



inspection report

INSPECTION OF CHILDREN'S SERVICES

TORBAY COUNCIL

January 2005

COMMISSION FOR SOCIAL CARE INSPECTION

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- Publish the 'star ratings' for council social services
- Register and inspect services against national standards
- Host the Children's Rights Director role.

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TORBAY COUNCIL

January 2005

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Summary

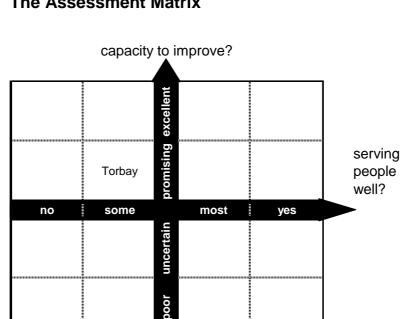
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- **1.1** This inspection of Children and Families Services took place between 10 and 21 January 2005 as part of a national programme of local inspections and was carried out by two inspectors.
- **1.2** Initial feedback was provided on 10 February to the Executive Member for Children's Services, the Chief Executive, Head of Children's Inclusion and the Assistant Director Children's Services.
- **1.3** The purpose of the inspection was to evaluate the safety, effectiveness and quality of council services for children and families and their capacity to improve. In particular the inspection focused on those services that were provided to children who were looked after, care leavers, and family support and child protection services.
- **1.4** During the Inspection the self audit undertaken by all councils in relation to Lord Laming's Report following the Victoria Climbié Inquiry was assessed. A separate letter was sent to the Chief Executive following the inspection confirming our findings and the completed assessment template is included at appendix E.

Overall Assessment

- **1.5** The last inspection of children's services took place in Torbay in July 2001, and its conclusion was that Torbay met the needs of some of its children and families well and that it had uncertain prospects for improvement.
- **1.6** Since 2001, 11 of the 19 recommendations from the last children's inspection report had been met fully, two had been met in part and six had not been met.
- **1.7** In 2003 children's social services had gone through a significant organisational change partly as a result of the recommendations of the 2001 inspection. The impact of this change had not been formally reviewed, however it was clear that some improvement in the continuity of response had been achieved by bringing together two referral and assessment teams together on one site in Torquay. Similarly, a functional split of fieldwork teams into intake and long term family support teams separate to dedicated teams for children looked after and care leavers and a separate provider function had to some extent improved effectiveness.

- **1.8** The council had entered a further period of change and development. Children's social care and education services were at the threshold of becoming an integrated Children's Services Directorate and had a target date to do so formally by April 2005. From September 2005 onward the council and its partners had the objective of consolidating and developing children's services within a Children's Trust in line with government policy intentions and guidance.
- **1.9** Progress since the 2001 inspection had been slow, this was partly a result of insufficient commitment from all of the partners within the Children and Young Peoples Strategic Partnership (CYPSP). This had led to a slow and inconsistent implementation of the children's preventative strategy. The Department had also struggled with the recruitment and retention of qualified social work staff, which had a significant impact on the effectiveness and quality of the service provided. Despite best value analysis carried out on the children looked after population, numbers of children looked after had not significantly reduced and costs of care were high. Similarly we were told that much of management attention had been focused on the implementation of the service reorganisation in 2003.
- **1.10** Nonetheless there was some evidence that improvements had occurred since the 2001 inspection. There was evidence of improvement in some performance indicator areas, with a better focus on performance management and scrutiny. There were some examples of good practice as well as evidence of some effective partnership working. We were able to see some successfully implemented policies as well as some considered proposals for change. There was strong political commitment toward children's services and a number of experienced senior managers had been appointed to provide leadership and momentum to the development of the new integrated children's service.
- **1.11** Our overall judgement was that Torbay children's services continued to serve some people well and that there was enough evidence for us to judge the capacity for improvement as promising. This is shown in the inspection performance matrix overleaf.



National Priorities and Strategic Objectives

- 1.12 Torbay had integrated children's planning within an overarching community plan. The Children and Young Peoples Strategic Partnership (CYPSP) was, during the course of 2005, to act as a shadow Children's Trust Board and would be chaired by the Chief Executive of Children's Services (designate). It was planned that beyond September 2005 greater integration of council services with health, the voluntary and independent sectors would occur up to and including the formation of a Children's Trust, either as a corporate or virtual body.
- 1.13 Some effective joint planning and developmental work through the CYPSP had occurred, e.g. Children's Fund and Information Sharing and Support (ISA) developments.
- **1.14** There was close attention to the performance indicators relating to national objectives for social services and general improvements had occurred in a number of these.
- 1.15 Although full Victoria Climbié Inquiry audit compliance was claimed in the last Delivery and Improvement Statement (DIS), the inspection found a number of unreported weaknesses in practice.
- 1.16 The council had developed a number of individually successful consultation events with children although less so with parents. A clearly planned cross-departmental participation strategy was needed to inform strategic development and service delivery.

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The Assessment Matrix

Effectiveness of Service Delivery and Outcomes

- **1.17** There was a mixed response from service users whom we surveyed and interviewed in regard to the accessibility and responsiveness of social workers. Service users were, however, generally positive and appreciative of family centre and residential care staff and services provided. Similarly, children and parents very positively regarded the Family Group Conference service.
- **1.18** The numbers of children looked after had not significantly reduced over the past three years. In-house foster placement choice was limited particularly for young people and sibling groups. We found that a convincing and thorough placement strategy was required to improve this situation.
- **1.19** Services for care leavers were judged to be generally comprehensive and effective.
- **1.20** Multi agency information sharing guidance was well drafted and a phased training and implementation plan along with a comprehensive website and service directory was due to be rolled out during 2005.
- **1.21** There was no policy or procedure in relation to the 1991 Private Fostering regulations. Most staff were unaware of any current private fostering arrangements. This was a serious omission and required urgent attention with focused management oversight.

Quality of Services for Users and Carers

- **1.22** The council had experienced consistent difficulty in the recruitment of qualified staff which had led to 25 per cent of children looked after being allocated to unqualified staff or managers for periods between 40 and 552 days in the past two years. In the past year 33 cases had been unallocated for periods in excess of 40 days in the intake and family intervention teams.
- **1.23** There were significant and often considerable delays in meeting initial and core assessment timescales. The quality of assessments examined was variable and the element of analysis was often under-developed.
- **1.24** We found an insufficient understanding of child protection procedures within a number of teams. Capacity problems at service manager level had led to uncertain child protection practice in the intake teams which required urgent review.
- **1.25** The flow of casework responsibility between intake and other teams had been affected by capacity problems and also by the arrangements for

initial and core assessments, which caused unnecessary disruption for service users and also required review.

- **1.26** We found that Independent Reviewing Officers (IROs) had provided much needed continuity and effective quality monitoring for children looked after. Reviews of children looked after were 100 per cent on time. However IROs were overstretched and required additional capacity to extend their quality assurance role.
- **1.27** All child protection casework was allocated and timescale compliance for child protection reviews had significantly improved, from very poor performance in the period 2002-03, to achieve 100 percent of reviews within timescale.

Fair Access

- **1.28** The council had launched an Equality and Inclusion policy in November 2004 and aimed to meet Level Two of the Equality Standard for Local Government by September 2005. The council was at an early stage of development in mapping and engaging the diverse black and minority ethnic communities within Torbay in strategic and service delivery issues.
- **1.29** Access points for children's services were not fully compliant with the Disability Discrimination Act and no indicative timescale for compliance had been given at the time of the inspection.
- **1.30** Some parent/carers of disabled children and young people were highly critical of the extent and range of services provided as well the arrangements for coordination between council departments and other key agencies. Eligibility for services were not publicised and thresholds for service delivery were set high and required review. There was also no publicised advocacy service for children and young people with a disability.
- **1.31** More positively, 14 young disabled people and parent/carers were in receipt of Direct Payments. A multi-agency transitions policy was in place for young people with a disability, although it required significant continuing development.
- **1.32** There was little evidence on files that information on the complaints procedure or file access information had been given to service users and there were no systems in place to monitor compliance. Children's social services were not learning sufficiently from complaints and service user feedback.

Cost and Efficiency

- **1.33** The council was in the first year of its medium term financial plan and was judged by the Audit Commission in 2004 to have improving financial control mechanisms. Arrangements for financial accountability were clear. Regular budget monitoring was established, with a particular focus on monitoring arrangements for out of authority and independent fostering agency placements.
- **1.34** The budget setting process was unclear, and was not properly based on an accurate evaluation of need or priority in the medium term. For example, a clear and detailed accommodation strategy was required that properly brought together the interrelated elements of:
 - adoption;
 - fostering;
 - kinship care;
 - the Broadhaven residential unit; and
 - the external commissioning budget.

The strategy also needed to address how preventive expenditure could be used to reduce the demand for accommodation.

1.35 We were given assurances that overall cuts in the council budget in 2005-06 would have minimal impact on the delivery of children's services. However we were also told by councillors and senior managers that the council aimed to reduce social care expenditure to Formula Spending Share (FSS) levels within two years. We were unable to see how this could be achieved without a major impact on service delivery.

Management and Resources

- **1.36** Councillors had a clear vision of how they wanted to see services for children develop and were well informed. Scrutiny arrangements were in place and working well.
- **1.37** An outline assessment of the risks involved in the organisational separation of the Social Services Department, and the creation of an integrated children's service had been completed. Project teams had been established to further examine the detailed implementation issues.
- **1.38** Recruitment of qualified social workers remained a key problem area, and senior management were unable to provide us with a clear management strategy to allocate all children looked after to qualified a social workers.

- **1.39** The department's current service user database had, despite technical weaknesses, yielded useful performance management information. A new service user database PARIS had been purchased and would take operational effect from August 2005. From the autumn of 2006, PARIS was likely to provide significantly enhanced management information capacity, as well as the ability to meet forthcoming Information Support and Assessment (ISA) requirements.
- **1.40** Regular supervision was in place, although there was limited evidence of managers reading files and signing off assessments or plans, though evidence of managerial oversight was more apparent in regard of children looked after. Similarly, file audit and developing a robust quality assurance programme required systematic development.
- **1.41** A range of procedures and policies had been developed and were available to staff on the intranet. There were plans to update these in line with new Children Act 2004 guidance and regulation.
- **1.42** Managers were generally seen as supportive, if at times overwhelmed. Senior management was seen as approachable and in touch with front line issues.

Reading the Remainder of this Report

- **1.43** This report is set out in a way to enable the reader to have an understanding about every aspect of the inspection:
 - Chapter 1 is a summary of the key themes which have emerged from the inspection;
 - Chapter 2 provides a list of the recommendations we have made;
 - Chapter 3 sets out the context in which social services is operating;
 - Chapter 4 and each subsequent chapter detail the evidence, which led us to our conclusions and recommendations.
- **1.44** Further details on background to this inspection and the methodology used can be found in appendices A-D which include:
 - Appendix A standards and criteria;
 - Appendix B inspection background method and activity;
 - Appendix C questionnaire results;
 - Appendix D structure charts; and
 - Appendix E Victoria Climbié evaluation.

Recommendations

2

National Priorities and Strategic Objectives

- **2.1** Senior managers and councillors should ensure that there is sufficient planning and development capacity to ensure operational managers are not diverted from key operational tasks. (4.17)
- **2.2** Senior managers and councillors should ensure that joint commissioning is properly developed with the necessary capacity and expertise to support it. (4.16)
- **2.3** Senior managers should conclude the work started on the consultation and completion of a detailed children's services integration plan by September 2005. (4.3)
- **2.4** Senior managers and councillors should develop a clearly planned and structured cross-departmental/agency participation strategy for children and families. (4.18 and 4.23)
- **2.5** The Area Child Protection Committee/Local Children's Safeguarding Board should develop a clear sense of purpose and direction over joint accountability. (4.7)
- **2.6** Senior managers should swiftly address the unreported weaknesses in safeguarding compliance identified in the inspection findings of the 2004 Victoria Climbié Audit return. (4.6 and Appendix E)

Effectiveness of Service Delivery and Outcomes

- 2.7 Senior managers should consider extending the capacity of the Family Group conference service as a means of diverting more children from care. (5.18)
- **2.8** Senior managers should quickly resolve the lack of capacity for the independent chairing of child protection conferences and enable the child protection operations manager to assist the LCSB. (5.46)
- **2.9** Senior managers should ensure that statutory requirements are met and the necessary resources provided in relation to the 1999 Private Fostering regulations and the related amendments to the Children Act 2004. (5.40)

Quality of Services for Users and Carers

- **2.10** Senior managers should ensure that the current issue of capacity and uncertainty around the front line management of the intake teams is quickly resolved. (6.14)
- **2.11** Senior managers should ensure that there is consistent adherence to child protection procedures across all teams. (6.19)
- **2.12** Senior managers should ensure that the quality of assessment is improved within the Department and that the new Common Assessment Framework is properly implemented across all agencies. (6.23)
- **2.13** Senior managers should review and develop the current arrangements for the completion of core assessments and case flow to ensure that unnecessary disruption for service users is avoided. (6.15)
- **2.14** Senior managers should ensure that initial and core assessment timescale performance is significantly improved. (6.10)
- **2.15** Senior managers should review the current capacity and quality assurance role of the Independent Reviewing Service given the current volume of children looked after. (6.25)
- **2.16** Senior managers should ensure that a review takes place of business processes for family support cases across fieldwork and provider teams. (6.34 and 6.35)
- **2.17** Senior managers should ensure that a full range of information leaflets are available at all public access points. (6.1)

Fair Access

- 2.18 The council should ensure that its plan to reach level two of the Local Government Race Equality Standards is completed by September 2005. (7.16)
- **2.19** The council should ensure that signposting in ethnic minority languages is provided on children's services posters and leaflets at public information access points and on its website. (7.20)
- **2.20** The council and partner agencies should urgently review the currently high thresholds for services for children and young people with disabilities, as well as current coordination of service delivery. (7.7 and 7.12)

- **2.21** Senior managers should ensure that there is proper consultation and a clear written public strategy for the development of short break care for disabled children and young people. (7.15)
- **2.22** Senior managers and councillors should ensure that a publicised advocacy service is provided for children and young people with disabilities. (7.14 and 7.15)
- **2.23** Senior managers and councillors should ensure that there is regular scrutiny and analysis of complaints and comments from service users as well as an annual report. (7.22 and 7.23)
- **2.24** Senior managers and councillors should ensure that there is sufficient capacity to meet complaints, file access and freedom of information regulatory requirements. (7.23 and 7.24)

Cost and Efficiency

- **2.25** Senior managers and councillors should ensure that the budget setting process is based on an accurate evaluation of need and priority. (8.9)
- **2.26** Senior managers should quickly ensure that a clear and detailed medium term placement strategy is produced that addresses current resources, future needs and budgetary requirements.(8.10 and 8.11)
- **2.27** Senior managers should develop a clear understanding of unit and activity costs in regard to the value for money of family support and safeguarding services. (8.21)

Management and Resources

- **2.28** Senior managers should ensure that all children looked after are allocated to qualified social work staff. (9.19)
- **2.29** Senior managers should review how current organisational capacity and human resource strategy can eliminate the current volume of unallocated work in the short and medium term. (9.20)
- **2.30** Senior managers should address the relationship and case ownership protocols between the Permanency Planning Teams and the Care to Community Team. (9.22)
- **2.31** Senior managers should ensure that regular file audit and robust quality assurance systems are put in place. (9.12)
- **2.32** Senior managers should further consolidate service planning at business unit, team and individual appraisal levels. (9.10)

2.33 Senior managers should develop improved local performance management information and comparative benchmarking. (9.28)

Council Profile

3

Local Context

- **3.1** Torbay became a unitary council in 1998, when the council took responsibility for a number of services to children, in particular Social Services and Education. The council is on the south Devon coast and has an area of 64 square kilometres with 35 kilometres of coastline. Torbay is effectively the three towns of Torquay, Paignton and Brixham. Torbay's urban settlements are set around an attractive bay, which continues to provide a popular tourist destination. Each town has its own characteristics, with Brixham continuing to be one of England's major fishing ports.
- **3.2** Torbay has a population of just over 131,000 distributed across the three towns. During the summer holiday season the population increases by approximately 50,000. The proportion of the population over pension age is 25.8 per cent. Only 1.2 per cent of Torbay's population was of an ethnic minority compared to an ethnic minority population of 9.1 per cent of the total population for England.
- **3.3** The economy of Torbay is dominated by the service sector, there are relatively few jobs paying high wages in the area and there is a significant level of seasonal employment. Torbay's gross domestic product per head is amongst the lowest in the country. Outward migration of young people is an increasing concern for the local economy.
- **3.4** Nationally Torbay was ranked as the 94th most deprived district/unitary authority out of 354 in England, in relation to the most recent index of multiple deprivation information.
- **3.5** The council has been characterised in recent years by large swings in political power. During the 1990s the Liberal Democrats formed the administration. The election in 2000 saw a major swing in power to the Conservatives. In 2003 the Liberal Democrats regained control and the council now comprises: Twenty-five Liberal Democrats, nine Conservatives, one Independent and a vacant council seat. The political structure comprises the leader and an executive group of five councillors, with an overview and scrutiny board covering eight functional scrutiny areas, and a range of reporting committees.

