD PROTECTION REGISTRATIONS AND DE-REGISTRATIONS DURING 2013/14



## APPENDIX 6

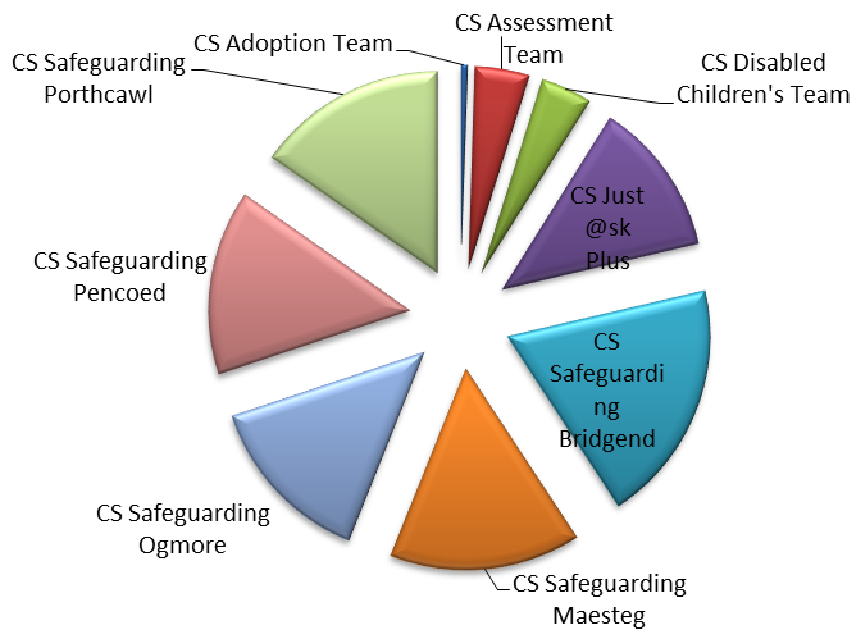
### LAC - LAST DAY OF THE MONTH



## APPENDIX 7

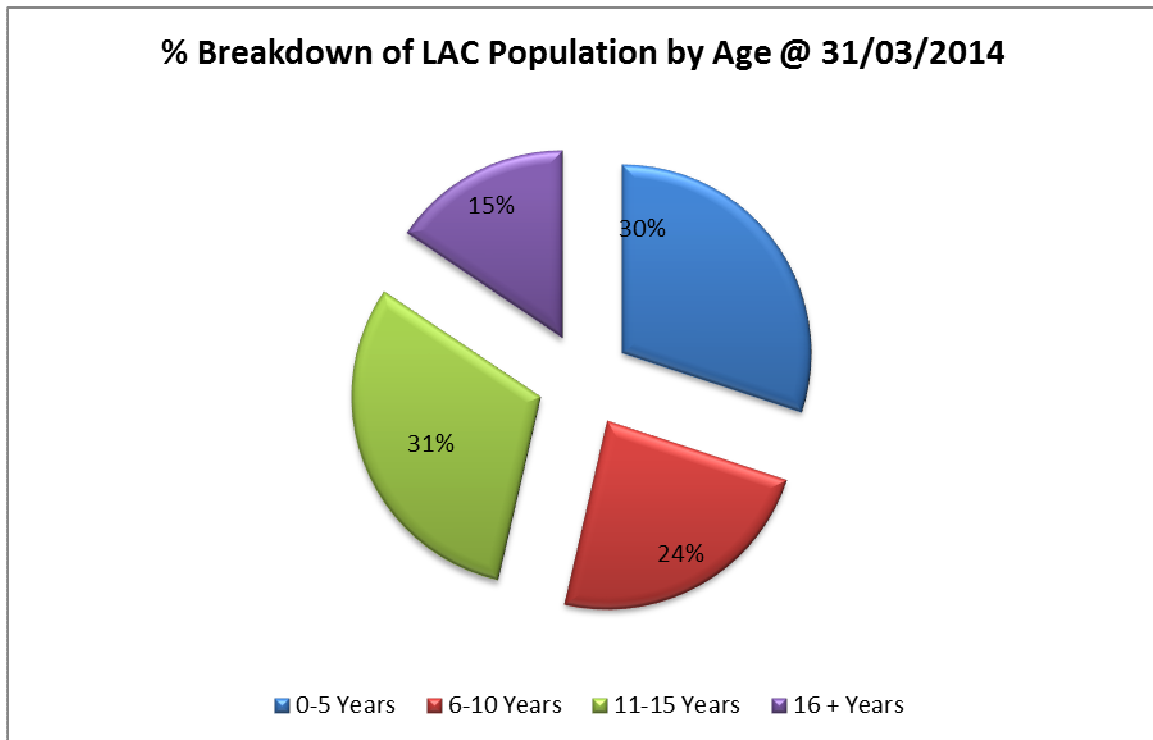
### LAC – POPULATION PER TEAM AT 31 MARCH 2014

## LAC Population per Team at 31/03/2014



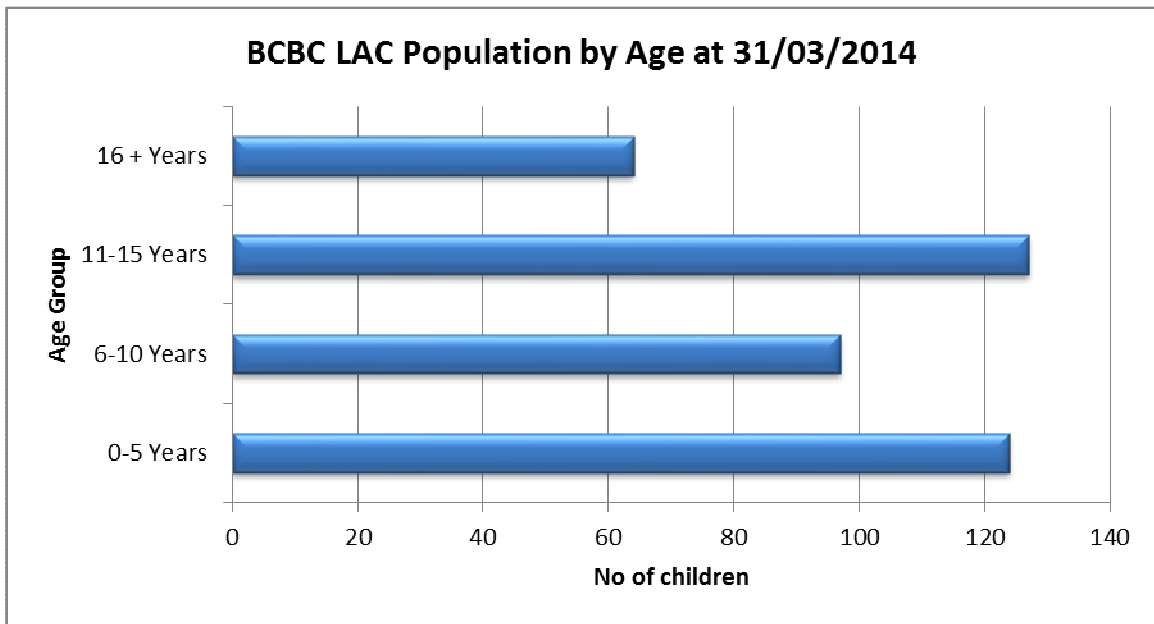
## APPENDIX 8

### % BREAKDOWN OF LAC POPULATION BY AGE



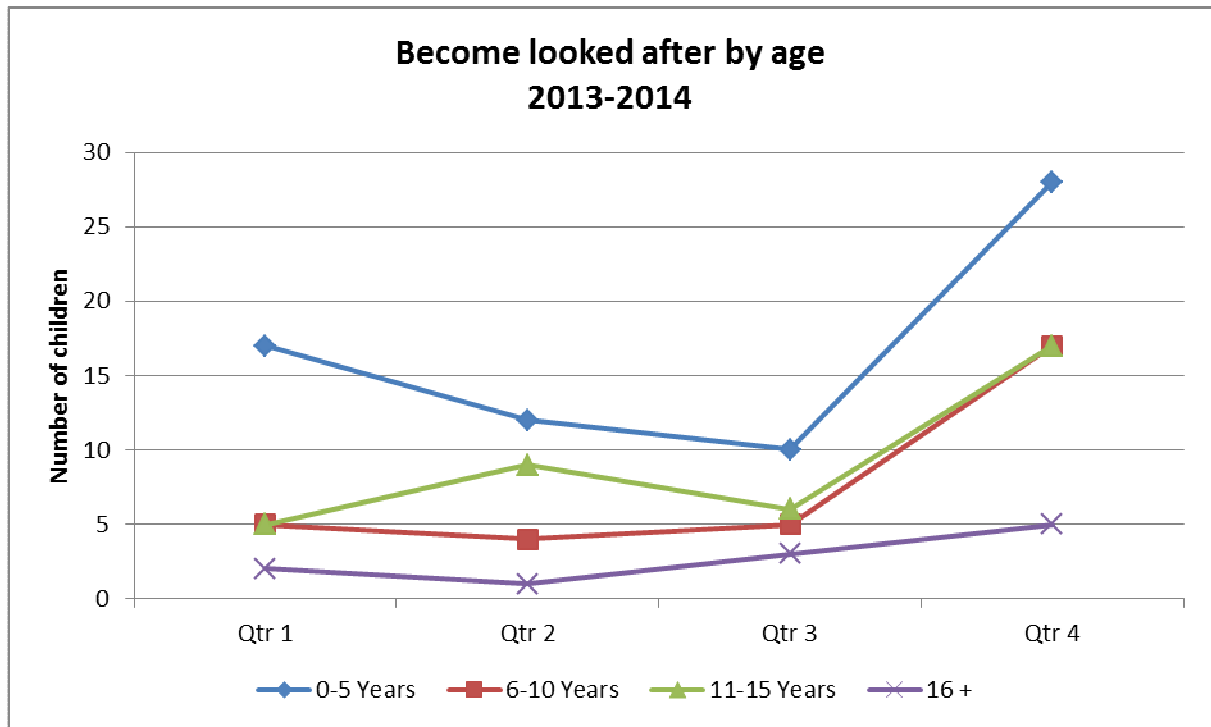
## APPENDIX 9

### BCBC LAC POPULATION BY AGE AT 31 MARCH 2014



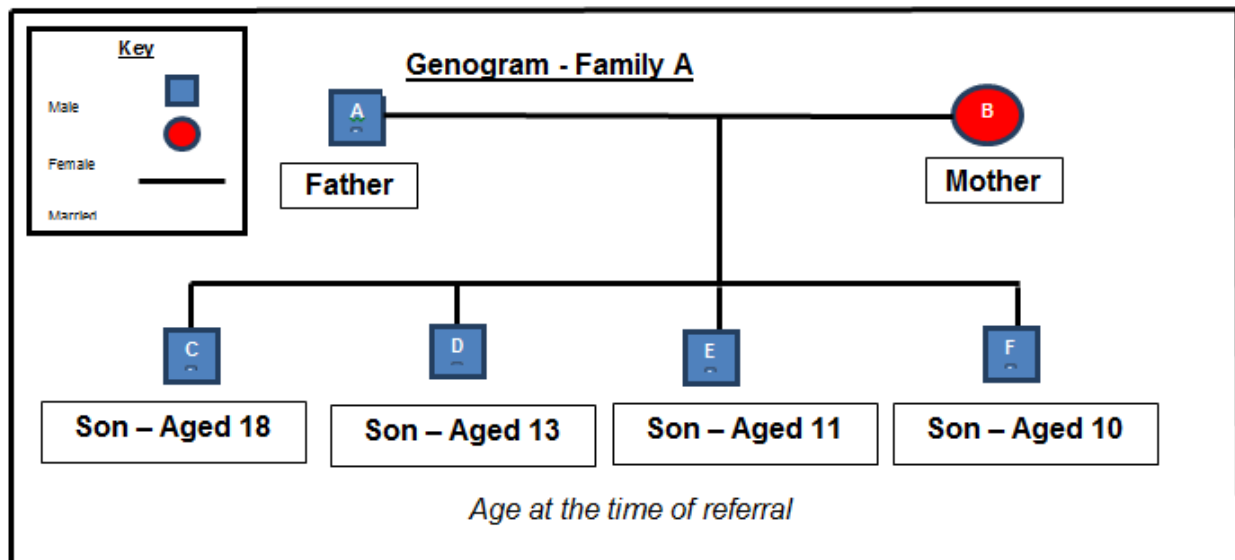


BECAME LOOKED AFTER BY AGE 2013 – 2014



**Case Study – Family 1****Summary**

Family 1 were referred to Connecting Families in July 2011 and the basic family unit is displayed in the below genogram:



As can be seen Family 1 is a nuclear family with four sons aged between 10 and 18 years of age. At the time of the referral the family had complex issues, but were ready to address their issues collectively. The table on the following page summarises the key issues (at the time of referral), outlines the interventions provided by Connecting Families, documents the positive outcomes observed by the family and professionals working with the family and reviews the cost avoidance attributed to the interventions.

## Summary of the issues, interventions and positive outcomes

| Area                                       | Details   |
|--|---|
| Needs / issues at the time of the referral | <ul style="list-style-type: none"> <li>• <b>Anti-social behaviour</b> – The eldest son (C) was involved in anti-social behaviour (received 1 ASB warning letter from the Police) and had been arrested 5 times between 2010 and 2011</li> <li>• <b>Challenging behaviour</b> - The children’s / young people’s behaviour (D, E &amp; F) was unmanageable (shop lifting in the community, fighting in school, staying out late, ignoring rules at home, disrespecting parents and so on)</li> <li>• <b>Child Protection Register</b> - Three children / young people (D, E &amp; F) were on the Child Protection Register for emotional abuse</li> <li>• <b>Domestic abuse</b> - There was domestic abuse between the parents resulting in the Police being called out on a number of occasions. The husband appeared at the Magistrates Court accused of assault</li> <li>• <b>Economically inactive</b> - Both parents were economically inactive</li> <li>• <b>Educational issues</b> - Two children (D &amp; E) were experiencing difficulties in school (poor concentration, truancy and aggression) and one child faced exclusion for fighting</li> <li>• <b>Hoax calls</b> – The eldest son (C) had a habit of making hoax calls to the emergency services whilst drunk</li> <li>• <b>Housing issues</b> - Home conditions were described as poor and dirty (all the chores were left to the mother to complete)</li> <li>• <b>Mental health issues</b> – The father had unaddressed mental health issues (feeling depressed and suicidal) possibly due to bereavement</li> <li>• <b>Substance misuse</b> - Both parents were drinking cider excessively</li> </ul>   |
| Support provided by Connecting Families    | <p><i>Whole family approach - Work was completed with both parents and the three youngest children (the eldest son refused to engage with services)</i></p> <ul style="list-style-type: none"> <li>• <b>Anger management support</b> - One child / young person (D) was referred to PREVENT and received support around anger management issues</li> <li>• <b>Behaviour support</b> - The Intensive Outreach Worker liaised with the Education Authority and one child (D) received behaviour support whilst in school</li> <li>• <b>Benefit support</b> - The Benefits Advisor produced better off calculations for the parents and encouraged the father to enrol on training courses</li> <li>• <b>Bereavement counselling</b> – One to one support was provided to the father around bereavement, anger management and assertiveness (encouraged to seek support from his GP)</li> <li>• <b>Domestic abuse support</b> - The Intensive Outreach Worker completed work around the effects of domestic abuse on children and families (3 children / young people displaying aggression towards others)</li> <li>• <b>Housing support</b> - The Intensive Outreach Worker provided practical advice on de cluttering and cleaning the home on a budget</li> <li>• <b>Parenting support</b> - Parents received support around instilling rules and boundaries</li> <li>• <b>Substance misuse support</b> - Both parents received 10 hours of substance misuse support</li> </ul>  |
| Positive outcomes for the family           | <ul style="list-style-type: none"> <li>• <b>Alcohol consumption</b> - Both parents reduced their alcohol consumption and are now almost abstinent</li> <li>• <b>Anti-social behaviour</b> - The eldest son (C) no longer commits anti-social behaviour or calls the emergency services (last time was June 2012)</li> <li>• <b>Behaviour</b> - The children / young people (D, E &amp; F) are now more compliant to the rules and boundaries set by their parents (no longer stay out late)</li> <li>• <b>Child protection Register</b> - Three children (D, E &amp; F) were deregistered from the Child Protection Register and as of 11<sup>th</sup> March 2013 the children / young people are completely closed to Children’s Services having previously been involved for approximately 8 years (reduced dependency on services)</li> <li>• <b>Domestic abuse</b> - The domestic abuse ceased between the parents which resulted in a reduction in Police call outs and domestic abuse incidents</li> <li>• <b>Emotional wellbeing</b> - The children’s / young people’s emotional well-being has improved and they no longer fight or display aggression towards others</li> <li>• <b>Employment</b> – Both parents created curriculum vitae’s (CV’s) and the father enrolled on the Futures Project, which is a ‘welfare to work programme’. Both parents are actively seeking employment and have been completing application forms weekly</li> <li>• <b>Home conditions</b> - Home conditions have improved and the family received support with renewing the carpets. All family members now take an active role in completing chores</li> <li>• <b>School attendance</b> - The children / young people (D &amp; E) improved their school attendance and their behaviour became more manageable within the school environment (no longer need behaviour support within school)</li> </ul> |
| Cost avoidance to the public sectors       | <ul style="list-style-type: none"> <li>• <b>Health</b> were prevented from spending £1,000.00 in substance misuse support and the NHS potentially saved £787.20 in alcohol abstinence (<b>total = £1,787.20</b>)</li> <li>• <b>Police</b> were prevented from spending £944.00 in Police Callouts and £2,248.00 in domestic abuse incidents (<b>total = £3,192.00</b>)</li> <li>• <b>Children’s Services</b> were prevented from spending £1,602.00 per year per child in child protection (3 children were deregistered – total = £4,860.00)</li> <li>• <b>Total cost avoidance = £9,839.20</b></li> </ul>   |



## Needs

It can be concluded from the summary that each family member had specific issues that impacted on the wider unit. For example, both parents had issues with alcohol and whilst intoxicated they often had verbal arguments coupled with violence (witnessed by the children). Both parents minimised the impact of this and failed to recognise the effect it was having on their children. Children's Services received 9 referrals between 2005 and 2011 in relation to domestic abuse and the children's names were placed on the Child Protection Register under the category of emotional abuse. In addition to this the Police were called to the property on a number of occasions and the family were taken to the Multi Agency Risk Assessment Conference (MARAC) where the risk was perceived as high. On one occasion the father was arrested for assault and he was granted bail. During this time the couple's relationship broke down, but the mother later withdrew her statement and resumed the relationship with her husband (he moved back into the family home whilst his bail conditions were still in place). Both parents previously received support from services, for example; the mother attended two out of four sessions of the Freedom Programme facilitated by Women's Aid and the father attended a two year cognitive behaviour course specific to domestic abuse with the probation service.

