

Children and Young People Service Plan 2017/2018

CITY OF
WOLVERHAMPTON
COUNCIL

Our mission:
Working as one to
serve our city



Contents

Introduction.....	3
The Wolverhampton Context.....	5
Health	5
Education.....	5
School Attendance.....	6
School Exclusions.....	6
Post-16	6
Not in Education, Employment or Training (NEET)	7
Children’s Social Care	7
Children and Young People’s Service.....	8
Early Intervention	10
Children in Need/Child Protection	13
Specialist Support Service	15
Looked After Children	17
Education of looked after children	17
Fostering.....	18
Adoption	19
Corporate Parenting	20
Participation	21
Care Leavers.....	23
Youth Offending Team	25
Inclusion Support.....	26
HeadStart	28
Safeguarding	29
Child Sexual Exploitation (CSE)	29
Violence Against Women and Girls (VAWG).....	30
Workforce	31
Commissioning.....	32
Sufficiency Strategy	33
Performance Management and Quality Assurance.....	34
Performance Management	34

Quality Assurance.....35

APPENDIX 1 – SERVICE STRUCTURE37

APPENDIX 2 – SERVICE MODEL.....38

1. Introduction

- 1.1 This plan sets out the vision, priorities and actions that the City of Wolverhampton Children and Young People's Service will be focusing on during 2017/18. We have been on a journey of improvement and transformation since 2014 and are now in the position where we need to consolidate and embed the new ways of working that have been introduced whilst at the same time continue to innovate and improve the way we work with children and families and other key stakeholders in the city. Our achievements have been acknowledged by our recent Ofsted inspection of Children's Services where we were judged as '**good**'. Although this is a significant achievement for the city, we are determined to achieve '**outstanding**' services for children, young people and families living in Wolverhampton.
- 1.2 Despite being faced with significant financial challenges, there has been continued investment in services for children. Working as part of the People Directorate has put us in a strong position to work across children and adult services, ensuring smooth transitions and promoting a whole family approach. A good example of this is the Multi-Agency Safeguarding Hub which was established in January 2016 and is working to ensure all vulnerable people in Wolverhampton are safe and protected from harm.
- 1.3 Historically, the number of children in care in Wolverhampton has been considerably higher than comparator authorities, with more than twice the national average rate per 10,000 of the under 18 population. The rate was increasing annually from 2009 to 2014, reaching 807 at its peak. In May 2014, the Families First Programme was introduced which put greater emphasis on tackling problems within the family unit and offering support at an earlier stage, preventing the need for children and young people to become looked after. This work, together with the co-location of early help and social care and the successful completion of Phase One of the Troubled Families Programme has significantly contributed to year on year reductions in looked after children. The number as at the end of March 2017 was 643.
- 1.4 In January 2016, work moved from improvement to transformation. A Transforming Children's Board was established in order to oversee the delivery of key projects including:
 - the revised early intervention model and specialist support service, ensuring families that need help are identified early and receive the right support at the right time;
 - the continued development of the Multi-Agency Safeguarding Hub to ensure a whole family approach to protecting children and families;
 - a sustained focused analysis and work on looked after children to ensure only the right children come into the system and when they do that permanency is secured for them in a timely manner;
 - the review and transformation of child and adolescent mental health and emotional wellbeing services including HeadStart; and
 - the development of a 16+ Strategy in order to improve the support and options available to increase the engagement of young people in education, employment and training.
- 1.5 This plan directly contributes to the delivery of the [City of Wolverhampton Council Corporate Plan 2016/2019](#) and in particular relates to:
 - **Promoting independence for people with disabilities**
 - Increase access to early intervention and prevention services to improve resilience and mental wellbeing of children and young people
 - Maximise the independence of children and young people with a disability or a special educational need by ensuring they have a personalised Education, Health and Care Plan
 - **Strengthening families where children are at risk**
 - Ensure that children and families have swift and co-ordinated access to the right services and the right time
 - Achieve positive and sustained change by working with the whole family
 - Safely prevent family breakdown by supporting children and families

- **Challenging and supporting schools to provide the best education**
 - Ensure that vulnerable children and young people receive suitable education in local schools or effective alternative provision.
 - **Keeping the City Safe**
 - Preventing Youth offending and reoffending by providing statutory oversight, support and diversion
- 1.6 In addition, the priorities in this plan contribute to the delivery of the [Wolverhampton Children, Young People and Families Plan 2015-25](#) which sets out what the Children's Trust Partners will do so that children, young people and families can live healthy happy lives. It includes four clear priority areas: **child poverty; education, training and employment; family strength; and health**. The City of Wolverhampton Council is a key member of the Children's Trust which is responsible for ensuring that the aims of the plan are delivered. The Cabinet Member for Children and Young People is the Chair of the Trust and the Service Director for Children and Young People is the lead officer for the priority 'family strength' and co-ordinates work to deliver this through the Strengthening Families Board.

2. The Wolverhampton Context

- 2.1 A total of 58,167 children and young people under the age of 18 years live in Wolverhampton. This is approximately 22.9% of the total population in the area. Approximately 31.5% of the local authority's children and young people (aged 0 – 17) are living in poverty; this rises to 50% in 10 Lower Super Output Areas. This is higher than the national average.
- 2.2 The proportion of children entitled to free school meals:
- Primary schools (including reception) - 20.5% (the national average is 14.5%)
 - Secondary schools (including Academies) - 19.7% (the national average is 13.2%)
- 2.3 Children and young people from BAME groups account for 41.6% of all children living in the area compared with 21.5% in England. Approximately 42.7% of children aged 5-17 are from a BAME group compared with 24% in England. The largest BME group of children and young people in the area are Asian Indian (born in the UK).
- 2.4 The proportion of children and young people with English as an additional language:
- Primary schools - 27.2% (the national average is 20.1%)
 - Secondary schools - 22.5% (the national average is 15.7%)

2.5 Health

- 2.5.1 The health and wellbeing of children in Wolverhampton is generally worse than the England average. Wolverhampton has an infant mortality rate of 6.4 per 1,000 (2012-14) compared to 4.0 per 1,000 for England and Wales. Over the past 20 years there has been a 30% reduction in the average infant mortality rate for England and Wales, whereas in Wolverhampton the local infant mortality rate has largely remained static over this period. Despite a slight fall in the rate in 2012-14, Wolverhampton remains one of the local authorities with the highest rates of infant mortality in England and Wales.
- 2.5.2 The child mortality rate (1 – 17 years) is 15.8 per 100,000 (the national average is 12.0). This is similar to the national average and equates to the death of 26 children between 2012 and 2014.
- 2.5.3 Children in Wolverhampton have statistically significant worse than average levels of obesity:
- In 2015/2016 the rate of obesity for children aged 4-5 years is 12.2% (the national average in 2014/15 was 12.3%)
 - In 2015/2016 the rate of obesity for children aged 10–11 years is 26.8% (the national average in 2014/15 was 19.1%)
- 2.5.4 By Year 6, 40% of young people in Wolverhampton are overweight or obese and in response we are taking a whole systems approach across a range of partners. In response, an Obesity Action Plan has been produced.
- 2.5.5 The current rate of under 18 conceptions age 15 to 17 years (2014) in Wolverhampton is 29.6 per 1,000 which is a 6% reduction in the previously reported rate of 31.5 per 1,000 (2013). Although the rate of under 18 conceptions has remained significantly higher than the England average (currently 22.8 per 1,000), there has been a consistent reduction in Wolverhampton since 2007. Overall, there has been a 52% reduction from 61.1 per 1,000 reported in 2007 which equates to a decrease in the number of conceptions from 301 to 137 over the past 7 years.

2.6 Education

- 2.6.1 There are 40,798 pupils on roll in 114 schools. 84 of these schools are maintained by the local authority, the rest are made up of academies or free schools. A total of 60 (53%) primary and secondary schools in Wolverhampton are in the most deprived quintile nationally as defined by Ofsted. Only one school is classed as being in the least deprived category. 24% of pupils are eligible for free school meals and 25% have English as an additional language – against national

figures of 14% and 18% respectively – and 17% of pupils have special educational needs against a national average of 14%.

2.6.2 Educational standards across the city are improving rapidly. The sustainability of this upward trend is a key priority in order to ensure that children and young people have the skills and confidence they need to reach their aspirational potential to support the longer-term development and prosperity of the city.



2.7 School Attendance

2.7.1 The overall absence rate for primary schools reduced from 5.4% in 2012/13, to 4.3% in 2014/15 and 4.2% in 2015/16. The percentage of primary pupils classed as persistent absentees reduced from 3.7% in 2012/13 to 2.1% in 2014/15. However, in September 2015 the persistent absence threshold was changed from 15% to 10%. In 2015/16 the percentage of primary pupils classed as persistently absent was 9.7% but the change in threshold means this data cannot be compared against previous years.

2.7.2 The overall absence rate for secondary schools has reduced from 6.4% in 2012/13, to 5.2% in 2014/15 and 5.1% in 2015/16. The percentage of secondary pupils classed as persistent absentees reduced from 7.7% in 2012/13 to 5.0% in 2014/15. Following the change in the persistent absence threshold in September 2015, this resulted in secondary persistent absence increasing to 13.2%.

2.7.3 In 2015/16, for cases where the local authority intervened, there was a 7.8% average reduction in unauthorised absence following intervention.

2.8 School Exclusions

2.8.1 There was a significant increase in the number of permanent exclusions during 2013/14 and 2014/15. Since 2012/13, exclusions have steadily increased to ten permanent exclusions in 2012/13 and twenty eight in 2014/15 (official statistics were released in June 2016). There were six permanent exclusions from primary schools in 2013/14. In 2014/15 there were seven. Provisional data for 2015/16 indicates this has risen to twenty. There were four permanent exclusions for secondary schools in 2013/14. In 2014/15 there were twenty one. Provisional data for 2015/16 indicates this has risen to ninety one.

2.9 Post-16

2.9.1 The City continues to perform well, particularly in vocational/technical learning. Third in the country in 2015 and for all level 3 qualifications the City is ranked 14th nationally. A review of post 16

priorities was recently undertaken which included the need to address issues around the quality and breadth of alternative provision for vulnerable learners, including young offenders, looked after children and SEND learners. This has led to the development of a quality assurance framework which will be trialled during 2016/17 across all Wolverhampton commissioners of 14-25 alternative provision.