Children Receiving Services

3.6 Torbay provided us with information of children receiving services as at December 2004 which is set out in the following tables.

	Total Number	Number from ethnic minority groups	Number without an allocated social worker	
Children Looked After	222	3	27	
Children receiving family support services	510	5	96	
Children on Child Protection Register	84	4	0	
Total	816	12	123	

Table 1: Children Receiving Services

3.7 Table 2 provides a breakdown of where children looked after were placed.

Placement	Council percentage	Agency percentage
In residential placements	1.8	7.2
In family placements	59.4	8.6
At home with parents	12.6	N/A

Table 2: Percentage of children looked after who are placed

3.8 In addition to those children identified in table 2 there were 18 children who were fostered with friends or relatives.

A comparison of the statistics provided by Torbay showing children receiving services at the time of the 2001 and 2005 children's services inspections is shown in table 3.

and December 2004			
	July 2001	December 2004	
Children Looked After	233	222	
Children receiving family support services	1255	510	
Children on the child protection register	74	84	

Table 3: Comparison of children receiving services in July 2001and December 2004

- **3.9** This table shows clearly that between the inspections the population of children looked after had reduced by only four per cent. Numbers of children on the Child Protection register had risen by 13 per cent. Numbers of children provided with family support services had very significantly decreased by 146 per cent.
- **3.10** Chart 1 contains the latest available comparison of the number of looked after children per 10,000 population aged under 18 years, and showed Torbay had the third highest proportion in its comparator group.

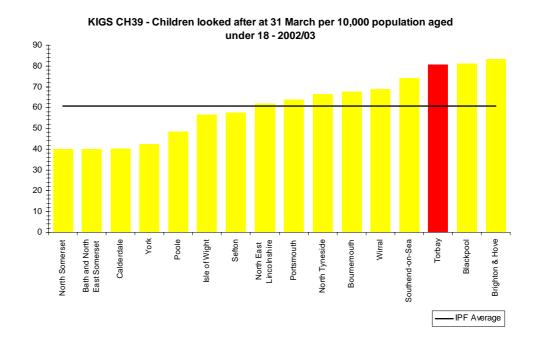


Chart 1

Source: Department of Health Key Indicator Graphical System CH39 (IPF = Institute of Public Finance)

3.11 The number of children on the child protection register was only slightly above the average of its comparator group based on the last available statistics in chart 2.

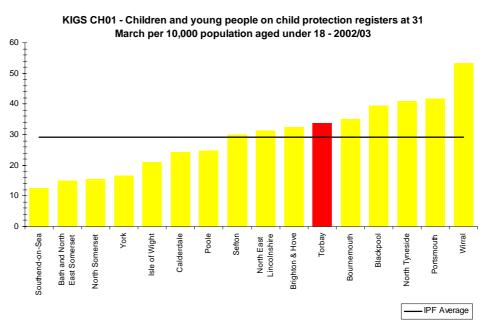


Chart 2

Source: Department of Health Key Indicator Graphical System - CH01 (IPF = Institute of Public Finance)

Budgets

3.12 In general terms there had been an improvement in the children's budget since the last inspection in 2001. This is represented in table 4.

	2001-2	2002-3	2003-4	2004-5
SSD Budget (£m)	26.9	30.1	37.7	42.7
Children's services budget (total) (£m)	8.1	8.9	9.7	11.8
Percentage above (+) or below (-) SSA (FSS) on Children's Services		+93 per cent	+27 per cent	+24 per cent

Table 4: Budget Information

Source: Torbay Council

3.13 Expenditure budgeted for children looked after in proportion to that spent on family support services had increased since the last inspection. At the

time of the last inspection in 2001 family support expenditure accounted for 33 per cent of the children's budget. In 2002-3 it was 27.7 per cent, in the 2003-4 it was 28 per cent and in the current year was 28.8 per cent. In 2002-3 the children's services budget was overspent by approximately £415,000 and in 2003-4 this over spend increased to £1,231,000. These over spends were due to children's placements.

3.14 Chart 3 below provides a comparison of Torbay within its comparator group in relation to the Personal Social Services budget for children and families. Its expenditure level was the fifth highest within the comparator group.

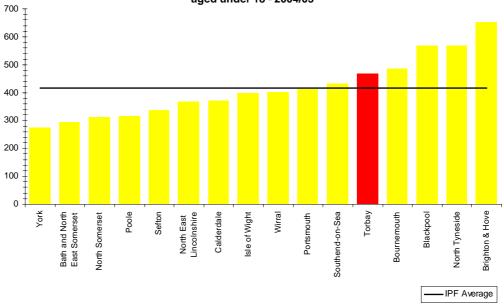


Chart 3

KIGS BU01 - PSS budget allocated to children and families per population aged under 18 - 2004/05

Source: Department of Health Key Indicator Graphical System - BU01 (IPF = Institute of Public Finance)

Management and Organisation

- **3.15** The Chief Executive who had been in post for around 20 months headed the corporate structure. Four strategic directors reported to the Chief Executive and respectively covered community, environment, children and performance.
- **3.16** The Children's Social Care Services were part of the new integrated Children's Directorate that was managed by the Chief Executive (Children's Services). The Director of Learning and Resources and the Director of Social Inclusion reported to the Chief Executive of Children's Services (designate).

- **3.17** Children's social care was managed by the newly appointed Director of Social Inclusion. Social Inclusion Services comprised: children's social work services, youth services, extended school development, early years services, educational welfare and inclusion support.
- **3.18** Children's social care services are currently organised under an Assistant Director. Reporting to the Assistant Director are four operations managers who manage teams covering the following functional areas: Children in Need, Permanency Planning, Accommodation Services, and Children with Disabilities. The following also report to the Assistant Director: Child Protection Unit Operations Manager, Independent Review Manager, and Youth Offending Service Manager
- **3.19** The detailed corporate structure is reproduced at Appendix D and the detailed social services organisational structure at Appendix E.

Staffing

3.20 Compared to the other councils in its family group Torbay had the second highest number of social workers and care managers allocated to children's services. This is shown in chart 4 below.

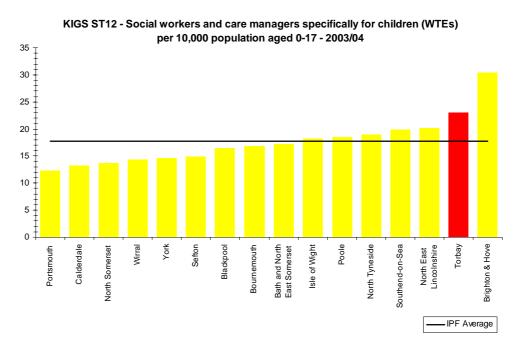


Chart 4

Source: Department of Health Key Indicator Graphical System - ST12 (IPF = Institute of Public Finance)

- **3.21** During August 2003 Torbay conducted a staffing survey, which found that there was a 33 per cent annual staffing turnover amongst children's social workers.
- **3.22** Torbay had continued to use national advertisements for these posts, and had in 2003 recruited a group of social workers from outside England, who had, with the exception of one, left or were about to leave. Torbay had made the decision to fill a number of vacant posts in the Permanency Planning Service with unqualified staff. It was planned over the medium term to support the training and professional qualification of unqualified staff as part of a 'grow our own' policy.
- **3.23** Torbay provided us with the following profile of the staffing position at December 2004, which is reproduced at Table 5.

	Establish- ment	Number of posts covered by staff with an SSD contract	Number qualified	Number from ethnic minority groups	Number of posts covered by agency staff
All Child Care Managers	18	18	17	0	0
Social workers	52	52	42	1	2
Social Work Assistants	17	17	N/A	0	0
Family Placement Staff	7	7	7	0	0
Residential Care Staff	12	12	10	0	0
Day Care/Family Centre staff	25	25	2	1	0
Totals	131	131	78	2	2

Table 5: Staffing Profile

National Priorities and Strategic Objectives

4

STANDARD 1: NATIONAL PRIORITIES AND STRATEGIC OBJECTIVES

The council is working corporately and with other agencies to ensure the delivery of national priorities for social care, the national Personal Social Services objectives and their own local strategic objectives.

This standard looks at:

- social services' response to national objectives;
- inter-agency planning arrangements; and
- consultation with staff, parents and children.

STANDARD 1: National Priorities and strategic Objectives

STRENGTHS	AREAS FOR DEVELOPMENT		
 Children's planning had integrated national objectives and the Torbay community plan. Close scrutiny of national performance indicators and improving performance. There were some useful and effective examples of strategic partnership planning. 	 Voluntary sector involvement required significant development within CYPSP. A sustained improvement needed to be maintained in key national performance indicators, as well as development of local indicators and agreed cross agency performance indicators. 		
 An early and effective start to the integration of education and social care. The development of a number of individually successful consultation events with children. 	• Parents needed to be more continuously involved in the planning of services through the Children's Integrated Services participation strategy.		
RECOMMENDATIONS			

- Senior managers and councillors should ensure that there is sufficient planning and development capacity to ensure operational managers are not diverted from key operational tasks. (4.17)
- Senior managers and councillors should ensure that joint commissioning is properly developed with the necessary capacity and expertise to support it. (4.16)
- Senior managers should conclude the work started on the consultation and completion of a detailed children's services integration plan by September 2005. (4.3)
- Senior managers and councillors should develop a clearly structured cross departmental/agency participation strategy for children and families. (4.18 and 4.23)
- The Area Child Protection Committee/Local Children's Safeguarding Board should develop a clearer sense of purpose and direction over joint accountability. (4.7)
- Senior managers should swiftly address the unreported weaknesses in the safeguarding compliance identified in the inspection findings of the 2004 Victoria Climbié Audit return. (4.6 and Appendix E)

Response to National Priorities

- **4.1** The children's service business plan addressed key national policy objectives for Personal Social Services and performance assessment framework indicators. Social Services had integrated the corporate themes of the overarching Torbay Community Plan within its children's services business plan. The Torbay Community Plan, among other objectives, set out the vision and commitment of the local strategic partnership to develop a Children's Trust.
- **4.2** A Preventative Strategy document had been produced in draft form in 2003. It was largely aspirational and lacked a detailed cross cutting implementation plan. The Preventative Strategy had been mentioned within the 2004-5 Children and Young People Strategic Partnership (CYPSP) plan, and although some individual agency work had been done, there was no visible coordination or progress of the plan. The Preventative strategy was similarly referenced within the Torbay Community Action plan 2004-7, but again there were no timescales set for implementation.
- **4.3** The council had responded well to the Green Paper *Every Child Matters* by commissioning external consultancy to undertake wide consultation, and from this develop an analysis and recommendations on integrating service for children and young people. From this work a multi agency project group reporting to CYPSP had been set up to progress the organisational integration of education and children's social care, and staged development toward a Children's Trust.
- **4.4** The council had successfully put together a project bid for Early Support funding of £200k from the DfES. Torbay's project proposal was based on coordinated service delivery for children with disability arising out of recent government guidance *Together from the Start*.
- **4.5** There had been improving performance against some national indicators, and periodic reporting of performance against was well established at all management levels. Sustained improvement in PAF A3, C18, C20 and C23 was required, as was significant improvement in the compliance timescale for initial and core assessments.
- **4.6** The Area Child Protection Committee (ACPC) had responded appropriately to Lord Laming's report and the Victoria Climbié Audit had been successfully carried out by individual agencies. However, although full compliance was claimed in the Victoria Climbié Inquiry self audit, in the last Delivery Improvement Statement we found several unreported weaknesses in practice. (These are detailed at Appendix E).
- **4.7** The ACPC had achieved a number of important developments in the past three years and usefully linked to the sub regional ACPC partnership. We were however concerned that the ACPC had not formed a sufficiently clear sense of purpose or direction for safeguarding. We found an

insufficiently open dialogue about current weaknesses in the safeguarding system. Similarly the ACPC had much further work to do to develop clarity around a whole systems approach to safeguarding. The ACPC was awaiting government guidance on the governance and accountability arrangements for Local Children's Safeguarding Boards and had done little preparatory thinking on how it could improve effectiveness in this area.

Inter-Agency Planning Arrangements

- **4.8** The Assistant Director of Children's Social Services, who had been in post for approximately two and a half years, chaired the Children and Young Peoples Strategic Partnership (CYPSP). Since the last inspection we were told that Social Services and the Primary Care Trust had been providing leadership and driving developments within the CYPSP.
- **4.9** Overall there had been some productive partnership work, though the commitment and priority given to joint developments from some departments and agencies had been limited or inconsistent. Similarly limited planning and development capacity had reduced progress. This for example, had meant that the Children's Preventative Strategy had not been implemented properly. The role of the Education Service within CYPSP had significantly improved over the past eighteen months, and it had become more engaged strategically, particularly in the area of the educational attainment of children looked after.
- **4.10** There had been some successful partnership developments. The CYPSP had been involved in assessing and mapping the local needs of children and families in establishing the Children's Fund and Sure Start programmes. Torbay had been successful in the development of two Sure Start projects, which part funded a Home Start service in their areas. The Children's Fund partnership had been successfully established and funded a range of preventative and support service to children between 5 and 13 years and their families.
- **4.11** Similarly much good work had been done in developing an implementation programme for the Information Sharing and Assessment programme. Significant progress had also been made in regard to the health and education of children looked after. However, joint commissioning was relatively immature within the CYPSP and required additional capacity and expertise to determine priorities, and complete and take forward detailed implementation.
- **4.12** Voluntary sector involvement required significant development within CYPSP. Voluntary sector representatives welcomed the new integration agenda but were concerned that they had insufficient voice and influence in its development. Their perception was that CYPSP did not fully appreciate the impact the voluntary sector could have in developing a preventative infrastructure. In their view the compact between the council

and themselves was weak, and they were unsure of Torbay's commitment to it. Similarly they expressed the view that the council's communication with them needed to be greatly improved.

