

Item No.	Classification: OPEN	Date: 8 JULY 2003	MEETING NAME: EXECUTIVE
Report title:		THE VICTORIA CLIMBIÉ INQUIRY – SELF AUDIT TOOL OUTCOME AND RECOMMENDATIONS	
Ward(s) or groups affected:		ALL WARDS	
From:		STRATEGIC DIRECTOR OF SOCIAL SERVICES & CHIEF EXECUTIVE, SOUTHWARK PRIMARY CARE TRUST	

RECOMMENDATION(S)

1. That Members of the Executive agree the areas of the report with respect to corporate responsibility, reporting of performance and issues of Governance (paragraphs 31-35).
2. That Members of the Executive receive as information a summary of the position statement and self-audit tool submitted to the Department of Health (DOH) and a copy of the DOH's evaluation of that submission (Appendix 1).

BACKGROUND INFORMATION

3. On 11 February 2003 the Executive and Southwark Primary Care Trust (PCT) Board separately considered a report with respect to the Victoria Climbié Inquiry. The Inquiry Report with its 108 recommendations was published on 28 January 2003. In summary, this previous report to the Executive covered the following issues:
 - A brief synopsis of the circumstances surrounding Victoria's death and how on 12 separate occasions agencies could have intervened to prevent the tragedy
 - Key lessons from the tragedy
 - The Inquiry's 108 recommendations
 - The Inquiry Report's focus on the relationship between national accountability, local accountability and best practice.
 - How Southwark Social Services and the PCT intended to ensure compliance with the practice recommendations of the Inquiry Report. This included the increase in Base Budgets for Children's Services (primarily focussed on strengthening the frontline services and Quality Assurance), the implementation of CareFirst (a new combined service-user database and management information computer software system) and the annual appraisal of work and training/development plans.
4. Since that report to Executive, Social Services and the PCT received and completed their respective self-audit tools and the Metropolitan Police have responded to the Home Office on a London-wide basis. The Inquiry Report broke down the 108 recommendations as follows:
 - 17 General recommendations
 - 46 Social Care recommendations
 - 27 Healthcare recommendations
 - 18 Police recommendations

5. The DOH self-audit tool subdivided the 46 Social Care recommendations into 7 categories or standards. These were:
 - Referral – that the referral and the initial response, including those provided outside office hours, safeguard and promote the welfare of children and are convenient and user-friendly.
 - Assessment – that assessments of children in need focus on safeguarding and promoting the welfare of the child by addressing their developmental needs and the capacity of the primary carers to respond to these needs within the context of the child’s environment.
 - Allocation and Service Provision and Closure – where a child is identified as being in need, councils provide a service appropriate to the level of assessed need and that closure is only considered following a full review of the child’s needs and such action is deemed appropriate.
 - Guidance – that Social Services has effective policies and procedures in respect of children in need consistent with local Area Child Protection Committee arrangements and monitors the implementation of them.
 - Training and Development – that Social Services ensure that all staff working with children in need are suitably skilled and qualified and undertake appropriate continuing professional development.
 - Organisation and Management – that Social Services has performance management arrangements within which all staff understand their responsibilities for delivering the services supported by regular supervision and appraisal.
 - Governance – that Councillors, the Chief Executive and the Strategic Director of Social Services have clear accountabilities for the provision of social services to children in need, including arrangements for the review of policy and practice and strong scrutiny arrangements.
6. In summary, the first three categories or standards are concerned with practice issues; the next two categories with equipping the workforce with clear and concise policies and procedures as well as adequate training/development; and the last 2 categories with structures and effective management and corporate accountability.
7. In addition, the DOH linked the recommendations of the Victoria Climbié Inquiry Report to specific pieces of guidance – namely Working Together to Safeguard Children and the Framework for the Assessment of Children in Need and their Families – as well as interpreting some of the recommendations.
8. Following publication, copies of the most relevant chapters of the Inquiry Report (including the recommendations) have been sent to all staff within Social Services Children’s Division – including reception, administrative, agency and financial. Two copies of the complete Report were made available to each team. Staff were asked to read the documents and analyse what it meant with respect to their own practice and how the Report and its recommendations impact on current procedures, protocols and structures. The DOH self-audit tool was circulated to all managers.
9. The Report has been discussed and analysed in detail in order to complete the self-audit and to consult with all levels of staff and managers about where current practice meets the recommendations and where there are issues. This has occurred at:

- Children's Divisional Management Team meeting on 10 February 2003
- District Business Unit's Management away morning on 13 February 2003
- Children's Divisional Management away day on 27 February 2003
- Team and Unit meetings at all levels during February 2003
- On a multi-agency basis at the Area Child Protection Committee (ACPC) on 19 March 2003 as well as the monthly ACPC Standards Sub-Committee meetings
- Children's Division Performance Day on 17 June 2003 – updating with respect to the self-audit

In addition, individual staff and managers have taken the opportunity to feedback with respect to general and specific issues.

10. On 3 March 2003 Lord Laming addressed a multi-agency conference in Southwark on the key findings and implications of the Inquiry.
11. Each recommendation was assessed internally within the Division using the above process of analysis, consultation and discussion – as well as using ongoing case auditing (including 30 cases audited in March/April 2003), management judgement and the monthly management information data set. External consultation was undertaken over specific issues with colleagues from Health, Education and the Police.
12. For each recommendation the DOH audit tool asked the Department to:
 - rate (from 1-4, with 4 being the highest on a 4 point scale) how well systems are in place, activities undertaken etc with respect to that particular recommendation;
 - describe how systems, activities etc. are monitored and reviewed;
 - if not already met, set timescales for completion of activity that would meet the criteria and recommendation;
 - describe both planned improvements with respect to the recommendations and obstacles to progress.
13. The drafted self-audit was further analysed, challenged and signed-off by Social Services senior management during the week before submission on 30 April 2003.

KEY ISSUES FOR CONSIDERATION

14. With respect to the Inquiry recommendations covered by Standard 1 – Referral: these were all rated as either a 4 (In place and systematically monitored and reviewed) or 3 (In place). The summary rating for this section was 3 (Satisfactory). The main issues identified were:
 - Although systems and processes were robust and met the criterion, audit and management overview revealed some issues of compliance. However, this was not dangerous practice, but connected to increasing levels of demand coupled with limitations of staff capacity – which is being addressed by the £2.5m base budget growth in the Children's Division in 2003/2004. The growth is being used primarily to strengthen existing frontline teams as well as fund preventative strategies
 - The introduction of CareFirst (Service-user database and management

information system) will improve both the quality and extent of management information and enable the better tracking of unmet need and referrals to other services

- The extent and strategic coherence of audit systems is to be improved
15. With respect to Standard 2 – Assessment: these were all rated as either 4 or 3. The summary rating for this section was 3 (Satisfactory). The main issues identified were:
- Work is planned to ensure there are protocols in place when a child in need or in need of protection is discharged from hospital and continued medical input is needed.
 - Continued work to ensure there is a multi-agency presence within the social work teams using a variety of funding streams (for example there are already Health Visitors, funded by Health Action Zone monies, working in the Referral and Assessment Teams)
 - The commissioning unit is to quality assure accommodation used by Social Services in emergencies for families.
16. With respect to Standard 3 – Allocation, Service Provision and Closure: these were all rated as either 4 or 3. The summary rating for this section was 3 (Satisfactory). The main issues identified were:
- Through the use of the Base Budget growth ensuring there is full allocation of statutory cases
 - Ensuring better liaison with non-paediatric hospital services
 - Ensuring all open and new cases have an ongoing summary chronology – not just for statutory cases
 - Improving the tool used for recording strategy meetings held at the start, during and at the outcome of Child Protection investigations
17. With respect to Standard 4 – Guidance: the majority of these recommendations were rated as 4. The summary rating for this section was 4 (Very Effective). The main issues identified were:
- Ensuring all staff are properly informed of new procedural guidance as they are introduced (especially with respect to the streamlined guidance recently issued by the DOH). In addition that this is available in an up-to-date electronic format
 - Ensuring there is a consistent knowledge base of how to gather information from other countries if children move across international boundaries
18. With respect to Standard 5 – Training and Development: these were mostly rated as 4. The summary rating for this section was 4 (Very Effective). The main issues identified were:
- Improvements to the induction and training/development, of overseas recruits and agency social workers
 - Development of core competencies for workers to be identified for specific social work tasks and backed by a training/development passport model. Current supervisory and appraisal systems are to be used as the vehicle for this work
19. With respect to Standard 6 – Organisation and Management: these were mostly

rated as 4. The summary rating for this section was 4 (Very Effective). The main issues identified were:

- Specific additional training and action learning sets to ensure the confidence and capacity of first-line managers with respect to their supervisory, managerial, audit and quality assurance responsibilities
- Strengthening further the arrangements for the response to service users, in conjunction with other agencies, in the temporary absence of the allocated social worker
- Increasing the number of cases audited by senior managers

20. With respect to Standard 7 – Governance: these recommendations were mostly rated as 4. The summary rating for this Section was 4 (Very Effective). The main issues identified were:

- Overall, the current arrangements for accountability through the Division to the Strategic Director of Social Services, the Chief Executive and Councillors were felt to be strong
- The Executive member will now receive a monthly report on the number, nature and reasons for unallocated cases. This will include key data that forms part of the monthly management information data set
- Member and Senior Management visits to front line services occur periodically but now need to be time-tabled and formally reported on
- The Corporate Plan needs to be further improved to include all aspects of Children's Social Care priorities as set out in other plans and across agencies (for example the operationalising of the Family Support Strategy launched in the autumn of last year) - including monitoring and audit.

21. The above summarised actions that flow from the DOH audit have been aggregated into an action plan that specifies tasks, who has responsibility for completion and timescales. The responsibility for the oversight of completion of the action plan will be with the Strategic Director of Social Services.

22. The action plan is subject to monitoring and the actions are up-to-date and workstreams in place. Completed actions include:

- A weekly presence in Referral & Assessment Teams by a sergeant referral manager from the Police Child Protection Team
- Representation of acute Hospital Trusts on the ACPC and regular meetings with the Quality Assurance Manager
- Updating of the themed audit timetable, including senior management involvement
- ACPC training programme/safeguarding activity for faith, voluntary and community groups
- Guidance note completed with respect to referrals made by social work staff to other agencies
- Audit of hospital cases being undertaken
- Chronology tool has been devised – and to be used for all open and new cases

23. The DOH have analysed the completed and returned self-audit in conjunction with other performance information and inspections. On 20 June 2003 the local authority received its feedback from the Social Services Inspectorate (SSI). The

SSI have advised that the audit evaluation should be presented to the appropriate Council Committee with responsibility for Social Services. Therefore, a copy of the audit evaluation is attached (see Appendix 1).

24. The evaluation of the audit by the SSI is positive. In summary the key issues are:
- The overall assessment is that, with respect to the child protection services covered by the audit, Southwark Council is serving “most” children well and the capacity to improve is “promising”. This is on an assessment scale in which the possible judgements are: 1) “not serving children well”, 2) “serving some children well”, 3) “serving most children well” or 4) “serving all children well”; and in which prospects for improvement range between: 1) “poor”, 2) “uncertain”, 3) “promising” and 4) “excellent”. The SSI have indicated that their judgement on this audit will be a key factor in determining their overall performance evaluation for Children’s Services in the autumn.
 - The underlying assessment against each standard is shown in the evaluation in appendix 2. A key area for development falls under the governance standard which will be addressed through the action plan.
 - The SSI have decided they do not wish to follow up the self-audit with requests for further information, visits or inspection of Southwark. The issues will be discussed as part of the normal Annual Review meeting with the Strategic Director of Social Services and the Senior Management Team on 16 July 2003.
 - The vast majority of issues summarised in the SSI evaluation are congruent with the action plan produced by the Division. Additional issues raised by the SSI are being included in the action plan.
 - The DOH have not, as yet, published any comparator information between local authorities with respect to the DOH self-audit evaluation. Some information may be available by the date of the Executive from contacts within neighbouring local authorities.