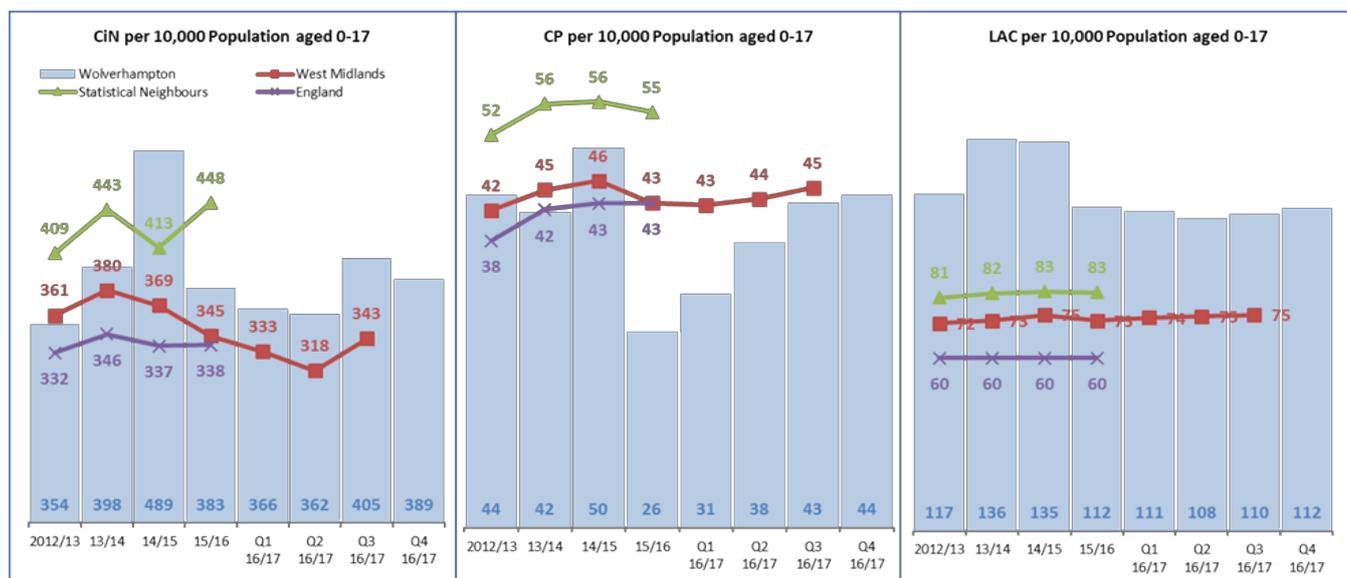
2.9.2 A new strategic plan has also been produced which includes five priorities relating to education and skills development:

- Improving partnership and collaboration
- Supporting aspirational attainment
- Ensuring demand led and inclusive post 16 provision
- Developing a skills pipeline to sustainable employment
- Planning capital investment

2.10 Not in Education, Employment or Training (NEET)

2.10.1 Current performance is good - 2.8% against a target of 3.9%. Nationally, NEET figures have been reducing. However, this needs to be set against the increase in 'not known' that is occurring across England. This is a current focus for the service locally.

2.11 Children’s Social Care



3. Children and Young People's Service

3.1 The Children and Young People's Service is located within the People Directorate. The People Directorate brings together services for adults; public health; and children and young people under the responsibility of the Strategic Director, People. Each service area is led by a Service Director who in turn manages a number of Heads of Service. The Head of Safeguarding and the Head of Strategic Commissioning are directly line managed by the Strategic Director, People. This structure was introduced in October 2016. The Cabinet Member for Children and Young People Chairs both the Children's Trust Board and Corporate Parenting Board and plays a key role in driving forward the transformation agenda.

3.2 **Appendix 1** sets out the service structure for Children and Young People and **Appendix 2** provides an overview of the service delivery model.

3.3 **Our Vision for Children and Young People Services is:**

- To develop respectful and empowering relationships with children, young people and families
- To ensure children are at the centre of everything we do
- High aspirations, high expectations

3.4 **We will deliver this by:**

- Investing in a stable and skilled workforce
- Ensuring consistent, high quality practice specifically with regard to assessment, analysis, SMART plans and the voice of the child
- Creative and innovative approaches to supporting children, young people and their families
- Ensuring services are provided at the earliest point of identified need
- Working with our partners to keep children safe and protect them from harm
- Supporting families to stay together where it safe to do so
- Reducing youth offending
- Ensuring our looked after children are healthy, happy and have access to good quality education and employment
- Listening to children and young people and providing a range of opportunities for them to participate in co-designing services

3.5 This Plan is underpinned by a range of thematic strategies and action plans which each individually focus on driving forward work to improve outcomes for children, young people and families. It provides an overview of priorities and activities across the Children and Young People's Service so that we can make sure that we maximise the impact of each and every one of them which will put us in a better position of achieving our overall vision and ambition. In addition to the team level priorities for 2017/18 contained at the end of each section of this plan, there are a range of service level priorities:

2017/18 Priorities for the Children & Young People Service:

- Continuing to support the corporate financial position and ensuring that services for children and young people are being successfully delivered and commissioned in the most cost effective way
- Transforming the way that we work, providing the workforce with the tools and training to be agile and productive
- Delivering consistent and quality services to children, young people and families, with child centred assessments clearly recording and listening to the voice of the child
- Embedding the culture of participation and ensuring feedback from service users is captured, analysed and used to inform service improvement
- Working effectively in partnership with other statutory and voluntary agencies to develop and deliver integrated approaches and improved outcomes for children and young people
- Ensuring that the service is in a good position to respond to the SEND Inspection
- Delivery of the Ofsted Action Plan
- Achieving '**outstanding**' services for children, young people and families in Wolverhampton

A detailed Improvement Plan has been produced which will be used to monitor overall delivery of this plan.

4. Early Intervention

- 4.1 Early identification and intervention is a key priority for the City of Wolverhampton Council and safeguarding partners. During 2016 the services were subject to fundamental transformation and redesign in order to ensure that there is a focus on children and families with the greatest need and to improve the effectiveness of interventions. A 0-18 Strengthening Families model, based on 8 locality hubs, was developed working with whole families and an emphasis on outreach.
- 4.2 In addition, a central team of universal service practitioners was created who deliver a number of interventions at both group level and one to one. One of the key targets for this service is increasing take-up of the 2 year old nursery offer. Since the team formed in April 2016, they have supported over achievement of both local (75%) and national (70%) targets with 80% of eligible children accessing a place in the Spring 2017 term.
- 4.3 Another successful aspect of the redesign has been the creation of parent champions, managed through the early year's team. Up to 31st March 2017, 18 have been recruited. Of these, seven have moved into permanent employment and eight have accessed training and are actively seeking employment which is something that they have all said would have been difficult or not a priority if they had not become a parent champion. A further seven are due to start the process in April 2017. They engage in various work streams, signposting parents to early intervention services such as the 2 year offer and groups within the community. They act as advocates for early intervention and actively recruit additional parent champions across the city. Wolverhampton's Parent Champion co-ordinator has won parent champion co-ordinator of the year through the Family and Childcare Trust.
- 4.4 Since September 2016, work has moved from an internal focus on restructuring/re-design to ensuring the transformation delivers a whole system approach. This is critical to ensuring that the council can direct its resources towards the families needing targeted support whilst partners play their part in supporting families through early intervention. A model for locality multi-agency working has been developed which ensures that there are a range of forums in place which bring agencies together to:
- set strategic priorities and agree related actions for the local area;
 - provide regular updates on work taking place in the area; and
 - facilitate discussions on concerns relating to individuals and families which enable robust joined- up approaches to supporting families.
- 4.5 The key to partners being able to play their part in early intervention is an effective early help assessment tool. Over the last 18 months work has been undertaken to develop an improved early help assessment system. The system went live in July 2016 and following testing with internal services it was made available for broader partner agency use in October 2016. All professionals have been offered training and initial feedback from new users suggest that the new system is more reliable and easier to use. There is further work to do in relation to the numbers of early help assessments held by agencies other than the local authority although with the new system now in place, it is anticipated that this will improve.
- 4.6 Monthly surgeries have also been introduced which provide an opportunity for professionals to drop-in and discuss concerns that they may have about an individual/family with managers from the strengthening families hub and educational psychologist. The surgeries aim to support early intervention work being undertaken by partners and ensure cases are being dealt with in the right threshold.
- 4.7 A key source of referral for support from early intervention is through the early help desk based within the Multi-Agency Safeguarding Hub (MASH). In the 11 month period up to November 2016, 3727 children have been subject of referrals that have been sent through to the hubs for a response. The development of the MASH in January 2016 has ensured that where safeguarding referrals do not meet the child in need or child protection threshold, alternative support can be

offered through the Early Intervention Service. This will prevent future re-referrals of the same families because they will be receiving the right level of support at the right time.

- 4.8 All Strengthening Families workers in the early intervention locality teams have been trained in the use of Outcome Star. The star is completed at the first intervention with the family, ensuring an accurate baseline is established. Evidence is available to demonstrate that families that receive support do have improved outcomes with 69% of families showing improvement against the ten domains of the family star and 67% of children showing improvement against the eight domains of the my star. The number of stars initiated has increased in line with the increase in case loads.
- 4.9 Having developed a more targeted approach to the work carried out by Strengthening Families Workers, there has been a shift towards whole family working. Between April 2016 and March 2017, the service has worked with 4480 children, with 1793 of these being closed within the same period as a result of the outcomes of the plan being achieved.
- 4.10 14% of the overall caseload within Early Intervention is supporting plans held within Social Care and currently workers are part of the team around the family for 32% of all child in need plans and 49% child protection plans. 86% of cases held within early intervention are managed through an early help plan.
- 4.11 A positive trend from the data between April 2016 and December 2016 shows that of the cases worked at early intervention level, only 11% required escalation to Social Care, demonstrating that support is being offered in the majority of cases at the right level and the right time to prevent families requiring more specialist services.
- 4.12 One of the key objectives when working with families is ensuring the family have sufficient income and in particular, tackling worklessness. Early intervention has been successful in securing resources through the Youth Employment Initiative which aims to get 16-29 year olds into training or employment. An impact worker has been allocated to work intensively with identified families and is supported by eight champions within the strengthening families hubs.
- 4.13 Health Visitors are co-located in the strengthening families hubs which supports joint early identification of families that may need support and enables more effective information sharing and integrated approaches. This will be further strengthened by the implementation of a remodelled healthy child programme in August 2017. The specification has been developed to ensure that it is closely aligned with the principles of the early intervention redesign. Further integration is planned in December 2017 via the implementation of a single 0-5 case record which will avoid duplication and support improved information sharing.
- 4.14 In addition to Health Visitors, there are four police officers co-located across the eight hubs which facilitates effective partnership working in relation to community safety and early intervention in localities. Work continues on defining their role in order to ensure they are working in the most effective way and having a direct impact on improving outcomes for children and families.
- 4.15 Work is being undertaken between Early Intervention Services and the Youth Offending Team to ensure that young people at risk of offending are identified and are offered/signposted to appropriate services to avoid their escalation into the Youth Justice system.
- 4.16 An Early Years Strategy 2017-21 has been developed that focuses on workforce development; good maternal mental health; parental engagement; and quality of early years provision. The aim of the strategy is to ensure that all children have an equal chance to have a good start in life supporting them to have a good level of development as measured at the end of reception.
- 4.17 Early Intervention is a key stakeholder in the Barnardo's Domestic Violence Joint Screening Process. As part of this, eight strengthening families' workers have been identified as champions with the key aim of being a single point of contact within the locality for domestic violence reports from the joint screening meetings, ensuring every family has a safety plan in place, including

sharing information with schools where appropriate; collating data to monitor impact and outcomes; and identifying gaps to inform future commissioning. This process ensures that early intervention is responding to incidents of reported domestic violence where children are associated with the household with the intention of preventing escalation or the need for social care assessment.

