



SELF-EVALUATION FOR INSPECTION OF SERVICES FOR CHILDREN IN NEED OF HELP AND PROTECTION, CHILDREN LOOKED AFTER AND CARE LEAVERS

September 2020



Data taken from CHAT 01.07.2020 (not comparable with CIN census) unless specified

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1. INTRODUCTION

1.1 Background and Context

Dorset Council is a new unitary authority, vested on the 1st April 2019, following Local Government Reorganisation which saw the Christchurch area of Dorset moving to the new Bournemouth, Christchurch and Poole (BCP) Council.

Dorset Council, along with its partners, is ambitious for all residents, particularly for children and young people, and is actively seeking ways of making the most of the opportunities of being a unitary authority. There is a strong One Team support for children's services, with the Chief Executive, Cabinet Portfolio Holder for Children's Services (Lead Member for Children's Services) and supporting Lead Members creating a culture where the needs of children and families are prioritised. The council senior Executive Leadership team are active contributors in strategic partnerships and planning for children, young people and their families. The Deputy Leader of the Council is the Chair of the Strategic Alliance Board (also attended by the Portfolio Holder and supporting Lead Members) the Chief Executive is the Co-Chair of the Strengthening Services Board which is also attended by the Portfolio Holders for both Children's and Adults' Services.

This strong sense of corporate responsibility for vulnerable children has already resulted in substantial investment into children's services, along with a commitment to a range of other developments for our Care Leavers including apprenticeships and council tax exemption.

Our Executive Director for Children has been in post since January 2020 who, along with the senior leadership team for children's services and our partners, is driving forward the transformation and improvements required to strengthen the quality of the services we deliver and to improve longer term outcomes for all our children and families.

2020 has been a significant year for all of us. Our plans to transform our model of children's services delivery have progressed at pace and our new 'Dorset Children Thrive' model launched on the 1st September (on time) bringing together as many of our services as possible into six integrated locality teams across Dorset, supported by a central team of specialist services.

Earlier in the year we had already, as a partnership, agreed our shared commitment to strengthen our partnership working, we had reviewed our Strategic Alliance for Children and Young People and through the newly reviewed Strategic Alliance Board agreed that we would develop a new 3 year Children, Young People and Families Plan. Alongside this we had agreed to develop a new whole system improvement programme to strengthen our services for vulnerable children and their families.

Such was the commitment and drive by the partnership we have remained on track with this work. Our Children, Young People and Families Plan 2020-23 was approved by the Strategic Alliance Board on the 15th September 2020, and our Strengthening Services Plan and Programme is now well underway with all 31 Projects progressing, the final version of our Strengthening Services Plan was approved by our Strengthening Services Board on the 10th September 2020.

1.2 About Dorset

Dorset is a beautiful coastal county situated in the South West region of England. Over half of Dorset is covered by the Area of Outstanding Natural Beauty designation and 7% of Dorset is protected as a Site of Special Scientific Interest.

The Dorset rural idyll can conceal hidden deprivation, with significant pockets found mostly in urban coastal areas. But there is also some rural deprivation due to isolation and difficulty accessing housing, transport and essential services. The Children's Society estimates that approximately 23% of Dorset Children are living in poverty.

There are ten areas (out of a total of 219) in Dorset within the top 20% most deprived nationally for multiple deprivation, down from 12 in 2010¹. Nine of these are within Weymouth and Portland and one is in the West Dorset District area. 20 of Dorset's neighbourhoods are in the 20% most deprived nationally in relation to education¹.

46% of Dorset's population live in rural areas³. Barriers to housing and essential services are significant in Dorset reflecting rurality and distance from services. 66 Dorset neighbourhoods fall in the 20% most deprived nationally for this measure: in the former council areas, 21 are in West Dorset and 20 in North Dorset.

Crime is generally low in Dorset, with domestic abuse, criminal exploitation, and rural crime identified as priorities for partners.

Earnings are below average and house prices are high with affordability issues for many young people and keyworkers. Dorset has relatively low birth rates and younger people often move away from the area.

The total population of Dorset is 378,508 (2019 mid-year estimate), this includes 74,765 children and young people aged 0-19 representing 20% of the total population (89,573 aged 0-24 years). We have:

- 2,800 children with Special Educational Needs supported through an Educational, Health and Care Plan
- 6,700 children and young people identified with SEN Support needs
- We work with:
 - 1,250 Children who have a Child in Need Plan
 - 299 children with a Child Protection Plan
 - 481 Children in Care
 - 262 Care Leavers (October 2020).

We have 160 schools in Dorset - 1 All through School, 36 First Schools, 2 Infant Schools, 2 Junior Schools, 10 Middle Schools, 81 Primary Schools, 4 Pupil Referral Units, 15 Secondary Schools, 6 Special Schools and 3 Upper Schools.

There are 33 different languages spoken in Dorset schools. 9% of school age children are from black and minority ethnic communities compared to 34.6% nationally.

2. LEADERSHIP AND GOVERNANCE

2.1 A new Children, Young People and Families Plan

Our partnership vision is for 'Dorset to be the best place to be a child; where communities thrive, and families are supported to be the best they can be'.

As a partnership we have committed to delivering this vision together and through our new Children, Young People and Families Plan, led by the Strategic Alliance, we are focusing on improving outcomes for children at a whole population level. We are going to do this through Delivering our Services Locally and by sharing the same partnership values and principles of:

- Always putting children and families at the heart of everything we do
- No child or family left behind – we will strive for equity of outcomes for our children, young people and their families
- Focussing on early intervention and prevention aiming to help early in the life of a problem and provide a graduated response to need – the right help, in the right place at the right time
- Working restoratively, doing things with families instead of to them, for them or doing nothing
- Thinking Family and working together so that children and families receive a joined-up response and good transitions
- Focussing on strengths within families and communities, understanding the lived experience of children
- Staying with families until outcomes are delivered, embedded and change is sustained
- Being inclusive – we want our children and young people to be able to get the help they need in the county that is their home
- Empowering young people and families to use the information we give them to make decisions for themselves
- Delivering best value for money - spending the Dorset £ in Dorset on the things that get the best outcomes for children and families.

The Children, Young People and Families Plan is led by the Board of the Dorset Strategic Alliance for Children and Young People which brings together colleagues from Dorset Council, Public Health Dorset, Dorset 0-19 Voluntary and Community Sector Forum, Dorset Youth Offending Services, Dorset CCG, Dorset Healthcare, Dorset Parent Carer Council, Schools' representatives and Early Years representatives; among other agencies to deliver on our ambitions for our children. The Board is chaired by the Deputy Leader of the Council. Our six priorities are:

1. Best Start in Life

2. Young & Thriving

3. Good Care Provision

4. Best Education for All

5. Best Place to Live

6. Delivering Locally

2.2 Our Children’s Services Strategic Partnership Governance

We have established clear relationship and governance arrangements to support our partnership working and ensure that our partnership plans progress with rigour and pace. The diagram below sets out the role and relationships of our strategic partnership working.

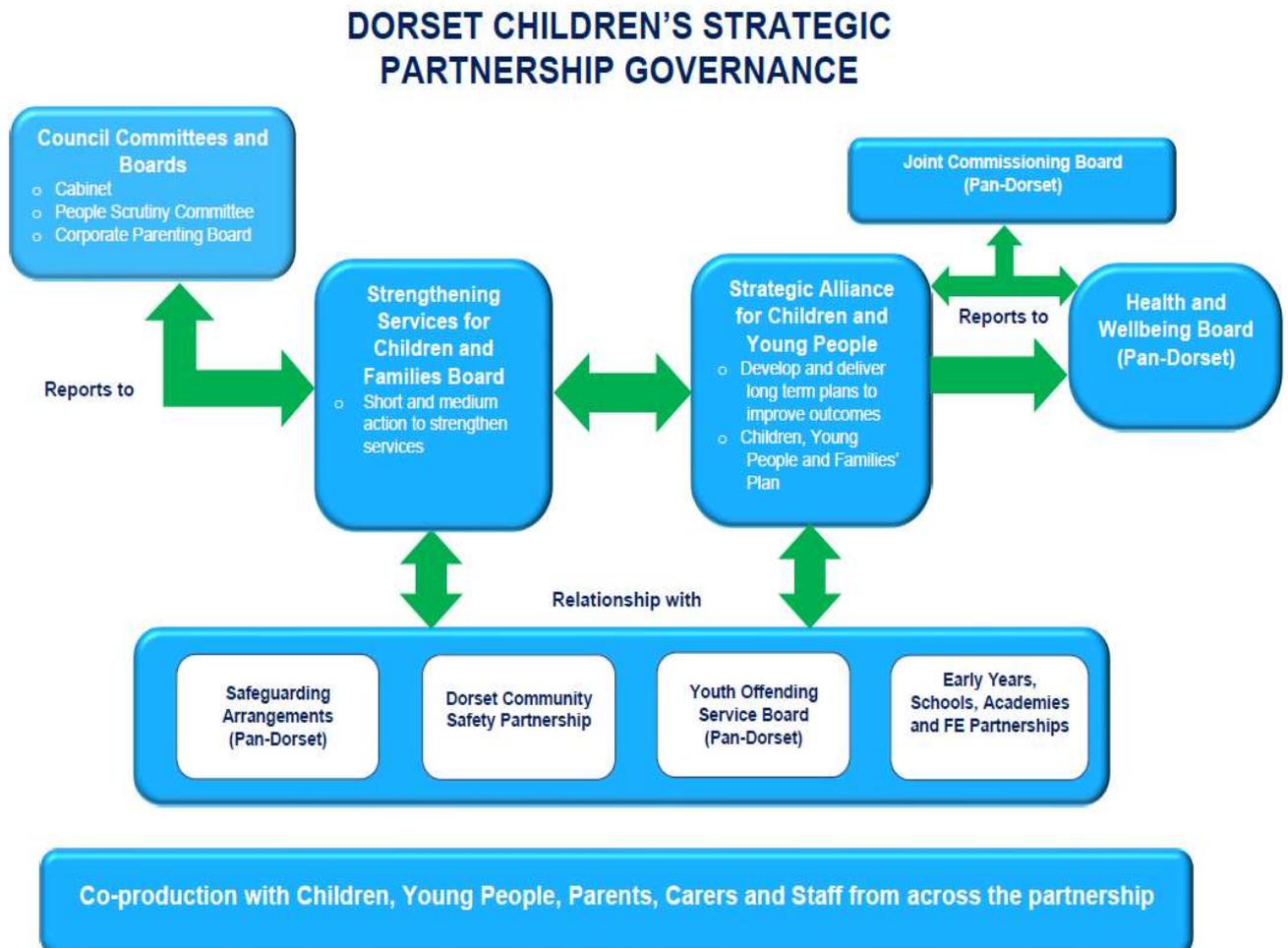


Figure 1: Our Partnership Governance Arrangements

2.3 Strengthening Services Programme

As a partnership we know there is more to do to strengthen and improve our services for vulnerable children and so we have committed, at the highest level, to undertake our Strengthening Services Programme. We have developed an extensive and comprehensive plan that brings together the short- and medium-term actions into one plan. Robust governance arrangements ensure close monitoring of sustained and embedded progress in performance.

The plan is presented in three sections following the continuum of need from early help, to services to protect vulnerable children, services for children in care and care leavers, underpinned by robust leadership, management and governance.