- **4.13** A further cause for concern for small voluntary organisations was the system for bidding for Children's Fund and Sure Start developments. In their view, tender specifications were often unclear as were the reasons for the failure of their tenders.
- **4.14** There were several small organisations that were funded through the Children's Fund, as well as many small community organisations operating within Torbay that were not funded. The view was expressed that these groups experienced isolation and needed better communication with the CYPSP. The view expressed to us was that Children's Social Services had retreated from the preventive agenda and were focused mainly on safeguarding.
- **4.15** We concluded that voluntary sector and community organisations were an underdeveloped resource that could be developed much further, to deliver better targeted promotional and targeted preventative support for local children and families.
- **4.16** CYPSP was in transition and during the course of 2005 would change to take on development toward a shadow Trust Board role, and would be chaired by the Chief Executive of Children's Services. At the time of the inspection, the CYPSP received reports from a project team on the integration agenda, and at a lower level a number of agency representatives who wrote plans met at a regular network forum and exchanged information about various planning initiatives. The project team was considering in detail the future role of CYPSP. In our view it needed to become more focused and purposeful and clarify its planning and commissioning arrangements.
- **4.17** We were concerned that sufficient planning and development capacity was found for the considerable workload in developing the integration agenda. In particular, it was very important that operations managers were not diverted from the critical operational developmental tasks recommended elsewhere in the report.

Consultation with Staff, Parents and Children

- **4.18** The council was due to launch a corporate policy on participation and involvement. We were told that the Children's Fund participation project was also doing work on a cross-agency basis in developing a unified policy across agencies.
- **4.19** We met with a group of young people who were part of Teenage Network Torbay (TNT) which was set up to speak for the youth of Torbay. Essentially their view was that they did not feel adequately consulted by

Torbay Council or social services over provision or what they saw as priorities.

- **4.20** There were some notable examples of good practice. Total Respect training had been recently delivered in partnership with care leavers for councillors and managers and had provided some influence on policy, e.g. the recent sleep-over policy for children looked after.
- **4.21** During 2004 a very useful consultation event was held for children looked after which approximately ten per cent of the children looked after population attended. The results of this consultation and the action learning points had been integrated into subsequent service planning.
- **4.22** A local survey had also been done into alcohol consumption by young people in Torbay, which had produced a useful review and action plan.
- **4.23** No continuous participation arrangements with parents existed in relation to the strategic development of service delivery. This was an obvious omission and an area for development.
- **4.24** Social workers who were interviewed, on the whole felt in touch with strategic developments and were generally positive about the move towards an integrated children's service. Some staff expressed concern that they had only recently been organisationally restructured, and that there had been no review or time to consolidate the benefits of that change.
- **4.25** Social workers generally felt that communication needed to improve over the coming months as the process of change towards an integrated service moved forward.

Effectiveness of Service Delivery and Outcomes

5

STANDARD 2: EFFECTIVENESS OF SERVICE DELIVERY AND OUTCOMES

Children and their families receive responsive services which promote children's life chances.

This standard looks at:

- service user satisfaction;
- the range, appropriateness and timeliness of services;
- the protection of children from abuse and neglect;
- effective joint working for individual children; and
- ensuring services are responsive to need.

STANDARD 2: Effectiveness of Service Delivery and Outcomes

STRENGTHS	AREAS FOR DEVELOPMENT				
 Overall the restructure of services in 2003 had achieved some positive effects on service delivery. The work on multi-agency Information Support and Assessment (ISA) guidance and an ISA website and directory during 2005 was a positive development. There were a number of in house and voluntary sector family centre resources that could be accessed during the assessment process. Work on the development of an integrated multi agency children looked after service particularly the impact of the children looked after nurse role. Services for care leavers were generally comprehensive and effective. Service users expressed appreciation of family centre and residential care services. The family group conference service was well established and well regarded by service users. There was an effective independent children's advocacy service in place. There were effective working relationships between the youth offending service and social work teams. 	 In-house placement choice was limited particularly for harder to place young people and sibling placements; a proper needs analysis, and a review of marketing strategy and further resources required was needed. Information sharing with other agencies needed to strictly confined to clear safeguarding situations. Service user satisfaction was mixed over access and responsiveness from social workers. High levels of dissatisfaction were expressed by parents of children with disabilities needed significant development. (see chapter 7). Current ACPC safeguarding policies and procedures needed to be reviewed during 2005 in line with new guidance. There was no Private Fostering policy or procedure. 				
RECOMME	RECOMMENDATIONS				
	• Senior managers should consider extending the capacity of the Family Group Conference Service as a means of diverting more children from care. (5.18)				
	Senior managers should quickly resolve the lack of capacity for the independent chairing of child protection conferences and enable the child protection operations manager to assist the Local Children's Safeguarding Board. (5.46)				

• Senior managers should ensure that statutory requirements are met and the necessary resources provided in relation to the 1999 Private Fostering regulations and the related amendments to the Children Act 2004. (5.40)

Service User Satisfaction

- **5.1** We sent 70 pre-inspection questionnaires to parents using services to children looked after, child protection, family support and services to children with disabilities. We sent 85 pre-fieldwork questionnaires to young people. We received 25 (36 per cent) replies from parents and 27 (32 per cent) from young people. This was around the average response rate nationally. (Analysis of the questionnaire results can be found at Appendix C).
- **5.2** The picture that emerged was a mixed but generally poor one. Of those parents who responded the following themes emerged:
 - only 52 per cent said that social services treated them with respect always or usually;
 - only 56 per cent said they were given written information about decisions reached on their family;
 - only 36 per cent thought they could have access to information held on file about them;
 - only 48 per cent of parents said they received help at the time they needed it; and
 - 56 per cent of parents said that since social services had become involved their circumstances had got worse or stayed the same.
- **5.3** From those young people who responded there was a similarly mixed picture and the following themes emerged:
 - only 36 per cent said they felt they could talk to their social worker;
 - 48 per cent said they didn't know what their care plan was for the future;
 - only 33 per cent said that since social services became involved their life had got better, 30 per cent said it had got worse and 11 per cent said it had stayed the same;
 - only 37 per cent said they knew how to make a complaint and 41 per cent said they didn't.
- **5.4** Many of the comments made by parents in the questionnaires amplified the mixed statistical picture. Some parents had very good experiences of social worker involvement and support and felt trust in them. Others expressed frustration about the inability to get hold of social workers or frequent changes of social workers. Several mentioned having to wait till

situations reached a crisis before social work intervention occurred. There were however a number of positive and balancing comments expressed over the good supportive work being done by family centre staff.

- **5.5** The comments of young people to the questionnaire were also mixed. Some spoke positively of their social worker. More often however respondents expressed feeling let down and angry by continual changes of social worker. For example one young person spoke of five changes in 18 months.
- **5.6** We met a number of young people who were looked after and some care leavers. Their response to us was again mixed; some made positive statements about the care they received from foster carers, the support of their social workers and the way they were consulted at reviews. Conversely, others talked of concerns about having to move between placement for reasons of finance and the continual turnover of social workers. One care leaver spoke with feeling of the experience of having no social worker for a year.
- **5.7** The inspection team read a total of 25 case files that originated from a wide range of teams and varied both in type and complexity. Some families expressed general satisfaction and were appreciative of the support and level of information they were given by their social workers. Other families expressed a range of dissatisfactions some more serious than others. These varied from:
 - not being treated with respect;
 - disagreeing with assessments and care plans without opportunities for redress;
 - social workers failing to communicate properly; and
 - social workers being unavailable and not responding to telephone calls.
- **5.8** During the period of the inspection, we were contacted by a family that were dissatisfied with what they considered to be the lack of care and insensitive handling of their child, who was looked after, and poor communication by the social worker. The case file examination and subsequent liaison with the Operations Manager concerned supported the complaint of the family.
- **5.9** We met a group of seven parents of disabled children and young people who had been encouraged by the council to set up a support group for each other six years ago. The council provided them with a room where they met monthly. The group has up to 13 members although it had no formal representative status as a reference group for service development. These parents referred to their own experiences and other parents in similar

situations that they knew of. They were highly critical of the poor level of provision for disabled children and young people within Torbay. Similarly they were highly critical of the arrangements between agencies to assess, determine need and jointly deliver support.

- 5.10 Among the points they raised with us were:
 - access to services were not clearly signposted; post diagnosis referral was hit or miss; even simple services had to be accessed via a social worker; the threshold to receive a service was very high, "...as a parent/carer you have to be almost suicidal before you are considered for an assessment or service";
 - some signposting and resource information provided by the council was out of date, or built expectations that some listed services were accessible when this was not the case;
 - the suspicion that new referral demands were suppressed because of pressure of work, particularly because the Children with Disabilities team was overrun;
 - assessments failed to recognise the needs of parents as carers and carers assessments were not routinely offered and rarely carried out;
 - getting your child into an appropriate special school outside Torbay was perceived as an almost impossible task because, 'Education fought you' all the way even when Health supported you;
 - short break care was extremely limited, family link foster care in particular; there was a very limited sitting and befriending service; no proper home based support services for children with physical disabilities;
 - the dialogue with Education and Social Services was a false one, ' our opinions are asked for but nothing changes'; and
 - an overwhelming view that services to children with disabilities and their families were grossly under funded.
- **5.11** In our subsequent discussions with councillors and senior managers there was some recognition that family support services for children with disability were comparatively under funded and required development.

The Range, Appropriateness and Timeliness of Services

5.12 Overall we found that Torbay had generally extended the range and appropriateness of its services since the 2001 inspection. We formed the view that overall the 2003 re-organisation of children's services had been positive and provided the platform for greater consistency and functional

improvements. Following the restructure three functional service areas were created which were: Children in Need, Permanency Planning and Accommodation Services.

- **5.13** As part of the Children in Need Service there were two central intake teams situated in Torquay, two family intervention teams and a family centre (Halswell House). Additionally there were a young carers service and a family group conference service.
- **5.14** The intake service was centred in Torquay mainly to provide consistency of response, particularly in relation to safeguarding referrals. Most referrals were by telephone with relatively few being made in person at the office
- **5.15** Through feedback from service users and file examination we formed the view that the range of support services provided at the Halswell House family centre were both well regarded and effective. It provided supports where child protection and higher-level preventative concerns had been raised. The centre aimed to work with families with children up to 16 years old through group work and individual outreach with families.
- **5.16** The intake teams often referred cases to Halswell House early on in the assessment process where intensive work was required. Similarly depending on the age of the child and location of the referral, intake teams were also able to refer lesser concerns to the Sure Start services in Torquay and Paignton. Similarly Intake could refer to the Home Start voluntary befriending service.
- **5.17** Intake service teams were complemented out of hours by a Torbay wide emergency duty service. The emergency duty was well regarded by service users and we also received positive feedback about the service from foster carers.
- **5.18** Torbay's Family Group Conference service was well established. In the past five years with limited resources it had assisted 120 families. We were provided with the opportunity of meeting a number of parents and children who had been using the service. We found that the service was impressive, well coordinated and highly regarded by service users. Torbay was now proactively using the scheme to target situations where children were in danger of entering care. The service however lacked capacity and required additional funding to increase its responsiveness and maintain the high quality of its work. We also thought that the linkage of this service with kinship care arrangements could be strengthened.
- **5.19** The Permanency Planning Services area essentially comprised three teams delivering a field social work service for children looked after where the care plan was essentially long term. In addition there was the Care to Community Team that provided support to care leavers, a family centre and a placements contract manager post.

- **5.20** The Hillside family centre was functionally linked to the three permanency planning teams. The centre focused on assessment and supporting rehabilitation of children and young people up to 18 years to their families. The centre also delivered supervised contact services.
- **5.21** The other main service area was Accommodation Services. An operations manager had been appointed in May 2004 to coordinate the delivery of services provided through a fostering team, an adoption team and Broadhaven, a 5 bedded residential care home. Additionally the service had a small Specialist Assessment and Treatment Service (SATS). The role of SATS was to provide specific support to children looked after and their carers.
- **5.22** Torbay had been approved as an adoption agency since 1998, but had contracted the service out to a voluntary agency. In January 2003 the council agreed that Torbay should develop its own adoption service. Following a lengthy recruitment process adoption team became operational in February 2004. A Commission for Social Care Inspection (CSCI) regulatory inspection in July 2004 concluded that whilst there were a number of requirements not being fully met, the adoption service had made a positive start.
- **5.23** The fostering service and the Broadhaven unit had received recent CSCI regulatory inspections and overall were considered to be sound. During the inspection we had an opportunity to visit and meet young people at the Broadhaven unit who were appreciative of staff and spoke positively about the care they received there.
- **5.24** Foster carers spoke of the pressure on the fostering service to accommodate children and the resulting strain this had caused. Many felt it had resulted in less support being available for foster carers and the children they looked after. They spoke of the quality of the service the child received being dependent on the individual social worker, some of whom they described as excellent.
- **5.25** Services for children with disabilities were structurally separated from the main functional areas. This was a team comprising social work staff and community based occupational therapists. The team received referrals directly, but had an arrangement that where child protection concerns arose, they would refer on or co-work with the intake service. Child protection casework responsibilities were clearly defined when these situations arose.

Services for Children Looked After

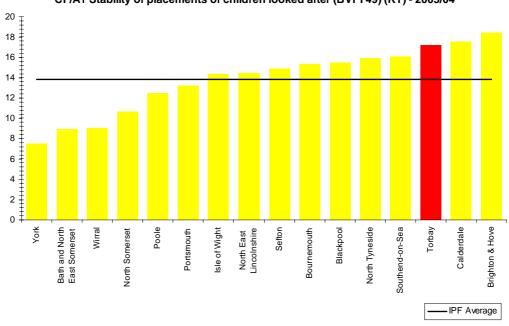
5.26 Placement choice in Torbay was limited to 64 foster carers offering a maximum of 124 places and there were no black or minority ethnic foster carers. Since the last inspection the number of carers had stayed at roughly the same level. Foster carers were appreciative of the support they

received from the Fostering team and the relatively low loss of carers was largely attributable to this support.

- **5.27** The foster care scheme in Torbay was basically arranged in three tiers. At the upper tier contract carers were paid a salary plus an age related allowance for demanding single placement tasks. Below this there was a group of adolescent support carers and then a larger group of mainstream carers.
- **5.28** The most pressing placement needs had been for single placements for children over 11 years, sibling groups and mother and baby placements. Recruitment of contract carers able to meet the needs of the most demanding young people in single placements had proved difficult, despite regular recruitment campaigns. Mainstream carers were apparently relatively easy to recruit.
- **5.29** The number of children looked after had not significantly reduced in the past three years and there had been growing reliance upon the independent sector for placements. A best value review of children looked after was conducted in 2002, at that time the improvement plan targeted the projected number of children looked after could be reduced to 180.
- **5.30** During the inspection we were unable to find a clear analysis of placement needs on which to base an effective placement and marketing strategy. Similarly consideration of how the elements of fostering, adoption, residential care, kinship care, commissioned care and preventive services could be pulled into a convincing strategy was missing. This issue will be covered further in Chapter 8.
- **5.31** At the time of the inspection Torbay had 22 per cent of its children looked after placed outside the authority area in a range of mainly independent provision, most of whom were placed in Devon. There were a number of independent sector fostering agencies and residential providers operating within Torbay and 111 children from other authorities were placed locally. The high influx of children and young people looked after from other authorities had produced significant problems. There had been a recent serious criminal incident involving young people placed from outside the authority and local residents. Not all authorities were meeting the statutory notification requirement, and Torbay had insufficient staffing capacity to take on liaison and quality assurance with all local providers.
- **5.32** Torbay's effectiveness in assuring that children looked after were helped to make good attachments had been inconsistent. In the year 2002-3 the percentage of children looked after with three or more placement moves during the year was good at 6.1 per cent. However during 2003-4 this had risen considerably to 17.2 per cent which was well above the all England average. Chart 5 shows Torbay's comparative position in the period 2003-4. We were told that performance for 2004-5 was forecast to improve to

11.5 per cent and the most recent monitoring information appeared to confirm this.