- 4.18 Phase 1 of the Troubled Families Programme has been successfully completed with 810 families being turned around. Phase 2 commenced on 1st April 2015 and an Outcome Plan has been produced. Up to the end of December 2016, 1435 families have been identified and are being worked with and 68 payment by results have been claimed. It is estimated that when the next payment by result window opens in January 2017 that a further 100 families will have been turned around. The whole family approach has been embedded into the Children's Services redesign. Multi-agency governance for the programme is provided via the Strengthening Families Board to ensure there is support across the partnership to drive the programme forward and influence transformation across public services.

2017/18 Priorities for Early Intervention:

- Embedding the redesign; revised ways of working; and the targeted early help offer
- Embedding the use of outcome star assessment in order to evidence distance travelled and outcomes for families
- Strengthening knowledge & understanding of local needs to assist in identifying families who require targeted Early Help
- Delivering the Early Years Strategy – increasing the number of children achieving a good level of development
- Improving universal contact with families through integration of health professionals and the development of a single record
- Increasing the use of Early Help Assessments across partner agencies
- Continuing to refine the processes for the identification and engagement of families that fit the troubled families criteria focusing specifically on ensuring significant and sustained outcomes

5. Children in Need/Child Protection

- 5.1 Within the Child Protection Service there are eight social work units, managed by nine Social Work Unit Managers (SWUMS), geographically located within the eight strengthening families' hubs. The SWUMS are accountable to four Senior Social Work Managers. The service is integrated with professional staff from early intervention, health and police. This enables joined up working opportunities and greater seamlessness in the escalation and de-escalation of individual cases. In addition, the Head of Child Protection has been responsible for the Disabled Children and Young People Team since September 2016. This has ensured that there are consistent assessment and planning processes in place for all children and young people.
- 5.2 There has been increased capacity in the social work structure to reduce caseloads of front line managers and ensure manageable caseloads across the social work teams. In addition, six advanced practitioners have been appointed to work across teams to improve the quality of management and practice.
- 5.3 Social work visits to children subject of child protection/children in need plans fulfil a range of critical roles and functions to enable the child's circumstances to be observed and monitored, particularly if the visits are unannounced. Visits are carried out at least once a month but social worker visits may be set at a higher frequency as set out in the child protection plan. At the end of December 2016, 83% of children subject of a CP plan had up to date visits, 72% of visits had been completed on time in the previous 12 months and 43% of children had received all of their visits on time.
- 5.4 The Multi-Agency Safeguarding Hub (MASH) was introduced in January 2016 and has put Wolverhampton in a good position to effectively respond to safeguarding referrals and strengthen the referral and assessment process. It provides the first point of contact and referral for early intervention and safeguarding referrals. The social care referral policy ensures that all children and young people referred receive a timely and appropriate initial response. Where threshold for social care support is not met a referral is passed immediately to early intervention, in accordance with the joint working protocol and the Wolverhampton Safeguarding Children's Board thresholds to support policy. There are approximately 375 enquiries relating to 800 children per month and the proportion of the enquiries that are put through the hub has been rising month on month. In order to respond to this increased demand, additional social workers have been recruited in the MASH to undertake all single assessments. This provides additional resilience and takes unnecessary pressure off locality teams.
- 5.5 The MASH consists of professionals from Children and Adult Social Care, Early Intervention, Police, Wolverhampton Homes, Recovery Near You, Probation Service, Multi-Agency Risk Assessment Conference (MARAC) Co-ordinator, Royal Wolverhampton NHS Trust, Black Country Partnership Foundation Trust and Wolverhampton Clinical Commissioning Group. It is enabling agencies to improve the timeliness and effectiveness of responses to early intervention and safeguarding referrals by providing access to real time partnership information and facilitating speedier understanding of levels of risk. This has been achieved through a significant piece of joint partnership working. The MASH was extended to include safeguarding adults at the end of August 2016 and further work is ongoing to ensure an integrated approach to safeguarding across children and adults.
- 5.6 The Emergency Duty Team (EDT) is managed through Adult Services. EDT provides a single point of contact to access children and adult social care services out of hours. They work closely with day time services in order to ensure a joined up approach. In addition, there is always a manager from children's services on call out of hours to provide advice and support. Work is currently taking place with other local authorities in the Black Country to develop a Black Country-wide service which will go live in September 2017.

5.7 Disabled Children and Young People's Team

- 5.7.1 The Disabled Children and Young People Team (0-25 years) comprises a service manager, social work unit managers with operational responsibility for experienced social workers, social

care workers and a carer's support officer. Since September 2016, the service has been managed by the Head of Child Protection. Joint working arrangements have been agreed with the MASH to ensure that all safeguarding enquiries and referrals where children have additional or special needs are dealt with consistently. The service, together with partner agencies, works to encourage and support families to build resilience, adopting a solution-focused approach to resolving difficulties as they arise.

- 5.7.2 An extensive transition project has facilitated key stakeholders including Connexions, health, education, post-16 education providers, social care (children and adults) and finance to work in partnership to deliver a more robust framework to support a seamless experience of transition. There is an emphasis on working with both housing and care providers to look at supported and independent living to ensure that residential options are only considered when every alternative has been exhausted. Bringing together all of the social workers engaged in working with young people is key as they prepare for 'transition' into adulthood to ensuring a consistent, skilled and timely social work response.
- 5.7.3 Improving the experience of transition for young people with additional needs is key to improving outcomes. Robust planning from age 14 years is essential to ensure effective transition. Transition workers attend Year 9 reviews in both mainstream schools and special schools to identify early those young people that may require social care support into adulthood. Social workers with specialist knowledge and experience of the impact of physical/learning disability and mental health are co-located with safeguarding and children's social work colleagues. This promotes closer working links with colleagues across children's services to the benefit of disabled children, young people and their families and provides continuity into adulthood.
- 5.7.4 A 'local offer' has been co-produced with partners to implement a single education, health and care (EHC) plan. Work has recently been commissioned to improve the Local Offer website to ensure that it is user friendly and accessible. Pathways are being developed to support tripartite decision making involving social care, health and education. These include joint meetings to agree EHC plans and college placements (residential/day). The transitional funding panel discusses the physical and mental health needs of young people (aged 14+ years), to ensure that appropriately skilled and experienced professionals are working together with the young person to identify goals, aspirations and agree appropriate funding streams.

2017/18 Priorities for Children in Need and Child Protection:

- Embedding MASH processes to ensure a whole family approach
- Ensuring thresholds in the MASH are being applied consistently and appropriately
- Ensuring there is sufficient capacity in the MASH to undertake all single assessments
- Ensuring that there are robust and timely processes in the MASH for assessments and clear protocols for transfer into localities
- Ensure that greater prominence is given in case files to the thoughts, wishes and feelings of children and young people, so that the child's voice is clearly recorded and understood
- Improving the offer for carers in response to both Children and Families Act 2014 and Care Act 2014
- Ensure that when children and young people are placed with family and friends, social workers are clear about what actions must be completed to assess and formalise those arrangements in line with placement regulations

6. Specialist Support Service

- 6.1 In April 2016, the Specialist Support Service was established in recognition of the need to develop additional support for families in crisis and on the edge of care. The Specialist Support Service consists of a number of functions including:
- intensive family support
 - family mediation and family group conferencing
 - vulnerable young persons' team
 - short break respite support
 - therapeutic support through the commissioning of specialist individualised support packages
 - out of hours support to Emergency Duty Team
- 6.2 There is already evidence of the services effectively preventing family breakdown. In September 2016, a weekly resource panel was introduced which enables social workers to access support for families on the edge of care. This has promoted a more planned approach and ensures that they have access to a range of interventions which respond to the needs of the families they are working with. However, where crisis situations arise outside of resource panel, social workers can access support directly and then the case is discussed at the resource panel retrospectively. The resource panel has impacted positively on the admission to care panel as the majority of cases now presented at admission to care panel have already gone through the resource panel and all support options have been explored.
- 6.3 The **Intensive Family Support Team** accepts referrals predominantly from social workers where cases are in crisis and there is a real risk to the child(ren) becoming looked after or where there is a plan to return a looked after child home. The team delivers specific support, often of a practical nature. Interventions do not normally exceed 12 weeks and during this time support can be daily if required (including weekends). At the end of December 2016, the Intensive Family Support Team has supported 104 families (178 children) on the edge of care, with only 14 young people subsequently becoming LAC. New referrals are frequently made to the service at a rate on average of 18 families per month.
- 6.4 The **Family Group Conferencing (FGC)** approach has proved successful when working with families on the edge of care to support extended family members in identifying ways they can work together to prevent family breakdown. On average, nine families are being referred every month. As at the end of December 2016, 60 families (114 children) have received support, with only 5 young people subsequently becoming LAC. The FGC/Mediation Co-ordinator is working closely with the social work units to identify appropriate cases.
- 6.5 **Upper Pendeford Farm** is providing short break support to young people aged 10-18 predominantly where there are significant relationship issues within a family. Through the short break centre families are able to access packages of respite support whereby young people will spend periods of time away from the family home. Whilst at the short break centre staff will do intensive work with the young person and also outreach work with the family to assist with the young person's return. The home opened under its new remit on 18th April 2016. Since opening there have been 125 admissions (36 young people) into Upper Pendeford Farm, with only 4 young people subsequently having to become LAC. Young people can have multiple short breaks as part of their casework plan and cases remain active for the duration of the involvement. There is also a crisis bed and a bed that provides short breaks for foster carers to prevent placement breakdown.
- 6.6 Since February 2016, Family Support Workers from across the Children and Young People Service have been working alongside the Emergency Duty Team Monday to Friday, 6pm-9pm and at weekends between 11am-3pm. The workers have provided additional out of hours support to families in crisis where there is an identifiable piece of work to be undertaken in order to prevent family breakdown. Feedback from the Emergency Duty Team staff is that the

additional support has been instrumental in being able to respond to families' needs more proactively. After 12 weeks of the out of hours support being available an interim review was conducted. This evidenced that the family support workers had supported 98 families with the predominant intervention being focused around conflict resolution within families who had children aged 8 or above. When comparing the number of out of hours admissions to care in April–September 2015 with April–September 2016, there has been a 15.6% reduction in out of hours LAC admissions.

- 6.7 The **Vulnerable Young Persons'** team focuses on key areas that place young people at risk, including exclusion from school; children missing from home/care or missing education; children at risk of sexual exploitation; electively home educated young people; children with poor attendance at school (including statutory enforcement); and young people admitted to Accident and Emergency due to self-harm or being the victim of youth violence.
- 6.8 Bringing these functions together has facilitated a holistic assessment of vulnerability. It has enabled a shared and more accurate understanding of risk for individual young people and ensured the right level of support is provided. In October 2016 there were a number of young people who went missing from home for significant periods of time (more than 7 days). Information about the young people's engagement in education was readily available. Through close working between the Missing Returns Officer and the Vulnerable Young Person's Risk Coordinator (who has responsibility for chairing MASE) there was daily exchange of intelligence to build a thorough picture of the links between the missing young people and potential CSE risks. It was also possible via the links with the hospital to get updates about whether the missing young people had had any hospital admissions.