Strategic accountability of the programme is through our multi-agency executive level Strengthening Services Board (including Elected Members) who meet 6 weekly to monitor progress, provide support and challenge and ensure that improvements are made at pace. Work is well underway, and progress is being made on all projects. The work programme for the Board

ensures that complex partnership projects receive a 'Deep Dive' enabling Board Members to have a detailed solution focused discussion regarding different topics.

Our work in this plan sits alongside our work to deliver our longer-term vision for children and young people in Dorset through our Children, Young People and Families Plan 2020-2023.

Through these strategic plans we are working together as a partnership both at a strategic and operational level to ensure we are able to strengthen the shared 'system' of our collective services to get the very best outcomes possible for our children and families.

2.4 Safeguarding Partnership

Our Safeguarding Partnership arrangements operate on a Pan-Dorset footprint whilst ensuring that the specific needs and characteristics of the Dorset Council area kept in focus through our operational arrangements. These arrangements are currently under review where we will build on existing arrangements ensuring robust assurance of our safeguarding is in place. There is good system leadership in place across the executive and supported by the deployment of an experienced independent Chair /Scrutineer.

2.5 Financial Position

Dorset Council is committed to ensuring strong, stable and sustainable services for Children and Young People and the directorate is actively pursuing efficiency and reorganisation benefits of £1.6m in this financial year without a reduction in our front-line services. Despite a much-needed injection of recurring investment of over £10M our children's services budget remains under pressure. Along with the rest of the country we face considerable financial risk; the cost and requirement of external placements, loss of income from traded services during the pandemic and a Corporate position of a significant funding gap expected next year as a result of Covid-19 bring together a concerning position. The Senior Leadership Team is leading a Transformation Programme to deliver a balanced budget in April 2021.

2.6 Council Leadership Team

The Chief Executive, Senior Leadership Team and Elected Members play an active role in providing support and challenge to the service and partnership and have a strong line of sight to the practice. Regular briefings take place, and both the Chief Executive and Portfolio Holder participate in regular case file audits. Vital signs (KPIs) for children's services are included in the Council's Senior Leadership Team performance dashboard. Through their roles in supporting our strategic partnerships and contributing to our Quality Assurance Framework, the Chief Executive, the Deputy Leader and Portfolio Holder (alongside senior leaders from across the partnership) have a close line of sight to performance and impact made against our Strengthening Services Plan.

2.7 Children's Services Leadership Team

Our Executive Director of Children's Services has been in post since January 2020, appointed on a 12-month fixed term basis, following a period of supporting the council on a consultancy basis and providing stability needed in the Senior Leadership Team.

The permanent Corporate Director of Education commenced their role in September 2019, and the new permanent Corporate Director for Commissioning, Quality and Partnerships took up their post in February 2020. The position of Corporate Director of Care and Protection became vacant in August 2020 and was immediately filled on an interim basis by an experienced former Assistant Director who had already been providing interim capacity in a Head of Service role, providing stability for our workforce.

Our extended senior leadership team includes our Heads of Service and portfolio lead Service Managers. Together they take responsibility for leading service improvement alongside the senior leadership team. We have created space for increased understanding of performance data and shared learning across the Directorate.

2.8 Matrix leadership

Through our new integrated structure, colleagues are working in multi-disciplinary integrated teams with a line manager for their locality. To ensure we have robust arrangements in place we have implemented matrix management arrangements (where staff report and consult with more than one person) ensuring staff have clear access to the specialist support they need. These arrangements are outlined in our new Governance and Meetings Framework, we are currently ensuring that matrix management arrangements are embedding across the service and monitoring this closely through the Extended Children's Services Leadership Team.

2.9 Employee Engagement

We have worked hard to ensure that senior leadership engagement with front line staff has remained throughout the year, during lockdown and Covid-19, and have used creative approaches to remain in touch with the workforce. Our regular Diagonal Slice events (Employee Forum) and Staff Symposium events have continued to take place, listening to staff about what is important to them, providing feedback on their questions and updating on the latest news about progress and how they can help. Other examples include our weekly Staff Bulletins from the Director, Weekly Workforce Word out (Practice bulletin) and our 'Thinking Thursday' whole service learning and development sessions. Senior managers continue to drop into team meetings and visit teams and front-line services for children ensuring a line of sight to practice remains in place. To support the implementation of our new delivery model, Dorset Children Thrive, we have introduced a new Children's Services online Hub (also launched on the 1st September), to ensure all staff and managers have access to information about the Directorate.

2.10 Dorset Children Thrive – Integrated working by design

Our social workers told us that the way our service was structured made it more difficult to implement relationship-based practice as they felt remote from many of the communities in which our children and families live, the other professionals working in the localities and they spent too much time travelling to see families. This message was reinforced by an external evaluation by Professor Harry Ferguson (University of Birmingham) in the evaluation of our RSW programme. As a result, in 2019 we set about transforming our services through our Blueprint for Change programme. Our new service model Dorset Children Thrive, was launched on 1 September 2020. Our new model brings together many services and support for children and families into six integrated locality teams across Dorset, supported by a central team of specialist services.

The locality teams bring together colleagues from across Early Help, Children’s Social Care, Educational Psychology, SEND and Inclusion services under the leadership of new Heads of Locality and Strategy that link together with our CCG Health partners. The areas reflect our existing Family Partnership Zones. Through the new integrated structure, colleagues work in multi-disciplinary integrated teams with a line manager for their locality. Matrix management arrangements (where staff report and consult with more than one person) are used so everyone in the team has access to the specialist support they need. Underpinning the model are our design principles that align to the partnership’s shared values and principles

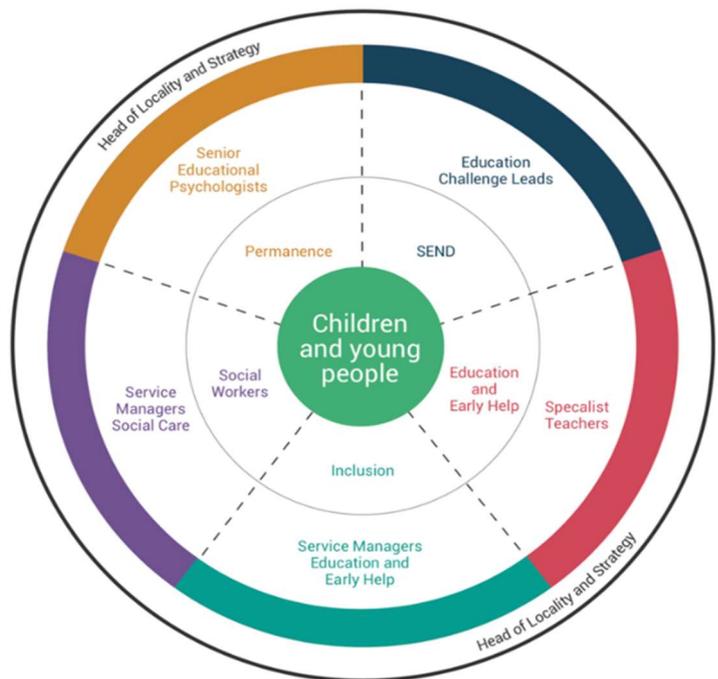


Figure 2: Dorset Children Thrive

2.11 Our Workforce

a. Our social workers

We currently have 139 social workers in Dorset. Recruiting permanent staff so that we have a stable workforce and more importantly children have stability in their social worker is a priority for us. We have made significant progress over recent months including the implementation of our new structure and successful recruitment to social work posts. Through our overseas recruitment partnership 10 new experienced social workers will join us in October following an extensive induction and team development activity. We currently have a 13% vacancy rate for social work posts, and are using agency staff as a temporary measure, but we are striving to recruit to these posts permanently.

Our long-term sickness rates in social care are currently higher than we would like them to be, and we are seeing short term sickness rates improving. Sickness data is now routinely monitored through our monthly Performance Board and this alongside other HR and staffing data is now considered at our Workforce Development Steering Group. We are working with our Human Resources and Occupational Health providers to strengthen the support offered to our staff who are experiencing ill health.

The numbers of children being supported by a social worker have reduced in the last 6 months for all social workers. On average, social workers across all the localities are supporting between 16 – 18 children. Children stayed with their social workers as we transitioned into the new model as this was a core principle of the change and means that some children are not yet place based but will become so at a point of natural transfer. We are targeting caseloads to be between 14 and 16 per worker.

b. Workforce Development

We have established a Workforce Development Steering Group, a senior level group who have oversight of our workforce sufficiency and development and are driving forward the work to strengthen our approaches including oversight and implementation of our Recruitment and

Retention Strategy, oversight of work to develop career pathways and support for our newly qualified social workers in their Assessed and Supported Year of Employment.

We are shaping our practice model to fully reflect Dorset Children Thrive and our shared values and principles as a partnership, and ensuring our managers and practitioners are supported to implement the model through the Learning Academy. Through our new Workforce Development Team, and our emerging Learning Academy, we are continuing to build on our support for our ASYEs. Our social workers have access to a broad workforce development programme, and we have significantly increased our promotion of research tools such as Research in Practice and Community Care Inform through increasing access to learning and development offer through our *Weekly Workforce Wordout* ebulletin to front line practitioners.

We are also ensuring that our existing and new managers are all supported in their new roles to support the improvement journey and consistency of practice across the service and have been providing a programme of workshops over recent months to support the implementation of new pathways and processes. We have implemented a project within our Strengthening Services Plan with a range of actions focused on strengthening management oversight and supporting our managers in their development.

We have updated our supervision policy, shared good practice tools for supervision and commissioned a provider to deliver supervision training to our front line and aspiring managers, mandatory for all social care managers. We had initially planned for this training to take place in Spring 2020; however, this was delayed as a result of the pandemic and is now to roll out in the Autumn 2020.

3. RESPONSE TO COVID 19

3.1 Introduction

Recent months have seen our partnership grow from strength to strength, coming together to support children and their families in our communities, the partnership mobilised, responded quickly, demonstrated agility and most importantly lived a one team, one Dorset, approach.

During Covid-19, services have been given greater authority to share information to better identify and support families with needs resulting in new ways of working, increased agility in the workforce and more timely and co-ordinated interventions.

We are taking forward the positive learning from our experience in Covid-19 to help us accelerate our work to deliver the best services for children and young people and to support professionals to work across organisational boundaries in the interests of improving family and child outcomes.

We do not yet know the full extent of the impact of Covid-19 on our children, young people and families, but together as partnership we will make sure we are able to respond effectively and through the work set out in this plan, we will transform the way we work to improve long term outcomes for children and young people.

3.2 Leadership timeline of our response to Covid-19

The Children's Services Leadership Team works closely with systems leaders in other parts of the council; Dorset Clinical Commissioning Group; Public Health Dorset; educational settings; NHS health providers; police, fire and rescue; town and parish councils as well as the community and voluntary sector to deliver our ongoing response to the pandemic.

The leadership task throughout this period is four-fold: providing organisational responses to government advice, guidance and new duties; coordinating and participating in partnership responses; to deliver business continuity responding to questions and concerns about how employees could undertake their work and most importantly providing information to and responding to feedback on the impact of the pandemic on children, young people and families.

