

# Special Children and Families Scrutiny Panel

Thursday, 27th August, 2020  
at 5.30 pm

## PLEASE NOTE TIME OF MEETING

Virtual Meeting

This meeting is open to the public

### Members

Councillor Taggart (Chair)  
Councillor Mitchell  
Councillor J Baillie  
Councillor Chaloner  
Councillor Guthrie  
Councillor Laurent  
Councillor Mintoff

### Appointed Members

Nicola Brown, Primary Parent Governor  
Catherine Hobbs, Roman Catholic Church  
Francis Otieno, Primary Parent Governor  
Claire Rogers, Secondary Parent Governor  
Rob Sanders, Church of England

### Contacts

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# **PUBLIC INFORMATION**

## **CHILDREN AND FAMILIES SCRUTINY PANEL**

**Role of this Scrutiny Panel:** To undertake the scrutiny of Children and Families Services in the City, including the Multi Agency Safeguarding Hub (MASH), Early Help, Specialist & Core Service, looked after children, education and early years and youth offending services, unless they are forward plan items. In such circumstances members of the Children and Families Scrutiny Panel will be invited to the relevant Overview and Scrutiny Management Committee meeting where they are discussed.

### **Terms Of Reference:-**

Scrutiny of Children and Families Services in the City to include:

- Monitoring the implementation and challenging the progress of the Council's action plan to address the recommendations made by Ofsted following their inspection of Children's Services in Southampton and review of Southampton Local Safeguarding Children Board (LSCB) in July 2014.
- Regular scrutiny of the performance of multi-agency arrangements for the provision of early help and services to children and their families.
- Scrutiny of early years and education including the implementation of the Vision for Learning 2014 – 2024.
- Scrutiny of the development and implementation of the Youth Justice Strategy developed by the Youth Offending Board.
- Referring issues to the Chair of the LSCB and the Corporate Parenting Committee.

### **Public Representations**

At the discretion of the Chair, members of the public may address the meeting on any report included on the agenda in which they have a relevant interest. Any member of the public wishing to address the meeting should advise the Democratic Support Officer (DSO) whose contact details are on the front sheet of the agenda.

**Access** – access is available for the disabled. Please contact the Democratic Support Officer who will help to make any necessary arrangements.

**Mobile Telephones:-** Please switch your mobile telephones to silent whilst in the meeting

### **Business to be Discussed**

Only those items listed on the attached agenda may be considered at this meeting.

**QUORUM** The minimum number of appointed Members required to be in attendance to hold the meeting is 3.

**Use of Social Media:-** The Council supports the video or audio recording of meetings open to the public, for either live or subsequent broadcast. However, if, in the Chair's opinion, a person filming or recording a meeting or taking photographs is interrupting proceedings or causing a disturbance, under the Council's Standing Orders the person can be ordered to stop their activity, or to leave the meeting. By entering the meeting room you are consenting to being recorded and to the use of those images and recordings for broadcasting and or/training purposes. The meeting may be recorded by the press or members of the public. Any person or organisation filming, recording or broadcasting any meeting of the Council is responsible for any claims or other liability resulting from them doing so. Details of the Council's Guidance on the recording of meetings is available on the Council's website.

### **Rules of Procedure**

The meeting is governed by the Council Procedure Rules and the Overview and Scrutiny Procedure Rules as set out in Part 4 of the Constitution.

**Smoking policy** – the Council operates a no-smoking policy in all civic buildings.

**Fire Procedure** – in the event of a fire or other emergency a continuous alarm will sound and you will be advised by Council officers what action to take

The Southampton City Council Strategy (2016-2020) is a key document and sets out the four key outcomes that make up our vision.

- Southampton has strong and sustainable economic growth
- Children and young people get a good start in life
- People in Southampton live safe, healthy, independent lives
- Southampton is an attractive modern City, where people are proud to live and work

#### Dates of Meetings: Municipal Year

2020	2021
4 June	11 February
23 July	25 March

### DISCLOSURE OF INTERESTS

Members are required to disclose, in accordance with the Members' Code of Conduct, **both** the existence **and** nature of any "Disclosable Pecuniary Interest" or "Other Interest" they may have in relation to matters for consideration on this Agenda.

#### DISCLOSABLE PECUNIARY INTERESTS

A Member must regard himself or herself as having a Disclosable Pecuniary Interest in any matter that they or their spouse, partner, a person they are living with as husband or wife, or a person with whom they are living as if they were a civil partner in relation to:

(i) Any employment, office, trade, profession or vocation carried on for profit or gain.

(ii) Sponsorship:

Any payment or provision of any other financial benefit (other than from Southampton City Council) made or provided within the relevant period in respect of any expense incurred by you in carrying out duties as a member, or towards your election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.

(iii) Any contract which is made between you / your spouse etc (or a body in which the you / your spouse etc has a beneficial interest) and Southampton City Council under which goods or services are to be provided or works are to be executed, and which has not been fully discharged.

(iv) Any beneficial interest in land which is within the area of Southampton.

(v) Any license (held alone or jointly with others) to occupy land in the area of Southampton for a month or longer.

(vi) Any tenancy where (to your knowledge) the landlord is Southampton City Council and the tenant is a body in which you / your spouse etc has a beneficial interests.

(vii) Any beneficial interest in securities of a body where that body (to your knowledge) has a place of business or land in the area of Southampton, and either:

- a) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body, or
- b) if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you / your spouse etc has a beneficial interest that exceeds one hundredth of the total issued share capital of that class.

### **Other Interests**

A Member must regard himself or herself as having an 'Other Interest' in any membership of, or occupation of a position of general control or management in:

Any body to which they have been appointed or nominated by Southampton City Council

Any public authority or body exercising functions of a public nature

Any body directed to charitable purposes

Any body whose principal purpose includes the influence of public opinion or policy

### **Principles of Decision Making**

All decisions of the Council will be made in accordance with the following principles:-

- proportionality (i.e. the action must be proportionate to the desired outcome);
- due consultation and the taking of professional advice from officers;
- respect for human rights;
- a presumption in favour of openness, accountability and transparency;
- setting out what options have been considered;
- setting out reasons for the decision; and
- clarity of aims and desired outcomes.

In exercising discretion, the decision maker must:

- understand the law that regulates the decision making power and gives effect to it. The decision-maker must direct itself properly in law;
- take into account all relevant matters (those matters which the law requires the authority as a matter of legal obligation to take into account);
- leave out of account irrelevant considerations;
- act for a proper purpose, exercising its powers for the public good;
- not reach a decision which no authority acting reasonably could reach, (also known as the "rationality" or "taking leave of your senses" principle);
- comply with the rule that local government finance is to be conducted on an annual basis. Save to the extent authorised by Parliament, 'live now, pay later' and forward funding are unlawful; and
- act with procedural propriety in accordance with the rules of fairness.

# AGENDA

## **1 APOLOGIES AND CHANGES IN PANEL MEMBERSHIP (IF ANY)**

To note any changes in membership of the Panel made in accordance with Council Procedure Rule 4.3.

## **2 DISCLOSURE OF PERSONAL AND PECUNIARY INTERESTS**

In accordance with the Localism Act 2011, and the Council's Code of Conduct, Members to disclose any personal or pecuniary interests in any matter included on the agenda for this meeting.

## **3 DECLARATIONS OF SCRUTINY INTEREST**

Members are invited to declare any prior participation in any decision taken by a Committee, Sub-Committee, or Panel of the Council on the agenda and being scrutinised at this meeting.

## **4 DECLARATION OF PARTY POLITICAL WHIP**

Members are invited to declare the application of any party political whip on any matter on the agenda and being scrutinised at this meeting.

## **5 STATEMENT FROM THE CHAIR**

## **6 AN INVESTIGATION INTO THE WHISTLEBLOWING COMPLAINT WITHIN CHILDREN'S SOCIAL CARE SERVICES IN SOUTHAMPTON CITY COUNCIL AND LEARNING REPORT** (Pages 1 - 24)

Report of the Chief Executive on the Independent Investigation report.

## **7 CHILDREN'S SERVICES IMPROVEMENT PLAN** (Pages 25 - 38)

Report of the Executive Director, Finance and Commercialism, providing the Panel with an overview of the Children's Services Improvement Plan.