It became clear from evidence collated by professionals that alcohol was a trigger factor of the domestic abuse, which inevitably impacted on every aspect of the family's life including the welfare of the children (*refer to appendix 1 for a summary of how alcohol impacted on the family*). Education reported that the children were hostile and often aggressive to others whilst at school (one received an exclusion). The children also displayed challenging behaviour at home (ignoring rules and boundaries), found it difficult to concentrate at school (had no bed time routine), misbehaved in the community and truanted regularly. The Police recorded that the eldest child (*family member C*) was often drunk in public and engaged in anti-social behaviour (causing problems with neighbours, fighting and making hoax calls to the emergency services), which resulted in him being arrested 5 times and receiving a warning letter for anti-social behaviour.

Further to this the father was struggling to come to terms with the death of his brother and reported to staff at Children's Services that he felt depressed and suicidal. This concerned the entire family, who felt that the slightest event (or trigger) may result in him taking his own life. Understandably relationships were strained and the mother felt unsupported, isolated, anxious and in a state of despair (very low self-esteem). Fundamentally she became entrenched in the problems being experienced by the family and home conditions were neglected with clutter, broken furniture resulting from aggressive outbursts and threadbare carpets. The family were in receipt of benefits and had no disposable income to replace broken furniture or to buy items such as paint and new carpets.

## Intervention

The Intensive Outreach Worker provided 16 weeks of intensive support with the family, visiting at least 3 times a week. The majority of the work was completed with the parents, around substance misuse, domestic abuse, healthy eating, managing on a budget, the importance of de-cluttering a home, unaddressed mental health issues, instilling rules and boundaries, and managing difficult relationships. For example; the mother completed work around improving self-esteem and the father received counselling in relation to anger management, bereavement and assertiveness. The family also received interventions from a number of partners attached to the Connecting families team as listed below:

- The substance misuse officer supported the parents with attending appointments with West Glamorgan Council on Alcohol and Drug Abuse (WGCADA) and offered advice around reducing their alcohol intake, identifying the risk factors that contribute to increased alcohol consumption and safety planning ensuring that the children were safe whilst they were intoxicated. The parents were encouraged to keep an alcohol diary so that they could manage and record exactly how much they were drinking on a daily basis.
- The Benefits Advisor produced a better off calculation, which is fundamentally an assessment that compares potential employment income against monies received through state benefits. The parents were also supported with completing curriculum vitae (CV's) and were encouraged to use advanced job searching techniques whilst looking for employment. In addition to this the father engaged with Remploy and was enrolled onto the Futures Project, which is a 'welfare to work programme' that provides interview coaching and support with enhanced job searching techniques. Ultimately the aim of the programme is to prepare an individual for the labour market (job ready) through enhancing self-esteem, confidence and skills, hence eliminating barriers and improving long term employability prospects
- The Education Authority agreed to fund additional behaviour support for the children (*family members D & E*) whilst they were at school and one child (*family member D*) was referred to PREVENT to help him come to terms with his anger management issues

### Outcomes achieved for the family

Following interventions from Connecting Families, the parents reduced their alcohol consumption significantly which had a domino effect on various other aspects of the family's life as shown in the diagram below:



The diagram on the previous page illustrates that when the parents reduced their alcohol consumption, this had a dramatic effect on all aspects of the family's lives, including the domestic abuse. For the first time the parents acknowledged the impact that domestic abuse was having on the emotional wellbeing of their children and they feared that Children's Services would remove them if the situation did not improve. The parents began to communicate (talked about their feelings in a mature way) and no longer felt the need to resolve issues through verbal aggression or violence (reduced Police callouts). This led to the parents being able to assess their current situation and with the support of Connecting Families they were able to develop and implement strategies to bring about positive change. For example; the parents put in place rules and boundaries within the home and the children were no longer allowed to cause havoc in the community and when meeting friends they were given curfews ensuring that they returned home at an agreed time. This had several advantages including a) improving the supervision of the children, b) ensuring the children's safety and c) introducing the children to routine and structure. The behaviour of the children within the home improved drastically and they attended school regularly. With the additional support from school, the children stopped fighting, improved their concentration levels and no longer truanted from lessons. This resulted in the behaviour support being withdrawn.

In addition to introducing rules and boundaries, the family worked together to improve home conditions with each family member being responsible for their own chores (previously all the chores were left to the mother). This resulted in the home being de-cluttered and maintained to an acceptable standard (mother developed increased self-esteem and confidence). The parents also supported their eldest son with his own alcohol consumption and discouraged him from committing anti-social behaviour within the community. They reiterated the importance of whole family working together to bring about change, to ensure that the younger children remained within the family unit. The parents have engaged with all services and have implemented positive change, which resulted in the children being de-registered from the Child Protection Register.

Currently (11/03/13) the children are completely closed to children's services, the Police callouts have stopped and the parents are making every effort to find employment (actively seeking work and attending all training courses available) within a difficult climate.

### **Cost avoidance to the public sector agencies**

As documented in the summary table, Connecting Families interventions prevented the Public Sectors from spending an additional £9,839.20 as shown below.

| Agency (Benefiting from the Cost Avoidance) | Service Provided by Connecting Families  | Cost Avoidance   | Total     |
|---|--|--|-----------|
| Health                                      | The Consultant Social Worker provided 10 sessions of substance misuse support to family members A & B (Parents) preventing Health from spending a £1,000.00.<br><br>Family member A & B (Parents) reduced their alcohol consumption (Preventing the NHS spending an estimated £24.60 per week per person). | £1,000.00<br><br>£787.20 (Based on a period of 16 weeks per adult) | £1,787.20 |
| Police                                      | The number of Police callouts reduced by a predicted 4 incidents. Preventing the Police from spending £944.00 (Based on £236.00 per call out).<br><br>Reduction in domestic abuse incidents  | £944.00<br><br>£2,248.00   | £3,192.00 |
| Social Services (Children's Services)       | 3 children / young people were deregistered from the Child Protection Register preventing Children's Services from spending £1620.00 per child per year based on £135.00 a month per child. (The parents reduced their substance misuse considerably and the domestic abuse between them stopped).         | £4,860.00  | £4,860.00 |
| Total                                       |  |  | £9,839.20 |

### Risk factors – Parental Concerns Questionnaires (analysis of)

As a part of the evaluation process Connecting Families uses Parental Concerns Questionnaires to document the family's perceived severe concerns in relation to 4 domains (child development, parenting capacity – context, parenting tasks and family and environmental factors). Families that are supported by Connecting Families are asked to score 37 questions (refer to appendix 2 – for a summary of the questions within each domain) between 0 and 2 (0 meaning not present, 1 meaning a concern is present but not a problem and 2 meaning that the concern is severe).

The questionnaires have been completed twice, once prior to Connecting Families intervention and once after intervention. The qualitative data contained within the questionnaires has been analysed to determine if any change has been reported. Refer to the below table for a summary of the severe concerns.

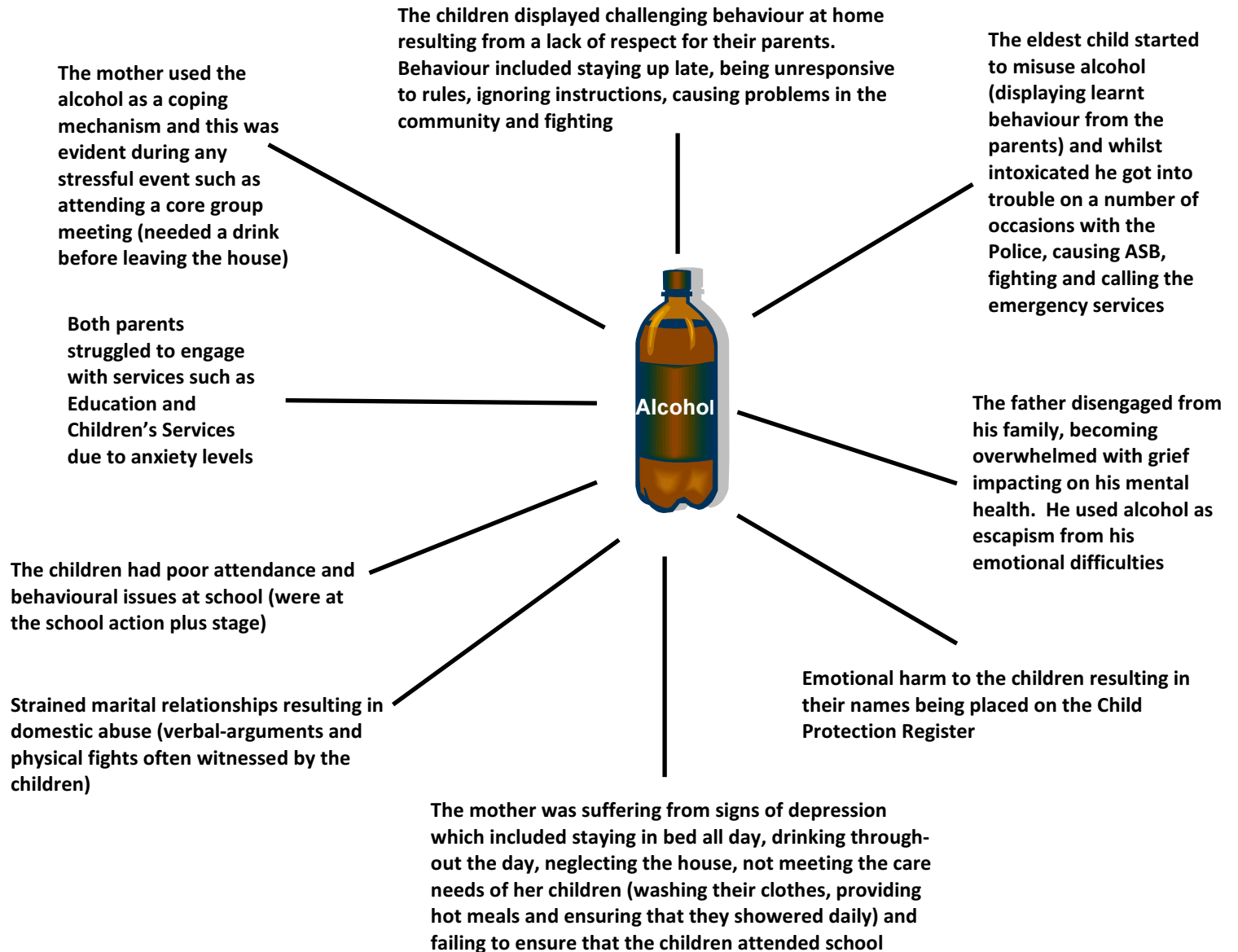
| Referral number | Domain            | Severe concerns pre intervention   | Severe concerns post intervention | Possible reason for changes (Positive outcomes)   |
|-----------------|-------------------|--|-----------------------------------|---|
| Family A        | Child Development | <ul style="list-style-type: none"> <li>Child is defiant, aggressive or has tantrums</li> <li>Child has difficulty concentrating</li> <li>Child has emotional issues</li> </ul> |                                   | The children / young people were encouraged to attend school on a regular basis and following Connecting Families intervention the children / young people no longer required behaviour support within the classroom. |



|       |                                |   |   |   |
|-------|--------------------------------|---|---|---|
|       |                                | <ul style="list-style-type: none"> <li>• Child is underachieving at school</li> <li>• Child truants from school</li> </ul>            |   |   |
|       | Parenting Capacity             | <ul style="list-style-type: none"> <li>• Relatives are engaging in criminal behaviour</li> <li>• Parents misuse substances</li> </ul> |   | The parents reduced their alcohol consumption considerably which resulted in a reduction of domestic abuse occurrences between the parents (The Police have stopped being called to the address). In addition to this 3 children were also deregistered from the Child Protection Register (CPR). |
|       | Family & Environmental Factors | <ul style="list-style-type: none"> <li>• Parent are distressed due to bereavement or loss</li> </ul>                                  |   | The father received mental health support to help him come to terms with the loss of his brother.   |
| Total |                                | 8   | 0 | NA  |

The table on the previous page provides evidence to the statements already made in previous sections of the case study. Prior to Connecting Families interventions severe concerns centred around the behaviour of the children both within the home and at school (worried about concentration and school attendance). In addition to this the parents were anxious about their eldest son committing anti-social behaviour and the impact that alcohol was having on the family. There was also the acknowledgement that long standing issues with bereavement had not been addressed. Following Connecting Families intervention the family reported to have no severe concerns, and this was probably due to the fact that the parents no longer misused alcohol which had a positive impact across all aspects of their lives.

## Diagram of how alcohol impacted on the family unit



## Summary of the questions within each of the Parental Concerns Questionnaires Domains

### Child development

| Question Number | Child Development  |
|-----------------|--|
| 22              | (Emotional) - Child is upset, distressed or depressed                  |
| 23              | (Behavioural) - Child is defiant, aggressive or has tantrums           |
| 24              | (Cognitive / learning disability) - Child has difficulty concentrating |
| 25              | (Social involvement) - Child doesn't socialise with peers              |
| 26              | (Identity) - Child has identity issues                                 |
| 27              | (Physical health) - Child has health Problems                          |
| 28              | (Psychosomatic) - Child has emotional issues                           |
| 29              | (Underachievement) - Child is underachieving at school                 |
| 30              | (School behaviour) - Child truants from school                         |
| 31              | Child is engaging in criminal behaviour                                |

### Parenting Capacity (Context)

| Question Number | Parenting Capacity (Context)   |
|-----------------|--|
| 6               | (Home management) - Parents have difficulties cooking or cleaning                  |
| 7               | (Parental criminal behaviour) - Parents are engaging in criminal behaviour         |
| 8               | (Adult relative criminal behaviour) - Relatives are engaging in criminal behaviour |
| 9               | (Drugs / alcohol) - Parents misuse substances                                      |
| 16              | (Disability / illness) – Parent has a long term disability or illness              |
| 17              | (Disability / illness) - Relative has a long term disability or illness            |
| 18              | (Reproduction) - Parent has sexual or contraception problems                       |
| 19              | (Parent acute psychological distress) - Parent feels anxious or stressed           |

|    |  |
|----|--|
| 20 | (Parent depression) - Parent is depressed                          |
| 21 | (Mental illness adult family) - Relative has a mental health issue |

### Parenting Tasks

| Question Number | Parenting tasks  |
|-----------------|--|
| 32              | (Limited attachment / lack of concern) - Parents do not feel affectionate towards the Child / Children |
| 33              | (Guidance) - Parents fails to enforce discipline   |
| 34              | (Lack of involvement) - Parents feel a lack of engagement with the Child / Children                    |
| 35              | (Unrealistic expectations) - Parents have unrealistic expectations of the Child / Children             |
| 36              | (Hostility / criticism) - Parents criticise the Child / Children                                       |
| 37              | (Physical care) - Parents feel they provide inadequate care for their Child / Children                 |

### Family and Environmental Factors

| Question Number | Family and Environmental Factors  |
|-----------------|---|
| 1               | (Housing) - Parents feel that the house is not good enough for their family                                 |
| 2               | (Financial) - Parents are experiencing problems with debt   |
| 3               | (Occupational) - Parents are experiencing problems with work  |
| 4               | (Formal organisations) - Parents have difficulties with public agencies (Police, Social Services and so on) |
| 5               | (Race / culture) - Family experiences problems due to Race / Culture  |
| 10              | (Marital-partner) - Parents have marriage / relationship problems   |
| 11              | (Extended family) - Parents have relationship problems with relatives                                       |
| 12              | (Friends) - Parents have relationship problems with friends   |
| 13              | (Isolation) - Parents feel isolated   |
| 14              | (Sex abuse / violence) - Parents are victims of unwanted sexual advances or violence                        |
| 15              | (Loss / bereavement) - Parents are distressed due to bereavement or loss                                    |



#### BACKGROUND TO REFERRAL

The two children in the family (aged 7 and 14 years) had recently been placed on the Child Protection Register under the categories of physical harm, emotional harm and neglect. This followed a disclosure at School by one of the oldest child. The disclosure was that Mother had hit her causing bruising, often left the younger sibling in her care, the child's concerns for Mothers mental health, increasing use of alcohol and allowing others to drink alcohol and use cannabis in the home. Following this disclosure the Children were accommodated for two nights under a S20 agreement. Mother withdrew her consent and the children returned to her care.

Mother has no contact with her own family and is an adult survivor of childhood sexual abuse. Her disclosure resulted in her being accommodated by the Local Authority between the ages of 11 years and 16 years. She suffers with anxiety and depression and has experienced domestic abuse in her relationship with the father of youngest child.

The children have different fathers, although both fathers have contact with the children, the father of eldest child lives in New Zealand. He communicates with his child via Skype and telephone.

Father of eldest child has had most contact with both children. His contact took place primarily in the children's home. Mother would arrange to be with friends or her new partner in order to accommodate this. He has his own home with a room for his child but has not made into a suitable environment for a young child. His motivation to make the changes may have been diminished by the current contact arrangements. Father has been involved in the criminal justice system because of behaviour associated with alcohol misuse.

#### FAMILY STRENGTHS, VALUES AND LEVEL OF ENGAGEMENT

1. The Family had a clear identity and were able to express and demonstrate lots of emotional warmth.
2. They had shared aspirations and common goals.
3. Mother respected and valued the children having individual time with the IFSS worker and created the space for this to happen.

4. Mother demonstrated good insight into why the family were in the current position. Although she wasn't happy about the children being placed on the Child Protection Register she saw it as an opportunity to have support and make positive changes.
5. Mother did not shy away from difficult discussions. She was able to take responsibility for her decision making and behaviour.

The level of engagement from the core family of Mother and two children was excellent. Father of youngest child engaged minimally.

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#### RELATIONSHIPS WITH CASE HOLDING SOCIAL WORKER

There was good communication between the Social Worker and the Family.

The Social Worker was clear, realistic and unambiguous with the IFSS worker about her expectations of the family during the intervention. She had discussed it with family so that they knew where able to make decisions about whether it was timely and right for them.

