

Self-evaluation

Southampton Children & Learning Service

January 2022



Introduction from Executive Director

Since our last self-evaluation a huge amount has happened in Southampton.

We have maintained a resolute focus on putting the foundations in place for significant improvements in practice. We have:

- Launched our Destination 22 service transformation programme, supported by over £2 million investment by Southampton City Council.
- Recruited an experienced team of six permanent Heads of Service. These leaders are at the forefront of the change programme across Early Help, Safeguarding, Special Educational Needs and Disabilities (SEND), Looked after Children, Care Leavers, and our new Young People's Service. The soon to be launched Young People's Service will provide early intervention alongside intensive support for those at most risk of harm.
- Consulted widely on our overarching Children and Young People's Strategy, which will be launched in March 2022, alongside eight underpinning strategic plans.
- Continued to strengthen our Improvement Board, building on a partnership approach. We have refined and streamlined our Improvement Plan, so that it considers Ofsted focused visit feedback and is more targeted to our priority areas of improvement.
- Engaged with our Partner in Practice, Hampshire, focusing on embedding quality assurance practice. We have also begun work with the DfE sponsored advisor, who is assisting us in our performance/compliance activity and a review of our plans in response to serious case reviews and child safeguarding practice reviews.
- Launched our '*Making the Difference*' systemic practice framework and our workforce academy, with an investment of over £400k in professional development and training.
- Continued to build better relationships with safeguarding partners, through the Safeguarding Children Partnership, School Leaders Forums, and other strategic and operational groups. We held a strategic partnership forum in July 2021, and we are hosting a contextual safeguarding conference in March 2022 to launch our Young People's Service. We have reviewed the local threshold document and neglect strategy and toolkit with partners, and these will be launched in 2022.
- Run monthly assurance clinics across the service (chaired by our Deputy Director) to drill down into team and individual performance.
- Prepared for the launch of our new case management system in January 2022, and we are also launching a business support pilot which will assess the impact of bringing administrative support into teams to help social workers focus on work with families.
- Recruited 29 social workers from South Africa who will join the service in early 2022.
- Launched a vibrant social work recruitment campaign using social media platforms. We have created a new senior social worker role in the service and have strengthened induction and newly qualified social worker support arrangements. We have invested in Step Up, Frontline and apprenticeship initiatives, and this investment continues.
- Developed, with the workforce, a leadership pledge which describes how we will behave and how we will establish a great culture for managers, social workers and other practitioners to be supported to practice at their best.

In May 2021, Ofsted conducted a focused visit as part of the ILACS framework. The senior leadership team acted decisively in response:

- A senior management review of all children in unregistered placements was undertaken to assure ourselves of the safety and appropriateness of these arrangements.

- We created a new fortnightly panel, chaired by a senior manager, to scrutinise and track arrangements for children in ‘exceptional arrangements’, such as unregistered placements, placements with parents and emergency connected carers arrangements.
- We ensured robust oversight of face-to-face contact with looked after children; supported by our new performance manager and the scheduling of an extensive audit of over 100 cases, involving managers and our IROs.
- We created a priority action plan to provide the service with a clear structure of the short-term measures to address the weaknesses highlighted and confirm the longer-term improvement plans.
- In addition to the extensive audit activity and launch of our assurance clinics we are using the Destination 22 programme to bring additional staffing resource into the children looked after and care leavers service including social workers, personal advisors, and mental health workers. This service will no longer have a transfer point at age 14, promoting consistency of relationships between young people and their social workers.
- We successfully re-launched our Children in Care Council and hosted a very successful week celebrating our looked after children (‘Love our Children’ week). We are launching our Corporate Parenting Strategic Plan in March 2022 and revising our local offer for care leavers, alongside associated leaving care and housing policies and protocols.
- To strengthen our management oversight of child protection and child in need planning we have worked with our Partner in Practice to quality assure children in need interventions via case auditing. We have undertaken management audits of child protection planning and invested in the Firstline management development programme.
- In respect of Elective Home Education (EHE); we have built on the monthly reports to our Head of Service, ensuring that the manager responsible for EHE attends our monthly Managers’ Learning and Improvement Panel meetings to report on progress. We have launched EHE audits to test out the quality of work with vulnerable children, alongside scrutinising performance.

Our collective will to improve is considerable, and this is backed up by concrete actions and initiatives. But we know that there is much more to do before we can be confident that the services children receive is consistently good enough. The substantial redesign is also, in the short term, creating some uncertainty and a dip in performance in some parts of the service. We have consulted widely and offered many opportunities for staff to be engaged and to share their views: most have come with us on this journey. We are confident that the changes are rooted in child and practitioner-focused values.

We know that we face substantial challenges in creating a permanent workforce that will provide consistency of care and relationships to all of our children, but with a strong team of 20 permanent senior managers and leaders in place, we are just beginning to turn the curve.

We believe that we have an accurate understanding of the quality of practice across the service and that the investment and foundations are in place for the service to make steady advances during 2022.




Robert Henderson,
Executive Director of Children and Learning
Southampton City Council

Contents

Page

Introduction	1
Leadership and Management	4
What we know about the quality of practice	9
How we know about the quality of practice	18
What we are doing about it - Our Priorities	18
Progress achieved and challenges against previous inspection recommendations and priority areas for action	19
The experiences and progress of children who need help and protection	21
Early Help	21
Multi-Agency Safeguarding Hub	22
Assessments	24
Safeguarding	26
Children with Disabilities and Children and Adolescents with Mental Health Needs	30
The experiences and progress of children in care and care leavers	31
Care Leavers and In Care	31
Virtual School	34
Fostering and Adoption	37
Education and Early Years	40
Conclusion	44

This confidential document has been downloaded from the password-protected area of the Director of Children's Services Restricted Area of the SESLIP website. No further distribution is permitted under the terms of the SESLIP Memorandum of Understanding.

For further information contact:

**Stuart Webb, Head of Service – Quality Assurance, Southampton Children and Learning Service
02380 834 102 or stuart.webb@southampton.gov.uk**

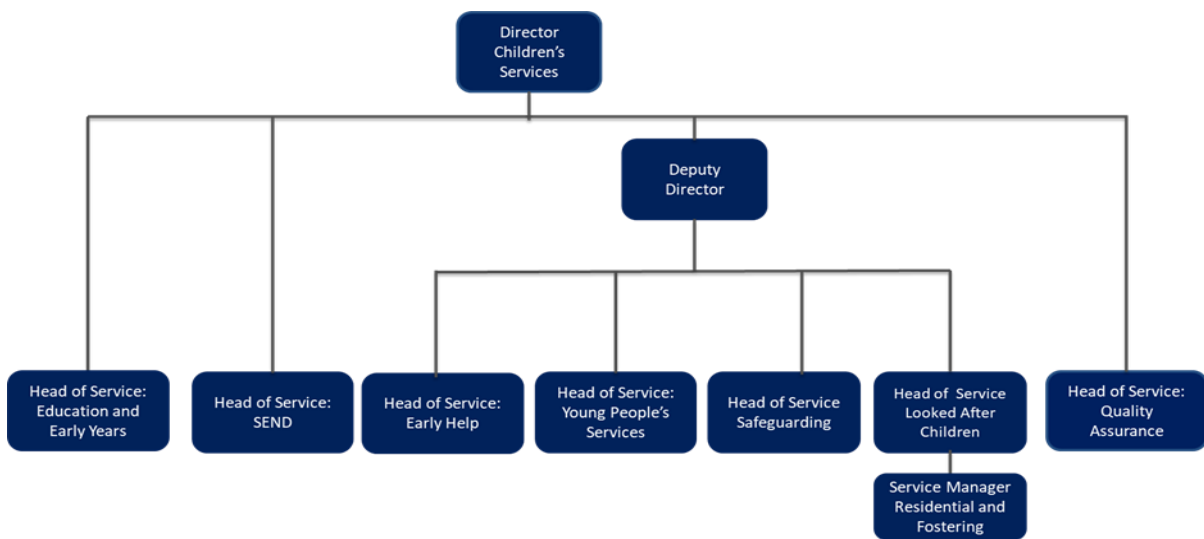
Leadership and management

Overview

Southampton Children and Learning Service appointed a permanent senior leadership team in 2021. The Executive Director reports to the Chief Executive of the Council and regularly engages with the Executive Management Team and lead members. Operational management capacity has been a focus of the service’s Destination 22 redesign, with all twelve Service Leads now appointed and 25 practice managers in the process of being slotted in or recruited. The service is using the Firstline programme to invest in and build on the leadership skills of its operational managers.

Our leadership team is stable, ambitious and relentlessly focused on improving outcomes for children. Clear, achievable improvement plans are in place and we have a high level of corporate support to achieve them, alongside relationships with safeguarding partners that continue to improve. Our self-evaluation is that although many aspects of leadership across the service are now good, the quality and impact of leadership on the ground are on a journey to being good.

Our senior leadership team:



Data

	Target	Baseline	Q1 2020/21	Q4 2021 / 22
Average length of service (years)	9.4	10.4	10.6	10.7
% of Staff with over 5 years service (social workers)	43%	51%	53%	62%
% of Staff with over 5 years service	64%	65%	66%	66%
Staff turnover rate (social workers)	15%	10%	4%	17%
Staff turnover rate (overall)	8%	9%	2%	10%
Agency Rate (social workers)	16%	34%	5%	19%
Agency Rate (overall)	7%	15%	4%	9%



- Our caseloads need to reduce in core areas. The average caseload across the service in November 2019 was 18, but with significant variation across the service. In November 2021, the average PACT caseload was 25 and the Children Looked After (CLA) caseload was 19.5. Over the past year PACT caseloads have been unacceptably high at times; and remains an absolute priority.
- Our use of agency staff is high, with 19% of social worker posts within establishment filled by agency staff. However, the director has successfully sought approval to convert a number of over-establishment posts

these into permanent roles and social worker retention is an improving picture. Staff absence remains above our target.

- There has been a 37% reduction in the number of complaints in 2020/21 compared with the previous year. However, the corporate complaints process was suspended for the first period of lockdown.

What is going well

- We have secured significant investment to support better outcomes for children and young people; including >£2m additional funding for staffing and >£400k to support our workforce academy and practice framework.
- We have co-produced our new Children and Young People's Strategy with children and young people and key local stakeholders. This sits above a comprehensive strategic framework that will be launched in April 2022.
- We have established a strong transformational programme; Destination 22, which is driving a number of key innovation workstreams: (1) Our locality focus; (2) Early Help redesign; (3) Developing a young people's service; (4) Transforming our placements sufficiency strategy and delivery model, including establishing our own children's homes and (5) Transforming the way we deliver services to children with disabilities and SEND. An innovation hub was pivotal in driving this forward.
- Our refreshed Early Help service, Children's Resource Hub and Brief Intervention Service (previously MASH and Assessment), Family Social Work Teams, Young People's Service, and Care Leavers and In Care services will launch in April 2022. Our new locality model is designed to ensure that children get the right service at the right time.
- We have invested significantly in our Child Friendly Southampton ambition: Southampton has been accepted onto the UNICEF accreditation programme. We are ensuring that children and young people are front and centre of local developments, including our City of Culture 2025 bid.
- Our improvement plan has been reviewed to consider the findings of the 2021 Focused Visit, with robust oversight from our improvement board and independent chair. We have engaged pro-actively with our Partner in Practice, Hampshire Children's Services, and our newly appointed Department for Education (DfE) advisor. Priorities include a focus on our practice with children in need, looked after children and care leavers, family safeguarding, SMART planning; and our response to serious case and child safeguarding practice reviews.
- The transition to a more accessible and intelligence-led suite of reporting is well in train. A new dashboard of 170+ KPI's has been developed that follows the journey of the child from Early Help support, right through to adoption. Where applicable, these are benchmarked against statistical and regional neighbours and England average activity. Also due for delivery by the end of January 2022 are a range of Power BI dashboards, including a full KPI dashboard, service area workload dashboards and an Annex A dashboard.
- Our Lead member and other councillors are actively engaged and have scrutiny of improvement activity. The Leader, Lead Member for Children's Social Care and Chief Executive are all committed to a series of Line-of-Sight activities so that they have a comprehensive view of the service and staff morale.
- We have maintained an interface with the Family Courts and quarterly meetings with CAFCASS. The quality and timeliness of our court work is inconsistent. This is an area of significant focus.
- Our Corporate Parenting Board has retained focus on key practice themes: permanence, participation, health, and education. Fostering and Adoption strategies and associated reports have been signed off as part of the refreshed Corporate Parenting schedule.
- Our Looked After Children's service and IROs are progressing a 'Language that Cares' approach in case recording and records of reviews.
- In response to the 2020 whistleblowing incident, the Executive Director and his leadership team have successfully focused on supporting an open and transparent organisational culture, evidenced by the 'Better Together' staff reference group; monthly webinars and open-door sessions with the Executive Director; fortnightly service bulletins; virtual staff conferences. A leadership pledge was launched in December 2021.
- We have revitalised our Children in Care Council and commissioned a nationally recognised consultant to support our Leaving Care young people to deliver Total Respect training for staff and corporate parenting

leads. We successfully held our first corporate parenting celebratory week, 'Love our Children Week' in September 2021.

- In 2021, our new Principal Social Worker launched our Children and Learning Workforce Academy and the 'Making the Difference' practice framework. We have also commenced our involvement in the Frontline and Firstline programmes.