Wednesday, 19 August 2020

Service Director – Legal and Business Operations

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# Agenda Item 6

<b>DECISION MAKER:</b>	CHILDREN AND FAMILIES SCRUTINY PANEL
<b>SUBJECT:</b>	AN INVESTIGATION INTO THE WHISTLEBLOWING COMPLAINT WITHIN CHILDREN'S SOCIAL CARE SERVICES IN SOUTHAMPTON CITY COUNCIL AND LEARNING REPORT
<b>DATE OF DECISION:</b>	27 AUGUST 2020
<b>REPORT OF:</b>	CHIEF EXECUTIVE

<b><u>CONTACT DETAILS</u></b>			
	<b>Title</b>	CHIEF EXECUTIVE	
	<b>Name:</b>	Sandy Hopkins	Tel: 023 8083 2966
	<b>E-mail</b>	<a href="mailto:sandy.hopkins@southampton.gov.uk">sandy.hopkins@southampton.gov.uk</a>	

<b>STATEMENT OF CONFIDENTIALITY</b>		
None		
<b>BRIEF SUMMARY</b>		
To report on the service improvement learning deriving from the investigation into the whistleblowing complaint within the children's social care services in Southampton City Council.		
<b>RECOMMENDATIONS:</b>		
	(i)	To note the report and its recommendations.
	(ii)	To note the draft action plan developed by the directorate management team in response to the report.
	(iii)	To note the requirement to link any actions arising from this report to the 2020 Ofsted Children's Improvement Plan and that any future reporting to the council be included in that plan.
<b>REASONS FOR REPORT RECOMMENDATIONS</b>		
1.	The recommendations reflect the necessary next steps in good business practice arising from this matter.	
<b>ALTERNATIVE OPTIONS CONSIDERED AND REJECTED</b>		
2.	This is a report on the outcome of a whistleblowing report and arising actions for the council services to take. There are no alternative options to consider in such matters.	
<b>DETAIL (Including consultation carried out)</b>		
3.	On 27 January 2020, a collective grievance was submitted by the Unite the Union branch secretary on behalf of 31 managers and staff alleging dangerous practices, unsafe decision-making and a hostile work environment created by senior managers in the directorate. The council commissioned Malcolm Newsam, on 10 February, to undertake an independent investigation into these complaints.	

The investigator clustered the complaints into the following headline areas:

1. The service is failing to keep children safe due to poor and dangerous decision making
2. Management issues related to failing to keep children safe
3. Deliberately misleading the regulator Ofsted
4. The use of agency workers and consultants
5. A culture of fear has been allowed to grow in children's services
6. Creating a loss of trust and confidence in Southampton City Council by partner agencies

The report to be considered today is a 'learning report' that summarises the situation and triangulates several review-based reports and pieces of work undertaken in 2019-20 including the following:

### **1. An 'Appreciative Inquiry'<sup>1</sup> that was completed and in September 2019**

The Chief Operations Officer commissioned a confidential AI because of concerns raised in the service in the context of:

- In year budgetary issues leading to a forecasted substantial over-spend
- The compounded impact of also needing to identify forward savings as part of the MTFP process
- A critical resourcing issue regarding social workers where case-loads are much too high
- Service failure issues at the front door which whilst corrected there, are causing a critical bulge effect as they roll through the service
- Intense preparations for an impending Ofsted inspection

The conclusions of the AI highlighted several factors contributing to the service culture of concern and disengagement that required the senior management of the directorate to address. The report highlighted:

- The 'leadership community' of the directorate operating with 'panic' and 'chaos' and a strong perception that this behaviour was 'driven by the fear that any future Ofsted inspection would find the service had improved little or not at all since its previous inspection'.
- An internal audit report at the beginning of 2019 which followed an inspection undertaken by 'Partners in Practice' (LB Ealing) and highlighted operational failures.
- Systemic failure over a prolonged period prior to January 2019 and a strongly held view that the shortcomings had not been responded to by managers in the service.

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<sup>1</sup> **Appreciative Inquiry (AI) - The principles of AI seek to establish how current staff-led activities can be improved and what can be learned. It allows difficult issues to be tackled openly, honestly and responsibly. It requires participants to face the reality of the present state and what needs to be done as an individual and team member to create a better way of doing things/ performing / behaving. It demands**



honesty, openness, willingness to challenge the status quo, letting go of the worst of the existing approach and personal accountability and responsibility.

- Additional resources in the form of the Improvement Team and the Project Teams were welcomed but the way they were deployed caused confusion, resentment and disconnect from the potential solution.
- A sense that senior management of the directorate created a culture of compliance rather than positive commitment to the proposed way forward because of inconsistent action and ‘constant shifting of tactics, priorities and no time for consolidation’.

## **2. Ofsted Inspection visit Nov. 2019 report published January 2020**

The Ofsted In Inspection of children’s social care services was undertaken between the dates: 18 November 2019 to 29 November 2019. A copy of the report can be found at <https://files.ofsted.gov.uk/v1/file/50141245>.

In conclusion the report found that progress in improving services for children in Southampton since the last inspection in 2014 had been ‘uneven and too slow’. Whilst recognising that some children benefit from skilled interventions and direct work that reduces risks to them and improves their daily lived experiences improvements are still required.

The frequency and regularity of management oversight and supervision of social workers was seen as having improved along with substantial improvements having been made in services for care leavers and in developing an effective, comprehensive and integrated network of early help and prevention services.

More children and families were seen to be receiving skilled help quickly and disabled children, and children who go missing and are at risk of exploitation, receive effective help. Support for children on the edge of entering care was also cited as more effective. It was also noted that ‘senior managers have retained a largely stable and relatively experienced establishment of frontline social workers. However, there were areas identified for improvement and these are subject to the separate report at this meeting on the Ofsted Improvement Plan.

## **3. Whistleblowing complaints submitted January 2020**

Malcolm Newsam CBE was appointed in February 2020 to investigate the complaints. The terms of reference were agreed with Trade Unions and the detailed investigation included: 26 interviews (supported by the internal audit partnership), a comprehensive document review with access to electronic files and a full management report completed.

The learning report to be considered by Scrutiny was commissioned to triangulate the three assessments and the service improvement outcomes that could be gathered from those separate confidential statutory processes and is attached at Appendix 1. The draft action plan (Appendix 2) has been developed by the Directorate Management Team (DMT) and will be a ‘living’ document that is owned, worked on and reviewed by the colleagues across the directorate. This document will also be a part of the overall improvement plan for the directorate and that this scrutiny panel will continue to have oversight of.

<b>RESOURCE IMPLICATIONS</b>	
<b><u>Capital/Revenue</u></b>	
4.	The independent investigation and all reports have come at a cost of £25,000.
5.	The implementation of the action plan arising from this report will require revenue and capital which will be met from the agreed budgets. Any further investment required will be reported through normal business case governance and/or annual budget setting processes.
<b><u>Property/Other</u></b>	
6.	There are other resource costs arising from the human resources required in the organisation to undertake the original brief, procurement, liaison with the investigator and all other consultation work during the undertaking of this investigation.
<b>LEGAL IMPLICATIONS</b>	
<b><u>Statutory power to undertake proposals in the report:</u></b>	
7.	S. 1 Localism Act 2011 empowers a Local Authority to do anything required to deliver its functions (including management and administrative functions) subject to there being no statutory prohibition against the action taken. The proposals in the report will be delivered through the current national legislative framework and the governance of the council including via the Constitution and supporting business processes.
<b><u>Other Legal Implications:</u></b>	
8.	The reviews have been prepared having regard to the Equality Act 2010, in particular s.149 the 'Public Sector Equality Duty' and the Data Protection Act 2018 and supporting subordinate legislation.
9.	The AI and Whistleblowing investigation reports were commissioned confidentially and for separate statutory purposes. Those reports cannot be disclosed as a duty of confidentiality is owed to the contributors under the relevant legal obligations relating to each. However, it is important that Scrutiny can consider the operational and organisational learning identified following the outcome of those processes and it was for that purpose that the separate, learning report, was commissioned to enable service improvement to be scrutinised and for stakeholders to understand the background to the issues underpinning the service improvement and learning recommendations without breaching any legal obligations of confidentiality.
<b>RISK MANAGEMENT IMPLICATIONS</b>	
9.	Any detailed risks associated with the content of this report are managed as part of the annual business planning for the Directorate of Children and Learning. The Directorate Management Team will be the accountable paid executives who will ensure reporting and escalation of these, if relevant, to the Executive Management Team in order to include them on the corporate risk register.
<b>POLICY FRAMEWORK IMPLICATIONS</b>	
10.	This report and draft action plan are an important contributor to achieving the outcomes desired for children in Southampton.

