



# Inspection of safeguarding and looked after children services

London Borough of Southwark

---

**Inspection dates:** 21 May – 1 June 2012  
**Reporting inspector:** Brendan Parkinson HMI

**Age group:** All  
**Published:** 10 July 2012

---

© Crown copyright 2012

Website: [www.ofsted.gov.uk](http://www.ofsted.gov.uk)

This document may be reproduced in whole or in part for non-commercial purposes, provided that the information quoted is reproduced without adaptation and the source and date of publication are stated.

Further copies of this report are obtainable from the local authority or at [www.ofsted.gov.uk](http://www.ofsted.gov.uk)

# Contents

<b>About this inspection</b>	<b>2</b>
<b>The inspection judgements and what they mean</b>	<b>2</b>
<b>Service information</b>	<b>3</b>
<b>Safeguarding services</b>	<b>5</b>
Overall effectiveness	5
Capacity for improvement	7
<b>Safeguarding outcomes for children and young people</b>	<b>10</b>
Children and young people are safe and feel safe	10
Quality of provision	11
The contribution of health agencies to keeping children and young people safe	11
Ambition and prioritisation	15
Leadership and management	16
Performance management and quality assurance	17
Partnership working	17
<b>Services for looked after children</b>	<b>19</b>
Overall effectiveness	19
Capacity for improvement	20
<b>How good are outcomes for looked after children and care leavers?</b>	<b>23</b>
Being healthy	23
Staying safe	23
Enjoying and achieving	24
Making a positive contribution, including user engagement	25
Economic well-being	26
Quality of provision	27
Ambition and prioritisation	29
Leadership and management	30
Performance management and quality assurance	31
<b>Record of main findings</b>	<b>32</b>

---

## About this inspection

1. The purpose of the inspection is to evaluate the contribution made by relevant services in the local area towards ensuring that children and young people are properly safeguarded and to determine the quality of service provision for looked after children and care leavers. The inspection team consisted of three of Her Majesty's Inspectors (HMI) and one inspector from the Care Quality Commission. The inspection was carried out under the Children Act 2004.
2. The evidence evaluated by inspectors included:
  - discussions with children and young people receiving services, front line staff and managers, senior officers including the Director of Children's Services and the Chair of the Local Safeguarding Children Board, elected members and a range of community representatives
  - analysing and evaluating reports from a variety of sources including a review of the Children and Young People's Plan, performance data, information from the inspection of local settings, such as schools and day care provision and the evaluations of a serious case review undertaken by Ofsted in accordance with *'Working Together To Safeguard Children'*, 2010
  - a review of 52 case files for children and young people with a range of need. This provided a view of services provided over time and the quality of reporting, recording and decision making undertaken
  - the outcomes of the most recent annual unannounced inspection of local authority contact, referral and assessment services undertaken in 2 March 2011
  - interviews and focus groups with front line professionals, managers and senior staff from Southwark NHS Primary Care Trust, Guy's and St Thomas' Foundation Hospital and Kings College Hospital NHS Foundation Trust, South London and Maudsley NHS Trust and the Community Health South London NHS Trust.

## The inspection judgements and what they mean

3. All inspection judgements are made using the following four point scale.

Outstanding (Grade 1)	A service that significantly exceeds minimum requirements
Good (Grade 2)	A service that exceeds minimum requirements

Adequate (Grade 3)	A service that only meets minimum requirements
Inadequate (Grade 4)	A service that does not meet minimum requirements

## Service information

4. Southwark has a resident population of approximately 61,600 children and young people aged 0 to 19, representing about 21% of the total population of the area. In January 2012, 78.7% of the school population was classified as belonging to an ethnic group other than White British compared to 22.5% in England overall; 43.4% of pupils speak English as an additional language. Yoruba (5.9%) and Spanish (3.0%) are the most recorded commonly spoken community languages in the area. Some 12.8% of pupils are of Nigerian background.
5. Southwark has 91 schools comprising 68 primary schools, 15 secondary schools, one all-through school, and seven special and short stay schools. Secondary provision is largely made up of schools with academy status. Early years service provision is delivered predominantly through the private and voluntary sector in over 90 settings; there are five local authority maintained nurseries.
6. The Southwark Children and Families Trust (SCFT) was set up in 2004. The Trust includes representatives of the London Borough of Southwark and Southwark Primary Care Trust services. Other representatives include the Metropolitan Police, Guy's and St Thomas' NHS Foundation Trust, Southwark Safeguarding Children Board (SSCB), Southwark Youth Council and representatives of local schools and colleges. The SSCB has been independently chaired since October 2009, and brings together the main organisations working with children, young people and families in the area that provide safeguarding services.
7. Social care services for children have 207 foster carers, no local authority children's homes and 56 externally commissioned services. Community-based children's services are provided by a single referral and assessment team and five family support teams, supported by authority-wide teams for youth offending, adoption and fostering and teams for looked after children and young people leaving care. There is an emergency out of hours service providing cover for Southwark. Other family support services are delivered through 18 children's centres and extended services in schools. Some services are provided or coordinated through children's services such as children's centres, pupil referral units and youth provision.
8. At the time of the inspection there were 546 looked after children. They comprise 121 children less than five years of age, 332 children of statutory school age and 93 post-16 young people. In addition, there are a total of

363 young people with care leaver status. Southwark uses a virtual school approach in its support of the learning of looked after children.

9. At the time of the inspection there were 281 children who were the subject of a child protection plan. These comprise 126 females and 150 males (six were unborn children). Some 42% of these children are aged under five, 36% are 5-11 and 20% are 12 years or older. The highest categories of registration were neglect at 37% and emotional abuse at 17%, neglect and emotional abuse at 17% and emotional and physical abuse at 11%.
10. Commissioning and planning of health services and primary care are carried out by Southwark NHS Primary Care Trust (PCT). The main providers of acute hospital services are Guy's and St Thomas' Foundation Hospital and Kings College Hospital NHS Foundation Trust. Community-based child and adolescent mental health services (CAMHS), including in-patient, are provided by South London and Maudsley NHS Trust. South London NHS Trust provides a range of children's community health services.

## Safeguarding services

### Overall effectiveness

### Grade 2 (Good)

11. The overall effectiveness of safeguarding services is good. The London Borough of Southwark, health organisations and other key partners have continued to make solid and continuous progress in identifying, driving and monitoring key improvements in targeted services for children and young people. The Southwark Children and Families Trust (SCFT) and Southwark Safeguarding Children Board (SSCB) have been effective in presenting well articulated ambitions for vulnerable children. The outcome has been a strong foundation upon which further improvements can be pursued. Priorities are coherent and successfully acted upon, for example with the sustained improvements in rates of teenage pregnancy. Children's services have been fully engaged and continue to play a particularly vigorous role in advancing and promoting the well articulated improvement agenda. Challenge and support are provided in appropriate measure within both arrangements. The monitoring and evaluation of performance are well established, although qualitative measures and more extensive evaluations of the impact of services are recognised as requiring further development. Reporting by agencies other than the local authority would contribute to these improvements.
12. The local authority arrangements for overview, scrutiny and the championing of vulnerable children within the borough are strongly evidenced. There is a well established and improving commissioning culture with ambitious, realistic and clear approaches to, for example, a revised framework for, and improved multi-disciplinary approach to, early intervention services. Long-standing, mature professional relationships between all key partner agencies have not inhibited the area from seeking further learning and establishing strategic and operational links with academic institutions and other local authorities outside of the borough. These are aimed towards the further development of evidence based professional practices and more effective ways of working.
13. Children's services, and particularly the specialist children's social care service, have achieved and maintained compliance in the delivery of the core services for the protection of children. This has been well supported by partner agencies. The local authority has established and maintained workforce stability in the children's social care following an earlier period of turbulence. However, further anticipated turnover will require careful risk management to ensure the sustainability of the currently positive situation. At an operational level there is much sound, active and timely engagement between agencies, particularly evident for those children most in need of protection.

