

Services for children and young people in Moray

March 2019

**Progress review following a
joint inspection**

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1. Background to this progress review

We carried out a joint inspection of services for children and young people in the Moray community planning partnership area between August and October 2016. At that time, we were not confident that joint planning of children's services was resulting in improved wellbeing for children and young people. Leaders were not working together effectively to improve outcomes for children and young people. The lack of governance and accountability for implementing improvements meant that the pace of change was too slow. The quality and effectiveness of children's assessments and plans was too variable. While those at immediate risk of harm were being protected, children experiencing neglectful parenting and cumulative harm were exposed to risk for too long before decisive action was taken.

We identified six priorities for improvement (appendix 1) and gave notice that we would carry out two progress reviews. The first would report on initial progress within six months of publishing our joint inspection report and the second would involve returning to the area for a second, more comprehensive review of progress within 12 months. We first revisited Moray in September 2017 and found that leaders had taken the findings of the joint inspection very seriously and were working hard to deliver change and improvement. Chief officers had made it a priority to strengthen their strategic planning arrangements and develop quality assurance systems. They planned to build on this work to evidence real improvements in operational practice to ensure that children and young people and their families experienced more effective support and intervention. However, at this time, partners acknowledged that they had yet to develop more strategic approaches to children's rights and participation.

The joint inspection report and the initial progress review, published in February 2017 and December 2017 respectively, can be found on the Care Inspectorate website at www.careinspectorate.com

2. How we conducted this second progress review

The aim of this second review of progress was to assess and report on progress made in planning and implementing action to address the main areas for improvement identified during the joint inspection.

A team of inspectors from the Care Inspectorate, Her Majesty's Inspectorate of Constabulary for Scotland and Education Scotland carried out a further review of the progress made in the community planning partnership area over nine days during November and December 2018. We did not set out to reassess all the areas of work relating to children, young people and families that would be covered in a full inspection. Instead, we reviewed the work being done to further address the six areas for improvement set out in the original joint inspection report.

During this progress review we:

- took account of the work carried out by the Care Inspectorate strategic link inspector and Education Scotland area lead officer to support chief officers and senior managers in improving services

- reviewed partners' self-evaluation of their progress against all six of the main areas for improvement, along with supporting evidence they provided
- undertook a staff survey, completed by 419 staff working across children's services
- reviewed the case records of 54 children and young people, involving five local file readers from the community planning partnership area in this activity
- interviewed chief officers, senior managers, elected and non-executive NHS board members
- held focus groups with first-line managers and frontline staff
- met with groups of children and young people.

3. Progress made

The partnership's approach to improvement

Leaders and senior officers had taken the findings from the joint inspection in 2016 very seriously. They had made a firm commitment to work more closely together and raise their collective aspiration for improving services to children and young people. They had worked to develop and implement a comprehensive improvement plan to address the six improvement areas identified in the joint inspection report. Governance and reporting arrangements had been significantly strengthened. Partners had made it a priority to develop and implement quality assurance approaches designed to improve standards of operational practice. They had visited another local authority area that had faced similar significant challenges and were using the learning from this to develop new approaches. They had sought out examples of best practice across the country and formed links with partnerships in other areas to provide them with greater external support and challenge. Partners recognised the scale of improvement and culture change they needed to make to achieve their aspirations for all children and young people in Moray and were committed to a five-year change programme. They accepted that the cultural shift needed to embed and sustain improvements over time would take longer and they were fully committed to achieving this.

Area for improvement: Improve standards of operational practice by setting clear expectations for staff and strengthening approaches to quality assurance and staff supervision.

Partners had demonstrated considerable commitment to and investment in developing new approaches to improve standards of operational practice. A revised suite of multi-agency procedures was providing clearer direction and guidance to staff. This had been supported by a refreshed programme of learning and development, to help staff understand and implement these changes.

A comprehensive review of staff supervision arrangements had been completed, with staff having engaged well in the development and testing of new approaches. Managers valued specialist training, which was helping them to deliver more robust supervision and to re-balance staff support with constructive challenge that had previously been lacking. Supervision was taking place more regularly, with staff

reporting that they felt better supported and more confident about their work. The development of supports for named persons were still at an early stage.