	<p>The Corporate Plan 2020 sets out the following regarding the wellbeing of children in the city:</p> <p>“Working with partners to deliver the ambitions set out in the five-year Health and Wellbeing Strategy, this area looks at wellbeing across the city, with a focus on adults and children’s social care, education and public health. We work closely with partners to help safeguard vulnerable people across the city. We are focused on delivering strong customer experience across the Adults and Children &amp; Families services. We want Southampton to be a city that is recognised for its proactive approach to preventing problems and intervening early, as well being a ‘Child Friendly City’ where children and young people have great opportunities and an aspiration to achieve. We want our residents to have the information and support they need to lead safe, active, healthy lives and to be able to live independently for longer.”</p>
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<b>KEY DECISION?</b>	No
<b>WARDS/COMMUNITIES AFFECTED:</b>	All Wards
<u>SUPPORTING DOCUMENTATION</u>	
<b>Appendices</b>	
1.	Learning Report by Malcolm Newsom
2.	Draft Action Plan

**Documents In Members’ Rooms**

1.	None.
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**Equality Impact Assessment**

<b>Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out.</b>	No
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**Data Protection Impact Assessment**

<b>Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out.</b>	No
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**Other Background Documents**

**Other Background documents available for inspection at: N/A**

	Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)
1.	N/A	
2.	N/A	

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An investigation into the whistleblowing complaint within children's social care services in Southampton City Council.

## Learning report<sup>1</sup>

Malcolm Newsam CBE

Independent Consultant

July 2020

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<sup>1</sup> Disclaimer: This report has been produced independently by Imprana Ltd at the request of Southampton City Council. The contents represent the opinion and views of the author based on the information provided to him by the interviewees and the documents provided to him by Southampton City Council. Imprana Ltd does not express an opinion as to the accuracy or completeness of the information provided, Imprana Ltd has based this report on the information received or obtained, on the basis that such information is accurate and, where it is represented to Imprana Ltd as such, is complete. Southampton City Council has taken its own legal advice that the contents of this report do not infringe the personal rights of any individuals or employees and the Authority's responsibilities under data protection legislation and any other relevant laws. For the avoidance of doubt, no responsibility or liability is or will be accepted by Imprana Ltd in relation to the release of this report and any such liability is expressly disclaimed.

# 1. Introduction

1.1. On 27 January 2020, a collective grievance was submitted by the Unite branch secretary on behalf of 31 managers and staff alleging dangerous practices, unsafe decision making and a hostile work environment in children's services<sup>2</sup> created by senior managers in the directorate. The council commissioned Malcolm Newsam, on 10 February, to undertake an independent investigation into these complaints. The grievance has been considered under the council's whistleblowing procedure and was completed in May 2020.

1.2. I have clustered the complaints into the following six themes.

- The service is failing to keep children safe due to poor and dangerous decision making
- Management issues related to failing to keep children safe
- Deliberately misleading the regulator Ofsted
- The use of agency workers and consultants.
- A culture of fear has been allowed to grow in children's services.
- Creating a loss of trust and confidence in Southampton City Council by partner agencies

1.3. My investigation comprised the following:

- I have interviewed the Unite branch secretary and 25 current and previous employees of the council. Ten of these individuals had contributed to the collective grievance and 15 of them had not. The latter group were in the main selected by me on a random basis, others had been recommended by the human resources department in the council. I was assisted in my investigation by a member of the council's audit team who kept a record of these interviews
- The original complaint set out ten case examples, to illustrate the allegation of unsafe practice. I have been provided with evidence to review seven of these cases. During the investigation managers provided me with the names of additional cases which they believed exemplified the concerns within the complaint. I have been able to review 21 cases in total using the council's case record system, Paris.
- I have also undertaken a review of all the available contemporaneous documentation between senior managers in the service and staff including

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<sup>2</sup> While the grievance refers to *all teams in Children's Services* the complaint was limited to children's social care services and did not include those teams working within the education function.

communications and emails and also the policies of the council, relevant to this investigation.

- 1.4. I provided a full report of my investigations and conclusions to the council in May 2020. This report comprised 120 pages in total and includes the detailed analysis of my findings. Both the whistle-blowing complaint and my report are confidential to protect the anonymity of the whistle-blowers and the employment rights of staff and managers concerned. Since the receipt of the whistle-blowing complaint and my report, the council has made significant changes to the senior leadership team of the service and has recently appointed a new executive director of children's services. This summary report is to support the leadership team in responding to the findings within my investigation.

## 2. Key Findings

**Complaint: The service is failing to keep children safe due to poor and dangerous decision making**

- 2.1. In November 2019, Ofsted undertook a full inspection of children's social care services and judged that the service required improvement to be good. I have been informed by the council that the inspectors considered over 300 cases during this inspection. Inspectors concluded that the overall quality of social work for children who are the subjects of statutory plans and who are looked after by the council was not consistently effective. Inspectors also alerted managers to a small number of children who had not been adequately safeguarded. The cases I considered were limited to those drawn to my attention by the whistle blowers. Nonetheless, I believe my findings are in line with the judgements made by Ofsted a few months earlier.
- 2.2. I reviewed 21 cases. I upheld the complaint in 13 cases. During my investigation I did not come across any cases where a child was immediately at risk although on receipt of the whistle-blowing complaint the deputy chief executive did make the decision to bring a young person into care given concerns for her immediate safety.
- 2.3. In defence of the senior managers concerned, they will have been making many decisions on a day to day basis and these will often relate to giving the permission or otherwise to accommodate children. Not surprisingly, some of these decisions might not have been popular with staff and may even, with the benefit of hindsight, have been questionable. However, the complaints I upheld were of a substantially different order:
  - Examples of senior managers within the service unilaterally over-riding the collective planning arrangements that are in place to ensure that decisions are

taken in the best interests of the child. It is unusual in my experience for this to occur and when it does, it is important that senior managers broker this with the professionals concerned. In many of these instances the decision-makers ignored the best advice of multi-agency meetings designed to ensure that children are kept safe, and in this regard, they potentially placed a significant amount of risk upon themselves and the council.

- Secondly, no-one I spoke to in my investigation, disputed the legitimate desire to keep children safely out of care and to manage budgets prudently. However, in the complaints I upheld, the alternatives, often globally referred to as “wrap around support” were either not available or not suitable to the situation in which it was being applied.
- Thirdly, there is evidence that, on occasions, in the struggle to ensure children remained with their parents, the needs of those very children were lost sight of.

I therefore upheld this aspect of the grievance.

### Complaint: Management Issues related to failing to keep children safe

2.4. The grievance asserted that that senior managers in the service deliberately did not record their decisions on Paris. However, I was not provided with any substantial evidence to support this. There is ample evidence of decisions being set out within emails and it would be a reasonable expectation for the responsible worker/manager to upload these on to Paris. I was given one example where a manager was asked to amend the record on Paris but that did not in any way relate to the decision itself. I did not, therefore uphold this complaint.

2.5. However, there is significant evidence that the removal of the peripatetic teams towards the end of the year, did lead to significant numbers of cases being unallocated and/ or the transferring of cases. These were some of the most vulnerable children on caseload and this change did present risks to the service. The ending of the contract with the provider was foreseeable and could have been planned well in advance and the serving of one weeks’ notice during the Christmas break could only have compounded the disruption. The replacement of the contract with the “Hub” teams was ill-thought out and poorly communicated. No business case was made to justify this initiative and despite the novel make-up of the teams, no operating procedures were agreed or distributed. The introduction of newly qualified and unqualified staff to undertake work usually undertaken by qualified experienced staff was not something that could be done without a careful risk analysis and formal consultation with staff and trade unions.



Similarly, sourcing these staff from an agency provider was ill-advised and could only lead to an additional cost pressure and a greater reliance on temporary staff. Through my interviews, it has also been made apparent that the regular changes in service size and structure has been a major destabilising characteristic within the service and will have contributed to the sense of chaos many staff have referred to. That these changes appear to have been implemented outside of the authority's human resource policies compounds the issue still further. I, therefore, upheld this complaint.

- 2.6. The grievance stated that agency workers were instructed to close as many cases as possible, some without undertaking visits or welfare checks on the child. I was not provided with substantial evidence to support this. While several managers have indicated to me that they were aware of some cases being closed in less than ideal circumstances, this was always linked to the pressure within an overwhelmed service. To close any case without an appropriate assessment is dangerous practice and against statutory guidance. However, I have seen no evidence that this was either on the instruction of senior managers within the service or even condoned by them. Quite the contrary, there is clear evidence that senior managers took any evidence of inappropriate closure seriously. I did not therefore uphold this complaint.

### Complaint: Deliberately Misleading the Regulator Ofsted

- 2.7. The grievance stated that Ofsted were deliberately misled to achieve a more positive rating. I have not been provided with substantive evidence to support this. All authorities will organise themselves to present the best possible case to Ofsted and in that regard, Southampton is no different. It is unusual in my experience for a few staff to be asked to work from home to avoid scrutiny by the inspectors, (as was the case in Southampton) but this would have had only a marginal impact on the inspection outcome. I have seen no evidence of cases being closed deliberately to impact on the caseload figures and no evidence of placements ended without assessment. I did not, therefore, uphold this complaint.
- 2.8. There is no evidence that senior managers in the service were able to mislead Ofsted by withdrawing cases. On the one case drawn to my attention, senior managers acted appropriately. Ofsted ask local authorities to provide cases of good practice. It would be reasonable for senior managers to review them and present those cases that they believed were the most compelling. I, therefore, did not uphold this complaint.