Regular contact was maintained between Social Worker and IFSS worker throughout the intervention. Agreement was made around not having any other services/agencies involved during the intervention so as not to overload the family. Agreement was made with Social Worker and family about agencies to support the family during the maintenance phase Timely referrals were then made for the maintenance phase so that the family did not experience a 'gap' in support.

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#### OUTCOME

A Review Child Protection Case Conference was held following the intervention and the children's names were removed from the Register.

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#### DIRECT WORK WITH MOTHER

- Miracle question.
- Strengths Cards.
- Values Cards.
- Understanding and managing anxiety workbook and exercises.
- Understanding impact of domestic abuse on Mother and Children.
- Communication with teenager's workbook and exercises.
- Sessions facilitating direct communication between Parent and teenager
- Parenting skills - establishing routines/boundaries/structures/star charts
- Support in understanding and responding to grief and loss in a child.

- Support in using Muddles and puddles (grief and loss) workbook with child.
- Lots of open questions, affirmation, reflection and summary.
- Reflective/affirmation letters.

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## DIRECT WORK WITH CHILDREN

- Miracle question with older child.
- Strengths cards
- Values Cards
- Muddles and Puddles
- Three Houses exercise
- All about me exercises – self-esteem/identity
- Gallery of assets – self-esteem/identity
- Support with exam revision skills and planning – older child
- Open questions, affirmation, reflection and summary.

## CONCLUSION

The family appear to have been correctly identified for an IFSS intervention. There was clearly a crisis that acted as a powerful motivating factor which could be harnessed by the IFSS worker to promote behaviour change, using evidence based, and solution focused brief therapy. The case holding Social Worker had a clear sense of the behaviour she wanted to see change, and how this related to risk to the children. She had also prepared the family well for the intervention.

There was on-going dialogue between the IFSS worker and case holding Social Worker, the family was not overloaded and just worked with the IFSS during the intervention. Timely referrals were made to appropriate support services for the maintenance phase.

The relationship between the family and the IFSS worker was based on honesty, trust, respect and a hope.



### CASE STUDY – INVISIBLE WALLS WALES (IWW)

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#### FAMILY

Mrs A – Mother

Mr A – Father to child C

Child A – 13

Child B – 10

Child C – 2

Birth Father to Child A and B has intermittent contact with Child A and no contact with Child B. Relationship with Mrs A ended due to DV issues.

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#### BACKGROUND TO REFERRAL

Referral received from Offender Supervisor of Mr A stating that Mr A had requested support for his partner and himself who were struggling to manage the challenging and aggressive behaviours of Child A.

Mr A had received a 5 year sentence for wounding an individual whilst under the influence of alcohol on a night out in his local area. He has a long history of substance misuse including heroin and also a long offending history including driving offences, drink driving, driving whilst disqualified, theft and deception. At those times Mr A was misusing substances. Mr A had never been in regular employment prior to his incarceration. At time of referral, Mr A had 12 months left to serve on his sentence.

Mr A was currently substance free and on the Family Unit accessing interventions such as Family Man and Learning Together to Club. He was receiving regular visits from Mrs A and Child B and Child C. However, Child A would visit occasionally but not frequently.

The family were living in a private rented 3 bedroom property in an area which had access to a large number of community resources. Mrs A had stated that she was struggling to manage Child A's aggressive and challenging behaviour. He had been diagnosed with ADHD but was refusing to take his medication and attend CAMHS appointments. He was reported to be using cannabis and he was also involved with the local YOS due to incidents of Anti-social behaviour. Child A had also been excluded from school due to his behaviour.

Mrs A had reported that she had little difficulty with Child B's behaviour, he was attending school and was reported to have good academic attainment. He was accessing after school clubs and had a good network of friends. Mrs A's only concern was the impact of Child A's behaviour on Child B's emotional well-being.

In respect of Child C, it was reported that she was developing well, no concerns from health visitor, up to date with immunisations but was yet to access any childcare provision. It had been observed that Mr and Mrs A had a close bond with Child C and there was evidence of warmth and affection on visits.

Following the IWW assessment and Open Referral Forum, it was agreed that Mr A and his family met the IWW criteria and would access the IWW support.

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## IWW SUPPORT

Following the Open Referral Forum, IWW support begun and a Planning Meeting was held to look at what support the family felt they required immediately. The Support Planning Meeting involved family and professionals attached to IWW project. Invites were sent to Offender Supervisor, Probation and Education.

Discussions took place in respect of Child A's behaviour, Parents ability to manage this whilst managing and ensuring the other children's needs were met and it was agreed that Barnardo's would begin their 20 week Parenting Programme with Mrs A immediately. YISP would liaise with the local YOS to determine what additional support could be offered to Child A. The Mentor would liaise closely with education regarding the children's behaviour and presentation and in particular explore options for Child A following exclusion.

Ongoing support would be offered to Mr A in relation to relapse prevention and his offending behaviour via interventions such as Fathers Inside. He was also interested in gaining employment on release and it was agreed that work would be undertaken via Education/Training Mentor in respect of CV's and courses in respect of construction work.

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## OUTCOMES

Following this, there continued to be ongoing problems in relation to Child A's behaviour, police being called to family home due to his destructive and threatening behaviour. He was removed from the property on one occasion and stayed with Maternal Grandparents for a period of 2 weeks until a safety plan had been put in place with the whole family in such situations.

Following discussions with education it was found that Child A was due to access a Specialist school for Children with challenging behaviour and the Education authority would be funding this. Child A has begun attending this school and there are no reported difficulties presently with this arrangement.

Ongoing support is being offered to Child A via YOS/YISP in respect of Anger Management and managing emotions. He is engaging in this support and family report that there are less occasions when his behaviour becomes problematic. He continues to misuse cannabis and has not re-engaged with CAMHS at this point.

Child B continues to attend school and progresses well. No concerns are raised in relation to his behaviour or presentation. He has had the opportunity to share his feelings with the Mentor on a regular basis.

Child C continues to develop well but has yet to have accessed any childcare provision.

Mrs A reports that she continues to struggle on occasions with Child A's behaviour but has found the support from IWW valuable and made her consider alternative ways in coping in stressful situations. She would like to become a peer mentor for the parenting programme following her involvement with the service. She has also had support from Education/Training Mentor around possible employment opportunities.

Mr A has completed the Fathers Inside course and has reported he has learnt more regarding the impact of his behaviour on his family. He has completed a CV and has an action plan with regard to employment on release. He continues to engage in relapse prevention work and the intensity of this will increase closer to his release.

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#### NEXT STEPS

- Support Planning Meetings to be held to review family care plan
- Ongoing support for Mr A in relation to relapse prevention and offending behaviour
- Parenting work to continue with both parents
- Ongoing work with Child A around anger management, cannabis use with aim of re-engaging with CAMHS
- Support for Child B around his current feelings via Mentor
- Advice and Guidance to family in respect of childcare provision for Child C
- Ongoing liaison with all statutory professionals e.g. probation, education re: sentence and child care planning.

## WESTERN BAY SAFEGUARDING CHILDREN BOARD - STRATEGIC PRIORITIES FOR 2013/14

| WBSCB STRATEGIC PRIORITY  | OBJECTIVE  | DESIRED OUTCOME   | Review comment  |
|---|--|---|---|
| <b>Legacy</b>   | All legacy issues from each LSCB across Bridgend, NPT and Swansea are picked up and addressed or incorporated into the development of the Western Bay Safeguarding Children Board  | <ul style="list-style-type: none"> <li>• A clear and strong position for Western Bay SCB to address local SCB issues within its development and planning arrangements</li> <li>• WBSCB to be assured that local safeguarding children issues are not lost in transition.</li> </ul>   | <ul style="list-style-type: none"> <li>• All legacy issues are now completed and where applicable incorporated into WBSCB's core business.</li> <li>• Recommend removal as a strategic priority</li> </ul>                                  |
| <b>Delivering on expectations of the Social Services and Wellbeing (Wales) draft Bill</b> | An established WBSCB which clearly complies with requirements from the draft Bill and is established to effectively undertake its statutory functions to safeguard children across Bridgend, NPT and Swansea.                | <ul style="list-style-type: none"> <li>• Committed ongoing budget which is contributed to by all statutory partners</li> <li>• A strong and effective Business Management Unit to coordinate Board functions.</li> <li>• A successful SAIT evaluation which evidences the effectiveness of the WBSCB.</li> </ul>  | <ul style="list-style-type: none"> <li>• SAIT event needs to be arranged for Autumn 2014. Budgets have been agreed for 2014/15 and WBSCB is meeting its core functions.</li> <li>• Recommend removal as a strategic priority</li> </ul>     |
| <b>Neglect</b>  | To promote more effective intervention in cases of neglect and to have a better understanding of the different natures and extent of neglect across Bridgend, NPT and Swansea.   | <ul style="list-style-type: none"> <li>• A single approach to neglect throughout partner agencies.</li> <li>• Children who are at risk or likely to be at risk of significant harm through neglect are better protected responsively with permanence plans</li> <li>• Families who show signs of neglect are identified earlier and managed more effectively through multi agency interventions.</li> </ul> | <ul style="list-style-type: none"> <li>• National reviews remain ongoing and WBSCB performance data suggests Neglect should remain a priority regionally.</li> <li>• Recommend Neglect remains a strategic priority</li> </ul>              |
| <b>Child Sexual Exploitation</b>  | To ensure full implementation of the statutory All Wales Safeguarding Children and young people from Sexual Exploitation Protocol.<br><br>To understand the extent to which children are involved in CSE across Western Bay. | <ul style="list-style-type: none"> <li>• Children/YP who are identified as being sexually exploitation are effectively safeguarded from ongoing exploitation.</li> <li>• Less children/YP become sexually exploited.</li> <li>• Children who are identified as at risk of CSE are provided with effective</li> </ul>  | <ul style="list-style-type: none"> <li>• CSE remains a UK wide priority. Regionally significant progress has been made to seek assurance, raise awareness and promote focus however the WBSCB's performance information suggests</li> </ul> |

|  |   |   |  |
|--|---|---|--|
|  | <p>To have an effective prevention strategy in place to identify risk early and provide appropriate services for children identified as at risk.</p> <p>To have inter-disciplinary training package in place for all professionals who work with children to help recognise and respond to symptoms of CSE.</p> | <p>services and interventions to prevent them becoming exploited.</p>   | <p>that this should remain a priority regionally</p> <ul style="list-style-type: none"> <li>• Recommend CSE remains a strategic priority</li> </ul>  |
| <b>Babies who become LAC</b>   | <p>To better understand the demographics across the region</p> <p>To promote the ethos of permanence during early stages of birth planning.</p> <p>To provide a steer to early intervention services on prioritising babies/unborns at risk of becoming LAC</p>   | <ul style="list-style-type: none"> <li>• All babies with targeted services have an appropriate plan for permanence at the earliest stage</li> <li>• Early intervention services support and contribute to improving permanence for babies who remain at home</li> </ul>   | <ul style="list-style-type: none"> <li>• Birth planning guidance has been developed and is in place. Work remains outstanding for managing injuries in non mobile babies.</li> <li>• Recommend Babies who become LAC to remain a strategic priority</li> </ul> |
| <b>Parental Substance Misuse</b>   | <p>To establish clear links and reporting mechanisms from Area Planning Boards in Bridgend, NPT and Swansea to be assured that work is on-going to promote the wellbeing of children living in families affected by substance misuse.</p>   | <ul style="list-style-type: none"> <li>• Better understanding of the work carried out by substance misuse agencies.</li> <li>• Clear line of accountability for the responsibility of safeguarding children affected by substance misusing parents.</li> <li>• Full implementation of applicable Hidden Harm Recommendations</li> </ul> | <ul style="list-style-type: none"> <li>• WBSCB needs further information to consider the status of this priority</li> </ul>  |
| <b>Domestic Abuse</b>  | <p>To establish clear reporting mechanisms between the DA forums and WBSCB to better understand the extent of domestic abuse across Bridgend, NPT and Swansea.</p> <p>To raise awareness of the impact of Domestic Abuse on children and families across the Western Bay area.</p>                              | <ul style="list-style-type: none"> <li>• Reduced Domestic Abuse incidents through campaigns such as “one punch ruins lives”</li> <li>• Reduction in PPD1 referrals in relation to domestic abuse incidents where children are involved</li> <li>• Improved recognition and response to domestic abuse incidents</li> </ul>              | <ul style="list-style-type: none"> <li>• Domestic Abuse is an expanding area of work which requires a bigger focus from both WBSCB and WBSAB.</li> <li>• Recommend Domestic Abuse remains a strategic priority</li> </ul>                                      |
| <b>Parenting Capacity including parental Mental Health and Learning Disabilities</b> | <p>To develop stronger relationships between services for adults with MH or LDs who are parents.</p> <p>To consider parenting</p>   | <ul style="list-style-type: none"> <li>• Families where MH and LD has been identified are supported across service areas to improve permanence for CYP.</li> <li>• Improved understanding</li> </ul>  | <ul style="list-style-type: none"> <li>• WBSCB needs further information to consider the status of this priority</li> </ul>  |

|  |  |   |  |
|--|--|---|--|
|  | <p>capacity assessments for multi agency groups who provide services to both adults and children.</p> <p>Family support services and interventions recognise and respond to whole family needs to support permanence of CYP.</p> | <p>and appropriate responses to parenting capacities for those identified with Mental Health or Learning Difficulties</p> |  |
|--|--|---|--|

## APPENDIX 15

### SOCIAL WORKER TESTIMONIAL - GEMMAES (PORTHCAWL SAFEGUARDING TEAM)

*I have been in Bridgend Children's Services since 2009 when I became a supervised contact worker within the Family Support Team. At this time I was already studying for my Social Work Degree and following this temporary post joined a Safeguarding Team as part of my third year social work placement. The pressures of the social work role within this context quickly became apparent, however I was supported at this time in such a way by my team, team manager and practice assessor which allowed me to embrace this and view it as invaluable experience. I enjoyed my placement thoroughly and was very pleased to be invited to apply for a full time position upon qualifying which I did in January 2011 and was successfully appointed in May 2011.*

*My First Year in Practice was very challenging and difficult at times with the pressures of a high and complex case load. However, my enthusiasm at the time and desire to enhance my skills, competency and experience saw me through this difficult time. I cannot say that the First Year in Practice Programme provided any assistance or support due to the excessive work load I was carrying at this time. I was unable to attend most of the group meetings and any additional work was impossible to complete when I had far more important deadlines to meet in terms of court and child protection work. To be completely honest this programme alongside my excessive caseload seemed to be more of a burden than a support.*

*On a more positive note, I have always felt completely supported within Bridgend Children Services by colleagues, seniors and management. It has always been clear to me where I can access support and this alongside the accountability and professionalism of others has also allowed me to feel somewhat protected in an environment whereby some very important and life changing decisions are and are needed to be made.*

*Since the 5 Safeguarding Teams have been established in 2013, I can say that I feel some pressure has been lifted. I have been very fortunate in having agreement to reduce my working hours following maternity leave and now work part time. I am very settled within my new team and feel very confident in my role and very supported by my team manager professionally and emotionally. Furthermore, I feel my overall experience as a social worker over the last three years has been although challenging very positive as I have been able to progress in a very difficult area with support that has allowed me to enhance my professional development and truly understand the importance of accountability and responsibilities of a safeguarding*

social worker. I hope to remain in Bridgend as I further my social work career and am very grateful for the opportunities I have been provided.

## APPENDIX 16

### CORPORATE PARENTING REPORTS 2013 – 2014

| Date              | Reports  |
|-------------------|--|
| <b>16.01.13</b>   | BCBC Short Breaks Statement  |
|                   | Integrated Family Support Service (Western Bay)  |
|                   | Post 16 Service Developments (Just@sk Plus)  |
|                   | Looked After Children – Performance Data Update  |
|                   | Informal Forward Work Programme  |
| <b>29.04.13</b>   | Adoption Service Annual Report 2012/2013   |
|                   | Qualifications and Performance Achieved by Looked After Children for the Academic Year 2011/12 |
|                   | Independent Reviewing Service Annual Report  |
|                   | Statements of Purpose  |
|                   | Informal Forward Work Programme  |
| <b>31.07.13</b>   | CSSIW Inspection into Bridgend Fostering Service   |
|                   | Safeguarding and Family Support Service 2011-12 Head of Service Annual Report                  |
|                   | Informal Forward Work Programme  |
| <b>28.10.13</b>   | Integrated Family Support Service (Western Bay)  |
|                   | Delegation of Authority to Foster Carers and Residential Child Care Staff                      |
|                   | Development of a National Adoption Service   |
|                   | Development of the Permanence Service with Bridgend's Adoption Team                            |
| <b>20.01.2014</b> | Informal Forward Work Programme  |
|                   | Regional Collaborative Advocacy Project  |
|                   | Update on Connecting Families including Progress of Evaluation and Update on Future            |

|                   |  |
|-------------------|--|
|                   | Funding  |
|                   | Draft Strategy to reduce the number of Looked After Children and Young People in Bridgend  |
|                   | Informal forward Work Programme  |
| <b>28.04.2014</b> | CSSIW Inspection into Bridgend Adoption Service  |
|                   | CSSIW Inspection into Bridgend Fostering Service   |
|                   | Statements of Purpose for Fostering, Adoption and Children's Homes   |
|                   | Statutory Independent Professional Advocacy and Independent Visiting Services for Vulnerable Children and Young People who are involved with Children's Social Services in Bridgend (BCBC) |
|                   | Informal Forward Work Programme  |



## BRIDGEND COUNTY BOROUGH COUNCIL

### REPORT TO CORPORATE PARENTING CABINET COMMITTEE

7 JULY 2014

#### REPORT OF THE CORPORATE DIRECTOR – CHILDREN

#### LOOKED AFTER CHILDREN - PLACEMENTS AND PERMANENCY STRATEGY

### **1 Purpose of Report**

- 1.1 The purpose of this report is to update Cabinet Committee on the progress made to develop a refreshed “Strategy to reduce the number of Looked After Children and Young People in Bridgend, now known as the “Looked After Children - Placements and Permanency Strategy”.

### **2 Connection to Corporate Improvement Objectives/Other Corporate Priorities**

- 2.1 This report links to the following Community strategy priorities:
- Working together to raise ambitions and drive up educational achievement.
  - Working with children and families to tackle problems early.
  - Working together to help vulnerable people to stay independent.
  - Working together to tackle health issues and encourage healthy lifestyles.