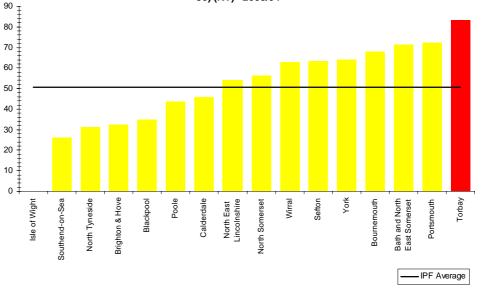


CF/A1 Stability of placements of children looked after (BVPI 49) (KT) - 2003/04

Source: Department of Health Key Indicator Graphical System - CF/A1 (IPF = Institute of Public Finance)

- **5.33** Similarly we found that long term stability of children in care had also fluctuated. In the period 2002-3, very good performance was achieved and 72.1 per cent of children who had been looked after for four years or more had been in their foster placement for at least two years. However in 2003-4 performance dropped down to 58.3 per cent and for 2004-5 the forecast was that this would return to 70 per cent or more. Variations in performance were explained to us as primarily due to organisational turbulence caused by the 2003 departmental restructure. However in our view there was also some correlation with the percentage of children who had an allocated qualified social worker. One hundred per cent of CLA had a qualified allocated social worker in 2001-2, in 2002-3 this dropped to 80 per cent and in 2003-4 dropped again to 69 per cent and was forecast to remain at 70 per cent for 2004-5.
- **5.34** The picture in relation to the provision of education and health services and the related outcomes for children looked after was very good and considerable progress had been made.
- **5.35** Chart 6 shows the percentage of children leaving care at 16 years with one GCSE grade A-G or GNVQ. Performance was the highest in its comparator group. This reflected very good joint developmental work between education and social care services.

Chart 6



CF/A2 Educational qualifications of children looked after [joint working] (BVPI 50) (KT) - 2003/04

Source: Department of Health Key Indicator Graphical System - CF/A2 (IPF = Institute of Public Finance)

- **5.36** We noted the good developmental work that had begun in setting up a multi agency Looked After Children's team. In particular the creation of the children looked after nurse was an important and effective development. We also noted the good developmental work that had been completed in relation to the Healthy Schools Standards pilot and further developments within the Action Plan. Performance in relation to health and dental checks for children looked after had been very good between 2002-2003 and 2003-2004. However, senior managers drew our attention to the unsatisfactory arrangements for children looked after to receive dental treatment. At the time of the inspection the PCT had been unresponsive to this problem and had made no commitment to resolve it.
- **5.37** We had the opportunity to meet with staff from the care leavers service and meet some care leavers. Overall we judged that the range of support services being offered was comprehensive and effective. The team were dealing with 85 young people. There was a range of accommodation being used by care leavers, which was primarily in the private sector, with very few housing association flat lettings. B&B accommodation was not over used, though supported lodgings appeared underdeveloped.
- **5.38** We found that there was an effective independent advocacy service for children looked after and those on the child protection register. We were told by the advocacy service that the reviewing process was effective in ensuring that the voice of the child or young person was heard, and that this was particularly so for children looked after.

- **5.39** There had been some improvement in final warnings and convictions for children looked after over the past years, though levels were relatively high and further work was required to reduce them further. There were however positive links and good collaborative work ongoing between the youth offending service and fieldwork teams
- **5.40** We were concerned that there was no policy or procedures in place in relation to the 1991 Private Fostering Regulations. Staff and managers interviewed were unaware of any current private fostering arrangements in place. This was a significant and worrying omission particularly in relation to the findings of the Climbié Inquiry. In discussion with us, senior managers recognised that it was an area that required urgent development, and that additional resources would be required to address it within the Accommodation Services. Clear policy and procedures including the new regulatory amendments to the Children Act 2004, alongside an advertising and advice function needed to be put in place quickly.

Protecting Children from Abuse and Neglect

- **5.41** The number of children on the child protection register prior to inspection was 84, which was roughly representative of the average for the preceding 12 months. On the basis of the latest available statistics Torbay had a slightly higher number of registrations than its comparator group. On the basis of statistics supplied by Torbay 7.7 per cent of assessments between January and December 2004 resulted in child protection registration. All child protection cases were allocated and this had been the consistent position.
- **5.42** The ACPC was chaired by the Assistant Director Child Care. It was intended that the Chief Executive Children's Services would take on this responsibility from April 2005 and develop the ACPC into a Children's Safeguarding Board. There was appropriate representation from all agencies on the ACPC. The ACPC had initially responded thoroughly to the requirements of the Victoria Climbié Inquiry as well as a serious case review in 2002. However we found discrepancies between the councils most recent Victoria Climbié self audit return and what we found in the inspection. We have detailed the standards that were either not or only partially met at Appendix F.
- **5.43** The ACPC training plan had a range of appropriate courses according to the level of specialist knowledge required. During the inspection the view expressed by some staff was that the thrust of the training programme was too broad, and that more experienced social work and other staff would benefit from more focused and specialist courses and workshops.
- **5.44** The ACPC had developed a range of policies and procedures. The current procedures were extensive but not easy to follow. The procedures were about to be revised from May 2005 onward and the plan was to do this

collectively in a South West peninsula-wide approach. The ACPC had a sub group, which had done some thematic audits, although we were told that these tended to focus on social work practice rather than whole system accountability.

- **5.45** The ACPC had considered the persistent problem of inquorate child protection reviews and low attendance at some meetings. However we were told that this situation had not improved significantly.
- **5.46** We were concerned that one of the independent child protection chairing posts had been vacant for some time. At the time of the inspection another senior manager was being drawn into regular chairing responsibilities. This situation needed to be resolved quickly. In our view the Child Protection Unit Operation Manager could be usefully freed up to provide co-ordinating support and advice to the new Children's Safeguarding Board. Similarly we felt the child protection unit should develop a quality audit and advice function to teams.
- **5.47** We were able to see from file evidence and also from comments made by social workers and managers that the interagency understanding of child protection thresholds was cautious. There was nonetheless some evidence of good partnership working at the front line of service. More positively good progress had been achieved on the development of Information Support and Assessment (ISA) guidance. ISA guidance documents had been produced to be followed by multi agency training. A comprehensive ISA website and service directory was planned under phased development during 2005.
- **5.48** A creative approach had been taken to involve other agencies in the intake teams referral and allocation process. However information being shared at those meetings had not been confined strictly to clear safeguarding situations where parental consent had not been given. We had discussed this with senior managers and were told that this practice would cease.

Ensuring Services are Responsive to Need

- **5.49** Through the work conducted through CYPSP around developing the Children's Fund, Sure Start and the Children and Adolescent Mental Health Service (CAMHS) strategies Torbay had made an effective start on needs mapping. There were as a result a number of services provided by the voluntary sector working effectively alongside social services. There was not however evidence of how unmet need would be addressed and prioritised systematically as part of a preventative strategy and the way in which agencies would collectively respond to these gaps.
- **5.50** The separate areas of Children's social services had since 2002 completed a number of surveys and a considerable amount of analysis of how services were perceived by children and young people. There was less evidence of specific engagement with parents, which was evident from



both our pre inspection questionnaire and our interviews with parents. The council needed to consider this issue of balance more closely within its participation strategy development.

Quality of Services for Users and Carers



STANDARD 3: QUALITY OF SERVICES FOR USERS AND CARERS

Children and their families benefit from appropriate referral and assessment processes, planning and review arrangements which focus on the full range of needs of the child.

The standard looks at:

- information to the public;
- referral and initial response systems;
- assessments of children and families;
- care planning and review; and
- monitoring for good outcomes.



STANDARD 3: Quality of Services for Users and Carers

STRENGTHS	AREAS FOR DEVELOPMENT
 The councils website was easily navigable and provided a range of information on children's services. The multi agency referral process using a standard format was well embedded. Referral coordinators had made a significant impact on the efficiency and quality of information received. The service and support of the Out of Hours service was well regarded. There had been hard work within the Family Intervention Teams to develop the quality of core assessments. Independent Reviewing Officers had provided much needed continuity and CLA reviews were compliant with timescales. There were some good examples of permanency planning. 	 Information leaflets were not available at main service points. Arrangements for interviewing service users in Union House were unacceptable and required urgent attention. The high level of unallocated CLA work to qualified social workers had not been corrected for 3 years and need urgent resolution. (see Chapter 9) There were long delays in allocating Family Support cases. The Framework for Assessment had been poorly implemented and the new Common Assessment Framework required focused development in teams and across agencies. The frequency and quality of core group meetings needed closer monitoring and compliance The Children with Disability team were using an unauthorised system of assessment. Service managers needed to closely address in supervision issues of drift in action plans between reviews for CLA.



RECOMMENDATIONS

- Senior managers need to ensure that a full range of information leaflets are available at all public access points. (6.1)
- Senior managers should ensure that the current issues of capacity and uncertainty around the front line management of the intake teams is quickly resolved. (6.14)
- Senior managers should ensure that there is consistent adherence to child protection procedures across all teams. (6.19)
- Senior managers need to ensure that the quality of assessment is improved within the Department and that the new Common Assessment Framework is properly implemented across all agencies. (6.23)
- Senior managers should review the current arrangements for the completion of core assessments and case flow to ensure that unnecessary disruption for service users is avoided. (6.15)
- Senior managers should ensure that initial and core assessment timescale performance is significantly improved. (6.10)
- Senior managers should review the current capacity and quality assurance role of the independent reviewing service given the current volume of CLA. (6.25)
- Senior managers should ensure that a review takes place of business processes for Family Support cases across fieldwork and provider teams. (6.34 and 6.35)

Information to the Public

- **6.1** During the inspection we found that Torbay had produced a range of leaflets that were basically clear and informative although they did not meet full accessibility requirements. Regrettably these leaflets were not available at reception point for new callers to the main Social Services Office in Torquay. There were also no posters at reception signposting callers to the range of information available or how to make a complaint. Similarly they were not available at the other points of service access that we visited. We also visited the one stop shop in Torquay and could find no posters or leaflets on children's services either.
- **6.2** The council website was clear and easily navigable and reproduced the children's service information leaflets and also provided links to other children's information. The council was also working towards making the website accessible for people with disabilities.
- **6.3** We were concerned by the website entry 'About Social Services' which clearly identified eligibility to a service only if a member of the public had identified that they had 'critical or substantial risks associated with their need'. The entry was adult oriented though it listed children's services.

The wordi

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The wording was at best misleading and made no explicit mention of entitlement to assessment and required amendment.

Referral and Initial Response Systems

- **6.4** During the inspection we visited the main social services office at Union House in Torquay where two intake service teams were based. The two teams were set up to enable enough capacity to deal with demand across Torbay on a weekly duty rotation and provide robust supervision arrangements. The teams did not have separate geographical catchment areas.
- **6.5** Reception arrangements for callers required improvement. Privacy was not assured when callers arrived at reception and were interviewed by the receptionist. Whilst we were there we witnessed one service user being interviewed by a member of social work staff in the reception area despite the fact that there were two interview rooms free. The content of the discussion was very sensitive and the service user was not given the option of privacy. These were issues that required prompt management attention.
- **6.6** The intake teams had three referral coordinators who supported the teams. They provided a telephone answering service for enquiries and had a signposting role to other more appropriate services as well as taking referrals from members of the public. Torbay Children's Services had developed a simple multi agency referral form based on Framework for Assessment principles, which was well established. The referral coordinators also received completed multi agency assessment forms and had worked hard with staff from other agencies to develop the quality of referrals they sent in. The level of compliance from other agency staff in completing the forms was now high and very few forms had to be returned. In our view the referral coordinators had established and refined the efficiency of the system of referral and provided very good support for social work staff.
- 6.7 The arrangements for handling new referrals and linking case file information were generally sound. Recording and amending referrals on the service user database was the responsibility of the referral coordinator. Most new entries were done on the same day, although the basic referral details were also recorded in a paper logbook as a fail-safe arrangement. Newly allocated papers and files were physically filed in either a general filing cabinet or in the workers own filing cabinet.
- **6.8** Allocation meetings regularly involved police, education and housing personnel. It was acknowledged that some of the referrals discussed with other agency staff were not clear safeguarding situations and parental consent to share information had not been obtained. In subsequent discussion with the service and operations managers concerned it was clear that they were uncomfortable with this practice but it was a policy that they had been asked to carry out. Subsequent to this Area Child

Protection Committee members said they were aware of the practice but that it was not a formal policy. We expressed concern to senior managers that this practice did not conform to guidance and needed to be quickly reviewed.

- **6.9** New referrals were assessed on a four-level draft eligibility matrix, which was not publicly available. We were told that the intake team did not accept cases at level 1 which were seen as a largely a universal need only, This was a departure from the matrix description of level 1 as 'potentially vulnerable children who require access to services to prevent the development of problems'. We were told that level 2 cases often had to stay on a waiting list for an initial assessment, which in some instances took up to three weeks. Level 3 and 4 cases were prioritised and seen rapidly.
- **6.10** There was a system of weekly review of unallocated work, which resulted in a hand typed waiting list. This system, in our view, did not identify and record clearly the identified risk level and the length of time cases were outside the assessment timescales. This was in part due to difficulty in extracting data from the current service user database, and managers were confident that monitoring performance would improve considerably with the implementation of its successor later in 2005. On the basis of statistics provided covering the preceding 12 months there were 12 family cases that had been unallocated in Intake for periods between 5 and 40 days. We were told that part of the difficulty was fluctuations in referral rates. Managers acknowledged that completion of initial assessments within timescale had been a problem as was improving the quality of these assessment attention. In the period 2003-4 Torbay completed 71 per cent of initial assessments within timescale.
- **6.11** Toward the end of 2004 the intake teams had suffered from inadequate front line management arrangements. The manager of one of the family centres had been covering along with a locum post holder. This in our view had led to uncertainty over the stability and sustainability of the management of the intake service. It had been a difficult and stressful arrangement and was still not resolved at the time of the inspection.
- **6.12** We were told that regular staff supervision and support was in place and this was confirmed by some social workers with whom we spoke. In situations where child protection assessments were required only qualified social workers were involved. However in some situations relatively inexperienced qualified workers would be allocated who had only received basic ACPC training. Similarly unqualified workers were sent out to assess presenting situations that appeared low risk but which in some instances were often more complex.
- **6.13** We examined six cases in the intake team at random and were concerned to find three which had unsatisfactory safeguarding arrangements. All

three cases were brought to the attention of the operations manager concerned and the Assistant Director. In response to these concerns a child protection conference was set up immediately in the first case. In the second case a multi agency meeting had to be set up to consider how a previously looked after homeless teenage girl could be protected. In the third case, one of alleged sexual abuse, which had been prematurely recommended for closure, a referral was made to the police to set up an interview with the alleged victim.