- 2.9. There is evidence that senior managers in the service appeared to renege on their commitment not to withdraw resources after the Ofsted inspection. It is evident that the assessment teams were reduced from four to three shortly after the Ofsted inspection. Given the difficult history of the service, it is understandable that this would have generated anxiety amongst those managers and staff and should have been carefully managed. The lack of communication about the rationale and operating procedures of the "Hub" teams alongside the termination of the peripatetic team's contracts will only have served to exacerbate these anxieties. I, therefore, upheld this complaint.
- 2.10. The complaint alleged that senior managers in the directorate were unable to explain why the service had been in chaos for the past four years, but I did not find evidence to support this. The Ofsted report does state that *"senior leaders contend that a significant rise in levels of poverty over a four- year period in more economically deprived wards of the city has been a primary cause of increased referrals through the MASH. However, they have not explained why a reported four-year trend in escalating deprivation triggered such a marked and relatively sudden increase in referrals at a particular point in that cycle."* The explanation by senior managers within the service was not plausible and was recognised as such by Ofsted. However, Ofsted were not considering the impact of the workforce reductions in 2018/19 but the increase in service volumes in 2019/20. At the time of the inspection, the service was running with significantly higher numbers of social workers and the issues referred to by the whistle blowers (merging of MASH, child in need and child protection teams) while painful at the time were not contributing to current service weaknesses. I, therefore, did not uphold this complaint.
- 2.11. There is evidence that thresholds for receiving statutory social work support changed dramatically and inappropriately in the first few months of 2019 following the interventions of a team of consultants. This led to a significant increase in open cases which overwhelmed the service. The consultants were given significant authority by senior managers to direct the management of cases and there is evidence that they did this often without any explanation. It is hard to understand why this could happen, and it was unlikely to support improvement or learning amongst the staff group who were responsible for the operational running of the service. I, therefore, upheld this complaint.

### Complaint: Use of agency workers and consultants.

- 2.12. I found clear evidence that senior managers within the service did not follow the council's policies and procedures on the appointment of consultants and, therefore, the normal safeguards to protect the council from any allegations of preferential treatment

or the misuse of public money had not been adhered to. It also is the case that there does not appear to have been any scrutiny of the role of external consultants. I have seen examples of consultants who were appointed to undertake one role but then move on to other more operational roles. I, therefore, upheld this complaint

### Complaint: A culture of fear has been allowed to grow in children's services.

- 2.13. The cumulative impact of a service struggling to meet high demand, the approach of a team of external consultants seen to have too much authority, alongside the manner in which two middle managers were suspended created a widespread belief that there was a culture of fear within the department. This view was widely held by the managers I interviewed and was not just limited to the whistle blowers. It has also been previously evidenced by the Appreciative Inquiry. I, therefore, upheld this complaint.
- 2.14. I have only received anecdotal evidence in respect of the allegation that staff were told they lacked emotional resilience. This was repeated to me by two interviewees. I have not been given any evidence that senior managers within the service prevented or stopped the counselling of staff who felt under pressure. It is also conceivable that the comment could have been misconstrued. I did not, therefore uphold this complaint.
- 2.15. There is significant evidence to suggest that the service was under-resourced and struggling to manage the influx of new cases in the system. This is supported by the data in the ChAT<sup>3</sup> analysis I have considered. I have received substantial anecdotal evidence from managers that caseloads were unrealistically high, and this was exacerbated by the regular transferring of cases caused by the departure and arrival of successive agency social workers. I have asked to see the monthly management data on unallocated cases and caseload sizes in 2019 but have been informed that no such reports exist. Without the data, I am unable to confirm the degree of the concerns that have been expressed to me. Ofsted who inspected in November 2019 reported: *At the point of the inspection, social workers' caseloads had substantially reduced and were largely manageable. Addressing this challenge has consumed considerable senior management time and diverted their attention from planned improvement work.* This does suggest that caseloads had been unrealistic earlier in the year. Based on the information provided to me, I upheld this complaint.
- 2.16. There is a widespread belief that the Appreciative Inquiry completed in September 2019 was buried. As the findings of the report and its recommendations were not shared with

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<sup>3</sup> Children's services Analysis Tool

the wider management group in the services it is understandable that managers gained this impression. The author of that report found the following:

- An expressed fear of speaking out- this included highlighting errors, challenging tactics, offering a different opinion to some leaders
- The current working environment is chaotic. It was described as a blame culture
- Communication at all levels was considered to be ineffective and uncoordinated
- There was a strong sense of a top down imposition. A high number of the problems and challenges were known about and had been reported however it was considered the front-line staff were not engaged openly or respectfully by some senior leaders
- The style, tone and timeliness of communication from the leadership team or in some instances the lack of it has created resentment confusion and anxiety

2.17. The Appreciative Inquiry made six recommendations five of which are relevant to my investigation

- *People who work in, and with the department, need to feel psychologically safe... Urgent steps need to be taken to change this operating culture.*
- *Positively engage with the broader leadership community. Engaging them in this type of forum will provide the openness for collective problem solving*
- *An immediate reappraisal regarding the number of cases being managed by social workers and newly qualified social workers.*
- *Develop a compelling vision for the future that engages the whole department.*
- *Change the narrative across the department and also externally... creating a sense of hope and optimism.*

2.18. Unfortunately, a summary and the recommendations were not shared with managers and staff within the service. This could have formed the basis of a more collaborative approach going forward. While there was work done with managers on behaviours, the on-going issues of poor communication and service changes without consultation continued after the Appreciative Inquiry, accompanied by a robust and challenging management style from senior leaders in the service. I therefore upheld this complaint.

## Creating a loss of trust and confidence in Southampton City Council by partner agencies

2.19. At the commencement of my investigation, I agreed with the chief executive of the council

that it was not at this stage appropriate to extend my investigation to include other agencies, given its confidential nature and the risk of additional reputational damage to both the council and senior managers. I, therefore, have insufficient evidence to come to a view on this aspect of the complaint.

### 3. Conclusions and Recommendations

3.1. I have upheld a substantial proportion of the specific complaints made within the collective grievance. My findings echo many of the conclusions of the Appreciative Inquiry which reported in September 2019.

3.2. The council has recently put in place a refreshed leadership team within children's services and has recently appointed a new executive director of children's services. This provides an excellent opportunity to take the learning from this investigation and, looking forward, put in place an empowering and inclusive culture that creates an environment which makes Southampton a great place to practice social work. I would suggest the following five recommendations:

**Recommendation One:** Develop across the council a compelling and ambitious vision which aspires to deliver the best possible outcomes for all children in the city.

3.3. This vision should mobilise all council services, alongside the contribution of partners to tackle disadvantage, while investing in all children and young people, to build a successful future. The aspiration should be to deliver good or outstanding children's services. This vision should be underpinned and supported by corporate values which put the well-being and safety of children at the centre of all decision making.

**Recommendation Two:** Promote an inclusive culture, which connects senior management with practice and ensures that staff concerns are swiftly addressed.

3.4. Senior managers, across the directorate of Children and Learning, need to be in touch with the pressures on the front-line, the practical impediments to delivering effective practice and the impact of their decisions on the quality of practice. This will require a refreshed communications strategy which should include an explicit approach to communicating all significant management decisions, consulting with relevant staff and managers appropriately and building in an opportunity for feedback. This should be supported by a "you said, we did approach" to any major change or development. The executive director of children's services and the Lead Councillor should together undertake a safeguarding assurance visit to one service team a month, reviewing the performance and listening to the experiences of front-line staff. The chief executive with the Leader and Lead Councillor should also hold a bi-annual safeguarding assurance

meeting with the director of children's services where they can be briefed on the successes and pressures in the service and any emerging concerns. In addition, the council should facilitate the setting up of a practitioners' improvement board to support the delivery of the improvement plan and provide a front-line "sense check" on its effectiveness. A representative of the practitioner's improvement board should participate in the council's children's services improvement board.