### **3 Background**

- 3.1 Members will be aware that throughout the last decade, there has been a significant increase in the overall number of Looked After Children in Bridgend. This has resulted in major pressures upon Safeguarding and Family Support Services and associated budgets. It also suggests that a significant number of children and young people in Bridgend are not experiencing childhoods conducive to wellbeing or achieving their full potential. Consequently, in order to direct a strategic response to the growing numbers of Looked After Children, the Council intends to publish its “Placements and Permanency Strategy” within which one of the primary aims is to reduce the number of Looked After Children (LAC) but also to take a whole systems approach to preventing the need for children to become LAC in the first place.

#### **4 Current situation/proposal**

- 4.1 Previously Committee has received comprehensive reports on statistical data and analysis of Looked After Children (LAC) in Bridgend, together with details of associated costs. Members were informed that the information contained within these reports would inform a refreshed strategy for reducing the numbers of LAC in Bridgend. Members requested that an update on the newly developed strategy be presented to Committee in order for Committee to comment and provide feedback.
- 4.2 Attached at Appendix 1, is the latest draft of the Council's "Looked After Children - Placements and Permanency Strategy". It recognises that in order to be effective in reducing numbers of looked after children, will require a strategy that is continually reviewed, has sound leadership, rigorous approaches to prevention and early intervention, targeted interventions to children and families with complex needs, (particularly where there are children on the edge of care), clearly defined approaches to social work practice, a strong collaborative working approach to working with children and families and a proactive use of relevant data, information and intelligence in respect of looked after children.
- 4.3 This Placement and Permanency Strategy describes the placements we want to provide and commission for our LAC, and focuses on how we will improve our current arrangements to improve outcomes for children in our care. However the scope of the strategy is not restricted to making good quality placements. Stages of the care journey, including a clear focus on supporting families to stay together wherever it is safe to do so, and minimising the need for children to become looked after are also key elements of this strategy. Children's Services are driving a 'whole system' approach to supporting LAC and keeping families together. Together with the Early Intervention and Prevention Strategy, these will form a multi-agency response to driving improved outcomes for children.
- 4.4 The focus in the strategy is on describing what will change in relation to our work with children in care or at risk of coming into care. The strategy contains an action plan for the future rather than an attempt to cover every detail of our current services and support.
- 4.5 In 2013 reports setting out our intention to launch a strategy aimed at reducing looked after children, was presented to the Children's Overview and Scrutiny Committee and the People's Partnership Board. Whilst both meetings welcomed the strategy, the importance of it being managed as a bespoke project was highlighted with the appointment of a project manager being integral to its success. This feedback was welcomed and informed a business case being written for such a post and submitted to the Council's Change Management Programme fund. Funding was subsequently agreed for a 14 month period and recently a project manager has been appointed who will take up her post mid June 2014.

## **5 Effect upon Policy Frameworks and Procedure Rules**

5.1 This has been considered but as there are no new or changed services policy / functions in this report, it is therefore not applicable at this time.

## **6 Equality Impact Assessment**

6.1 This has been considered but as the report is for information purposes, an assessment is not deemed necessary at this stage.

## **7 Financial Implications**

7.1 The Council has awarded additional funding of £66,169 from the Change Management Programme Fund to cover the associated costs for a project manager to lead the Permanency and Placement Strategy from the date the project manager takes up her post.

## **8 Recommendations**

8.1 Cabinet Committee is recommended to note and consider the content of this report and associated appendices.

**Deborah McMillan**  
**Corporate Director - Children**

**Date:**

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Head of Safeguarding and Family Support

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Background papers

Appendix One – Placements and Permanency Strategy.

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# **Looked After Children Placement and Permanency Strategy**

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# **Strategy to reduce the number of looked after children and young people in Bridgend**

## **1. Introduction/Background**

### **1.1 The purpose and aims of the strategy**

This Placement and Permanency Strategy for Looked After Children describes the placements we want to provide and commission for our Looked After Children, and focuses on how we will improve our current arrangements to improve outcomes for children in our care. However the scope of this strategy is not restricted to making good quality placements. Stages of the care journey, including a clear focus on supporting families to stay together wherever it is safe to do so, and minimising the need for children to become , after are also key elements of this strategy. Children's Services are driving a 'whole system' approach to supporting Looked After Children and keeping families together. Together with the Early Intervention and Prevention Strategy, they form a multi-agency response to driving improved outcomes.

The focus in this strategy is on describing what will change in relation to our work with children in care or at risk of coming into care. The strategy contains an action plan for the future rather than an attempt to cover every detail of our current services and support.

There is wide agreement in Bridgend that we want all our children and young people to

- thrive and make the best of their talents;
- live healthy and safe lives;
- be confident and caring individuals throughout their lives;
- know and receive their rights.

The children and young people themselves also aspire to this vision of what their lives can and should be.

If good outcomes are achieved, the different needs of children and young people – social, physical, emotional, cultural and learning – will have been met. However, not all children and young people have the benefits of good health, a stable and nurturing family, the necessary personal and social skills or other attributes which will secure their safety and wellbeing.

In extreme circumstances, the local authority will become the legal 'guardian' of children whose own family, for whatever reason, is unable to care for and secure good outcomes for them.

Looked After Children are those children and young people aged between 0 to 18 years who cannot safely remain with their family and are cared for by the local authority. Children are accommodated by the Local Authority either as a result of court proceedings because they have been or are in danger of being harmed, or with parental agreement. A significant proportion of children coming into care have a history of neglect or abuse. The majority of children and young people looked after by Bridgend are placed in foster care, with only a small proportion of young people placed in residential care, usually due to their more complex needs.

All the research indicates that, in general, outcomes for children who have been looked after, particularly for long periods of time or after a long period of poor parenting and neglect are not as good as those for other children. Children and young people who have been exposed to very poor parenting, neglect and/or abuse require not just care but also support in coming to terms with those experiences which often will have been extremely traumatic and harmful. We also know that the difficulties and negative behaviours experienced by looked after children and young people may be repeated when those young people become parents themselves, often with consequent negative impacts on their children and their children's children.

Hence, we must intervene as early as necessary to ensure that children and young people do not suffer; we need to provide good parenting and (often specialist) support when children are in our care; and we need to put in place plans which will 'turn around' children's lives as quickly and permanently as possible. All these things will help to reduce the likely repetition of harmful behaviour with future generations.

However, being a good corporate parent is expensive. In a world of finite, and diminishing, resources, it is critical that we act swiftly and effectively to ensure we use those scarce resources as efficiently as possible.

To achieve these aims, all partners - the young person, his or her family and the support services – must each understand that they have a responsibility to put the interests of the child or young person first. This is not the same as saying that the child's wishes will always be met, but that his or her views are respected and taken account of when any decisions are made which affect his or her life.

## **2. Where are we now?**

### **2.1 Background of Bridgend's children's social services**

Although the Council is the 'corporate parent' for looked after children and young people, responsibility for the day to day processes and arrangements rests primarily with the Safeguarding and Family Support Service – children's social services. In common with many other authorities in England and Wales, there have been both rising demands on, and concerns about the quality of these services during the last decade.



In September 2005, the authority was placed under a “protocol” by CSSIW because of concerns about the performance of children’s social services. Sufficient progress was made so that the protocol was lifted in 2009. However, there have been on-going pressures and challenges including:

- rising numbers of looked after children, children in need and children on the child protection register;
- high levels of vacancies and sickness absence among social workers;
- difficult to manage caseloads;
- high use of agency staff which was both expensive and sometimes unreliable;
- continuing need for improvements in performance;
- overspends in relation to the base budget.

Through strengthening senior management and changes to practice, significant improvements were made during the next two years, particularly in terms of staffing and performance. During 2012, for the first time in many years, the Council had a full complement of social workers in children’s services, although there were still issues related to staff inexperience, supervision and rising service demands. The use of agency staff has decreased significantly and caseloads have reduced.

More recently, there has been some deterioration in progress. Firstly, a number of experienced staff have left the Authority and the majority of new staff, especially to the assessment and case management teams, are newly qualified or relatively inexperienced.

The numbers of children and families we are working with have continued to rise, putting more pressures on all services, including adoption, fostering and aftercare. Pressures on our front line safeguarding teams have been exacerbated by significant changes arising of the Family Justice Review which now means that all care proceedings must be concluded within a 26 week timeframe with all assessments being completed by social workers before care proceedings are initiated.

These factors combined mean that there is less resilience within the service and, unsurprisingly, budgets continue to be overspent, despite additional resources being made available year on year.

## **2.2 National and local research and related plans and strategies**

The problems being experienced in Bridgend are not unique but we know, from national studies, that some authorities appear to be managing the difficulties more successfully than others, despite similarly challenging socio-economic circumstances. A number of research studies have been undertaken in Wales and England to identify the characteristics of such successful local authorities. Hence, we have looked closely at these studies and the situation in both Bridgend and other authorities has helped us refresh both our strategic approach and our practice.

Research suggests that some variation in the numbers and rates of looked after children across local authorities can be explained by differences in the demographic

and socio-economic profile of each local authority. This is especially the case in relation to population size, deprivation and the proportion of households that are lone parent families. Other aspects affecting the numbers and rates of looked after children relate to factors more within the control of the local authority and their partners – especially the way that local areas lead, organise and deploy their services for vulnerable children and families.

The most recent Welsh study, published in June 2013, concluded that there is no ‘magic number’ for the rate of looked after children that would help a local area calculate whether numbers are ‘too high’ or ‘too low’. This is because the number of looked after children in a local area is a result of a complex interaction of demographic and socio-economic trends as well as factors connected to the way the local Council leads, organises and deploys its services for vulnerable children and families.

The study, in which Bridgend participated, highlighted five main areas that can contribute to local efforts to reduce the number of looked after children, i.e.:

- strategy and leadership;
- prevention and early intervention;
- approach to practice;
- partnership working, and
- information and intelligence about performance.

The research suggests that:

- there is strong collaborative working at a strategic level and this needs to filter down more to frontline staff and practitioners;
- stakeholders feel positively that the priority for agencies is improving outcomes for looked after children and young people (i.e. safety above numbers or cost), and
- stakeholders praise the commitment to early intervention and prevention and believe that this can help improve outcomes for children, young people and their families.

The main areas for further development were suggested as:

- having in place a clearer strategy;
- further strengthening prevention and early intervention;
- improving the capacity of the wider children’s services to support children and young people with higher levels of risk; and
- reducing the caseloads of social work teams to enable improvements in practice and more direct work with children and families.

In 2013 a study undertaken on behalf of the London Boroughs identified critical success factors that led to the reduction of the numbers of looked after children. These were:

- knowledge and understanding of the LAC population;

- controlling entry, encouraging exit and reducing the duration of the stay in the system; and
- use of alternatives to care.

In addition to the national studies, we have also made contact with other authorities to explore the range of approaches that they are using which appear to be successful.

### **2.3 Trends in the Bridgend's LAC population**

Over the last year, we have been undertaking detailed analysis of our performance and the characteristics of the children and families where children have been taken into care. The full analyses are available in appendix A.

The key trends are as follows:

- Between 2007/8 and 2012/13, the Bridgend LAC population increased by 40% compared to a 24.5% increase across Wales.
- In Bridgend, children under the age of 2 make up 29% of the total number of children entering care. There has been an increasing trend in the number of children under 2 that have entered care since 2008.
- Children under 2 and young people aged 14 to 16 form the main proportion of children entering care, accounting for just over 46% between 2008 and 2014.
- Since 2008, of the total number of children that were aged under 1 at the point they became looked after, 41 have been adopted.

## **3. Where do we want to be?**

### **3.1 Our shared Vision, Commitment and Aspirations**

The development and delivery of this strategy are underpinned by some key principles.

The responsibility for meeting the needs of looked after children, of those at risk of coming into care rests across all of Children's Services.

All of our Looked after Children will be provided with the right type of placement which meets their needs, provides them with some choice about where they live, and enables them to benefit from positive experiences similar to those experienced by other children of the same age.

Placements should provide stability and permanency for children within their families or alternative care arrangements.

We want to enable our looked after children to live within their own family networks, wherever possible, through positive multi agency interventions and with a diminishing demand on resources. We want to reduce the number of children and young people for whom being taken into care is a requirement for their wellbeing and safety.

Where children cannot be supported within their immediate family or kinship network, they will in the main have their needs met in a foster family provided in house, or with independent foster agencies.

Residential placements will only be made where the complexity of a child's needs mean they cannot live in a family setting.

Out of county placements will only be considered in exceptional circumstances.

Placements should support Looked After Children to transition into adulthood with confidence, a strong sense of self-worth, and the skills and abilities to thrive.

Preventative and early intervention services should recognise need early so that we can offer support at an earlier stage to reduce the need for statutory intervention including having to take children into care. Through effective identification and assessment of need we are can reduce levels of risk and help families to prevent problems from reoccurring.

### **3.2 Our Objectives**

The scope of this strategy covers four key objectives:

- We will support families to stay together and reduce the need for children to be looked after by ensuring a strong focus on early intervention and preventative action across agencies
- We will manage risk confidently and provide support at the edge of care to make sure the right children come into care at the right time
- We will provide and commission a flexible and affordable mix of high quality placements to support all children having positive experiences in care, whatever their needs
- We will give children clearly planned journeys through care which enable them to be reunited with family and friends where possible, have stable placements and exit the care system positively.

### **3.3 Respecting Diversity**

Bridgend Council is committed to promoting equality and valuing diversity through our roles as community leader, service provider and employer. It is critical that equality is integrated into our service delivery arrangements and underpins all

aspects of our work. We have made a commitment to make progress toward achieving the WLGA Equality Improvement Framework to ensure that we are meeting our equality duties.

This requires us to be:

- F** *Friendly, approachable and professional*
- A** *Accessible to the whole community*
- I** *Inclusive of the diverse community we serve*
- R** *Respectful of people's differences*

We know that being 'fair' does not simply mean treating everyone the same. It means understanding and tackling the different barriers that people face so that everyone has a fair chance to fulfill their potential.

We know that being 'fair' means that we embrace the diversity of our county and challenge discrimination wherever it exists in our communities, whether it is based on a person's gender, race, disability, faith, sexual orientation, age or social status. We want to make our services accessible and responsive to the diverse needs of the people who live in, work in and visit the county borough. This means doing the best we can for our looked after children and those on the edge of care.

## **4. How do we get there?**

### **4.1 By communicating the strategy.**

Communication will be throughout the Council, statutory partners and stakeholders. The strategy will be overseen by the LAC Strategy Board and will report to the Peoples Board. This strategy and the associated action plan will continue to be live documents, regularly updated as each of the projects moves forward, however our commitment to Looked After Children, to the principles in this strategy and to working together to provide the best possible services will remain constant.

### **4.2 By promoting early intervention and prevention services.**

The Early Intervention Strategy will be published in the summer of 2014 outlining the contribution that we can make through strengthening our early intervention model and the pathways through the edge of care services.

The aim will be to drive improvements to family support, its design and delivery, and in doing so, reduce the numbers of families developing more complex needs and thus requiring more intensive and costly interventions, including the need for children to become looked after.

The Local Authority and partner agencies must prioritise the delivery of targeted prevention and early intervention services to stop needs escalating. The early intervention strategy will aim to ensure that prevention and early intervention forms part of a coherent continuum of support and interventions for families. It will be important that our prevention and early intervention services have systems in place to measure their impact, specifically on outcomes for children.

**4.3 By continuing to direct resources into evidenced based targeted interventions.** We will focus on supporting families with complex and acute needs through the Intensive Family Support Service and Connecting Families, and we will explore therapeutic models of intervention to meet children's needs.

**4.4 By Building workforce capacity and transforming social work practice**

The increase in Bridgend's Looked After Children has placed substantial pressure on the availability of Bridgend's own placement resources such as fostering and Adoption, resulting in a reduction of placement choice in house, and an increase in the need to commission placements from the independent fostering and adoption providers. Increased demands on social work teams, reviewing officers and support staff has posed significant challenges for staff in terms of meeting statutory requirements. The financial costs of looking after high numbers of Looked After Children has placed significant and unsustainable pressure on budgets.

To respond to these challenges it is important that our work force has capacity to work proactively, delivering interventions at an early stage to affect positive outcomes for children and reduce the need for them to be looked after. Where necessary this will involve transforming social work practice, ensuring that decisions and interventions are informed by evidence based practice. We need to transform the practice of Children's Services social workers by using strengths based and outcome focussed methodologies.

**4.5 By striving for stability and permanence for looked after children.**

This will result in increased numbers of adoptions, special guardianship orders, residence orders, and other long term arrangements with foster carers or extended family. We will rigorously pursue the discharge of care orders where these are no longer necessary. We will develop a permanency team to seek alternative legal arrangements for looked after children.

**4.6 By promoting a collective responsibility and response to rising numbers in Looked After children.**

Historically, activity to manage the increasing Looked After population has primarily focussed on Social Services' responses and systems. This has included continuous review of the threshold criteria for admission into accommodation, tight gate keeping by senior managers to ensure threshold criteria for admission are adhered to, and a clear focus on permanency policies and procedures.

Whilst Social services intervention is targeted at the most vulnerable children and their families, a number of other agencies across the borough have a role to play in supporting families in their task of raising children safely. To succeed, the scope of this strategy to reduce the Looked After population must be sufficiently broad to encompass the role other agencies working with children to ensure that there is a shared responsibility across agencies for its development and implementation. This will require continued commitment from all agencies to multi-agency working, so that provision of preventative family support services, to ensure early intervention before families reach crisis status, is viewed as a shared response between all agencies rather than the primary responsibility of social Services. This is in line with the developments in Social services which are underpinned by the Children Act 2004.

**4.7 By maintaining a detailed knowledge and understanding of our LAC population.** Analysis of data and robust self-evaluation will ensure that we know and understand our LAC population and we will be better placed to manage and change in trends.