What are we worried about?	What are we doing about it?
<p>We have not yet achieved sufficient staffing capacity in core areas. Our Protection and Court Service is under immense pressure which impacts upon the quality of social work that children experience.</p>	<p>A project team of agency staff has provided additional capacity for 6m, taking pressure of the wider service.</p> <p>Developed YP service and strengthened SW presence in Early Help. Transfer of cases to these services from PACT has begun.</p> <p>Safeguarding service transformation well underway, relaunch April 22. Smaller teams, lower caseloads, focus on good first line management and strong leadership.</p> <p>Weekly scrutiny of caseloads (including ASYE) and management reports. Monthly reports are sent to our Improvement Board to ensure senior corporate oversight.</p> <p>The leadership team works closely with HR, scrutinising absence and overseeing staff performance.</p> <p>Strong support from our HR and communications teams for recruitment activity.</p> <p>Major recruitment and retention campaign launched 17 Jan 2022.</p> <p>Close oversight of practice via audit, management information and assurance clinics.</p> <p>Planning a PA for Social workers pilot to free up social workers to practice.</p> <p>We have committed to the Frontline programme, alongside 'Grow Your Own' remaining involved in Step Up and social work apprenticeships.</p>
<p>We have not yet embedded consistently high-quality social work or high-quality reflective supervision across services. Our group supervision opportunities are also not fully embedded.</p>	<p>Close oversight of supervision frequency through regular management information and scrutiny at assurance clinics.</p> <p>Supervision and management oversight is always included in case auditing.</p> <p>We launched our Workforce Academy in May 2021 to support our social workers in first class learning and development.</p>

What are we worried about?	What are we doing about it?
	<p>We have developed a programme of audit and reflective teams training sessions, which we will launch in February 2022. Our systemic practice training through the Institute of Family Therapy will launch in April 2022.</p> <p>Launched practice standards.</p> <p>Developed virtual learning; commissioning the development of e-learning for business-critical courses and launching virtual practice weeks and bulletins focused on improving the quality of assessment, direct work, and supervision.</p>
<p>There has been an historical lack of strong challenge, consistent performance management and compliance-focus across the service and we are now starting to address this.</p>	<p>‘High Support / High Challenge’ approach; individual monthly assurance for each part of the service - to engage HOS and operational managers in scrutinising performance info and agreeing solutions and targets.</p> <p>Ongoing investment in training and support for managers, focusing on and challenging performance issues. Senior management line of sight through reports to and action planning from the Directorate Management Team meetings. Monthly Managers’ Learning and Improvement Forum includes ‘these children’ performance data and ‘this child’ focus on practice.</p> <p>Robust challenge and support of underperforming managers.</p>
<p>There are inevitable risks associated with the switchover to the new Client Case Management System, Care Director, 31 January 2022.</p>	<p>We have undertaken a review of key forms and pathways in the test site for Care Director prior to go live, to ensure that our practice, recording and delivery of outcomes is in line with the best in the country.</p> <p>We have developed a robust training programme for staff, which will be supported by champions across the service.</p>
<p>The ongoing impact of the pandemic upon the level of need that local families are experiencing.</p>	<p>We have been clear in our expectations that direct contact with families is ‘the norm’. Our performance reporting only ‘counts’ face to face visits.</p> <p>The Quality Assurance Unit has ensured that audits and learning reviews have been completed across the service to ensure that senior leaders have a good understanding of the experiences of children and families.</p> <p>We have increased staffing capacity in the Child Protection Conference (CPC) and Independent Reviewing Officer (IRO) Teams to ensure that ongoing focus on improved performance and quality.</p>
<p>We have more work to do to reduce the number of complaints about the service.</p>	<p>We have undertaken complaints analysis and can show evidence of where we have changed practice after considering complaints feedback. We are arranging training for managers in the Customer Relations Team.</p>

What are we worried about?	What are we doing about it?
<p>We have considerable work to do to embed the practice framework throughout the Directorate and partnership.</p>	<p>Practice model, 'Making the Difference' confirmed as systemic practice with four core components: restorative practice; a trauma informed approach; motivational interviewing; Strengthening Families for Child Protection Conferences.</p> <p>In March 2021 practice week, we launched our areas of practice focus to provide clarity across the service. Ongoing focus on improvement through assurance clinics.</p> <p>We have secured Safeguarding Children's Partnership support for a 'common practice framework'.</p>
<p>Our virtual survey work and analysis of practice through audit tells us that we still have more to do to support professional awareness and confidence in assessing and tackling neglect.</p>	<p>The Safeguarding Children's Partnership has maintained its focus on core practice themes, including Neglect, adolescent mental health, and child sexual abuse in the family environment (CSAFE).</p> <p>We are relaunching our neglect strategy and toolkit in March 2022.</p> <p>CAMHS services have received a grant to support training re the adolescent mental health offer, using the I: Thrive model.</p> <p>We have developed a CSAFE strategic framework, with an extra staff member to support the work and launched revitalised CSAFE training.</p> <p>Engagement with the Safeguarding Children Partnership to better understand the safeguarding experiences of BAME communities.</p>
<p>We need to achieve better overall strategic coordination of the partnership response to vulnerable children.</p>	<p>In April 2022, aligned with the launch of the new service design, we will replace the Multi Agency Children's Board with a new Strategic Partnership Board.</p> <p>Outcomes for children and young people benefit from good partnership engagement in a variety of different strategic forums which include the MASH strategic Group; Multi Agency Children's Board, Youth Justice Management Board and SEND partnership.</p>
<p>We need to develop a better partnership response to families affected by parental substance and alcohol use, mental health difficulties and / or domestic abuse.</p>	<p>We are working closely with Walsall and Hertfordshire Children's Services to develop a business case to argue for a local partnership commitment to a family safeguarding model.</p>
<p>We have a much better understanding of the profile of needs of our diverse local communities, but this needs to translate into better outcomes for families from black and minority ethnic communities (BAME).</p>	<p>December 2021 practice set the foundations for more effective practice, with improvements being coordinated by our Principal Social Worker and the Practice Development Team.</p>

What are we worried about?	What are we doing about it?
We need to improve access to mental health and wellbeing services for young people.	The CAMHS strategic plan was refreshed in 2021. We are working with CAMHS and providing mental health support to schools.
<p>We know we need to improve partner confidence in some areas:</p> <ul style="list-style-type: none"> Some schools experienced communication challenges with Children’s Social Care over the pandemic. We have also received a number of complaints from Family Court Judges regarding the quality of our Court work. 	<p>We are engaging with schools through Head’s forums; strategic groups and operational meetings (Designated Safeguarding Lead (DSL) network, newly formed MASH audit group).</p> <p>We have arranged regular liaison meetings with the Family Court and have identified a manager to work specifically on the quality of Court work.</p> <p>A court specialist joined the PACT service on a fixed term basis in Jan 22 to review and improve our pre-proceedings and proceedings</p>
Our participation activity with children and young people needs to be better coordinated.	<p>Participation with children in care has improved, with regular virtual CIC council meetings and regular Saturday activities. Senior leaders are increasingly visible and are responding proactively to children’s questions and concerns.</p> <p>Participation strategy will be launched in 2022. Under this is a coordinated plan, including children in care council activity and our interface with corporate participation activities. The Practice Development Team are working on a series of e-consultation forms which we will launch with children and families in 2022. These will feed into our self-evaluation.</p>

What we know about the quality of practice

Case audit is our main method to analyse the quality of practice. We completed 469 audits in 2021, a combination of case audits completed by managers and/or auditors in the QA Unit and thematic audits (which include audits with partners). We recognise that managers and services need to be more engaged with our audit programme. We undertook management training with our Partner in Practice and developed service audit tools with managers. A new audit programme and reflective teams training is being launched March 2022.

A dip sample of audits are moderated each month by the QA Unit. We have launched a moderation panel with HOS representation. Where a service’s own audit management activity is extensive and well developed (for example, MASH) a programme of focused moderation has been introduced into the 2022/23 schedule.

Team	Thematic / Individual Audits	Managers Audits	Learning Reviews	Total	Analysis
MASH	186	0	0	186	Single agency and partnership audits identified that some referrals did not meet threshold. Overall, management oversight and decision making were found to be consistently effective.
Early Help	9	7	0	16	The standard of case work was judged to be good in >50% of cases; requires improvement in 40% of cases and inadequate in 10%.
PACT	23	10	12	45	The standard of case work was judged to be good in 40% of cases; requires improvement in 30% of cases and inadequate in 30% of cases.
Children Resource Service (SAT/FDAC)	10	0	0	10	The standard of work in the Children's Resource Service was assessed as uniformly good.
Fostering	18	0	0	18	The standard of work was assessed to be good in 11% of cases, requires improvement in 66% of cases and inadequate in 22% of cases.
Jigsaw	20	2	1	23	The standard of work was assessed to be good in 60% of cases; requires improvement in 32% of cases and inadequate in 8% of cases.
CLA & Care Leavers	153	6	1	160	The standard of work was assessed to be outstanding in 2% of cases, good in 52% of cases; requires improvement in 46% of cases and inadequate in 4% of cases.
Assessment Team	11	0	0	11	The standard of work was assessed to be outstanding in 9% of cases, good in 52% of cases; requires improvement in 35% of cases and inadequate in 4% of cases.
TOTAL	430	25	14	469	

The headline findings from our audit activity are detailed below:

Service	What is going well	Areas of improvement
Early Help	<ul style="list-style-type: none"> Effective multi-agency work completed by EH. TAFs have been inclusive of appropriate services. Good engagement and trusting relationships have been observed between practitioners and families; this has supported the progression of plans. Good identification of needs; families supported well and provided with meaningful/practical help that has impacted their day to day lives positively. Some cases from thematic/Individual audits when moderated several months later (or a12m in some cases), had remained closed with no new issues arising. 	<ul style="list-style-type: none"> More concerted effort needs to be made to involve children consistently in TAFs, to capture their views during visits and to explore their lived experiences. Joint visits with SW at point of handover should be embedded in practice to provide families with a smooth transition between teams. There should be prompt escalation of cases to CSC where family engagement remains poor and where there is no evidence of meaningful change, but safety concerns linger for children. Sometimes delay in escalation of cases is caused by resistance from statutory teams or MASH. In such instances,

Service	What is going well	Areas of improvement
	<ul style="list-style-type: none"> Child centred approach observed, with attempts made to include the views of children/YP in the planning. 	<p>issues should be escalated to senior managers for prompt address.</p>
MASH	<ul style="list-style-type: none"> Thresholds are being accurately applied in the majority of cases within MASH. MASH Contact/Referrals are clear with regards to risks and protective factors. Appropriate consideration for historical context, including success or failure of previous interventions. Good analysis is provided to support recommendations made. Timely response to referrals and timely progression to other teams when required. Information is sought from partner agencies to inform decision making and there is inclusion of appropriate partners in Strategy Discussions. Initial analysis by MASH is considered within subsequent workplans developed by other teams. 	<ul style="list-style-type: none"> Occasionally, CSC records are not checked thoroughly enough especially with regards to the history of parents/significant adults in children's lives. This has, in some cases, led to risk indicators being missed. Referrers are not routinely involved in verbal Strategy Discussions, but instead written information is sought from them (e.g., from schools). There is lost opportunity here to gain greater understanding of the concerns as well as the context surrounding it. There is also lost opportunity to involve such agencies in the planning of the S.47 (including how best to engage the child/YP).
Assessment	<ul style="list-style-type: none"> Male perpetrators are routinely engaged in DA assessments. S.47 Inquiries are supporting good decision making on cases by appropriately identifying where ongoing risk is present and where ongoing support is required. The Service is able to identify some examples where casework was graded 'Good' or above. The main areas of 'Good Practice' are analysis of risk, identification of needs/strengths, consideration for the child's whole journey, incorporation of family's views/voice of the child, consideration for family history and context. Managers are providing good Q&A of assessments prior to authorisation. 	<ul style="list-style-type: none"> More consistent use/incorporation of Risk Assessment tools is required within Single Assessments and S.47 Inquiries to support more robust analysis (i.e., CERAF, DASH, Brooke Traffic Light Tool). Cases are at times closed prematurely or stepped down to EH where the risk threshold is still relatively high. There are still some issues around consistency with regards to the quality assessments although there have been significant improvements overall.
Protection and Court	<ul style="list-style-type: none"> Within court casework there were some effective/meaningful interventions undertaken to mitigate risk to children whilst their permanency plans were being determined. Some evidence of purposeful visits, good co-ordination of work between SAT/FDAC and the SW teams, child centred practice, good understanding of the child's lived experiences and the initial placement arrangements for children met their needs. Within thematic and individual audits, cases that were rated as 'Good' provided 	<ul style="list-style-type: none"> Case recordings do not accurately capture the extensive work that practitioners undertake with families. On a macro scale, this hinders the Service's understanding of how interventions are impacting children and families. There is lack of consistent and robust management oversight of high-risk cases. This has in part been caused by high management turnover within the PACT service. Within the more stable

Service	What is going well	Areas of improvement
	<p>evidence of effective, relationship-based social work practice with timely 'Planning' and timely 'Intervention' as well as 'Effective management oversight'.</p> <ul style="list-style-type: none"> The audit programme identified cases that were rated as 'Good' provided evidence of timely supervision, good interagency working, home visits were linked to Plans, Reviews were held within appropriate timescales, there was concerted effort to engage children, workers demonstrated good knowledge of families' functioning and children were safe/happy. 	<p>teams, more evidence of reflective and systemic analysis of risk is required.</p> <ul style="list-style-type: none"> Many cases have suffered from delays and drift including in areas of statutory casework such as visits, Core Group Meetings etc. In many cases such issues have hindered the progression of CP/CIN plans. The quality of direct work with children varies considerably across the service as does the quality of direct work/reflective discussion with parents. More training is required for practitioners in this area to build their confidence and skills. More frequent and more timely use of Family Group Conferences would be beneficial to many families, not just those in care proceedings. There should also be greater consideration for FGCs (or informal family meetings) as part of case closure processes to ensure that families have a concrete/sustainable plan to maintain change. Given that DA features in a significant number of cases within this service, greater focus is required in this area. Men are routinely involved in assessments but there is less success at gaining their continued meaningful engagement throughout the intervention phase. Greater use of, and better links with, the IDVA service is needed. Learning reviews have identified that lack of robust/consistent management oversight, delay in decision making, insufficient SW monitoring, non-completion of statutory tasks within appropriate timescales and insufficient reviews were common traits that led to unfavourable outcomes for children/families. The cases graded as 'Inadequate' in the Thematic/individual audits included untimely responses to information suggesting that children were at risk. Practitioners needed a better understanding of children's lived experiences. CGMs/Supervision/Visits not consistent enough.