**Recommendation Three: Invest in managers and staff to deliver high quality services for children.**

3.5. High quality children's services require staff who are well trained, supported and encouraged in their development. The council must invest in the training and support it provides to existing and aspirant managers in the service and develop a strategy to grow internally, the leaders of the future. A similar investment needs to be made into high quality supervision arrangements which provide both support and challenge to practitioners. The council will need to be assured that managers have sufficient capacity to undertake supervision of the required quality and intensity. Alongside these support arrangements managers must be confident in setting high expectations in respect of the quality of practice through the following:

- Practice standards that all staff and managers understand, and which ensure the best possible outcomes for children
- Effective quality assurance systems which identify where practice is good and where it needs to improve
- A robust performance management system that monitors compliance, volumes and timeliness and the effectiveness of outcomes

**Recommendation Four: Introduce a compelling workforce strategy that ensures Southampton is the destination of choice for experienced and capable social workers and managers.**

3.6. The council must develop a unique Southampton offer that promotes the recruitment of good social workers while addressing retention and the over dependence on agency staff. This will require highly skilled input from experts in communications and media messaging as well as recruitment and marketing specialists. This should include explicit expectations about manageable workloads, the availability of supervision and flexible working arrangements. It will also require a fundamental re-appraisal of the infrastructure and support requirements for social workers and must include addressing any deficits in the provision of computer equipment, the case management system, business support and accommodation.

**Recommendation Five**

Ensure the council has a regular independent assessment of the effectiveness of its children's social care services

- 3.7. The council has in place an improvement board for children's social care, chaired by the executive director of finance and commercialisation and an emerging improvement plan. This now needs to be supplemented by the learning from the Appreciative Inquiry and this investigation. Hampshire County Council has recently agreed to support the council on its approach to improvement. It is important that Councillors and senior officers embrace this external perspective and supplement these formal processes with a quarterly independent assessment of the quality of practice. This should take the form of an Ofsted like inspection of key areas of the service, undertaken by experts independent of the council. The results of these reviews should be reported to both the improvement board and Councillors. This will ensure that the council can be assured, as it moves forward, that it is making appropriate progress and that this is independently validated by experts in the field.
- 3.8. Finally, I would like to thank all the participants in this investigation for the time and support they have given me. I am in no doubt that this will have been a stressful experience for many, and I am grateful for the professionalism and courtesy they have shown me throughout the process.

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## Learning Report: Draft Action Plan

Recommendation	Action	Lead Owner (s)	Start date / Completion date	Date completed
<b>Recommendation One:</b> Develop across the council a compelling and ambitious vision which aspires to deliver the best possible outcomes for all children in the city.	<ul style="list-style-type: none"> <li>Develop an ambitious vision for children and young people in Southampton which mobilises all council services and partner agencies to improve outcomes for all children in the City;</li> <li>Embed outcomes to improve services for children and young people into all SCC departmental business plans;</li> </ul>	Robert Henderson	Start: Sept 20 Completed by: December 20	
		Sandy Hopkins	Build into 21/22 business planning cycle	
<b>Recommendation Two:</b> Promote an inclusive culture, which connects senior management with practice and ensures that staff concerns are swiftly addressed	<ul style="list-style-type: none"> <li>Co-design an effective communication strategy with managers, front line staff and partners which incorporates both internal and external communication;</li> <li>Monthly safeguarding assurance visit to one service by Executive Director for Children &amp; Learning Services and the Lead Councillor to review performance and listen to the experiences of front-line staff;</li> <li>Bi-annual safeguarding assurance meeting to take place between the Chief Executive, the Leader, Lead Councillor and the Executive Director for Children &amp; Learning Services to discuss successes, challenges, pressures and concerns;</li> <li>Establish a Practitioners' Improvement Board to support the delivery of the improvement plan and provide a front-line "sense check" on its effectiveness;</li> </ul>	Robert Henderson	Start: Sept 20 Completed by: Mar 21	
		Robert Henderson / Cllr Paffey	Visits for 20/21 to be diarised by 30 <sup>th</sup> September 20	
		Sandy Hopkins / Robert Henderson	Meetings to be diarised by 30 <sup>th</sup> Sept 20	
		Robert Henderson	Practitioners Improvement Board to be established by 30 <sup>th</sup> Sept 20	

Recommendation	Action	Lead Owner (s)	Start date / Completion date	Date completed
2 continued..	<ul style="list-style-type: none"> <li>• A representative of the Practitioner’s Improvement Board to be included as a member of the Children’s Services Improvement Board;</li> <li>• To review the improvement plan and ensure that actions to achieve the cultural shift needed are included;</li> <li>• Ensure that restorative practice is championed across the service; modelled by senior leaders and managers and supported by a clear development and implementation plan;</li> <li>• A quarterly meeting to be established between the Chief Executive and the Principal Social Worker to ensure a direct connection with front line practitioners;</li> <li>• Executive Management Board meeting every six months to review whole council approach to embedding outcomes for children &amp; young people in the city;</li> <li>• Relaunch regular staff conference to be co-designed and co-ordinated between managers and front-line practitioners;</li> <li>• Review the service offer and approach provided by all council support functions to ensure that they are responsive and supportive, minimising the administrative burden on managers and officers;</li> </ul>	<p>John Harrison</p> <p>Robert Henderson</p> <p>Robert Henderson</p> <p>Sandy Hopkins</p> <p>Sandy Hopkins</p> <p>Robert Henderson</p> <p>Robert Henderson / Mike Harris</p>	<p>Representative to be in place by 31<sup>st</sup> Oct 20</p> <p>By 30<sup>th</sup> September 20</p> <p>By 31<sup>st</sup> Dec 20</p> <p>Meetings to be diarised by 30<sup>th</sup> Sept 20</p> <p>Meetings to be diarised by 30<sup>th</sup> Sept 20</p> <p>By 30<sup>th</sup> Dec 20</p> <p>Start: 1<sup>st</sup> Oct 20 Completed by: 31<sup>st</sup> Mar 21</p>	

Recommendation	Action	Lead Owner (s)	Start date / Completion date	Date completed
<p><b>Recommendation Three:</b> Invest in managers and staff to deliver high quality services for children.</p>	<ul style="list-style-type: none"> <li>Review the learning and development offer for managers and front-line officers to ensure that it meets their development needs including leadership development;</li> </ul>	Robert Henderson / Janet King	By 31 <sup>st</sup> December 20	
	<ul style="list-style-type: none"> <li>Ensure regular appraisals are undertaken and that development needs are identified and met;</li> </ul>	Robert Henderson	By 31 <sup>st</sup> Mar 21	
	<ul style="list-style-type: none"> <li>Review current supervision arrangements to ensure that they are high quality, supportive, challenging and monitored;</li> </ul>	Robert Henderson	By 31 <sup>st</sup> Mar 21	
	<ul style="list-style-type: none"> <li>Ensure that managers and front-line staff have sufficient capacity to take part in high quality supervision and support;</li> </ul>	Robert Henderson	By 31 <sup>st</sup> Mar 21	
	<ul style="list-style-type: none"> <li>Review current practice standards to ensure that they follow best practice in improving outcomes for children and young people and that they are understood by managers and front-line officers;</li> </ul>	Robert Henderson	By 31 <sup>st</sup> Dec 20	
	<ul style="list-style-type: none"> <li>Progress the revision of the quality assurance framework and systems following the recent independent review;</li> </ul>	Robert Henderson	By 30 <sup>th</sup> Nov 20	
	<ul style="list-style-type: none"> <li>Review the performance management framework and reporting to ensure that it monitors compliance, volumes and timeliness and the effectiveness of outcomes;</li> </ul>	Robert Henderson	By 31 <sup>st</sup> Dec 20	

Recommendation	Action	Lead Owner (s)	Start date / Completion date	Date completed
<p><b>Recommendation Four:</b> Introduce a compelling workforce strategy that ensures Southampton is the destination of choice for experienced and capable social workers and managers.</p>	<ul style="list-style-type: none"> <li>• Develop a workforce strategy for Southampton’s Children &amp; Learning service that is ambitious in its offer to attract and retain good social workers;</li> <li>• Ensure that the recruitment and retention of social workers identified within the workforce strategy is built into the communication strategy for the service (relevant expertise secured);</li> <li>• To commit to reducing the caseloads for front-line workers, being explicit about caseload numbers for each service and when this is expected to be achieved by;</li> <li>• To review the ICT equipment currently available to all officers in the service and prioritise the service in the roll out of new technology;</li> <li>• To ensure that front line officers are actively involved in the design of the new case management system;</li> <li>• Review service offer from business support to minimise administrative burdens from front line officers and managers ensuring that they have more time to support children, young people and families;</li> <li>• Review accommodation requirements for all services to ensure that all officers have appropriate accommodation to meet the needs of their service and young people;</li> </ul>	<p>Robert Henderson / Janet King</p> <p>Robert Henderson</p> <p>Robert Henderson / Sandy Hopkins</p> <p>Robert Henderson / Mike Harris</p> <p>Robert Henderson / Mike Harris</p> <p>Robert Henderson / Mike Harris</p> <p>Robert Henderson / Mike Harris</p>	<p>By 31<sup>st</sup> Mar 21</p> <p>By 31<sup>st</sup> Mar 21</p> <p>Start: 14<sup>th</sup> Sept 20 Completed by 31<sup>st</sup> Mar 21</p> <p>By 31<sup>st</sup> Dec 20</p> <p>Completed by: 31<sup>st</sup> Mar 21</p> <p>By 31<sup>st</sup> Dec 20</p> <p>By 31<sup>st</sup> Dec 20</p>	