BASE BUDGET GROWTH AND SERVICE IMPROVEMENTS

25. One of the key components which has allowed Southwark Social Services to make a positive response to the DOH self-audit is the Base Budget growth of £2.5m to the Children’s Division agreed by Councillors earlier this year.
26. £1.3m of this growth is being used to strengthen frontline services within District Teams. The resource is being used to directly improve services in the areas specified by the recommendations of the Climbié Inquiry Report. This includes:
- Increasing the management and social work capacity of the Referral and Assessment Teams by a third. Specifically this includes one Practice Supervisor, two Senior Practitioners, two Social Workers and a Social Work Assistant in each team. (Note: Senior Practitioner posts have been introduced in line with the recently introduced Career Grade Progression Scheme, and will allow the recruitment and retention of the most experienced and skilled workers who do not wish to take a management path.)

- Increasing the management and social work capacity of the Family Support Teams by a quarter – allowing these teams to have the capacity to deal with the doubling of children on the Child Protection Register over the last 18 months. Specifically this includes one Practice Supervisor, one Senior Practitioner and two Social Workers in each team.
- The creation of an extra Service Manager post so that the Children Looked After Teams come under one service area to ensure:
 - ❖ the further enhancement of the quality of CLA work;
 - ❖ improvement to the interface and transfer of work to the Direct 16+ Teams;
 - ❖ the existing two Service Manager posts (one in each District Office) are able to concentrate their management of service to children in need and in need of protection.
- The creation of two new Family Resources Teams which will form part of Social Services' operationalising of the Family Support Strategy by working at lower levels of need. These two teams will build effective partnerships with local family support projects from both the statutory and voluntary sectors to effectively support and integrate families in need with local networks. The teams will rationalise and bring under one area of management a variety of new and existing posts, multi-agency in nature and often funded by a variety of resource streams. These include:
 - ❖ Behaviour Improvement Programme funded social work posts
 - ❖ Sure Start funded social work posts
 - ❖ Children's Fund funded family support posts
 - ❖ Neighbourhood Renewal funded domestic violence posts
 - ❖ Drug and Alcohol Action Team funded posts
 - ❖ Social Work and Social Work Assistant posts as part of the Base Budget Growth

The teams will also relieve pressure on the Referral and Assessment Teams and Family Support Teams. Specifically the new posts funded by the Base Budget Growth are one Team Manager, five Practice Supervisors, two Social Workers and six Social Work Assistants. (Note: The other Team Manager post is resourced via the Children's Fund.)

27. The Base Budget Growth to District Services is therefore being used to establish and recruit to the following total number of posts:

- 1 Service Manager
- 1 Team Manager
- 9 Practice Supervisors
- 10 Senior Practitioners
- 10 Social Workers
- 8 Social Work Assistants
- 3 Executive Officers (administration)

The remainder of the District budget growth is being used to create budgets for S17 services for the Teams as well as mileage allowances. Any recruitment slippage is being used to meet one-off accommodation costs for such a large influx of new personnel and the cost of computers. As the SSI feedback on the

Laming audit specifically requires no unallocated work, a further sum will need to be invested to ensure that all Looked After Children cases, as well as Child Protection, can be allocated. This is currently being calculated and can be met within current allocation.

28. The recruitment to these posts has already achieved an unprecedented level of interest in terms of enquiries and applications. Just over 350 recruitment packs were sent out and approximately 120 applications received. Appointments have been made to the Service Manager and Team Manager posts, 3 of the Practice Supervisor posts, 5 of the Senior Practitioner posts and 23 Social Workers (which includes 5 Trainee Social Workers returning from their professional training). The number of Social Worker appointments far exceeds the vacancies created by the Base Budget Growth – the extra recruits are being allocated to posts created by the other funding streams (see paragraph 26 above) and posts currently filled by agency staff.
29. The Social Work Assistant and Executive Officer posts are being advertised in July and the remaining vacant posts re-advertised at the same time.
30. In addition to the Districts' investment, a further £400K of this Base Budget Growth will be used to increase the capacity of the Quality Assurance Unit. The number of Child Protection Co-ordinators will increase from 2.5 to 4 posts – ensuring the timeliness and quality of the chairing of Child Protection Case Conferences. The number of Looked After Children (LAC) Co-ordinators will increase from 2.5 to 8 posts – allowing all LAC Statutory Reviews to be chaired independently. This is a new requirement of the Adoption and Children Act (2002). The 8 LAC Co-ordinators will be managed by a new Deputy Quality Assurance Unit Manager. The overall effect of this increased capacity will both create management capacity in front-line managers across the Division in that they will not now need to chair LAC Reviews, and allow further extension of the support, advice and quality assurance functions provided to operational personnel.