6.14 The management of child protection in the intake system was uncertain. Essentially our judgement was that with proper arrangements for management oversight, this situation could be turned around relatively quickly. This however required a stable front line management solution and for the Operations Manager for the Children in Need Service to have enough dedicated time to support and monitor the development of the intake service. We strongly advised the Assistant Director to urgently address this situation.

Assessment of Children and Families

- **6.15** Linked to the issue of initial assessment we noted that the intake teams generally passed work on to the Family Intervention (FIT) or other teams without the completion of a core assessment when required. This was an unusual policy which had arisen largely to protect and support the Intake team with volume of incoming work, and to improve compliance around initial assessments. This was a policy that required review of the capacity and inter-relationship between the intake and family intervention teams. It was clear that the present arrangement caused systemic problems, which in some instances produced a very disjointed experience for service users. For example, in some instances a family might have an initial assessment from an Intake social worker, followed by a core assessment by a FIT worker and then a transfer to permanency planning team worker, all within a very short time scale.
- **6.16** For a number of reasons, not least the recurrent staffing issues, there were workflow tensions between the Children in Need and Permanency Service areas. We were told that 7 children had been waiting for some time to transfer from FIT to the Permanency Planning Teams and cases were also waiting for transfer from the Intake team. We also noted that a significant amount of unallocated work had regularly built up in both the FIT and in the Permanency Planning teams over the past two years, which is represented in the following tables 7 and 8.

Table 6: Family intervention team (FIT) periods where work was		
unallocated January 2004 – January 2005		

Period family cases unallocated in (working days)	0-10	10-20	20-40	Over 40	Total
Children Looked After Cases*	4	1	2	0	7
Family Support cases **	14	15	14	27	70

Source: Torbay Council

* Of these cases four were subsequently allocated to unqualified staff and three to qualified social workers.

** Of these cases 30 were subsequently allocated to unqualified staff and 26 to qualified social workers.

Table 7: Permanency teams periods where work was unallocated2003 - 2005

Period child's case unallocated in days	0-50	50-200	200-400	400-500	500-600
Children looked after cases	6	21	10	5	8
Child in need cases	1	2	7	0	2
Total	7	23	17	5	10

Source: Torbay Council

6.17 The volume of unallocated children looked after was a cause of great concern. The Department had made attempts to recruit into these posts without success and had followed a policy of filling vacant posts with unqualified staff. The approach was seen as a pragmatic solution in the short term with the intention to support some of these workers to become qualified in the medium term. The only real distinction between a qualified and an unqualified worker's caseload was that qualified workers were not holding cases which involved active court involvement. Given

the pressure on frontline management in the Permanency Service it was evident that the quality of supervision was affected. At the time of the inspection no significant steps had been taken to rectify the level of qualified workers for children looked after.

- **6.18** The Framework for Assessment had not been properly implemented and we were told by a number of managers that raising the quality of assessment had been a key objective. We were shown some good examples of core assessments that had been undertaken by the Family Intervention Teams. These were detailed assessments with good analysis, and it was evident that much effort had been made to raise the standard of assessment. However this level of detail was not required in all core assessments, and the principle of completing core assessments that were fit for purpose had not been grasped.
- **6.19** In most of the child protection files we read from the core sample of 10 cases there was evidence that Area Child Protection Committee procedures were being followed. We did however read one file from a permanency team where a strategy meeting and consideration of a child protection conference did not happen. In this case the Legal Unit were contacted with a view to commence care proceedings. When we followed this case up it was evident that the manager concerned had considered that this was a matter of judgement for him. It appeared to us from this and other cases read that there was insufficient understanding of child protection procedures across the whole service. Closer regular auditing for compliance with child protection procedures was required, and senior managers needed to ensure it occurred across the whole service.
- **6.20** Initial assessments were variable in quality, some contained very minimal information and it was hard to determine whether the child had been seen and what their views were. Core assessments that we read were also variable in quality. In some of the better ones there was evidence of contributions from other agencies. More often however they appeared to be largely social services documents. In some of the children looked after files there were thorough age related core assessments. Many of these were however completed well beyond the timescale requirements. In one case it took eleven months to complete. There were in some cases no evidence that assessments had been read by managers.
- **6.21** In the assessments seen in both child protection and children looked after files the quality of analysis was variable. Many were long on detail but lacking in analysis or evidence for the plans proposed.
- **6.22** Of particular note was assessment practice occurring in the Children with Disabilities Team. We were told by social workers within the team that they were not using the Assessment Framework but rather a hybrid 'middle level' assessment format. This format which was more detailed and specific about the child's functional disability than the initial or core assessment. However it did not adequately cover the parenting domain and

core assessments were only being used when the child was looked after long term. We were concerned that this approach was not adequately addressing the Safeguarding dimension of assessment. This practice had evolved within the team since 2001, but had never been formally approved as a policy or procedure and needed to be addressed by senior management.

6.23 In general we formed the view that the Department needed to seize the opportunity to train and develop its own staff and managers to properly implement the new Common Assessment Framework alongside partners in other agencies.

Care Planning

- **6.24** The principles of permanency planning were established in Torbay. Regrettably because of high staff turnover and constant changes of social worker care planning had been undermined. Young people who had several changes in social workers said that they had lost trust in new workers staying and carrying through plans.
- **6.25** Independent Reviewing Officers (IROs) had provided much needed continuity and ensured that plans were in place and effectively monitored. It was very much to the IROs credit that reviews of children looked after cases were 100 per cent on time. Similarly we were able to see that IROs were independent and provided robust challenges where care planning was flawed or agreed plans had not been followed. At the present time the independent review service reported to the Assistant Director, although there was a plan to change the reporting relationship and make it more independent. In our view the IROs were overstretched and required additional capacity to cover the large in care population especially approximately 25 per cent of children looked after who were placed outside the authority area. Additional capacity could also allow them to develop a more proactive quality assurance role.
- **6.26** In the files we read there was variable quality in the care of children looked after. In some cases planning was good, children looked after documentation was fully used and plans were followed through on time with little drift. In others we noted that there was delay in plans and poor recording of the reasons for this. We also noted on some files that minimum visiting requirements were not followed and it was unclear if the child was seen alone.
- **6.27** From the cases we examined we saw that there was often insufficient progress between reviews, which was confirmed by the IRO's. We encountered one case, which particularly concerned us. This was of an infant where the plan was for adoption at the mother's request. The case was held in a family intervention team and at the first review the IRO recommended planning for adoption to commence immediately. Because of a lack of clarity over whether the case plan should be by the family

intervention team or the permanency planning team, nothing happened. The permanency team would not accept the case and the FIT worker was instructed not to carry through the initial review plan. At the second review the case was no further forward and the baby had formed a close attachment to the short term foster carer. In this instance a relatively straightforward permanency plan and the need for an early placement with a prospective adopter was held back for no good reason. This example pointed to the need for prompt senior management action, and a review of the respective responsibilities of teams within functional group areas.

6.28 Care planning and the review process in relation to child protection casework was generally sound. Child Protection review compliance had drifted between April and September 2004. However in the period September to December it had returned to 100 per cent. The reason for this was a clearer senior management focus and the end of year outturn for review compliance was projected to be close to 95 per cent. We were however concerned by practice in relation to child protection core group meetings. The frequency of these meetings was variable as was the quality of the planning that took place in them. Again this was an area that needed greater compliance and closer management monitoring.

Case Records

- **6.29** Case file structure and arrangement of modules was satisfactorily laid out, followed the specimen structure and was reasonably easy to read. The main obstacle for the reader was the illegibility of handwriting and occasional misfiling of documents. Torbay had adopted the *Recording with Care* monitoring guidance.
- **6.30** Although we were able to see properly maintained chronologies on the core group of files we inspected there were no regular summaries visible, and this would have been a helpful development.
- **6.31** When we looked randomly at files, chronologies were rarely seen, especially on safeguarding files that been open for relatively short periods. This is/was an important area of the Victoria Climbié Inquiry recommendations that needed to be routinely in place and regularly monitored.
- **6.32** The electronic record from the service user database SSID recorded basic details only, during the inspection we cross-referenced the information recorded with SSID. In most instances the electronic record was accurate and up to date. A group of management information reports generated on SSID were available to managers. These 'snapshot' reports had some value, although a number of managers told us that they didn't have confidence in and rarely used it.

Monitoring for Good Outcomes

- **6.33** Torbay did have arrangements for monitoring cases files and we were told that Service Managers regularly carry out file audits and their Operational Managers also regularly audit files. We saw some clear evidence of this, although this mostly consisted checking procedural compliance and we saw no commentary regarding outcomes or the progress of casework.
- **6.34** More significantly however, we recommended that senior managers reviewed the business processes for Family Support cases, particularly in relation to the regularity of reviews and the way matrix evaluation was used. At the time of the inspection the eligibility matrix tool was not a public document and we could see anomalies in its use, as described earlier in this report (see paragraph 6.9).
- **6.35** In our view social services needed to be clear, along with other departments and agencies about the threshold where it had a responsibility to assess, and if not, how a referral would be treated. Similarly the handbook procedures directed that children in need cases should be reviewed but left the frequency to the discretion of the practitioner and manager. We also noted from file examination and discussion with staff, that beyond initial response in the intake system the matrix levels were not used. Because of this, regular management review and the consistent evaluation of family support work was not in place across fieldwork and provider teams. It was therefore not currently possible for Torbay to evaluate and monitor the extent to which either casework or other provision was either effective or provided value for money.

Fair Access

7

STANDARD 5: COST AND EFFICIENCY

Social services provides a fair, consistent and inclusive service.

This standard looks at:

- Consistency of service delivery;
- Preventing exclusion from service;
- Responsiveness to culture and lifestyles; and
- Comments and complaints.

STANDARD 4: Fair Access

• The council was addressing its corporate	
responsibilities through the equality and inclusion policy launched in November 2004.	• The council aimed to meet level 2 of the Race Equality Scheme by September 2005, though a considerable amount of work was still required.
• Children's social services were beginning to use referral data to identify racial, cultural and identity issues.	• Children's social services need to complete its Race Relations Act impact assessment and action plan.
 All front line managers had been offered training on diversity issues. The council was about to launch a staff information manual on diversities. A Disability Discrimination Act compliance survey had been done on all council offices. 14 parent carers/young disabled people received a Direct Payment. A multi agency transitions policy was in place for young people with a disability. 	 Children's social services needed with partners to engage the diverse ethnic minority community in strategic and service planning. Access points for children's social services were not fully DDA compliant and clear timescales for compliance were required.



RECOMMENDATIONS

- The council should ensure that its plan to reach level 2 of *The Equality Standard for Local Government*' takes place by September 2005. (7.16)
- The council should ensure that signposting in ethnic minority languages is provided on Children's service posters and leaflets at public information access points and on its website. (7.20)
- The council and partner agencies should urgently review the currently high thresholds for services for children and young people with disabilities as well as current co-ordination of service delivery. (7.7 & 7.12)
- Senior managers need to ensure that there is proper consultation and a clear public strategy for the development of short break care for disabled children and young people. (7.15)
- Senior managers and councillors need to ensure that a publicised advocacy service is provided for children with disabilities. (7.15)
- Senior managers and councillors need to ensure that there is regular scrutiny and analysis of complaints and comments from service users as well as an annual report. (7.22 & 7.23)
- Senior managers need to ensure that there is sufficient capacity to meet complaints, file access and freedom of information regulatory requirements. (7.23 & 7.24)

Consistency of Service Delivery

- 7.1 Torbay had made some progress in attempting to develop fair and equal access for all children and families. There was evidence that demographic and deprivation index information had been used within CYPSP to set up Children's Fund and Sure Start developments as well as the Child and Adolescent Mental Health (CAMHS) strategy.
- **7.2** The reorganisation of the intake service to one base in Torquay in 2003 had removed some inconsistencies in response from the preceding system when it was provided from Torquay and Paignton. Most children's services were in fact based in Torquay and Paignton. This contributed to a picture of isolation for families in Brixham and CYPSP should further consider how it might improve access to service users there in future. We were told that as part of the integration agenda an extended school site in Brixham was being considered as a potential multi agency service access point. CYPSP was also more broadly considering different access arrangements across Torbay for children's services through extended school and voluntary sector children centre provision.
- **7.3** The Department had been using a children's service draft eligibility planning tool. This document was for internal use only and there was no public statement over access and eligibility to services. This was an area that the Preventative strategy needed to address with other agencies and still required completion. The eligibility planning tool was not being rigorously applied and, as mentioned earlier in chapter six of the report,

assessments for referrals at level one were often not being completed due to work pressures.

Preventing Exclusion from Service

- 7.4 Torbay had a generally poor range of office accommodation most of which was old and required extensive modification to meet public access requirements. The most recent Corporate Performance Assessment by the Audit Commission found that accessibility to council buildings for people with disabilities was still only 30 per cent for the period 2003-4. We were told that an internal corporate audit had been done of all council property with public access under Part 3 of the 1995 Disability Discrimination Act. However at the time of the inspection there were no indicative timescales given for compliance, or priority for improvements.
- **7.5** We found that entry and lift access to the main social services reception, which was on an upper floor, would be difficult and in some instances impossible for some service users. Similarly access was non compliant for service users with sensory impairments. Other social services premises that we visited had similar problems.
- **7.6** We found that access and joint agency co-ordination of services for children with disability was poor. As mentioned in chapter five of the report, some parents of disabled children spoke very forcefully of the difficulties of accessing services for their children and support for themselves. These difficulties were also emphasised by other parents of disabled children that had responded to our pre-inspection questionnaire as well as some young disabled people.
- The specialist children with disability team indicated in their general 7.7 information leaflet that they assessed only children with multiple disabilities or those with severe or profound disabilities. This statement was in breach of Section 17 (10) of the Children Act 1989, as under the Act any child with a disability would be entitled to assessment. This publicity material was indicative of the council's position over service eligibility, as for example children with autistic spectrum disorders and moderate learning disabilities were unable to access services. From the accounts given to us it appeared that not only assessment but also the threshold to receive a service from social services were set very high. A number of parents of disabled children told us of the tremendous difficulty in obtaining short break care. Some parents who had received short break care had waited a very long time for it, for example one parent told us of having to wait four years. Other parents and staff also told us of very real difficulties in accessing services for children with physical disabilities.
- **7.8** Short break provision was very limited, there were just 12 family based short break foster carers and most provision was residential. There had been a transfer from the Primary Care Trust to Social Services of funding to re-commission the residential short breaks service from the Robins

House residential unit which provided 1200 bed nights annually. There was also limited access into Bay Tree House, a Social Services run unit primarily for people with learning difficulties.