Recommendation	Action	Lead Owner (s)	Start date / Completion date	Date completed
<b>Recommendation Five:</b> Ensure the council has a regular independent assessment of the effectiveness of its children's social care services	<ul style="list-style-type: none"> <li>Advance plans to expand the membership of the Children's Services Improvement Board to include key partners;</li> </ul>	John Harrison	By 30 <sup>th</sup> Sept 20	
	<ul style="list-style-type: none"> <li>Revise the improvement plan in line with feedback from the independent review of the plan and associated documents;</li> </ul>	Robert Henderson	By 30 <sup>th</sup> Sept 20	
	<ul style="list-style-type: none"> <li>To undertake broad engagement and communication activity with officers and partners on the content and key areas of the improvement plan;</li> </ul>	Robert Henderson	By 30 <sup>th</sup> Nov 20	
	<ul style="list-style-type: none"> <li>Commission a quarterly independent assessment of the quality of practice and associated report, which will be presented to the improvement board and cabinet members;</li> </ul>	Robert Henderson	By 30 <sup>th</sup> Nov 20	
	<ul style="list-style-type: none"> <li>Expand the independent expert support offer in partnership with Ofsted and DfE;</li> </ul>	Robert Henderson	Start: June 20 Completed by 30 <sup>th</sup> Sept 20	

#### Lead Owners:

Sandy Hopkins: Chief Executive Officer, Southampton City Council  
 Robert Henderson: Executive Director (Wellbeing) – Children & Learning Services, Southampton City Council  
 Councillor Paffey: Cabinet Member for Children & Learning Services, Southampton City Council  
 Janet King: Service Director – Human Resources and Organisational Development, Southampton City Council  
 Mike Harris: Executive Director Business Services / Deputy Chief Executive, Southampton City Council  
 John Harrison: Executive Director Finance & Commercialism, Southampton City Council

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<b>DECISION-MAKER:</b>	CHILDREN AND FAMILIES SCRUTINY PANEL
<b>SUBJECT:</b>	CHILDREN'S SERVICES IMPROVEMENT PLAN
<b>DATE OF DECISION:</b>	27 AUGUST 2020
<b>REPORT OF:</b>	EXECUTIVE DIRECTOR FINANCE AND COMMERCIALISM

<u><b>CONTACT DETAILS</b></u>			
<b>Executive Director</b>	<b>Title</b>	<b>Finance and Commercialism</b>	
	<b>Name:</b>	<b>John Harrison</b>	<b>Tel: 023 8083 4897</b>
	<b>E-mail</b>	<b>John.harrison@southampton.gov.uk</b>	
<b>Author:</b>	<b>Title</b>	<b>Executive Director Finance and Commercialism</b>	
	<b>Name:</b>	<b>John Harrison</b>	<b>Tel: 023 8083 4897</b>
	<b>E-mail</b>	<b>John.harrison@southampton.gov.uk</b>	

<b>STATEMENT OF CONFIDENTIALITY</b>	
Not applicable	
<b>BRIEF SUMMARY</b>	
To brief the Panel on the OFSTED Improvement Plan and outline the next steps.	
<b>RECOMMENDATIONS:</b>	
	(i) That the progress be noted
	(ii) That the revised Improvement Plan be presented to the Panel at the Panel meeting in October or December 2020.
<b>REASONS FOR REPORT RECOMMENDATIONS</b>	
1.	The journey for the improvement in the outcomes by Children's Services requires a robust improvement plan.
<b>ALTERNATIVE OPTIONS CONSIDERED AND REJECTED</b>	
2.	None
<b>DETAIL (Including consultation carried out)</b>	
3.	The OFSTED inspection took place between 18 <sup>th</sup> and 29 <sup>th</sup> November 2019. The draft report was received for comment on 18 <sup>th</sup> December 2019. The final report was published on 9 <sup>th</sup> January 2020 with a judgement of 'Requires Improvement'.
4.	This was the third time that the service received this judgement, It was therefore vital that a robust improvement plan was put in place to ensure that at the next inspection the service would have improved and at a minimum a judgement would be received as GOOD. The last full inspection was in 2014 and before this in 2010 ( <a href="https://reports.ofsted.gov.uk/provider/44/80558">https://reports.ofsted.gov.uk/provider/44/80558</a> ).
5.	An improvement board was established with the following terms of reference:

	<p><b><u>Children &amp; Families Service Improvement Board</u></b>  <b><u>Terms of Reference – Jan 2020</u></b></p> <p>A) The Board will monitor, review and direct key defined areas of service performance and improvement, with a specific focus on:-</p> <ul style="list-style-type: none"> <li>• Children Looked After</li> <li>• SEND and high cost provision</li> <li>• Children in need of support and protection</li> </ul> <p>B) To determine learning drawn out of the Quality Assurance Framework</p> <ul style="list-style-type: none"> <li>• Audit findings and learning outcomes</li> <li>• Recommendations from the children’s social care performance Group</li> <li>• Recommendations from the Education performance group</li> </ul> <p>C) To ensure sufficiency in relation to service offer and the budget.</p> <p>D) To monitor high level improvement plans and embed key learning for the service.</p> <p>E) To promote cultures and ways of working towards learning and performance.</p> <p>F) To convene monthly.</p> <p>G) Attendance and participation by the Children’s Leadership Team, Finance Leads (to be determined)</p> <p>H) Chaired by Exec Director for Finance, Deputy Chair Exec Director for Children &amp; Families</p>
6.	The Board had its first meeting in February 2020 to consider the preliminary draft of the improvement plan. An updated version was considered at the March meeting.
7.	The April meeting was devoted to considering the impacts of COVID on the service and the improvement journey. The Board has then met 3 times to consider the delivery of the improvement plan and also to improve the reporting format.
8.	The Board has received specific presentations from the service managers accountable for critical areas including Assessment and Protection and Court. It will receive a presentation from the Service Manager for Looked after Children in August 2020. It has been important to consider the wider strategic delivery of the improvement plan and not the detail.
9.	As part of the improvement journey Hampshire County Council were brought in to review the improvement plan so that for the first time it had an external critical review.
10.	<p>Hampshire County Council were brought in through the ‘Partners in Practice’ initiative. Partners in Practice is a DfE sponsored national initiative where ‘outstanding’ or ‘good’ authorities partner with those that are assessed to be ‘inadequate’ or ‘requires improvement’. The report is currently been reviewed and acted upon. The summary headlines were:</p> <p><b>Quality Assurance Review Conclusion</b></p> <ul style="list-style-type: none"> <li>• The <i>Quality Assurance (QA) Framework</i> includes most of the elements one would expect. Some omissions could be included as per suggestions. Additional work to provide clarity would enhance the</li> </ul>



	<p>framework, as well as linking QA activity and feeding into the self-evaluation.</p> <ul style="list-style-type: none"> <li>• The <i>self-evaluation</i> needs to be refocused according to the ILACS (<i>Inspection of local authority children's services</i>) framework and should be evidence based and focused on outcomes and impact, before it provides the level of assurance required.</li> <li>• The <i>improvement plan</i> requires more work in the areas identified including less task-based measures, current performance reporting which links to targets and success measures, accurate RAG rating and explicit measures to address Ofsted improvement actions, to ensure that it provides assurance for senior managers and the Improvement Board.</li> <li>• The <i>High-Level Improvement Plan</i> does not provide the required level of detail for reassurance and could be a distraction from the detail in the improvement plan. Suggestions made regarding how this could be adapted into a report which aids understanding and leads to exception reporting and further discussion regarding improvement priorities.</li> </ul>
11.	The next version of the plan is aimed to be concluded in September 2020 in readiness for the new incoming Executive Director of Wellbeing (Children and Learning) and statutory Director of Children's Services (DCS) to review. Ofsted require a copy of the plan to be submitted by 25 <sup>th</sup> September 2020.
12.	It is recommended that an updated improvement plan is considered by the Children and Families Scrutiny Panel at the meeting on either 1 <sup>st</sup> October 2020 or 3 <sup>rd</sup> December 2020.
<b>RESOURCE IMPLICATIONS</b>	
<b><u>Capital/Revenue</u></b>	
13.	None at this stage
<b><u>Property/Other</u></b>	
14.	None at this stage
<b>LEGAL IMPLICATIONS</b>	
<b><u>Statutory power to undertake proposals in the report:</u></b>	
15.	S.111 Local Government Act 1972
<b><u>Other Legal Implications:</u></b>	
16.	None
<b>RISK MANAGEMENT IMPLICATIONS</b>	
17.	The overall improvement plan is risk assessed.
<b>POLICY FRAMEWORK IMPLICATIONS</b>	
18.	None.