14. Children most in need of protection and safeguarding are identified and, while inspectors sought and obtained clarification in relation to some cases, no child was referred for urgent action during the course of the inspection. However, the quality of analysis in assessments remains variable. The detailed changes required in parenting within protection plans are not always of a sufficiently high standard. The out of hours arrangements of the local authority are robust and responsive, with constructive relationships with key partner agencies, notably police and health, as well as the daytime services. Performance in almost all key areas has shown maintenance or improvement compared to statistical neighbours. Recent improvements are noted in the robustness of assessments of 'good enough' parenting. However, further improvement is required, particularly in addressing the entrenched needs of some children which had previously not been fully assessed or addressed, for example those experiencing two or more episodes with a child protection plan.
15. The necessary quality assurance arrangements are in place, including case auditing, within social care. A more strategic approach is needed in the reporting framework to the SSCB, with a clearer trail of evidence of audit findings informing service delivery, contributing to planning and consequent commissioning activity. Operational managers and reviewing officers provide effective oversight on an individual case basis, although consistency of performance and ensuring a sustained focus on the timely, evidence-based implementation of plans is yet to be fully achieved. Lines of accountability are clear for practitioners, and those in social care services express positive regard for their managers. Safeguarding policies and procedures are appropriate, with local authority and partner agencies staff, including the voluntary and community sector, having good access to valued training.
16. Extensive improvements within, and additions to, the duty and assessment services have been made, although these require consolidation prior to the development and implementation of yet further ambitious plans. The views of children, parents and carers are routinely sought with some examples of high quality relationship building and communication, although there continues to be some inconsistency in achieving their full involvement. Parents spoken with during the inspection had variable views about services received, but were unfailingly positive about their current engagement and relationships with professionals. The ethnicity and communication needs of children and families are also accurately identified although the impact, strengths and needs of culture, faith and diversity are not always fully evaluated within assessments and plans.
17. Partnership activity involving use of the common assessment framework (CAF) was revised in 2011, with evidence of recent, much needed, improvement. This needs to be sustained and further extended across all agencies, to achieve further improved clarity around thresholds between child in need and for those eligible for early help. Strong continuing



support for children is delivered by children's centres and schools as well as from primary health services. Some primary health settings, for example health visiting and school nursing, have limited capacity. A reduced level of active partnership working has also been noted with a number of academy schools in the borough.

## Capacity for improvement

## Grade 1 (Outstanding)

18. The capacity for improvement is outstanding. The pace and focus of service improvement is strong and all key partner agencies understand, and are committed to, further improvements. A firm platform for partnership and challenge has been established through refreshed strategic frameworks, governance arrangements and strategic and business plans of the two key mechanisms for driving and monitoring service improvement: the Southwark Children and Young People's Plan (SCYPP) and Southwark Safeguarding Children Board (SSCB). There has been extensive activity to achieve a thorough understanding of need and demand within the area which is characterised by extremes of prosperity and a wide range of diverse cultural and ethnic communities. The revised joint strategic needs analysis has been well used to support these efforts.
19. The areas for improvement identified in previous unannounced inspections have been addressed effectively. Capacity in children's social care referral and assessment and family support services, as well as through the sustained investment and commitment to early help services, is sufficient to meet current levels of need and risk. The currently stable and developing workforce in social care present with manageable workloads with a sufficient managerial span of control to ensure effective oversight of work and support for practitioners. There is strong local authority and partner agency support for the safeguarding and protection agenda for all children. Notable in this has been a sustained and improving engagement with the voluntary and community sector in the area. This has been achieved through ensuring a full understanding of, and engagement by, service commissioning, the provision of training and in an improved procurement, contracting and monitoring of provided services. However, the needs of areas of persistent and intense deprivation and the impact of the national and regional economic context continue to present serious service challenges for all partner agencies.
20. An additional improved focus on performance in specific areas of service, including domestic abuse and youth offending, has been achieved. Improvements, or maintenance, have been achieved and sustained across a range of indicators of timeliness of assessments and reviews, as well as in bringing the ratio of core assessments more in line with similar authorities. However, some performance areas have yet to see even further improvement – for example, children with repeat child protection plans and timescales from child protection enquiries to initial child protection conference. The use of data and other performance monitoring

systems and arrangements support managers at all levels, with quality assurance information also embedded through the use of practice audit, although a stronger focus on qualitative measures is recognised as being required in order to increase their value further.

## Areas for improvement

21. In order to improve the quality of provision and services for safeguarding children and young people in the London Borough of Southwark the local authority and its partners should take the following action.

### Immediately:

- ensure arrangements for proceeding from child protection enquiries to initial conference are compliant with statutory guidance. This includes the revision of current policy and communicating changes effectively to partner agencies
- Southwark NHS Primary Care Trust, Guy's and St Thomas' Foundation Hospital and Kings College Hospital NHS Foundation Trust to ensure robust arrangements are in place to identify and communicate concerns about children who are at risk or in need of protection and are effective.

### Within three months:

- ensure that those children previously subject to a child protection plan or who have been on a plan for between one and two years are reviewed to ensure that drift or delays in improving their protection are addressed
- ensure that social care fully implement their duties in seeking orders to protect children, limiting the exercise of powers of police protection to exceptional circumstances, where there is an imminent threat to the child's welfare
- improve the quality of child protection plans to ensure that all agencies focus on the outcomes for the child and timescales are explicit
- The SSCB should:
  - establish a reporting framework to ensure regular reports on multi-agency risk assessment conferences (MARAC), multi-agency public protection arrangements (MAPPA), domestic abuse, electively home educated children and the safeguarding of looked after children are robustly considered by the board;
  - include effective representations from minority ethnic and faith groups; and

- establish effective mechanisms to consider the qualitative information held by child protection conference chairs.
- ensure thresholds for early help and targeted child in need services are clear, agreed and effectively communicated across partner agencies in the area
- ensure the social care arrangements for receiving and handling contacts and referrals avoid repetition by, or unnecessary duplication of, efforts with referrers
- Southwark NHS Primary Care Trust and South London NHS Trust to ensure sufficient capacity to deliver in full the healthy child programme, including take up of the child immunisation programme, is maximised, and the commissioned core offer in school nursing is delivered in full.

