

**Joint Interim Follow-Through inspection of services
to protect children and young people in the
Midlothian Council area**

March 2008

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Introduction

The *Joint Inspection of Children's Services and Inspection of Social Work Services (Scotland) Act 2006*, together with the associated regulations and Code of Practice, provide the legislative framework for the conduct of joint inspections of the provision of services to children. Inspections are conducted within a published framework of quality indicators, *How well are children and young people protected and their needs met?*.¹

Inspection teams include Associate Assessors who are members of staff from services and agencies providing services to children and young people in other Scottish local authority areas.

¹ *How well are children and young people protected and their needs met?*. Self-evaluation using quality indicators, HM Inspectorate of Education 2005.

1. The inspection

HM Inspectorate of Education (HMIE) published a report on the joint inspection of services to protect children and young people in the Midlothian Council area in February 2007. Working together, services within the Midlothian Council area prepared an action plan indicating how they would address the main points for action identified in the original HMIE inspection report.

Inspectors revisited the Midlothian Council area in December 2007 to assess the extent to which services were continuing to improve the quality of their work to protect children and young people, and to evaluate progress made in responding to the main points for action in the initial report.

2. Continuous improvement

A collective approach had been taken by senior managers to improving structures and services beyond the scope of the main points for action.

Within the local authority there had been a number of changes in social work staff including the appointment of an interim Director of Social Work. Following the local council elections in May 2007, there had also been changes in the elected members of the Council, including those responsible for child protection. Elected members were clear about their responsibilities and had demonstrated effective leadership by working along with senior managers to identify resource requirements. There had also been a number of changes of key managers within the police service.

Multi-agency forums had been established in a number of local areas to ensure that there was a more coordinated approach to providing help and support to children and families who need it. The social work practice teams and the health visiting service had been re-aligned to these areas. The role of the integration teams, comprising family support workers, education welfare officers and educational psychologists, had been extended and management responsibilities clarified. Staff across services were working more closely and more effectively together. Plans were being made for each integration team to facilitate and support an area Children's Services Group (CSG). Annual plans for these groups, linked to the Midlothian Children's Services Strategy and Plan, were being developed.

A Drugs Screening Group had been established and was working well. This had led to improved information-sharing between services about parental substance misuse. It had helped to ensure that children, parents and carers received help and support quickly.

3. Progress towards meeting the main points for action

The initial inspection report published in February 2007 identified seven main points for action.

3.1 Implement a strategy to raise public awareness of child protection.

Encouraging progress had been made towards meeting this main point for action.

The Quality Assurance Sub-Committee of the Child Protection Committee (CPC) had developed a communications strategy and action plan to raise public awareness of child protection. The timescales for the completion of actions were not sufficiently clear to monitor and illustrate progress.

A number of initiatives had been introduced to promote public awareness of child protection. Posters and information leaflets had been distributed. These included a leaflet which described the cultural and legal context of child safety in Scotland, which was also available in Polish. Articles about child protection and the approach the Council and partners were taking to improve services had been published in local newspapers. There had also been coverage on local radio. Child protection information, including policies, procedures and advice about how to pass on concerns about children, had been made available on the Midlothian Council website. It also provided information about the work of the CPC. Some of the language used to describe the role, remit and responsibilities of the CPC was not particularly user friendly.

Although positive action had been taken, it was too early to identify the impact of steps taken to raise public awareness. However, there was a clear commitment from all services to further develop this work.

3.2 Improve joint planning to meet children's needs.

Joint planning to meet children's needs was progressing very well and significant improvements had been made.

Services were working well together to improve outcomes for children. Steps had been taken to ensure that all children on the child protection register had an allocated social worker. A small number of senior staff had been given responsibility for chairing child protection case conferences until the recent appointment of an independent chair person. This had provided a greater consistency in approach. Social work reports were now sent to those invited to attend case conferences seven days in advance of the meeting. This allowed staff and parents sufficient time to read them before they attended and staff to be better prepared. Where possible and appropriate, case conferences were held during term time to allow school staff to attend. Forms used by social workers to record their involvement with children and families and their work around case conferences had been improved. This had helped to provide a more consistent approach to the assessment of progress in implementing the child protection plan. Social work staff were now more confident in this aspect of their work. The police had appointed a child protection case conference coordinator to monitor police attendance at case conferences. They were about to pilot a new report format to improve the information they provided. Child protection plans were much clearer. Actions to be taken within agreed timescales were clearly identified and responsibilities allocated to staff and

parents. Staff took account of changing circumstances and adapted the plans when necessary.