2017/18 Priorities for Specialist Support Service:

- Embedding the redesign and new ways of working
- Extending the use of family group conferencing
- Ensuring MASE meetings are effectively chaired and discussions focus specifically on risks and this is accurately recorded
- Increasing occupancy of Upper Pendeford Farm to ensure the resource is most effectively used to prevent family breakdown
- Extending the use of Upper Pendeford Farm to prevent placement breakdown
- Ensuring the information gathered via missing return interviews is shared effectively to contribute to casework planning and risk management plans

7. Looked After Children

- 7.1 There is a clear vision that is shared across the looked after children service which is focused on achieving permanence and stability for children. The number of children in care in Wolverhampton has been considerably higher than comparator authorities, with more than twice the national average rate per 10,000 of the under 18 population. The rate increased annually from 2009 until 2014, reaching 807 at its peak. In May 2014, the Families r First Programme was introduced which put greater emphasis on tackling problems within the family unit and offering support at an earlier stage, preventing the need for children and young people to become looked after. This work, together with the co-location of early intervention and social care and the successful completion of Phase One of the Troubled Families Programme has significantly contributed to year on year reductions in looked after children. The number as at the end of December 2016 is 635.
- 7.2 Care planning is tightly monitored to prevent drift and ensure actions identified are undertaken within agreed timescales. Six weekly meetings are held across the three LAC units which involve all staff to ensure that there are consistent approaches to supporting children and young people. Audits are undertaken in line with the quality assurance framework to continue to monitor quality of care plans. Heads of Service hold a fortnightly permanency oversight panel to track cases and ensure there is no delay in care planning. In addition, there is an effective admission to care panel in operation which is ensuring all support options are considered and the right children and young people are in care.
- 7.3 Work has taken place to ensure that all looked after children have a comprehensive annual assessment of their needs which supports child-centred outcome focused planning. As at end of December 2016, 97% of looked after children had an updated assessment that supports the current care plan. Positive feedback has been received from Independent Reviewing Officers (IROs) in terms of the quality of assessments ensuring changing needs are identified.
- 7.4 Social work visits to looked after children fulfil a range of critical roles and functions to enable the child's circumstances to be observed and monitored. Visits are carried out at least once every 6 weeks or once every 12 weeks in a stable placement, but social worker visits may well be set at a higher frequency as set out within the looked after plan. At the end of September, 90% of Looked After Children had up to date visits.
- 7.5 The health needs of looked after children are regularly monitored via review health assessments with 86% of looked after children having up to date medicals and 87% having up to date dentals, at the end of December 2016. Close working relationships with partners at the Royal Wolverhampton Trust and the Wolverhampton Clinical Commissioning Group and refined processes continue to contribute to improved performance in this area. Work is ongoing to improve health assessments for out of city children.

7.6 Education of looked after children

- 7.6.1 The Corporate Parenting and Education team (COPE) is committed to improving educational outcomes for looked after children, in the model of the "virtual school" and under the management of the Virtual School Head (VSH). The role of the VSH has also been extended to include young people in the youth justice system.
- 7.6.2 Priorities for COPE and the VSH include:
- ensuring that appropriate education is arranged for all LAC and young people known to the youth offending team in a timely manner
 - monitoring and improving attainment and attendance
 - delivering learning and behavioural support for LAC
 - auditing and improving personal education plans (PEPs) for LAC
 - providing training and advice
 - challenging exclusions and strengthening transition arrangements
- 7.6.3 The roles in COPE are designed to facilitate flexible and responsive support at strategic, advisory

and operational levels. The VSH manages the Pupil Premium Grant (PPG) for looked after children, allocating most of the funding directly to schools and monitoring its use via the Personal Education Plan (PEP) process and in partnership working with schools and colleagues in social care. An element of PPG funding is retained to support special projects and additional support, including training in attachment awareness for designated teachers and the 'Beanstalk' Reading Help Project. The Virtual School has achieved strong and improving educational outcomes for LAC, including in 2016:

- Attainment at Key Stage 4 above national and regional averages for the fourth successive year
- Attainment Key Stage 1 & 2 above national regional averages in most subject areas, and better than their peers in some areas
- Persistent school absence below regional and national average
- Low and reducing levels of school exclusion

7.6.4 In addition to the ongoing work to raise achievement, as highlighted above, the 2017/18 LAC/YOT attainment improvement plan outlines an additional focus on key priorities by COPE and its partners. These have been identified in the 2016/17 VSH Annual Report and by Ofsted in its 2017 inspection of Children's Safeguarding services and include:

- Raise the attainment of LAC educated outside Wolverhampton
- Raise attainment in reading & writing at Key Stage 1 for all LAC
- Improve educational planning by ensuring that Personal Education Plans contain SMART targets
- Increase % of school-aged young people open to YOT with a full-time educational offer
- Place an increased focus on raising the attainment of young people open to YOT

7.6.5 COPE work closely with schools and specifically their designated teachers. This includes training and advice to schools and schools governing bodies to enable them to understand, prioritise and meet the needs of looked after children in school. Training and support is also delivered to foster carers on a regular basis. The service benefits greatly from a strong educational psychology and counselling psychology input which helps to ensure that LAC with additional needs are fully supported in an appropriate and timely manner.

7.7 Fostering

7.7.1 The fostering service consists of a motivated, committed and stable workforce made up of qualified staff experienced in fostering. There are good working relationships with children's social workers and a real focus on the needs of both the child/young person and the foster carer.

7.7.2 Wolverhampton has a well-established, dedicated group of foster carers who are very committed to providing a supportive and caring environment for children. There are a number of fostering champions who assist in the recruitment and training of new foster carers. The foster carers benefit from 24 hour support, buddy support from experienced foster carers, training, newsletters, and regular meetings. All foster carers are members of Foster Talk which provides additional opportunity for independent advice. Foster carers also benefit from ongoing access to offers and discounts from retail providers and leisure facilities.

7.7.3 There has been a renewed drive to further increase the number of foster carer approvals, enabling more looked after children to live with local foster families approved by Wolverhampton. These include carers providing placements for sibling groups. As of December 2016, there are xxx children in Independent Fostering Agency (IFA) placements, compared to 264 in April 2016. Following cabinet approval in October 2015, revised fees and allowances were introduced in January 2016. The revised fee structure recognises foster carer skill and experience. Wolverhampton started working with Impower in February 2017 to explore opportunities for further improvement and transformation.

7.7.4 The assessment process has been streamlined which has enabled assessments to be completed in a timely fashion providing a better service to those applying to foster. In December 2016, there

were 16 foster care applicants in stage 1 assessment and 4 in stage 2. 14 foster carers have been approved so far this year and the average number of days taken to approve foster carers is 224, which is below the target of 244 days.

- 7.7.5 Stage 2 of the assessment process is provided by an external agency. During this time, foster carers in assessment remain allocated to a social worker within the fostering team to ensure they remain connected to Wolverhampton.
- 7.7.6 There is a plan in place to increase awareness and reporting of private fostering arrangements. Extensive marketing and awareness has been rolled out within the local authority and across the city, using revised/re-branded materials. This has not yet led to an increase. As at the end of December 2016, there were 2 children recorded as being privately fostered. An updated marketing plan which supports a more targeted approach has been produced and is being rolled out.
- 7.7.7 The family and friends unit is working closely with children's allocated social workers to support early initial viability assessment of potential family and friends (connected persons) carers, enhancing opportunities for children to be placed within their own network of family or friends where appropriate. All full connected person assessments are completed by the family and friends team in line with court timescales. The progression of well-supported special guardianship orders is a priority for this unit offering legal stability for children within their placements. SGO assessment and support plans are completed by the social workers within the connected person's team. At the end of December 2016, there were 11 looked after children who have an SGO in place as part of their long term permanence plan.
- 7.7.8 The connected person's team train prospective connected carers with Skills to Foster training and have developed a training module for special guardians. Post-SGO and connected person training is also delivered by the team. The team supports and supervises a caseload of complex connected person placements with the view to support and stabilise towards permanency via a special guardianship order. The team also provides support groups and regular training support and development standards (TSDS) workshops for connected persons in order to support the completion of their post-approval training programme.
- 7.7.9 During 2015/16, 24 SGOs were granted, 12 of these were for looked after children. The target for 2016/17 is 25 connected/SGO carers. An SGO action plan is in place which focuses on increasing numbers and a working group has been established to drive this forward. In addition, a policy has been agreed to support family conversations. This will mean a meeting will take place with the family within 10 days of a referral to early intervention and/or social care. This will enable an early understanding of the assets and resilience that the family has and is anticipated to have an impact on increasing SGOs. The SGO Module is now being delivered as part of the ASYE programme. SGO leaflets and written information have been updated and SGO will be considered in all viability assessments.

7.8 Adoption

7.8.1 The Adoption Service consists of three specialist social work units:

- **Recruitment and assessment unit** - recruiting, assessing and supporting adopters to the point of adoption order
- **Family finding and adoption support unit** - early matching, family finding, moving on / transition work, training and post adoption support
- **Children's adoption unit** - LAC cases from the point of placement order to progress the plan of adoption

7.8.2 The service structure places all of the professionals involved in placing children for adoption in a co-located team. As a result, there has been improved efficiency and collaborative work and we are able to place children more quickly and effectively.

7.8.3 Wolverhampton Adoption Service is also part of a consortium Adoption in the Black Country

(ABC). ABC is a collaborative approach to the delivery of adoption services across Wolverhampton, Walsall, Dudley and Sandwell. The partnership has developed over a number of years and has expanded to incorporate a 5th partner, Adoption Focus, a voluntary adoption agency. This collaborative approach and pooled resources has enabled ABC to recruit and train adoptive parents collectively.

- 7.8.4 ABC supports joint family finding activities including: activity days meet the children events; and more recently has seen the appointment of a permanency co-ordinator to support placing children with ABC families. It enables children to be placed locally without the risk of being placed in the local authority in which they were born. There are significant advantages for children and families as adoption support can be delivered locally by teams that know the children and families.
- 7.8.5 We have continued to embed the stage one and stage two adoption process. Wolverhampton is actively progressing more timely processing in stage one. Prospective adopters complete the first stage online training provided by ABC consortium. Three-day adoption preparation training takes place monthly and is also co-ordinated within the consortium. Wolverhampton commissions prospective adopter reports which facilitates more timely assessments within stage two of the process where a worker is able to dedicate time and flexibility to complete the assessment swiftly. An allocated Wolverhampton social worker maintains contact via visiting throughout the assessment process. There is a focus on early matching if an assessment is progressing positively.
- 7.8.6 For those approved in 2015/16, the average time in stage one was 80 days against a target of 61 days. The average time in stage two was 254 days against a target of 122, meaning the average time to be approved was 334 days against a target of 183 days.
- 7.8.7 The adoption team ensure that the provision of support services reflects the Adoption Support Regulations 2005. The Adoption Support Fund is being used locally to pay for therapeutic services such as complex assessment i.e. child & adolescent mental health service assessment; multi-disciplinary assessment including education and health; cognitive and neuropsychological assessment; other mental health assessments; therapeutic parenting courses; dyadic developmental psychotherapy; non-violent resistance; therapy; filial therapy; art therapy; dance therapy; and drama therapy.
- 7.8.8 In 2015/16 the adoption recruitment team approved 18 adopters. Up to December 2016, 25 adopters have been approved. The recent scorecard supports improvements including: 24 adoptions as at 31st December 2016.
- 7.8.9 Wolverhampton remains committed to supporting foster carers to adopt children who have been in their care for a significant amount of time and where this is in the child's best interests. Wolverhampton is using the fast-track route in order to ensure that the foster carers are suitably prepared, assessed and supported throughout the child's life. Early permanence options including fostering to adoption and concurrency placements are considered as part of permanency planning, with these options being utilised where appropriate. Approval of prospective adopters who are willing to consider early permanence options is a priority for ABC and Adoption Focus, with targeted marketing campaigns being utilised. There have only been two adoption disruptions in 2016/17.
- 7.8.10 The development of the regional adoption agency (RAA), which incorporates ABC and Adoption Focus is currently being progressed. This development is being financially supported by the DfE. Led by Wolverhampton, Phase 1 of the project has included the development of the scope of the RAA, agreement about activities that will fall under it and an initial options appraisal of the potential delivery vehicle. Phase 2 is now underway and although the project has been slowed down on DfE's request, the project remains committed and on target for implementation by April 2018.

