



Date: Wednesday, 24 January 2024

Time: 10.00 am

Venue: Shrewsbury/Oswestry Room, Shirehall, Abbey Foregate, Shrewsbury, Shropshire, SY2 6ND

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## PEOPLE OVERVIEW AND SCRUTINY COMMITTEE

### TO FOLLOW REPORT (S)

#### 7 **Ofsted Report - Focussed Visit to Shropshire's Children's Services (Pages 1 - 12)**

An update on the findings of the Ofsted inspection and next steps following publication of the Inspection Report in January 2024. (Report to follow).

Contact: Tanya Miles, Executive Director of People

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**Committee and Date**

**People Overview  
Committee**

**24 January 2024**

Item

Public



## Ofsted Report – Focussed visit to Shropshire Children’s Services

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|---|---|------|--|
| <b>Responsible Officer:</b>               | Sonya Miller Assistant Director Childrens Social Care |      |  |
| email:                                    | Sonya.miller@shropshire.gov.uk                        | Tel: |  |
| <b>Cabinet Member (Portfolio Holder):</b> | Kirstie Hurst Knight                                  |      |  |

### 1. Synopsis

This report brings to People Overview Committee the most recent letter from OFSTED which reports on a focused visit in November 2023. The letter was published on 12 January 2024. It goes on to explore next steps and what has been put in place to address the challenges.

### 2. Executive Summary

- 2.1. This report and the OFSTED letter aims to provide an updated position and relevant information relating to the recent inspection visit.
- 2.2. The report summaries the challenges that led to the findings of the Inspectors and details the formulation of an Improvement Plan to address the issues and the convening of an Improvement Board to oversee the progress.
- 2.3. The Improvement Board has the benefit of the presence of an LGA Improvement Advisor who is experienced in supporting local authorities to address issues and provides independent advice & scrutiny to the board.

- 2.4. The timeline to demonstrate improvement is initially June 2024 when we are due our next Annual Conversation.

### 3. Recommendations

- 3.1. That People's Overview Committee consider its role in ensuring that progress is made to address the issues identified in the recent inspection visit. A particular focus on the issue of recruitment and retention could be considered.
- 3.2. That People's Overview Committee support the work of the Improvement Board and seek to assure themselves of progress on a 3 monthly basis in line with the Performance Data overview.

## Report

### 4. Risk Assessment and Opportunities Appraisal

- 4.1. Failure to take clear demonstrable actions to address the issues results in a risk to children and their outcomes, children could remain at risk of harm if social workers do not have the appropriate skills and ability to undertake the complex work needed to safeguard them. The focus on recruitment, training & development aims to mitigate this risk.
- 4.2. If the issues were to go unaddressed then the Council would be at risk of a negative re-inspection. The reputational risk would be significant. The approach of a Council wide Improvement Board, which has been convened by the Chief Executive mitigates this risk.
- 4.3. Risk table

| <i>Risk</i>   | <i>Mitigation</i>   |
|---|---|
| Failure to address the issues identified.   | Improvement Board and Improvement Plan in place and to be signed off by cabinet.  |
| Failure to recruit the required staff to address the issues of capacity and experience. | Recruitment and Retention and Business Support Transformation Project in place to improve the offer to workers.<br>Additional capacity agreed and being recruited to immediately. |

### 5. Financial Implications

- 5.1. There is a considerable budget pressure in Childrens Services relating to the use of Agency Social Worker. We currently average about 30 agency social workers at anyone time, each one costs between 25-30% additional to a permanent social worker. This budget pressure will continue unless we can recruit permanent staff into the posts.

- 5.2. The additional staff agreed to address the capacity and caseload issues means that there is an additional pressure on Childrens Social Care budget in Q4 and into 2024/2025.

## 6. Climate Change Appraisal

- 6.1. The rural nature of Shropshire and the statutory requirement for the majority of visits to be face to face places a demand of workers across the service to travel to family homes. This places a demand on energy fuel and consumption.
- 6.2. Where we are able to use Teams for meetings to reduce the impact we do, it is not however possible in relation to statutory functions.