A multi-agency Local Resilience Forum stood up at the end of Feb, with 10 cells set up to support our response, led by senior officers, with military planners deployed to support planning. Multi-agency partners worked together to address emerging concern about the supply chain for food, medicine and PPE and planning to free up capacity in hospitals. On the 13th March, the 1st positive case was identified in Dorset and on the 17th March, Dorset Council asked all staff to work from their homes where possible and there was a rapid deployment of IT equipment to enable this to happen. A battle rhythm was established with daily leadership team meetings, daily meetings with school leaders and daily communications to employees to respond to emerging concerns.

New duties to provide additional basic care and support for clinically vulnerable people were placed on councils and on 23rd March a major incident was declared. We have worked together supporting providers to remain financially viable and to deliver services in different ways and worked with voluntary and community sector to develop new offers and approaches. We set up a 7 day a week Covid-19 helpline as well as proactively assessing the needs of in excess of 15,000 shielding residents and reached out to shielding children and families to offer additional support including craft packages and with a real focus on personalisation.

During the Covid period there have been over **300 pieces of guidance and policy changes** that have an impact on children's services requiring a response, one of the most significant was the decision taken to close schools for most pupils on the 18th March.

To coordinate our responses, we set up a network of headteachers, representing geographical and phase cluster that met daily to plan together and address concerns. We focused on supporting the most vulnerable, who would not be able to be in school, setting up a local school voucher scheme on behalf of Dorset schools, prior to the national scheme, to address issues of supplier failure as well as meeting the needs of a rural county. Together we developed a vulnerable children's tracker and focused on attendance, shared risk assessments and worked with Public health to ensure our schools had the information they needed to respond. We set up new communications channels and redeployed council officers to work alongside schools to remain open over the Easter holidays and beyond. We collaborated on identifying those who would benefit IT equipment and support, sharing of resources for support and learning and the creation of advice and support lines.

Throughout the pandemic we have refined our partnership approach to working together to meet the needs of children and young people to understand the impact of the changing service landscape and guidance changes on individual services and work together to seek to minimise challenges that we faced. We instituted weekly partnership meetings to highlight and address risks and issues and following feedback from families on support for the youngest children local operational groups to prioritise and plan support for the most vulnerable. More recently we have worked as multi-agency partners to support the return to school through the provision of information, advice and support to those that may have found it more challenging.

We have sought, throughout this period to keep listening to the experiences of our children, young people and families through the creation of regular foster carer forums, young people forums, formal and informal view seeking. Practice observation has continued, and following a brief break, we have recommenced our auditing process. Close working with our Dorset Parent Carer forum to both hear and respond together to the issues expressed by parents of children with SEND has grown and strengthened through this pandemic. Co-production is becoming more embedded and joint work on our communications is becoming ever more established. We fully recognise that this has been a time of great anxiety for children, young people and families and continue to work together to respond to priority issues and concerns in our continuing response to this pandemic.

As multi-agency leaders we continued to focus on our collective ambition for all our children, young people and families to deliver our new Children and Young People's Plan and the implementation of our new model of Children's Services delivery - Dorset Children Thrive.

3.3 Vulnerable children and young people tracker

In response to school closures we created and implemented a new system to track attendance and risk of 'Vulnerable Children'. The list of children was brought together based on the DfE definition of vulnerable children, in addition as an authority we chose to monitor all children with a Dorset

This regular meeting of school cluster leads and link workers forum provided a key avenue for communicating with schools and helped to set up a successful monitoring process which included collecting attendance and risk judgement data from schools on a weekly basis to allow early intervention where issues were identified (such as low attendance of key cohorts).

Progress across the County was shared back with schools at periodic intervals via the Cluster Lead meetings and a live online portal. We also developed links with out of county schools and had internal Council departments link with different settings to collect weekly attendance and risk data.

Dorset were asked to be one of 3 Local Authorities to provide an update to the Troubled Families National Local Authority Webinar in April 2020 organised by the Ministry of Housing, Communities & Local Government in recognition of our efforts to encourage attendance of vulnerable children and young people back to school. Focus was around the collection and use of this attendance and risk data.

The Figure below shows an example of the live dashboard used to track the attendance of vulnerable children and young people.

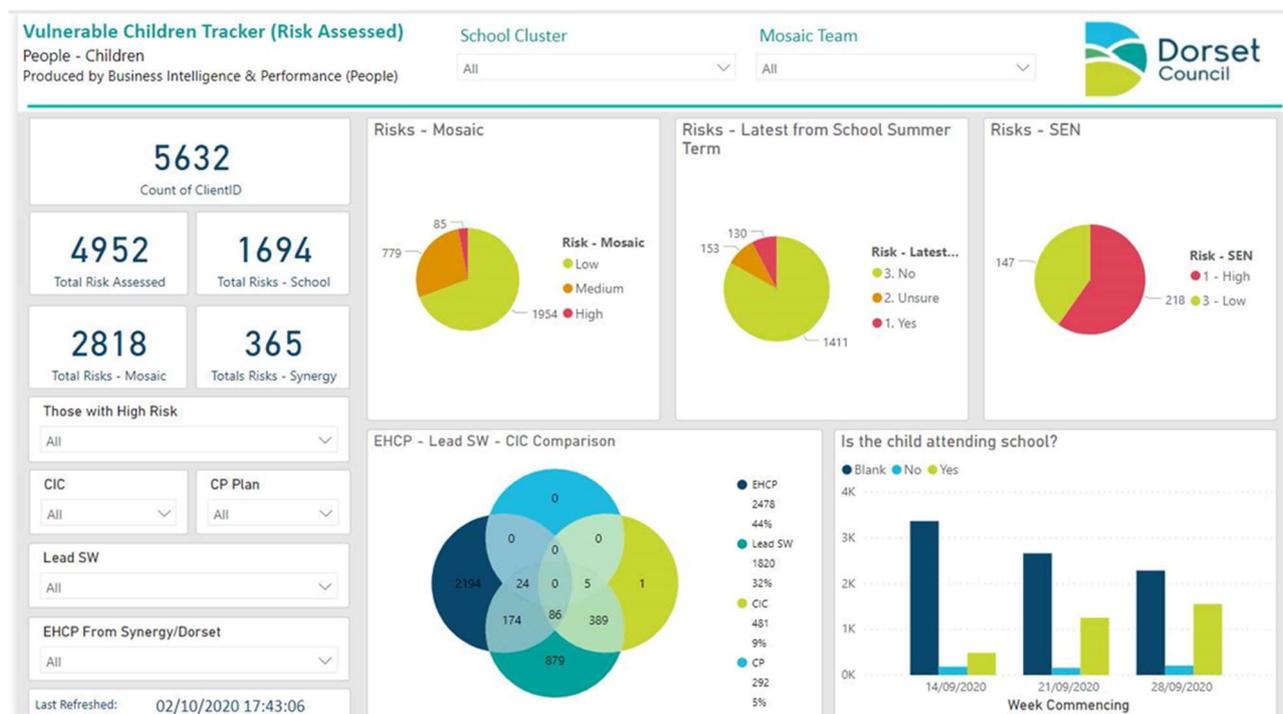


Figure 3: Vulnerable Children Tracker

A new system has been established to continue to collect weekly attendance and risk data from schools as it was recognised as a helpful mechanism to identify our most vulnerable children, as before, all children with a Dorset EHCP, children with a social worker and any children we are concerned about will be included in the tracker. Work is underway with IT suppliers to set up an automatic attendance feed from school's management information systems to help reduce the administrative burden on schools.

3.4 Education Psychology Covid-19 parent helpline

At the outset of Covid-19 parents and carers of children and young people with SEND had increased worries about education and routines. Working together with the Dorset Parent Carer Council (DPCC) the service agreed to set up a telephone helpline to respond to queries they were receiving from parents, offering telephone consultations with an education psychologist five days a week morning and afternoon.

The helpline was clearly promoted both through DPCC but also through the Council's communications, website, the SEND newsletter and via schools.

Parents and carers who would not typically have accessed support from an Education Psychologist were able to get support quickly and in a reassuring way from an education psychologist, in addition the service was able to email helpful resources to parents such as social stories, five point scales to give parents and carers tools to support.

Education psychologists were also able to follow up consultations with schools and other agencies where additional support was needed, creating a valuable front door to access services for our families.

Going forward the helpline will continue to operate and strengthen its links with other agencies to ensure it can offer access early to wider support.

3.5 Risk assessments

From the outset of Covid-19 social workers and early help practitioners undertook a risk assessment of all the children we were supporting throughout the pandemic to understand the impact of Covid 19 on them and their families, particularly focusing on those who were not able to attend school, in order to help us understand and manage risk, prioritise our work and determine the most appropriate visiting type and pattern.

We also worked with schools to establish a shared system for them to share their evaluations about the vulnerabilities of children and young people within their settings. The responses were tracked with the daily attendance returns from our education settings. Any judged to be at high risk were followed up by a link worker allocated to the school to identify ways the Council we could support in mitigating risk.

Access to the limited ICT resources were prioritised for children and young people at risk of disengaging and schools were supported by link workers to increase the attendance of vulnerable children and young people.

As a result of the risk assessments children and young people were supported at home by specialist services providing resources for families to use and signposting to other services that they wouldn't typically have received a service from.

In our desire to work at pace we reflected that there were some areas where we needed to tighten our approach and reframe particularly in the completion of risk assessments with our families. The risk assessment process will continue to be completed with our parents to ensure risk assessment reviews are person-centred.

3.6 Link workers

The Council set up a daily touch down with head teachers to coordinate communication and support to schools and families and to enable the Local Authority to track vulnerable children and young people to:

- track their attendance
- identify the level of risk and check with Local Authority officers
- coordinate support needed

As a result of feedback from schools about the number of different professionals contacting them about vulnerable children and young people, the Early Help and SEND officers collaborated with the schools to identify a link worker for each school to support them with risk assessments for all children and young people judged to be within the vulnerable categories. If the child or young person had an allocated social worker, the social worker remained the link for the family for continuity.

To be able to respond to the changing context and the evolving needs of our children, young people and families, we established a process for schools and families to be able to access specialist support without having to go through a referral process, instead discussing with their link worker.

Listening to the feedback of our schools and adapting our approach was key to ensure we were responding to the crisis in an agile and responsive way.

3.7 Summer in Dorset

During Covid-19, we have been working closely with schools to support around 5,300 children and young people who we've been most concerned about because of their vulnerabilities. The list of vulnerable children matched the DfE's specification. Over the summer holidays with schools taking a break from providing regular contact, we wanted to make sure these children and young people could still access positive activities and support.

Our ambition was to ensure sure these children and young people experienced a summer of hope by:

- supporting the development of our most vulnerable children
- helping children and young people to socialise
- helping children and young people to make sense of the wider environment

A programme of activities was pulled together run by a mix of commissioned providers and Children's Services locality teams. Summer in Dorset passes were issued to 5,300 children and young people to be exchanged an unlimited amount of times at these activities and other existing activities that were accepting the passes.

Our desire to deliver Summer in Dorset was in part driven by the lack of activities scheduled for the summer, due to concerns about Covid-19. Working with support from Public Health Dorset and with the financial support of Dorset Council, providers were encouraged to deliver activities.

5,361 vulnerable children and young people were eligible for a Summer in Dorset pass. Their pass granted them free access to 142 activities happening during the month of August. The range of activities was wide and included Circus skills; Paddle boarding and canoeing; various indoor and outdoor sports; Theatre skills; Nature walks; Musical instrument group sessions; Outdoor adventure

From the survey of families that accessed activities, the activities have been rated at an average of 4.6 out of 5; 80% respondents said Summer in Dorset has really made a positive difference and 20% said it has made some difference.