Partners had audited a range of single- and multi-agency files, to monitor change and improvement to practice. In many ways, findings from these audits mirrored other findings in this review of vulnerable children's records¹. We found that the wellbeing of children and young people in almost all cases had improved because of the help they had received. Most staff recognised concerns about children and young people, including unborn babies, and took action to keep them safe. The revised inter-agency referral discussion process was helping to ensure a more consistent response to concerns when they were identified. The national practice model and risk assessment framework were both being used more consistently to support the assessment of children and young people. However, we continued to see variability in the quality of assessments and plans. Chronologies were not well enough developed and did not effectively inform assessments. For the majority of children and young people, their views had informed their assessments and plans. However, for a smaller number of children, their views had not been looked for or included well enough.

We found some examples of very good joint working practices and staff reported improved levels of confidence about their own practice and that of colleagues from other services. Leaders had fostered and encouraged a more supportive environment, in which constructive challenge and debate could take place at all levels across organisations. This was enabling staff to more appropriately resolve differing professional views about the actions required to manage risk and meet children's needs.

The multi-agency practice hub (MAPH) had evolved to deliver a key quality assurance role. Initially set up in 2017 to review the quality of child welfare and protection referral information, this work had developed a greater focus on reviewing the quality of the multi-agency response to concerns. The real-time feedback to staff and first line managers about the quality of practice in individual cases was providing an effective mechanism to drive improvement. Staff welcomed the opportunity to attend the MAPH weekly meetings, gaining greater insight into examples of best practice. The review of the MAPH, scheduled for January 2019, will be an important opportunity to take stock of achievements and plan for future quality assurance and operational improvements.

Despite the many positive changes and improvements to systems and processes, improving the quality and consistency of practice remains a challenge for partners. A few exemplars of very good practice had been developed. There is an opportunity to build on these and create a range of clear, measurable practice standards from which to benchmark and more systematically measure change and improvement. First-line managers and reviewing officers could have a key role in this work, through established processes such as supervision and multi-agency child protection and looked after children reviews.

¹ The sample was prepared as a stratified sample, where specified groups appear in numbers proportional to their size in the target population. Due to the small sample numbers, the samples chosen have limited statistical significance. As such, the sample cannot assure the quality of service received by every child in the local authority.

Area for improvement: Improve initial risk assessment of, and response to, vulnerable children and young people at risk of, or experiencing neglectful parenting or cumulative harm

Staff demonstrated a greater awareness and understanding of the impact of neglectful parenting on children and young people. Creative learning and development events together with clearer guidance had helped staff more confidently recognise concerns and share these at an earlier stage. Child's planning meetings were being used more effectively to share concerns and agree a support plan.

There had been a concentrated effort by partners to strengthen the inter-agency referral discussion (IRD) process. Information gathering, assessment of immediate risk and action planning was more timely. This was facilitated by revised guidance, a single, shared recording format and the newly established single point of contact within each partner agency. Concerns about child neglect were increasingly being considered through the new IRD process. Staff were having more meaningful discussions and debate about assessing and managing immediate risk. Because of this, decision making was clearer and better evidenced. We could see that staff were giving greater consideration at an early stage to whether a child protection plan or compulsory measures were needed to keep the child safe.

The joint inspection in 2016 identified important weaknesses in how staff recognised and responded to concerns about children at risk of, or experiencing, neglect. As part of this progress review, we looked at a sample of cases (24) where concerns about neglectful parenting or cumulative harm had led to a child welfare or protection referral to the social work service. We found that the response to child protection concerns was good or very good in more than half of the cases we read, indicating an improving picture in this area of practice. In a quarter of cases, we assessed the response as being adequate. This represents a standard of performance characterised by strengths just outweighing weaknesses. In four cases, the response to concerns remained weak. For a small number of children and young people, plans to keep them safe had been triggered by an incident rather than a robust assessment of risk or need: the cumulative impact of neglect had not been fully assessed and opportunities to intervene at an earlier stage had been missed.

The recent introduction of the medical neglect pathway was enabling children to have their health needs more comprehensively assessed. Partners were helpfully monitoring the number of children seen by paediatric health services. More meaningful performance and outcome data would enable partners to assure themselves that this new process is supporting improvements in the health and wellbeing of children experiencing neglect.