**Within six months:**

- ensure sufficient services are in place that support men in developing their parenting skills and to ensure that their violent behaviour within domestic abuse situations are more effectively addressed.

# Safeguarding outcomes for children and young people

## Children and young people are safe and feel safe

### Grade 2 (Good)

22. Safeguarding outcomes for children and young people are good. The Local Authority Designated Officer (LADO) role is discharged effectively with appropriate levels of reporting from schools, early years and foster carers although lower than anticipated levels from the police, health and the voluntary sector. An effective local authority complaints procedure has resulted in a number of improvements to social care practices but there is variable awareness amongst service users of how to complain. Processes are in place to ensure safe recruitment meet statutory requirements amongst key partner agencies, including the voluntary and community sector.
23. When safeguarding and child protection concerns are identified, they are responded to promptly and allocated to qualified and experienced social workers. In most cases seen, effective work is undertaken to ensure the safety of children, and more recently, previous drift and delay has been addressed with more assertive interventions. While support for privately fostered children has improved following a recent audit and is now sound, the number of those children has fallen despite active promotion and awareness-raising. There are also valued commissioned services for young carers in the borough, providing a balance of valued support and activity for some young carers, although the numbers are relatively small compared to the prevalence within the area. Most, but not all, feel understood within their schools. However, they consider that they are currently being expected to undertake greater levels of caring, perceiving a diminishing level of support for the person they care for; usually a parent.
24. The overall quality of school provision for children and young people in the area is good. Educational outcomes have improved rapidly and are at least in line with similar areas and the national average at all Key Stages. Achievement for children from low-income families is above that found nationally. There have been no permanent exclusions from primary schools for two years. The development of pupil development centres, supported by outreach workers from the pupil referral unit, has been effective in reducing exclusions in primary schools. Both fixed term and permanent exclusions are reducing at secondary schools. However, academies account for 75% of all permanent exclusions with one academy accounting for almost half of all fixed term exclusions. Sustained efforts continue to be made to ensure all academies are fully engaged in the early help agenda. Almost all settings for learning and childcare are judged by Ofsted as good or better for staying safe.

25. Arrangements to identify and support parents and children who suffer domestic abuse are satisfactory. The Southwark Violent Crime Strategy 2011-2015 highlights the need to deliver a healthy and respectful relationship campaign in schools and work closely with a range of other partnership bodies, including safeguarding boards, to improve understanding of child protection, honour based violence, female genital mutilation, forced marriage and human trafficking. Work with professionals in schools, health and the police has led to good recognition of domestic abuse. Community based ante-natal services ensure that vulnerable pregnant women are identified and pre-birth plans for their baby put in place. Following a review of domestic abuse arrangements in the borough, services have recently been rationalised and contracted from a new provider to meet the therapeutic and support needs of adults and children. There is refuge provision in the borough, however, this does not accept the teenage sons of women, and some young males are placed in bed and breakfast or supported accommodation which is not best child centred practice.
26. Multi-agency risk assessment conference (MARAC) arrangements have been recently improved and are now a fully effective part of the coordinated community response to domestic abuse, providing a mechanism to address the risk and increase the safety of victims and their children. Most referrals are from a good range of agencies in the area and individual safeguarding plans are successfully delivered by the contribution of all agencies involved. Multi-agency public protection arrangements (MAPPA) for managing violent offenders are effectively overseen and managed through sustained agency engagement.
27. There are sound arrangements in place to identify children missing from home, care or education, as well as to review those who are frequently missing or missing for a protracted period. All young people, including those placed outside the borough, who return from being missing, as well as being seen for a 'safe and well' check by the police, are offered a range of people to undertake a more detailed return interview. The council has recently also recruited volunteers to contact children who go missing from home and about whom there are no safeguarding issues. While there is a protocol for children missing from home, school and care, this does not include children missing from health services. However, this has been identified by the SSCB and is being addressed. The vulnerability of missing children to sexual exploitation is well understood and effectively overseen by a regular multi-agency sexual exploitation panel arrangement.

## **Quality of provision**

## **Grade 2 (Good)**

28. The quality of provision for safeguarding children and young people in the London Borough of Southwark is good. The drive toward extending and enhancing prevention and early intervention services is a high priority. By the time of the inspection an increased understanding and engagement by

universal and targeted support agencies had been achieved. Particular strengths were noted in the commitment to the planned multi-disciplinary community based model of help using children's centres as a hub of support. A strategic multi-agency approach, championed by the SCFT is leading to the development of clear, consistent and effective arrangements for early help. Children's centres and schools identify early positive impact on both professionals and families and welcome the single front door approach. Work continues to roll out training and ensure full consistency, embracing all relevant referral systems. There is increasing confidence in, and use of, the CAF which is being used flexibly as a child in need referral, for multi-agency information gathering and as an assessment tool. However, the quality of CAFs is variable and some parents are currently working with the local authority on staff training to improve the reflection of their views in assessments. Effective 'team around the child' meetings are demonstrating some good improvement in outcomes.

29. Referrals from agencies for early intervention, preventative and child in need assessments and services come through a single reception and duty point of the social care service, but are passed through a number of stages, not all of which are effectively synchronised and recorded in the most efficient way. These arrangements have positively contributed to an almost 23% reduction in contacts received by the referral and assessment service during 2011-2012. Additional contributions to this have been made by the co-location of other specialist roles including housing support and assessments for 16+ homeless and vulnerable young people, those with no recourse to public funds and an initial 'triage' system for police notifications. Integrated child support service (ICSS) arrangements targeting health specialist and midwifery support are also in place, providing high quality information and contributions to assessments of unborn children. Schools also receive valued support from the education safeguarding team which ensures higher levels of practice confidence, although more work is required to ensure there is a clear understanding of thresholds. The effective work of the education welfare service and pupil referral units are also highly valued by parents and professionals.
30. Thresholds for child protection referrals are appropriate and work is allocated to qualified and experienced social workers with appropriate prioritisation and timely responses being undertaken. However, the exercise of powers of police protection for children seen as in urgent need of protection at times take place in circumstances where social care could have sought orders for the emergency protection of children in a more timely way. Those child protection enquiries undertaken by children's social care are prioritised and children are seen promptly and frequently. Strategy discussions take place in a timely and focused way, although a policy of conducting two strategy meetings does not meet statutory guidance, creating too long a gap before a multi-agency child protection plan can be agreed. There are constructive and effective approaches

bringing together potentially disparate agencies through the use of multi-agency panels for early help as well as other resource panels and legal advice/gateway meetings for cases entering the public law outline.