Service	What is going well	Areas of improvement
		<ul style="list-style-type: none"> Disguised compliance/superficial engagement is not effectively recognised or challenged in a number of cases; this results in lack of meaningful change for children. Also, 'capacity for change' is not consistently and effectively assessed and considered within decision making. Lack of sophisticated assessment and response to intrafamilial sexual abuse, especially where this involves multiple family members.
Children's Resource Service	<ul style="list-style-type: none"> Without exception, all the SAT/FDAC assessments audited were completed to very good standards. The recommendations made by the assessors were evidenced well with reference to a range of sources; there was good use of research in the analysis and there was robust address of the areas of concern. The assessments were child focused and there was good exploration of the parents' capacity to change. Additionally, there was evidence that recommendations from the assessments inform Care Planning decisions on cases. Where SAT/FDAC have been involved in Rehabilitation/reunifications Plans, their input has generally been helpful. The information collated during this work, support teams' understanding of parents'/Carers' capacity for change. Visits are focused and purposeful; appropriate management of difficult situations, appropriate escalation of concerns and good reflective work with parents/carers. EoC has not been audited as a specific service area in the last year. However positive points have been noted with regards to their contribution to cases and their intensive support to families. It does seem however that they are engaged in cases at too late a stage in the intervention. More in-depth and focused audit is required in this area to understand how far the intervention assists in mitigating risk of children coming into LA care and family breakdown. 	<ul style="list-style-type: none"> Assessments would benefit from consistently exploring whether a parent could provide appropriate care to their children "with support", especially where assessments conclude with negative outcome. It would also be beneficial if parents' named support network is routinely contacted during the course of assessments to assess how far they can compensate for the deficits in the parent's capacity and to determine how sustainable their support would be long term. Closer working relationship and communication is needed between SAT/FDAC and Care teams where a rehabilitation plan is agreed, to ensure better co-ordination of work. This has been inconsistent in a number of cases.
Looked after Children &	<ul style="list-style-type: none"> A significant proportion of children/YP experienced a change in their visits during the first Covid lockdown of 2020, but most engaged well with virtual visits. In a few 	<ul style="list-style-type: none"> 44% of children/YP in the 1st and 2nd CLA/Care Leavers Audit Cohort had a visit frequency that was outside of DfE minimum standard. In most cases, the

Service	What is going well	Areas of improvement
Care Leavers	<p>cases, the quality of the YP's interaction was reduced, with less dialogue. Visit records often too brief: thus, not providing a good outline of the YP's functioning.</p> <ul style="list-style-type: none"> • When full audits were undertaken, it was evident overall that practitioners had good knowledge of their children/young people. Evidence of good 'relationship based' practice and the Care/Pathway Plans developed were informed by Children/YP's views and wishes. There was also evidence of reparative work being completed to enable children to rebuild their relationships with their parents and further evidence that children are being supported to maintain contact with their birth families throughout their care journey. • In the majority of cases, it was identified that the quality and frequency of visits were meeting children/YP's needs. Children/YP did not express this explicitly, however inference was drawn from the lack of issues in placement, child/YP being settled etc. The children/YP who expressed specific opinions about their social worker's visits were often those who did not wish to have frequent contact or those who were resistant to being CLA. Their views were thereafter reflected in lower frequency visits. • In most cases, there has been good IRO oversight and addressing of drift and delay in cases. • CLA Reviews have been child focused and conversations around young people's transition into independence are happening at appropriate stages in their care journey. • CLA visits are written to and for the child, they are analytical, and they provide a clear picture of children/YP's current life experiences and views. • Within the Individual/Thematic audits completed over the course of last year, the best performing areas were 'REVIEWS'; a majority of cases were graded as Good in this area. With regards to: 'Planning', 60% were graded as Good; to 'Intervention (which includes visits), 56% were graded as Good; to Supervision and management oversight, 52% were graded as Good. 	<p>frequency was agreed at the CLA Review meeting with IRO oversight and approval. However, it was not explicit that the frequency was regularly reviewed as a separate agenda item in subsequent reviews.</p> <ul style="list-style-type: none"> • Delays in the progression and completion of Life Story Work for many children. • A small number of children were found to be on six monthly visit frequency during the CLA/Care Leavers programme. This is a long period of time in a child's life; hence it has been recommended that the Service should hold a discussion with regards to whether the maximum visit frequency should be set at three months. • It has also been recommended that where visits deviate from the DfE minimum requirement of 6-weekly, 'visit frequency' should be a standard agenda item in the YP's CLA Review to ensure that it remains appropriate for their needs. Also, the view of the YP should be explicitly recorded in respect of the frequency and the IRO should clearly address whether the frequency is continuing to meet the child's needs. This is not common practice at the moment. Children/YP's views on visit frequency should also be recorded within the Care Plan and visit records; these should outline clearly whether the frequency is in the YP's best interest. • Team managers and IROs should participate in work to enable them to accurately benchmark the quality of practice, in order to help raise standards in light of the outcome of moderated audits. • There are a group of children for whom placement stability is an issue. Out of 539 children who were made CLA in the last year, 25 had five placements or more and 91 had 3 placements or more. Audit analysis is currently underway to derive learning from these children's journeys with a view to mitigating repeat patterns in the coming years.

Service	What is going well	Areas of improvement
	<ul style="list-style-type: none"> • Good work is being undertaken in a large proportion of cases, there is an equally significant proportion of cases where 'Good' practice standards are not being met. 	<ul style="list-style-type: none"> • Timeliness/consistency/quality of Supervision was identified as an area for improvement in recent audits. The recent high turnover in management within the CLA Service has had some impact on this. • Consistency in the update of assessments and Plans also needs to improve. • Case records need to better capture the hard work that is being completed by practitioners. • Statutory visits are a crucial area that requires focus in the coming year, specifically improvement in the timeliness and consistency of this. For instance, within the CLA/Care Leavers audit programme, it was identified that 44% of 123 children within the 1st and 2nd audit cohorts were not seen within the agreed timescale.
Fostering	<ul style="list-style-type: none"> • Some excellent examples of provision, communication, and professional working with foster carers. High level of joined up thinking, clarity on plans and progression of interventions. • Supervising Social Workers have good relationships with foster carers, this is evident in the case note recordings. This does not always translate into the relationship with adult birth children who live in the home and are not referenced in the supervision and/or safer caring discussions. • Excellent outcomes in the recruitment and approval process. Checks and assessments are timely and good quality. • Post approval and cases have clear safer caring plans, training pathways and supervision agreements. 	<ul style="list-style-type: none"> • The process of Agency Decision Maker ratification to be reviewed in order to determine that it is as robust as possible. • Unannounced Home Visit requirements to be revisited and clarified with staff. Achievement of timely visits and recording to be encouraged and celebrated. Practice improvement in this area to be monitored. • Birth children to be included in safer caring discussion and minimum of every third supervision, more frequently if they are an adult birth child living in family home. Practice improvement in this area to be monitored. • Winter/Covid Contingency plan to be in place for training such as First Aid if this cannot be delivered face to face. • Update the Standards of Care and Allegation policy and implement training. • Staff induction for the Fostering Service to cover the Fostering Service Regulations and Standards as set out in NMS and individual SCC policies relevant to the Fostering Service. • Training to be available for all staff on connected carers, overcoming cultural and language barriers children missing from care and placement stability.

Service	What is going well	Areas of improvement
		<ul style="list-style-type: none"> • The Fostering Team to consider the importance of recording information on carers within just one system. Attention to be given to case recordings being held on only one foster's record when they are approved as a couple. • Chronologies and unannounced home visits to be reviewed in every Supervision. • Team Manager to ensure supervisors are familiar with SCC Supervision Policy. SSWs to complete case summaries before each 1:1 supervision to reduce recording time. Creative thinking to be applied to issue of uploading supervisions to the record system given time constraints, and how efficacy can be encouraged and celebrated. • The service considers the training and upskilling of individual practitioners to provide training and support to less experienced members of staff. • Meeting between IRO Service and Fostering Service regarding monitoring of practice improvement in relation to the area of reviewing respite arrangements, the completion of review paperwork by the Child's Social Worker and the reasons given for the cancellation for Household Review meetings. • Practice improvement to be monitored regarding management responses to the alerts process.
Adoption	<ul style="list-style-type: none"> • Workers are liaising with all parties involved with assessments; birth families are being updated on the progress of plans for adoption and matching paperwork reflects the needs of children and the children's identity is evident within this. 	<ul style="list-style-type: none"> • Life Story Books need to be completed in a timely way. • Adoption to be included in wider audit programme in the coming year.
Children with Disabilities (JIGSAW)	<ul style="list-style-type: none"> • Some CIN reviews are timely and informative with progression and developments clearly recorded. • Clear multi agency discussion and decision making on cases. • Planning corresponds well to the Child's needs, they are completed in a timely way, are inclusive of parents and outline SMART actions. • Visits are recorded with attention to detail. 	<ul style="list-style-type: none"> • Children's voices are sometimes limited with focus being more on parents. • Annual assessments are not always initiated or completed within appropriate timescales. • Improvement is required in the timeliness of CIN reviews/Visits. • Improvement is also required in the timeliness and robustness of supervisions.

Service	What is going well	Areas of improvement
	<ul style="list-style-type: none"> • Children benefit from having a consistent case worker. • Consideration is given to the impact of SEND on children. • There is excellent use of all available resources within the Team and City. • Social Workers have acted as good advocates for children and their families. • There has been a high level of management oversight for cases subject to care proceedings. • The quality of Single Assessments is Good or Outstanding; they provide a good outline of children’s needs and how their disability impacts their day-to-day lived experiences, as well as those of their household. They also recognise strengths and where support can further enhance this. • There has been good co-ordination of work between agencies. • There has been high level of support provided to families by the service. 	

What we know about the quality of practice: Serious Case Reviews and Partnership learning activity

We had two serious case reviews published in 2020: Freddie and Clare. In 2021, we published a Child Safeguarding Practice Review (Liam) and two serious case reviews (Family B and Non-Accidental Injury thematic).

Key learning themes from the serious case reviews include:

- *Decision making in the Multi Agency Safeguarding Hub:* these have been addressed through regular service audits and partnership engagement, strategically and in the development of multi-agency audits in 2021.
- *Quality, timeliness, and effectiveness of child protection planning:* this is being addressed through performance data scrutiny, service audits, reports to the Safeguarding Children Partnership and the re-focusing on Strengthening Families within our practice model.
- *Impact of legal advice and public law outline:* this is being addressed with updated guidance, dedicated business support and an additional manager support overseeing pre-court and court work.
- *Professional understanding of child sexual abuse in the family environment and trauma informed approaches:* this is being addressed through the development of our strategic framework and training alongside the development of a new post and funding consultancy for practitioners.
- *Impact of resistant parents and other adults in the family home:* this is being addressed through the commissioning of training.
- *Effectiveness of supervision and management oversight:* which we are responding to with revised supervision guidance, commissioning of reflective supervision training for managers and service audits.
- *Use of escalation processes:* which is being addressed by engaging partners through a range of professional forums (schools forums, Designated Health Leads meeting, MASH strategic group).
- *Contextual safeguarding and criminal exploitation:* which we are addressing through the launch of our new young people’s service.
- *Non-accidental Injuries in babies:* which resulted in a review of independent living provision and an action plan regarding working with young parents within the child protection system.

We have worked with our DfE Advisor to review the service action plan in response to reviews and we have identified the activity which we think will most impact better practice. Our areas of focus for 2022 include:

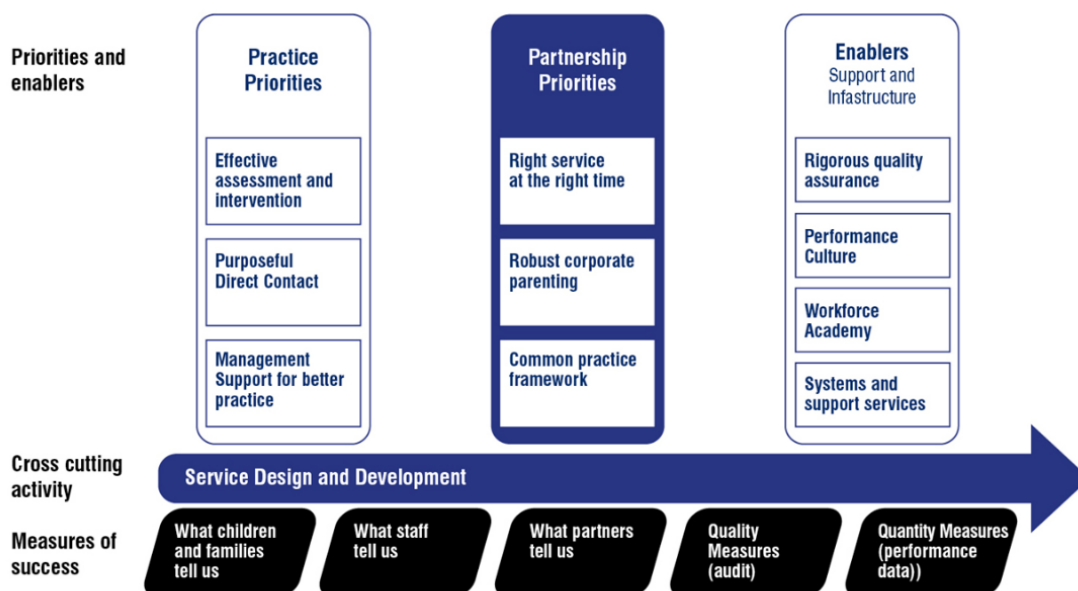
- Conducting a staff survey to understand the impact of training upon practice.
- Using our PiP activity to focus on effective planning / core groups (**this is already a PiP area of focus).
- Reporting to the SSCP on progress against achieving more effective planning / core groups and also on Early Help performance and improvements.
- Undertaking a review of the placements team as part of the Destination 22 programme.
- Ensuring that our Principal Social Worker focuses on disseminating practice learning through the practice development team workplan (GP registration, safe sleep, IMR learning).
- Engaging with partners so that the launch of the Children’s Resource Hub / Service and new thresholds document is robust.

How we know about the quality of practice: our Quality Assurance Framework



What we are doing about improving the quality of practice: our priorities

Underpinning our detailed plan are core priorities and enablers. We believe that with a relentless focus, we will achieve the best outcomes for children in Southampton; laying the foundations for a service that provides consistently good practice.