- **7.9** There were five disabled children placed out of authority who were joint funded by social services, education and health. Overall the cost of these children's placements had been very tightly controlled. In 2002-3 they were £391,000, in 2004-5 they amounted to £399,000. Social Services paid 40 per cent of the total cost; health paid 33 per cent and education the balance. The development of local jointly funded packages to prevent children leaving their home and the local community was only just beginning.
- **7.10** Local flexible day care provision was patchy and again under-developed. Some provision such as holiday play schemes and a Saturday club, although limited, were appreciated by parents. The Children with Disability team also had an inclusion officer who was working with other departments and agency partners to open up mainstream provision. The provision of Direct Payments for 14 young disabled people/parent/carers was also a positive development and we had feedback from two parents who very much valued this support.
- **7.11** Social Services maintained a register of 110 disabled children for planning purposes although this was voluntary and in no way reflected the local population of disabled children. We were told that the education service was aware of more than 800 children and young people with special educational needs.
- **7.12** Parents of children and young people with disability had talked of the difficulties of access and co-ordination of services between agencies from the point of diagnosis onward and generally limited signposting information to services. This was an area that Torbay had made some progress on, particularly in securing a development grant for a team around the child approach, which was due to start during 2005. Less progress had been made in regard to developing a wider integrated service for children with disability and this required clearer multi agency commitment and strategic leadership.
- **7.13** There was a transitions policy and procedure in place for young people with disability. Some progress had been made around identifying and developing transition plans. However we were told that the responsiveness of adult care services was limited. Similarly the range of further education, employment and resources available for young people with learning and other disabilities to lead fulfilling lives beyond school leaving age were limited.
- **7.14** Disabled children and young people, unlike children looked after and children on the child protection register, did not have access to publicised independent advocacy services.

- **7.15** Overall our view was that social services and its partners needed to provide leadership and commitment to particularly address the following:
 - clearly map the needs and resources required for children and young people with disability and their families;
 - clearly establish a partnership agreement on joint working, coordination of services and an agreed eligibility criteria;
 - consult effectively and engage young people and parents in the development of a short break care strategy; and
 - the creation of a publicised independent advocacy service for all children.

Responsiveness to Culture and Lifestyle

- **7.16** The council was beginning to address its corporate responsibilities to diversity and equality and launched its Equality and Inclusion scheme in November 2004. Children's social services had integrated this within its business plan and had started to use referral data to identify racial, cultural and identity issues. The council aimed to achieve level 2 of the Equality Standard for Local Government by September 2005, although a considerable amount of work was still required. In particular Children's social services needed to complete its impact assessment under the Race Relations Amendment Act. We were told that the target date for completion of this task was still uncertain.
- **7.17** Children's social services had a very small percentage (1.5 per cent) of staff from minority ethnic communities and there was no black or ethnic minorities support group. We were told that attempts were being made to attract more staff from minority ethnic groups as well as people with disabilities. The council was about to launch a 200 page manual on diversity to all staff. All front line managers had been offered training on diversities although we noted that take up had not been monitored.
- **7.18** Torbay had no black or ethnic minority foster carers and we were told that attempts were being made to recruit them. We were told that some attempts were made to provide black or other minority children looked after with appropriate same race mentors. We heard from one black looked after young person that he wanted contact with other black peers and was unable to access this.
- **7.19** The council and children's social services were at a very early stage of development in mapping and engaging the diverse black and minority ethnic communities in Torbay in strategic and service delivery development.

- 7
- **7.20** The council funded Language Line interpreting services and signers for deaf people were available. However the Department needed to develop standards on what service users can expect around translation and interpreting. We noted that the council website did not provide brief information in minority ethnic languages about how to access information on leaflets. Leaflets and posters clarifying this were not available at public access points.

Comments and Complaints

- **7.21** Torbay had a complaints leaflet, which we were told was available at local offices however none was openly on display when we visited the main office. Young people had been involved in the development of a complaints poster in conjunction with the independent advocacy service. Children looked after were supposed to be given a booklet explaining the complaints process as well as a contact card addressed to the Director of Social Services if they wished to make a representation.
- **7.22** However we found no written evidence on files or the electronic record that social work staff were explaining or providing information on the complaints procedure. Through the results from the pre-inspection questionnaire 40 per cent of parents said that they did not know how to make a complaint. Similarly 41 per cent of young people said that they did not know. In regard to access to file information 64 per cent of parents and 33 per cent of children said that they did not know they could see their records. Managers had no system of monitoring whether staff were routinely providing this information. Ensuring that proper practice was in place and also a reliable system of monitoring was an area that required attention.
- **7.23** Although we could see that complaints were monitored and discussed by managers at regular intervals we were not shown any evidence that this information was analysed or linked to any change in practice. We recommend that senior managers and councillors ensure that there is regular scrutiny and analysis of complaints. We would expect that the council ensure there is an annual report on children's services complaints. The report should include the volume and type of complaints and comments, the time taken to resolve the complaints and at what level. The report should also provide analysis of trends in complaints and the specific actions that have been taken individually and to practice as a whole. The council also need to keep a central record of all requests for access to file requests and requests for information under the Freedom of Information Act, as well as their outcomes.
- **7.24** Children's services had a part time customer services assistant who supported services users making complaints. Managers were designated to investigate complaints as part of their role at level 1 and at higher complaint levels. Similarly managers had the responsibility to co-ordinate



file access. Senior managers need to ensure that children's services had sufficient capacity to meet these requirements.

Cost and Efficiency

8

STANDARD 5: COST AND EFFICIENCY

Social services commissions and delivers services to clear standards covering both quality and costs by the most effective, economic and efficient means available.

This standard looks at:

- Financial management;
- Objectives, performance measurement and review;
- Inter-agency collaboration and commissioning arrangements; and
- Achieving an effective balance of services.

STANDARD 5: Cost and Efficiency

STRENGTHS	AREAS FOR DEVELOPMENT		
• The council was in the first year of its medium term financial plan and was judged by the Audit Commission to have improving financial control mechanisms.	• The budget setting process for children's services lacked clarity and needed to be linked to accurate evaluation of need and priority.		
 Arrangements for financial accountability were clear. Monitoring arrangements for out of authority and independent placement expenditure were in place. The contracts manager post was beginning to have an impact on spot purchasing placements with the independent sector. 	 The current allocation of expenditure on Family Support had decreased by 25 per cent and there need to be a clear medium term to rebalance it from placement expenditure. The council aimed to reduce the Children's social care budget to Formula Spending Scheme (FSS) levels. Clear evidence was required over how this could be achieved without major impact on services. A clear and detailed medium term placement strategy was required. CYPSP had started to consider how it was going to develop joint commissioning. It also needed to consider the development of a cross cutting best value type review programme. Children's Services needed to better understand its family support and safeguarding costs to ensure that they provided valued for money. 		
RECOMMENDATIONS			

- Senior managers and councillors should ensure that the budget setting process is based on an accurate evaluation of need and priority. (8.9)
- Senior managers should quickly ensure that a clear and detailed medium term placement strategy is produced that addresses all current resources, future needs and budgetary requirements. (8.10 and 8.11)
- Senior managers should develop a clear understanding of unit and activity costs in regard to the value for money of family support and safeguarding services. (8.21)

Financial Management

- **8.1** The 2004 Corporate Performance Assessment of Torbay found overall that medium term financial planning was not yet robust. The council was in the first year of its medium term financial plan and the Audit Commission judged overall that the council had improving financial control mechanisms.
- 8.2 In the 2003-4 financial year the children's services budget had overspent by approximately $\pounds 1.2$ million due to a large and unforeseen over-run on children's budgets.
- **8.3** We were told that management focus and control over the children's service budget had been affected by the structural reorganisation of children's services from July 2003 onward. Much of the over spend was due to an increase in out of authority and independent sector foster placement commitments. The 2003-4 social services budget as a whole was balanced by an under spend on adult services.
- **8.4** Planning was well advanced to disaggregate the social services budget. At the time of the inspection an outline budget bid for children's services had been recommended by the overview and scrutiny board. It was likely in the next financial year that children's services would only be required to make minimal savings. We were also given assurances by councillors and senior managers that children's services would be largely protected from the otherwise difficult position that the council budget was in.
- **8.5** The council had however completed an independent review of social services in 2004. The review indicated that social service expenditure as a whole needed to move closer to its Formula Spending share level (FSS) within three years. In the current year the budget set was 24 per cent above the FSS level. We were unable to see how this could be achieved within this period without a major impact on service delivery.
- 8.6 The October budget monitoring report was forecasting an over spend of $\pounds 584,000$ or 6 per cent as the outturn position. This over spend was accounted for by two main items:
 - private sector fostering costs of £488,000, which were volatile and could increase the final over spend.
 - the children with disabilities team showed an over spend of £187,000, which was partly due to a known but unbudgeted commitment towards running the Robins House short break residential unit and increased short break care commitments. It was thought this out-turn figure could also rise.
- **8.7** We found that there were clear systems for budget accountability, which were set at appropriate managerial levels. Budget holding managers were

offered good levels of support by finance officers and budgets were reviewed monthly by the senior management group.

8.8 Torbay's unit cost for foster care for 2003-4 was poor given the size of its looked after population, shown in chart 7. New and more expensive placement commitments were thought likely to increase unit costs still further for 2004-5.

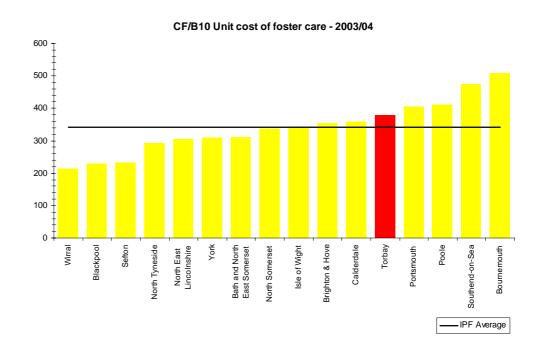


Chart 7

Source: Department of Health Key Indicator Graphical System - CF/B10 (IPF = Institute of Public Finance)

- **8.9** A particular concern was that the budget setting process was unclear and did not appear to be based on an accurate evaluation of need or priority for service in the medium term. For example, we were unable to locate a clear medium term children's placement strategy.
- **8.10** A Best Value review exercise was conducted on children looked after during 2001-2. The chief results of this review were to increase the numbers of salaried foster carers and create an adolescent support service. Despite the Best Value review on children looked after there had been no subsequent co-ordination of how the separate elements of the provision fitted together in a detailed way. We could not see from the business plan how and when a projected growth in the group of in house foster carers would reduce private sector costs and by how much. Similarly it was unclear how the private sector commissioning strategy would operate in the interim. In our view the future role of the residential unit and how it could be used to best effect was also unclear. Similarly we could not see what contributory effects would issue from investment in adoption, or what plan to strengthen preventive supports to divert young people from care would be put in place.

8.11 On account of this area of expenditure alone we formed the view that stability of the children's medium financial plan would be uncertain until work had been completed to review and rebase this main element of the overall budget.

Objectives, Performance Measurement and Review

- **8.12** There had been a good deal of effort to derive relevant performance information and create a performance culture within the Department and a system of reporting performance was in place.
- **8.13** Beyond the work undertaken during the financial year 2001-2002 on children looked after there had been no formal Best Value review approach to other elements of children's services. The council's overview and scrutiny board had examined social services finance overall and independent consultants had undertaken a review of independent sector placement costs. This review had provided a number of recommendations about controlling costs, which were being taken forward.
- **8.14** At the time of the inspection it was uncertain how CYPSP would address the issue of best value or service reviewing in the future. It was important that arrangements were planned to prioritise and complete cross cutting reviews of shared or themed service areas. We were told that this issue would be considered by the integrated service project steering group.

Inter-Agency Collaboration and Commissioning Arrangements

- **8.15** Joint commissioning in Torbay was limited, though CYPSP had developed some service level agreements and jointly commissioned services with the voluntary sector. These were: a children's rights and advocacy service delivered through the Children's Society, homelessness advice to young people and a drugs and alcohol advice service. Grants to the voluntary sector were however a very small percentage of the children's services budget.
- **8.16** Monitoring arrangements for out of authority and independent foster care placements were in place. A joint panel existed to review complex cases and approve funding. It was noted that the proportion of expenditure committed by social services was very high in relation to the contribution contributed by education and health. In the period 2003-4 social services paid 82 per cent, education 11 per cent and health 7 per cent. We were told that CYPSP had recently agreed minimum joint agency funding protocols to raise the level of financial contribution from education and health.
- **8.17** During 2003 a contracts manager post was created to develop consistent contracting practice and ensure value for money. Good progress had been achieved with this post and pre-placement contracts were agreed with all independent sector providers. All current contracts were spot purchased

and as yet no decision had been reached about developing other commissioning approaches. Some consideration had been given to developing either preferred provider or limited block contracting as a single authority or as part of a sub-regional partnership.

Achieving an Effective Balance of Services

- **8.18** The level of preventative services supplied by social services had declined significantly according to statistics in 2001, (see table 4, page 12). Torbay children's services in their Preventative Strategy were committed towards working in a more preventive way, however they had yet to determine agreed multi-agency service eligibility criteria
- **8.19** Torbay's level of expenditure on family support services for the period 2003-4 was on the comparator average as shown in chart 8. However Torbay was yet to audit whether expenditure in this area had properly focused and obtained value for money.

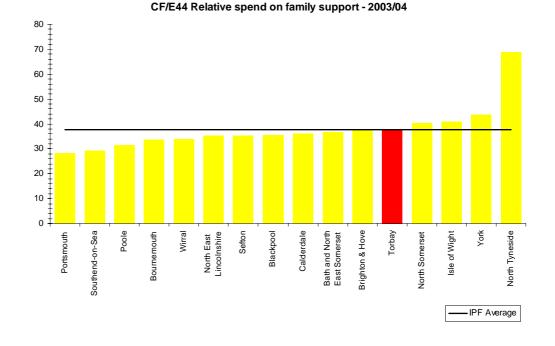


Chart 8

Source: Department of Health Key Indicator Graphical System - CF/E44 (IPF = Institute of Public Finance)

8.20 Torbay was struggling to bring down the number of children placed and their costs. Senior managers we spoke to also spoke of the objective of rebalancing the costs of the service more toward family support. Social

workers and managers at the front line particularly drew attention toward strengthening family support services for young people and diverting them from care.

8.21 Unit costing activity had been limited to the area of placement commitments. Overall we formed the view that children's services needed to better understand its costs and the value for money provided in relation to its safeguarding and family support activities.

Management and Resources

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STANDARD 6: MANAGEMENT AND RESOURCES

Social services has management and accountability structures that commission and provide safe and effective services.

This standard looks at:

- The responsibilities of councillors;
- Organisational structure and accountability;
- Quality assurance systems;
- Human resource issues; and
- Information systems.

STANDARD 6: Management and Resources

STRENGTHS	AREAS FOR DEVELOPMENT
 Councillors were committed to developing an integrated children's service. Children's champion and scrutiny roles were established and effective An outline risk assessment of potential risks to core children's social services had been completed though and the project steering group would consider this in more detail Performance management information was regularly reported and monitored. There were clear management accountability arrangements. Training provision was well resourced overall. A programme for management development was planned for 2005-6. Senior managers were seen as generally approachable and in touch with the front line. Supervision arrangements were in place and managers were generally seen as supportive, if at times overwhelmed. Administrative support was valued and levels of support were good. 	 The implementation of the new PARIS database was well planned but would take a further 18 months to fully embed. Business service planning required further development. The recruitment and retention of qualified social workers required further development. A clear strategy to eliminate unallocated work in the short and medium term was required. Managers needed to read and sign off files regularly and file audit required more systematic development.