31. The quality of social work assessments is variable, and while some fully consider all domains and previous history and conclude with a sound analysis of risk and protective factors, others give insufficient consideration to the reasons for previous lack of improvement and are over-optimistic about the capacity of parents to change. Social workers show a strong commitment to capturing the views of children using a range of resources to elicit their views, with detailed descriptions provided. Several cases seen during the inspection show recent evidence of more decisive activity by professionals. However, in some assessments insufficient analysis of the impact of their circumstances is evidenced and, although some diversity issues are addressed others are not always sufficiently explicit. Some assessments are also significantly overdue in being produced. Whilst the council evidence that most social work reports to child protection conferences are shared with parents prior to the conference, parents seen during this inspection did not support this view.
32. Performance, at 100%, in relation to the timeliness of review conferences is excellent with a very high level of attendance and good participation by most agencies. However, the lower attendance by academy school staff and GPs is of concern. Conferences are well chaired by independent, experienced managers who have sufficient capacity to maintain an overview of work, provide consultation and undertake some quality assurance functions. Child protection plans do address risk but do not always focus on specific outcomes within identified timescales. Reductions in those children subject to plans after being on a plan for two or more years are now being achieved.
33. Second or subsequent child protection plans have increased and is an area appropriately kept under review by children's services, as are the numbers of children ceasing child protection plans within three months of them being made. Core groups meet regularly with a good level of attendance and children are seen frequently by a range of professionals. There is effective monitoring of statutory visiting, recognising the significance this can have in terms of risk. The recording systems within social care do not sufficiently enable staff to ensure it is thorough and timely, although much work is put into achieving this. This is recognised by senior managers who are planning to commission the necessary changes.

## **The contribution of health agencies to keeping children and young people safe** **Grade 2 (Good)**

34. The contribution of health agencies to keeping children and young people safe is good. A long history of partnership working is highly successful in

meeting local challenges. Child death overview arrangements are in place and inform the work programme of the SSCB, and have received additional resourcing to address a small backlog of work. Board assurance in safeguarding children is of good quality, supported by clear governance structures. Very good progress has been made in ensuring that staff are appropriately trained in safeguarding in all but one trust (Kings College Hospital) where there has been poor progress since a review in 2010. Good use is made of internal audit to ensure staff remain focused on safeguarding children. Designated professional arrangements are mostly good with effective leadership provided within the area. Awareness about safeguarding and child protection within primary care is improving although monitoring of the arrangements is not yet fully in place. Named leads are identified in each GP practice but the arrangements are yet to be formalised.

35. Participation in child protection arrangements receives high priority in universal services and highly effective arrangements are in place for child protection medicals. Well established processes in A&E departments support effective safeguarding practice and are to be improved further by updated systems. Arrangements for addressing any safeguarding concerns for children at the walk in centre are discussed with social care, although they operate with a stand alone database. A sexual assault referral centre is based in Kings College Hospital providing a 24 hour service to victims of assault. Delivery of the full healthy child programme is stretched due to recognised capacity difficulties of community practitioners within some parts of the borough. Health visiting capacity is challenging, adversely impacting on the timeliness of key ante- and post-natal checks, including the target to visit all infants within 10-14 days.
36. Midwives have clear and effective processes in place to identify vulnerabilities in women when booking their pregnancies and in subsequent risk assessments. Appropriate priority is given to the delivery of ante-natal care of vulnerable women, although a recent audit found that only a third of appointments were taken up by the expectant mothers. Very good arrangements support women who require peri-natal mental health support, or have drug and alcohol misuse habits. Teenage mothers to be have timely access to effective health support, although specific arrangements to support young fathers to be are not effectively in place. While the rate amongst those under 16 years continues to present challenges, good progress has been made in reducing the previously very high rate of teenage pregnancy generally, with a decrease of 39% compared to the national fall of 24% in the relevant period.
37. In relation to prevention and early help, the contraceptive and sexual health service has five bases providing six day per week access. While there are plans to extend some opening hours these do not include plans to operate over the whole week. Insight provides an effective programme of education and support for substance misusing young people up to 24



years of age. Families also have access to a good range of CAMHS provision, although waiting times for assessments are too long, at three to four months on average. A triage system is in place to prioritise, with some excellent work taking place at short notice demonstrating a very good level of awareness of the potential impact of parents' mental health on children. Families have access to effective therapy services to support children and young people. Arrangements are also in place, through a multi-agency panel, to coordinate the care of children with complex needs during their transition to adult services, including ensuring that their well-being is safeguarded.

## **Ambition and prioritisation**

## **Grade 1 (Outstanding)**

38. Ambition and prioritisation of safeguarding services are outstanding. The local authority and its partners provide sustained, ambitious and effective leadership. There is a clear and substantial drive, from the lead elected member and others in the council, in supporting and challenging performance as well as in improving services for all vulnerable children. Most areas for development, including many identified within this inspection are fully understood with consequent clear and appropriately resourced responses made by the local authority and partners in a well coordinated way. The determination to sustain capacity for early help has provided an excellent cornerstone of service capacity, around which the strategy for extending early help has been built. The extensive anti-poverty agenda and consequent additional services, through the extension of free school meal provision for example, has provided a substantial and robust platform upon which the targeted services are able to build further improvements with confidence.
39. Mature, productive relationships between agencies are maintained by senior officers who have a good knowledge of local need, pressures and improvement opportunities. Priorities, based on analysis of local need, are set out clearly in strategic, business and action plans and are proportionately understood by staff that inspectors spoke with during the inspection. Successful coordination and promotion of partnership services toward the most vulnerable have been led and promoted by the range of partnership boards, and through the SCFT in particular. The SCFT, shadow health and well-being arrangements and other key strategies, notably through the Safer Southwark Partnership, undertake highly effective work in coordinating and driving service improvements. This is exemplified by the sustained and thorough strategies and action around gangs and violent youth crime within the borough, as well as in the formulation of strategies within the troubled families' approaches under consideration, nationally as well as locally.

## Leadership and management

## Grade 2 (Good)

40. Leadership and management of safeguarding services are good. The workforce strategy of children's services has been successful and well implemented, achieving a significant level of staffing stability through bold actions designed to attract and retain high calibre social workers, a substantial proportion of who are from different parts of the world. Following a period of stability, the number of agency staff and staff turnover has increased slightly and is likely to continue to do so, though these changes are recognised and are being actively addressed. While the diversity of the workforce does reflect the demography of the locality, this is not so at all levels of the local authority, particularly at the most senior levels of management.
41. Social work case loads are manageable and newly qualified staff are appropriately protected, supported and developed. Social work managers at all levels and social workers have high morale, valuing the training offered and received. They specifically value the support of their colleagues and their own managers, to whom they have frequent access and from whom they receive regular supervision and appraisal. Managers are seen as child centred and knowledgeable, although several practitioners commented on the delays resulting when seeking certain decisions, due to the required agreements from a number of managers. Social workers present as clearly committed to the professional task, but experience considerable challenges in balancing the need to meet performance requirements and undertake effective reflective and direct work with children, in large part due to the demands of the recording systems.
42. The council has a sound understanding, based on analysis of needs, of service and resource deficits and develops services to address these with effective commissioning. The local authority and its partners have a strong commitment to using the views and experiences of children, young people and their families to inform service development, including a broad range of early help services. For example parents are involved in quality assuring the effectiveness of the CAF. Valued amongst the commissioned services are the pre-birth team, family intervention project, CAMHS and the many children's centres. Together with the involvement of schools and health visitors these deliver good quality, sustained support to individual families, added to which the early help services are being further developed. However, there is a lack of programmes to support fathers in developing their parenting skills and a lack of therapeutic services to address violent behaviour by men in domestic abuse situations.