Progress achieved and challenges since our last inspection

Standard Inspection recommendations (2019)

Social workers need to build longer term, uninterrupted relationships with children so that their plans are progressed.

- The service has not yet achieved the number of permanent social workers it needs to provide a consistently good service. However, 29 South African social workers have successfully been recruited, alongside continuing with apprenticeship, Step Up and Frontline initiatives. We have robustly reviewed our induction programme for new staff, developed a senior social worker role and launched our workforce academy and systemic practice framework in order to retain staff. A major recruitment campaign started in January 2022.

Better management advice for social workers on how to undertake direct work with children and regular, reflective discussions on their progress.

- There is still inconsistency in the quality of management oversight and opportunities for reflection. We have maintained our emotional support offer for staff (led by experienced psychologists) while we commission training for managers using Research in Practice and Firstline. We are re-launching our supervision framework and our Principal Social Worker is engaging with our managers, ahead of reflective teams sessions arranged across the service, starting in March 2022.

The quality of assessments and plans to ensure that all children get the right help quickly and that its impact is clearly measured.

- There is an increased focus on timeliness and compliance through our assurance clinics. The quality of assessments and plans remains inconsistent. Partners in Practice work and the launch of the 'Making the Difference' practice framework will support ongoing improvement.

Decision-making in the MASH consistently adheres to local threshold guidance and children do not experience unnecessary statutory assessments.

- We increased our single-agency audit activity in MASH in response to the pandemic and in 2021 we successfully launched a multi-agency audit schedule. We are working with the Clinical Commissioning Group (CCG) to develop a needs and outcome led service, not a threshold led service. Our MASH strategic

group has agreed our new pathways document which will be launched in April 2022, to coincide with the commencement of the Children's Resource Hub.

The use of bed and breakfast arrangements for care leavers aged 18 years and above and children aged 16 and 17 years is discontinued.

- Bed and breakfast accommodation is only used where all other options have been exhausted and always with the oversight of the Deputy Director. The service is contributing to the review and recommissioning of young people's housing related support services, which started in September 2020 and will conclude in 2022. We are undertaking a wholesale review of all our care leavers and their accommodation to inform our strategic commissioning of placements. We have created a new 16- and 17-year-old homelessness protocol, using this opportunity to re-train staff around this area of practice.

The widespread and inappropriate use of child safety agreements with parents, in circumstances when children's exposure to domestic abuse is a primary safeguarding concern.

- After the 2019 inspection recommendation, we reviewed our risk assessment guidance with managers across assessment and protection and court services; revising it so there was clearer direction in respect of the use of child safety agreements. Our audit activity has showed us that we still need to improve consistency of practice. So, we have recently launched consultation sessions with our Independent Domestic Violence Advisor (IDVA) service, and they co-facilitated a domestic abuse-themed virtual practice week with us. We have also commissioned Safe and Together training for staff which will be rolled out in 2022.

Focused Visit areas for Priority Action and Recommendations (2021)

Effective and rigorous senior management oversight of children in care who are placed in unregistered settings, are at home with their parents or are with connected carers in emergency circumstances.

- Fortnightly panels to ensure senior management oversight of these children, alongside an alternative to care panel to support a structured approach to reunification. We have also launched our placements action plan and engage robustly with the service areas through our assurance clinics.

Effective management oversight of services to care leavers.

- Engagement with managers through our assurance clinic activity. We are in the process of formalising the management team in the Care Leavers and In Care Service. We have secured additional personal advisor and mental health frontline capacity. We are adopting a joint approach with education colleagues regarding NEET outcomes. In 2022, we will test out the impact of our response through an independent peer review.

The quality of supervision and management oversight of children on child protection and child-in-need plans.

- See above, response to ILACS Standard Inspection (2019) recommendation.

Visits to vulnerable children who are electively home educated (EHE).

- We have broadened the focus of our monthly Managers' Learning and Improvement Panel, inviting the service manager for Inclusion to update on improvements to contact with vulnerable children who are electively home educated (EHE). We have worked with the service manager and his team to develop a bespoke audit tool so that we can focus on quality information as well as performance data.

The experiences and progress of children who need help and protection

Early Help

Overview

Our Early Help offer aims to intervene early with families to reduce the need for statutory intervention. This is an integrated offer with Solent NHS partners, who, via the ECHO Programme, currently take the lead in 0-5 Early Help provision through an enhanced health visiting model. Our offer is generally locality based, being delivered via Sure Start Centre Family Hubs. Offers include come and play activities, health clinics, parenting courses and money management. As part of the Destination 22 programme, six qualified social worker posts have been created, alongside a family partnerships team and a co-ordinator post, which have responsibility for embedding good quality, evidence-based interventions with families and managing our Family Group Conference offer, which has been brought in-house.

Currently, the Early Help Hub, based in MASH, also offers a more rapid response to families who need a fast service with a view to triaging referrals and reducing the need for escalation into Children's Social Care; this service was assessed positively by Ofsted in 2019 and 2021. From April 2022 there will be a better integrated Children's Resource Hub, which will build upon these foundations.

Referrals to Early Help are made via the MASH, Early Help Hub, or via a stepdown panel where families are stepping down from statutory social care services. There are also step-up processes in health, from the universal offer to the Enhanced Health Visiting Offer (Echo) programme. The voluntary sector, and commissioned services, such as Safe Families, also offer key support to vulnerable families across the City.

Our assessment of current practice is that the standard of early help work is not yet good enough: we have extensive, integrated early help provision in Southampton. But we know that it needs to be more accessible, that families need to benefit from intervention earlier and that risk needs to be managed more confidently so that families do not escalate unnecessarily through the system.

Data

- Numbers of Early Help assessments completed are higher than in 2019. In November 2020, 1491 assessments were completed. In November 2021, 2745 assessments had been completed year to date. This may not be due to a rise in activity, but primarily due to improved reporting.
- Our CHAT data shows that in November 2019, 29% of Early Help cases also appeared on the referral list. In 2020 the figure was 22% and in November 2021, 19% of Early Help cases appeared on the referral list for the previous 6 months. Further analysis on step up/step down activity is underway.
- Our data and intelligence in relation to Early Help is not robust enough and we are continuing to develop our reporting, insight, and intelligence in this area.

What is going well?

- The Early Help Hub has offered a good-quality, rapid response to some families to support a triage of their needs to ensure that they receive the right help. Our new Children's Hub will build on this model.
- We have revised our Early Help Assessment Tool and our practice standards via a series of workshops.
- We have created a video-based NVR parenting course due to the impact of COVID-19, developing a blended approach of online and face to face interventions. This involves delivering a range of shorter-term interventions, including 1-2-1 family support and group work evidence-based parenting courses via digital platforms.
- We are now using Family Group Conferences in Early Help. Feedback from service users and outcomes are positive.
- The Echo Programme continues to be offered by our Health Visitors, a well evaluated programme. Southampton University are evaluating.
- Through the Section 75 arrangement we are working collaboratively as SCC and Solent NHS to keep children's centres open and to use these bases more creatively.

What are we worried about?	What are we doing about it?
We need to manage escalating need better at an Early Help level to prevent 'handoffs' for families. In addition, there can be a delay in allocation within the localities for some families, and we need to reduce this delay.	We strengthened staffing expertise and capacity in Early Help in 2021. This includes the recruitment of social workers, experienced family engagement workers and family group conference facilitators. By doing this, we think that we will successfully engage more families in our Early Help offer.
There is a need for greater integration with our health partners around the 0-5 offer to ensure that there is increased capacity for early intervention for this vulnerable cohort.	We are currently reviewing governance across the children's partnership and reviewing the S75 partnership agreement with our health colleagues as part of the next phase of the Destination 22 programme.
The Early Years peer review undertaken in 2021 highlighted the need for an overarching Early Years Strategy.	We will launch a refreshed Children and Young People's strategy and associated Early Help and Early Years Plans in April 2022.
Increased referrals regarding the emotional and lower-level psychological health of children and young people and adults.	We will enhance our early intervention multi-agency offer to young people and adults around emotional and mental health needs; using the CAMHS i:Thrive workshop findings to inform our response.
There has been an ongoing challenge in the Solent Health Visiting side of the service due to staff capacity and the impact of the pandemic.	We are maintaining our health visiting offer: some bank Health Visiting staff have been drafted to support visiting where there have been staffing issues.
Not having a robust enough preventative offer in the city to respond to some of those early at-risk-of-offending signs impact upon our first-time entrants and offending rates which are high compared to statistical neighbours.	<p>We have developed, and are implementing, a new young people's service as part of the Destination 22 programme.</p> <p>We have established a pre triage assessment pre JDMP - ensuring a more robust and evidence-based decision-making process, including voice of the child to ensure we make the best decision for the young person, the victim and the community.</p> <p>We will build upon on our Out of Court offer by developing our diversionary offer for young people who have been brought to the attention of the police and who have offended.</p>

Multi-Agency Safeguarding Hub (MASH)

Overview

We have retained the function of our Multi-Agency Safeguarding Hub. If a child is not open to a statutory team, professionals and members of the public report concerns and requests for information and advice, which are considered by the social work managers in the context of the known history. Information is gathered through the partner agencies for the MASH and social workers then analyse and make recommendations to managers as to the level of intervention required.

In April 2022, we will launch our new, integrated Children's Resource Hub and Pathways (Thresholds) document. The aim is to create a needs-led rather than a threshold-led service offer, opening up appropriate opportunities for earlier help alongside maintaining the core safeguarding remit and responsibilities.

EDT responds to emergency concerns from professionals and members of the public if the situation cannot wait until the next working day. They update the allocated teams with the work undertaken to safeguard children

and if a child is not currently open, they share their interventions with MASH to progress as required. We are in the process of reviewing this service alongside Adult Services colleagues.

Our assessment of current practice is that the multi-agency safeguarding response has improved and is firmly on a journey to being good: our single agency and partnership quality assurance activity shows consistent decision making and management oversight. But contacts remain high and partnership understanding of threshold needs to improve. This means that some families get a higher tier response than necessary and additional pressure is put on the safeguarding system.

Data

- The number of contacts has increased during the pandemic; in 2020/2021 there were 17,661. At the end of November 2021, the number was 16,499 for the year to date. 65% of all contacts originate from the Police.
- We continue to prioritise a timely response to referrals, in line with Working Together 2018. In October and November 2019, 98% of referrals were completed within one working day; this performance continues in 2021.
- In November 2019, the number of referrals was 1,015 per 10,000. In November 2020 this had reduced to 774 and to 573 in November 2021, against a target of 647/10k which is our SN average. We have increased the focus on decision making in our MASH since March 2020, through targeted audits.
- We have retained a focus on the discharge of the Local Authority Designated Officer function. The number of LADO referrals received in 2019/20 was 121, with 107 in 2020/21. Although this is lower than the previous year, the impact of the pandemic has to be considered. There have been 154 referrals into the service to date, with the fourth referral criteria impacting upon numbers. In addition, one young person has been subject to nine referrals due to allegations against staff and there is a specific management plan in response to further allegations.

What is going well

- We have brought in additional social worker and manager capacity to the MASH. Manager oversight and quality assurance is well-established, with management and partnership audits used to test out the quality of referral and decision making.
- We can evidence MASH strategic meetings, drop-in sessions, and meetings with partner agencies for learning and delivery of training to key partners being undertaken as routine.
- We can show through audit that we have been 100% Working Together compliant for strategy discussions in MASH, with inclusion of schools.
- We have successfully appointed a data analyst and consequently we are becoming better at using data reports for operational activity and for wider understanding of needs.
- We can evidence that all staff have appraisals booked in and we are developing champions in key areas such as Female Genital Mutilation (FGM), CAMHS liaison, Prevent, MAPPA/MARAC, Designated Safeguarding Lead (DSL) Training, Domestic Abuse & HRDA.
- We can evidence compliance with statutory attendance at Multi Agency Public Protection Arrangements (MAPPA), Multi Agency Risk Assessment Conference (MARAC) and Channel Panel for unallocated cases.
- Our audits show our consistent use of management oversight templates.
- Management oversight has identified an improvement in EDT consistency of recording.
- We last undertook our bi-annual LADO audit in 2021 and we have a comprehensive improvement plan in place. We have secured extra resources to create a standalone LADO post.

What are we worried about?	What are we doing about it?
<p>Increasing numbers of Contacts/Referrals, suggesting needs are not met at an early stage for some children. Police reports continue to increase with the conversion rate remaining very low.</p>	<p>We are building confidence in targeted early help; by recruiting Early Help social workers in Early 2021. The executive director is involved at a county level in local authority discussion with police regarding practice.</p>

What are we worried about?	What are we doing about it?
We have high numbers of cases sent for statutory assessment rather than targeted early help.	We have developed a Performance and Data analyst role to provide an understanding of the needs within the City.
We have high numbers of s47 enquiries in comparison with statistical neighbours.	We undertake regular joint audits with police and health around strategy discussion outcomes.
Partners need to understand the new pathways document and Children's Resource Hub.	The MASH Strategic Group have led on the review of the pathways document. There is partnership commitment to promoting the service communications plan and training.
The consistency of response to contextual safeguarding concerns needs to improve evidenced by audits.	Our development of a young people's service is exploring and implementing best practice in contextual safeguarding.
Involvement of Secondary Head representatives in MASH strategic group and audit activity needs to be more consistent.	Restorative work with Secondary Heads to promote inclusion has started through invites to MASH strategic group attendance at head teacher's forums, Drop Ins and audit working party.
We need to do more to capture feedback from children and families.	The service will launch service user surveys by Spring 2022 and use them in its ongoing evaluation of service effectiveness.
Our response to DA through HRDA needs to be reviewed.	We are reviewing the local HRDA protocol and thresholds; engaging with Stronger Communities and Hampshire Constabulary; alongside ensuring staff have the right training.

Assessment

Overview

The assessment service comprises three teams which work to a rolling duty rota which comprises of an intake week followed by a 2-week period to process the majority of the work. The assessment service takes all new referrals from the MASH, including S47 enquiries and S.17 single assessments (includes unaccompanied asylum seekers, age assessments and homeless 16/17-year-olds).