RECOMMENDATIONS

- Senior managers need to ensure that all children looked after are allocated to qualified social work staff. (9.19)
- Senior managers need to review how current organisational capacity and human resource strategy can eliminate the current volume of unallocated work in the short and medium term. (9.20)
- Senior managers need to address the relationship and case ownership protocols between the Permanency teams and the Care to Community team. (9.22)
- Senior managers need to ensure that regular file audit and robust quality assurance systems are put in place. (9.12)
- Senior managers need to further consolidate service planning at business unit, team and individual appraisal levels. (9.10)
- Senior managers need to develop improved local performance management information and comparative benchmarking. (9.28)

The Responsibilities of Councillors

- **9.1** There were clear arrangements in place for councillors to ensure that their corporate responsibilities to children's social services were met. The new political structure placed responsibility for children's services under a lead councillor for children's services.
- **9.2** The lead councillor for children's services was well informed and committed to the new and extensive responsibilities of her role. The council executive group recognised the breadth and extent of the role and had agreed to offer support where required.
- **9.3** The councillors that we met had a clear vision of how they wanted children's services to develop and were enthusiastic about the benefits of an integrated service approach. We were told that there was also strong cross party support for this. We found that councillors were well informed and had good access to information about the service from managers on a formal reporting and informal level. Councillors and senior managers reported that they had a good and effective working relationship.
- **9.4** A robust Overview and Scrutiny Board was in place to review policy and practices areas within children's services, including financial management. Within the Overview and Scrutiny process a performance board met on a quarterly basis to consider the performance of the services as a whole against national indicators and local plans. During the

inspection we had the opportunity to read a number of overview reports, which were thorough and well considered. The council had also appointed a councillor with responsibilities as a children's champion. There was evidence that councillors had regular contact with children and young people.

Organisation structure and Accountability

- **9.5** The current organisational structure had been in place since July 2003. The restructure had been informed by work commissioned from external consultants and its planned effectiveness was based upon being fully staffed.
- **9.6** We were told that there had been no formal opportunity to review how well it was working. In general managers and social work staff felt that it had been an improvement although there were still areas of tension between workgroups. This was in large part due to recruitment and retention difficulties, but issues such as workflow, capacity and case responsibility still required some detailed work and agreement to resolve.
- **9.7** The steering group for the children's integrated service project group had produced a risk assessment on the potential impact of integration for core children's social care services. A generally cautious approach had been taken and senior managers were clear that they needed to communicate any future change proposals clearly. At the time of the inspection the final areas of responsibility at the top level of the new integrated children's service had been agreed and changes lower down the organisation, although not decided, were thought in the short term to be minimal. It was clearly recognised that the partition of adult and children's services needed careful management. In particular it was vital to ensure that effective operational working relationships in respect of child protection and transitional planning for disabled young people were in place.
- **9.8** The reporting arrangements within children's social services management structure were clear and regular directorate and senior management meetings took place. Similarly there were regular arrangements for meetings for managers within their functional group areas. Social workers we met felt generally well informed about changes and developments through team meetings.
- **9.9** From interviews with social workers and managers we could see that supervision arrangements were in place. However it was not always possible to see this from the files we inspected; file recording was not regularly signed off and in a few instances there was no evidence that assessments had been read or approved.
- **9.10** Business planning was in place at a strategic level and was evidenced by the children's services business plan. We also saw draft business plans for the functional service areas. However the connection of team business

plans to functional service area plans had not yet been made. Similarly individual performance appraisal had yet to be linked to team business

Quality Assurance Systems

9.11 There had been regular efforts to audit the quality of casework practice. The children's services management team held quarterly audits of casework practice. The information from these was used to disseminate through service managers. We had the opportunity to examine a recent audit of child protection and children looked after which was thorough and detailed.

plans. This was an area that required further development.

- **9.12** Service managers were also supposed to complete regular audits of casework and evidence this on files. We were unable to see that this was being regularly applied and those audit forms seen on files focused on processes and made no comment regarding outcomes.
- **9.13** The Area Child Protection Committee received regular detailed monitoring information on child protection activity and also considered multi agency practice through its quality monitoring sub-group. We were told that the focus on case practice within this group tended to be more toward social work practice than that of all agencies work.
- **9.14** A recent detailed and wide scale internal review of the quality of permanency planning and casework had been carried out by one of the independent reviewing officers. The report had not been completed at the time of the inspection but we were told that it would be shared within the child care managers' group and then disseminated.
- **9.15** Developing quality assurance and shared outcome indicators was an area that required a more detailed and structured approach both internally and with CYPSP, particularly in regard to the Preventative Strategy.

Human Resource Issues

9.16 Like many councils a critical issue for Torbay was being able to attract and retain sufficient qualified social workers. Continued shortfalls and high turnover in the Children in Need and Permanency Planning services had significant impact on both the effectiveness and quality of the services delivered. For example just before the inspection the Permanency Planning Service had the following vacancies as shown in table 8.

Table 8: Social work staff position Permanency Planning service
(at December 2004)

Social Work staff	Establishment	Actual numbers of staff
Qualified social workers	14	9.6
Senior practitioners	3	1
Unqualified community care workers	1	4.5
Total	17	15.1

- **9.17** Table 8 illustrates the approach Torbay had taken to recruitment and retention difficulties. There was a deficit of 6.4 qualified social work staff which largely accounted for the high level of unallocated work. These qualified posts had in part been filled by the recruitment of an additional 3.5 community care workers using the unfilled social worker posts. The decision to take this approach and allocate children looked after to unqualified staff had come after a lengthy period of disruption where turnover had been high and recruitment campaigns unsuccessful.
- **9.18** The approaches that had been taken to recruit and retain more qualified staff included:
 - recruiting five qualified social workers from Canada in 2003, of whom only two were left;
 - using qualified agency social workers;
 - regular national and local advertising of social work vacancies;
 - extending the salary scales for qualified social workers and senior practitioners; and
 - a retention bonus scheme and a market supplement for hard to fill posts.
- **9.19** We saw a draft corporate recruitment strategy, which identified a medium term solution of encouraging and supporting unqualified staff to qualify. This did not however address the immediate situation of allocating children looked after to qualified staff only.
- **9.20** The operational policy was to allocate children looked after to unqualified staff where there were no current court proceedings and where the child's situation was less complex. We were concerned that senior management saw this as an increasingly necessary expedient and were in fact looking to convert more of the qualified social worker posts into unqualified trainee social worker posts. In our view this was entrenching the problem and not

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addressing the short to medium term unqualified allocation issue. The last national advertisements for qualified social worker posts went out in July 2004. Regular advertisements for staff were carried monthly in the local newspapers. There was an Internet campaign that had drawn some interest from qualified workers leaving training, or working in other parts of the country. The only other approach we were told of was that in some instances agency staff could be used to take on particularly complex casework.

- **9.21** A more strategic method of recruitment was being designed, this was corporately led and involved pooling recruitment budgets from the various teams to achieve more satisfactory branding and consistency in advertisements.
- **9.22** A full examination of how existing qualified staff could absorb more of the unallocated children looked after cases had not yet been done. Amongst the areas that we recommended consideration were the current protocols for case holding that existed between the permanency planning and the care to community team.
- **9.23** In interviews with staff it was made clear to us that they were concerned that there was very little distinction in case holding responsibilities between unqualified and qualified staff in the permanency teams. We noted that one of the objectives of the permanency service was to reduce the numbers of children looked after by rescinding care orders. It was not clear how this would be accomplished with the current number of available qualified social workers.
- **9.24** Staff morale was generally best described as patchy, where teams were stable it was clearly better. Most staff we spoke with expressed a qualified optimism about the future integration of education and social work staff into one service. Similarly some felt Torbay's capacity to change was likely to improve, especially with leadership from a new top team. In interviews and through the staff questionnaire some of the key themes to emerge were:
 - managers were seen as generally supportive, but at times overwhelmed;
 - most senior managers were seen as visible and in touch with the front line;
 - some social workers were concerned that the current staffing situation was unsustainable and were considering moving from Torbay;
 - there was a variable view over caseload sizes, although there was appreciation that caseload sizes were generally reasonable, social workers were concerned however that they had insufficient support with a range of administrative and practical tasks;

- 9
- there was concern over placement choice and the weakness of preventative resources particularly for adolescents and their families;
- training was seen as a positive; and
- several staff expressed the need for management consultation and communication to improve, particularly in regard of the integrated service development.
- 9.25 Recruitment practices were on the whole safe and conformed to good personnel practice. Successful candidates were CRB checked and good arrangements were in place for references to be taken up. Satisfactory arrangements for induction were in place although we found that there was some variance in the experience of staff in terms of its content. We found that the training programme was well generally conceived and comprehensive and was well delivered through a corporate team. Post qualifying training was well established and there were satisfactory resources available to cover those on this training. Some managers had raised with us the need for more management training. In the past year there had been training for managers around key performance areas such as absence management, business planning and management of resources. It was recognised that management development was important and a key retention factor. A corporate management development programme was under development and due to be rolled out during 2005-6. This approach did not however offer the usual external accreditation

Information Systems

- **9.26** Overall we found that developments and change were communicated satisfactorily to staff.
- **9.27** Policies and procedures were available to staff on the intranet with one hard copy per team. There were plans to review and update the procedures during 2005.
- **9.28** Management information reports contained a comprehensive suite of national indicators and, along with budget reports, were regularly updated. All team managers had access to 'snapshot' reports of the activity recorded on the service user database SSID. Some managers did however not regard this information as reliable and some had created their own small systems. Despite the technical weakness of SSID the reporting of performance management information had, with much effort, yielded improved management on key national performance indicators. With the introduction of the new PARIS database it was recognised that managers would be able to greatly improve local management information. We recommend that useful local performance information should be developed as well as comparative benchmarking with other local authorities.

- **9.29** Torbay was at an advanced stage in planning the implementation of PARIS. All social workers would have 1:1 access to a computer as well as training in the new system in the first half of 2005. The new system, which aimed to introduce direct inputting by social workers, was on target to go live from the beginning of September 2005. The new system had much improved user friendliness and management information capacity. Similarly much work had been done in the procurement stage to ensure its technical capacity to connect with education, health and other partners to meet ISA requirements. Planning was well underway to insert the current business processes into the PARIS system. It was however considered likely to take till the Autumn of 2006 before the full management information benefits were realised.

A

STANDARD 1: NATIONAL PRIORITIES AND STRATEGIC OBJECTIVES

The council is working corporately and with other agencies to ensure the delivery of national priorities for social care, the national Personal Social Services objectives and their own local strategic objectives.

- **1.1** The council has a clear strategy for responding to the national objectives for children's social services, the National Priorities Guidance (so far as they concern children and families services) and other government initiatives, and is implementing this strategy.
- **1.2** This strategy is rooted in the broader corporate well-being and economic agenda of the council.
- **1.3** Social services is responding to national initiatives for children's services in collaboration with health, education and other agencies.
- **1.4** The council is using national and local performance measures to monitor and evaluate performance, and to develop strategic objectives, priorities and targets.
- **1.5** The council plans services for children and families:
 - that meet the identified needs of children and families in their area;
 - which incorporate national requirements with local initiatives;
 - with participation of staff at all levels;
 - in collaboration with health, education and other agencies;
 - through an appropriate range of planning processes.



1.6 The council has mechanisms for ensuring the regular and effective participation of parents, children and young people and other key stakeholders in the planning and development of services.

¹ The term 'Social Services' refers to the Social Services Department (SSD) in the council or (in councils with social services responsibilities which do not have a traditional SSD) to that part of the council that carries out social services powers and duties.



STANDARD 2: EFFECTIVENESS OF SERVICE DELIVERY AND OUTCOMES

Children and their families receive responsive services which promote children's life chances.

- **2.1** Parents and children report that the services they receive are of good quality and responsive to their needs.
- **2.2** Services for children:
 - Promote children's welfare and ensure they are safeguarded against sexual, physical and emotional abuse and neglect.
 - provide a range of support services to enable children to remain in their immediate or wider family where this meets the identifiable needs of the child;
 - avoid undue delay in finding alternative placements where necessary and provide choice to ensure individual needs can be met;
 - support children (and carers) in making a good attachment to alternative carers;
 - provide health care, education and other forms of treatment/care to suit the individual child's needs and maximise life chances;
 - improve the life chances of young people living in and leaving care through consistent support to enable them to become responsible, independent adults (Children Leaving Care Act 2000);
 - make explicit efforts to ascertain the child's wishes and feelings.
- **2.3** There is effective joint working between agencies at the point of service delivery, which puts children's needs before the convenience of organisations.



STANDARD 3: QUALITY OF SERVICES FOR USERS AND CARERS

Children and their families benefit from appropriate referral and assessment processes, planning and review arrangements which focus on the full range of needs of the child.

- **3.1** Social services produces and distributes comprehensive information to the public in a range of formats, about the nature, range and types of service provided and how to access them.
- **3.2** Referral and initial response services:
 - safeguard and promote the welfare of children;
 - recognise risk of harm to children and respond effectively to ensure children are safeguarded; and
 - are convenient and user friendly for children and their families.
- **3.3** Assessments of children and their families:
 - focus on safeguarding and promoting the welfare of the child;
 - take a holistic and lifelong view of the child's developmental needs to ensure the maximisation of their life chances;
 - identify the child's developmental needs, and the capacities of their primary carers to respond appropriately to these needs within the wider family and environmental factors;
 - inform decisions about what types of services are required to respond to the identified needs of the child and family members;
 - involve other agencies and professionals as appropriate in a multi-disciplinary and participative approach;
 - involve children and their families in a participative way unless to do so would place the child at risk of significant harm;
 - use methods which are known to be the most effective way of understanding the particular child's needs within their family and wider environmental context.



3.4 Plans:

- are based on the findings from the assessment;
- are constructed with the involvement of the child, parents, and other family members, carers and relevant agencies;
- ensure children in need, looked after and leaving care, gain maximum life chance benefits from educational opportunities, health and social care and employment;
- are focused on achieving the optimal outcomes for each individual child;
- are reviewed on a regular and independent basis and appropriate changes are made.
- **3.5** Monitoring systems are in place to ensure that all plans are implemented effectively and that the interventions are achieving optimal outcomes for each individual child.
- **3.6** Case records are accessible, comprehensive, accurate and up to date, and comply with departmental policies and procedures.



STANDARD 4: FAIR ACCESS

Social services provides a fair, consistent and inclusive service.

- **4.1** Children and their families have fair and equal access to services and those with similar needs are assured of similar access and outcomes, regardless of where they live.
- **4.2** Social services is working proactively to prevent exclusion from services for whatever reason; age, gender, ethnicity, religion, culture, sexuality and disability.
- **4.3** The council has published a Race Equality Scheme, which gives a clear account of how it will promote racial equality for children and families, in particular by identifying service outcomes and monitoring the impact of its policies.
- **4.4** Assessments of children and families from minority ethnic communities take account of:
 - the specific developmental needs of these children, including the impact of racism, and;
 - how these will be addressed.
- **4.5** Assessments of children with a disability address the specific steps which should be taken to ensure the same standard of service to the child compared to that made available to a child without a disability. The process of assessment, care planning and review ensures that disabled children are appropriately safeguarded and protected.
- **4.6** There are systems in place for identifying the numbers of unaccompanied asylum seeking children in the area, and for ensuring that they receive services which are appropriate to their identified needs.
- **4.7** There are effective mechanisms for listening to parents, children or carers who may wish to comment about their services, or use the complaints system.



STANDARD 5: COST AND EFFICIENCY

Social services commissions and delivers services to clear standards covering both quality and costs by the most effective, economic and efficient means available.