7.9 Corporate Parenting

7.9.1 The Corporate Parenting Board is chaired by the Cabinet Member for children and young people and among other things is responsible for overseeing the delivery and impact of the Corporate Parenting Strategy. The strategy has been produced to ensure all services are focused on improving the outcomes for LAC. It seeks to narrow the gap between looked after children and their peers by providing effective support which enables them to reach their full potential. It reinforces the corporate responsibility of the whole council and its partner agencies and focuses on a range of areas. Care leavers and looked after children now feature in the council delivery of work experience, traineeships, apprenticeships and internships. Packages of support are being developed for managers and educators to support young people. Supporting the implementation of the corporate parenting strategy is a corporate parenting officers group – this is made up of senior officers from across the council and its partners in order to ensure the plan is progressed in a timely manner.

7.10 Participation

- 7.10.1 Participation of children and young people across the city is an essential contributory factor to the development of services delivered to children. This is underpinned by the Participation Strategy which sets out clear standards of participation for children and young people to ensure that it is not tokenistic and remains relevant.
- 7.10.2 The City of Wolverhampton has a strong children in care council (CiCC) which meets monthly. It represents the views of looked after children and influences the corporate parenting strategic priorities each year. These priorities are incorporated in the corporate parenting action plan, which is monitored and progressed not only by the CiCC, but also by the corporate parenting senior officers group and corporate parenting board.
- 7.10.3 Two members of the CiCC are members of the youth council. This ensures the needs of looked after children are considered across the city. Two members of the youth council are members of the children's scrutiny panel, ensuring children's voices are a key part of decision making.
- 7.10.4 The youth council has 31 members. There are 2 members who have been elected by the youth police council commissioners (YPCC) and 2 youth MPs. The YPCC's work with the police and crime commissioner (PCC), police officers and key decision makers. Their role is to be the voice of young people, through actively engaging and consulting with other young people in their local communities and ensuring that their concerns and priorities are used to influence and inform the planning and priority setting of the PCC. They carry out their duties on a voluntary basis.
- 7.10.5 The care leaver's forum (CLF) meets on a monthly basis. This is a re-established group which contributes its views to the development of the transitions service and areas of support for care leavers in Wolverhampton. The City of Wolverhampton Council has recently agreed council tax exemption for care leavers up to the age of 25.
- 7.10.6 Both the CLF and the CiCC attend the corporate parenting board twice a year. The lead member for children in Wolverhampton along with senior managers also attends CiCC meetings periodically throughout the year. This creates a synergy in the sharing of ideas and it ensures, for all parties, that children's voices influence the delivery of services. All reports presented to the corporate parenting board are scrutinised by the CiCC in advance of presentation, and the CiCC's views are incorporated into all reports.
- 7.10.7 Both the CiCC and the CLF have been heavily involved in the development of the website www.wolverhamptonlac.co.uk and Facebook page www.facebook.com/lacey.childs.7 to promote the use of social media to increase opportunities for communicating with children and young people and ensuring they feel connected and informed.
- 7.10.8 The City of Wolverhampton has implemented the MOMO App designed to provide young people with an easy to use tool to communicate their thoughts and feelings on their care. This was directly a result of a request from a number of looked after children who saw it being used in another local authority during a regional corporate parenting event. Wolverhampton is looking to

offer this resource not only to looked after children but in the longer term, to include children in need, child protection and young offenders.

2017/18 Priorities for Looked After Children:

- Continuing to safely reduce numbers of looked after children
- Ensuring that children looked after who would benefit from one have access to an independent visitor
- Strengthening advocacy arrangements to ensure that children in need of help and protection and their parents and children looked after are enabled to make a meaningful contribution to child in need and child protection processes and children looked after reviews
- Ensuring that looked after children who are living at a distance from Wolverhampton receive the same level of health and educational support as children living closer to home
- Ensuring that all personal education plans (PEP) are specific, measurable and easy for children and young people to understand
- Increasing the number of applications for special guardianship orders
- Continuing to lead on the development of the regional adoption agency
- Working with iMPower to increase internal foster carers
- Increasing awareness and reporting of private fostering
- Continuing to improve timeliness of placing children for adoption
- Developing an action plan to make sure that Wolverhampton is fully compliant with the changes outlined in the Children and Families Bill

8 Care Leavers

- 8.1 Co-location of social workers, young people's advisors, family support workers, housing and an education, employment and training co-ordinator facilitates excellent joint working arrangements to support young people through transition. All young people are allocated a personal adviser prior to transition, to support transition planning and the development of a needs led pathway plan. There are good transition arrangements in place for young people accessing post-18 services. Young people are aware of their entitlements. Updated information leaflets and booklets are incorporated into a post-16 transition pack, and the information is on the care leavers' Facebook page and LAC website. The team are committed to increasing partnership working with young people and empowering them to develop confidence and achieve their aspirations.
- 8.2 Wolverhampton was an active participant in the New Belongings project 2015/2016 and the principles of this continue to be embedded within mainstream service delivery. Care leavers are now more prepared for independence; they have an increased choice of accommodation provision, increased support from partner agencies and increased opportunities for EET. The service has worked hard to increase the participation levels with care leavers by seeking their views annually via a survey and setting up a care leavers' forum. The service has introduced the Momo app from November 2016 which will further support young people in contacting their workers more readily to provide feedback regarding the service which they receive. A Care Leavers' Charter is now in place.
- 8.3 Additional feedback in relation to the service is gathered from post-21 interviews with all care leavers who wish to engage with this offer. Care leavers' views continue to influence the development of the service. An example of this is the recent policy decision by the council to exempt all care leavers under 25 years old from paying council tax.
- 8.4 A weekly drop in service, held at The Way Youth Zone, offers opportunities for support and advice from a housing worker, EET worker, health worker and family support worker to ensure that young people's holistic needs are being met. The membership charge for care leavers who wish to join The Way has been funded by the transitions team. This enables young people to participate in positive activities and increase their social circle, reducing feelings of isolation. In addition we have a LAC transition allotment plot which supports young people with self-sustainable skills and promotes a healthy lifestyle. We celebrate Care Leaver Week and put together a full programme of activities.
- 8.5 Initiatives such as increasing the capacity of the education, employment and training co-ordinator, and the recruitment of a key worker and young person's advisor to support the hard to reach NEET young people, has increased the number of young people accessing education, employment and training. This has resulted in a reduction of NEET young people from 40% to 59%. To support the increase in the number of 16+ year olds who are actively engaged in education, employment and training a personal education plan (PEP) for non-eligible young people has also been introduced. The number of young people accessing higher education and university provision has increased with 22 young people currently at university.

Young people are supported while there and the support will be monitored with the introduction of a post- 18 higher education PEP. The corporate parenting strategy is supporting the development of opportunities for work experience, traineeships and apprenticeships within the council and with partners. A multi-agency not in employment, education or training (NEET) panel was introduced in October 2016 in order to further target and support young people without an EET provision.

- 8.6 In recognition of the positive outcomes for young people aged 16-18 who live in accommodation provided by Wolverhampton Homes, supported by housing support workers within the LAC transitions team, further opportunities have been developed including an increase in provision to 33 flats. In addition, support services have been extended to operate from 8am-8pm weekdays and 10am-5pm at the weekends. The overall outcomes for young people who enter these properties are good with the majority going on to maintain their own tenancies post 18 which we continue to track to ensure adequate support is in place. At the end of December 2016, 91% of

care leavers were in suitable accommodation compared with 77% in March 2016.

- 8.7 Two of the properties is utilised as a training flat predominantly to support young people in their preparation for independent living. It offers young people an opportunity, for a short time, to experience independent living with support. 17 young people have been referred to the scheme, which has been beneficial in assessing the independence level of care leavers, allowing a more accurate assessment of their need. In addition, two of the properties are used as “crash pads” to ensure that, when required, we can accommodate our young people appropriately in a crisis situation. These are a short-term provision of one or two evenings while the team supports the young people to find alternative accommodation that appropriately meets their needs. We will be having a dedicated housing support worker providing daily assistance to these provisions and completing living assessments underpinned by the “getting ready for adult life” pack.

2017/18 Priorities for Care Leavers:

- Ensuring that all pathway plans include targets which are specific, measurable and written in such a way that there is no room for ambiguity about who needs to do what, by when, to ensure that care leavers are able to make a successful transition to independence
- Increasing the number of vulnerable 16+ engaged in education employment and training
- Ensuring all care leavers are provided with a health summary

9. Youth Offending Team

- 9.1 Wolverhampton Youth Offending Team (YOT) plays an integrated role in children's services. The HMIP full joint inspection report, which was published in February 2016, outlined an excellent level of performance achieving the maximum four stars in respect of 'reducing reoffending', 'protecting the public', 'ensuring the sentence is served' and 'interventions to reduce reoffending'. The YOT achieved three stars for 'protecting children and young people' and 'governance and partnerships'. Overall, this was the highest achieving full joint inspection in the last three years within England and Wales.
- 9.2 The YOT improvement action plan was regularly reviewed and has been recently 'signed off' by the YOT Management Board. A significant area of development related to the improvement in the engagement levels of YOT young people in education, training and employment. This is being positively progressed through the extension of the role of the Virtual School Head to include young offenders and the deployment of a bespoke Youth Employment initiative within the YOT. The action plan has also resulted in the deployment of a dedicated CAMHS worker to join the multi-agency team.
- 9.3 The 2017 National Standards Audit required by the Youth Justice Board indicated continuing strong standards of performance in areas as wide as Bail oversight, remands in Secure Estate, Court work, report writing, long term custodial support and work with victims of crime. Overall the YOT work was judged as performing strongly but with improvements identified that will be captured in the Youth Justice Action Plan for 2017/18.
- 9.4 The YOT continues to respond to its prevention remit and strives to maintain a positive and constructive range of activity for young people including the use of The Way Youth Zone; a Bikeability project; and music projects funded through the third sector. There is a pilot intervention being developed to address social media and internet grooming as part of the HeadStart Programme. Since June 2016, a workshop afternoon has been offered for those young people receiving police Community Resolutions to identify those in need of further support and signposting. April 2017 will see the commencement of a group work programme designed to utilise creative arts to target those young people who are vulnerable to involvement in gang related activity.
- 9.5 At the end of January 2017, 13.5% of the YOT caseload was looked after children. LAC and YOT work closely together and there are established step up and step down policies within children's services and key partner organisations. In the first three quarters of 2016/17, the YOT worked with 212 young offenders, which is a 3% reduction on the previous year. In addition, the YOT worked with an increasing number of Out of Court Disposals as part of our commitment to early intervention. There have been 205 Out of Court Disposals in the first three quarters of 2016/17. Strategic Planning is already commencing for the Youth Justice Plan for 2017/18 and this will include any carried forward actions from the completed Inspection Action Plan.

