

# CHILDREN AND YOUNG PEOPLES SCRUTINY BRIEFING PAPER

**REPORT FROM:** Children's Services

**LEAD OFFICER:** Jo Siddle, Strategic Director for Children's Service and Education.

**DATE:** 15/07/2024



**1. SUBJECT:** Preparation for the Special Educational Needs and Disabilities (SEND) Inspection and Inspection of Local Authority Children's Services (ILACS).

## **2. BACKGROUND:**

Our last Special Educational needs and Disabilities (SEND) inspection took place in June 2019 under a previous framework. Several areas of strength were noted along with some areas for development. Following the positive outcome from the last SEND inspection we are expecting the next inspection to take place in Autumn 2024.

Our last Inspection of Local Authority Children's Services (ILACS) took place in early 2022, following of this we had a Joint Targeted Area Inspection (JTAI) in May 2023 with a focus on the multi-agency response to identification of initial need and risk in Blackburn with Darwen.

Furthermore, an ILACS Focused Visit took place in April 2024 on arrangements for our care leavers aged 18 to 25 with a focus on;

- The quality of planning for care leavers over the age of 18 years.
- The identification and provision of support for care leavers, to include their health and education needs, and to obtain accommodation appropriate to their needs.
- The offer available for care leavers and their knowledge of this.
- The quality of management oversight and supervision.

The inspection recognised the positive work and significant improvements for our Care Leavers stating there has been effective and focused action by senior leaders, elected members and partners to improve services for care leavers. Following the JTAI and Focus Visit we are expecting a full ILACS inspection in early 2025.

In readiness for these inspections the Directorate undertakes several ongoing actions to ensure we are prepared and inspection ready.

## **3. KEY DEVELOPMENTS, ISSUES AND RISKS:**

Following each inspection, we were advised on areas of strength and recommendations for improvements. Significant and regular work is undertaken to ensure the department is able to show progress against these recommendations and always be inspection ready. These include:

### Data and Performance

Both ILACS and SEND have Annex A data lists and management information requirements. These are part of the published frameworks we work towards as part of our inspection preparation. We strive to have 70% of documentation approved prior to notification. Some data lists and documentation need to be current therefore can only be approved at point of notification. For ILACS Annex A our timeframe for upload from point of notification is 2-3 days and for SEND the timeframe is 1-5 days. The data lists are the first pieces of evidence to upload and accuracy of these is imperative to ensure we submit the most current data available within the strict timescales required. If the data we submit is not accurate it could lead to queries regarding whether we understand our families, young people and children and the effectiveness of our practice. This could lead to key lines of enquiry during the inspection. Managers are provided with performance data on a weekly basis and this information is checked for any anomalies or inaccuracies. This information feeds into Annex A data lists 1-11, these are now provided to managers on a monthly basis with leads and deputies assigned responsibility for checking and giving assurance to the DCS within a specified timeframe.

For the management information sections regular meetings are in place with Heads of Service and Service Leads (including partners where appropriate) to ensure regular updates and cross referencing of information.

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The Strategic Director of Children's Services (DCS) and Deputy Directors are given oversight of any updates on a 6 weekly cycle, this also allows for any gaps to be highlighted and appropriate action agreed.

## Quality Assurance (QA)

We have a well embedded QA framework. This provides assurance to the DCS around the quality of our practice and analysis, and outlines a clear line of governance from our internal scrutiny to our safeguarding partnership arrangements and corporate and lead member roles. As part of this framework routine collaborative audits are carried out monthly and are firmly embedded in practice. This ensures we are always able to showcase our practice over the last 6 months as requested by Ofsted at point of notification. Lack of audit activity would impact on our ability to demonstrate that we know ourselves, the areas we do well and the areas we need to improve.

The recent appointment of the Head of Service for Safeguarding and Quality is already having an impact on refining elements of the Quality Assurance Framework to ensure all activity is proportionate and meaningful and gives added assurance to the DCS around the quality of our practice.

## Peer Reviews / External Scrutiny

We utilise our Sector Led Improvement Partners (SLIP) and other Local Authorities to complete external reviews and scrutiny of our work to provide assurance that our processes are robust and effective and we are targeting the right areas for improvement.