<b>KEY DECISION?</b>	<b>No</b>
<b>WARDS/COMMUNITIES AFFECTED:</b>	All

SUPPORTING DOCUMENTATION

**Appendices**

1.	Children and Families Improvement Plan – June 2020
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**Documents in Members' Rooms**

1.	None
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**Equality Impact Assessment**

<b>Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out.</b>	<b>No</b>
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**Data Protection Impact Assessment**

<b>Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out.</b>	<b>No</b>
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**Other Background Documents**

**Other Background documents available for inspection at:**

<b>Title of Background Paper(s)</b>	<b>Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)</b>
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1.		
2.		



## Ofsted High Level Improvement Plan 2020 - 21 Southampton Children and Families Service

A city of opportunity where everyone thrives

# Children and Young People Strategy 2017-2020

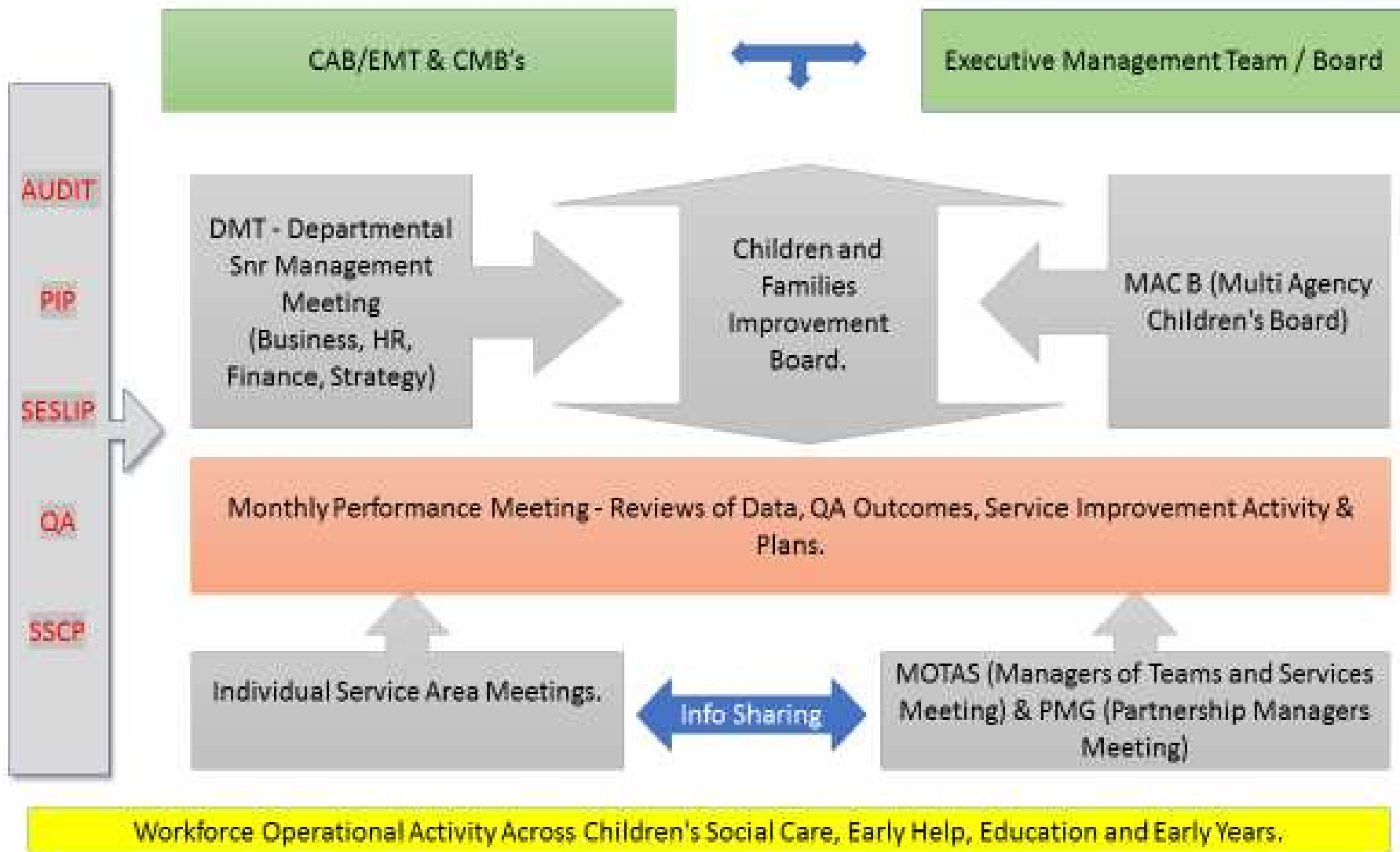
## OUR PRIORITIES



## We will achieve these outcomes by:

- Working together, taking a whole family approach, targeting reducing resources and focusing on prevention and early help.
- Developing our service focus on Restorative Practice.
- Delivering joined up services that offer support proportionate to need.
- Improving educational attainment and aspiration.
- Reducing the number of children who are in the care of the council.
- Taking action in the first 1,000 days of a child's life, as we know this has the greatest impact on their life chances.
- Addressing the impact of inequalities and child poverty through the city's strategies and policies to improve outcomes for children and their families.

# GOVERNANCE STRUCTURE



Page 31

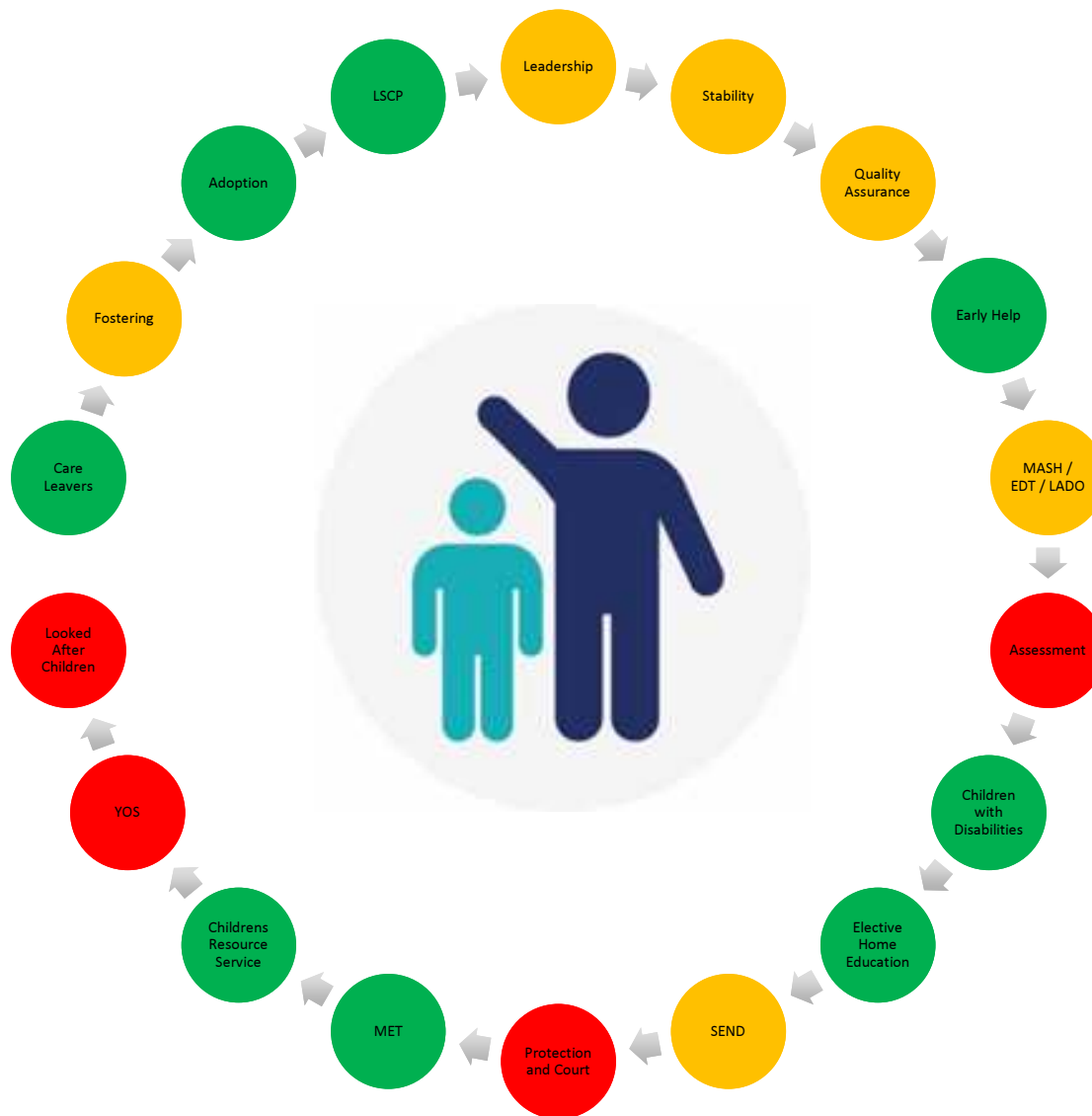
# Service RAG and Update

## Executive Summary

- RAG ratings have not changed; pending the review of the plan through the Partners in Practice process.
- Despite continued social distancing measures, the service can evidence progress this month against a range of priorities:

## Covid 19 Practice Response

- Regarding the Covid 19 response: focus on direct work has increased the level of contact with children subject to child protection planning. Work has been undertaken with the data and Paris teams to update case note recording to give a more accurate picture of contact with children across the service.
- Audit activity has continued across MASH, assessment and PACT.
- We have produced a Covid 19 resource for children accessing our contact centres. This is being shared with Ofsted and Coram Voice.