## 7. Background

- 7.1. In February 2022 Shropshire Council Childrens Social Care & Safeguarding was inspected by OFSTED under the new ILACS (Inspection of Local Authorities Childrens Services) for the first time. In that Inspection the services were Graded Good Overall, with Requires Improvement for Safeguarding Children.
- 7.2. Authorities graded Good then expect a focused visit within the first 2 years following the full inspection. This visit focuses on the authority's area of weakness.
- 7.3. In between this formal inspection the LA takes part in an Annual Conversation with OFSTED Inspectors where we present our self evaluation and discuss areas of success, progress and challenge. The purpose is to ensure that the Local Authority knows itself well. The Executive Director of People and Assistant Directors for Childrens Social Care and Education, Learning & Skills attended the Annual Conversation in June 2022 and reported on the Self Evaluation and progress made since the inspection in the February.
- 7.4. The Annual Conversation in June 2023 took place and again we reported on our self evaluation. During this meeting we told OFSTED of the challenges that were faced in Case Management Teams in relation to Child in Need, Child Protection and Pre Proceedings Work (PLO – Public Law Outline). We were clear about the challenges that were being experienced in the service and the impact. It was expected that the focused visit would be in these areas.
- 7.5. In November 2023 two Inspectors inspected the focused area of children in need, child protection and pre proceedings. They looked at a small cohort of children using the Performance Data and Quality Assurance work to inform their choice of children. Inspectors did not look at the whole service and the Judgement of Good remains, the focused visits are not graded in the framework.
- 7.6. The letter published on 12 January 2024 summarises the findings of that visit. A copy of which has been shared with Committee Members.

## 8. Additional Information

- 8.1. The report describes a number of challenges that the Case Management Service has faced over the previous 12 + months and the impact that it has had on service delivery and children.
- 8.2. These challenges include:
- Difficulty recruiting experienced Child Protection social workers. This is a National Challenge and one that every Local Authority is facing. Shropshire has the added challenge of its rurality and increased travel demands on workers.
  - This has meant that we have had a lot of changes in social workers in the teams in Case Management, case loads have been too high and this impacts on workers staying, also the quality and ability of agency social workers is highly variable and we have had to ask a number of social workers to leave. There are also a number of agency workers who have been with us a long time and are committed to working in Shropshire. We have converted 16 Agency Social Workers to permanent posts in the last 15 months.
  - From November 2022, due to promotion opportunities for a number of managers, there was a change in Service Manager and several Team Managers within a short period of time. All new into role. It is a complex and challenging role to learn and develop skills, coupled with each manager having a large number of children to have oversight of.
  - From January 2023 we also had to plan to exit the additional court work team that had been commissioned to support with the increase in care proceedings during the Covid pandemic.
  - The accumulative impact of these factors, especially the multiple changes in social worker for a number of children directly impacts the quality of practice and results in drift and delay. Pre-proceedings work is significantly impacted by these changes as the focused work to try and engage families in work that helps them change and make progress is interrupted for the family and making new relationships is difficult.
- 8.3. During the Inspection in 2022 Quality Assurance was a strength for the service and this continued to be until early 2023. There is a strong and effective Quality Assurance Framework in place and when it is able to be implemented effectively it has the effective oversight required. There have been 2 key roles that implement the framework vacant for a number of months and this directly impacted on the range of audit work we were able to share with Inspectors. In addition, the follow up work 'closing the loop' on actions had not been effective in recent months. Both these posts have been recruited to and commenced in post in recent weeks.
- 8.4. The inspectors did feedback on a number of strengths including the work of Stepping Stones and TREES (Together reducing & ending exploitation in Shropshire) and the impact on outcomes for children, as well as decisions are made to bring the right children into care, mostly at the right time.

- 8.5. During the Focused visit the Executive Director of People and the Chief Executive decided that an Improvement Board was required to oversee the challenges and progress and this response was fed back to Inspectors in a 'Keeping in Touch' meeting.
- 8.6. The Improvement Board has met twice. It is Chaired by the Chief Executive, has an LGA Improvement Advisor on it as well as the Executive Director for People, Director for Resources, the Portfolio Holder for Children and cross party Council members.
- 8.7. An improvement plan has been drafted and the initial draft has been shared with OFSTED. Now the letter has been published it has been shared with staff and we are collecting feedback and working with the Data and Insight Team to ensure we have the right measures in place. The final plan will be agreed at the next Improvement Board and then by Cabinet before submission to OFSTED by the deadline.
- 8.8. A number of additional social work roles have been agreed to be recruited to which aim to address the issue of high case loads. The posts focus on attracting experienced workers into our service. These roles have been advertised and are in the process of being recruited to. Some of the roles are exploring a new pilot role of Specialist Child Protection Social Worker, paid at a higher grade; the aim is to attract experienced child protection workers.
- 8.9. In addition, we are recruiting additional Child Protection Chairs and Independent Reviewing Officers to address the issue of capacity and caseloads for this critical role that has an independent scrutiny function.
- 8.10. To ensure that Team Managers have the capacity to ensure that Supervision is completed in a timely way, is effective and they have capacity to have the management oversight required, we are recruiting 3 new Team Managers across the service.
- 8.11. To support Team Managers in Case Management a development programme has commenced, along with coaching and mentoring. This is being led by the Principle Social Worker and Service Managers, as well as the Assistant Director. This is a pilot and if successful will become part of the development and induction of Team Managers moving forward.
- 8.12. The progress of the Improvement Plan will be overseen by the Improvement Board on a monthly basis. The plan focuses on key areas of improvement, Quality Assurance, Management Oversight & Decision Making, Caseloads and Capacity, Recruitment & Retention, Business Support & Resources.
- 8.13. The Executive Director of People has had conversations with both the Regional Lead from the Department of Education and the LGA in relation to the actions we have taken to address the concerns.