Following the joint inspection, a short-life working group had been set up to lead and co-ordinate improvement activity in relation to child neglect. This group was now a substantive sub-group of the child protection committee (CPC) and had been successfully raising staff awareness of the impact of neglect on children and young people. Development and implementation of a specialist toolkit, including a framework to assess neglect, had been slow to progress.

Audit work by partners had primarily focused on a small number of cases. Partners recognised the need to refocus this work, for example through a thematic review over a longer period of time and with a stronger focus on outcomes for children and young people. By doing this, senior officers would have greater assurance improvement activity is achieving improved outcomes for this group of vulnerable children.

Area for improvement: Implement a framework of joint self-evaluation, ensuring a clear focus on improved outcomes for children and young people, including those in need of protection

Chief officers had demonstrated a clear commitment to continuous improvement through their investment in joint self-evaluation, quality assurance and supervision. Following the joint inspection in 2016, they created the quality assurance, performance and planning team (QAPPT) to lead and co-ordinate the quality assurance agenda across children's services. Initially set up on an interim basis, this resource, including a new team manager post, was being jointly resourced by partners on a permanent basis. Reporting directly to the executive leadership group, and aligned with each of the four strategic planning groups, this had created a more consistent approach to joint self-evaluation and shared learning across children's services.

The framework to support joint self-evaluation and quality assurance was developed after the inspection and was being implemented. Partners were using a range of approaches and methodologies to inform their joint self-evaluation work. Single- and multi-agency practice audits and reviews of individual children's cases were helping partners identify areas of practice where further improvement was required. Staff and first-line managers were receiving helpful feedback on the learning from this work. There were learning visits to areas that were performing well and these were successfully informing improvements. Partners had engaged with CELCIS as part of the PACE (permanence and care excellence) programme and were using improvement methodology to prevent drift and delay for children requiring permanent alternative care. This was still at an early stage but has the potential to improve outcomes for this group of children and young people.

Tests of change were enabling an increasing number of staff to become more involved in a range of improvement work within their localities. Most staff who responded to our survey agreed that they contribute to self-evaluation within their service. However, some were yet to see quality assurance as forming part of their own work, viewing this as the responsibility of the specialist teams such as the MAPH or the QAPPT. Thematic learning events were usefully sharing the learning from case reviews and practice audits with a wide range of staff. New, more systematic approaches to evaluating the impact of learning and development sessions had been introduced. Feedback from staff attending these events had been extremely positive however, it was too soon to see the longer-term impact of their learning on practice change and improvement.

Approaches to gathering the views of children and young people, in particular those in need of care and protection, were under-developed. Partners had identified this through their own recent joint self-evaluation. Senior officers would gain more meaningful insight into experiences of help by implementing a systematic approach

to seeking and gathering the views of children and their families. This could usefully inform future policy development and service redesign.

While the range of improvement work being undertaken by partners is commendable, tangible improvements resulting from this work were limited. Partners were aware of the need to concentrate efforts on a smaller number of improvement priorities and to have a greater focus on outcomes for children and young people. By doing so, partners would gain greater insight and assurance about the effectiveness of services being delivered.

Area for improvement: Strengthen the governance, leadership and accountability of the child protection committee

Governance arrangements between chief officers and the child protection committee (CPC) had been strengthened considerably. Chief officers were meeting regularly to discuss the child protection and wider children's services agenda, and were engaging in more constructive challenge and debate. This more mature approach had led to a greater openness and honesty in discussions between chief officers and the CPC. Clear lines of reporting and accountability had been established, with chief officers communicating more clearly their expectations to the CPC. With greater oversight and scrutiny of the CPC's work, chief officers were providing appropriate levels of support and challenge to the chair and committee members.

With a greater ownership and shared responsibility to drive improvements, we could see that the core work of the CPC was being more equally shared across partner agencies. Representatives from different agencies were leading the three CPC subgroups and discussions at meetings were more inclusive of the wider committee membership. Subgroups were providing regular updates on their work to the CPC, enabling progress to be more effectively monitored. The revised CPC delivery plan linked well to the key priorities of the children's services plan however, there had been delays in implementing some important actions. The plan was too focused on measuring processes rather than outcomes for children in need of protection.