**4.8 By taking a multi-agency approach to working in partnership to increase prevention and early intervention services that focus on particular vulnerable groups. For example:**

- Working closely with the Youth Service and Local Health Services under ABMU to reduce the number of teenage pregnancies within the borough;
- Working with Substance Misuse Agencies to support parents with substance and alcohol misuse issues;
- Working with the Support People Programme within the Communities Directorate to improve support to families experiencing domestic abuse.
- Working with Flying Start to address issues of poverty and deprivation within clearly defined geographical areas.
- Working with ABMU Health Board staff in regards to early intervention with the “Baby Friendly Initiative” (BFI) which aims to promote breastfeeding, attachment, eye contact, bonding and positive parenting.
- Work with ABMU to further the “Hello Baby Project“ which expands upon BFI by promoting fuller attachment through baby massage, grow brain, nutrition and diet and safety.
- Working in partnership with NSPCC to develop and promote services that specifically address issues of child neglect, such as the proposed ‘Thriving Families Project’.

| <b>Work stream</b>   | <b>Actions</b>  | <b>Lead</b>                              | <b>By when</b>           | <b>Sav attri</b>   |
|--|---|--|--------------------------|--------------------|
| <b>1 Families stay together</b>  |   |  |                          |                    |
| 1.1 Review of family support offer across levels of need                       | Remodel all early intervention and prevention services under one Group Manager.<br><br>Commission effective evidence based parenting programmes.  | <b>Deborah McMillan</b>                  | <b>Complete</b>          | <b>2 GM<br/>£1</b> |
| 1.2 Focus Flying Start Centres of helping families in need                     | Agree a service level agreement between Flying Start and social care to define how they will work together.<br><br>Explore opportunities for contact to be supervised through Flying Start. | <b>Tina Haddon</b>                       | <b>Sept 2014</b>         |                    |
| 1.3 Focus on early intervention and prevention programmes                      | Develop and implement early intervention strategy to ensure that all relevant stakeholders commit to targeted prevention and early intervention approach.                                   | <b>Mark Lewis</b>                        | <b>July 2014</b>         |                    |
|  | Establish pilot Childs Journey project using lean systems thinking.   | <b>Michelle Hatcher</b>                  | <b>January 2015</b>      |                    |
| 1.4 Develop and extend the Team Around the Family model and integrated working | Transfer of additional children's services staff into MAC teams.<br><br>Childrens social care staff to become aligned with hubs.  | <b>Colin Turner /<br/>Nicola Echanis</b> | <b>June →<br/>Dec 14</b> |                    |
| 1.5 Improve attendance in school   | Team around the school to refocus on vulnerable children and young people.<br><br>Agree target cohort in every school.<br><br>Establish permanent exclusions task and finish group.         | <b>Nicola Echanis</b>                    | <b>April 15</b>          |                    |



| <b>2 Manage risk confidently at the edge of care</b> |   |  |                 |  |
|--|---|--|-----------------|--|
| 2.1 Transformation of social care practice           | <p>Liaison with local colleges about the training programme for the Social Work degree so that practitioners are better informed from the outset.</p> <p>Induction programme for all new staff.</p> <p>Focused supervision and appraisal.</p> <p>Training programme for SW.</p> <p>Review of assessment processes.</p> <p>(To link with the work of the Strategic Improvement Board Workforce Development Group.)</p> | <b>Colin Turner /<br/>Claire Holt</b>    | <b>April 15</b> |  |
|  | Multi agency audit of cases to provide detailed analysis for the reasons behind the increase in LAC.  | <b>P/O Placements and<br/>Permanency</b> | <b>Dec 14</b>   |  |
| 2.2 Making use of kinship networks                   | <p>Explore approaches to engaging extended families and kinship networks.</p> <p>Increase number of special guardianship orders, residence orders, and other long term arrangements with foster carers or extended family.</p>  | <b>P/O Placements and<br/>Permanency</b> | <b>Dec 14</b>   |  |
| 2.3 Review panel arrangements                        | Agree process to identify young people on edge of care.   | <b>Nicola Echanis /<br/>Mark Lewis</b>   | <b>April 14</b> |  |
| 2.4 Remodel Connecting Families                      | Explore Community budgets model with LSB partners.  | <b>Deborah McMillan</b>                  | <b>Dec 14</b>   |  |

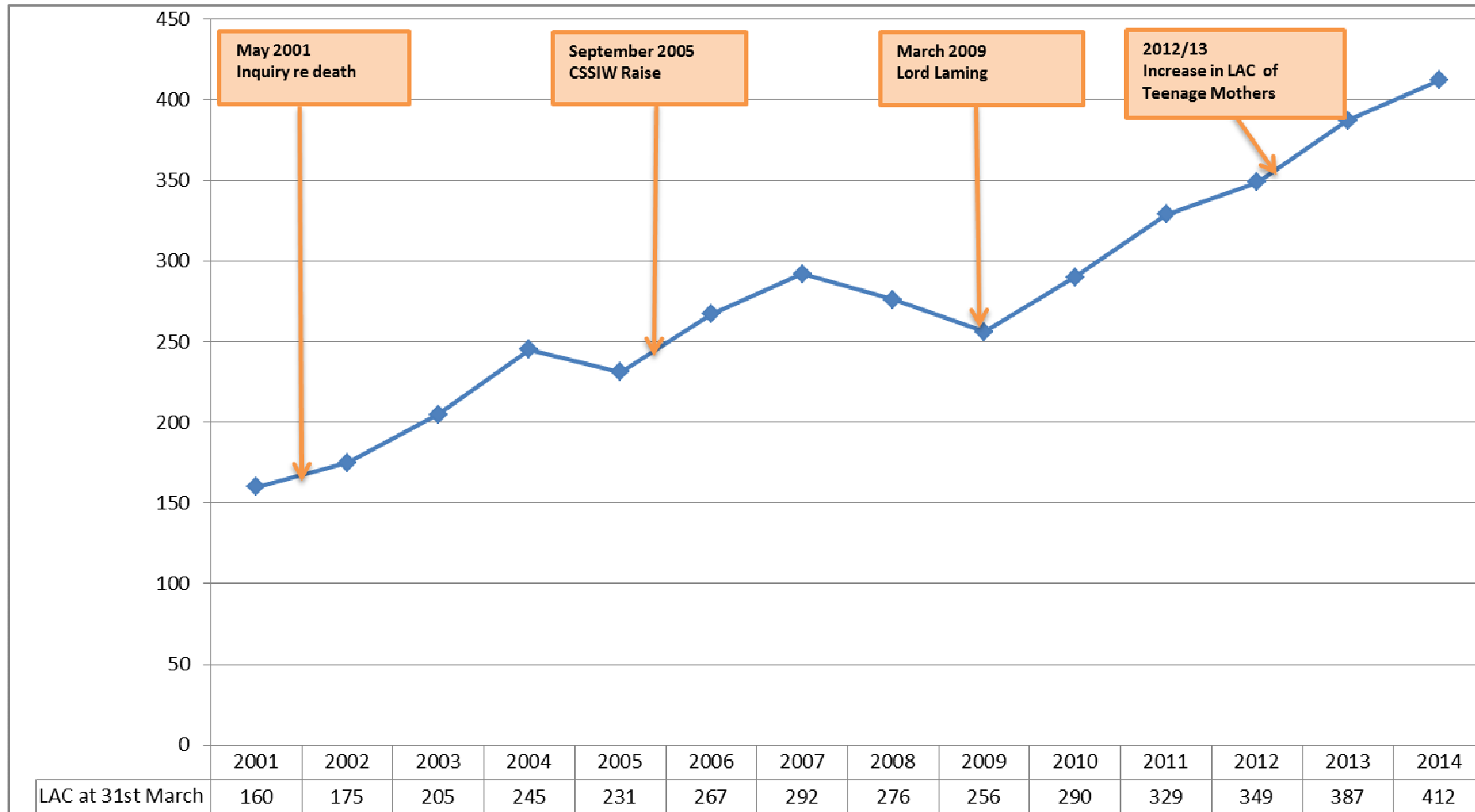
|   |  |  |  |  |
|---|--|--|--|--|
|   | Refocus entry criteria for Connecting Families<br>Identify edge of care cohort.  | <b>Nicola Echanis</b>                                    | <b>April 14</b>                          |  |
|   | Reallocate funding to offer respite as a preventative edge of care service.  | <b>Nicola Echanis</b>                                    | <b>Complete</b>                          |  |
| <b>3 Robust commissioning</b>                                   |  |  |  |  |
| 3.1 Joint adults/children's commissioning team (ALN)            | Regular reviews of placements (ALN).<br><br>Transition plans to supported or independent lodgings agreed in timely manner.<br><br>Formalise robust commissioning arrangements<br>Negotiate discounts and savings with providers. | <b>Mel Davies /<br/>Michelle Adamson/<br/>Ian Oliver</b> | <b>Sept 2014</b>                         |  |
| 3.2 Increase number of fostering families                       | Increase number of in house foster carers.   | <b>Natalie Silcox/<br/>Colin Turner</b>                  | <b>Increase<br/>by 9, April<br/>2015</b> |  |
|   | Review CCSR framework agreement.   |  | <b>Complete</b>                          |  |
| 3.3 Review the gatekeeping arrangements for agreeing placements | Review processes for identifying any placements.<br><br>Develop QA arrangements for the Accommodation and Permanence Panel and Out of Authority Panel.   | <b>Colin Turner /<br/>Nicola Echanis</b>                 | <b>Sept 14</b>                           |  |
| 3.4 Accommodation strategy for 16-18 year olds                  | Increase the number of supported lodging hosts.  | <b>Natalie Silcox</b>                                    | <b>Increase<br/>by 5, April<br/>2015</b> |  |
|   | Framework agreement for spot purchasing.   |  | <b>April 2015</b>                        |  |

| <b>4 Clearly-planned journeys</b>                               |  |  |                   |  |
|---|--|--|-------------------|--|
| 4.1 Swift permanence arrangements                               | Recruit P/O Placements and Permanency to lead on permanence.   | <b>Colin Turner</b>                      | <b>May 2014</b>   |  |
|   | Embed permanency procedures.   | <b>Natalie Silcox</b>                    | <b>Sept 14</b>    |  |
|   | Audit of 15+ cohort.   | <b>Wendy Wilcox /<br/>Natalie Silcox</b> | <b>Sept 2014</b>  |  |
|   | Audit of S20 cohort not in permanent placements.   | <b>Elizabeth Walton-James</b>            | <b>Annual</b>     |  |
| 4.2 Monitor and maintain adoption performance for BCBC children | Implementation of Western Bay Regional Adoption service.<br><br>Consider establishing specialist team. | <b>Natalie Silcox</b>                    | <b>Sept 14</b>    |  |
| 4.3 Improve transition into adulthood and independence          | Just @sk Plus work with housing providers to focus on moving on to independence.                       | <b>Wendy Wilcox /<br/>Colin Turner</b>   | <b>April 2015</b> |  |

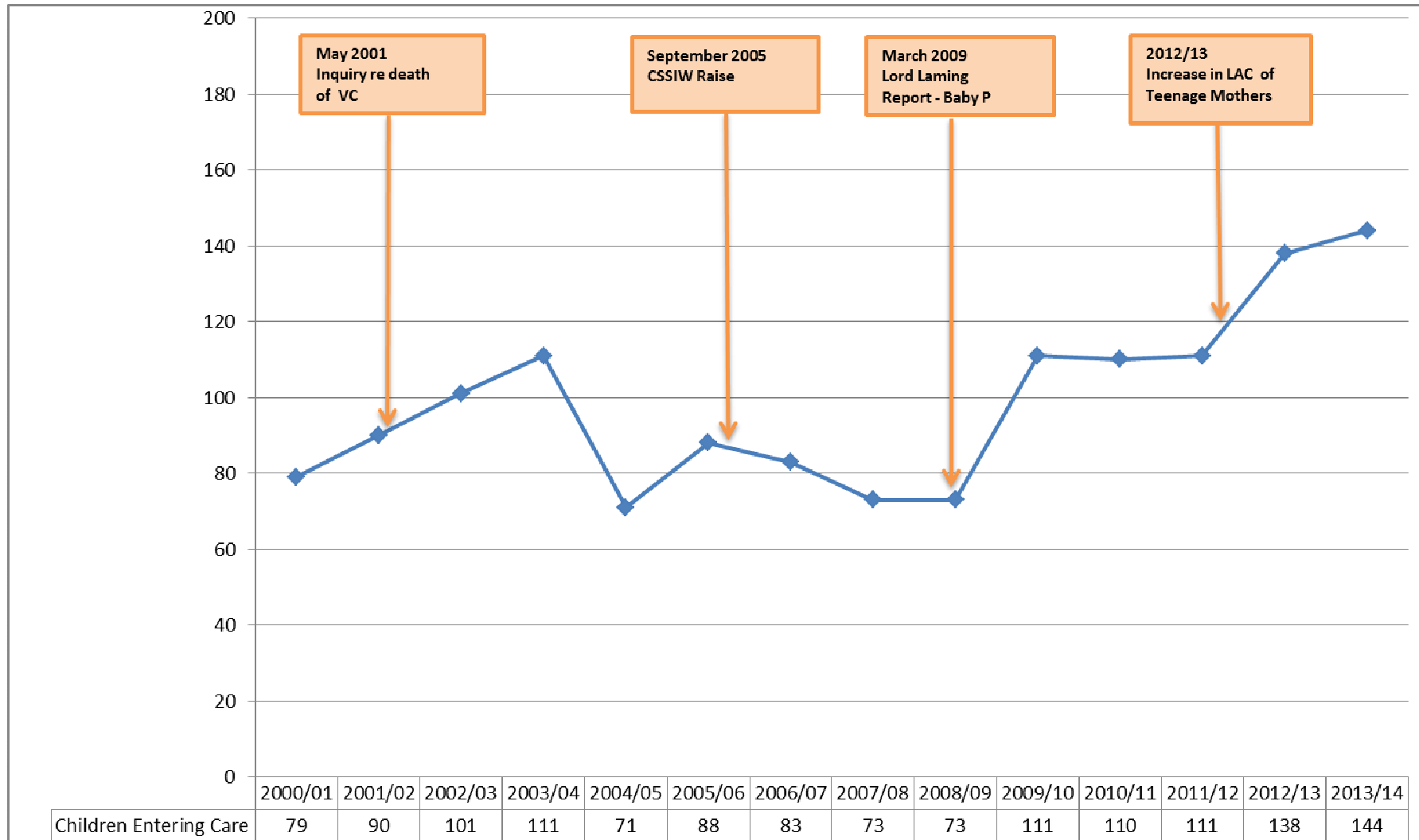
Appendix A

**Trends in Bridgend's LAC population**

***Figure 1: The total number of looked after children and young people in Bridgend as at the end of the last 14 financial years***



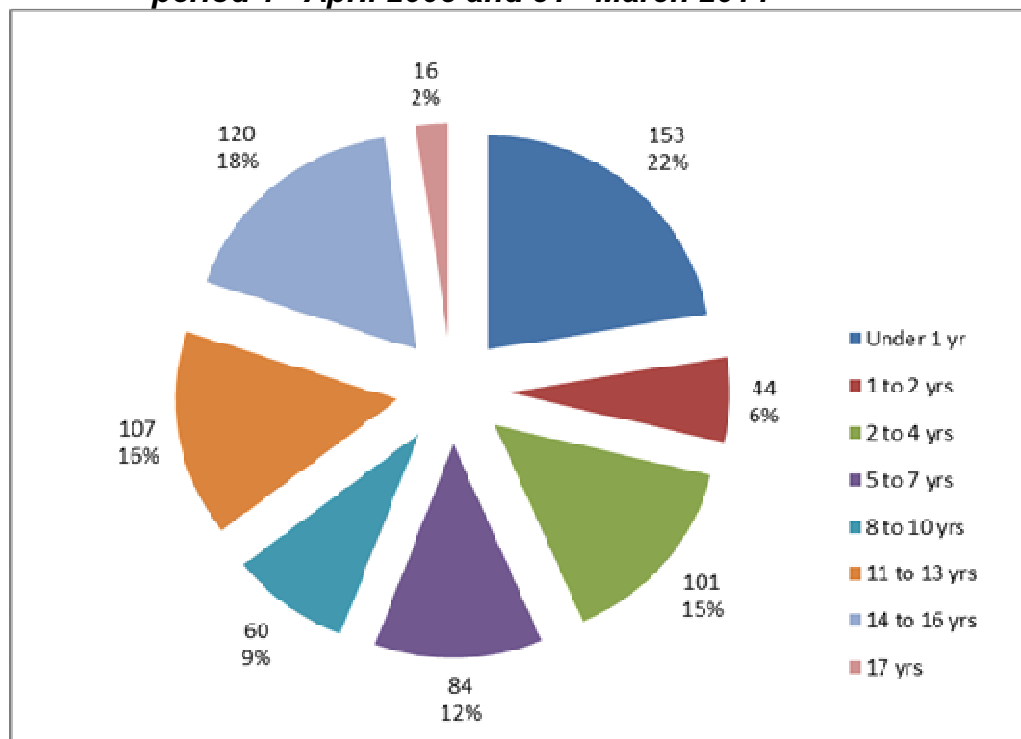
**Figure 2: The number of children and young people that entered care (became looked after) between 1<sup>st</sup> April 2000 and 31<sup>st</sup> March 2014**



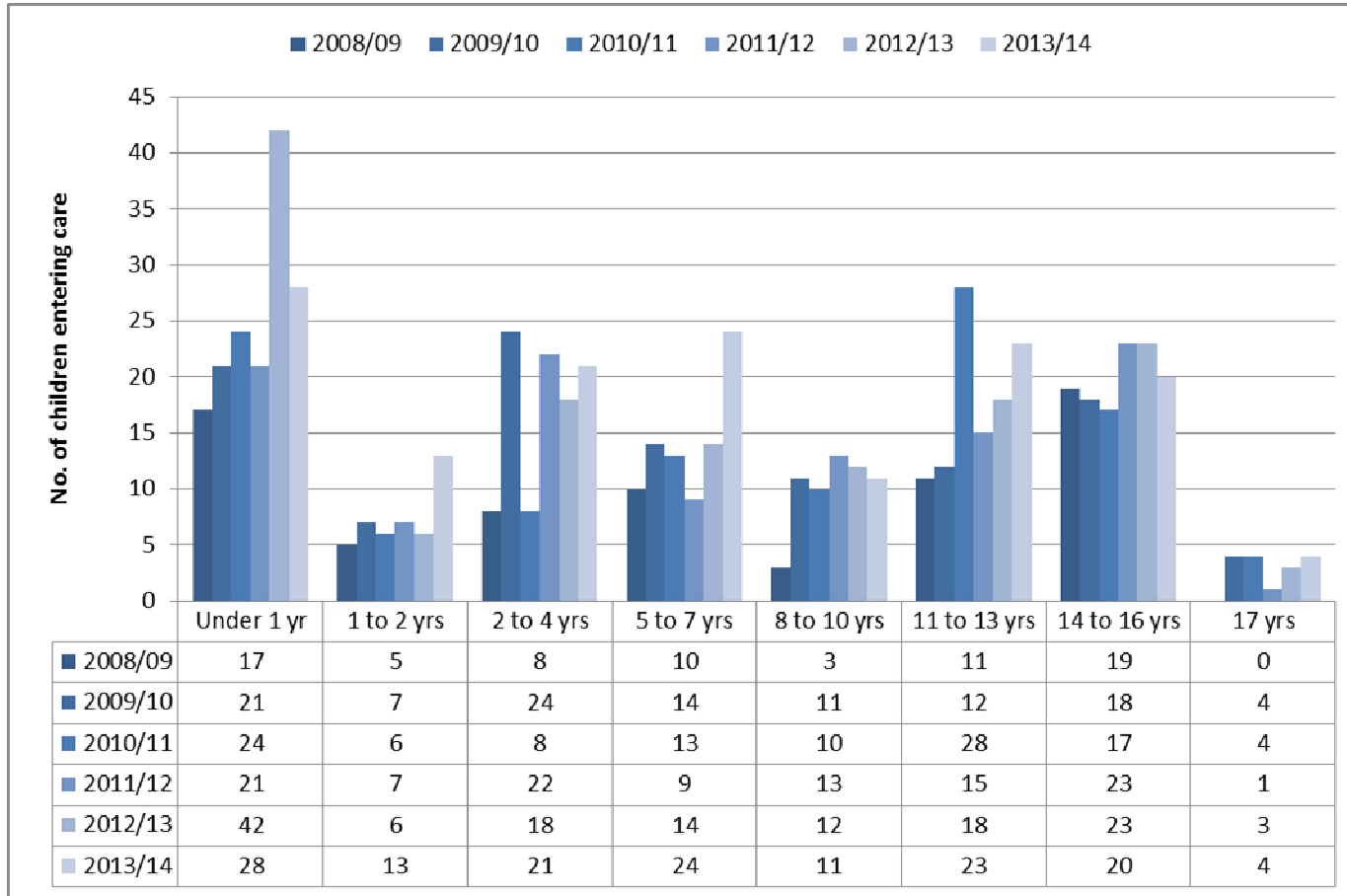
The increase within Bridgend can also be attributed to an increase in the level of complexity of the cases that are being accepted as referrals, with the majority of child protection concerns relating to more serious concerns such as substance misuse and poor parenting due to emotional or physical neglect.