## Improvement achievements:

- Early help managers have met with the data team to finalise the Early Help Scorecard.
- Managers from PACT and QA have met to agree how we will work together to support (virtual) learning circles in that area. This approach will be rolled out across EH, assessment and LAC.
- We have successfully rolled out 11 virtual reflective group sessions across the service; facilitated by our seconded Ofsted inspector and reaching >70 colleagues.
- The Learning and Improvement Panel has met virtually to receive performance updates from across Children’s Social Care.
- The first round of Year of the Child audits were completed. This is included virtual contact with social workers and young people where it was possible to do so.

# Service RAG and Update

## Executive Summary

- The Looked after Child Annual report, Fostering Annual report, Recruitment Strategy and Statement of Purpose have been reviewed for presentation at the Corporate Parenting Committee.
- The Restorative Practice guidance has been started, with input from the Work with Families Project group and Managers of Teams and Services (MOTAS).
- The restorative practice training offer has been developed with L30 Relational Systems. This includes face to face and virtual training options for Autumn 2020.
- There have been two virtual sessions with Elia (Signs of Safety) to prepare for project work in June to examine if Signs of Safety can align with Care Director.
- The Youth Offending Service can evidence an increase in ETE engagement and is only one of two YOTs nationally to have achieved Arts mark Gold accreditation.



- A further Partners in Practice meeting is scheduled for 30/06/20. SCC and HCC QA Unit Managers are liaising regarding the review of the Improvement Plan and SCC are drafted a questionnaire for managers to feed into coaching / improvement activity.
- The data team have been unable to address the remaining data requirements due to prioritisation of the DfE Covid 19 returns and related reports. The following areas will be reportable for the July Board: % of Strategy Discussions held within 1 WD of the Referral outcome being progress to CP Strategy Discussion; % children allocated within 48 hours of referral; % of Children have a long term placement plan by their 2nd review; for care leavers, number of placement stability meetings.

# Service Summary

## LEADERSHIP



Overall RAG remains amber. Service is being supported by adult Executive Director and senior management team are working cohesively. despite current challenges; evidenced through Covid-19 report to Improvement Board in April. Covid activity is being prioritised but, the service has not lost sight of 'business as usual' activity; evidenced by key milestones being met for strategic corporate parenting & learning and improvement. Key risk is around the absence of a DCS, particularly given recent grievance and resultant scrutiny and pending serious case reviews; alongside Covid 19 pressures.

## STABILITY



Overall RAG remains amber. Sickness absence has increased slightly. % for social work turnover has increased, but is expected to decrease next month as this is a rolling % and there were no leavers in May 2020. Service is working with HR, finance and the project team to review vacancies and service structure and there has been traction in recruitment in PACT as a critical area. Key risk is that if this work does not move with pace the necessary improvements to quality of work will not be achieved. Covid 19 pressures on case numbers is also a risk; for example, the service is already addressing an increase in child protection plans.

## QUALITY ASSURANCE



Overall RAG remains amber. PiP activity has started. QA unit is coordinating audits across the service (YOTC) and Covid 19 assurance activity. Improvement work has started with PACT to feed audit findings into learning circles. Progress is also evident against Restorative Practice and Signs of Safety work. Key risk is around service capacity to engage with quality assurance framework; particularly the audit programme.



# Service Summary

## EARLY HELP

Early Help

Overall RAG rating remains green. Performance data for timeliness of response has improved again. Audit activity underway as planned. Meeting with data team took place in May 2020, which will benefit reporting position overall. Key risk is Covid 19 impact. There has been a small variation (decrease) to numbers of children working with the service. This should be monitored – and also opportunities for further step down / direct referral activity explored. TM has been allocated to assist with this area of the service.

## MASH / EDT / LADO

MASH /  
EDT / LADO

Overall rating remains amber. Covid 19 activity has provided good assurance of quality of decision making in the MASH. There are outstanding actions regarding the review of thresholds with partners. This is a key risk, because ultimately we do need to evidence the effectiveness of the partnership response to the Ofsted findings and improving outcomes for children and families. The Service Manager now has oversight of this area and assessment; so, the plan for improvement work and the lead needs to be considered carefully.

## ASSESSMENT

Assessment

Overall rating remains red. Favourable performance in respect of sec.47. Audit programme undertaken to understand quality of practice. Key risk is in respect of quality of practice. Advance Practitioner from QA Unit allocated to service area to support improvement plan.

# Service Summary

## CHILDREN WITH DISABILITIES

Overall rating remains green. YOTC and SSCP audit completed. Service review now scheduled.



## ELECTIVE HOME EDUCATION

Overall RAG remains green. Service reports are now been shared with QA unit as BAU. Numbers overall have increased slightly since March 2020; but the service reports show a good focus on vulnerable groups. Key risk is around potential impact of Covid on home-schooling. The service has confirmed that virtual contact is being made with vulnerable families; but, service will need to monitor broader impact closely.



## SEND

Overall RAG remains amber. Review of education provision scheduled to take place prior to July 2021. Risk identified in respect of Covid 19 impact upon transitions work. In the immediate term, CWD manager and adult PSW have liaised regarding easements to ASC statutory responsibilities.



## PACT

Overall RAG remains red. However, there is evidence of service and team manager focus on reducing caseloads. Advanced practitioners across PACT and QA are working together to support consistent focus on practice. The service story board this month provides more detail. The risks previously identified around the traction of recruitment and retention activity and impact of Covid 19 are particularly relevant in this area.



# Service Summary

## MET



Overall RAG remains green. Continued strong performance in respect of young people receiving an offer of Return Home Interview. Risk is in relation to non-compliance with 72 hour RHI guidance; which has been raised with safeguarding partners.

## CHILDREN'S RESOURCE SERVICE



Overall RAG remains green. No significant change in performance and continued statistical evidence that service is having an impact. There is a risk in inspect of the delay in production of case studies due to Covid-19

## YOS



Overall RAG remains red. Educational attainment has improved and progress has been made against some staffing priorities. Service reports challenges in respect of planning and out of court assessments; although improvement plan (reported to Youth Justice Management Board in May 2020) outlines service responses. Key risk appears to be around effective governance; plans have been delayed due to Covid 19 and may need to be implemented virtually.

## LOOKED AFTER CHILDREN



Overall RAG remains red. The service can evidence traction around strengthening partnership support for looked after children through the Corporate Parenting Committee structure; but, the focus on consistently good practice needs to increase. Key risk is around ensuring traction against key elements of plan (direct work, training and development, partnership work) whilst social distancing measures are in place.

# Service Summary

## CARE LEAVERS



Overall RAG remains green. Improving picture. Accommodation and health outcomes have improved. Strong planning performance, not quite meeting target set. Although not meeting the 90% target, there is a consistent cohort of 'good' audits. ETE outcomes are the key risk; with the task and finish group activity from CPC requiring grip and pace.

## FOSTERING



Overall RAG remains amber. Service Manager has submitted annual fostering report, recruitment strategy and statement of purpose to Corporate Parenting Committee. Resource for specialist fostering provision secured. Task and finish group reporting to Corporate Parenting Committee. The key risk is traction against the recruitment plan, as numbers of foster carers have reduced.

## ADOPTION



Overall RAG remains green The service has provided up to date data for life story work and is sending through case studies to show the impact of work for children. Data and supporting information is regularly sent through by the RAA. Key risk is impact upon Court activity, affecting adoption numbers.

## LSCP



Overall RAG remains green. Deadlines amended; Neglect practitioners' survey has been put back to July 2020 due to Covid 19 impact. Training plan deadline has been put back to enable SSCP annual report to be presented to full partnership meeting in September. Key risk is around impact of Covid 19 across safeguarding partners.