In November 2023 North Tyneside, reviewed our QA Framework and reported back;

- Comprehensive framework,
- Clear evidence of the commitment of stakeholders across the service ,
- good progress on the development of the presentation of performance data,
- culture of auditing is strong,
- with a clear commitment to making sure the resources are there to do it,
- monthly performance meetings and the Practice Forum has provided structure for the Framework, and clear management oversight.

6 key recommendations were made and the Deputy Director for Children's Social Care was responsible for reviewing and embedding these going forward.

In March 2024 North Tyneside reviewed our Children's Advice and Duty Service (CADS) and made 4 recommendations that will be reviewed by the Head of Service for Social Work and Specialist Support .

In October, the Local Government Authority (LGA) are undertaking a peer review on CIOC and Fostering and in November 2024 Blackpool Children's Services will be undertaking a peer review of our leaving care service.

## Internal Scrutiny / Corporate Assurance

The Independent LGA Children's Improvement Advisor, supports and challenges the Children's Services Improvement Board as the independent chair. There is a focus on priority areas of practice, impact and the inspection framework, along with support and challenge from wider corporate directors including Finance and HR. This gives the Council's political leadership and Chief Executive a clearer overview of the directorate as a whole and the support needed to improve.

We have Stocktake meetings which take place three times a year and are a deep dive into each service area; these are chaired by our LGA Advisor. Our most recent stocktake, held in July 2024 gave a positive insight into our improvement as a directorate within each service area.

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Regular QA activity takes place across all services and Practice Forum meets on a 6 weekly basis to continually track our progress against improvements identified through QA activity. Data is reviewed as part of these meetings so anomalies can be captured and amended in a timely manner.

Our governance cycle is embedded and as part of our corporate responsibilities we update the Corporate Risk Register, SEF, MAF and Improvement Plan as well as reporting to the Corporate Assurance Board and Children and Young People and Overview Scrutiny Committee. The improvement plan includes the key areas of development identified following our last ILACS and JTAI inspections and what our service areas are doing to address these alongside our own areas of development.

## Staff Engagement

It is important the entire children's and education workforce understand their role in preparation for inspections, including how their day-to-day work impacts on inspection readiness. On the 12<sup>th</sup> June 2024, we held a staff engagement session on SEND and ILACS inspection readiness. This gave an overview of both SEND and ILACS inspections and supported practitioners to understand the detail and activity in organising an inspection from receiving the initial call from inspectors to inspectors leaving site. Presentations were shared by each of the areas involved in the focused visit, which took place in April 2024, giving a personal view of their experience of inspections. Staff were also shown examples of data we are required to submit as part of an inspection to give them a greater understanding of how they influence this. The event was well received, and feedback suggested, following the event, staff had a clearer understanding of what was required from them to support the department for inspection readiness.

Feedback from all areas of inspection have shown significant improvement around leadership, the comments state; Leaders create an environment in which effective practice and multi-agency working can flourish they are ambitious and actively engage with our children, young people and families. Leaders commission services and provision to meet the needs and aspirations of children and young people, including commissioning arrangements for children and young people in alternative provision.

## **5. Financial Implications**

Since the ILACS inspection, there has been an investment in Children's services to drive improvements.

## **6 Next Steps**

- Continually update Annex A management information for both SEND and ILACS
- Provide data lists on a weekly and monthly basis to our team managers to review with social workers and highlight any discrepancies in order to make sure our case data is as accurate as possible.
- Continue with routine audits on a monthly basis.
- Introduce the next level of the QA Framework to include regular themed audit activity and multi-agency auditing.
- Improvement Plan to be monitored and updated on a quarterly cycle.
- Improvement Board to continue to meet.
- Performance Meetings to continue to take place.
- Practice Forum to continue.
- Stock takes to take place on a 4 monthly cycle.
- SEF to be updated on a quarterly cycle.
- MAF to be updated on a quarterly cycle.
- Corporate and Departmental Risk Registers to be updated on a quarterly basis.
- CAB updates to continue.
- Scrutiny Committee to continue to meet and discuss key areas for improvement.