Core group meetings were now held on a regular basis. They were well attended by relevant staff and involved parents. These meetings had helped to share responsibilities and staff were more confident in challenging each other on progress made in implementing the child protection plan. Regular core group meetings had also made it easier for social work staff to prepare for review case conferences and easier for parents to express their views. Social work staff chaired core group meetings and a standardised recording format had been introduced. Responsibility for completing the record of these meetings was intended to be shared among staff, but was invariably done by social work staff. There were occasional delays in distributing the record of core group meetings.

The need for a Family Group Conference (FGC) was now considered at all case conferences and when children were at risk of being accommodated. This had enabled more children to remain within their own or extended families. Integration teams were making more use of FGCs when children and families were referred for help and support.

3.3 Ensure that improvement objectives of the Child Protection Committee and the Integrated Children's Services Plan are achieved.

Senior managers had taken positive steps to ensure that improvement objectives of the CPC and the Integrated Children's Services Plan (ICSP) were achieved.

A Midlothian Critical Services Oversight Group (CSOG), comprising senior managers from across services, had been established. The CSOG had met regularly to review progress against the objectives of the CPC. The Chief Executive of Midlothian Council had taken over as chair of the CPC which had strengthened the leadership role and enabled senior managers to make improvements. Members of the CPC had been encouraged to challenge each other across professional boundaries on any identified or perceived shortcomings. This had led to a more open, honest and transparent relationship between services. A lead officer and a training and development officer had been appointed. They had provided effective support to the work of the CPC.

Performance management information for the CPC was limited, but an Edinburgh, Lothian and Borders Executive Group (ELBEG) short life working group had been established to identify what information should be gathered. A Quality Assurance Framework was almost complete, but the CPC had still to agree on how performance would be measured.

The Midlothian Children's Services Executive Group provided overall strategic leadership and direction for children services planning, including child protection. There had been a comprehensive review of the Integrated Children's Services Planning Framework. A new Midlothian Children's Services Forum had been established and given responsibility for monitoring the progress of the ICSP. A wide range of services were represented on the forum including, police, health, social work, housing, the Scottish Children's Reporter Administration (SCRA) and the voluntary sector. The forum had a number of task groups and they were in the process of developing clear and well defined action plans. A Midlothian Children's Services Strategy & Plan 2007-2010 had been developed which provided a shared vision across services for '*a multi-agency, multi-disciplinary approach towards providing services in an integrated way*'. Plans were being made by senior managers to integrate more

fully children's services planning into the community planning framework. Senior managers across services were knowledgeable about the revised framework. They were committed and enthusiastic about it and were clear about the links to the community plan. Through the restructuring of services and staff development within social work, staff were beginning to understand and relate more closely to processes for children services planning. These structures provided a sound basis for more effective joint planning.

3.4 Ensure the views of children and families are taken into account when planning and delivering services.

Limited progress had been made in ensuring the views of children and young people were taken into account when planning and delivering services. The Quality Assurance Sub-Committee of the CPC had responsibility for this, but it had not yet been given a high priority. However, some work had been done on gathering the views of children and their families who had been involved in child protection processes. A range of approaches had been developed to gather views from a wider group of children, but this had not been coordinated across services.

Grandparents and extended family members had been consulted during the development of kinship care proposals. Views had been gathered from through-care and after-care groups which had informed the development of the revised Children's Services Strategy and Plan. Two young people calling themselves the '*voice of experience*' mentored newly accommodated children and fed their comments back to staff. Consultation with users, undertaken by ELBEG, had influenced the development of new child protection procedures. Following a very recent consultation exercise involving a small number of families who were involved in child protection processes, it had been agreed that the newly appointed independent chair for case conferences would collect views from children and families. Discussions on how to use the integration teams to collect children's views on services across a wider group of children were at an early stage.

Within the NHS Lothian, users groups had been established to obtain their views on changes in service delivery. However, children were not sufficiently well represented on these groups.

3.5 Improve training to raise the awareness of staff within and across services of their roles and responsibilities in child protection.