## 9. Conclusions

- 9.1. This was a challenging focused visit that confirmed the areas of concern and weakness that Senior Leaders were aware of. Whilst it is focused in one area of

the service at this time, it is clear that the outcome needed is that the issues and challenges do not spread wider across the service. The focus on improvement, quality assurance and using performance data to understand the child's journey will be across the service; this as a whole will be reported to Improvement Board.

- 9.2. Staff across the service have been upset by the outcome, in particular the teams directly affected. Staff told inspectors that Shropshire is a good place to work and they are aware of the actions being taken to try and address the issues they face day to day. Support is in place for workers affected.
- 9.3. The greatest challenge and potential barrier to success will be the recruitment of permanent social workers, with the relevant experience into the key posts. This is a national problem that all Local Authorities are facing. Not being able to fill these vacancies means that case loads remain too high and the quality of practice is affected. The use of agency social workers, whilst is a necessary part of the workforce, leads to vulnerability in addressing the consistency of social worker for families as they are able to move, and do, at short notice. Financially they are also a strain on the budget due to the additional costs.
- 9.4. Transforming Business Support is a project within the transformation programme and is a key part of the improvement journey. By using technology to effectively undertake key tasks, freeing Business Support Staff up to support Social Workers with key organisation functions will be a key part of our recruitment and retention strategy, as the support afforded to social workers is a key element of what they look for in the role.
- 9.5. There is work to do to address the key issues and the whole council response, through the Improvement Board is critical. Pace of progress will also be a key factor in success. It is essential that we are able to demonstrate clear progress by the time we have our Annual Conversation with the Inspectorate in June.

**List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)**

**Local Member:**

**Appendices** [Please list the titles of Appendices]



12 January 2024

Tanya Miles  
Executive Director of People  
Shropshire Council  
Abbey Forge  
Shrewsbury  
SY2 6ND

Dear Ms Miles

### **Focused visit to Shropshire children's services**

This letter summarises the findings of the focused visit to Shropshire children's services on 23 November 2023. His Majesty's Inspectors for this visit were Rebekah Tucker and Rebecca Qusted.

Inspectors looked at the local authority's arrangements for children subject to a child protection plan, with a particular focus on the quality and impact of pre-proceedings interventions.

This visit was carried out in line with the inspection of local authority children's services (ILACS) framework.

### **Headline findings**

Since the last inspection in February 2022, when Shropshire children's services were judged to be good, there has been a deterioration in the quality of social work practice for those children subject to child protection plans. There are serious and widespread systemic failings, leading to weaknesses in child protection practice, which leave children at risk of inadequate protection and significant harm. These concerns were known to senior leaders at the time of this visit, but the plans for improvement outlined in the self-evaluation have not yet had the necessary impact on the quality of practice to ensure that children's needs are sufficiently addressed.

Too many social workers and managers fail to ensure that child protection processes are followed to investigate and manage escalating risks to children. There is a lack of systematic management oversight of frontline practice. This means that children are exposed to the risk of harm for extended periods without proactive action being taken when risks increase. For example, the local authority is not always holding strategy discussions in a timely way, there are delays initiating child protection enquiries and decisions to start pre-proceedings are taken too late. This has contributed to children experiencing significant drift and delay.

There have been considerable challenges in the recruitment and retention of staff since the inspection, which has led to an over-reliance on agency workers in the case management teams. This has resulted in very frequent changes of social worker for some children and families. The situation is compounded by the significant turnover of team managers and one service manager in the last 12 months, which has created a level of inexperience across the case management and court teams. This has led to inconsistent and ineffective management oversight of plans to support children.