## Performance management and quality assurance

### Grade 2 (Good)

43. Performance management and quality assurance are good, with sustained improvement across a wide range of national and local indicators identified for improvement in at least the recent period. Performance reporting and monitoring are in place, which capture an extensive range of data, although qualitative aspects to supplement statistical information has, to date, been limited. The council is aware of this and is considering how best to add depth to the understanding of need and evaluations of performance in an efficient and effective way. A 'dashboard' approach has been used to some considerable effect with some service areas seen as in need of improvement, for example when reviewing the range of services for those parents of children who experience domestic abuse.
44. A range of quality assurance and audit mechanisms are in place within children's social care, and the SSCB has undertaken a number of multi-agency audits. An outline revised performance management and quality assurance framework has recently been agreed by the Board but is yet to be fully implemented. This will need to incorporate review audits of activity in which planned improvements are anticipated following, for example, learning from management reviews or serious case reviews. The contribution of the social work improvement and quality assurance framework is designed to contribute significantly to this work. However, the extensive and qualitative information about practice held by child protection conference chairs is not fully used to contribute to the SSCB's fullest understanding of practice.
45. Performance is robustly monitored by operational, senior and strategic managers and compares well with similar authorities. Professional lines of accountability are clear within agencies with well regarded and effectively used liaison and dispute escalation arrangements. Practitioners clearly value the support, knowledge and accessibility of all managers, describing Southwark as a "safe place in which to work". Managers are evidently child centred and constantly seek to improve practice through a variety of research based mechanisms. The further development toward use of a signs of safety approach is seen as a welcome further development. Thresholds are well understood and are consistently applied to child protection concerns, but are less clear or felt to be consistently applied to the interface between early help and other children in need, and are in need of revision and promotion with and between the key partner agencies.

## Partnership working

### Grade 2 (Good)

46. Partnership working is good with effective work seen across the statutory and voluntary and community sectors, as well as at strategic and operational levels. A long history of effective partnership working, and

increasingly with the voluntary and community sector, has been established through the SCFT. Extensive strategic 'conversations' take place on a continuous basis between senior officers and members across the partnership. These conversations have included significant contributions by service users and other members of the public, through the powerful "1,000 Voices" contribution to the current Children and Young People's Plan. These currently operate on choices within the limitations imposed by current resource constraints. Current substantive issues under consideration are entirely appropriate, and include strategies to counteract gangs, early intervention (notably in relation to the hub approach based on children's centres), developing voluntary sector capacity further, re-engaging relationships with academy schools, establishing an effective agenda within the shadow health and well-being board, improving the education, employment and training commitment to those leaving care, and ensuring that the voices of children and parents continue to be effectively heard.

47. The SSCB is led by a respected independent chair, and has appropriate membership including recently appointed lay members, although it does not have representation from faith or other minority ethnic groups that reflect the diversity of the borough's population. The board comprises a wide range of members. Children's social care managers chair the majority of sub-groups that undertake much of the work, and in particular the audit and learning group, providing a disproportionate representation of these groups.
48. The priorities of the board focus on child protection and are appropriately developed from a balance of learning from serious case reviews as well as from performance information. However, the links to domestic abuse services are insufficiently robust and a comprehensive reporting framework for functions such as MARAC and MAPPA is not sufficiently well established. Widely available and valued child protection training is provided and is both free and accessible to the voluntary sector. This includes lessons learned from local and national serious case and other management reviews. There has, however, been no scrutiny of some vulnerable groups, for example considering the safeguarding needs of looked after children or those of electively home educated children, and the participation of children with the SSCB is not yet formalised.

## Services for looked after children

### Overall effectiveness

### Grade 2 (Good)

49. The overall effectiveness of services for looked after children is good. The local authority and its partners present as effective corporate parents with looked after children well established as a clear priority for members of the SCFT. There is a well embedded and improving commissioning culture with revised procurement arrangements for achieving bespoke, higher value placements through, for example, increasingly effective regional consortia arrangements. Statutory functions and core requirements are being met and no services are deteriorating in relation to looked after children. Adequate and often better outcomes for most looked after children are achieved, and across almost all aspects of the relevant outcome areas. These are sustained as the consequence of mature, effective operational partner agency relationships, including the valued virtual school approach. Notably positive among those supports provided are those delivered through the looked after CAMHS provision.
50. Corporate parenting arrangements are mature, exhibiting a very strong commitment to, and championing the needs of, looked after children. The contribution of Speaker Box presents as an excellent and well embedded commitment to fully engaging with the views of many looked after children and makes a powerful and positive impact on resources and services in the area. Front line long-term workforce stability in children's social care for looked after children has been effectively maintained without experiencing the staffing disruption seen elsewhere. Organisational arrangements within social care are acknowledged as not enabling sufficient consistency or continuity for children due to having several points where case transfer can take place. Staff work hard to minimise any disruption, but such transfer points can and do impact upon the development of positive relationships and in sustaining the pace of implementation of plans.
51. Those looked after children seen, or whose case files were considered, during the inspection, had been subject to appropriate decision making and needed to be in the care of the local authority. Some children within public law proceedings were subject to delays in achieving final outcomes consequent to additional commissioned assessments or alternative interim orders to those sought by the local authority. Most children in care and those receiving leaving care services seen, as well as those responding to a survey during the inspection, reported feeling safe, or very safe, where they live. Improvements in educational attainment have been sustained, although tracking and monitoring of progress is currently incomplete. Success has also been achieved recently in reducing the numbers of looked after children entering the criminal justice system, following extensive work with the youth offending service.

52. The extensive arrangements for looked after children to express their views about the service they receive are a particular strength. However, although some plans for children, particularly those within family court settings, are of high quality, care plans more generally are not always clearly articulated, with an absence of substantive or sufficiently evidenced contingency arrangements. Examples were seen during the inspection of sensitive and thoughtful work in ensuring that the needs of children from a range of backgrounds, ethnicities and abilities receive parenting commensurate with identified need.
53. There remain high numbers of children living outside the local authority area, although most live within close proximity of the borough. There were good reasons for the placements of those who live some way from their home. There are effective health services for children, notably around support for their mental and emotional health needs, although improvements are needed to ensure that the physical health needs of all looked after children are being met, and that engagement with older young people and planning for their adult lives takes place from an earlier point. Transition planning has been recognised as requiring improvement, and there are widely varying views about the support provided for those young people preparing for or leaving care. Some have felt insufficiently well prepared or supported towards independence during the latter period of being looked after.