Figures 3 and 4 show that for the six years since April 2008, 28% of the children and young people who became looked after were under 2 years old and 20% were over age 14, with 2% of the total being aged over 17. This is around 20% higher compared to the five years previous to 2008.

**Figure 3: The total number of children and young people that entered care (became looked after), by age band, in the period 1<sup>st</sup> April 2008 and 31<sup>st</sup> March 2014**



**Figure 4: The number of children and young people that entered care (became looked after), by year and age band, between 1<sup>st</sup> April 2008 and 31<sup>st</sup> March 2014**





Our data to 31 March 2013 indicated that children aged between 8 and 10 were statistically on average more likely to stay under the care of the authority for the longest period of time – 4 years and 8 months. The rise in the LAC population seen from 2009 had coincided with a rise in the average length of time that children have spent in care. Since 2007, there had also been an increase in the number of children that spent longer than a year in care.

Figure 5 shows that from 2007 to 2013, despite the increase across the age bands, the average age of children that entered care remained at around the aged 7 mark. The average age of children leaving care was reducing and dropped from an average age of 11.21 in 2010/11 to an average of 8.99 during 2012/13. This was indicative of a continuing improvement in enabling children to leave care at an earlier stage. Between 80 and 100 children and young people left care each year from 2007 to 2013.

***Figure 5: Average age of children and young people entering and leaving care, 2000 - 2013***

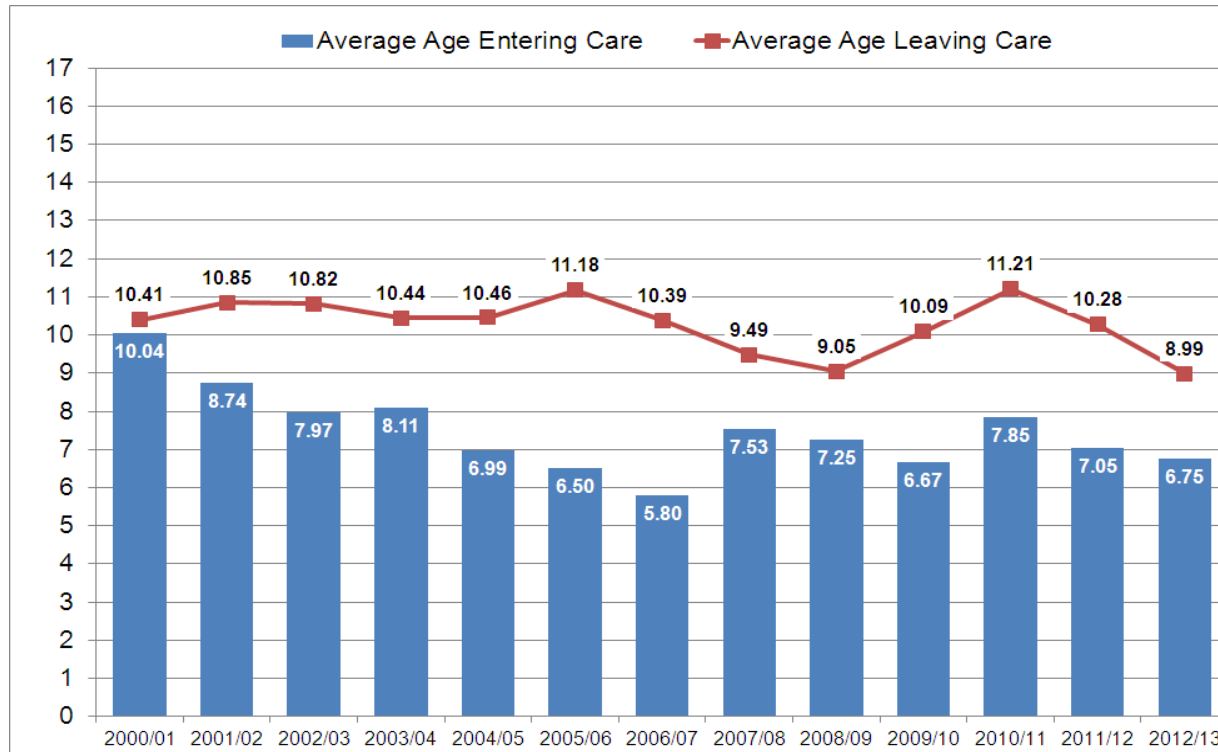


Figure 6 illustrates the exit strategy for all children and young people that ceased to be looked after over the past 6 financial years. This shows that from 2009 to 2013, the picture was one of the maintenance of historic patterns rather than increases which might help reduce the overall numbers. However, this changed in 2013/14.

**Figure 6: Permanency Placement between 1<sup>st</sup> April 2008 and 31<sup>st</sup> March 2014**

| Year Ending March                                     | 2009      | 2010      | 2011      | 2012      | 2013      | 2014       | Total      |
|---|-----------|-----------|-----------|-----------|-----------|------------|------------|
| Adopted   | 18        | 15        | 11        | 12        | 15        | 25         | 96         |
| Special Guardianship Order                            | 9         | 10        | 2         | 13        | 10        | 15         | 59         |
| Returned home to Parents/Guardian - non SGO/Residence | 36        | 43        | 42        | 50        | 42        | 55         | 155        |
| Moved to Independent Living                           | 18        | 14        | 18        | 17        | 13        | 21         | 101        |
| Other (Died, other LA, Custody etc)                   | 10        | 4         | 8         | 6         | 3         | 7          | 38         |
| <b>TOTAL</b>  | <b>91</b> | <b>86</b> | <b>81</b> | <b>98</b> | <b>83</b> | <b>123</b> | <b>562</b> |

Analysis in 2013 of the LAC population at the time, in Bridgend, evidenced that there were a significant number of children subject to Care Orders, who had been placed at home under the auspices of Placement with Parent Regulations. Many of these children had been living at home under these arrangements for in excess of 1 year, suggesting that risks had reduced and, therefore, their LAC status should be reviewed. Consequently, this cohort of children was reviewed to determine whether their care orders could be discharged. As at March 2014 the number of placements with parents had reduced from 37 to 30.

Should recent trends continue, we forecast that the LAC population of Bridgend will increase by some 14% over the next 6 years, rising to about 440 by March 2020. However, this forecast increase in LAC numbers would not be as drastic as rises in previous years. Key points are that:

- between 2014 and 2020, just to maintain the LAC population at current levels, an extra 14% of children will need to leave care on top of those already forecasted to move on;
- in order just to maintain the LAC population at current levels, over the next seven years, significant and greater impetus will need to be directed to children aged under 2 and young people aged between 14 and 16;
- in order to achieve, by 2020, a 20% reduction in the number of children forecasted to be in care, 800 children and young people will be required to leave the care of the authority over the next 7 years;

This is a challenging agenda but we know reductions are achievable. For example, the introduction and work of IFSS has helped Newport to reduce their LAC population by 8% over a three year period and, in England, Hammersmith and Fulham have been particularly effective at increasing the rate of successful Special Guardianship Orders granted.

#### **2.4 Significant characteristics of looked after children and their families in Bridgend**

As illustrated in Figure 4, the key characteristic of our looked after children cohort in the last two years has been the significant increase in the number of children that have entered care aged under 2.

In 2013, an examination of all cases of children under 1 that became looked after in the period April 2010 to March 2013 showed that:

- drug addiction affected 30% of the families, increasing to 60% when substance misuse problems including alcohol were also taken into account;
- domestic abuse by the father was present in 25% of the cases, with alcohol abuse identified as an underlying cause of the abuse in 43% of those cases. While the main area for concern here related to the father, there were also factors such as a mother's unwillingness to remove themselves and their children from an abusive relationship; and
- 33% of the children entered care due to the mother's mental illness/depression and challenging behaviour that impinged on proper and safe parental ability.

It is also significant that 29 (40%) of the babies had between 1 and 6 older siblings who had previously placed into care, as illustrated in Figure 7.

***Figure 7: Breakdown of number of children previously taken into care:***

| Age Band of Mother | Total No. of Mothers in Age Band | Number of Children previously placed into Care |    |   |   |   |   |   | No. of Mothers with previous Child in Care |
|--------------------|----------------------------------|--|----|---|---|---|---|---|--|
|                    |                                  | 0  | 1  | 2 | 3 | 4 | 5 | 6 |  |
| 41 to 45           | 1                                |  |    | 1 |   |   |   |   | 1  |
| 36 to 40           | 8                                | 3  | 1  |   | 2 | 1 |   | 1 | 5  |
| 31 to 35           | 6                                | 2  | 1  | 2 |   |   | 1 |   | 4  |
| 26 to 30           | 20                               | 9  | 5  | 1 | 2 | 2 |   | 1 | 11   |
| 22 to 25           | 18                               | 11   | 4  | 2 | 1 |   |   |   | 7  |
| 19 to 21           | 6                                | 6  |    |   |   |   |   |   |  |
| 16 to 18           | 12                               | 11   | 1  |   |   |   |   |   | 1  |
| 11 to 15           | 1                                | 1  |    |   |   |   |   |   |  |
| Total              | 72                               | 43   | 12 | 6 | 5 | 3 | 1 | 2 | 29   |

This would conform to BCBC adopting a more robust and rigorous response to Child Protection issues with families where previous children have entered care. Of particular note is that 8 out of the individual mothers had moved into the Bridgend area, after having had previous children taken into care by another Local Authority.

In total, 60% of the mothers of those babies taken into care had either been in care themselves as a child or have had previous children removed.

Between 2010 and 2013, around 50% of the babies entering care were born to mothers aged under 25, with age band 26-30 accounting for a further 30%. The number of teenage mothers of babies entering care increased during 2012/13 to 12 from 4 in 2011-12 and 2 in 2010/11

The statistical analysis suggests that there is a need to continue a strong inter-agency focus on parental alcohol and drug issues, but that we also need to prioritise reducing the number of babies at risk of poor parenting. This will require close working with health and education colleagues in relation to both parenting and more effective use of contraception.



## BRIDGEND COUNTY BOROUGH COUNCIL

### REPORT TO CORPORATE PARENTING CABINET COMMITTEE

7 JULY 2013

#### REPORT OF THE CORPORATE DIRECTOR - CHILDREN

#### INDEPENDENT REVIEWING SERVICE REPORT

##### **1. Purpose of Report**

- 1.1 To provide a report to the Cabinet Committee in line with the Independent Reviewing Officers Guidance Wales (WAG 2006). This report will provide an overview of the role and function of the IRS. During the Committee meeting, Members will receive a presentation that will provide a portrait of the LAC population known to Bridgend County Borough Council at the current time.

##### **2. Connection to Corporate Improvement Objectives / Other Corporate Priorities**

- 2.1. This report is connected to all corporate objectives relating to looked after children (LAC). The central objective is to achieve best outcomes for looked after children through high quality care planning. It is related to the Looked After Children (LAC) Placement and Permanency strategy and informative in light of the authority's investment in the provision of appropriate placements for looked after children and young people. The authority's work with looked after children is carried out under the Children Act 1989 and related legislation and guidance documents. The Independent Reviewing Officers Guidance Wales (WAG 2006), which was issued under the Children and Adoption Act 2002, is of central significance.

##### **3. Background**

- 3.1 The Independent Reviewing Officers (IRO) Guidance Wales (WAG 2006) gives IROs the duty to 'monitor' the responsible authority's performance in relation to looked after children and young people. IROs also have a duty to prevent drift and delay for looked after children and young people.
- 3.2 Within the guidance, IROs are expected to improve care planning and decision making, and make an important contribution to the consistency of the responsible authority's approach to care planning. Additionally, the IRO service has what the guidance refers to as 'an authoritative role' in assuring the quality of a responsible authority's case planning. In order to support the continuing development and review of the local strategy for children's services, the manager of the IRO service should provide an annual report to the lead member with executive responsibility for children's service and corporate parenting. The guidance states that this report must identify good practice but must also identify issues for further development,

including those where urgent action is needed. The guidance urges the responsible authority to make effective use of reports from its IRO service so that it can be satisfied that its services can achieve optimum outcomes for the children concerned.

- 3.3 A House of Lords judgement in 2002 concluded that a local authority who had failed in its duties to a looked after child could be challenged under the Human Rights Act 1998, most likely under article 8 of the European Convention on Human Rights relating to family life. The judgement recognised that some children with no adult to act on their behalf may not have any effective means to initiate such a challenge. In response, the Government made it a legal requirement for an Independent Reviewing Officer to be appointed to participate in case reviews, monitor the local authority's performance in respect of reviews, and to consider whether it would be appropriate to refer cases to the Children and Family Court Advisory and Support Service (Cafcass). This is set out in section 26 of the 1989 Act, as amended by the 2002 Act.
- 3.4 Guidance is issued under section 7 of the Local Authority Social Services Act 1970 and came into force on 1<sup>st</sup> September 2004 and includes Regulations that require all responsible authorities to have Independent Reviewing Officers in place to chair the statutory review meetings of all children looked after or accommodated by them.
- 3.5 The IROs have a duty to monitor the responsible authority's review of the care plan, with the aim of minimising 'drift' and challenging poor practice.
- 3.6 The guidance identifies the concept of a review as 'a continuous process of planning and reconsideration of the plan for the child' and suggests that the review includes a number of components leading to meetings held to discuss the plan which has been drawn up for a child. It also recommends that the child's case should be chaired by an officer of the responsible authority at a more senior level than the case social worker. The intention was to bring a degree of objectivity and oversight to practice and decision making in monitoring the care plan for the child.
- 3.7 The appointment of IROs was seen as one means by which care planning and decision-making could be improved leading to improved life chances for looked after children. The IRO could make an important contribution to ensuring that the local authority had a consistent approach towards the care of children for whom it was corporately responsible. It was argued that the IRO could offer a safeguard to prevent any 'drift' in planning the care for looked after children and ensure that the local authority's efforts in reviewing children's cases were focused on meeting the needs of the children. The IRO could monitor the activity of the local authority as a corporate parent in ensuring that appropriate actions were taken to meet the child's needs.
- 3.8 In *Bridgend*, IROs chair the review meetings of all children looked after. In doing so IROs are able to monitor the appropriateness of the care plan, its implementation, and to establish whether the milestones set out in the plan are being achieved in a timely way.
- 3.9 As chair, the IRO ensures that all those involved in the meeting make a meaningful contribution to the discussion. In this way, an informed decision can be made about the short and long-term actions that will need to be taken to advance the child's



care plan. A further crucial role for the IRO is to ensure that there is no undue delay in implementing actions within care plans. From his/her position as the genuinely independent chair of the meeting, the IRO is well placed to identify any concerns about how a child's care is being managed, for example, whether their placement is matched to their needs and is able to facilitate the long-term objectives agreed through the assessment and care planning process.

#### **4. Current Situation / Proposal**

- 4.1 The attached report at Appendix 1 represents the Independent Reviewing Service report as required by the guidance. A data set has been developed with a view to underpinning this report with quantitative data as a basis from which to explore the critical qualitative information. The presentation that Members receive at the meeting will include quantitative data and qualitative data on various aspects of the IRO service.
- 4.2 Analysis of the quantitative data leads to two clear conclusions with which Cabinet Members will already be well familiar. Firstly, the increasing trend of children becoming looked after: Bridgend's looked after population at the end of March 2014 was 412, a 6.5% increase on the previous year. Bridgend has consistently had a higher LAC population than the Welsh local authority average throughout the previous 10 years. Secondly, at the end of March 2014, there were 127 looked after young people in the 11-15 year old cohort, and 52 under the age of two years, information that will be used to inform planning for the future. The data indicates that overall, during 2013/14, 96.6% of all LAC reviews were held within statutory timescales. 99% of all reviews of Children on the Child Protection Register (CPR) were held within statutory timescales. This is a significant achievement within the context of increasing work pressure, including rises in numbers of children who are Lac and children on the CPR.
- 4.3 The qualitative aspects of the report equally require consideration and are drawn from IRO supervision, team meetings and data reports. IROs are satisfied that in Bridgend there are a significant number of examples of sound care planning leading to positive outcomes being achieved for looked after children and young people but acknowledge, that in a small numbers of cases, their ability to track progress of all care plans is challenged by their high caseloads.
- 4.4 Notwithstanding the improvements that have been noted, continuous improvement is required. The Independent Reviewing Service aims to have a greater impact in terms of improving the quality of the experience of being looked after and the outcomes that we assist our looked after young people in achieving their full potential.