The transfer points within the service are currently either at Initial Child Protection Conference, Child in Need planning meeting, step down to Early Help or closure. The service also initiates initial Care Proceedings when this level of risk is identified and hold these cases until the first Looked After Review, including statutory visits. Children who meet threshold for the Public Law Outline (PLO) are also held with the point of transfer being the PLO meeting.

Through Destination 22, the teams will become Brief Intervention Teams, offering intervention to families swiftly, for up to three months and aligned with the three localities across the City. The Intervention and Complex Assessment Team works intensively with families to support them in making and sustaining positive change, and in turn prevent children entering Local Authority care. The Family Drug and Alcohol Court multi-disciplinary team who work with families whose issues with substance abuse has led to the LA issuing Care Proceedings.

We think that the quality of our assessments is not yet good enough: we have focused on strengthening our performance culture across these teams and children consequently get a timely response. However, the quality of assessments still needs to improve and we think that children and families sometimes wait too long to have their needs met.

Data

- Sec.47 enquiries have reduced slightly but remain an area of focus. In 2019/20 the rate for S47s per 10k was 413 which is significantly higher than SN at 249, although our performance improved in 2020/21 to 320/10k, although again was significantly higher than SN at 260/10k and the England average of 164/10k. Our current performance in November 2021 is 215/10k against a target of 260/10k with four months of activity still to go.
- We currently have a conversion rate from S47 to ICPC of 24% against a target of 37%. Our analysis of S47's has reviewed those assessments undertaken on CIN children compared to those already CP and CLA.
- Timeliness for Child and Family Assessments completed within 45 days has significantly improved. In 2019/20, 65% of all assessments were completed within timescales. This increased to 86% in 2020/21 and put us in line with SN performance. Our current performance, as of November 2021, is 92%.
- Our performance with ICPCs has also rapidly improved from 55% in timescale in 2019/20, rising to 72% in timescale in 2020/21 against a SN average of 83%, against a current performance in November 2021 of 80%.
- Parental substance and alcohol misuse, mental health and domestic abuse issues feature notably in single assessments completed with families.

Assessments

	2019-20				2020-21				2021-22				2021-22 Q3				
	Number	Percentage	CP ⁴	LAC ⁵	Number	Percentage	CP ⁴	LAC ⁵	Number	Percentage	CP ⁴	LAC ⁵	Number	Percentage	CP ⁴	LAC ⁵	
CSE (case note) ¹	55	1.4%	7	9	65	2.1%	2	6	56	2.0%	2	7	18	1.9%	0	3	
CCE (case note) ²	58	1.4%	5	10	81	2.6%	5	7	85	3.1%	3	7	33	3.4%	1	2	
CSE (factor)	11A	145	3.6%	10	5	85	2.8%	1	7	63	2.3%	1	10	15	1.5%	0	2
CCE (factor) ³	24A	0	0.0%	0	0	26	0.8%	0	0	98	3.6%	1	13	30	3.1%	1	2
FGM (factor)	22A	8	0.2%	1	0	5	0.2%	0	0	0	0.0%	0	0	0	0.0%	0	0
Parental Alcohol Misuse (factor)	1B	737	18.2%	40	6	607	19.7%	24	18	322	11.7%	11	4	129	13.3%	6	1
Parental Substance Misuse (factor)	2B	732	18.1%	38	15	545	17.7%	33	23	366	13.3%	20	17	129	13.3%	15	6
Parental Domestic Violence (factor)	3B	1,448	35.8%	79	10	1166	37.9%	39	25	850	30.9%	30	19	301	31.0%	16	5
Parental Mental Health (factor)	4B	1,604	39.6%	66	34	1216	39.5%	45	45	933	33.9%	38	32	344	35.4%	17	16

¹CSE (case note): Child Sexual Exploitation, SERAF CSE case note prior to the date the assessment was completed

²CCE (case note): Child Criminal Exploitation, SERAF CCE case note prior to the date the assessment was completed

³CCE (factor): assessment factor new for 2021-22

⁴CP: Child Protection, on the date the assessment was completed

⁵LAC: Looked After Child, on the date the assessment was completed

What is going well

- There is a strong focus on performance across this area of the service with both managers and frontline practitioners sighted on individual and team trends. This supports good assessment timeliness.
- Additional social worker and practice manager posts were secured as part of Destination 22 to create the environment for better quality practice in this area.
- Managers have engaged in practice improvement work with our Principal Social Worker and audit training with our Head of Service for Quality Assurance.

What are we worried about?	What are we doing about it?
The service is experiencing a high level of referrals, which has impacted upon case load figures and we are monitoring this closely. This means that families can escalate in the system as work is not completed at an early stage.	As part of the Destination 22 programme, more social work and management resource is being embedded into the service, along with the launch of our Brief Intervention Teams.
We still need to achieve the levels of staff stability and capacity which will create the environment for consistently good social work.	The assessment service is a key area of focus for our Recruitment and Retention workstream.

What are we worried about?	What are we doing about it?
Assessments are not always timely or of good quality and analysis is still of a variable standard; this aligns with inconsistency of management oversight.	The Quality Assurance Unit are launching audit and reflective teams' workshops from February 2022; designed to embed a better service understanding of good practice, using our systemic practice model.
We are an outlier in terms of core safeguarding performance which tells us that there is still a high level of caution within the service and across partners regarding the local response to family's needs. This means that there is a risk that some families get a higher level of intervention than they need.	We are engaging with partners through strategic forums to build relationships and confidence in the service and the partnership response to children and families.

Safeguarding

Overview

Currently, the Protection and Court Service sits within the heart of Children's Social Care and generally receives its work from the Assessment teams; although high risk unborn babies and transfer-in conferences are referred straight into the service. This work broadly falls into three main categories:

1. Work with children who require Child in Need plans to help safeguard them and enhance their needs being met appropriately.
2. Work with children who require Child Protection Planning to promote their safety and reduce risks to them.
3. Work with children who are subject to the Public Law Outline and may require legal action to safeguard them.

Children leave this service because either planning to safeguard them has been effective and therefore they can step-down and out of statutory children's social care, or because alternative permanency has been sought for them, as parents and carers have sadly been unable to make the necessary changes to keep them safe.

In 2019 and 2021, Ofsted found services to children in need and children in need of protection to require significant improvement. Since then, challenges around recruitment, retention, and higher than average caseloads have continued to lead to staffing changes, with some children having had too many changes in social worker, which has led to some inconsistency for families.

Senior leaders in the council, and members, have recognised the need to redesign the core social worker function and permanently bolster the service with additional posts, for the service to become 'Good'. As part of the Destination 22 programme, surplus agency positions have been converted into substantive posts which will increase the number of permanent workers in the service, supported by a large and vibrant recruitment campaign in early 2022.

The service will also be clearer in its focus: Our strengthened Early Help service will be able to support a number of children who are currently managed by the safeguarding teams and offer a more robust and intensive plan of support. Children with disabilities that do not reach our current thresholds in the Jigsaw team will transfer over, as we have agreed additional resources and we know their needs will be better met within this service.

The emerging Young People's Service (which includes the Specialist Assessment, Youth Offending and Missing, Exploited and Trafficked Teams), will work with a significant number of young people currently in the Protection and Court Teams, as their safety relates predominantly to Contextual Safeguarding and non-familial risks and the Assessment service, once it becomes the Brief Intervention Team, will also retain shorter term work. This will ensure that the new Family Safeguarding Teams will only work with those children and families that fit into its remit and will allow for greater focus and higher quality intervention. The new teams will also work to a locality model aligned with their counterparts in Early Help.

Our assessment of current practice is that there is a high level of inconsistency regarding the standard of social work: through our own quality assurance we have identified individual examples of child-focused, meaningful social work that brings about positive change. But there is still too much instability within the service and our practice framework has not yet had a significant impact. There is much more work for us to do in order to achieve consistently good outcomes for children and families.

Data

- Caseloads are reducing and are currently at an average of 22 per worker in the Looked after Children service and 21 in our Protection and Court Teams (January 2022; but remain higher than the target of 18 in protection and court).
- Numbers of children subject to Child Protection Planning remain high. In November 2019, 464 children were subject to CP Planning and in November 2021 there were 413: increasing to 456 in January 2022. Southampton was lower than SNs at 31 March 2021 with 60/10k against SN with 66/10k.
- Drift and delay are evident in CIN and CPP interventions. For our children in need, in November 2021, 42% compared with 46% of plans had been open for >12 months in Nov 20 (34% in 2019) and 27% had been open for >24 months (22% in 2019). For child protection plans, 0% had been open for >2 years compared to 5% in Nov 20 (2% in 2019).
- CAFCASS performance data shows that care duration has increased overall across the country since the pandemic. Pre-Covid, family court area performance was 25-26 weeks. Our family court area's performance is currently 31 weeks; however, the whole service area is second best performing area in the country. Southampton's performance in terms of care duration is two weeks higher than the area as a whole, at 33 weeks.
- We continue to participate consistently in local Prevent arrangements. Between April and December 2021 there were two children referred to our Channel Panel. Similar numbers were evident in 2019/20 and 2020/21.
- In November 2021 95% of children were seen in 15 WDs compared to 79% in Nov 2019. In October 2020 this had improved to 85%.
- There were 594 crimes in Southampton during 2020/21 that involved the use of a bladed implement, an 8% decline compared to the previous year. Despite this decline, Southampton still has the highest rate of crimes involving a bladed implement across Hampshire districts, with the Southampton rate significantly higher than all other areas except Portsmouth. Southampton accounted for 25% of crimes involving a bladed implement across Hampshire Constabulary in 2020/21. The profile of offenders for crimes involving a bladed implement continues to be skewed towards males and younger age groups, highlighting the importance of early intervention and work of the Violence Reduction Unit.

What is going well

- There is a core compliment of dedicated and hardworking managers and staff who want the service to improve. The majority of staff in the service are highly committed to the children they work with and have continued to visit and support the most vulnerable children in the City during the pandemic and go above and beyond their contracted hours to support children and families.
- The service has secure additional social worker and manager posts through the Destination 22 programme. This has meant that some colleagues who were resistant to change have left the service.
- We have introduced additional Practice Managers to enable a closer focus on management oversight.

- There have been ongoing meetings with CAFCASS to focus on areas of improvement with Court related activity.
- We are using senior social workers to support less experienced workers to manage more challenging casework.
- Caseload size had started to gradually reduce (although this is not to a level that supports excellent practice to flourish at present and numbers have recently plateaued meaning continued challenge).

What are we worried about?	What are we doing about it?
<p>The duration of Child Protection Plans and Child in Need Plans is often too long and needs to reduce through more targeted intervention.</p> <p>Some children remain in Child Protection Planning for too long prior to escalation into the pre-proceedings phase of the Public Law Outline, and in this regard, planning needs to be SMARTer.</p>	<p>Service leads are monitoring planning timeliness as a priority area.</p> <p>Our Partner in Practice has undertaken a comprehensive audit of CIN activity which will inform work across the service to support SMARTer planning.</p>
<p>Assessment and intervention within the pre-proceedings phase of the Public Law outline is too long for some children and this needs to reduce.</p>	<p>Our DfE advisor is helping us review the Terms of Reference for our Legal Planning Meeting.</p>
<p>The service can be too reactive rather than proactive; this culture needs to change as caseloads and staff churn reduces. A stronger culture to support the wellbeing of staff and is needed.</p>	<p>We are introducing reflective sessions from March 2022 as part of team meetings and managers meetings.</p> <p>We are bringing our Family Group Conferencing service in house and embedding it as a core component of our offer to families.</p>
<p>Staff in this area of the service have felt too stretched at times to engage in activity which supports their continuous professional development and time to be able to reflect on practice.</p>	<p>There is a clear plan to add additional management capacity to the service in 2022 through substantive Practice Manager roles in each team. This will enable greater management oversight on casework and support supervision activity.</p>
<p>Recruitment and retention remain a challenge for the service and this at times creates disruption for children and families due to changes in worker.</p> <p>Caseloads need to reduce across the service in order to create the environment for high quality social work to flourish.</p>	<p>The service has recruited 29 South African social workers; alongside increasing the number of Step Up, Frontline and apprenticeship roles across the service. A new senior social worker post has been created.</p>
<p>Lack of capacity and turnover means that some children's records have delays in recording and lack full chronologies which is not acceptable in terms of tracking a child's journey effectively.</p>	<p>Our <i>Making the Difference</i> Practice Framework which spans children's services has been co-produced with workers across the service to focus on systemic practice and restorative behaviours.</p> <p>Our Practice Standards will support better practice in the core areas of service delivery and will drive continuous professional development as a core requirement for all staff.</p>

What are we worried about?	What are we doing about it?
<p>Social Workers and managers need greater time for reflective sessions and training that supports the development of excellent practice.</p>	<p>As part of our workforce academy development, we have introduced a mandatory five days' training for all child-facing Children and Learning staff, with a core focus on the importance on protecting time for reflection and continuous professional development.</p>
<p>There needs to be further improvements in the timeliness and standards of evidence that is produced for Court, with a reduction of drift in some cases that are in pre-proceedings.</p> <p>When children enter care, there needs to be more focussed activity on supporting their early care journey so that they can better make sense of what is happening to them.</p>	<p>We have deployed a manager specifically to gatekeep Court work and we have launched Alternatives to Care and Exceptional Arrangements Panels to support children at risk of entering care, reunification with families and placement with parents.</p>
<p>We know that young people who are subject to contextual safeguarding issues (CSE, CCE, gangs and radicalisation) at times require a more dedicated focus to improve their circumstances and outcomes.</p> <p>Work with children who are in need by virtue of lower-level disability issues needs to improve so that their needs have a similar focus to children in need of protection.</p>	<p>We have begun to recruit into our Young People's Service and the new Head of Service is leading on the formal launch in April 2022, preceded by a multi-agency contextual safeguarding learning event.</p> <p>Increased capacity in the Early Help Services is being built to include some social work posts, to ensure that families can step down to the right level of support, and that partners can be confident in ending CP/CIN planning. In addition, the interface between Early Help and the Jigsaw service is being strengthened.</p>
<p>There is a need to improve collective safeguarding practice to get better outcomes for children.</p>	<p>We have begun to work more closely with our IDVA service, delivering a domestic abuse themed practice week and launching joint consultation sessions.</p> <p>The safeguarding service is moving to a locality-based model in order to enhance relationships with key stakeholders and communities.</p> <p>We are launching our revised Neglect Strategy and Toolkit in our March 2022 practice week.</p> <p>We are developing a business case to engage partners around a Family Safeguarding Model.</p>
<p>Audit activity undertaken by our Partner in Practice shows that our work with Children in Need needs to improve.</p>	<p>New Head of Service will develop a service improvement plan by 1 March 2022. We will share the audit findings with the service in Feb 2022, with a focus on SMART planning, parental involvement and multi-agency engagement – Feb 2022.</p> <p>PSW engagement with new Practice Managers on analytical/thoughtful supervision.</p> <p>We will review supervision templates across the service to ensure they are fit for purpose.</p> <p>We will ensure the learning feed into the development of our Family Safeguarding Model of practice.</p>

What are we worried about?	What are we doing about it?
We are concerned by the very high numbers of women having children removed from their care in Southampton (190 Southampton mothers have had children removed in last two year as evidenced by PARIS data reports).	We have launched a joint-funded Phoenix@Pause in Southampton 18-month project, anticipating a 58% (14 women) reduction in pregnancies amongst more vulnerable. 49 women have been engaged to date. The Southampton FDAC offer shows 40%+ children re-unified with birth parents.
We were concerned that not enough children were been supported to get their views across at Child protection Conferences.	We brought extra staffing resource into the Child Protection Conference Team, replacing session Child Protection Champions with a full time, permanent posts.