## **Capacity for improvement**

## **Grade 2 (Good)**

54. The capacity for improvement is good. Statutory requirements are met with an exceptionally strong current performance for placement stability of those children looked after for lengthy periods, and a wide range of sustained or improving outcomes for most children, albeit set against a sustained rise in numbers becoming looked after until the very recent period. The local authority has maintained the necessary capacity and investment in its corporate parenting responsibilities. This has enabled children's services to keep a sustained performance in outcomes for almost all children. A strong partnership approach with key partner agencies has extended this commitment well ensuring a strong performance across most outcome measures. The SCFT prioritises looked after children as a key group of children needing to be supported in a coordinated way, particularly in achieving their full potential.
55. The local authority has undertaken a thorough analysis of the profile of the service as well as developing detailed, thorough plans to address the range of challenges; financial, procurement and the recruitment of local carers. It has a clear understanding of needs and risks, although some children have arrived in care later than they might have done and others are faced with considerable uncertainties during their passage through legal proceedings. Identified commitments to the prevention of children

becoming looked after have resulted in greater resourcing levels being recently applied, particularly to parenting support and intensive interventions with older children. It is too early for clear outcomes of this strategy to be realised, particularly around reducing the higher numbers becoming looked after in the area compared to like authorities.

56. Consultation and engagement with children and young people looked after is extensive and of a very high quality, actively contributing to a number of improvements in how care is experienced. Speaker Box and its range of activities presents the authentic voice of the child in care, is very influential, impacting across a wide range of issues. Reviewing officers prioritise contact with children they are responsible for, seeking to establish a meaningful relationship according to the age and capacity of the child. Most parents experience effective working relationships with the local authority towards achieving the best outcome for their child. Some parents struggle, however, to gain access to respite services or short breaks, finding thresholds too high within the services for children with disabilities.
57. It is evident that the local authority is appropriately intervening to protect some children who have experienced serial or chronic poor parenting that has been harmful, although it is recognised that some children in care for shorter periods do have too many placement changes prior to returning to the community. Further efforts are also needed in preparing and supporting young people for adult life, through the development of the necessary skills towards independence or semi-independence. Commencing transition planning at an earlier stage for those with enduring, complex needs is recognised as necessary. The local authority is clear that financial savings can be made without impacting adversely on the care received by children and some improvements have recently been achieved within the financial capacity of budget allocations, for example in raising fostering fees and leaving care grants.

## Areas for improvement

58. In order to improve the quality of provision and services for looked after children and young people in the London Borough of Southwark, the local authority and its partners should take the following action.

### **Immediately:**

- ensure that clearly recorded care plans are in place for looked after children and care leavers containing clear, specific outcomes sought as well as realistic contingency plans.

**Within three months:**

- ensure that assessments are comprehensive and up to date and that they take account of the full circumstances of the child in need plans and interventions.
- ensure that transition to independence is effectively planned, commencing at an appropriate stage for young people, leading to the development of and support for independence skills
- develop a systemic evaluation of services for children and young people and their families on the edge of care to assess their effectiveness and ensure a robust monitoring of these children leading to timely decision making should they need to become looked after
- ensure an effective dialogue with the family courts aimed at establishing a mutual clear understanding of thresholds, quality of plans and proposals, and timescales for completion within a timeframe suitable for each child
- ensure capacity of the independent visiting service is sufficient to meet need.

**Within six months:**

- Southwark NHS Primary Care Trust and the local authority to ensure that young people's health needs are fully addressed in preparation for leaving care, including the consistent provision of summary health plans
- ensure that themes identified within case audits are collated, leading to clear action plans and that consequent outcomes are systematically and consistently evaluated to achieve a full understanding of their service impact.



## How good are outcomes for looked after children and care leavers?

### Being healthy

### Grade 2 (Good)

59. Good arrangements are in place to assess and maintain the health of looked after children and young people. Arrangements for designated professionals are mostly good and they provide effective leadership across the area. However, the limited time allocated to the designated doctor role presents challenges in discharging continuously its full range of strategic and operational responsibilities. Initial health assessments are carried out in a sufficiently timely way by appropriately qualified medical practitioners, and are of good quality. Improvements in performance have taken place with health assessments now at 90%, with even better rates for those looked after for more than one year (93%). Inconsistent practice between medical practitioners carrying out subsequent review assessments can impact adversely on their quality.
60. Good progress is being made in ensuring health needs are met while children are looked after. There is an effective use of audit as a quality assurance and monitoring mechanism. This has identified areas for more efficient working practices and improved communications within the health community. Good arrangements are in place to ensure that the health needs of those children placed out of borough are also fully addressed. Sunshine House is a highly valued children's health and development resource offering integrated community health and social care services, with a particular focus on children with a disability and those with additional vulnerabilities. There are very good and highly effective arrangements to meet the emotional health needs of most looked after children and young people through the looked after CAMHS provision. The strengths and difficulties questionnaire is used effectively on an individual basis as well as in informing service improvement. The needs of young mothers are recognised and they can access help from the teenage pregnancy midwife or the family nurse partnership. Foster carers also receive very good support, including training and advice, from health practitioners. There are, however, insufficient arrangements to provide older young people with a summary of their healthcare when they leave care.

### Staying safe

### Grade 2 (Good)

61. Safeguarding arrangements for looked after children are good. Pre-birth work is of a high quality, with risk well recognised, leading to appropriate and timely action. This development is part of a concerted and assertive response by the local authority whereby some children had previously not entered care at a sufficiently early point in response to the harm they had experienced. Most looked after children live in stable and high quality

placements. The work to ensure that children and young people have long-term stable placements is excellent. The vast majority of children who responded to the survey or who were met by inspectors stated that their placement was good or very good. There has been effective action taken since the Joint Area Review which has led to enhanced support to children in their placements. The number of unplanned placement moves has reduced and the proportion of children who have three or more placement moves is less than the national average. There is evidence that some children experience instability at the beginning of their care experience, but once children are transferred to the looked after children teams they experience stable relationships with their social workers and within their placements.

62. The vast majority of children who responded to the Ofsted survey stated that they felt safe or very safe; however a significant minority felt it varied or they felt unsafe. These were all older children or young adults and many adverse comments referred to the area in which they live. The vast majority of children stated that there was at least one person that they could talk to if they felt unsafe. Parents spoken to during the inspection were all positive about the service they were currently receiving from children's services.
63. Commissioning arrangements ensure that there are effective safeguarding standards in place for all services commissioned and have led to improving local placement choice. A higher proportion of children are placed within 20 miles of their home than similar authorities which is good. Ofsted's recent inspections of the local authority fostering service and its adoption services rated both as good. A very strong focus on permanency planning is in place with robust systems for tracking children to ensure that any drift is identified at an early stage for young children which is then effectively challenged. The proportion of children adopted, while increasing, remains lower than similar areas. However, there have been significant numbers of children achieving permanence through special guardianship orders.

## **Enjoying and achieving**

## **Grade 2 (Good)**

64. Outcomes for looked after children and young people to enjoy and achieve are good. A strong commitment is shown by the SCFT to ensuring children's life chances are enhanced through their educational achievement and attainment. This is a priority within both the Council Plan and Children and Young People's Plan. The looked after children education team reports regularly to Corporate Parenting Committee. Most children and young people that responded to the survey for this inspection feel the education they get is good or very good and that they are receiving the help they need with their education. There are appropriately focused priorities for the restructured education team which is enhancing existing data to ensure more systematic tracking and monitoring of children's

attainment, progress and attendance. This is driving the current targeted work with those 20 children with the greatest attainment gap.