Capacity within the quality performance and assurance service is insufficient to meet demand, due to the increased numbers of those children who are in care and subject to child protection plans. Caseloads for child protection conference chairs are too high. As a result, child protection plans do not receive the appropriate level of independent scrutiny and challenge when there is a lack of progress for children. There are also vacancies in key quality assurance posts, which has impacted on the ability of managers to gain assurance about the quality of social work practice in this area of the service.

Senior leaders recognise the significant practice deficits raised by inspectors during this visit and are committed to making the necessary changes to improve the quality of child protection practice and pre-proceedings interventions. There is a stable senior leadership team, whose members are supported financially and politically by corporate leaders in the council. There has been considerable investment in children's services, including at the 'front door', TREES, the local authority exploitation team, residential services, the parenting team, early help and Stepping Stones, the local authority edge of care service.

### **Areas for priority action**

- Weaknesses in child protection practice, which leave children at risk of significant harm, including the quality of management oversight and decision-making, staff supervision, and appropriate challenge by child protection chairs.

### **What needs to improve in this area of social work practice?**

- The consistent understanding, and application of, pre-proceedings interventions to ensure that children are appropriately safeguarded in a timely way.
- The quality and effectiveness of child protection plans.
- The quality and timeliness of strategy discussions and initial child protection conferences.
- The effectiveness of multi-agency core groups to ensure that progress is measured, and that drift and delay is challenged by all partner agencies.
- The quality of quality assurance activity, including auditing of social work practice, across the service.

- The training and support provided to social workers and managers in relation to statutory child protection procedures.

## **Main findings**

Since the last inspection, senior leaders in Shropshire have continued to develop early help services and Stepping Stones, the local authority edge of care service. The targeted growth of these areas has resulted in some staff gaining internal promotion into these new teams, which has resulted in an increase in vacancies in case management teams. As a result, vulnerable children who are subject to child protection planning receive an inconsistent response to escalating need and risk. The impact of these changes on the quality and delivery of child protection services has been significant, with some children left at risk of harm for too long.

The quality of children's assessments of their need is variable. For a small number of children, their voice is captured well and their lived experience is clearly articulated. For other children, the impact of historical parental risk factors on their emotional and physical development is not sufficiently considered. Some children within the wider familial circle are not identified, or taken into account, as part of the assessment. When children are referred to children's social care, there is a variability in response. This is sometimes due to delays in partners making referrals. Some pre-birth assessments are completed in a timely way and children are considered at an initial child protection conference appropriately due to the identified risk of harm. This results in some children coming into care at the right time. For other children, there are missed opportunities to undertake a pre-birth assessment, and they remain in situations of unassessed risk for too long. Private fostering assessments are not always completed promptly, or to a suitable standard.

There is an inconsistency in the quality of visits to children. Most children are visited by social workers at a frequency that meets their needs, although for a small number of older children, they are not seen alone. For most children, these visits are purposeful and social workers develop positive relationships with them and their carers. There is variability in the quality of recording of visits, as some are too brief and do not sufficiently focus on the voice of the child. Direct work is not routinely undertaken with children to understand their wishes and feelings. As a result, it is not possible to gain a clear view of children's experiences to inform the progress of plans and the management of risk.

Statutory child protection processes are not routinely followed for some children. For example, strategy discussions are not always timely or undertaken appropriately as risks escalate, so some children remain in situations of unassessed risk for too long. Section 47 child protection enquiries are not always appropriately escalated to an initial child protection conference, despite the risk of significant harm to children.

There is variability in the timeliness of initial child protection conferences, which means that some children are left at risk of harm for too long before their

circumstances can be fully considered by multi-agency partners. Initial and review child protection conferences are usually well attended by partners who contribute appropriately to decision-making. When families disengage from child protection plans, multi-agency challenge is not sufficiently robust in core groups and review conferences to effect change, and there is an absence of effective scrutiny from child protection chairs about next steps.

Some child protection plans are detailed in their identification of risk to ensure that families are aware of what needs to change to improve children's outcomes. Most plans are too adult-focused, contain out-of-date information, and do not capture the views of parents or children. Some plans are not accessible to parents with a learning need, lack clear contingency planning, and have not been signed off by managers.

Children remain on child protection plans for too long and there is an absence of robust and effective challenge by child protection chairs. A small number of children remain on child protection plans for significant periods with no progress made to achieve sustainable change. Some children have been subject to multiple child protection plans over several years. Disabled children who require child protection planning experience drift and delay. Visits to disabled children do not take place regularly and children are not always seen, or seen alone.

Although core groups are usually well attended by partners, who actively contribute to meetings, this does not always lead to an effective multi-agency response for children. Parents are not routinely involved in core groups, which means that plans are not developed collaboratively with families. Core groups do not consistently develop child protection plans in a timely way and professionals are not held to account to improve children's experiences and reduce their exposure to harm.