Children with Disabilities and Children and Adolescents with Mental Health Needs

Overview

Children with disabilities and children and adolescents with mental health needs will benefit from the 2021 review of the Special Educational Needs and Disabilities and Emotional and Mental Health Wellbeing Strategic plans.

Local CAMHS priorities are defined as:

- Supporting professionals working with children and young people to have a shared understanding of positive emotional wellbeing and mental health in their work.
- Ensuring children and young people have access to a range of early interventions to support their emotional wellbeing and mental health needs which will prevent difficulties escalating and requiring specialist mental health services.
- Ensuring a clear needs-led model of support for children and young people which will provide access to the right help at the right time through all stages of their emotional and mental health development
- Improve equalities in access, experience and outcomes for groups faring worse than others or more at risk of poor mental health by more targeted interventions.

The Jigsaw team, which is a specialist integrated service for children with complex disabilities commissioned by Southampton City Council and Southampton City Clinical Commissioning Group sits within the SEND service. Historically, the service worked with children with Moderate, Severe and Profound Learning Disabilities and a complex health condition (which may be Autism and behaviour that indicates distress), children with complex health conditions that require packages of care under children’s continuing care arrangements and children with dual sensory impairments. Its remit has recently been expanded (and additional resources allocated) to meet lower-level disability needs.

Our assessment of current practice is that service access is not yet good: there is a significant focus within our improvement plans on children’s mental health outcomes and the service offer for children with disabilities.

Data

CAMHS Activity: 2020/21

- 2,670 (55%) individual children and young people aged 0-18 received treatment by NHS funded community services: this was significantly above the 35% national target.
- 1,623 CAMHS referrals received, compared to 1,568 the previous year: a 4% increase. However, it should be noted that referral numbers were very low during the start of COVID and during the closure of schools.
- 87 Eating Disorder cases compared with 45 the previous year: a 93% increase.
- 177 Southampton children and young people seen via the CAMHS Community Crisis Care pathway.

Children with Disabilities

- 13% (268 children) completed assessment children had a disability.

- 10% (82 children) completed S47's children had a disability.
- 20% (436 children) open as DfE definition of CIN (assessment/CIN/CP/CLA) have a disability.
- 7% (34 children) open CPP have a disability.
- 15% (82 children) open as CLA have a disability.
- 18% (35 young people) open as care leavers have a disability.

What is going well

- Regarding mental health treatment, Southampton had the highest access out of the eight former HIOW CCCs.
- Local CAMHS have secured funding to support service development, using the I: Thrive Model.
- We have invested in our Jigsaw service, as we move to a need-led rather than a threshold led service.
- The Jigsaw service is multi-disciplinary and has a proven record of good partnership working.
- There is a strong and well-established SEND Partnership Board.
- Co-production is at the heart of the service, with well-established children and parent participation networks.

What are we worried about?	What are we doing about it?
CAMHS waiting times have increased, which means that children are waiting too long for treatment.	Senior leaders are focused on children and adolescent mental health as a strategic priority. We are using the I: Thrive model to look at improvements in mental health responses across the system.
Our assessment is that access to services for children with special educational needs and disabilities still needs to improve.	We are strengthening the relationship between early help and SEND through the Destination 22 programme.
We need to increase staff awareness of DOLS requirements and prepare for LPS.	A task and finish group are working to respond to the service policy, process, and training needs.
We are concerned about Children with Disability (CWD) transitions to adulthood so that the families are appropriately supported by the right adult services.	We are developing a clear transition pathway & procedures plus Transitions Workshops with relevant stakeholders established to improve processes, resources, and outcomes – from March 2021.

The experiences and progress of children in care and care leavers

Care Leavers and in Care Service

Overview

The Looked after Children team works with children in the long-term care of the authority up until they are 16 years old. The team works to establish trusting relationships with the children in order to gain their wishes and feelings so that their voice is heard in their future planning. The team priorities are for the children to be in stable placements, to be achieving academically, to have consistent contact with significant others that is right for them, for them to have support with their past traumas and to understand their journey in to and through care, so that they can move into the Pathways Team with stability and full of aspirations for the future. Where appropriate, the team aims to reunite children with their birth families.

The Care Leavers Team is a mixed team of Social Workers and Personal Advisors that works our care leavers. The team also works with care experienced adults up to the age of 25 years old. The team plans for both permanence within care, independence planning and children returning to families. They regularly assess all young people's needs, work within the court environment, safeguarding and family arrangements.

Our assessment of current practice is that there is a high level of inconsistency regarding the standard of social work: again, through our own quality assurance we have identified individual examples of thoughtful, caring social work with our looked after children that supports timely permanence arrangements. Similarly, we

can show examples of effective, practical help and assistance for our care leavers. We can also see improved quality assurance, participation, and corporate parenting outcomes. However, we are clear that overall, our standards of practice need to improve significantly to match our ambition and our action plans clearly reflect this.

Data

- Numbers of looked after children have increased in Nov 2021 to 539 from 510 in November 2019 and 503 in November 2020. Consequently, the CLA rate per 10,000 has increased to 105/10k (SN average is 100).
- In November 2021 we had 188 care leavers (a reduction from 190 in November 2019). We have 57 care leavers aged between 21 and 25 in contact with the service.
- In 2020 / 21 there were 111 alerts raised by Independent Reviewing Officers, in comparison to 163 in 2019 / 20. However, it is likely that the pandemic had an impact. There have been 113 alerts in the first two quarters of 2021 / 22. IROs are now maintaining a collection of examples of alerts and their impact.
- There is a reducing trend of CLA missing: 10% CLA in Nov 2021 from 13% in November 2019, 10% in November 2020 (SN 12%).
- There has been a reduction in timeliness of health assessments 71% in Nov 21 (81% completion in the past 12m Nov 20) and dental checks have dropped significantly during the pandemic currently we have 41% in timescale Nov 21 (73% completion in the past 12m Nov 20). Southampton continues to perform at a lower rate than statistical neighbours.
- Based on November 2021 data, there has not been significant change in the regularity of CLA reviews (95% completed in the past six months).
- 83% of care leavers 17-18 were in touch compared to 98% of 19–21-year-olds with 83% of 18–19-year-olds in suitable accommodation compared with 90% of 19–21-year-olds in November 2021 (an increase from 81% in November 2019).
- EET performance has declined for the 19 – 21 years cohort since last inspection (26%; SN average 45%) but has improved by 1% for the 17 – 18 years cohort (54% Nov 21; SN average not available).

What is going well

- A clear strategic direction has been set through the new Children and Young People Strategy and Corporate Parenting Strategic Plan. There is solid cross-party understanding of corporate parenting responsibilities and a shared desire to discharge them effectively.
- The profile of looked after children is high; championed through our 'Love our Children Week'. There are clear corporate commitments to our children.
- The service has invested in participation activity, bringing additional staffing resources into the service to coordinate and develop the involvement of our looked after children and care leavers in the design of our service, aligned with wider service and corporate participation objectives. The service improvement activity considers feedback from our Children in Care Council, Southampton Voices Unite.
- The service has recruited a fixed term, care-experienced sector leader to support the development of our local offer to care leavers and to provide us with greater insights into how we can offer practical support care leavers, responding to areas of risk and vulnerability.
- There is a clear understanding of service performance and levels of compliance, managed through the assurance clinics. Panels, chaired by Heads of Service, focus attention on alternatives to care, placement with parents and connected carers.
- Additional staffing resource has been secured for the team, including practice managers, social workers, personal advisors, and a mental health worker. Our Intervention and Complex Assessment (formerly Edge of Care) service has been retained within the Destination 22 service redesigned and more effectively aligned with our Brief Intervention Offer. We are launching an Alternatives to Care Panel to support better oversight of families at risk of breakdown.
- The Deputy Director is leading a project group from across the service, to deliver on a Placement Action Plan, which has three high level objectives: 1. Prevention of care and return home from care; 2. Substantially reduce the number of children in residential provision, by improving the sufficiency of in-house placements and increasing our access to IFA placements 3. Promote stability and better outcomes

for children by reducing placement moves and placement breakdowns. This work is complex and time consuming, but necessary, to ensure the right permanence plan for each child and to ensure that the service is financially sustainable.

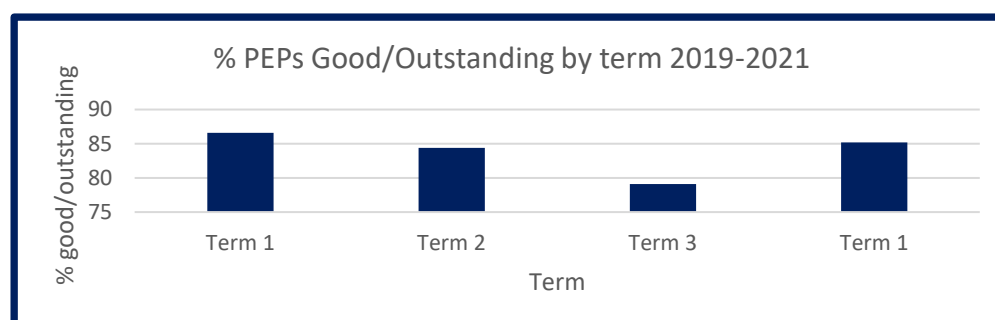
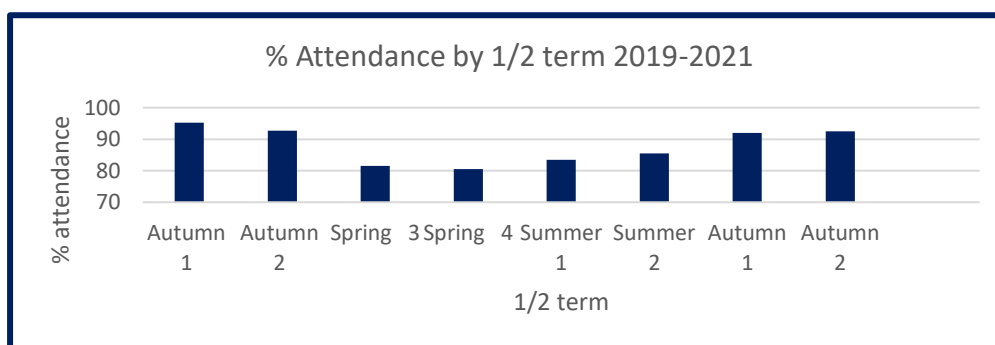
- Strengths based writing to/for the child is well established and gets positive feedback from arrange of sources.
- We dedicate time to show our looked after children and care leavers that we love and care for them: through education celebrations, 'Love our Children' week, our Christmas Day event, and our football club.
- Looked after Children reviews are held in a timely manner (91% held on time in 2020 / 21 and 95% on time in Q3 2021 / 22) and children are updated in child friendly language.
- We have increased our investment in advocacy and independent visiting services for our young people.

What are we worried about?	What are we doing about it?
We need to stabilise our staffing arrangements, especially in respect of management teams.	Staffing requirements have been submitted and agreed as part of overall service business case.
The level of direct contact with looked after children needs to improve.	We have direct contact and visiting timeliness as assurance clinic priorities
Too many of our children are accommodated in residential provision, out of area.	We are purchasing three residential homes in Southampton to bring more children closer to home. We are reviewing the care plans of children in residential placements to look at their longer-term needs and appropriate foster care and reunification planning.
Caseloads remain too high which limits opportunities for SW to do core pieces of work; including life story work.	Additional SW and management capacity in the service have been created and four personal advisor vacancies have recently been recruited to.
Placement sufficiency and stability issues impact upon the quality of placement for some of our children.	A Corporate Parenting workstream is beginning to address some sufficiency issues, fostering campaign has been launched.
On some occasions, children are not transferred from the Protection and Court service to the Looked after Children and Pathways Service in a timely way. This is at times due to capacity to ensure that children's cases are transfer ready and also at points due to capacity challenges in the receiving teams.	We are working to reduce caseloads in the Protection and Court Team so that the quality of work improves. We are developing a needs-led transfer document as part of the Destination 22 service redesign.
The quality of our assessments in Court needs to improve.	We have allocated a manager with the specific responsibility of driving up the quality of court work.
There can be slow progress in formalising permanence arrangements and long-term matching for children.	The service manager for fostering and adoption has responsibility for chairing the service permanence panel, which sits with the Lead IRO, team managers and social workers in attendance.
The needs of our care experienced adults are not being well met in contracted supported housing, increased use of 16+ provisions being commissioned as a result.	A new tendering process is underway for review of supported housing provisions, we are represented in that to influence outcomes. Tendering will be completed in 2022.