2017/18 Priorities for Youth Offending Team:

- Reducing offending and reoffending
- Increasing the engagement of YOT young people in Education training and employment
- Implementing the action plan to improve joint working between social care and YOT
- Ensuring earlier and improved joint planning between social care and YOT for young people released from tier 4 and custody
- Reviewing the work delivered across the children and young people service in support of the Gangs Strategy
- Ensuring the findings from the interventions evaluation are understood and adopted

10. Inclusion Support

10.1 The Inclusion Support Service sits within the Children and Young People Service and has direct links with the Education Directorate. The Service comprises:

- Educational Psychology
- Counselling and Behaviour Support
- Education and Family Engagement
- SEN Specialist Teaching

10.2 The core purpose of Inclusion Support is to promote inclusion, engagement in learning and achievement for children and young people by helping to overcome barriers to learning, whether they be linked to difficulties with learning, mental health, behaviour or attendance. Funding for the service is split between:

- core council funding, to undertake statutory duties in relation to SEN/D assessments and provide specialist assessments and consultative support to other teams within the Children and Young People Service (e.g. YOT, COPE, Strengthening Families Hubs); and
- funding from schools and other settings to undertake early intervention and capacity building work and support their obligations to make provision for pupils with additional needs.

10.3 The Educational Psychology Service (EPS) provides a service to children and young people from Wolverhampton aged between 0 and 25 years. Working in partnership, the service provides services to families, schools and other educational settings, and other children's services organisations.

10.4 The work of Psychologists can be broken down into four broad areas:

- **Consultation** is a joint problem-solving process that may relate to concerns regarding learning, behaviour, emotional development, social development and mental health needs.
- **Assessment** is a process involving the gathering of information from a variety of sources, in a range of settings, over a period of time. It usually involves children and young people, parents/carers, teachers, and other agencies.
- **Intervention** is the application of planned strategies aimed at promoting positive learning experiences and supporting psychological wellbeing. The strategies may be implemented at the level of the individual child, young person or family, at a whole class or other group level, or across a school or organisation.
- **Organisational development** work can include training, research and other project work the focuses on enhancing the practices and capacity within educational settings and other children's services organisations to work effectively and enhance outcomes for children.

10.5 Core Services

10.5.1 The EPS is responsible for providing psychological advice as part of statutory education, health and care needs assessments. Following the 2014 SEND reforms, there has been a period of transition from statements to education, health and care plans. The EPS contributes to all transfer reviews as part of this. These transitional arrangements are due to be completed by April 2018. Educational Psychologists also provide non-statutory advice to SENSTART on children and young people's needs and placements and contribute to multi-agency neurodevelopmental assessments.

10.5.2 In addition, Educational Psychologists provide specialist input to the COPE and YOT teams and there is an Educational Psychologist linked to each strengthening families hub supporting monthly surgeries. The service provides critical incident support to schools in the event of unexpected traumatic incidents (eg. the death of a pupil). The EP service provides specialist input at a strategic level within the council and working with partners in areas such as the development and implementation of the Autism Strategy, reviewing services for children who display sexually

harmful behaviour, CAMHS transformation and the Suicide Prevention Strategy.

10.6 Traded Services

10.6.1 Where schools or other organisations request services which are outside of the statutory and core range of activities, this can be commissioned as a traded service. Schools and other organisations can commission packages of traded work to be delivered across a year. The time that a school buys includes face-to-face time in schools, home visits, and other meetings (including early help, CIN planning and core group meetings, but not Child Protection conferences). Referrals into the service can come from schools or other settings that have a service level agreement with the service, or from other organisations that we deliver core/ statutory services to.

10.6.2 Income from Inclusion Support traded services was over £1m in 2016/7. Through directly commissioned activity, Inclusion Support Services have been able to undertake early intervention work in 97 Wolverhampton schools.

2017/18 Priorities for Inclusion Support:

- Developing and implementing the SEMH Strategy
- Ensuring assessments are provided to support transfer of statements to Education Health and Care Plans in line with local SEND transition plan
- Developing Inclusion Support training offer for CYP workforce, schools and trading externally
- Reviewing services for children and young people who display sexually harmful behaviour
- Developing an action plan to reduce numbers of exclusions

11. HeadStart

- 11.1 Wolverhampton has been successful in receiving £9.47m for Phase 3 of HeadStart. This is an early intervention and prevention programme funded by Big Lottery Fund. It is aimed at children and young people aged 10-16 and through a range of digital media, direct delivery, workforce development, young people engagement and commissioned services, it seeks to promote positive mental wellbeing and equip young people (and their families) with the resilience and skills to cope with adversity and setbacks and achieve positive outcomes. The delivery model for Phase 3 is made up of 4 levels of intervention - City Wide, Universal, Universal+ and Targeted.
- 11.2 City Wide is aimed at all 10 to 16 years olds and will primarily focus on online self-help. Universal is aimed at offering support for 10 to 16 year olds in four geographical areas, selected through a public health needs analysis as community populations most at risk, these areas are;
- Area A: Low Hill, Scotlands and Bushbury South
 - Area B: Springfield, Heath Town, Park Village and Old Heath/Eastfield
 - Area C: Bilston East
 - Area D: Blakenhall, All Saints, Parkfields and Ettingshall
- 11.3 Universal+ will offer support specifically to 10 to 12 year olds focusing on the primary to secondary transition year in HeadStart schools in the above geographical areas. Targeted support will be offered to young people identified as requiring additional support through self-reporting, resilience screening combined with additional risk factors and will provide personalised interventions including: the Getting Ahead Programme in schools; 'Pre-CAMHS' voluntary sector commissioned activity; support and interventions delivered directly by CAMHS Link Workers; and improved pathways into statutory services. We anticipate that 20% will meet the criteria for support for our Pathways to Support pilot which aims to support children in families where (one of) their parent/carers is being supported by an adult-facing service such as one dealing with adult mental health, substance misuse and/or those at high risk of domestic violence.

11.4 Child and Adolescent Mental Health Services (CAMHS)

- 11.4.1 Joint work led by the Clinical Commissioning Group is well underway in the production of a new model for the provision of emotional health and wellbeing services. The new model aligns CAMHS specialist services more closely with the Strengthening Families Hubs, meaning that children, young people and their families will be able to receive support closer to home and that providers are able to work in a more joined up way. Specialist teams will continue to deliver to some of the most vulnerable groups of children and young people including looked after children, children in need and young offenders. CAMHS link workers will be employed to work closely with the HeadStart Programme and ensure that children and young people who need specialist services can access these quickly. These link workers will also assist children and young people transition into community based services as specialist support is no longer required.

2017/18 Priorities for HeadStart:

- Ensuring the HeadStart Delivery Plan is effectively implemented
- Establishing a Centre of Excellence
- Establishing Community Hubs
- Implementing an effective digital offer to support children and young people
- Contributing to the CAMHS transformation work and ensuring that it is fully aligned with the HeadStart Programme

12. Safeguarding

- 12.1 The Head of Safeguarding is directly managed by the Strategic Director, People. The service plays a key role in ensuring the provision of an effective independent reviewing/chair service which oversees care and safeguarding planning for children. An electronic quality assurance tool is used and sits within CareFirst. The tool has ensured operational managers are aware of issues identified, have the opportunity to address them with their staff and feedback to the Independent Reviewing Officer.
- 12.2 Child Protection Conferences have been revised along the lines of the Strengthening Families model and our Child Protection Plans are more outcome focused. In the last 3 months, parental feedback regarding Child Protection Conferences shows that 98% of parents strongly agree or agree that they are clear about what needs to change/happen for the Child Protection Plan to end and their individual role in the Plan.
- 12.3 There has been a key focus on ensuring children's records contain accurate, relevant, and up to date information to support effective care planning. Looked after children review and care planning documentation has been revised to improve the process and quality of care planning. Ensuring the voice of the child is evident in assessments and reports to looked after children reviews and ensuring that children and young people are supported to participate in reviews is a priority. Reduced caseload in the last 12 months means that Independent Reviewing Officers are much more able to visit children in advance of reviews and consult them about how they want their review to take place and what they want to talk about. Children and young people are actively encouraged to take the lead in their review and a number of children have chaired their own review. Where a young person requires the support of an advocate to ensure their views, wishes and feelings are heard, one is provided.
- 12.4 The management of allegations processes are clear and consistent across Wolverhampton and the designated officer (DO) role has been promoted effectively. The DO has been actively involved in the delivery of multi-agency and single agency training/awareness raising to promote the role and extend professionals' understanding in terms of management of allegations. This has led to an improved working knowledge from partner agencies which in turn promotes more timely responses to safeguarding concerns.

12.5 Child Sexual Exploitation (CSE)

- 12.5.1 The delivery of the CSE agenda sits across operational and strategic services in order to provide an effective response to prevention, protection of young people and prosecution of offenders. The Head of Safeguarding is the lead officer for CSE and is supported by a CSE Co-ordinator. Management of individual children affected by CSE is the responsibility of operational social work practitioners and the development of individual CSE plans is led by the Vulnerable Young People Team.
- 12.5.2 The Wolverhampton Safeguarding Children Board oversees the impact of CSE support via the Sexually Exploited, Missing and Trafficked (SEMT) Committee who in turn, receive information from the Child Sexual Exploitation and Missing Operational Group (CMOG). Both SEMT and CMOG are well established and attract good representation and input from a range of partnership agencies. In addition, there are robust Multi-Agency Sexual Exploitation (MASE) meetings in place which ensure that high risk individuals are closely case managed and supported by the right professionals and appropriate interventions are put in place.
- 12.5.3 The Vulnerable Young Person Risk Co-ordinator chairs all Multi-Agency Sexual Exploitation (MASE) meetings and works closely with the Wolverhampton Safeguarding Children Board (WSCB) CSE Co-ordinator to develop an accurate picture of CSE issues across the City. The CSE Co-ordinator is responsible for the development of the city-wide CSE Strategy and ensuring that agencies across the Safeguarding Partnership are sufficiently equipped to identify and respond to CSE. The role co-ordinates training and development and has oversight of all investigations, cross border issues, partnership working and leads on the Wolverhampton CSE profile.
- 12.5.4 Work is on-going to ensure that the regional CSE Framework and local pathways are embedded in local practice and findings from regular dip sampling and case file audits are used to ensure CSE is consistently being identified and responded to. There is a current focus on training and

awareness raising. A train the trainer package has been developed for school safeguarding leads to enable better dissemination of CSE awareness for school pupils, staff, governors and parents.