There was a growing willingness by chief officers and the CPC to reflect on and learn from practice. The significant case review group, established following the joint inspection, had reviewed the learning from four cases. Learning had been shared directly with the staff involved in each case and more widely through a PRISM (practice, reflection and improvement, short module) learning event. Partners were keen to build on the success of this approach as they promote a more open and reflective learning culture.

The CPC had developed and implemented a range of new procedures and initiatives since the joint inspection. They had refined their performance data to help them better understand how well they were delivering services to children and young people in need of protection. While these developments were positive, a greater focus on performance and outcome measures would enable the CPC to more effectively demonstrate the difference its work is making to the lives of vulnerable children and young people.

Arrangements to formalise connections between the CPC and other public protection groups in Moray had been slow to progress. Such arrangements would help support

more collaborative and strategic working across the public protection arena. Plans were in place to broaden the work of the chief officers group, to include the adult support and protection committee and the violence against women partnership. Chief officers should ensure that they have a strategic overview of all public protection work in Moray, including that of the alcohol and drug partnership and MAPPA (multi-agency public protection arrangements).

Area for improvement: Strengthen the approach to corporate parenting, participation and children's rights to deliver improvements at pace

Encouraging progress had been made by partners to more strategically direct and deliver their corporate parenting responsibilities. Governance and reporting arrangements had been strengthened between the corporate parenting strategic group and the executive leadership group. Subgroups reflecting the six pillars of the care leavers covenant² were supporting delivery of a revised corporate parenting plan. The significant number of partners, as corporate parents, illustrated a collective commitment to collaborative working in meeting the needs and aspirations of care experienced young people. Partners had been working well to raise the profile of corporate parenting responsibilities with staff across services. While the corporate parenting plan helpfully set out key performance measures, partners recognised the need to develop a performance reporting framework to better evidence improved outcomes for looked after children and young people.

The champions board, created following the joint inspection, was still in a very early stage of development. Engagement activities were encouraging some care experienced young people to become more involved and identify priority areas. This was being led by young people, supported by newly established development workers. As the champions board evolves, there is considerable potential to amplify the voice of care experienced young people.

Through their own self-evaluation, partners had identified that seeking out and listening to the voices of children and young people, and more specifically the voices of care experienced young people, was an ongoing area for improvement. They recognised there was much more to do to engage children and young people meaningfully in policy development and service planning and to embed children's rights fully across children's services. Initial work on this area for improvement had stalled and only recently been resumed under the new direction of the GIRFEC (Getting it Right for Every Child) strategic group. A recent learning visit to a high-performing local authority area had provided a renewed impetus to effect change and improvement. While we continued to see examples of positive engagement activity with some groups of children and young people, the approach was not strategic. Development of this work, alongside new initiatives such as family conferencing and development of advocacy support, were yet to be planned strategically. The Children and Young People's Rights and Participation strategy was still at a draft stage. The draft strategy needs to give greater consideration to engagement approaches for care experienced young people and for children and young people with additional needs. Overall, progress in strengthening the strategic approach to participation and children's rights had been too slow.

² The Scottish Care Leavers Covenant is an agreement made between a number of organisations aimed at promoting good outcomes for care leavers

Area for improvement: Strengthen collective vision and collaborative leadership to direct the delivery of integrated children's services. It should be underpinned by strategic needs assessment and robust performance information, and demonstrate measurable improvements in outcomes for children, young people and families

Overall, considerable progress had been made in this area for improvement. Collaborative leadership and partnership working had been strengthened and transformed strategically across the partnership. Following the joint inspection, chief officers had prioritised a review of children's services planning arrangements, resulting in the creation of the executive leadership group and four strategic delivery groups. With improved governance and reporting arrangements in place, partners were beginning to more effectively direct improvements in the delivery of children's services.

A revised shared vision for children and young people in Moray was providing a clearer focus and direction. It had informed the three key priorities in the children and young people's services plan (2017-2020). This was reflected across a number of other strategic and joint delivery plans including the local outcome improvement plan. Staff had a greater understanding of how their work related to these priorities. While the quality and relationships between strategic and operational plans had improved, there is a need to strengthen these by including more specific milestones, targets and timescales.