Uncertainty on the impact of government guidelines on large gatherings and our providers lack of surety to put in place arrangements, resulted in the decision to press ahead with the Summer in Dorset programme on a reduced planning timetable. This provided some key challenges. Whilst comprehensive, the programme of activities was weaker in some areas. The passes and information to book arrived very close to the start of August before all activities were listed. Some activities were booked up very fast, giving the impression that there were limited options.

We have surveyed families who received a pass but didn't attend a session. The most popular reason given for why: "There were no suitable activities for my child/young person".

Summer in Dorset had a very positive impact for a good number of families in Dorset, however we have learnt through the process that with greater planning we can do more. Several families have asked that the initiative be repeated next summer (or even sooner). There are a number of areas that we wish to consider in the future to further support these children and young people. Our locality teams have demonstrated their ability to deliver brilliant activities tailored to the children and families in their area. This will be factored into our Early Help Strategy as part of, and independently of any county-wide initiatives. We have worked with existing providers in a new and flexible way and commissioned new providers during this programme. The feedback has been very positive about working in a coordinated and joined up way. Providers valued the additional support and assurances provided by the Council in an uncertain environment. There is an opportunity to develop these opportunities, build capacity, and see an increase in activities for vulnerable children throughout the year.

3.8 Alternative Provision at the Dorset Outdoor Education Service outdoor centres

The reduction in visitor numbers at the outdoor centres as a result of Covid-19 lockdown provided an opportunity for teaching staff to be involved in delivering initially 1:1 and ultimately small group alternative provision sessions across all four of our centres. The service has provided a consistent approach to delivery ensuring that the same staff work with the same young people on each visit. This has allowed for the development of trust and effective longer-term planning.

The service has worked with providers to offer sessions that fit within the young person's normal timetable and this has meant offering sessions on certain days to fit around reduced provision at school or adjusting the session duration to maintain a routine.

The service has been truly ambitious in this area using information gained from regular contact with school, PHE, social workers and parents to provide valuable cultural capital. This has been evidenced by the onward success of many of the young people where they have now returned to school or other settings where this was not previously thought possible.

The service has been attentive to ensure that provision has been developmental. Young people have had the opportunity to attend sessions in small groups where this has been identified as an area that would benefit them. In the simplest terms this has been through communal lunch times with other staff at a centre or on occasion with other children. This has assisted in developing a range of activity specific and social skills which has clearly demonstrated improvements in communication, use of language and the progression of a polite and courteous culture. Young people have also displayed the ability to assess and manage risk to themselves and others. Further opportunities have come about from our Short Breaks programme where many of the children who attended on a 1:1 basis felt confident to then attend alongside other children.

Checking on learning and understanding has been demonstrated using a consistent approach, generally through the use of a "base" activity such as shelter building. This has been used each session to create a safe "time and space" at the start of each session for reflection and to assess prior learning and understanding, this has also allowed time to agree on themes and ideas for future working. Learners have also benefitted from the opportunity to use arts and crafts to produce resources which demonstrate their understanding. This has been through environmental art, model building, poster making and photography.

We are absolutely committed to continuing to offer this provision at all four outdoor centres throughout the year. Arrangements are being made to ensure that this is possible to the same high standards even when other visitors return to these venues as Covid-19 restrictions are eased

We are eager to make an offer of residential provision allowing a young person to stay at a centre with family or key workers to allow them to show all that they have learnt from their own visits. This could be supported by other agencies who may wish to work with the whole family within this unique environment. This could take place during weekends or holidays.

3.9 The Cherries

The Cherries is a children's home with 9 registered beds for children with complex learning disabilities aged 0-18 years. During the pandemic there have been five children living here. During the early days of lock-down it was difficult for the children and families when friends and family members were not able to visit. Virtual contact was offered, the success of this varied depending on the ability of the children to use the technology, however this was reassuring for family members as they were able to see their children. Responding swiftly to government guidance to reinstate established patterns of contact for the children however, the home was able to keep this disruption to a minimum. Feedback from the Regulation 44 Independent Visitor report identifies the following:

"AB's Dad reported that he was really grateful for the staff for ensuring that he could continue to see AB in safety. DV's mother reported that the staff worked really hard at the beginning of lockdown when she could not see DV to maintain contact. She reported that DV can find it tricky to focus and does not concentrate very well – but staff worked really hard to encourage virtual contact and to help DV to engage with this and to have a conversation. She reports that she was very grateful for how hard they tried with this as it meant a lot to her."

Children were unable to attend the regular clubs and activities they usually enjoyed and so the team worked creatively to ensure the young people continued to benefit from a wide range of activities and outings within the everchanging lockdown guidelines. In considering what activities to introduce to replace what was lost, keyworkers endeavoured to reflect upon the purpose of each activity, substituting the gym, for example, with an activity that also included a deal of physical activity. Ultimately though, many activities were included just for fun, with the spacious gardens and premises of the home allowing for various on-site activities and fun filled themed days. Socially distanced trips to many of Dorset's beauty spots were also a regular feature. Thankfully, and with very little disruption, the children were able to continue to attend school, this being integral to their established routines and consequent well-being. Equally important was the fact that during the pandemic, staff absences within the home were minimal. This was coupled with a huge amount of willingness to ensure that all children continued to receive consistent and quality care from familiar adults who understood and knew all the children well

To keep the home COVID-19 safe and secure, various measures have been introduced including COVID-19 risk assessments and contingency plans. All staff and visitors must have their temperature taken, use the hand gel provided, and leave their contact details to facilitate track-and-trace. Wherever possible facemasks are also worn although not if it is likely to cause distress to the children. Additional cleaning schedules have been introduced; staff are kept abreast of all new Government guidelines; and the home is registered on the PPE Portal should extra equipment be required. The team are careful to ensure that the young people are shielded from any unnecessary stress and anxiety that many are feeling during the pandemic.

To date it is pleasing to note that the young people seem unconcerned as to what is happening around them and key workers continue to carefully with keyworkers carefully monitoring the children for any signs of distress and having available simple and adaptable Social Stories and easy to understand guides should the need arise.



Figure 4: Summer activities at the Cherries

4. QUALITY AND IMPACT OF SOCIAL WORK PRACTICE IN DORSET

4.1 The Integrated Front Door

a. Children's Advice and Duty Desk

The Children's Advice and Duty service (ChAD) was launched in October 2019 following audit findings that showed that poor written referrals were leading to too many assessments for children that led to no further action. Several strengths in this approach have been identified in the positive feedback received from partners which include being able to speak to a social worker to seek advice and receive support through coaching to hold risk appropriately.

Consultant Social Workers receive all professional contacts via a dedicated professional's line and hold a coaching discussion with partners to really understand what the referrer is worried about and reach joint decisions with the contacting professional about what support is required and who is best placed to provide this.

We also have advisors who receive public line enquiries from members of the public including parents. Advisors also use a coaching conversation to understand the risks and strengths for a family. Any safeguarding concerns identified will be passed to a consultant social worker. Advice and guidance or Early Help support is provided through the advisor.

Following implementation of ChAD, we continued to receive a high number of police notifications that resulted in 'No Further Action'. Given that police, health, education and children's services were not integrated, we were concerned that decisions were not always made with complete information, resulting in too many assessments being undertaken and leading to no further action.

b. Multi-agency Safeguarding Hub

Opportunities to strengthen the front door were identified following a review of the Pan Dorset MASH arrangements facilitated by North Tyneside in March 2020 and steps were taken to extend ChAD to include MASH (currently virtual due to Covid). We have engaged with a range of partners Police, Health Education, Probation, Housing, YOS, Adult Services, Alcohol and Substance Misuse Services and agreed information sharing pathways to ensure that we are able to share information effectively to inform decision making. We are seeing a positive impact of these new arrangements with contact and referrals being directed to the right services at the right time to ensure a proportionate response in a timely way. This is particular of note for police contacts through Public Protection Notices (PPNs).

c. Early Help Hub

On 1st July 2020 the Early Help Hub (EHH) was also implemented as part of ChAD to provide one front door for all requests for Early Help Assessments alongside the front door for children's social care. The EHH is currently managed and staffed on a rota basis by Team Managers and Family workers from the 6 locality Early Help services. The initial auditing for MASH identified areas for improvement in the EHH regarding consistency in decision making in part due to the regular changeovers of staff. As a result, we have agreed that a Dedicated Team Manager will be recruited for the EHH to provide consistency in decision making and act as a conduit between ChAD social care, locality teams and the EHH. Staffing will continue on a rota basis by Family Workers from localities to provide strong connections between the central Early Help Hub and locality-based community services and Dorset Council locality teams. We are exploring the potential to include requests for early help for children who have a disability and access to SEND services.

d. Number of Contacts & Referrals

The number of contacts to children's social care remained consistent following Covid 19 lockdown and there was a significant drop in referrals during April 2020 (180) which then increased from May to 255 per month.

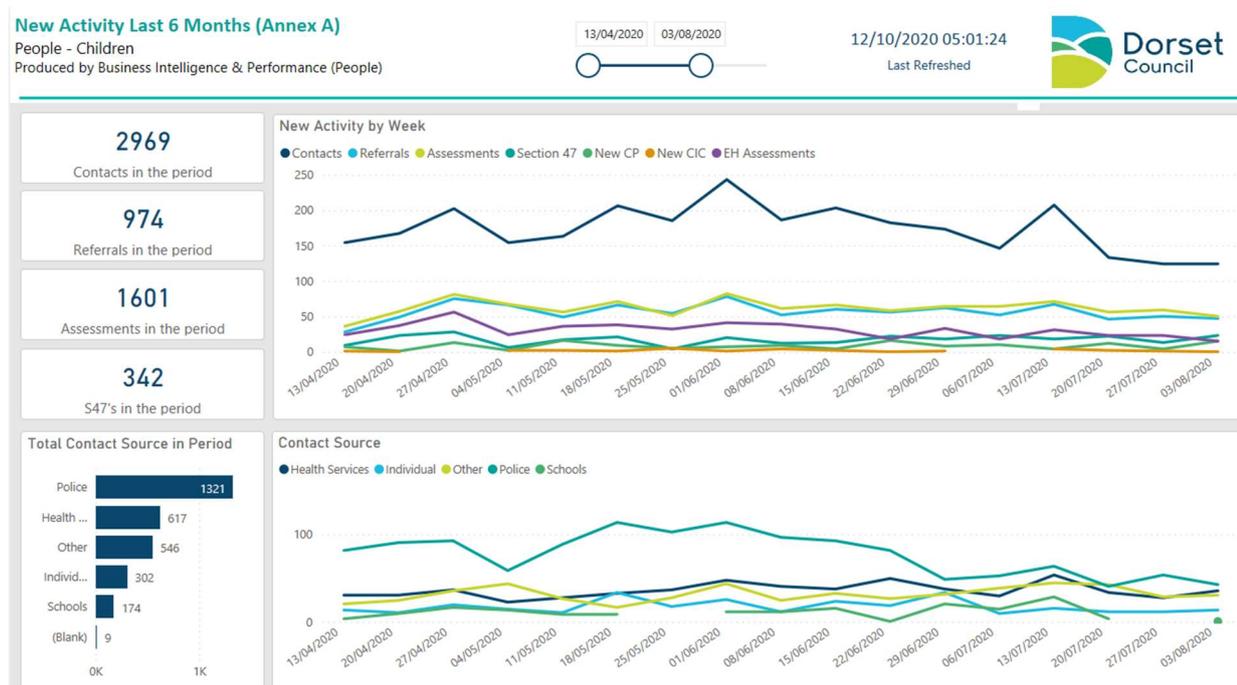


Figure 5: Numbers of contacts and referrals; Contacts by source

During July 2020 there were 695 contacts resulting in 255 referrals. The outcome of MASH information sharing was that 14 children were offered information and advice, 11 children were offered Early Help, 223 children were offered an assessment and 39 children were subject to a strategy discussion. Auditing undertaken during July in relation to decision making following MASH indicated that the vast majority of decisions were well informed by timely responses from partner agencies.