65. The looked after children education service makes an effective contribution, within a strong multi-agency approach, to maintaining educational stability, ensuring children and young people are placed in the most suitable provision. The large majority of children are in provision that has been judged by Ofsted to be at least good. Effective work with schools is taking place to ensure provision is meeting children's needs, with appropriately tailored packages of additional support, including individual tuition. The effective use and impact of the pupil premium is being closely monitored. The looked after children's education team attend all first personal education plan (PEP) meetings, attending subsequent meetings if there are concerns. Almost all children and young people have a PEP and timeliness has improved recently, although the quality of these is acknowledged to be variable. This is being addressed through auditing and ongoing support for social workers, carers and new designated teachers.
66. A strong 'team around the child' approach has ensured that children at risk of exclusion are robustly protected and there have been no permanent exclusions of looked after children in the academic year 2010/2011. Schools report a good level of challenge from children's services regarding fixed term exclusion and local data shows the number of children experiencing multiple fixed term exclusions is reducing year on year. Work continues to improve attendance rates through increasingly systematic and complete monitoring.
67. The proportion of looked after young people that achieved five good GCSEs including English and mathematics in 2011 was well above both similar areas and national averages, representing a narrowing of the gap. Results at Key Stage 2 are more variable, with a very small number taking tests. Results in English dipped but those achieving Level 4 or above in mathematics improved and the authority saw its best ever results in this subject. At the end of statutory schooling, a higher proportion of young people than in similar areas and nationally continue in full time education. Care leavers who wish to attend university are well supported with over 50 young people currently attending. Children have good access to a wide range of out of school activities, although this is not always recorded in plans. Southwark's fostering service has protected funding to provide looked after children with music and sport activities and older children and young people have free entry to the borough's leisure centres.

**Making a positive contribution, including user engagement**  
**Grade 1 (Outstanding)**

68. Arrangements for looked after children and young people to make a positive contribution are outstanding. Corporate parents and senior

managers demonstrate high levels of commitment to ensuring the voice of children and young people is not only heard but has high impact. Speaker Box has made a significant contribution to service development through contributing, for example, to the review of allowances and the leaving care grant, as well as the design of facilities for older looked after children and care leavers at Talfourd Place. Members have also delivered a range of training and have hosted conferences, including the annual safeguarding conference. It is well supported and representative young people meet with elected members, team managers and senior managers regularly. They work hard to ensure that all looked after children and young people are included, including younger children and those with disabilities, for example through the high quality quarterly magazine, regular consultation events and a 'big picnic'. There are high ambitions to extend its reach even further. The pledge to looked after children takes the form of 'ten golden rules' and social workers are held to account if these are not kept. Young people celebrate the work of professionals and carers through a monthly 'extra mile' award.

69. The council has a well established and effective complaints procedure. Most are resolved in a timely way at local level. There is evidence that the outcomes of complaints have been used to improve services and practice, for example, a review of semi-independent living. The independent advocacy service (VOICE), for those in, and leaving care, is effective. It is actively promoted, supporting those living in and outside the borough. The council provides a successful independent visitor service to 30 children and young people through community service volunteers (CSV), but there is insufficient capacity resulting in some young people waiting for the service. Systems have been introduced to ensure improved joint working and communication between the youth offending service and children's social care. Local data demonstrates the effectiveness of this with a reduction in the proportion of looked after children entering the youth justice system for the first time.

### **Economic well-being**

### **Grade 3 (Adequate)**

70. Looked after children and young people's economic well-being outcomes are adequate. The Children and Young People's Plan and Corporate Parenting Committee identify this as a priority area for development. Almost all young people are living in suitable accommodation with bed and breakfast provision never used. Strong partnerships with housing are well established ensuring priority for care leavers through Supporting People arrangements and providing secure tenancies for care leavers. A large majority of responses to the inspection survey show that care leavers live in good or very good accommodation. However, almost one third do not feel they are living in the right place and care leavers who spoke to inspectors had very variable views on the suitability of their accommodation.

71. Monitoring of those young people at risk of disengagement in Years 10 and 11 is tracked with action plans put in place to ensure they have a destination at the end of statutory schooling. A broad range of support is available from personal and specialist advisers and social workers to encourage young people into education, training and employment (ETE). The proportion of care leavers engaged in ETE is in line with the national average and slightly below similar areas. Work continues with local providers to ensure the wide range of care leavers' needs can be met, for example, a post-16 specialist centre for looked after young people with dyslexia has been opened at the local college in partnership with the council.
72. Of the care leavers surveyed, less than half felt they had enough help to prepare for leaving care. Pathway planning is improving, although practitioners are spending more time focusing on addressing immediate expressed needs, and proportionately less implementing the overall plan. However, there are good, supportive opportunities for care leavers to take up apprenticeships, and a local authority target of 20% of apprenticeships being offered to care leavers has been achieved in each of the last four years. Six young people are currently in a pre-apprenticeship scheme, which is effective in helping care leavers transfer life experiences into employable skills. Eight young people are also matched to professionals within the council through a coaching scheme.
73. A life skills programme is being reintroduced, following previous poor attendance with plans to commence preparation earlier, but it is as yet too early to see firm outcomes. A drop-in centre for those that do not feel able to access group work has been used by 142 young people in the first six months of operation. Some good examples of positive and celebratory images and other materials promoting the strengths in the diversity of cultures in the area were evident within the centre frequented by care leavers. The local authority also identifies the need to train foster carers to prepare young people for leaving care. Speaker Box also recently identified a need for more consistent and effective relationships between young people, social workers and personal advisors. An outcome of this is additional training to social workers and personal advisors on building positive and trusting relationships with children and young people.

## **Quality of provision**

## **Grade 2 (Good)**

74. The quality of provision for children and young people in Southwark is good. There is a good range of services for children and young people on the edge of care, offering effective interventions for a significant number of families which have led to improved outcomes. Good strategic management has led to services being placed under a single management structure, being imminently enhanced by the addition of a family therapy team. The service is now identifying families who need these services at an earlier stage. There is highly regarded parenting service which delivers

good quality group programmes and individual parenting programmes within the home environment. A more systematic and comprehensive approach to evaluation of the impact of these services is yet to be implemented, and in some cases interventions have not been effective due to services not intervening at an early enough stage or the most appropriate service not being put in place. Parents met during the inspection confirmed this but were overwhelmingly positive about the service, with almost all identifying improved parenting skills, relationships with their children and outcomes for their children. An effective intensive family intervention service is able to intervene with families over longer periods, while another good service undertakes shorter term work with families and teenagers (ACT). A resource panel is leading to quality and timeliness of decision making for children and young people on the edge of care.