- **5.1** Social services has established a budget which is consistent with its strategic intentions, and is capable of delivering the required outcomes.
- **5.2** Managers use a range of information on service need, cost, quality and outputs to make informed decisions about service provision and development.
- **5.3** There is clear management accountability for budgets with financial and managerial responsibility aligned so that resources are used flexibly and creatively to achieve best outcomes.
- 5.4 There are robust systems in place to support the management of resources.
- **5.5** Social services has in place the key elements for good commissioning needs analysis, strategic planning, contract setting and monitoring, and market management.
- **5.6** Services planned and delivered in partnership with other agencies are supported by sound joint financial arrangements, pooled budgets and clear lead commissioning arrangements.
- **5.7** The council's Best Value Review programme is ensuring continuous improvement in service development and provision.



STANDARD 6: MANAGEMENT AND RESOURCES

Social services has management and accountability structures that commission and provide safe and effective services.

- **6.1** Councillors have clear responsibilities for social services for children and families, including arrangements for the review of policy and strong scrutiny arrangements for their performance.
- 6.2 Social services has an organisational structure which has:
 - clear accountability arrangements for all children and families responsibilities to the Director of Social Services;
 - clearly defined liaison arrangements across client groups or council departments when social services are combined with other functions;
- **6.3** Social Services demonstrates the capacity to manage change effectively for the benefit of service users.
- **6.4** Social services has a business planning and performance management process within which all staff understand their responsibilities for delivering the strategic objectives of the service, supported by regular supervision and appraisal.
- 6.5 Organisation and management are supported and informed by:
 - management information;
 - policies and procedures for staff;
 - information and communication systems for staff.
- **6.6** The council has robust monitoring arrangements to ensure that the services it commissions and provides are of good quality, cost effective, responsive to need and promote children's wellbeing and life chances.
- 6.7 Social services monitors the composition of its workforce to ensure that the workforce profile reflects the composition of the local community.
- **6.8** Social services ensures that its workforce is of sufficient size and stability; is appropriately qualified, experienced and skilled; and undertakes required and appropriate training and development.



6.9 Social services ensures that:

- all staff, councillors, contracted workers, volunteers and staff from commissioned services who have significant and unsupervised access to children are regularly vetted;
- there are arrangements to support staff in reporting alleged misconduct by colleagues or senior staff;
- systems are in place for monitoring staff capabilities and taking any necessary corrective actions;
- a strategy is in place for combating violence against staff.

Inspection Background and Method

B.1 Evidence for this inspection was collected in various ways.

Advance Information from the Council

B.2 A questionnaire was completed by the department to provide basic data about the service in relation to CSCI standards and criteria. A range documents were supplied as well as a position statement regarding Torbays children's services.

Information from Other Agencies

- **B.3** Other agencies were asked to comment on the council's performance in collaborative working.
- **B.4** The inspection used standards and criteria drawn from legislation, guidance, research and understanding of good practice. These are reproduced in Appendix A of this report.
- **B.5** During the course of the inspection the team:
 - carried out 62 interviews, of which all but 5 were face to face. This excluded the additional enquiries raised through service user enquiries;
 - made two observational visits;
 - observed the intake duty system;
 - examined five personnel files

Postal Survey

- **B.6** Ninety parents were invited to complete our pre-fieldwork postal questionnaire about the views of the service they had received and the outcomes achieved. Twenty five parents (28 per cent) replied. Findings from this survey are reflected in the report.
- **B.7** Eighty five pre-fieldwork questionnaires were sent to young people. Twenty seven responses were received (32 per cent). Findings from this survey are reflected in the report.

- **B.8** Twenty three agencies and professionals who worked with children young people and families were asked to write to the CSCI giving their views on the level and quality of collaboration achieved by the department with them. Ten replies were received. Some of the respondents as well as other agency representatives were interviewed as part of the inspection programme.
- **B.9** We read 10 case files in detail for the case study. These cases were selected to ensure a balance of age, gender, ethnicity, the nature of support or intervention and the length of time they had been receiving services. We read another six case files in response to the Laming Inquiry requirements as well as examining a further seven files. We also followed up on issues relating to a pre fieldwork request from one family.

Key Worker Profiles

B.10 Key workers completed a case profile which outlined their work and the progress achieved. We held interviews with carers and key workers and we interviewed parents whenever possible.

Interviews

- **B.11** We conducted face to face interviews with the following, either as individuals or as part of group meetings;
 - the leader of the council, the executive member for children's services and councillors involved in the scrutiny of children's services;
 - the Chief Executive;
 - Chief Executive Children's Services (designate);
 - Director of Social Inclusion;
 - Director of Learning and Resources;
 - Assistant Director Children's Social Services;
 - Senior managers Policy Performance and Training;
 - Senior managers Education Service;
 - Senior managers Adult Social Care Services;
 - Children's Policy Officer (Social Services)
 - Operational Managers ;

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- Youth Offending Team management;
- Service Managers;
- Independent Reviewing Officers;
- Contracts manager;
- Finance managers;
- Personnel manager;
- ACPC members from various agencies including Police and Health representation;
- Senior Health representatives;
- CAFCASS representatives;
- Council legal representative;
- Equalities Officer;
- Foster carers;
- Social workers;
- Residential social work staff;
- Family centre staff;
- Voluntary agency representatives;
- Care leavers group;
- Young people looked after;
- TNT (Teenage Network Torbay) representatives;
- An ADHD parents group;
- A group of families involved with the Family Group Conference service.

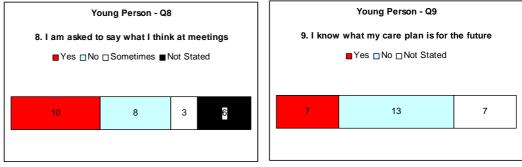
Questionnaire Results

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Results from Children's Questionnaires

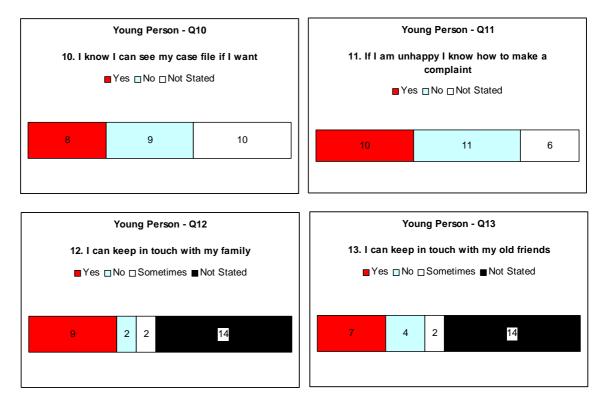


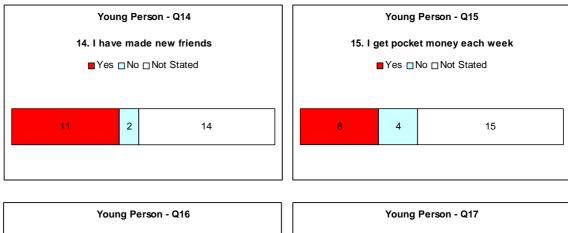
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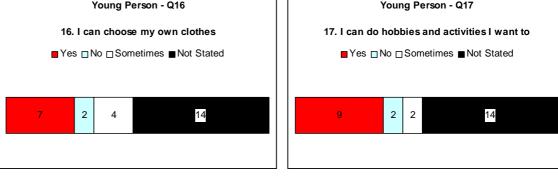


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Results from Children's Questionnaires continued

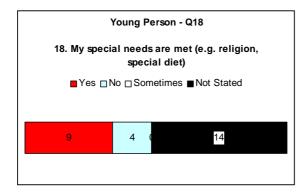






C

Results from Children's Questionnaires continued



Young Person - Q19			
19. Since social services have known me my life has:			
■Got better □Got worse □Stayed the same ■Not Stated			
9	8	3	7

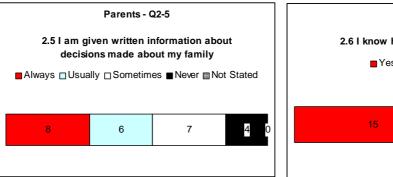


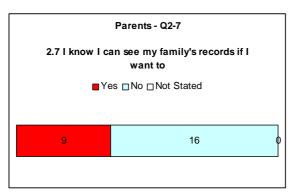
Results from Parents Questionnaires

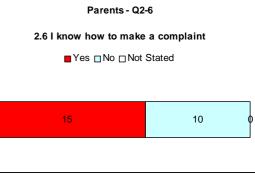


C

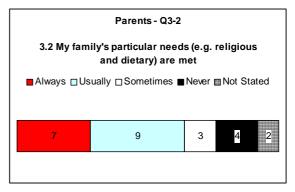
Results from Parents Questionnaires continued

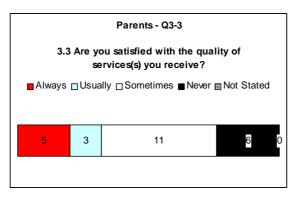






Parents - Q3-1			
3.1 Social Services treat me with respect			
Always Dusually	□Somet	imes ∎Never ⊞Not S	stated
9	4	9	3 0

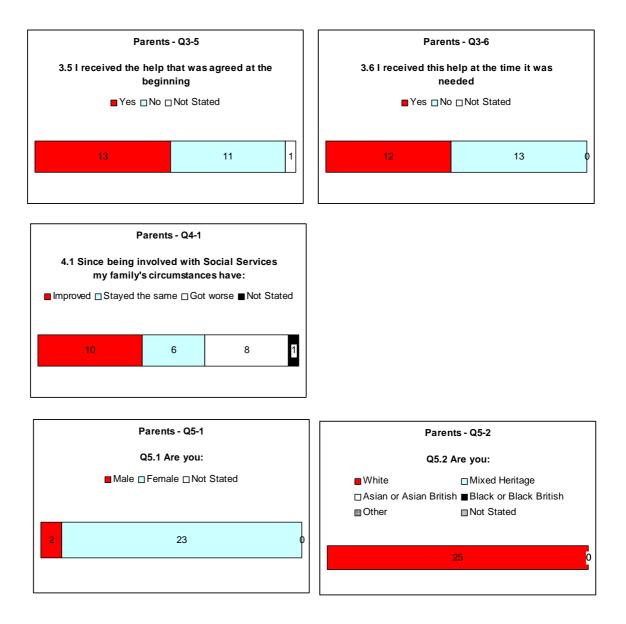




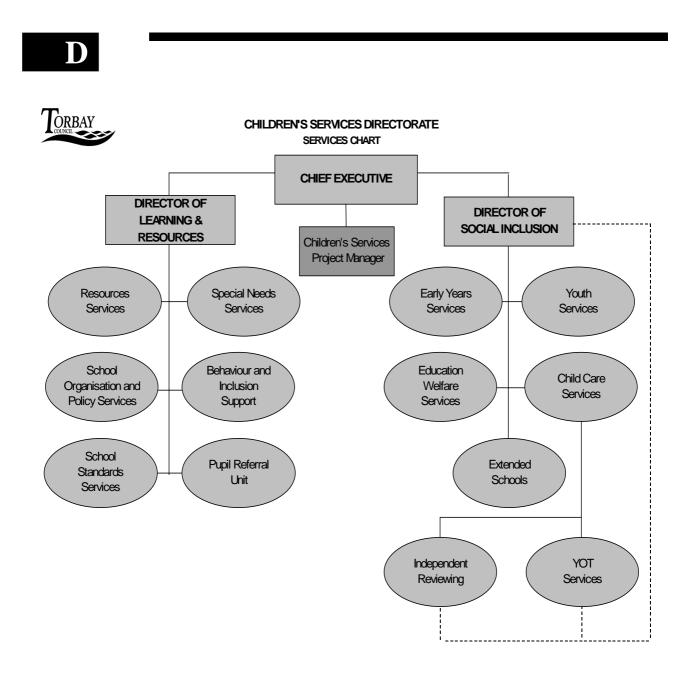




Results from Parents Questionnaires continued

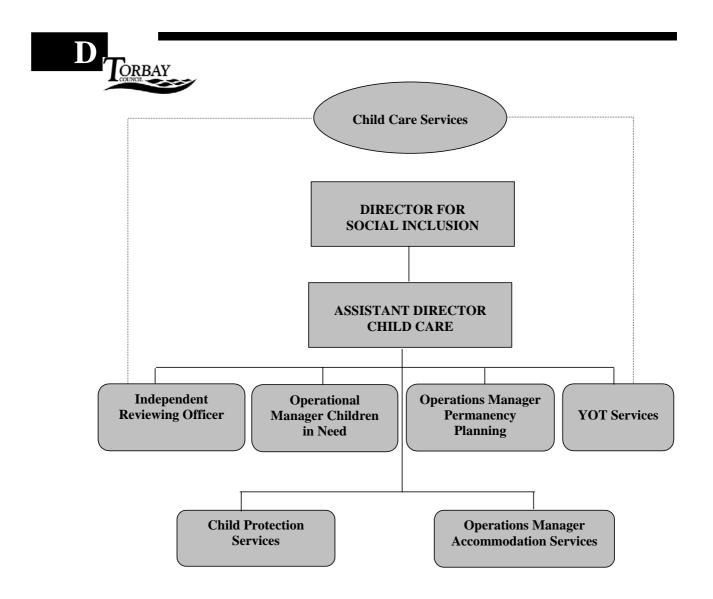


Structure Charts



A

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Victoria Climbié Evaluation

E

Victoria Climbié Evaluation

AUDIT OF SERVICES TO CHILDREN IN NEED In Response to the Practice Recommendations of the Victoria Climbié Inquiry Report -Torbay Children's Services

1 Referral	Serves some children well
Systems were in place to action, au	udit and monitor referrals.
Other agencies were not regularly o	confirming referrals in writing.
2 Assessment	Serves some children well
Assessments were variable in the run-evidenced.	ecording of information and analysis was often missing or
Clear systems to monitor assessme	ent timescales within the intake service were not in place.
All parts of social services were not procedure	following the same child protection assessment
3 Allocation, service provision and closure	Serves some children well
Completion of up to date chronolog	ies on files was inconsistent.
The levels of service delivery and s	upport in relation to assessed need was inconsistent.
Allocation of child protection casew not assured.	ork to suitably skilled and experienced social workers was
4 Guidance	Promising capacity for improvement
Policies and procedures were in pla	ace and were about to be revised.
Compliance with procedures require	ed closer monitoring by service managers.
5 Training and development	Promising capacity for improvement
Not all staff working with Children ir	n Need were suitably trained.
Induction arrangements and the scl	heduling of child protection training were largely in place.
Sec 47 Enquiries were always conc always competent.	ducted by qualified social workers though they were not

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6 Organisation and Management	Uncertain capacity for improvement
Case records were not being routinely scruti	nised as part of supervision.
A random examination of case files from the protection.	intake team showed uncertain management of child
Arrangements for the management of the int inadequate and uncertain.	ake service at the time of the inspection were
7 Governance	Promising capacity for improvement
Chairing of the Local Children's Safeguardin Executive Children's Services from April 200	g Board would become the responsibility of the Chief 5.
•	e of purpose and direction over joint accountability opment within the whole safeguarding system.
Preparation for new arrangements for govern Board requirements were at a very early stag	nance and accountability under Local Safeguarding ge.
Overall Judgement • Se	erving some children well
i	

Overall Judgement	•	Promising capacity for improvement
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