Significant progress had been made by the Training Sub-Committee of the CPC in improving child protection training. A training and development officer had been appointed and a comprehensive training strategy had been developed. A training programme had been implemented and a variety of courses were available to a wide range of staff. Housing staff, representatives from voluntary organisations and GPs had attended these training events. Services maintained records of individual staff training needs and the training they had completed.

The training provided had increased opportunities for staff to maintain their professional registration. It also provided them with an opportunity to build closer working relationships with other staff and develop a shared understanding of their various roles and responsibilities. Plans were being made to introduce additional courses. There was no joint budget for training. Resources were made available within the constraints of existing budgets from

individual services. However, senior managers and members of the CPC were committed to continuing to deliver high quality and relevant training that reinforced the need for all staff to recognise their responsibilities in child protection.

3.6 Ensure Chief Officers monitor and review the effectiveness of the Child Protection Committee and key child protection processes.

Chief Officers, through the CSOG, had taken positive and effective action to monitor and review the effectiveness of the CPC and key child protection processes.

The Acting Director of Social Work reported regularly to cabinet members of the Council on the progress made in improving social work services to children. The Chief Executive of Midlothian Council received regular reports on performance. The Council's Policy Review Committee – Child Protection Sub-Group also received regular reports and scrutinised developments. This had helped senior managers and elected members to assess and provide resources for additional staff and strengthen the role of the children and families' social work team leader. Imaginative steps had been taken to recruit additional social work staff. The Council had commissioned a new information system '*Corelogic*' which was due to be installed late 2008. NHS Lothian Healthcare Governance and Risk Management Committee received regular reports on progress made against the CPC action plan.

3.7 Improve performance monitoring to ensure continuous improvements in how staff carry out their work.

Significant progress had been made in monitoring performance and identifying areas for improvement. Health service managers carried out regular reviews of cases with staff. Within the police service daily tasking and coordinating meetings enabled senior managers to monitor the police response to child protection issues. Positive steps had been taken to improve the availability of information to enable senior managers within social work to monitor improvement and staffing levels. They now received regular reports and analysis of performance in key areas including, allocated and unallocated cases, submission of reports and workloads. Improved monitoring within social work had led to an encouraging reduction in unallocated cases, but further improvement was necessary.

A multi-disciplinary group of senior staff comprising representatives from the police, health, social work and education had been established to regularly review Inter-Agency Referral Discussions. They met on a fortnightly basis to review the quality of the initial decision-making, the quality of the risk assessment and the action that had been taken following the discussion. This had led to improvements and had helped to ensure a more consistent approach by staff when initial concerns about a child were raised. The opportunity had also been taken to provide feedback to individual staff and there was improved communication and information-sharing with schools.

No inter-agency self-evaluation had been carried out. However, encouraging progress had been made on self-evaluation within Midlothian Council. Social work teams had started using a self-evaluation tool '*How good is our service?*'. This had helped to identify areas for improvement. Social work managers had introduced a programme of regular case file audits. The results were passed to team leaders to discuss with staff and to take any action that was required.

4. Conclusion

Overall, services had responded quickly and positively to the main points for action outlined in the inspection report published in February 2007. Effective leadership and direction provided by CSOG and the CPC had contributed to improvements in services to protect children in Midlothian. Partnership working had improved and there was improved communication between managers and staff within the social work service. Social work staff had responded positively to significant changes in difficult circumstances. Their co-operation, support and commitment had contributed to many of the improvements in key child protection processes. There was need to consolidate and build upon the improvements achieved. There was still considerable work to be done, but services were now much better placed to take forward the identified areas for improvement.

5. What happens next?

Within one year of publication of this report, HM Inspectors will re-visit the authority area to assess further progress made in meeting the main points for action.

Kevin Mitchell
Inspector
March 2008

How can you contact us?

If you would like an additional copy of this report

Copies of this report have been sent to the Chief Executives of the local authority and Health Board, Chief Constable, Authority and Principal Reporter, Members of the Scottish Parliament, and other relevant individuals and agencies. Subject to availability, further copies may be obtained free of charge from HM Inspectorate of Education, First Floor, Denholm House, Almondvale Business Park, Almondvale Way, Livingston EH54 6GA or by telephoning 01506 600262. Copies are also available on our website www.hmie.gov.uk.

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