The impact of this is that the pre-proceedings stage of the Public Law Outline (PLO) is mostly commenced too late, and care proceedings are not initiated in a timely way for children. There is insufficient grip of practice by social workers, managers and child protection chairs in driving forward plans. This is exacerbated by frequent changes in social worker, leading to a 'start again' approach, in which children and families have to develop new relationships with social workers. Parental non-engagement or disguised compliance is not always challenged in the pre-proceedings stage. Decisions to enter pre-proceedings are taken too late for these children, which means that they are left in situations of risk for too long. For a very small number of children seen by inspectors, decisions to bring children into care were appropriate.

Since the last inspection, when practice was recognised as needing to be strengthened, there has been ongoing work to improve the pre-proceedings process, including revision of the PLO tracker and letters before proceedings, development of a PLO toolkit and staff training. The impact of these changes has not been fully embedded and there is still much more to do in this area. Although senior managers routinely track and review children who are in pre-proceedings, this is not effective in

progressing children's plans to ensure that escalating risk is quickly recognised and responded to in a timely way. As decisions to start pre-proceedings are taken too late and for too few children, early consideration is not given to secure the legal permanence for children within the family when this is in their best interests.

Letters before proceedings are poorly written and some contain inaccurate information and oppressive language. Most letters lack clarity about what the concerns are, how the parents will be best supported to meet their child's needs, and how the planned actions will inform next steps.

Stepping Stones, the local authority's edge of care team, provides an effective service that has successfully supported and diverted a number of children on the edge of care to have their needs met and remain with their families in the last six months. Workers in this service are resilient, provide effective interventions and make concerted efforts to engage with families.

The senior leadership team acknowledges the significant practice shortfalls identified during the visit and expressed their commitment to improve the quality of services for children in Shropshire. Despite this, the pace of improvement has been too slow, and there has been a lack of clear strategic direction and action in this part of the service to address practice deficits. During the inspection, the director of children's services told inspectors that a children's improvement board will be set up, to be chaired by the chief executive of the council, to ensure that there is more robust oversight of improvement plans in this part of the service.

Recruitment and retention of social work staff continue to be a challenge. This has been compounded by a churn of agency staff, the departure of the court project team, and a new management structure. There have also been gaps in key leadership roles, including in the quality performance and assurance service, which has led to a lack of management scrutiny and direction. Recent recruitment to these posts has been successful, although the posts remained vacant at the time of this focused visit.

The workforce strategy put in place by the senior leadership team to recruit and retain staff has not been sufficiently effective in tackling the staffing issues. Senior leaders acknowledged this in their self-evaluation and told inspectors during the visit that there is a need to adapt their strategy in order to attract skilled permanent social workers. The local authority has been successful in recruiting some agency social workers into permanent roles very recently.

Supervision is held regularly with social workers. The quality and impact of supervision is variable and it is not consistently effective at progressing children's plans. Supervision actions lack sufficient purpose and measurable timescales, which further compounds the drift and delay in planning for children. When senior managers do identify shortfalls in practice, this does not always result in remedial action being taken. Performance information is not routinely used to improve the

quality of practice and the redesign of the PLO tracker has not led to effective change. As a result, some children's plans drift and their experiences do not improve.

Senior leaders have recognised that the current adherence to the quality assurance framework has declined since the last inspection and that it is not effective in improving social work practice and the experiences of children. The number of case audits has reduced, due to the workforce challenges. This limits the ability of senior leaders to understand the extent of practice shortfalls or to gain sufficient assurance about strengths and weaknesses in this part of the service. Audits are mostly moderated appropriately, and this adds value, as moderators appropriately identify when auditors are over-optimistic. Audits are not sufficiently clear about what remedial actions need to be taken to improve practice. Senior leaders acknowledge that there is more to do in this area, including the training of those staff who undertake audits, and the development of clear actions to 'close the loop' and to promote greater consistency across social work teams.

Social workers report feeling listened to and very well supported by their team managers and senior leaders. They value the comprehensive training offer available to them and told inspectors that their personal development was prioritised by their managers. Senior leaders were described as approachable and visible by all staff.

Ofsted will take the findings from this focused visit into account when planning the next inspection or visit.

We have notified the Department for Education of the areas for priority action. You should submit an action plan that responds to these areas within 70 working days of receiving this letter. It would be very helpful if you can share an early draft of the action plan with us within 20 working days of receiving this letter.

Yours sincerely

Rebekah Tucker  
**His Majesty's Inspector**