What are we worried about?	What are we doing about it?
There is a lack of suitable pathways for 16- and 17-year-olds coming into care.	We have recently worked with Housing to review our 16 / 17 years homelessness protocol.
We need a better strategic response to EET to achieve real progress.	We have launched a new NEET panel, chaired by the Head of Service for CLIC. We have started cross-service work to improve NEET outcomes through our Managers of Teams and Services (MOTAS) group.
We need to maintain our focus on health outcomes; including health passports for care leavers.	Our performance manager is working with Solent NHS Trust to ensure that we receive good health data. We are embedding mental health support within the Care Leaver's Service structure.
Our Children in Care Council, Southampton Voices Unite have identified a range of service improvements for the service to work on.	We report regularly to Southampton Voices Unite and to the Corporate Parenting Committee on progress. We have created two participation apprenticeships for care leavers.

Virtual School

Attendance data



What is going well

- KS1 and KS2 attainment, although not externally validated is on an upward trajectory.
- At KS4 we have seen the following increases:
 - 5% increase in 9-4 in English measure
 - 8.4% increase in 9-4 Maths measure
 - 1.0% increase in 9-5 English and Maths measure
- We continue to support and promote good attendance at school and offer support and advice for alternative provision, blended learning and transport costs.
- PEP completion and quality remains a priority as we believe that this is the key driver for support for our children in schools, we quality assure each and every PEP to ensure that we believe they identify fit for

purpose interventions that will raise attainment, promote high aspirations and opportunities for enrichment and provide emotional health and wellbeing support for our children.

We have maintained activity that we believe provides children with additional learning experiences, including ongoing letterbox and Dolly Parton Imagination Library (DPIL) book and activity distribution. We have maintained our Music Project virtually and now participation has moved into the virtual school we have an increased capacity to provide more activity to a refreshed and reinvigorated child in care council (now known as Southampton Voices Unite). This is complemented and supported with the corporate parent consultant Jenny Molloy. 2021 saw Love Our Children Week, a residential activity for our children and Christmas Day celebrations with our care leavers.

- Virtual training continues to be a strength in our delivery model – schools, foster carers. social workers especially can tap into our training wherever they are in the country. We have not had to cancel events due to C19 restrictions. In Term 1 of 2021 we also launched our Aspiring Designated Teacher online training, with the aim of increasing understanding of the role and providing additional support to those new to the role.
- We continue to promote the national tutoring programme to support lost learning and provide enhanced financial support if needed. We have run a number of virtual school challenges around climate change, anti-bullying, and post 16 preparation.
- Our Universities are working collaboratively with us to raise aspirations and promote participation and we have a menu of activities in place from Solent University, The University of Southampton, alongside the First Star Scholars programme at the University of Winchester.
- The Virtual School Head Teacher (VSHT) is now the chair of the South East Virtual School headteachers group.
- **Our assessment of current practice is that our Virtual School discharges its responsibilities to a consistent standard:** there is a robust focus on the education outcomes for our looked after children and the virtual head teacher benefits from and in some cases leads regional improvement activity.

What are we worried about?	What are we doing about it?
We know that there are still too many placement and school changes for our children away from Southampton especially those with complex needs (identified and non-identified).	Enhanced training and support to schools to enable a rapid return to education for our children if a placement move is unavoidable. The VSHT, as chair of SE region has asked the DfE to consider a review of the belongings regulations to avoid drift and delay for our children who are going through the EHC assessment route The VSHT sits on high-cost placement panel to advise on educational implications of any change in care placements. In addition, the placements team will signpost social workers back to VS when any change is being explored.
	The VSHT continues to provide corporate parent and the senior team deep dive analysis around academic outcomes and placement instability. SWs and IROs actively seek advice of VS to mitigate against school and care placement change.
We are focusing on supporting the emotional wellbeing of our looked after children. We are also seeing an increase in anxiety around the full return to school for all children.	We are providing an enhanced educational psychology offer and attachment aware interventions and emotionally based school avoidance. The virtual school has an attached educational psychologist (EP) 2.5 days per week and from this we provide fortnightly bookable consultations and bespoke whole school training using The Alex Timpson Attachment and Trauma Programme. We have also commissioned additional EP support for our enhanced remit for CIN/CP.

What are we worried about?	What are we doing about it?
<p>We need to focus on specific groups of children.</p> <p>Children in need and those on Child protection (CIN and CP) <i>(Since September 2021 the virtual school remit has expanded to provide an advisory service for CIN and CP)</i></p> <p>Previously Looked After</p> <p>Unaccompanied Asylum Minors (UAM)</p>	<p>The Virtual school employs an officer specifically to support CIN and CP cases and we have developed our enhanced offer for this cohort to include additional education welfare advice, additional Educational psychology, and additional education opportunities, with the aim of improving attendance and attainment, alongside reduction in exclusion for this cohort.</p> <p>The Virtual school employs an officer specifically to support previously looked after children.</p> <p>The VS works alongside social worker and other LAs to ensure education is in place for UAM once they arrive in the country. We have commissioned EAL online learning and other packages of support for UAM. The LA has also welcomed Afghan refugees, this will complement the support on offer to our UAM.</p>
<p>Early Years</p>	<p>Early years PEPs are audited by the CLA officer and early years advisory teacher. Additional training is also on offer to our providers.</p>
<p>Leaving Care</p>	<p>Our post 16 and leaving care support includes representation on our NEET group. We use welfare calls to engage with the post-16 cohort, alongside Become letters, and aspiration events with Universities. We work with the leaving care team to ensure robust pathway planning is in place.</p>
<p>We know through DfE research that the pandemic gives us challenge in securing attainment and progress; raising attendance and monitoring provision to reduce the number of exclusions and we know that we need to place a big emphasis on supporting our children to settle back into fulltime learning, especially as we still have periods of home learning due to C19 restrictions.</p>	<p>We have maintained our PEP tracker; with a weekly audit of PEPs by CLA officer and VSHT to ensure firstly compliance and then quality. From this, we are providing enhanced training and support to schools.</p>
<p>We are focused on the training and professional development of staff and providers.</p>	<p>Our VSHT chairs the south east VSHT forum. Multi working enables nationwide participation and access to a range of specialist support which is financially viable. This also enables us to have a national voice to shape support and inform national policy for our children and young people.</p> <p>We continue to offer a diverse menu of training to our key stakeholders: schools (DTs, DSLs, governors) social care colleagues and carers. We remain able to be adaptable and responsive to request for specific support (e.g., Foetal alcohol syndrome, emotionally based school avoidance).</p>
<p>Our post 16 young people continue to need support as they transition into adulthood.</p>	<p>Our post 16 support activity includes representation on our NEET group and high-cost placement panel. We use welfare calls to engage with the post-16 cohort, alongside Become letters, and aspiration events with Universities.</p> <p>For care leavers who are 18+ an additional working group will inform deeper dive support on an individual level.</p>

Fostering and Adoption

Overview

Southampton Fostering Service provides foster families for our children. At any one time we have around 180 foster carers. The team recruits and assesses people who want to be foster carers and provides support and supervision to our existing foster carers. Sometimes these will be people known to the child. The service also works with social work teams to assess whether a person known to a child can offer them a long-term home through other arrangements such as Special Guardianship. Where families arrange for private fostering arrangements, the service is responsible for assessing, supervising, and supporting these to ensure the safeguarding and well-being of the child.

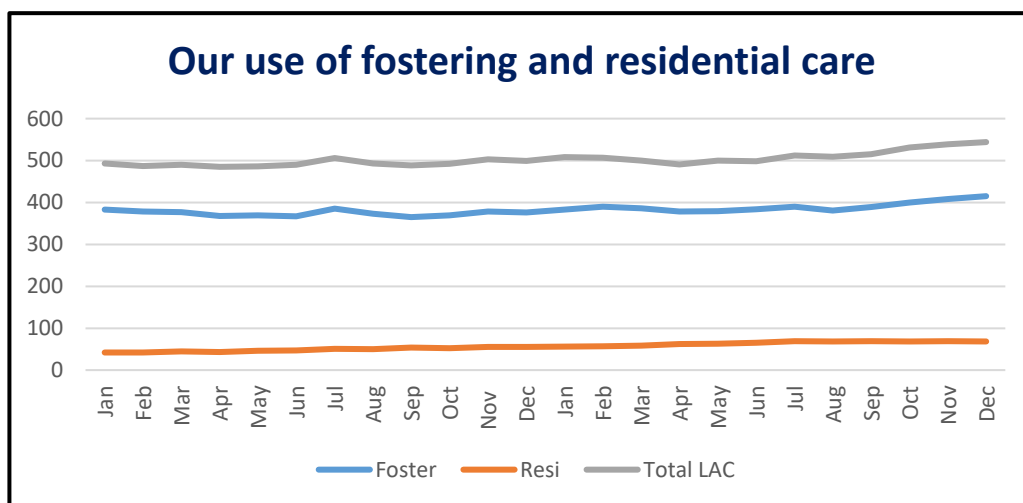
The Placement Service works with social work teams to help find children an alternative home where they are unable to live at home. This could be a foster family, a children's home, or supportive accommodation. If we cannot find one of our own foster families to look after a child, we will turn to the independent providers.

The Adoption Team is now part of the Regional Adoption Agency; Adopt South. This is made up of four Local Authorities - Southampton, Portsmouth, Hampshire, and the IOW. Adopt South are responsible for recruiting and assessing prospective adopters, family finding for Local Authority Children with permanency plans of adoption and adoption support for adoptive families. The Adoption Team co-works with the PACT team where children have a parallel care plan of adoption. Where a child's proposed permanence plan is adoption the Adoption Team are responsible for presenting a case to the agency decision maker. The Adoption Team are responsible for identifying and matching a child to an adoptive family should their plan of adoption be endorsed by the courts.

Our assessment of current practice is that the standard of social work is still not consistently good: we can evidence consistently good adoption performance. However, the quality of our fostering social work practice is still not consistent and has required focus through our Destination 22 improvement programme.

Data

- As of 31/12/21 56% of our foster placements were with in-house carers. Research undertaken by the South East Sector Led Improvement Programme (SESLIP) identified that the majority of LAs place between 50-60% in-house.



- From August 2021 onwards, there is an upward trend in our looked after population this is matched by an upward trend in our use of external provision; namely IFAs.

- As of 31/12/21 one child was placed in an unregistered children's home, with senior management oversight.
- In terms of location, as of 31/12/21 at least 45% of placements were within the city boundaries. This is below the national average of 55% (as of 31/3/20). The geography of the city does impact on the availability of local placements, being a small waterfront city. However, 69% were within 20 miles of the city boundaries which is consistent with the national average.
- We are projecting 10-12 new fostering households by the end of March 2022. This would be a decrease in the 14 approved last year.
- As of December 2021, 28 children were adopted in the past 12 months; 44 were waiting to be adopted and four had had the decision to adopt reversed. The time period between entering care and being adopted shows an improving trend (532 days, compared with 604 days (2018 data)).

What is going well

- Most children living outside of their family and friends' network are placed with registered providers or suitable post 16 supportive accommodation.
- 162 fostering enquiries have been received to date: 14% increase compared to this time last year. Four new fostering households have been approved; eight Households in the assessment pipeline; specialist fostering scheme has 3 potential carers.
- We are building our social media presence and developing digital marketing strategies to support more effective recruitment.
- We have developed a 'fostering friendly' initiative with local businesses and organisations. Our target is to target and offer to mentor five organisations by March 2022.
- We are launching a local Mockingbird project in January 2022.
- We are securing resources to improve our 'pipeline management' from enquiries to assessment by February 2022.
- We will recruit into a vacant assessing social worker post by February 2022.
- Our Placements Team quality check referrals to ensure they are detailed with Children's needs and for clear outcomes to be achieved; carefully match children to appropriate placements and continue to review all high-cost placements leading to a reduction in costs on some placement/packages.
- Looked after Children notifications are effectively managed by the nominated officer.
- The South East Central placement commissioning framework is working well and bringing more residential and post 16 providers on board, increasing placement choice.
- Performance data is now more comprehensively recorded, monitored, and analysed to inform the improvement journey.
- Foster carers are mostly well supported by supervising social workers and the training offered is well received Breadth of training has been developed to cover contextual safeguarding and Prevent.
- Our permanence policy is in place which outlines clear pathways for long-term matching. The fostering panel remit has been expanded to include consideration of matching to provide an additional layer of oversight and scrutiny.
- An increasing number of children are living with their long-term carers.
- Staff, teams, and services have transitioned into Adopt South as planned.
- Local adoptive families have been found for our children, including those with complex needs, older children, and sibling groups – with less reliance on interagency placements.
- More children have achieved early permanence through 'Foster to Adopt'.

What are we worried about?	What are we doing about it?
Our annual fostering audit has identified that improvements are required in respect of timeliness of ADM decision making, compliance with some statutory requirements, fostering review data and staff morale.	The learning from the audit has fed into the service delivery plan and the next stage of the Destination 22 programme
There is limited provision of same day and out of hours placements.	We have reviewed the of out of hours in house placement provision – increase the foster carers on the EDT list. We are working with IFA providers to identify emergency provision across the commissioned framework.
Sufficiency of placements for older children and those with complex needs.	We are recruiting carers to the specialist foster care scheme We are reviewing referrals for long term/step down foster placement with social work on a monthly basis.
Recruiting in-house foster carers remains a challenge in the current 'market' because of competition from local authorities, independent agencies, and HE/language schools.	Six-month review of the recruitment strategy presented to senior management team and Corporate Parenting Board - brand refresh, updated marketing materials and a new 'digital' approach to marketing.
A lack of local accommodation and supported housing for Post 16 years and care leavers.	We are contributing to the re-tender of the Post 16 supportive accommodation and the vulnerable peoples housing framework; this will be completed by 2022.
The placement team do not have the capacity to undertake monitoring visits for those providers not on the SE Central Framework.	Service structure and capacity is being reviewed in the next stage of Destination 22.
Staff sickness, long-term absence in the fostering team and delays in recruitment have seen caseloads increase and capacity reduce at peak times during the year.	Continue to make use of agency staff to cover vacancies/absences and seek additional staff resources to meet demand. Service structure and capacity is being reviewed in the next stage of Destination 22.
We need to maintain progress made in ensuring children receive a timely life story.	We are converting the adoption support worker post to a permanent position.
We are concerned that too many of our children experience multiple placement breakdowns.	We have commissioned a thematic stability audit to review the experiences of these children. Learning will feed into our improvement planning.
Promoting and identifying the need for early permanence planning within the service – adoption being identified earlier as a contingency or parallel plan – requires renewed focus.	Early permanence is being considered at legal planning meetings, adoption social workers now invited to the second review, adoption social worker now leading on obtaining the 'best interests' decision, tracking the adoption journey via the permanence panel.
Promotion of private fostering notification stalled during the pandemic.	<p>We will revisit private fostering awareness once language schools reopen – timescales dependent of pandemic.</p> <p>Private fostering will be included in a practice bulletin to increase staff awareness.</p> <p>We undertake a private fostering audit as part of the new schedule.</p>

What are we worried about?	What are we doing about it?
We need to address the number of deferrals/rescinds of plans of adoption, by ensuring that the correct permanency plan is determined earlier.	Formulating a robust permanence plan within the timescales of care proceedings (Adoption and SGO). Adoption ATM and agency advisor now attending PACT managements meetings to discuss cases.