75. Children whose needs are assessed as needing to be addressed through family court proceedings have clear, robust and appropriate assessments and realistic, proposed plans in place. A strong legal team offers good advice to social work teams. However, there are some significant differences between the courts and children's services, and there has not been an overall review of cases where applications were unsuccessful. A good level of support, intervention and monitoring is put in place where children have been placed with family members. Overall, assessments are analytical and effectively identify risks and protective factors, but up to date comprehensive assessments are not consistently in place for some children. The absence of a clearly recorded care plan with intended outcomes hinders the effective tracking of the plan. Improved monitoring of permanency plans enables potential drift to be challenged at an early stage.
76. Children and young people are seen regularly by their social workers and children report very positive relationships with them, however social workers do not always see children alone where it is appropriate and some teenagers do not feel that social workers spend sufficient time with them. There are examples of effective engagement in activities with children in order to build relationships. Direct work is given a very high profile. Overall the quality of direct work with children is good and child centred, there is evidence of very sensitive and considered interventions with children. The quality of work with teenagers is more variable. In a few cases it is not evident that the full knowledge of the young person is used to build effective relationships. Skilled and experienced staff deliver a good service to unaccompanied asylum seeking children, including good access to interpreters. Work is culturally sensitive and unaccompanied asylum seeking children have access to relevant community groups. There are some very good examples of identity, culture, ethnicity, and religion being considered in planning and intervention. However, this is not consistent with some assessments being superficial not always recognising the impact on case planning and intervention.

77. Social workers know their looked after children well many of whom experience good stable relationships. Some examples of very good work with teenagers were seen demonstrating a strong commitment and perseverance from professionals. There is a strong commitment to enabling children and young people to live in foster placements with the 'staying put' initiative being effective in enabling young people leaving care to remain in their same placement. A good in house fostering service, combined with good commissioning of independent providers means that children are in high quality placements. Support for children in placement is very strong. High quality services such as Carelink and educational support combined with good access to leisure opportunities enable a high level of stability. The good adoption service uses learning from the small number of disruptions to improve the service. Good adoption support is in place although it currently has capacity difficulties.
78. Overall, case recording is reasonably current, with detailed observations of children; however there is evidence of delays in recording some visits. The electronic recording system is slow, not easy to navigate and time consuming. Social work review reports vary in quality as do some of the actions resulting from reviews of care plans. Reviews are timely, with examples seen of reviewing officers providing effective challenge in reviews. However, reviewing officers are not always effective in tracking cases and some reviews did not show a sufficiently holistic understanding of the child's circumstances. Views of children are effectively taken into account within reviews and reviews are child centred.

## **Ambition and prioritisation**

## **Grade 1 (Outstanding)**

79. Ambition and prioritisation for looked after children and young people are outstanding. The local authority and partners demonstrate the highest level of commitment and determination to deliver outcomes for looked after children which are at least as good as those for other children. Senior managers, elected members and front line staff met during the inspection were passionate about delivering highly effective services to children in care and care leavers. The corporate parenting arrangements are fully integrated into the children's partnership and ensure effective prioritising of children in care and care leavers who receive a very high profile within the partnership, including with elected members.
80. Regular and thorough performance information and evaluation is provided to all levels of management and to elected members. This, combined with listening to children, leads to good knowledge of the service and supports strong ambition and effective prioritisation. The strong prioritisation is demonstrated through the development of the excellent facility for children in care and care leavers and an increasing co-location of professionals, further strengthening partnership arrangements and enabling young people to have a more seamless service. An excellent example of the impact of prioritisation is the improvements in the stability

that children experience who are in long term placements. The development of innovative services for children is reflected through developments for children on the edge of care and the development of the family drug and alcohol court shared by several London Boroughs. The council ensures that care leavers have good access to a range of apprenticeships within the council, although it recognises there is work to be done in supporting care leavers further in their preparation for adulthood.

## **Leadership and management**

## **Grade 2 (Good)**

81. Leadership and management for looked after children in Southwark are good. The council has effective arrangements for commissioning and procuring services, based on a good analysis of current and forthcoming need. However, there remains higher than expected numbers of children entering and ceasing being looked after for short periods, indicating further improvements are needed for those on the cusp of coming into care. All children are placed in provision that is good or better. Children are routinely consulted to shape commissioning decisions and are involved in selection panels and interviews in the tendering process and are being developed as young inspectors. The experience of the child is at the centre of monitoring arrangements. In order to meet particular needs the council has worked with providers to develop specialist services, for example foster care placements for young people involved in gangs. The council is working with London Care Services towards developing a regional procurement framework. The assessment of the sufficiency of placements is good and this has led to a decision to develop more in-house foster care. Financial plans are in place, and it is recognised that further efficiencies can yet be achieved in procuring more cost effective provision.
82. A placement panel both assesses the impact of individual placements on outcomes for children and informs further commissioning. Providers are very positive about the service delivered by the partnership to children and young people. The culturally diverse needs of children and young people inform commissioning and a bi-annual placement panel requires social workers to evidence that any diversity needs and educational outcomes are being met. Social care has achieved and is sustaining front line stability of the social work workforce with a virtually full, permanent qualified social work establishment with social workers having manageable caseloads. Good support is in place for newly qualified social workers. The quality and access to training is good, with particularly good access to training to develop direct work skills with children. Morale is high and staff are demonstrably committed to high standards and good outcomes.



## Performance management and quality assurance

### Grade 2 (Good)

83. Performance management and quality assurance arrangements for looked after children are good. Quality assurance and audit activity are well established in practice. There is increasing evidence of a very good understanding of the story behind the data, for example in the extensive work undertaken to understand the factors impacting on stability of placements have led to robust and effective action. A significant strength of quality assurance processes is the involvement of children and young people in evaluating services. There are good examples of thematic audits which have led to an increased understanding of the service. A move towards more outcome focused measures is yet to be fully achieved and themes from case audits are not effectively drawn together to achieve learning or the impact of changes made. A comprehensive and systematic evaluation of services for children on the edge of care is now being developed but is yet to be completed.
84. Management oversight is regular and supervision is highly valued by staff who state that managers are accessible and they feel well supported. Management oversight in most cases is clear and effective. However, in some cases actions are not always sufficiently tracked by managers with the experience of the child not always sufficiently taken into account. In some cases this led to an overly optimistic view of the likely success of interventions. Increasingly robust and extensive data and other performance monitoring materials are in place and developing further, although sufficiently bespoke performance management and quality assurance information are recognised as being less well evidenced.

## Record of main findings:

<b>Safeguarding services</b>	
Overall effectiveness	Good
Capacity for improvement	Outstanding
<b>Safeguarding outcomes for children and young people</b>	
Children and young people are safe and feel safe	Good
Quality of provision	Good
The contribution of health agencies to keeping children and young people safe	Good
<b>Services for looked after children</b>	
Ambition and prioritisation	Outstanding
Leadership and management	Good
Performance management and quality assurance	Good
Partnership working	Good
Equality and diversity	Good
<b>Services for looked after children</b>	
Overall effectiveness	Good
Capacity for improvement	Good
<b>How good are outcomes for looked after children and care leavers?</b>	
Being healthy	Good
Staying safe	Good
Enjoying and achieving	Good
Making a positive contribution, including user engagement	Outstanding
Economic well-being	Adequate
Quality of provision	Good
<b>Services for looked after children</b>	
Ambition and prioritisation	Outstanding
Leadership and management	Good
Performance management and quality assurance	Good
Equality and diversity	Good