Partners were strongly committed to developing a comprehensive strategic needs assessment and creating a suite of performance data to better demonstrate performance and inform service delivery. They had started engagement with the Scottish Government Realigning Children's Services (RCS) team. A change in staffing in the RCS team has resulted in a hiatus in progressing this work. As an interim measure, partners continued to develop their profile of children in Moray to help inform the development of a more comprehensive strategic needs assessment. They had introduced a joint approach to collect, analyse and report performance information across children's services, with a greater focus now on gathering more robust outcome data. There is opportunity to build on this work to better demonstrate the effectiveness of services in delivering improved outcomes for vulnerable groups of children and young people. While some of this work was still in its early stages, there is potential for this to provide leaders with more robust performance information across children's services and to more effectively direct resources to areas of greatest need. This will be important as partners begin to develop a more strategic approach to the joint management of resources and commissioning.

Collectively, partners were committed to improving the quality of children's services across Moray. Leaders and senior managers were promoting culture change and encouraging positive relationships with appropriate challenge and support between partners. This was evident across strategic and operational groups, and among staff working across services. They had become more outward-looking, demonstrating a willingness to learn and adopt good practice from other areas. Chief officers had invested jointly in the creation of the quality assurance and performance team to lead and co-ordinate improvement activity. The multi-agency practice hub had strengthened its quality assurance remit and was more effectively monitoring and

reviewing key aspects of operational practice. The executive leadership group now had a clearer overview of the quality and standard of operational practice and was better placed to direct the work of these teams to areas of greatest need.

4. Conclusion

Leaders had taken the findings of the joint inspection very seriously and had given a clear commitment to improve how children's services were being delivered across Moray. They had prioritised strengthening their strategic planning arrangements and had invested in the development and implementation of a framework for quality assurance. A change in culture to one of joint ownership and shared responsibility, where debate and constructive challenge was encouraged, was modelled by chief officers and senior managers and had been adopted by staff.

Partners had been working hard to make the changes necessary to improve the lives of children and young people. Through their strengthened approaches to self-evaluation and willingness to be outward-looking and learn from high-performing areas, partners were adopting new ways to improve the quality of services being delivered. Senior officers are aware that there is much more to do to achieve their aspirations for all children and young people in Moray and have demonstrated their commitment to making this happen.

In continuing their programme of improvement, partners should do the following.

1. Maintain the strong momentum that has been built over the last two years to fully address the improvement actions set out in the report of the joint inspection in 2016. While acknowledging the challenging financial context facing leaders, it will be important to sustain the resources needed to implement these changes and improvements.
2. Continue to build on the improvements already achieved.
3. Pay particular attention to quality assurance and supervision to gain the consistency in operational practice that children and families have the right to expect.
4. Hear from children and families about what it feels like to be involved in processes and services, and whether services are making a positive difference. Partners should use this knowledge to continually refine service delivery.
5. Find ways to demonstrate the difference services are making to the lives of children, young people and their families.
6. Fully embed a rights-based, child-centred culture across Moray.

5. What happens next?

Given the progress made and our confidence that leaders had the conditions in place for continued improvement, we will not be making any further reviews specifically related to the 2016 inspection. The Care Inspectorate and scrutiny partners are continuing to collaborate to carry out joint inspections across the country, focusing on the experience and outcomes for children and young people in need of care and protection. An inspection team will visit Moray in due course as part of that programme of inspection. We will continue to offer support as required and monitor progress through existing link inspector arrangements.

Appendix 1: Areas for improvement arising from the 2016 joint inspection of services for children and young people in Moray community planning partnership area

- Improve standards of operational practice by setting clear expectations for staff and strengthening approaches to quality assurance and staff supervision.
- Improve initial risk assessment of, and response to, vulnerable children and young people at risk of, or experiencing neglectful parenting or cumulative harm.
- Implement a framework of joint self- evaluation, ensuring a clear focus on improved outcomes for children and young people, including those in need of protection.
- Strengthen the governance, leadership and accountability of the child protection committee.
- Strengthen the approach to corporate parenting, participation and children's rights to deliver improvements at pace.
- Strengthen collective vision and collaborative leadership to direct the delivery of integrated children's services. It should be underpinned by strategic needs assessment and robust performance information, and demonstrate measurable improvements in outcomes for children, young people and families.

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