12.5.5 A CSE screening tool is used for those persistently absent from school or excluded and where appropriate, looked after children over 12 years. An additional tool – the Petch Tool – is being rolled out across the City and is used to assess CSE risk for children under 12 years. All copies of completed CSE screening tools and subsequent specialist assessments are sent to the CSE Co-ordinator in order to build a comprehensive picture of risk regarding victims, offenders and locations. Where the screening tool indicates a serious or significant risk, there will be a referral to the Multi-Agency Safeguarding Hub.

12.6 Violence Against Women and Girls (VAWG)

12.6.1 Violence against women and girls (VAWG) is a strategic priority for the city as set out in the [Violence Against Women and Girls Strategy 2016-19](#). This covers domestic and sexual violence, honour based violence (HBV), forced marriage (FM) and female genital mutilation (FGM). From these, it is widely acknowledged that a key focus for future delivery is needed on the more hidden and significantly under-reported crimes of HBV and FGM from general awareness raising, multi-agency training for front-line practitioners, coordination of city-wide responses and targeted engagement of communities where there is a heightened risk.

12.6.2 In relation to FGM specifically, **guidance was issued to schools** before the start of the summer holidays in 2015 on being alert to the signs that young girls might be at risk of FGM and following the publication of the West Midlands Police and Crime Panel report “Tackling Female Genital Mutilation in the West Midlands”, a FGM taskforce has been formed to take forward the recommendations from this report which will provide a steer on best practice and shared learning across the West Midlands.

12.6.3 Domestic violence services in Wolverhampton are currently being reviewed and re-commissioned. The main focus of current services is on providing specialist support and there is very little universal provision/early help currently available. There are significant gaps in provision for children, male victims and perpetrators. The review has considered need/demand for: accommodation based support; floating support; perpetrator services; target hardening; and counselling therapeutic support. New services will be in place in August 2017/18.

12.6.4 The domestic violence multi-agency screening process takes place twice a week and focuses on police reports of domestic violence crimes and non-crimes where there are children associated with the household. This process has recently been reviewed and an action plan and revised operating framework has been developed to ensure that there are robust governance and monitoring arrangements in place and that there are clear pathways into both MASH and MARAC.

12.6.5 In August 2016 the self-evaluation peer audit process focused on the theme of domestic violence and identified a number of areas for improvement. In response to this, a children & young people service domestic violence operational action plan has been developed which focuses on improving practice across children’s services in response to effectively identifying and responding to domestic violence in families.

2017/18 Priorities for Safeguarding Children:

- Embed the Child Protection Conference model drawing on Restorative Practice approaches.
- Develop a robust safeguarding dataset that informs service delivery and practice improvement.
- Improve engagement of parents in the LAC review process.
- Reviewing the use of the Petch Screening Tool and understand impact
- Ensuring IRO/CP conference Chairs play a key role in improving social work practice
- Working closely with the Domestic Violence Forum deliver the domestic violence improvement plan and ensure an effective Barnardos Screening Tool process which reflects ‘Think Family’ and improves outcomes for those affected

13 Workforce

- 13.1 The joint Adults and Children Social Work Development Board and the Children and Young People Workforce Development Group oversee the development and delivery of workforce and training strategies and delivery plans.
- 13.2 The transformation of children's services has paved the way for the redesign of services and a review of the capacity and capability requirements of the children's workforce. There is a key focus on a whole family approach and outcome based care planning. A bespoke 'foundation' training course facilitated by Child and Family Foundation Training that is designed to support and enhance practice in assessment, analysis including risk and outcome based care planning has been delivered to 77 social workers and 73 early help professionals. Early indications observed by the Principal Social Worker and through case file audits is that there is some evidence that practice is improving. Further cohorts are being procured to ensure the whole children's workforce are trained in this model of practice.
- 13.3 Restorative practice has been agreed as the approach that will be used when working with children and families across children's services. Training will be rolled out to all staff by October 2017. This is a relationship and strength based approach that embodies a set of core beliefs, principles and a way of being with people that proactively promotes building a sense of community and developing social capital. It is a high support, high challenge model that creates a common language and a common approach to engaging families.
- 13.4 The role of the Principal Social Worker spans children and adults and is pivotal to ensuring that there is good joined up practice across the social care workforce and embedding a whole family approach. She leads on the delivery of quarterly social work briefings for practitioners and is very involved in promoting the development of all newly qualified social workers through the ASYE programme and practitioners and managers through the planned activities in the social work development strategy. Wolverhampton held its first joint social work conference for all social work practitioners and managers in March 2016 which was very successful and it is intended that this will be an annual conference with guest speakers.
- 13.5 A competency based supervision policy was approved by the people workforce development board on 2nd August 2016. The policy provides a framework for the supervision of all social workers working across Children, Young People & Adult Social Care. This includes staff whether they are employed on a temporary (including agency staff), permanent, full time or part time basis. The policy sets out how staff can expect to be supervised and provides managers with the key elements needed to supervise staff effectively. The policy also includes how the competency based model links with the corporate appraisal. Future dip sampling processes will review how effectively the policy is being applied in practice.
- 13.6 There is ongoing work supported by social work development and training and the quality assurance framework including auditing and self-evaluation processes. The review of CareFirst forms has amended the plan template to support more outcome focused care plans. This is leading to improvements in practice as evidenced through regular dip sampling and case file audits.

2017/18 Priorities for Children & Young People Workforce:

- Reviewing workforce data collection mechanisms ensuring that accurate and consistent reporting can be produced for managers at all levels
- Further reduce the reliance on agency workers
- Roll-out Restorative Practice across the workforce
- Producing a development plan for Social Work Managers and using this to inform a mandatory development programme to include a mixture of internal and external facilitators and coaching/mentoring
- Re-commission Child and Family Training to deliver a programme of training for social workers and early help
- Commissioning domestic violence training to ensure that all Social Workers are confident in responding to victims and perpetrators
- Embedding the Neglect Strategy and Toolkit across the workforce

14. Commissioning

- 14.1 The Commissioning Strategy - Shaping Futures, Changing Lives – provides a comprehensive overview of the People Directorate’s approach to commissioning services. This is the first directorate commissioning strategy and has been developed in response to:
- a continued and growing focus on the assets and strengths which individuals and communities bring to their experience of life to promote their wellbeing and when they need more support
 - developing our local City of Wolverhampton *Community Offer*
 - strengthening families and a whole family approach
 - *Care Act 2014* statutory duty for market shaping and development
 - Renewed focus on collaboration rather than competition in NHS services
 - Co-production – extending new understanding and actions
 - Overall influence of changes in law such as the *Care Act 2014* and the *Children and Family Act 2014* SEND Reforms
 - On-going statutory requirement of the role of Director of Adults Social Services and Director of Childrens Services for commissioning
- 14.2 The new Strategy will drive the recently established People Directorate Commissioning Service, capturing current activity and informing future priorities. The strategy is underpinned by the following principles:
- We embrace a positive, asset-based approach
 - We are using our resources to shape and investing in a better future.
 - We know these are challenging times but we will not simply manage decline.
 - Individuals will be at the centre of the commissioning process - Commissioning is for people
 - We are working to ensure that people benefit from a well-shaped market where commissioned services are local, provide social value, high quality, capacity rich, citizen-led and cost effective
 - Our interventions are evidence-based and we will learn from best practice in other places
 - We focus on delivery of care to people in their own homes or as close to home as possible.
 - We will provide people with the skills to live safely and independently
 - We will co-commission with citizens
 - We will jointly commission with partner agencies where possible so that people’s experience of support and care is integrated
- 14.3 The market position statement underpins our commissioning intentions, setting out information about existing provision and informing existing and new providers how CWC intends to commission and procure services that safeguard children, support children in need and at risk of coming into care, children in the care of the local authority and care leavers. It focuses on four main areas of work:
- **prevention** – family based early intervention that keeps families together where it is safe and reasonable to do so
 - **placement** - where children have come into the care of the Council they are in placements that most closely meet their needs
 - **permanence** – where it is not possible to reunite the family, children and young people move to stable and permanent places through adoption and special guardianship
 - **exit/transition** – returning young people home as soon as possible in the right circumstances; ensuring that when young people reach adulthood they achieve a successful transition to adult life; and staying put up to age 25
- 14.4 Domestic violence support services are currently being reviewed particularly focusing on accommodation based services, floating support, services for children, advocacy services, perpetrator services and target hardening (safer homes). New services will be commissioned in 2017/18.
- 14.5 There is a CAMHS Transformation Programme which is jointly led by the CCG and the local authority to review and develop a tier less whole system of support for children and young people

in relation to addressing emotional wellbeing and mental wellbeing. There is a Programme Board in place and 5 Task and Finish Groups to manage the activities associated with the planning and implementation of change. Stakeholder events have been held to inform the design of the new service. The Board will consider feedback from the consultation process and in particular will apply learning from the HeadStart programme. A model and vision has been approved, and a comprehensive mapping exercise is almost complete. The next step will be to develop a specification describing the new services.

14.6 Sufficiency Strategy

14.6.1 Wolverhampton's Sufficiency Strategy is currently being renewed and will be in place for the next three years. Significant progress was made in the last Strategy period (2014-17) in meeting a number of objectives. At the end of December 2016, the percentage of looked after children in residential placements was 6%. There has been an increase in the proportion of looked after children being placed in family settings with 79% of children in foster placements at the end of December 2016 compared with 73% in April 2015. The proportion of independent fostering placements has fallen from 44% to 40% at the end of December 2016.

14.6.2 Regional and sub-regional framework agreements for residential and foster care have been reviewed and renewed. The Sufficiency Strategy implementation plan will continue to reflect the needs of children and young people on the edge of care, those in care and care leavers.

14.6.3 New services have been commissioned to support both prevention of admission to care, e.g. the establishment of a short break residential service, and to promote placement stability, e.g. the introduction Safe Haven, which is a specialist intensive support service to work with young people who have complex needs in order to avoid placement breakdown, achieve permanence and help them in transition to adulthood.

14.6.4 The focus of the new strategy will be on:

- Strengthening family based early intervention that is timely and effective in keeping families together where it is safe and reasonable to do so and helps prevent children and young people entering care
- Providing a range of care placement options that match the needs of looked after children and improve stability
- Providing timely options for looked after children and young people to achieve permanence
- Providing an increased range and choice of provision for young people who will transition to adult life from care

14.6.5 The principles which underpin the strategy are:

- family based care – sustained behaviour change is most likely to occur in the context of the family
- stability and permanence – in order to thrive children and young people need consistency of approach, safety and security
- quality and sufficiency –there needs to be enough provision at the highest possible standard
- partnership and co-production – all stakeholders need to be able to shape and comment on service provision

2017/18 Priorities for Commissioning Children & Young People Services:

- Developing and delivering the 2017/20 Sufficiency Strategy
- Reviewing and re-commissioning domestic violence support services
- Reviewing and re-commissioning supported accommodation for 16/17 year olds
- Working with providers to monitor and quality assure commissioned services
- Joint review of the pooled budget for external placements between CWC and the CCG in order to ensure value for money
- Re-design of CAMHS
- Maximising regional commissioning opportunities

15. Performance Management and Quality Assurance

15.1 Performance Management

There is a strong performance management culture within children's services which operates strategically and operationally, with monthly performance management reviews at all levels.