#### **5. Effect upon Policy Framework& Procedure Rules**

None

## 6. Equality Impact Assessment

This has been considered but there are no new or changed services/ policy/ functions and it is therefore not applicable.

## 7. Financial Implications

All work will be carried out within existing budgets.

## 8. Recommendation

It is recommended that the Committee notes this contents of this report and the accompanying annual report of the Independent Reviewing Service.

**Deborah McMillan**  
**Corporate Director Children**

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CF31 4AR

## Background documents

Appendix 1: Independent Reviewing Service Report to Corporate Parenting Cabinet Committee

**Independent Reviewing Service**

**Annual Report 2013-2014**

**BRIDGEND COUNTY BOROUGH COUNCIL**

**REPORT TO CORPORATE PARENTING CABINET  
COMMITTEE**

**April 2014**

**REPORT TO THE CORPORATE DIRECTOR – CHILDREN**

Report Context:

- Introduction
- Legal Context
- Core IRO Function
- Composition of IRO Team
- Caseload
- Business Support
- IRO Service Development and Achievements
- Reviewing Activity:

-Number of reviews and timeliness

-Reviewing Performance

-Performance Indicators

-Pathway Reviews

- Qualitative Information

-General Themes

-Case dispute Resolution

- Challenges 2013-14
- IRO Service priorities 2013-14
- IRO service action plan 2013-14

## **Introduction**

1. It is a requirement of the manager of the IRO service to produce an Annual Report for the scrutiny of Members of the Corporate Parenting Committee line with the regulations under the Independent Reviewing Officers Guidance Wales (2004).
2. The IRO service has an authoritative role, in assuring the quality of care planning is achieved. The guidance states this report must identify good practice but must also identify issues for further development, including those where urgent action is required. The guidance urges the local authority to make effective use of the reports from its IRO service so that it can be satisfied that its services can achieve best outcomes for the children and young people concerned.
3. This Annual Independent reviewing Officer (IRO) report focuses upon the work of the IRO service from April 2013 to March 2014. As part of the Quality Assurance role, the report will contain performance information in respect of the statutory reviewing of children who are looked after by Bridgend County Borough Council, and children subject to Child Protection Case Conferences. The report will consider an analysis of the quantitative data with information drawn from internal reports. The qualitative data is drawn from IRO monitoring forms, supervision and Team Meetings.
4. The report also includes information that relate to regulatory requirements in respect of: resolving case disputes; IRO caseloads; participation and consultation of young people in their Reviews, challenges and achievements in the reporting period, in addition to service priorities for 2014-15.

## **Legal Context**

5. The appointment of IRO's by local authorities is a legal requirement and their core functions are governed by the legal regulatory framework outlined below:
  - The Adoption and Children Act 2002 detailed the requirements on Local Authorities in respect of the appointment of IROs.
  - The Independent Reviewing Officers Guidance (Wales) 2004.

## **Core Functions**

6. The Independent Reviewing Service has an important Quality Assurance function and works towards ensuring all children within the care of Bridgend

County Borough Council has a robust effective care plan. This plan is aimed towards improving outcomes for children and young people in providing a stable and secure childhood where their health, education and emotional wellbeing is promoted through effective care planning . It is the function of the Independent Reviewing service to ensure the care plan is appropriate and progressive in Safeguarding whilst meeting all identified needs.

7. Independent Reviewing Officers (IRO) are required to independently review the Care Plans of all Looked After children and those children with a Child Protection Plan and subject the child protection register (CPR). The Review will include consultation with and attendance of relevant agencies (health, education and Police etc.) and will usually include the child/young person, their Social Worker, carers and family members. Time scales for LAC Reviews are set out in the Children Act 1989. First Review will take place within 28 days, next Review three months following the initial and then six months from the second Review. Subsequent Reviews are held every six months unless there has been an unplanned change of placement where a Review will need to be held within 28 days.
8. Within Bridgend County Borough Council, the IRO Service has the following roles and responsibilities;
  - To Review and oversee the effectiveness and the appropriateness of Care Plans for those Children and Young People the Council has responsibility for. This includes the chairing of all Child Protection Conferences, Looked After Children Reviews, including children placed for Adoption and Pathway Plans for young people moving towards independent living.
  - To ensure all LAC Reviews and Children Protection Conferences take place within compliance of the legal timescales.
  - To Chair all Child Protection Conferences on behalf of Western Bay Safeguarding Children Board.
  - To provide a report on each Review held which includes recommendations to any changes to the Care Plan and to monitor the progress of the Care Plan by tracking cases between Reviews.
  - To ensure the child/young person's rights are protected.
  - To ensure the voice of the child is heard throughout the care planning process and to monitor the child's wishes and feelings have been recorded.

- To support and advise through a mentoring and coaching role to social work staff in relation to effective care planning.
- To raise IRO concerns where they have been identified through the agreed protocol and to escalate unresolved concerns regarding care planning to the appropriate level of the Local Authority's management structure.
  
- To consider the need to seek independent legal advice and possible referral of a case to Cafcass. Under these circumstances where the IRO believes the Local Authority has failed in any significant respect to prepare a child's Care Plan; to implement Review Recommendations; in Reviewing a Child's Case the Local Authority has failed to act on or resolve to the satisfaction of the IRO; there has been a breach of the above at a senior management level within a reasonable timescale.
  
- The quality assurance function of the IRO service aims to highlight concerns around specific cases and also any trends relating to care planning practice. It also has a duty to highlight good practice.
  
- All Looked After Children are subject to Health Plans to promote their health and development. The IRO's have responsibility to ensure the Health Plans are monitored and meeting the children's needs within the Looked After Children Reviewing process.
  
- All LAC children are subject to a Personal Education Plan (PEP). The IRO is responsible for ensuring this is in place and regularly reviewed to ensure all educational needs are being met.

### **Composition of the IRO Team**

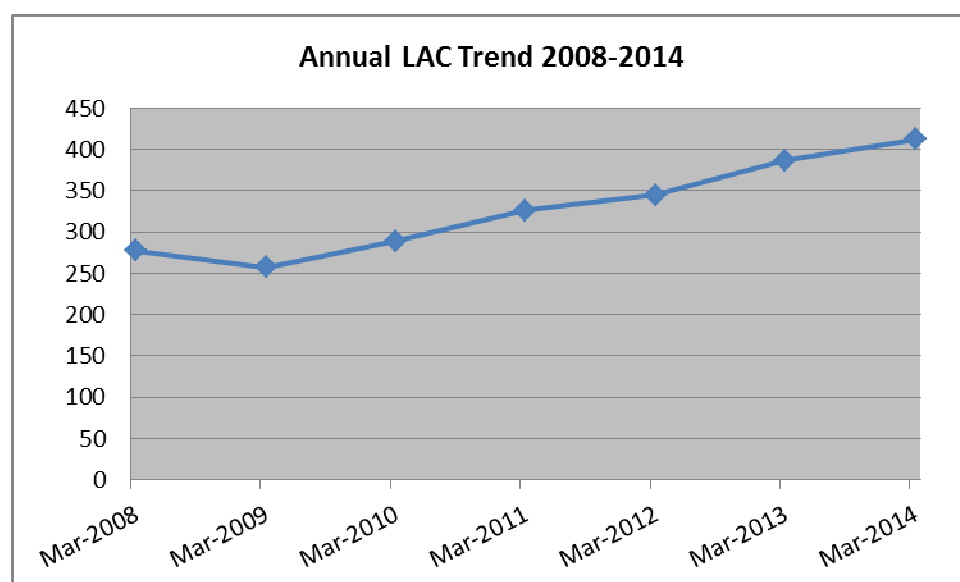
9. There are currently 5 full-time posts and 2 half time posts. These individuals are very experienced in working with children and families. Four of the IRO's have been in post for a substantial period of time and the newest members joined the service in October and November 2013. We have one vacancy which is being covered by an agency worker at present. One of the long terms IRO's has recently secured an IRO position in Newport and left his position at the end of May 2014. His decision to leave Bridgend's IRO service was influenced by the outcome of Job Evaluation which had recommended a pay cut for the IRO post. Two new full-time IRO's have recently been appointed and have recently taken up their posts with Bridgend.
  
10. The IRO's have a wealth of experience between them and all have been qualified as Social Workers for a substantial period of time (one IRO has 40 years Social Work experience) with all having worked directly in the

safeguarding and LAC arena. The IRO Service Manager has worked in children services for 20 years.

### **Caseload**

11. In line with other Local Authorities throughout Wales, Bridgend County Borough Council has seen an increase in the number of Looked After Children (LAC) and the number of children subject to a child protection plan. On the 31<sup>st</sup> of March 2014 there were 412 looked after children in Bridgend. This is a 6.5% increase on the previous year. There were also 179 children on the child protection register, an 11.2% increase on the previous year. These increases have inevitably placed considerable pressure on the IRO service and in particular IRO caseloads.

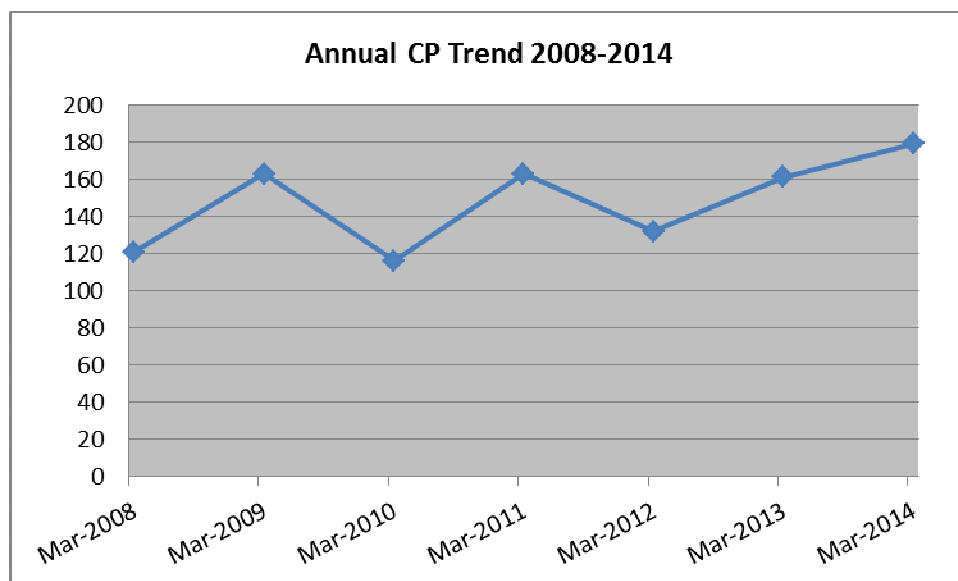
The table below shows the annual LAC trends between 2008 and 2014



| Yr Ending | No of LAC |
|-----------|-----------|
| Mar-2008  | 277       |
| Mar-2009  | 257       |
| Mar-2010  | 289       |
| Mar-2011  | 326       |
| Mar-2012  | 345       |
| Mar-2013  | 387       |
| Mar-2014  | 412       |



The table below shows the annual trend for children on the Child Protection Register between 2013 and 2014



| Yr Ending | No of CP |
|-----------|----------|
| Mar-2008  | 121      |
| Mar-2009  | 163      |
| Mar-2010  | 116      |
| Mar-2011  | 163      |
| Mar-2012  | 132      |
| Mar-2013  | 161      |
| Mar-2014  | 179      |

12. As with all other departments within children services, this increase in numbers have impacted upon the IRO service and increased pressure in meeting compliance and statutory obligations. IRO caseloads have risen in line with this increase in LAC and CPR population with full-time caseloads ranging from 103 to 118 and part-time between 52 and 69. These caseloads are above that recommended within national guidance which states that 'it is estimated that a caseload of 50-70 children for a full-time equivalent IRO. An Ofsted report 'Independent Reviewing Officers: Taking up the Challenge? Published in June 2013, recommended a benchmark of 50-70 caseload. Recent enquiries across neighbouring authorities of IRO services show an average caseload number of 80 per full-time equivalent. The recent inspection by the CSSIW had commented on the high caseloads carried by IRO's within Bridgend County Borough Council. (We are awaiting publication of report)

**TOTAL NUMBER CASE WITHIN THE IRO SERVICE (AT TIME OF WRITING)**

| Child Protection | Looked After Children | Looked After Children and those subject to a Pathway Plan | Pathway Plan | Total |
|------------------|-----------------------|---|--------------|-------|
| 188              | 349                   | 64  | 75           | 676   |

**Business Support**

13. In relation to LAC Reviews the IRO Chairing Service has one dedicated full time administrator who performs a number of functions. These include liaising with Social Workers and chairs to arrange dates and venues for Initial LAC Reviews; forward planning and organising LAC invite letters/consultation papers for Reviews, creating the ICS documents on DRAIG, co-ordinating cancelled/re-arranged LAC Reviews; collating monitoring/feedback forms, dealing with telephone queries regarding LAC Reviews, distributing minutes as well as validating LAC data for Performance Indicators. Under the regulations, the Local Authority is 'required to provide sufficient administration support to facilitate the delivery of an efficient and effective review process'. However, due to the significant increase in the LAC population, the business support provision to the chairing service is under review as the current provision relies too heavily upon the one full time post holder who has experienced her workload increase considerably over the many years that she has been in post.
14. Child Protection Reviews are supported by four CP clerks who collate information and reports for conference, verify attendance, take the minutes of conference and distribute minutes; maintain the Child Protection, Pre Birth and Temporary Register; arrange venues for review conferences and create relevant ICS documents (conference document, initial core group and initial CP visit); oversee level one work and validate data for PI's. Alongside the clerks there is one full time and one part time administrator. The full time administrator will chase up the conference requests after strategy meetings, for initial conferences arrange a venue and telephone invitees excluding family, co-ordinate invites for review conferences, log and process GP invoices for GP reports provided, chase up professional reports.

**IRO Service Development and Achievements**

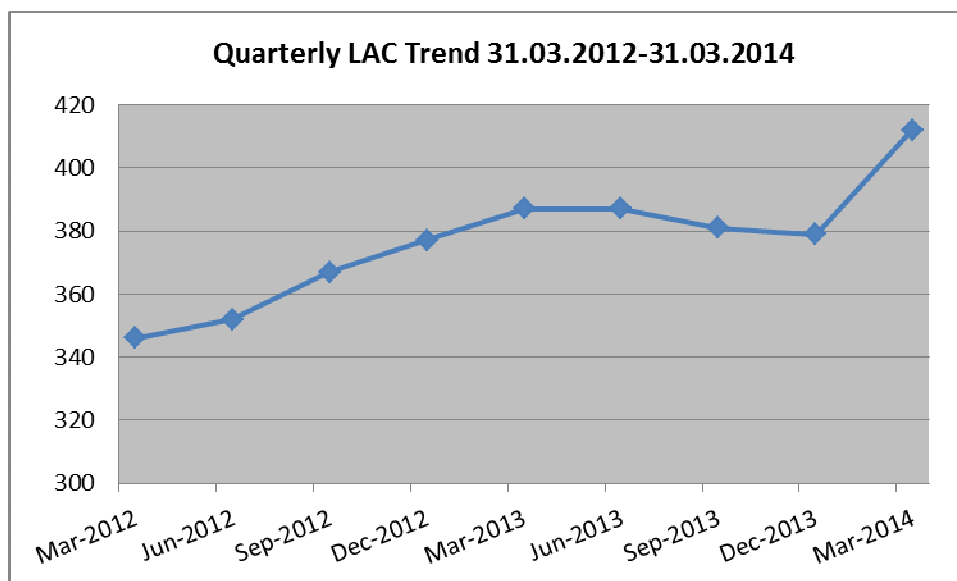
15. Since the appointment of the relatively new IRO service manager, she has ensured that regular monthly Team Meetings take place where other

professionals are asked to attend for the first hour to discuss any changes or updates on new services being introduced which will affect the role of the IRO or the children we work with. The following have attended Team Meetings; NSPCC, Knowledge Management to discuss Junior ISA's for LAC, Legal Services to discuss changes within the revised PLO, Cafcass Cymru to build closer links which has included the Regional Director providing briefings on the changes to revised Public Law Outline and the implications for the IRO. The service also held its annual "Development Day" where the role of the IRO was revisited in line with the changing role and responsibilities of the Independent Reviewing Officer. In April 2014 a Senior Practitioner from HMP Prison Parc attended a team meeting to discuss arrangements for Reviewing LAC & Pathway Plans for Young People whilst on remand and detained in prison.

16. IRO's attend the quarterly "All Wales IRO days" on a rota basis. The information is then reported back and shared within the IRO Service.
17. In October 2013, as part of the quality assurance role, the Manager of the service introduced a new IRO monitoring form to enable the service to monitor quality and standards within Safeguarding services. Despite an initial poor return of these forms, there have been a number of emerging general themes which has been highlighted below.
18. The IRO Service also introduced a new "Feedback Form" aimed at seeking views and comments from Social Work colleagues on the services that are provided by IRO's. To date responses have been generally poor but those forms that have been returned were all positive in terms of the standards of work provided.