The rate of referrals over the past 6 months has reduced from 611 per 10,000 children to 461 per 10,000 children which is more in line with our statistical neighbours and the England average. Whilst this may have been affected by the Covid 19, we were also predicting a positive impact of the ChAD consultation model and the additional information gathering through MASH. The re-referral rate has also reduced from 26% to 23% over the past 3 months.

e. Contacts and Referrals from the Police

During April to June 2020, we identified a significant increase in contacts from the Police, increasing from an average of 223 per month (Oct 2019 to March 2020) to 395 per month (April to June 2020). Despite this increase in number of contacts, a similar number (73 and 76 respectively) resulted in a decision that a response for children's social care was required.

To address this issue, Dorset Police as of 1st July now prioritise all PPNs based on level of risk identified for a child using a colour coded rating system (Blue, Red, Amber and Green). This has improved the quality of information sharing with children's social care.

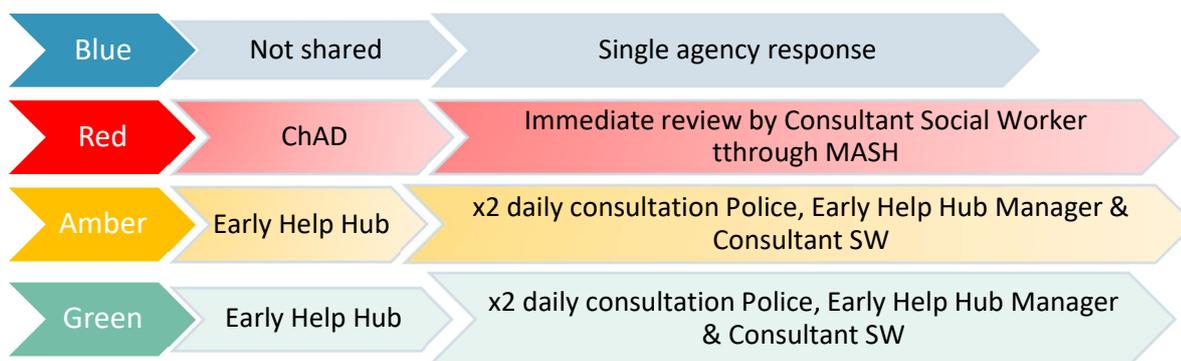


Figure 6: PPNs: Prioritisation and Response

This resulted in the number of Police contacts to Children’s Social Care reducing to 224 in July 2020 (from 409 in June), and the number of referrals remaining comparable to previous months at 83. This indicates that the right PPNs are still going into Children’s Social Care. Police, Early Help and Social Care have provided positive feedback around the benefit of the consultation model being used to discuss PPNs. Whilst the consultation model for PPNs is still relatively new the impact on both the contact and referral rate and the re referral rate will continue to be closely monitored to ensure we are making sure the right service is being provided at the right time.

f. Contacts and referrals from schools

The number of contacts and referrals from schools during Covid 19 decreased on average by 62%. The average contact rate for October 2019 – March 2020 was 136 per month and the average referral rate was 58 children per month, whilst between April and June 2020 the average contact rate from schools was 52 per month and the average referral rate was just 16 children per month. It has been anticipated that when children return to school full time in September 2020, the contact and referrals rates are likely to increase. Our extensive programme of activities in Summer in Dorset and proactive conversations with school and education settings and multi-agency planning has support us in pre-empting the demand at the front door.

g. Summary and next steps

We are closely monitoring the impact of the front door, with weekly oversight reports to the senior leadership team and a real time dashboard to support strong management oversight. We also dip sample for Threshold Audit.

The aim of the changes made in the front door over the past 10 months is to ensure that children are accessing the right support from the right service at the right time. There should be a reduction in assessments that result in no further action, a reduction in strategy discussions that do not require section 47 (s.47) enquiries, a reduction in s.47 enquiries that do not result in a child protection conference. There should also be an increase in the number of Early Help assessments, and planned assessments, Team Around the Family approaches and intervention from partner agencies prior to escalation.

Whilst there has not been a sustained period of stability to enable comparable figures over the last 6 months due to the Covid 19, there is evidence that the changes made to date have had a positive impact on the decision making for children. There needs to be continued evaluation to ensure that we are sharing appropriate and proportionate information to safeguard children, that we are working with consent where appropriate and that we are using information shared to positively impact the outcomes for children and their families in Dorset. This will be achieved through individual case auditing and dip sampling, multi-agency auditing as part of weekly themes meetings and data sharing being fed back to both the Operational (Fortnightly) and Strategic (Monthly) groups for the Front Door.

4.2 Early Help

a. Our approach

Early Help remains an intrinsic part of our new model – Dorset Children Thrive. We have built our new locality teams on our six existing Family Partnerships Zones which is our partnership approach to Early Help. These Family Partnership Zones were established in September 2016 based on school ‘pyramids’ or ‘clusters’ inspired by the Harlem Children’s Zone, where different professionals came together to help and support children, young people and their families. The geographical footprint; ethos of least disruptive intervention first; strong local partnership responses to local need and building on community assets to provide early help is the foundation of all the work we do. Based in local communities, the services and support vary depending on local priorities that are set by partners in the local governance group, the ‘Local Alliance’. Overall governance is through our Strategic Alliance for Children and Young People, where we are continuing to promote early help at the earliest opportunity in universal settings. Although all partners contribute to the early help model, Dorset Council employs a range of early help staff to facilitate partnership working and effective early help, through evidence-based interventions such as the suite of Incredible Years programmes.

Our new model has increased the council’s capacity for early help and SEN support by both increasing the number of frontline practitioners and delivering closer integration of these practitioners to ensure timely assessment and improve our graduated response for children and their families. Furthermore, we are expanding our support to schools and settings through dedicated teams, providing contact points of expertise to our education colleagues. This enables us to build on our established model of proactive support for children, enabling us to wrap around the communities children are part of.

b. Dorset Council’s Early Help Offer

The focus of the council’s early help offer is in four key areas of activity:



Figure 7: Dorset Council Early Help Offer

c. Direct work with Children and Families

As of 5th August 2020, there are 723 children and young people being supported through family work in our locality teams. We have developed a set of Early Help Practice standards to guide our work as our audits identified that Early Help Assessments were not always timely and did not always lead to SMART Early Help / Team Around the Family Plans. We are improving management oversight through the creation of new management information reports that supports managers to be able to understand and track the timeliness of assessment activity.

We are ensuring there is consistent, robust management direction when requests for early help involvement are received, either directly from families or partners, or through the Early Help Hub and that assessment, planning and reviews are supported and progressed through reflective supervision. Our managers are supporting our early help workers and our partners to be professionally curious and continue to be tenacious when seeking to engage families and young people, particularly when support is first requested.

We are improving the timeliness of our interventions and are focused on reviewing cases that have been open for a long time to ensure there is appropriate step down into community services and that families are getting the right support at the right time.

Our Early Help staff play a key role in working alongside families where children and young people no longer require a child in need or child protection plan but need ongoing support at an early help level. We are working with our early help and social care staff and managers to ensure that plans are consistently and effectively stepped 'up' or 'down', with clear practice guidance and procedures in place to add further to the locality model whereby social care and early help staff are part of one team.

Although early days we are beginning to see an increase in the number of Early Help Involvement Requests and a reduction in the number of social care assessments, suggesting that we are supporting our design principle of least intervention first and getting support to families at the right level.

d. Group work

Retention rates for group work have steadily remained at approximately 80% and reported outcomes, using recognised scales, are very positive. We are proud of our implementation of the suite of Incredible Years Programmes. For our evidenced based parenting programmes, all facilitators have attended group supervision provided by a UK Based mentor. This ensures fidelity to the programme and increased the likelihood of positive outcomes for attendees.

Group work was impacted from March 2020 by COVID 19, but we have sustained contact with families and now offer virtual access to professional and peer support, facilitated in partnership with other providers. Our Summer in Dorset programme has enabled a strong connection with our communities, and we are building on this to launch our new model and positive opportunities for children in the places where they live and learn.

e. Supporting partners to undertake Early Help

We provide support to our partners to be able to deliver their early help responsibilities, through the delivery of workforce development as well as advice and guidance. Our "Early Help: Understanding Your Role" training is available to the whole children's workforce and over 230 professionals have benefitted from this, reporting that it has made them more confident about convening Team Around the Family meetings. This has been evident in the steady increase over time in the numbers of Teams Around the Family convened by partners and associated increase in partner agencies undertaking a lead professional role, e.g. in schools, this has gone from 10 in 2016 to 163 as of January 2020, with some disruption since March due to lack of universal access to services during lockdown and reduced opportunities to identify need. Our employees continue attend Team Around the Family processes led by other professionals where this is appropriate.

We are ambitious to measure and identify the type of early help support provided by partners so that we can understand the combined impact of effort in our communities and continuously review and refine our offer to ensure great outcomes for our children.

f. Focus on Early Years

We prioritised children aged 0 – 5 years in our early help responses from January 2020 as we saw increases in younger children needing support through child protection and coming into our care. We have continued to prioritise this age group throughout lockdown and will continue to prioritise, recognising the potential impact of reduced visits to very young children; and potential for reduction in offers at early years settings as well as national trends regarding safe sleeping. We have done this through:

- County wide strategic partnership meetings and locality based operational meetings focusing on the 0 to 5s (initially weekly, now monthly) to identify and respond to emerging issues and families we were most worried about.

- Routine, proactive conversations and information sharing with health colleagues and settings about children needing early help, in each locality
- Prioritisation of children aged 0 – 2 in allocation for direct work by family workers and response to contacts with The Early Help Hub.
- Increasing support to early years settings who are initiating early help
- Making our Children's Centres available to maternity services to enable expectant mothers to meet their midwife in a non-clinical setting and to enable early identification of need

4.3 Dorset Families Matter (Troubled Families)

Dorset Families Matter provides intensive support for some of our most vulnerable families. Working with the whole family across local services, with a focus on early intervention, the programme has a proven track record of driving reforms across public services. Our funding is used to tackle complex inter-connected problems including unemployment, poor school attendance, mental health issues, anti-social behaviour and domestic abuse. By accessing early, practical coordinated support to transform lives for the better, the demand and dependency on costly reactive public services is reduced. Support is co-ordinated through a range of services to identify and address family issues as early as possible.