- 15.2 A monthly strategic performance management meeting, separate to regular management team meetings, is chaired by the Service Director specifically to look at performance and quality issues. In addition, individual service areas have regular 'performance' slots on their management team meetings and team managers closely monitor performance at a team level.
- 15.3 Regular daily, weekly and monthly reports enable team managers to identify areas where improvement may be needed and issues are identified and actioned in a timely manner. At a strategic level, where performance indicates that there are areas of concern, direction is given to investigate further using more in-depth data analysis or qualitative 'dip sampling' and audits. These findings are then reported back to performance management meetings and are used to improve or make changes to practice where required. Performance continues to be monitored to assess impact and improvement. Worker and team level reports are automated where possible and made available to managers via email or a performance SharePoint site.
- 15.4 The process of monthly performance management meetings enables challenge and identification of good practice to be undertaken at team manager level, allowing managers to see the performance of their team compared with others. This promotes a strong sense of self-awareness around individual team performance and an understanding of how that performance contributes to the performance of the service overall. Where issues are identified, team managers regularly challenge individual workers and have access to reports to enable this. Individual staff are also aware of their own performance, how it contributes overall and use this information to make improvements.
- 15.5 Benchmarking information is well used to ensure that local performance is understood within a regional, national and comparator group context.
- 15.6 Children's services performance is reported across a number of 'partnership' areas including a quarterly report to the Wolverhampton Safeguarding Children's Board (which is reviewed and challenged by a multi-agency quality and performance committee prior to presentation to the Board), a quarterly report to the Children's Trust Board, a bi-monthly report to the Corporate Parenting Board and a monthly report to the council's internal Education Board. This ensures that children's services performance receives scrutiny and challenge from councillors, strategic managers and internal and external partners.
- 15.7 Where issues are identified using the methods and processes described above, regular reporting is undertaken to monitor improvement. In addition to this, where more significant areas for improvement have been identified, improvement plans are used to document, track and monitor progress and these are supported by robust performance reporting. Improvement Plans are regularly reviewed by the Children and Young People Management Team.
- 15.8 The voice of the child, families and carers feed into performance management in several ways – it is monitored via indicators such as the proportion of children who participated in reviews and following child protection conferences; parents and families are asked to complete a short survey about their experience - the results and answers to which are collected and reported. In addition, the voice of young people, families and carers is monitored through qualitative case auditing.
- 15.9 Outcomes for children are monitored both by qualitative performance monitoring and quantitative case management work, audits and dip sampling. Demographic monitoring is contained within some of the regular reporting and for specific areas such as adoption and youth offending, detailed demographic analysis is undertaken to understand the impact of demographics on outcomes. This evidence is then used in strategic decision making where appropriate.

15.10 Drifts and delays in the provision of services to children and their families are monitored as part of the regular performance management processes using indicators such as the timeliness of assessments, the length of time children have been the subject of CiN plans and the proportion of visits and reviews that are up to date. Drift and delays are also monitored through qualitative processes such as case auditing and monitoring. Where drifts and delays are identified, these are managed and challenged either by close examination of specific cases (e.g. children who have been the subject of CiN plans for more than 2 years), or by team managers via the supervision processes.

15.11 Quality Assurance

Wolverhampton has a Quality Assurance Framework that supports the development and improvement of services that strengthen families and improve outcomes for vulnerable children. The Quality Assurance Framework set out all of the activity that relates to quality assurance across children's services. This includes the role of supervision and appraisal, complaints and compliments, performance management information, participation and feedback from children, young people, parents and carers, serious case reviews, table top reviews, staff feedback, statutory inspections and case file audits. Implementation of the Quality Assurance framework is led and co-ordinated by the Principal Social Worker.

15.12 Wolverhampton operates an on-going case file audit schedule. The purpose of audit is to retrospectively examine practice against service standards, policy, and regulation and take remedial action where required. Audits have taken place on a monthly basis (bi-monthly from August 2016) and the tool has been updated in the last 12 months to focus on quality of practice and outcomes for children that are aligned with Ofsted descriptors. Quarterly self-evaluation audits, which look similar to an Ofsted inspection, also take place. Between March 2016 and the end of March 2017, 163 cases were audited. The following judgements were made:

Outstanding	4
Good	52
Requires improvement	86
Inadequate	21

15.13 In October 2015, a self-evaluation process was implemented and now takes place every quarter. This process mirrors elements of an Ofsted inspection. 20 cases are audited, selected in line with the Ofsted criteria, and the case file audit process set up ahead of the inspection is tested including involvement of early intervention services and partner agencies. Alongside this, focus groups are held with frontline practitioners to provide support and preparation ahead of the inspection. The findings of the self-evaluation is summarised in a report which is presented to senior managers and the Transforming Children's Services Board.

15.14 In addition to this audit schedule, Heads of Service undertake local 'dip sampling' on a regular basis on specific areas of practice including management oversight, case supervision, LAC or CP visits, quality of Strategy meetings, pathway plans for care leavers, etc. These are local to the service area and are undertaken in order to drive the quality of practice and ensure compliance with local procedures and legislation.

15.15 Wolverhampton's commitment to understanding local strengths and areas for development is evidenced by our commissioning of Ingson (independent company recognised by DfE as Improvement Partners) to independently audit a range of early help and social care case files to provide further rigour and challenge in helping to understand the 'so what' question and where further improvements are required. In response to the audits, action plans were produced to ensure that swift and effective action is taken in response to the findings.

15.16 In April 2016, Wolverhampton participated in the West Midlands Sector Led Improvement 'Auditing the Audit' Peer Challenge. This involved three Peer Auditors from other West Midlands Local Authorities, who followed a peer challenge process based on the LGA methodology in

order to review Wolverhampton's auditing process. Ten audits were reviewed alongside two focus groups of managers and practitioners over the 2.5 day process. Feedback has led to the development of an action plan to review and make changes to the audit processes and tools. This includes:

- Strengthening the audit process via improved feedback loop processes
- Ensuring the audit process includes practice self-evaluation
- Improving the quality of auditing via training briefings in June and embedding this through service led audit champions
- Ensuring greater service user voice in the Audit process

15.17 The auditing process has been revised in line with the Essex Model. This model takes a three tiered approach in which the social worker completes a short feedback form capturing what they feel the strengths and weaknesses are within the case; the first line manager then audits the file and makes contact with the family or young person to obtain feedback. The initial audit, the service users and social work feedback is then passed to another manager who audits the file independently. In Wolverhampton, it is expected that the second audit would be undertaken by senior members of the auditing team and senior social work managers.

15.18 This process will add a layer of depth to the auditing process and provide a wealth of qualitative information around the lived experience of the child or young person and their family or carers. This model was implemented in September 2016 following a pilot in August 2016.

2017/18 Priorities for Performance Management and Quality Assurance:

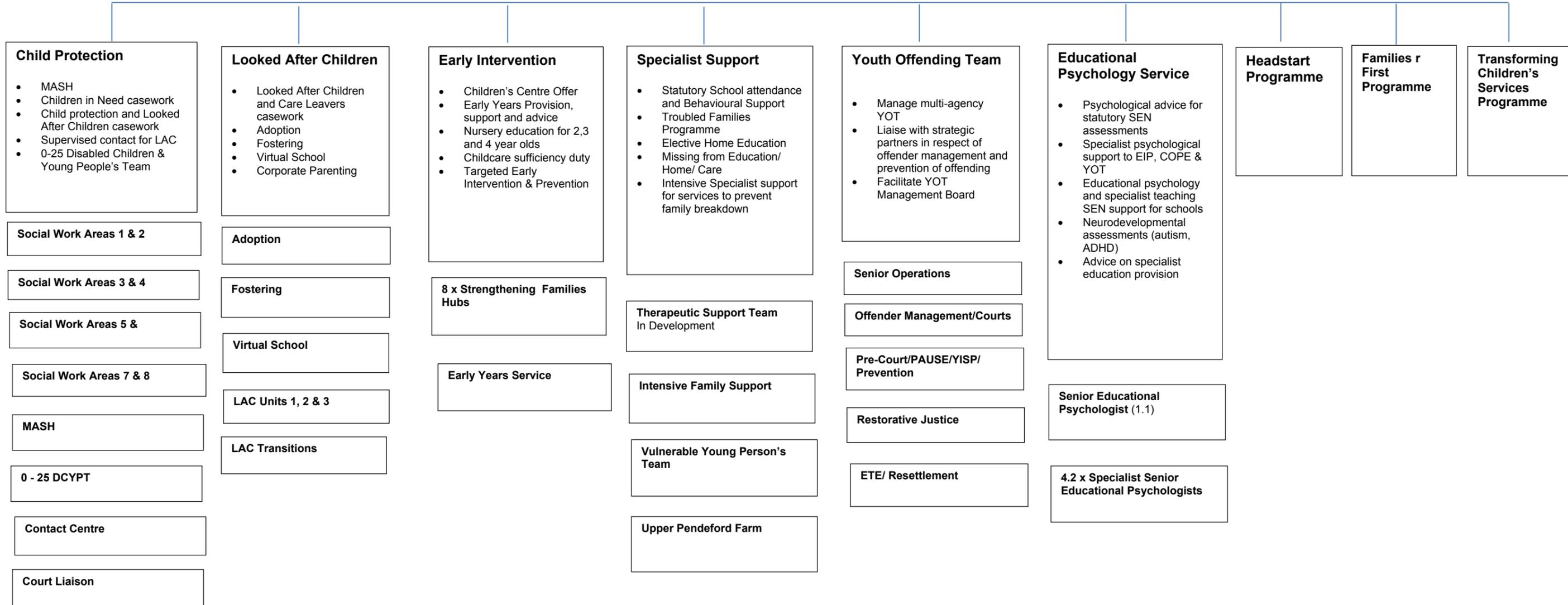
- Producing a performance management improvement plan and a data quality strategy
- Ensuring accurate and relevant information is regularly available to inform understanding of performance and quality in the MASH
- Producing dashboards for front line managers
- Strengthen the line of sight which senior managers and leaders have on frontline practice by providing detailed information about children in need whose cases are being held by team managers, or managed on duty, prior to being allocated to a named social worker
- Improving recording in relation to ethnicity; CiN; and date when child is first seen
- Ensuring CareFirst forms support accurate and consistent recording/reporting
- Introducing a monthly 'office day' across all teams where recording is brought up to date, etc
- Reviewing family meetings and re-naming them family conversations ensuring that there is a robust procedure in place for recording them
- Ensuring quarterly performance management meetings bring together performance and quality assurance processes
- Ensuring that the CareFirst system can distinguish between a CiN Plan and a CiN Assessment and that they can be reported against
- Reviewing and updating Quality Assurance Tools and producing a schedule of audits and dip sampling
- Ensuring management oversight at the frontline is appropriately challenging and consistent and that frontline managers are able to use the case file audit tool effectively
- Ensure that greater prominence is given in case files to the thoughts, wishes and feelings of children and young people

Children & Young People

April 2017

Service Director

- Child Protection
- Looked After Children
- Youth Offending
- Early Intervention
- Educational Psychology
- Specialist Support
- Headstart
- Disabled Children & Young People 0-25



APPENDIX 2 – SERVICE MODEL