Education and Early Years

Overview

The Education and Early Years' Service comprises of Early Years and Childcare, School Improvement, School Place Planning and Post-16, Special Educational Needs and Disabilities, Language Intervention Team, Inclusion Services, Virtual School, School Admissions and Educational Psychology services. Over 2021 the Education and Early Years' service have worked closely with schools, early years and childcare settings, Early Help, Education Welfare and Social Care services to respond to the pandemic and to address learning arising from serious case review activity.

We remain focused on key areas of practice for vulnerable children and young people: notably, access to the two years early help offer, the interface between safeguarding and SEND services, NEET outcomes for vulnerable young people, children missing education and electively homed educated children.

Data

Early Years

- 68 Nursery Education Funding (NEF) audits completed to date. Audit visits were halted as a result of Covid restrictions but are scheduled to re-commence this term.
- To date 88 Healthy Early Years Awards has been successfully completed by settings throughout Southampton, they are broken down as follows:
 - 60 Bronze Awards
 - 26 Silver Awards
 - 2 Gold Awards
- 100% of Looked After 3- and 4-year-olds not on adoption pathway are registered to attend funded early education (July 2021).
- 4,074 Children aged 0-5 attended early years and childcare in the week of 4th February 2021 (Spring Term) with 4633 attending 22nd July 2021 (Summer Term) and 3761 on 11th November 2021 (Autumn Term).
- 64% of eligible 2-year-olds are registered to attend an early-years setting (July 2021). This is above the National average of 62% and we are ranked 9th out of 11 when compared to our statistical neighbours and 13th out of 19 within our region.

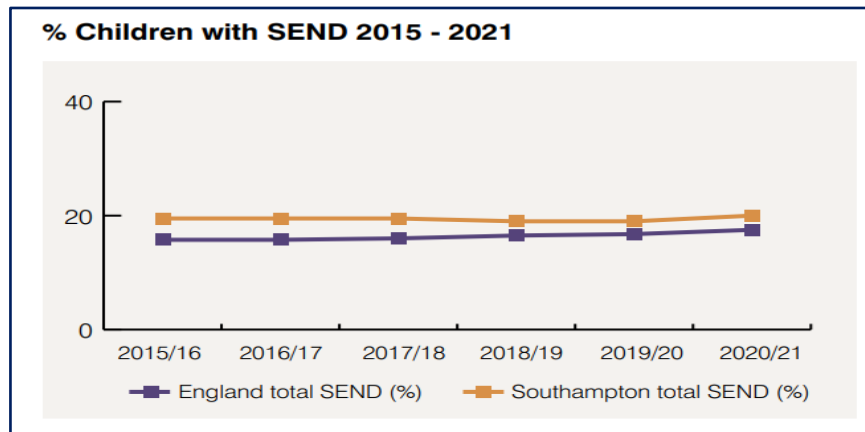
Absence

- Southampton Primary Overall Absence Autumn/Spring Term 2020/21: 3.5% (National: 3.3%).
- Southampton Primary Persistent Absence Autumn/Spring Term 2020/21: 9.0% (National: 8.1%).
- Southampton Secondary Overall Absence Autumn/Spring 2020/21: 6.3% (National: 4.6 %).
- Southampton Secondary Persistent Absence Autumn/Spring Term 2020/21: 16.7% (National:11.7%).
- Southampton Special Overall Absence Autumn/Spring Term 2020/21: 16% (National: 17.2%).
- Southampton Special Persistent Absence Autumn/Spring Term 2020/21: 45.6% (National: 49.4%).
- Southampton's Special OA achieved a National rank of 63rd out of 148 Local Authorities making Southampton's performance 1.2% below the National average.
- Southampton's Special PA achieved a National rank of 63rd out of 148 Local Authorities making Southampton's performance 3.8% below the National average.

Elective Home Education

- In January 2022, electively home educated pupils make up 1.23% of the local school population. 100% of electively home educated pupils with children in need and child protection plans have an allocated EHE officer and have had engagement within the first four weeks.

Special Educational Needs and Disabilities



- Whilst the number of children with SEND has been fairly constant over the last six years with a slight increase in 2020/21, the number of children with an EHCP has been significantly increasing each year since the SEND Reforms of 2014 and since 2016/17 has been consistently higher than the England average. In contrast the number of children on SEND support has been steadily reducing as schools become increasingly skilled at managing children's need.
- 100% of Education Health and Care Plans completed on time.

Southampton Participation, NEET and Unknown (Dec 2020 – Feb 2021)

- The combined NEET and unknown data is based on Southampton residents only in the academic year groups 12 and 13 (academic age 16 and 17).
- The cohort is approximately 4500 young people.
- The percentage of those participating in EET (Education, Employment and Training) is 90% (4050).
- The combined NEET/Unknown percentage for 2021 was 7.6% (DfE published data as an average of the months Dec, Jan, and Feb).
- NEET = 4.4% (average of 196 young people).
- Unknowns = 3.2% (average of 136 young people).
- Looked after = 44 of which 9 were NEET in Feb 2021.
- Care Leavers = 1 who was NEET in Feb 2021.
- SEND (EHCP) aged 16-17 = 158 of which 17 were NEET in Feb 21.
- 12 of the NEET young people in February 2021 were working with the Youth Offending Service at the time.

What is going well

- We have participated in a virtual Local Government Association (LGA) peer review of early years through the lens of speech, language, and communication (SLC). This has led to a new Early Years Strategic Plan.
- We have also participated in virtual LGA action learning sets and training around early years transitions.
- We have undertaken audits of Nursery Education Funding; including an overview of Early Years Pupil Premium, Inclusion Support Fund and Disability Access Fund.
- We reviewed our 'Annual shared conversation' to ensure it reflected recent Ofsted actions and feedback from Early Years Foundation Stage Profile. The ASC is a self-reflection tool used with early years providers to support their further development and has been delivered virtually when needed over the past year.
- We convened a virtual inclusion network and SEND surgeries, with Community Adolescent Mental Health Service (CAMHS) input, as part of our revised SEND pathway.

- Our fully recruited Home Education team has been working closely with families and stakeholders to ensure all EHE pupils who have been identified as within our vulnerable lists have an allocated EHE worker. The Head of Service for Education and Early Years is briefed regularly on elective home education and children missing education.
- We revised our Early Years continuous professional development (CPD) programme, to ensure that it was responsive to local need and national initiatives and that we were able to deliver it virtually.
- We delivered SENDCo Level 3 accreditation training, and 45 SENDCos in preschools and nurseries across the City had completed it by February 2021.
- We have continued to focus on Every Child a Talker (ECaT) and Boosting Language Auditory Skills and Training (BLAST).
- Our Early Years Panel is now well established, identifying needs of under 5s with SEND and planning appropriate interventions.
- We continue to focus on Child performance/employment to ensure arrangements are child friendly, lawful, and safe.
- We have returned to our normal attendance audit focus with maintained schools and academies have a consultation EWO to consult with so pupils' persistent absence, including vulnerable pupils, can be highlighted to assess potential contextual safeguarding risk and/or educational neglect. We have continued reassurance/re-engagement activity with children/young people/families from September 2021 as school attendance is mandatory again.
- We continue to offer DSL training and workshops/multi agency DSL drop ins throughout the pandemic and continued from September 2021.
- We have sustained a collaborative partnership approach to children's education through the Southampton Education Forum/Attendance and Inclusion Group/Attendance Officer Network Group.
- We have facilitated education representation and engagement in the Mental Health in Schools project enabling the Health based team to gain funding to develop coverage for almost 100% of city schools and colleges.
- We have ensured that education is represented across the SSCP and HIPS partnership work including developing a group of Designated Safeguarding lead representatives to support this work, so as to ensure connection between education and wider safeguarding work.
- We continue to work with primary schools regarding learning provision and assessment practices and have widened this to engage with the work of the SE LA Assessment lead group.
- We continue to support governing bodies with their processes for Headteacher recruitment and develop e-learning.
- We work with other agencies, such as the DFE and Ofsted, where we have concerns that require escalating, such as for suspected unregistered schools.
- We continue to support and challenge schools safeguarding practice through information updates, guidance, and reviews.
- We have strengthened partnerships with Principals of Post 16 colleges.
- We have moved the Post 16 team into Education to enable access for vulnerable groups (Pathways, Hospital School, Elective Home Education) to strengthened careers referral support. Some staff within these teams / settings have had additional training and specialist support.
- Our Individual Pathways Curriculum in mainstream schools is showing reduced absence, reduced PRU placement, better engagement, and increased participation.

What are we worried about?	What are we doing about it?
<p>The number of children with Special Education Needs and Disabilities is increasing.</p> <p>Our SEND audit findings have shown us that we need to focus on improving social care understanding of statutory responsibilities in respect of children with disabilities; accessible language in EHCPs and the effectiveness of educational psychology advice.</p>	<p>We have moved our Children with Disabilities service to sit within SEND; simultaneously increasing social worker capacity.</p> <p>We have engaged with the local SEND partnership and we are reviewing our self-evaluation and action plan. Our areas of focus, with timelines, are: a review of the local offer review of the health and social care offer Autism support; transitions arrangements; Special School re-configuration; health offer to special schools; Inclusion Charter; Early Years implementation plan; review of short breaks provision ; development of outreach offer.</p> <p>We are carrying out termly EHC audits. The Educational Psychology Service focused on developing EHC report writing skills in order for them to be more specific, timely and outcome focused.</p>
<p>The take up of our two-year-old offer is low and the referral rate to Early Help services for under 5s is lower than expected.</p>	<p>We are working with the communications team to promote the 2-year-old offer to parents and carers. We are promoting Early Help as a support for families with young children by raising awareness in early years and childcare providers.</p>
<p>Due to issue associated with the pandemic, the risk of inadequate information and academic data being shared between institutions could pose a safeguarding risk or lead to poor student progress.</p>	<p>Enhanced transition information and data sharing and protocols have been implemented at KS2-3 and KS4-5. This has started to address the plateauing of student's progress at transition points and ensured personal and safeguarding information is passed between institutions.</p>
<p>Concerns that the Y12 and Y13 NEET cohort will continue to rise post pandemic.</p>	<p>The local authority has benefitted from £200k to support NEET prevention initiatives.</p>
<p>We remain focused on pupil attendance and unauthorised absence, including the Pupil Referral Unit (PRU).</p> <p>Southampton's PRU OA (Autumn/Spring 2020/21) 50.7%: Gap of 17.9% compared to the National average of 32.8%.</p> <p>Southampton's PRU PA (Autumn /Spring Term 2020/21) was 73.8% 2.1% above the National average of 71.7%.</p>	<p>We are monitoring the use of reduced timetables and targeting our approach to reduce absence and improve punctuality with Pupil Premium and through the Emotionally Based School Absence Working party (December 2020).</p> <p>An evidence-based training offer/support and consultation package for settings supporting pupils with Emotionally Based School Absence (EBSA) is now being offered.</p>
<p>We are concerned about the emotional and mental health needs of pupils and school / college staff as a result of the pandemic.</p>	<p>Educational Psychologists have rolled out a supervision offer to school staff; offering coaching sessions to school leaders (including Early Years Providers); providing webinars and follow up support, focusing on anxiety and supporting mental health. EPs continue to support Children and Learning Service staff through ongoing phone line support and the group wellbeing offer.</p> <p>Our Educational Psychology Team is managing our Wellbeing Education return (WER) project which is supporting citywide projects/developments including Mental Health Workers in School and Mental health forums.</p>

What are we worried about?	What are we doing about it?
After our Focused Visit in 2021, we are working to improve our oversight of and response to children missing from education and vulnerable electively home educated children	We have broadened the focus of our monthly Learning and Improvement Panel, inviting the service manager for Inclusion to update on improvements to contact with vulnerable children who are electively home educated (EHE). We have worked with the service manager and his team to develop a bespoke audit tool so that we can focus on quality information as well as performance data.

Conclusion

In 2021, the Children and Learning Service has continued to work hard to address the findings of the Ofsted Focused Visit and to begin to implement essential service improvements. However, we are very conscious that there is so much more to do to be a service that is the very best for our children. We are ambitious and determined to deliver the very best outcomes for our children, their families, and our communities. We will prioritise having the right capacity and capability in the right parts of the service to meet the needs of our children and families and develop the right culture of strong support and strong challenge to support our practitioners to be the best they can be.

We are wholly committed to change the culture and morale of the service and give social workers the right environment to flourish and make an impact. Reducing the number of children practitioners support, increasing management capacity and being an intelligence led organisation are key priorities; alongside reducing demand through effective early help.

We are ambitious and know what we need to do to develop a long term effective and efficient children’s service. We absolutely believe we are on that journey and our commitment to be an accredited Child Friendly City will be a clear vehicle that will ensure the whole city partnership works collectively to put children and families at the heart of our all our thinking and activity.