In the current year the expectation was that we would attach a further 187 families to the programme and could make claims under the payment by results framework for successful outcomes with a further 314 families. The attachment of these families has already been achieved and to date we have made 168 claims and are on target to make 100% of claims by 18th February 2021. Attachment and 100% PBR together will secure income for the programme by the end of the current financial year totalling £438,200 in addition to the infrastructure grant from government for our local implementation of the Troubled Families programme.

The extended year of the programme has of course been rather dominated by the Covid-19 pandemic, however, the experience of the central support team in liaising with our VCS providers and assisting front line practitioners access additional sources of support from these providers has proved to be a valuable asset. This means that throughout the crisis our VCS services were supported and kept delivering services, so our families were able to continue receiving vital Covid safe interventions appropriate to their needs, which in turn extended the reach of our front line practitioners during this very difficult time.

The relationship between Dorset Council and our VCS partners has, as a result, been significantly strengthened, our families have benefitted and been kept safe and our front-line practitioners within our social care, early help and school teams have all felt well supported.

4.4 Children in Need

Our children in need and child protection social work is now delivered by our six locality social work services as part of our New Model – Dorset Children Thrive, enabling closer working with partners and minimising hand-offs between social workers by reducing transfer points. Significantly, it further develops our understanding of local need through improved relationship-based practice with our families and partners.

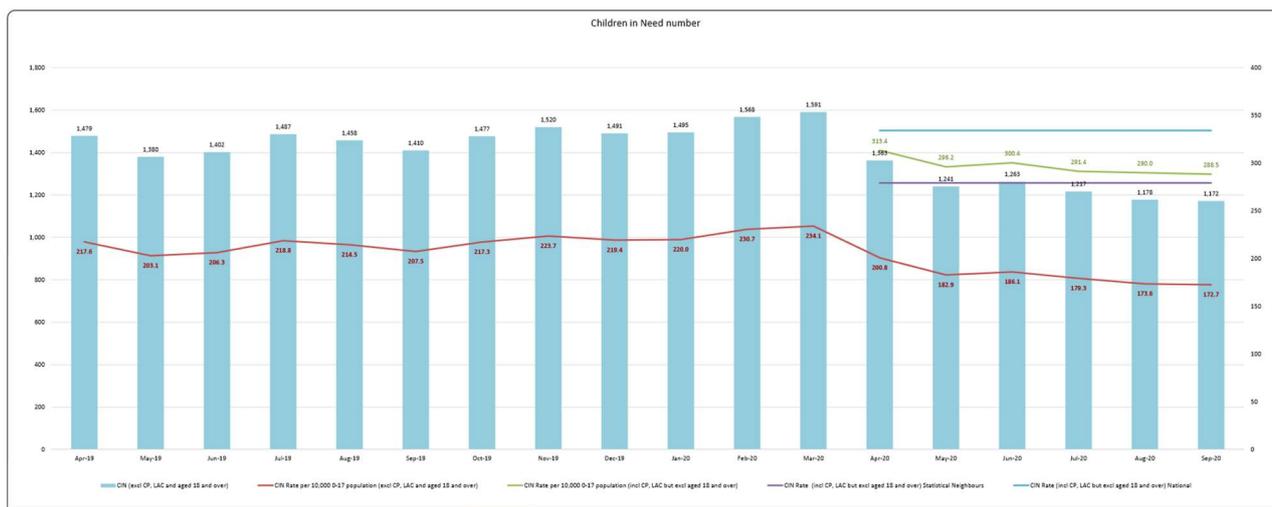


Figure 8: Number of children in need

Our Child in Need (CIN) numbers are gradually decreasing and are in line with our statistical neighbours (292 per 10,000). Our CIN assessments are also reducing as a result of work taking place in the ChAD and ongoing work to embed Early Help. There has been significant improvement in the last four months in timeliness of our social work assessments and our social workers direct work and contact with children and families is a high priority for us. Currently we are completing 90% of CIN assessments within 45 working days. This is to be celebrated at a time of transition, especially as the new model is such that many more social workers now routinely complete assessments than 6 months ago.

We continue to work to ensure consistency in the quality of our assessments; audits show quality ranging between outstanding and inadequate. We are improving practice through the delivery of the Strengthening Services Programme.

4.5 Child Protection

a. Section 47

We have seen an increase in the numbers of s47 investigations (142 per 10,000) in the last 6 months which is now more in line with our statistical neighbours. 64% of the s47 investigations resulted in an Initial Child Protection Conference being convened. 80% of Initial Child Protection Conferences in the last 6 months resulted in a Child Protection Plan.

b. Child Protection Conferences

We have seen a significant improvement in the timeliness of our Initial Child Protection Conferences with 81% being held on time for the last 6 months and in the last 12 weeks 100%. Due to Covid 19, child protection conferences have been undertaken virtually which we are closely monitoring in terms of quoracy to support full contributions from partner agencies and ensure decisions are based on complete and up to date information.

A feedback survey was completed with parents during August which was very positive with: 88% reporting they had been given clear information, 88% felt able to talk, 79% felt listened to, 64% felt involved in the decisions and 58% said the conference had made a difference. We will be moving to semi-virtual conferences by the end of September 2020 with parents, Child Protection Chair and the social worker social distancing in a room together and partner agencies joining by video. This is so that risk of infection is well managed for parents and colleagues while maintaining relationships with parents.

The newly formed service for the Quality Assurance Reviewing Officers (QAROs) commenced on the 1st September 2020. Work has begun to develop a new conferencing model which is a relationship based restorative model. We anticipate that this will support improved Child Protection

Planning and ensure that the right children are on a Child Protection Plan for the right amount of time to achieve the best outcomes for them.

Following a decline in the use of advocacy for child protection in Q4 2019/2020, a more proactive approach has been taken to ensure that children are able to access the service, which has resulted in over a 50% increase in referrals.

c. Child Protection Plans

The rate of children subject to a Child Protection Plan in Dorset is 41 per 10,000. The percentage of children who are made the subject of a Child Protection Plan for a second or subsequent time ever, in the last 6 months is 21%. We can see that 23% of Child Protection Plans ended less than 3 months and 17% ended between 3-6 months both of which puts us higher than England and statistical neighbours. We are undertaking dip sampling of those children newly becoming subject to a Child Protection Plan, those who have had a review Child Protection conference and those whose plan has ended to ensure we have a confident understanding of our practice in this area.

d. Child Protection Visits

We continue to scrutinise and monitor timeliness of Child Protection visits. 96% children were seen in the last 4 weeks, 4% were newly subject to a plan and had not yet received a visit in less than a month. While the frequency of contact with our children is strong, we are not always seeing children on their own (40% not seen on their own). Of those not seen alone 56% are age 4yrs or under. We are focusing on ensuring that wherever possible children are seen alone.

e. Summary and next steps

We are focusing on strengthening our approach to conferencing through the development of the Quality Assurance Reviewing Officer Service and bringing Family Group Conferences at the earliest opportunity. This is aligned with our new practice framework which will deliver a restorative and strengths-based approach.

4.6 Children Who are Disabled

a. Our approach

We have a dedicated service for children who are disabled which is delivered by three social care teams, one Early Help team and an occupational therapist team. The Children who are Disabled Service (CWAD) are actively involved with 9% of the total Child in Need group, 3% of the total children subject to Child Protection planning and 9% of our total Children in Care population in Dorset.

July 2020, 512 children were receiving a service from CWAD 92 of which are supported by more than one worker in the service i.e. a Social Worker and Occupational Therapist.

- 146 children are allocated to an Occupational Therapist
- 80 children are allocated to a Family Worker
- 219 children are supported by a Social Worker
 - 47 are children in care
 - 6 are supported by a child protection plan
 - 166 are supported by a child in need plan
- 159 children are accessing direct payments.

We also provide a residential provision for children the Cherries (see above) is currently judged as 'Good' by Ofsted.

b. Impact of Covid-19

Many of the children and their families that we work with found the Covid-19 restrictions and shielding requirements during the initial lockdown period very challenging. This was predominantly due to the change in routine and levels of the children's comprehension of what was happening. In

addition, many of the children were not able to access their usual educational settings so this placed additional pressure on their families and support networks. This was also impacted by the reduced availability of care workers able to enter homes to provide much needed care or respite for parents. For families who were shielding we signposted to appropriate resources to ensure they had access to shopping and medication.

We have worked closely with families and where needed, have taken steps to increase support levels to children and their families such as increasing direct payments and short break provision. The launch of *Summer in Dorset* also offered community-based activities to children and families we are working with.

Children with significant learning difficulties have found face to face visits where staff are wearing PPE or having to socially distance challenging. Children have also found the changes in routine unsettling primarily around the disruption in school attendance.

c. Co-production

CWAD worked closely with Dorset Parent Carer Council and multi-agency partners through weekly virtual meetings to inform updates being sent to families via our weekly co-produced newsletter. We have worked with multi agency professionals to ensure strong working relationships during the pandemic. This has involved virtual meetings and working groups such as fortnightly Special School liaison meetings and Short Breaks monitoring and development group the NHS Dorset Continuing Healthcare (Eligibility) Panel.

d. Short Breaks

The reduction in access to school provision led to additional pressures on families and an increased reliance on services such as direct payments and short break provision leading to challenges for service providers in prioritising places and working with a reduced workforce of care workers.

We are working to develop an in-house respite offer from our fostering services and there is a working group with DPCC to explore how best to develop our short breaks offer.

e. Summary and next steps

There will continue to be routine meetings between social care and education services at a local level as part of Dorset Children Thrive to promote more collaborative responses for children and families and to ensure the wider needs of this cohort of children across services is as efficient and timely as it can be.

4.7 Domestic Abuse

a. Our approach

Dorset Council commissions an integrated domestic abuse service, which is provided by You First. The service offer consists of outreach, accommodation-based support, helpline and behaviour change workshops. Going forward we are aiming to work with partners to take a whole systems approach to how we design and commission services. This work is at an early stage where we are seeking initial commitments from Domestic Abuse commissioners of other local services such as the Office of the Police and Crime Commissioner and the Police.

b. High Risk Domestic Abuse Model

In response to several Domestic Homicide Reviews the arrangements for High Risk domestic abuse responses were reviewed in 2019/2020. The High-Risk Domestic Abuse (HRDA) model of daily meetings were piloted from February to April 2020. The core principles of the new model of working with high risk victims of domestic abuse are:

- Faster, coordinated and collaborative response to the whole family affected by domestic abuse, including perpetrators and children

- Support and interventions to manage risk are provided closer to the timing of the incident
- Consistent threshold is applied to high risk domestic abuse cases
- Specialist domestic abuse worker ensures the voice of the person is represented at the planning stage

The model has clear measurable outcomes which include:

- A simplified process that enables practitioners to respond to disclosures in timely way and supports defensible decision making
- A model that is efficient, effective, takes advantage of digital solutions and based on evidence of best practice
- Addresses the unique needs of all families with protected characteristics
- Utilises existing resources to provide better outcomes

Between February and July 2020 there were 269 high risk cases discussed at HRDA, with 65% (176) involving children within the home. On average this is 2 – 3 cases discussed per day. The level of domestic abuse referrals has increased during the Covid 19 pandemic and this is reflected with a peak in referrals for HRDA in July 2020.