Proposed Key Performance Targets

- 31 Overall, the actions taken in response to the Climbie Inquiry and the Base Budget growth are intended to achieve effective and high quality safeguarding and welfare services for Southwark's children. This should in turn be reflected by improvements across a range of indicators which will contribute to the delivery of sustainable service improvement.
32. The growth should secure progress towards the following targets which are indicative of both sufficient capacity and effective quality assurance mechanisms to safeguard vulnerable children in a responsive way. The key objectives of the growth are therefore:

<u>Indicator</u>	2002/03	Target 2003/4
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Allocations of children on Child Protection Register (Qpii)	97.3 %	100%
Child Protection Reviews to timescale (PAF C20 new)	93.7%	100%
Duration on the Child Protection Register (PAF C21) (% de-registered after 2 years)	18%	12%
% initial assessments carried out within 7 days	43%	75%
Core Assessments completed within 35 days (Qpvi7.4)	50%	75%
Allocations of Children Looked After (Qpi)	96.5 %	100%
Children Looked After Reviews to timescale (QP4.0.1)	86%	95%

33. The following will help measure commissioning success in terms of maintaining a quality supply of placements for CLA, another key objective of growth:

Indicator	2002/03	Target 2003/4
% Children Looked After in Foster Placements or placed for adoption (PAF C22)	81%	85%

34. A key proxy indicator for the success of the Family Support Strategy in delivering outcomes by preventing escalation of problems is:

Indicator	2002/03	Target 2003/4
Reduction in Children Looked After under 10 years old (PSA) (Note: figures based on 1991 Census estimates; will change with 2001 Census figures)	6.54 per 10,000	6.95 per 10,000
Repeat referrals %	20%	15%

35. It is proposed that the reporting mechanisms should be as follows:

- A monthly report to the Executive Member, the Chief Executive and the Strategic Director of Social Services of the Children's Division Management Information Data Set. This would contain both performance information alongside activity data so as to aid the understanding of how the Base Budget growth is assisting capacity issues – this would include:
 - ❖ Number of referrals
 - ❖ Number of initial/core assessments
 - ❖ Number of children on the CP Register
 - ❖ Number of CLA
 - ❖ Number of unallocated cases and the reasons for them
- The Performance Indicators outlined in paragraphs 32-34 will be reported quarterly to the Executive Committee as part of the on-going quarterly reporting mechanism. This would include activity information as outlined above and any issues connected to vacancies and recruitment.

Update on Other Responses to the Climbie Inquiry

36. The Local Authority has liaised and is aware of the self-audits and action plans completed in response to the Victoria Climbié Inquiry by the following agencies:

- Southwark Primary Care Trust
- Guy's & St Thomas' NHS Hospital Trust

- King's College NHS Hospital Trust
- South London and Maudsley NHS Trust
- Metropolitan Police

These have been aggregated and discussed in detail at the Area Child Protection Committee on 23 June 2003. Key themes have been highlighted and actions that are inter-dependent on activity shared between agencies identified with respect to their relevant workstreams.