#### **REVIEWING ACTIVITY:**

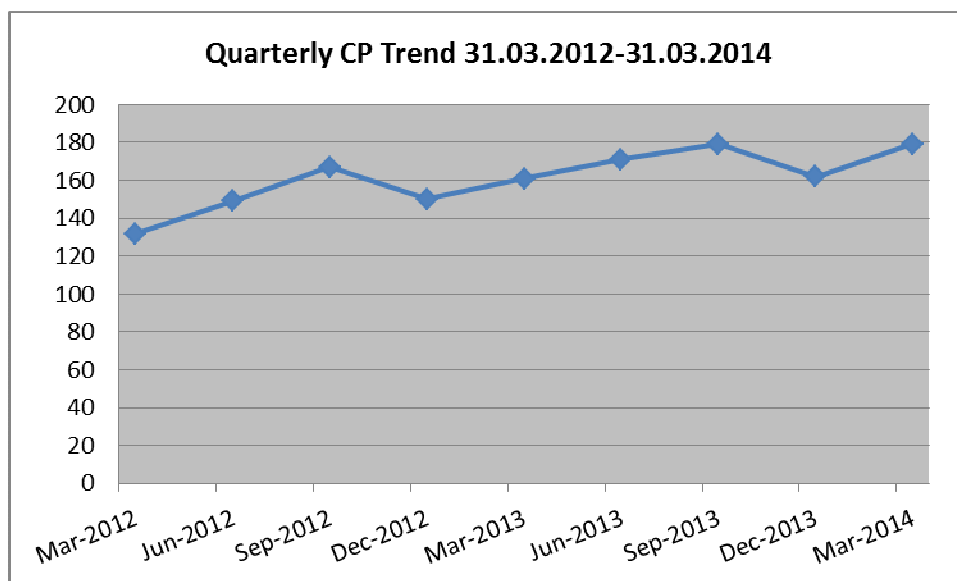
19. As mentioned above, the number of Looked After Children increased to 412 on the 31<sup>st</sup> of March 2014. These figures have followed a steady increase over recent years (see chart below) with a significant increase between January and March 2014. This was influenced by a number of large sibling groups over becoming accommodated during this period, including one sibling group of six.



| Qtr Ending | No of LAC |
|------------|-----------|
| Mar-2012   | 346       |
| Jun-2012   | 352       |
| Sep-2012   | 367       |
| Dec-2012   | 377       |
| Mar-2013   | 387       |
| Jun-2013   | 387       |
| Sep-2013   | 381       |
| Dec-2013   | 379       |
| Mar-2014   | 412       |

| Apr                        | May | Jun | Jul | Aug | Sep | Oct | Nov  | Dec  |
|----------------------------|-----|-----|-----|-----|-----|-----|------|------|
| Lac Rev Due 106            | 110 | 76  | 82  | 71  | 108 | 102 | 96   | 72   |
| LAC Rev. in compliance 103 | 105 | 70  | 81  | 67  | 105 | 98  | 96   | 72   |
| % compliance 97%           | 95% | 92% | 99% | 94% | 97% | 96% | 100% | 100% |

20. As with Looked After Children, the number of children subject to child protection (cp) plans has seen a steady increase over the last few years. Our quarterly figures show a slight drop in numbers from September to December 2013, but the numbers have further increased during the first three months of 2014.



| Qtr Ending | No of CP |
|------------|----------|
| Mar-2012   | 132      |
| Jun-2012   | 149      |
| Sep-2012   | 167      |
| Dec-2012   | 150      |
| Mar-2013   | 161      |
| Jun-2013   | 171      |
| Sep-2013   | 179      |
| Dec-2013   | 162      |
| Mar-2014   | 179      |

| Apr                       | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
|---------------------------|-----|-----|-----|-----|-----|-----|-----|-----|
| CP Conference Due 88      | 51  | 69  | 96  | 53  | 72  | 72  | 49  | 77  |
| CP Conf. in Compliance 80 | 48  | 56  | 89  | 45  | 71  | 63  | 48  | 74  |
| % Compliance 91%          | 94% | 81% | 93% | 85% | 99% | 88% | 98% | 96% |

### Pathway reviews

21. In addition to the above activity, the IRO service also chair and monitor the Pathway Plans for young people aged 16+. Young people between the ages 16-18 years old are subject to both a Care Plan and a Pathway Plan and are subject to regular reviews. At the 31<sup>st</sup> of March 2013, there were 64 children within this cohort. "Relevant" and "former relevant Young People" aged 18+ will be subject to Pathway Plans and regular six monthly reviews until they reach 21 years of age or in certain cases (Higher Education) until they reach 24 years old. Approximately 150 Pathway Reviews taking place each year.

## Qualitative Information

22. Information has been taken from Team Meetings, Supervision with the IRO's and IRO monitoring form. The Monitoring Form was introduced into the IRO service in October 2013. Despite a poor response rate, there appears to be emerging general themes.

### General Themes:

23. The IRO service is not reaching as many children and young people as it would like, through consultation around the care planning process. Not all children and young people are attending their Reviews which is impacting on the IRO's ability to meet directly with children prior to their reviews being held. Consequently we wish to improve the rate that children and young people who are involved in their care planning.
24. IRO's continue to express concerns about the Pathway Planning Process with Plans often these are not place and of often the quality of them needs improving.
25. Delay with cases being transferred between Social Work teams and Just Ask+ is a common theme which has resulted in certain cases being held within safeguarding teams for too long.
26. Due to an above average turnover of front line Social Workers within safeguarding teams during the past year and with the appointment of a significant number of newly qualified practitioners, this has placed additional pressure on IRO's who are providing additional support and mentoring to new staff, particularly around the care planning processes.
27. The standard of social work reports for case conferences is reported as inconsistent with some being very good, including good assessment and analysis, but others being not so good with little analysis and in some times an absence of an updated care plan. Due to competing work pressures on social workers some reports are received late by the IRO and in some cases have been received on the day of conference itself. The fact that on occasions reports are not being presented until the day of conference can result in families not being provided with the opportunity to fully digest the information provided prior to conference.
28. IRO experience of Health plans for Looked After Children indicates the Health assessments are of good quality.

29. IRO's have reported that PEP's are inconsistent and not always completed in a timely way.

### **Case Dispute Resolution**

30. Since July 2013 to March 2014, 12 cases have been initiated under the Internal Protocol Resolution process. All but one case are now closed having reached satisfactory resolution at the informal stage. These cases included concerns raised by IRO's about;
- Slow progress being made with Care Planning.
  - IRO's disagreement with the Care Plan.
  - IRO concern with progress being made within Pathway Planning.
31. In 3 cases, discussions were held and the matter resolved with the case being transferred to the Adoption and Permanency Team.
32. In 2 cases, discussions took place and timeframe put in place for the cases to proceed to reach a permanency outcome of Special Guardianship and discharge of the Care Order.
33. In 6 cases the matter was resolved at the informal stage and a plan of action put in place to ensure effective care planning was being achieved and the case progressing.
34. In 1 case, the matter is ongoing under the IRO Resolution Process at stage one.

### **Challenges**

35. The IRO service has faced a number of challenges over the last year; **Increase in LAC and CP population:** This has led to high caseloads and increased demands to ensure the CP Conferences and Reviews are held within compliance.
36. **The re-structure of Safeguarding Children Services:** in July 2013 had a significant impact upon the Independent Reviewing Service as a result of a number of cases transferring between the new safeguarding teams. As a consequence of this there were high numbers of cancellations and re-arrangements of LAC Reviews and Case Conferences arising out of unavailability of the newly allocated social worker at the point of case transfer. However, caseloads have now settled down and the process of Reviews is running smoothly with less re-arrangements being requested.

37. **Quality of Reports:** There continues to be a higher turnover of staff within the Safeguarding Teams which impacts upon the work of the IRO, in terms of standards of reports and information analysed. As stated above there are occasions when the IRO service is receiving reports on the day of conference and sometimes within an hour of the meeting taking place. Whilst this is a concern in itself, more importantly it impact on the ability of families to receive the reports with enough time to read and digest the information. It is good practice for the reports to be shared with families days prior to the conference being held.
38. **Staff morale:** within the IRO service was very low in June/July 2013 following the Job Evaluation decision to reduce salary scales. Despite regulations advising the IRO should be of a level of experience in line with that of a Team Manager, their salary has reduced. As a consequence, two experienced IRO's have left the Service and a third person has recently secured IRO employment in Newport.
39. **Caseloads:** IRO caseloads continue to remain at an unacceptable high level (see above). High caseloads and lateness of reports have impacted upon the IRO's time, compromising their role and responsibilities. For example, IRO's have said they are not able to meet with every child and young person prior to the Review and are often challenged in their ability to robustly track cases in between Reviews.
40. **Timely write ups of minutes of LAC Reviews:** have been a particular issue for IRO's to complete as a result of the increased work pressures arising out of higher caseloads. Some IRO's have had a backlog with their LAC Review minutes. However, this is monitored on a monthly basis and individual action plans are put in place to address the delay. Despite the increased pressure upon the service, priority has been to work towards ensuring all reviews and Case Conferences take place within regulatory timescales.
41. **ICT System:** The current ICT systems and processes prevent the Independent Reviewing Service from running a more efficient service. Discussions are continuing to address these difficulties.
42. **Capturing the Voice of the Child:** The Introduction of the "Monitoring Form" in September 2013 has highlighted the need for greater improvement in consultation and engagement with children and young people in order to capture the voice of the child within the care planning process. The IRO's have also acknowledged the increase in caseload challenges their ability to meet their obligations in this area of their work and efforts are being made to address this need.



43. **Efficiency:** The increase in the LAC and CPR population has put greater pressure upon the Independent Reviewing Service in meeting our compliance and quality assurance obligations. This increase in workload has also put pressure upon Business Support and their capacity levels in meeting demands. Difficulties presented with the current postal system have created delays with Invites and Consultation Documents being sent out in time for the Reviews. Consequently, Case Conference Reports and LAC Review documentation are often not being received prior to the meeting which places increased pressure upon the IRO. The IRO service is exploring options to ensure this area of the service becomes more efficient and effective. However, it is hoped this system will be improved with the introduction of the new mailing system.
44. **Resources:** As a result of the Increase in the number of Initial and Review Case conferences there has been pressure to identify appropriate conference accommodation. The lack of available rooms and the unavailability of other professionals have placed further challenges in ensuring the timescales are being met as required.
45. **Pathway Planning:** The IRO's have continued to express concern over the general quality of the Pathway Planning process. Matters have been discussed within the Department and further discussions are to be arranged to move this forward.
46. **Internal processes:** There have been a number of instances where by Social Work staff have not followed agreed processes which then impacts upon the IRO service. For example, the IRO service has 15 days in which to arrange a child protection conference following the strategy meeting which initiates section 47 enquiries. Due to the lateness in receiving these notifications this has placed increased pressure upon the service to ensure the Conference take place within compliance. Consequently, there have been a few examples where conferences have been held out of timescales. The IRO service is working with Safeguarding teams and Business Support to address this issue. Not withstand these small number of occasions during 2013/14 96.6% of all Lac reviews were completed within statutory timescales and 99.2% of all review case conferences were held within statutory timescales.

#### **IRO Service Priorities 2014-15**

47. Reduce IRO Caseloads in line with the recommended caseload numbers. Increase the number of IRO's to enable effective scrutiny of the care planning process. Tracking cases between Reviews to prevent drift.

48. The IRO service to work with Team Managers and Training Department to ensure staff are fully aware of the role of the IRO and their legal responsibilities in Care Planning for Children on the Child Protection Register and for Children who are Looked After.
49. The IRO service to build upon their knowledge and understanding around their increased legal responsibilities under the revised PLO as provided through recent training events.
50. To build closer links between the IRO service, Advocacy and Cafcass.
51. Stabilise the Independent Reviewing Service following the changes in staffing and salary scale.
52. The IRO Service to continue to work with Team Managers to ensure social work reports are signed off and received three days prior to the Review/ Case Conference as stated within the regulations.
53. The IRO service to engage more with the Training Department .to ensure newly qualified Social Workers understand the role and function of the Care Planning process and the role of the IRO within that function.
54. The IRO service to plan a training day with the Just Ask+ service to work towards improving Pathway planning by revisiting existing processes and the legal requirements placed upon both services.
55. The IRO service to work with Just Ask + and ICT with a view to producing a more effective Care/Pathway Planning Review and LAC/Pathway Plan documents.
56. To work towards improving the current ICS templates with a view to the separation of the Reviewing documents which will improve efficiency in the distribution of the minutes.
57. To work towards Improved consultation with children and young people and explore ways to capture the voice of the child within the care planning process.
58. Improve processes to promote improved consultation and engagement with children, young people and families.
59. Extending the IRO Feedback form to include Children, families and other professionals.

60. To improve efficiency with distribution of Invites, minutes and consultation documents within the IRO service.
61. Continue to monitor and improve processes within the Safeguarding Teams to ensure Reviews and Case Conferences are held within compliance.

**Independent Reviewing Service Action Plan 2014-15.**

| <b><u>Priority</u></b>   | <b><u>Action to Support</u></b>  | <b><u>By When</u></b>       |
|--|--|-----------------------------|
| Improve scrutiny and monitoring of care planning outside of Review Meetings.           | Address high Caseloads<br><br>IRO to receive Reports 3 days prior to CP Conference and LAC Reviews.  | <b><u>April onwards</u></b> |
| Improve consultation and attendance by children and young people at their LAC Reviews. | IRO's to encourage children and young people to attend and participate in their Reviews and Care Planning.<br><br>IRO's to ensure children and young people's wishes and feelings are heard and recorded throughout the care planning process.<br><br>IRO to work towards a service user friendly consultation document and to explore more effective methods of engaging with children and young people | <b><u>April onwards</u></b> |
| Monitor that PEP's and Health plans are progressed.                                    | IRO's to improve rigour and scrutiny.  | <b><u>April onwards</u></b> |
| Improve internal links to impact on improving care planning.                           | Improve links to:<br>consultation,<br>Safeguarding Team,<br>LACE, Just Ask, Cafcass,<br>Advocacy Service, LAC<br>Health Visitors, CAMHS.   | <b><u>April onwards</u></b> |

|  |   |                             |
|--|---|-----------------------------|
|  | <p>Mentoring/coaching newly qualified social workers on the expectations of the IRO Service.</p> <p>Discussions and Consideration to be given to explore the possible introduction an “Outcome Template” within 5 days of the LAC Review.</p>   |                             |
| <p>Improve scrutiny within the Children’s Directorate</p> <p>Develop a two way information sharing process with Western Bay Safeguarding Board</p> | <p>Regular quarterly meetings between the IRO service and the Head of Safeguarding.</p>   | <b><u>June onwards</u></b>  |
| <p>To improve care planning for all children supported within Safeguarding Services</p>  | <p>Address IRO high caseloads</p> <p>Better links with mentoring role to newly qualified social work staff to provide advice and support.</p> <p>Regular Audits of children’s files.</p> <p>The IRO service are working to ensure reports are received three days prior to the conference (as stated within regulations) which will enable IRO’s and Social Work staff to discuss any contentious issues before the day conference.</p> <p>Develop mentoring links with Safeguarding and Just Ask + Teams</p> | <b><u>April onwards</u></b> |
| <p>Improve feedback and consultation with service users and other</p>  | <p>Extend the feedback form to other professionals and families at Case</p>   | <b><u>April onwards</u></b> |

|  |  |                             |
|--|--|-----------------------------|
| professionals  | Conference.<br><br>Improve the consultation document for children and young people, carers and families.   |                             |
| Improve internal processes to ensure systems and processes are running robustly.   | Meet with Team Managers, Group Managers and Business Support colleagues to address the weakness in the internal process.                             | <b><u>April onwards</u></b> |
| To develop more effective ICT support services. To assist in developing a more efficient IRO service with tackling delay in the distribution of minutes. | To work to separate the Social Work report from that of the Independent Reviewing Officer.<br><br>To work to merge the LAC/Pathway Review documents. | <b><u>April onwards</u></b> |

**Jaci Morgan**  
**Independent Reviewing Service Manager**

**4<sup>th</sup> April 2014**

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## BRIDGEND COUNTY BOROUGH COUNCIL

### CORPORATE PARENTING CABINET COMMITTEE

7 JULY 2014

#### REPORT OF THE HEAD OF SAFEGUARDING & FAMILY SUPPORT

#### INFORMAL FORWARD WORK PROGRAMME – JULY 2014 TO OCTOBER 2014

#### 1. Purpose of Report

- 1.1 To seek approval for the proposed Informal Forward Work programme covering the period from July 2014 to October 2014.

#### 2. Connection to Corporate Improvement Plan / Other Corporate Priorities

- 2.1 The report links to the following Corporate Priorities:
- Working together to raise ambitions and drive up educational achievement.
  - Working with children and families to tackle problems early.
  - Working together to help vulnerable people to stay independent.
  - Working together to tackle health issues and encourage healthy lifestyles.

#### 3. Background

- 3.1 The Cabinet Committee manages its business through the Formal and Informal Forward Work Programmes agreed regularly throughout the year.

#### 4. Current Situation

- 4.1 Appendix 1 details the reports which are being proposed for inclusion in future Corporate parenting Committees.

#### 5. Effect upon Policy Framework and Procedure Rules

- 5.1 None.

#### 6. Equality Impact Assessment

- 6.1 There are no equality implications.

## 7. **Financial Implications**

7.1 None.

## 8. **Recommendations**

8.1 It is recommended that the Committee approves the Informal Forward Work Programme as appended to the report and consider whether it wishes to propose any other items for inclusion.

### **Contact Officer**

Colin Turner  
Head of Safeguarding and Family Support

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**Postal Address:** Sunnyside, Bridgend, CF31 4AR

### **Background Documents**

Appendix 1



**CABINET COMMITTEE –CORPORATE PARENTING INFORMAL FORWARD WORK PROGRAMME**

| Item | Title of Report  | Corporate Consultees | Date of Meeting | Contact Officer  |
|------|--|----------------------|-----------------|--|
| (a)  | (b)  | (c)                  | (d)             | (e)  |
| 1.   | <b>Independent Reviewing Service – Annual Report 2013/14</b> |                      | 7 July 2014     | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |
| 2.   | <b>ACRF – Head of Service Report</b>                         |                      | 7 July 2014     | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |
| 3.   | <b>Informal Forward Work Programme</b>                       |                      | 7 July 2014     | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |
| 4.   | <b>Placements and Permanency Strategy</b>                    |                      | 7 July 2014     | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |
| 5.   | <b>Number of LAC Accessing Sport, Play and Leisure</b>       |                      | October 2014    | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |
| 6.   | <b>Dylan's Story</b>   |                      | October 2014    | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |

| Item | Title of Report   | Corporate Consultees | Date of Meeting | Contact Officer  |
|------|---|----------------------|-----------------|--|
| 7.   | <b>Health Provision for Looked After Children (Abertawe Bro Morgannwg University Health Board)</b>  |                      | October 2014    | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |
| 8.   | <b>Inspection of: Safeguarding and Care Planning of Looked After Children and Care Leavers, who exhibit 'vulnerable or risky behaviours.</b><br><br><b>Inspection 10 – 13 February 2014</b> |                      | October 2014    | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |
| 9.   | <b>LAC Awards</b>   |                      | October 2014    | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |
| 10.  | <b>Informal Forward Work Programme</b>  |                      | October 2014    | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |
| 11.  | <b>Independent Reviewing Service – Annual Report 2014/15</b>  |                      | July 2015       | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |
| 12.  | <b>ACRF – Head of Service Report</b>  |                      | July 2015       | <b>Colin Turner</b><br>Head of Safeguarding & Family Support<br>Telephone: 01656 642314<br>Email: <a href="mailto:colin.turner@bridgend.gov.uk">colin.turner@bridgend.gov.uk</a> |