HRDA meetings take place 4 days per week – Monday, Tuesday, Thursday and Friday. There is also a monthly High Risk Domestic Abuse Plus (HRDDAP) meeting where cases in which the risk has not reduced are reviewed. The pilot was reviewed in July 2020 and agreed by partner strategic leads as the preferred local multi-agency information sharing model for high risk cases of domestic abuse. Partners continue to monitor the effectiveness of the model and the impact it has on families via the Quality Assurance and Strategy Group.

c. MASH information sharing

The implementation of Multi Agency Safeguarding Hub (MASH) information sharing within the Children’s Advice and Duty Service (ChAD) has also provided some opportunities to consider how MASH and HRDA can be streamlined to avoid duplication of effort for partners, but also to ensure more efficient and effective decision making and safety planning for families where there is high risk domestic abuse. There will be further exploration of this towards the end of September 2020, once HRDA auditing has begun and the MASH functions are fully embedded.

d. Parental Conflict

We recognise that children experiencing frequent, intense and poorly resolved conflict between parents or carers, whether in a relationship or separated are at risk of poor outcomes and research shows that other interventions to support families are likely to fail when conflict is unresolved. We know that there are areas in Dorset where family breakdown exceeds national averages, for example, in Weymouth and Portland and we have taken a leadership role with this issue, alongside the Department for Work and Pensions by overseeing the Happy Families, Happy Futures programme, across the south-west. A programme designed to improve communication and ease tension between parents or carers, supporting a happy environment for their children.

Through practitioner training we are seeing an increase in confidence across the children’s services workforce in developing a professional curiosity around the parental relationship. Referrals have been steadily increasing and during Covid-19 the delivery swiftly moved to virtual delivery, both on a 1:1 and group basis, which has facilitated greater take-up by fathers.

Dorset Council is working on a range of interconnected approaches to use the valuable understanding of early identification and appropriate levels of support to inform legacy planning. This includes further embedding of the agenda within Early Help and the development of a complete toolkit that captures the child’s and parents voice when assessing and supporting parental conflict.

e. Conclusion and next steps

We know we have more to do to ensure our practitioners consistently identify different types of domestic abuse and to build on initial work to promote the range of Domestic Abuse Support services available in our area so that our staff are able to respond effectively with the right support for children and families. Through our Strengthening Services Plan we are working closely with the Community Safety Partnership on a range of actions to strengthen our partnership approach including the implementation of a Domestic Abuse Toolkit and increasing our range of interventions for perpetrators.

4.8 Pan Dorset Youth Offending Service

a. Our approach

The Youth Offending Service is a pan-Dorset partnership comprising Dorset Council, Bournemouth, Christchurch and Poole Council, NHS Dorset CCG, Dorset Police and the National Probation Service Dorset. The Youth Offending Service is a multi-disciplinary team which includes youth justice officers, police officers, probation officers, Child and Adolescent Mental Health Service nurses, a speech and language therapist, a part-time psychologist, parenting workers and restorative justice practitioners. The Youth Offending Service has two office bases, one in each local authority. The Dorset team is based in Dorchester, co-located with some of Dorset’s specialist education services and on the same site as one of Dorset’s alternative education provisions.

Designated Youth Offending Service staff have access to the Dorset Council Mosaic system to support integrated working, assisted by strong working relationships with social care and early help colleagues at practitioner and manager levels in the localities. The service is engaged in the planning and development of ‘The Harbour’ (Adolescent Residential and Outreach Service) alongside North Yorkshire as Partners in Practice.

b. First Time Entrants to the Youth Justice System

The rate for first time entrants has reduced after an increase in the period April –Mar 2020. While it is positive to see the rate returning to previous level, we remain ambitious to reduce this even further.

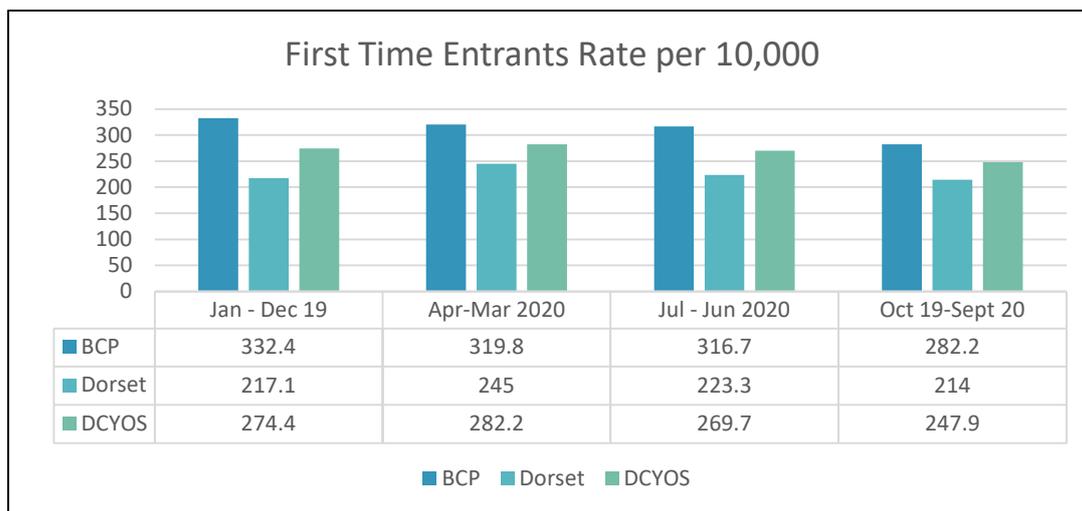


Figure 9: Dorset Combined YOS Local 1st Time Entrants Rate per 10,000 pop

The highest number of first-time entrants are White British, male, and aged over 17 years.

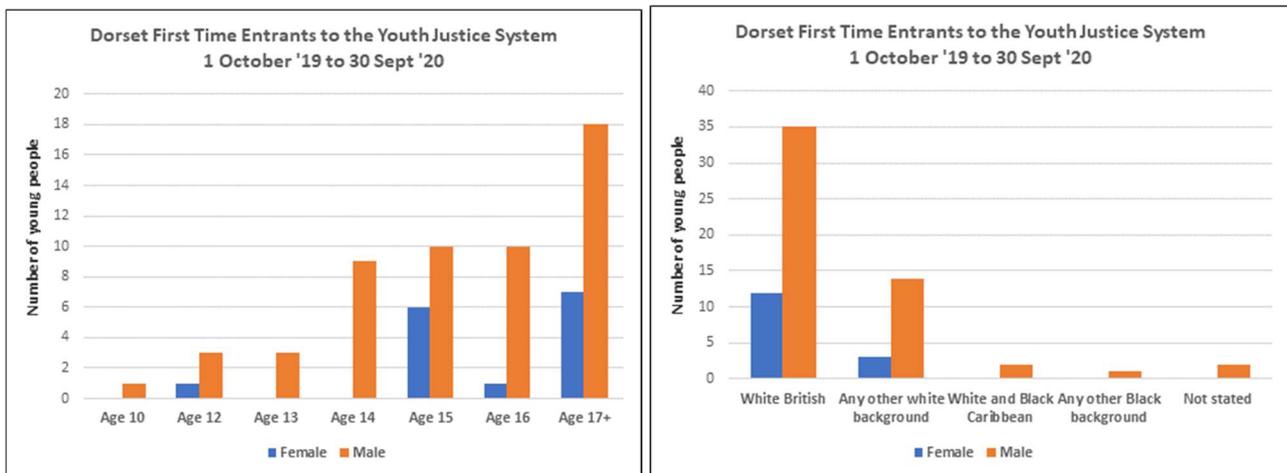


Figure 10: Gender, Age and Ethnicity of Dorset 1st Time Entrants

The Youth Offending Service obtained NHS England funding for a Speech and Language Therapist and to support the introduction of trauma informed practice. The Speech and Language Therapist joined the team in March 2018 and has had a transformative impact in improving the team’s individualised responses to young people. A 4-month pilot saw all new young people being assessed by the Speech and Language Therapist. About 80% of these assessments identified some level of speech, language or communication needs, with recommendations for the young person, for YOS workers, other professionals and for family members about how best to respond to the child’s needs. All written materials have been adapted to make them more accessible and work has been undertaken with local police and court professionals to increase their understanding.

c. Developing the workforce

In February 2020 all YOS practitioners attended 3 days of training in the Trauma Recovery Model which is now being implemented in the YOS. The most complex young people are considered in multi-agency case formulation meetings led by the YOS Psychologist. This leads to coordinated case planning for all professionals that is responsive to the child’s developmental stage, with clinical supervision and case reviews built into the model. The YOS is also committed to applying the trauma ‘lens’ to all young people on its caseload, not just those who are considered in a case formulation meeting.

d. Conclusions and next steps

The current priorities for Dorset Combined Youth Offending Service are to reduce the number of first-time entrants into the youth justice system and to enhance the tailored individual response to those children that do enter the justice system.

Dorset Combined Youth Offending Service and Dorset Police are working on additional options for informal responses to low level offending, such as Youth Restorative Disposals, so that young people are not criminalised unnecessarily.

4.9 Children in Care

a. Our approach

Children in care are supported by social workers across locality teams, although some are supported by the children who are disabled (CWAD) service. Within the Locality Teams we have created 3 locality-based permanence teams to support our children in care from 0-18 years of age. The creation of permanence teams embedded within our new place-based structure seeks to ensure that our children in care have a managed transfer at the right time for them ensuring stability whilst maintaining a focus on their needs when permanence has been achieved.

b. Our children in care

We have seen an increase in the number of children in our care (485); 71 per 10,000 currently compared to 54 per 10,000 in 2018/19 when we were in line with our statistical neighbours.

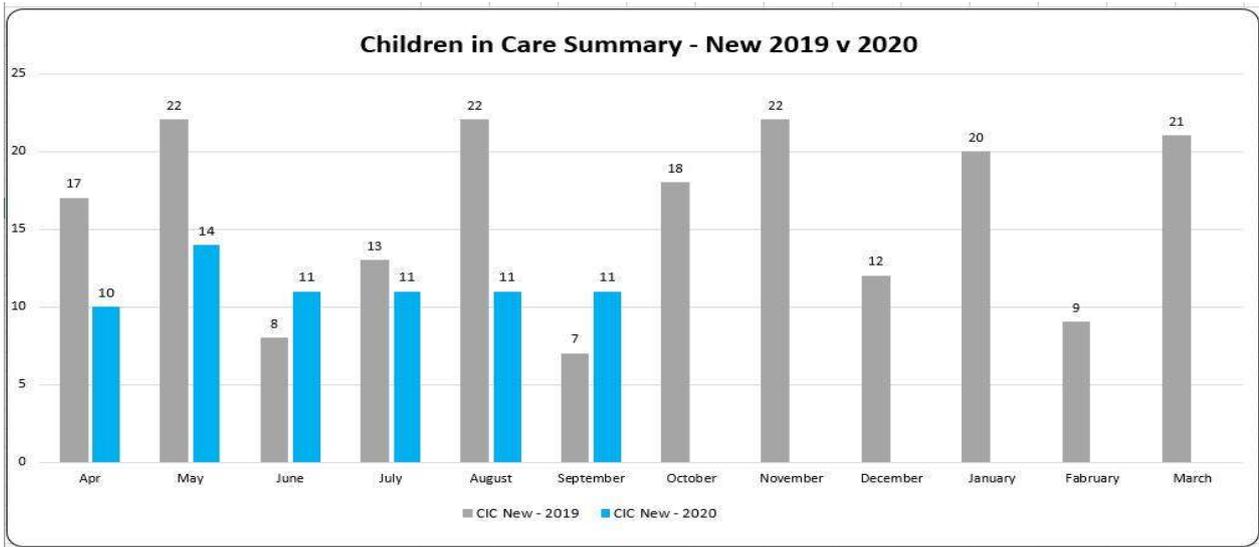


Figure 11: New Entrants to Care (2019 to 2020)

While new entrants to care remain fewer in number than last year, we know that children who enter remain in our care for longer.