37. With respect to Southwark PCT, the Commission for Health Improvement (CHI) self-assessment tool showed that systems for child protection were generally sound, but further work was needed especially in supporting general practice. The PCT plays an active role in the ACPC and relationships with other agencies are good. Policies and procedures are in place, based on ACPC guidance. Supervision, appraisal and management through objectives are used to ensure that all community staff are up to date. A full training strategy encompassing child protection is being developed. There are robust systems for responding to calls that raise concerns that a child or young person may be at risk. Staff are clear who to contact for advice, and cross agency communication is effective. There are some general issues around record keeping and the PCT plans to address methods of raising and maintaining high standards through clinical governance. The PCT as an employer is compliant with Criminal Records Bureau (CRB) legislation. Advice will be issued to GPs on the principles of CRB checks. General Practice needs greater clarity about systems, and a programme will be developed to ensure that practice staff are kept up to date with national guidance and good practice in child protection. The PCT has been involved with some innovative projects to elicit information about children's views of our services, but there is more work to be done to ensure this approach is consistent across the PCT.
38. The three key areas to be addressed were identified as:
- Clinical performance monitoring: The PCT will develop consistent methods to systematically review internal performance against child protection standards.
 - Information systems: The PCT will improve the information systems supporting child health services, and work to ensure that all children's records meet the data recording requirements as set out in recommendation 12 of the Secretary of State's checklist of recommendations of good practice.
 - Strengthening child protection systems: The PCT is strengthening the child protection team in order to increase capacity for training, support and advice across managed and contracted services. We plan to integrate the quality assurance of child protection across health and social care.

CONSULTATION

39. Workers and managers within the Division were consulted both with respect to the Victoria Climbié Inquiry Report and the proposals for how the Base Budget growth would be used. Colleagues from the ACPC, education, health and the police were involved in this process.
40. The proposals and plan for the use of Districts' Base Budget growth were discussed at the Departmental Liaison Committee with Trade Union representatives on 2 April and 7 May 2003. A copy of this report will be forwarded to the constituent Trade Unions for information.

SUPPLEMENTARY ADVICE FROM OTHER OFFICERS

Borough Solicitor & Secretary

41. Members are being asked to:
 1. agree the areas of the report with respect to corporate responsibility, reporting of performance and issues of Governance;
 2. note a summary of the position statement and self-audit tool submitted to the Department of Health (DOH) and a copy of the DOH's evaluation of that submission.
42. The Victoria Climbié Report produced by Lord Laming was presented to the Secretary of Health and Home Secretary. They in turn presented it to Parliament in January 2003. The report contains 108 recommendations as to how such an event may, as far as possible, be avoided in the future.
43. The primary legislation covering the duties of Social Services with regard to children in need and child protection is the Children Act 1989. The inquiry report does not suggest that this framework is inadequate rather that issues of practice and procedure need to be addressed.
44. In response to the report the Government will be issuing a Green Paper on children at risk which will be published in the late summer.

Chief Finance Officer (Ref: FI/LR/643)

45. The cost of the service improvements described in this report will be met from the additional resources allocated to Social Services in the approved 2003/4 budget and savings, mainly in community care services.
46. The Council's medium term financial strategy for the next three years has already identified the need to ensure that sufficient resources are invested in Children's Services in future years. This will be a key part of Social Services future business and financial plans.

Human Resource Manager

47. The posts have been subject to, and will continue to be subject to, external recruitment – open to individuals already employed by the Local Authority. The Council's Recruitment and Selection Procedures will be used and funded from the Base Budget growth.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
Executive Agenda 11.2.03	Co-ordination & Corporate Support Services	Everton Roberts 020 7525 7221
Completed DOH Victoria Climbié Self Audit Tool	Quality Assurance Unit Mabel Goldwin House	Malcolm Ward 020 7525 3733
Victoria Climbié Audit Action Plan	“	“
DOH evaluation of Victoria Climbié Self-Audit	“	“
Completed Commission for Health Improvement Victoria Climbié Audit Tool	Southwark PCT Mabel Goldwin House	Donna Kinnair 020 7525 0415
Updating Report to Southwark PCT – Victoria Climbié Audit Tool (CHI)	“	“

APPENDIX A

Audit Trail

Lead Officer	Romi Bowen, Deputy Director of Social Services/Head of Children's Services	
Report Author	Rod Craig, Service Improvement Manager	
Version	Final	
Dated	30.6.03	
Key Decision?	Yes	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / EXECUTIVE MEMBER		
Officer Title	Comments Sought	Comments included
Borough Solicitor & Secretary	Yes	Yes
Chief Finance Officer	Yes	Yes
Human Resources Manager	Yes	Yes
Executive Member	Yes	No
Date final report sent to Constitutional Support Services		