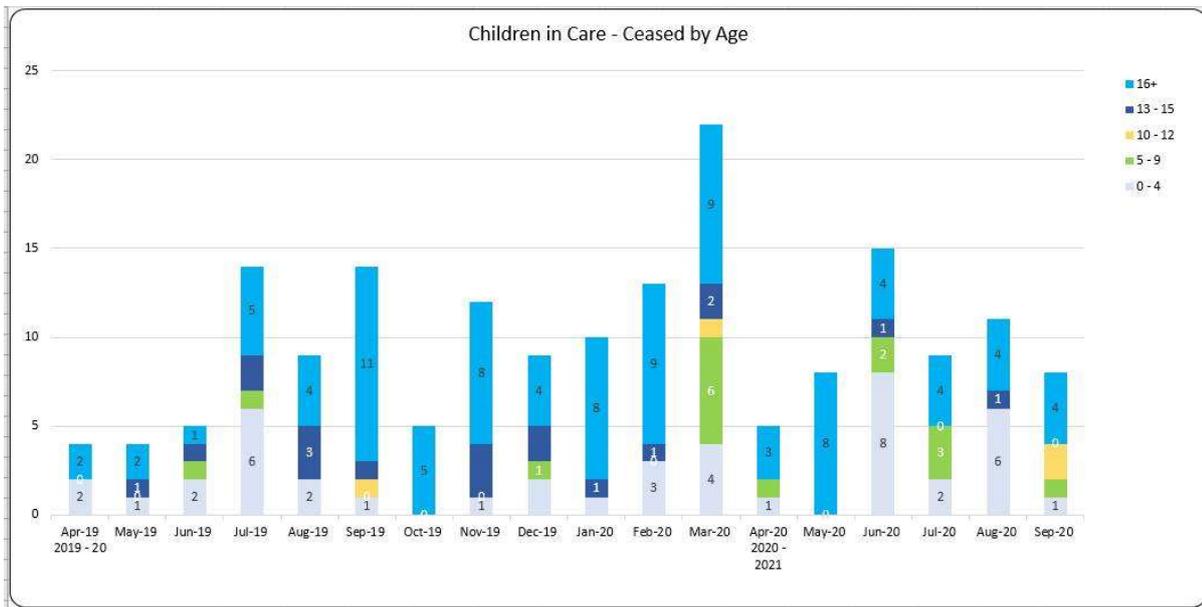


Figure 12: Children in Care ceased by age

We have sustained a change in the profile of new entrants to care to a decrease in the number of young people aged 15 years and above and an increase in the number of 0-4-year olds.

We have strengthened our approach to decrease the number of children entering care in an unplanned way by improved line of sight and analysis of crisis entry to care in the weekly Locality Line of Sight Meetings. The development of The Harbour Adolescent Service has commenced so that we can undertake intensive work for young people at the edge of care, edging towards care and supporting placement stability. Further work is also being undertaken to embed care and permanence planning as we know we have more to do here. This will support us in ensuring that the best outcomes are secured for children and young people.

Despite the challenges of the pandemic in maintaining face to face contact, we have been making sure that we continue, wherever possible to keep in touch with and visit our children in care. Our social workers are using technology to stay in touch, and we are working closely with foster carers and placement providers to safely visit in a Covid secure way and reducing unnecessary footfall where possible by coordinating visits by professionals. Almost 85% of our children in care have been seen in the last six weeks and 14% in the last 6 to 12 weeks. Throughout Covid 19 we have also tracked social work contact with children within 4 weeks and on 13/7/2020 87% children had been contacted in the last 4 weeks.

c. Health Assessments

Overall, our practice in ensuring we understand the health needs of children entering our care is improving, with improvements in timeliness of gaining consent for Initial Health Assessments as a result of increased management oversight and weekly monitoring.

There was a drop in the timeliness of completion of Initial and Review Health Assessments in April 2020 due to the health team being redeployed to support other health colleagues during the initial phase of Covid 19. However, data supplied by NHS Dorset CCG shows that this has improved from 50% completed within statutory timescales in April to 82% in June 2020. Timeliness of completion of Review Health Assessments has also strengthened from 71.4% completed within statutory timescales in April to 91.3% in June 2020.

Almost eight per cent (77%) of children who have been in our care for at least 12 months have an up to date health assessments and 68% of children who have been in our care for at least 12 months have had a dental check in the last 12 months.

We continue to work with health partners and will look to ensure that records held by both services reflect accurate performance.

d. Emotional Wellbeing and mental health

We have a Child in Care Psychologist based in the council who works with our looked after children and their carers to ensure that we have a good understanding of the therapeutic needs of our children and that the placement can meet the identified needs. In addition, there are psychologists based in the NHS. There has been a rise in the numbers of requests for support, advice and guidance to foster carers from the Children in Care Psychologists which has had an impact on their offer. One off consultations have more often been provided rather than a series.

Systemic work such as family therapy for families where children may be on the edge of care has been restricted due to being limited by the virtual platforms. While this has continued to be offered virtually during Covid 19, the take up has been poor and impact is limited.

There are a number of different pathways of support for our children in care. Core-CAMHS prioritises access for children in care, offering a 24-hour response for urgent referrals and an 8-week response for all other referrals. Digital platforms were developed quickly during the initial phases of the pandemic to support young people and the website was updated with signposting and podcasts. Of our children in care in July:

- 111 were receiving services from Core-CAMHS (99 in Feb 2020)
- 17 supported by an Emotional Wellbeing Practitioner from our Children in Care Nursing Team (13 in Feb 2020)
- 10 were receiving a service from ID-CAMHS (for children with learning disabilities and mental health difficulties)
- 2 children received support through an emergency assessment unit (set up during Covid for children needing a crisis response or significantly self-harmed)

The mental health pathway is currently being reviewed and an early intervention emotional wellbeing pathway is being developed.

Regular communication has taken place between CAMHS and Education Psychology throughout our response to Covid-19 to raise children and young people of concern and those who were deemed to be more vulnerable as not in school or requiring support to return to school. Education Psychologists followed up with the schools to support in reviewing risk assessments and providing support and guidance to the school and in some cases the family.

e. Achieving Permanence

We have improved our performance in ensuring all children in care have a Permanence Plan. The graph below shows recent performance across both areas.

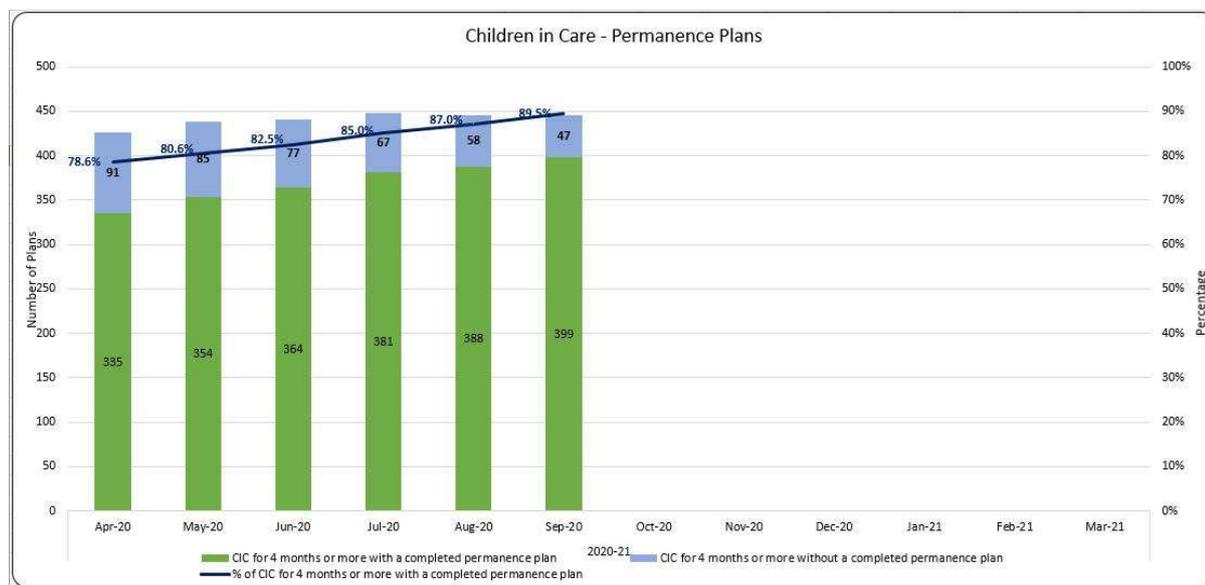


Figure 13: Children in Care Permanence Plans

Our focus remains on the quality of care and permanence planning to ensure that planning for our children is current, clear and being progressed in a timely way with our QARO's (Quality Assurance Reviewing Officers) driving forward plans for children. From a low baseline earlier in the year, 85% of children now have a permanence plan and attention is being paid to strengthen quality and reduce the number of children where there is drift in achieving permanence. The Service Manager for Permanence and Corporate Parenting is leading on the delivery of workshops to all staff to strengthen practice and rigorous oversight is being delivered through the weekly Locality Line of Sight Meetings.

f. Finding the right homes for our children

Placement stability has been an improving picture at 68% which puts us within range of statistical neighbours (18/19 68%) and national (18/19 69%). We recognise that there is more to do in enabling our children to achieve permanence earlier and ensuring that stability is maintained.

We have increased the use of regional provider frameworks, resulting in improved quality and value from placements. While 70% of our children in care are living with foster carers, 63% in our own provision, we know that we have too many children who are placed away from their local area and are not yet settled in their permanent placements. 38% of children in our care are placed over 20 miles from their home address. We recognise that being placed away from local areas can mean a change in school, friendship groups and community relationships which can be disruptive and impactful on achieving positive outcomes and ability to build attachments. Recruiting local carers for local children is central to our Sufficiency Strategy.

We have experienced issues with placing some of our children and young people who have the most complex needs, resulting in the use of a small number of unregistered provisions. Where this has been the case, there has been robust oversight of the placement, including enhanced visiting

from social workers, Independent Reviewing Officers and Regulation 44 visits being undertaken despite the absence of registration. The outcomes described within these visits are reviewed by the Executive Director and Elected Member on a weekly basis, and a task and finish group is in place to ensure that we cease to use any unregistered placements for looked after children. We have four young people remaining in unregistered placements (as of 28/08/20). We are seeking to register one home ourselves and have established a block contract with a local children's home provider to register two others. The remaining placement is not viable as the provider has not been able to secure planning permission and cannot take registration forward. We are working with our young person to find a new suitable registered home. The Executive Director has met with regulatory Ofsted in respect of these plans.

We are moving at pace in working with our providers and with our politicians to address our sufficiency gaps so that more of our children and young people can stay close to their homes and families. We are increasing placement stability through greater placement sufficiency, including expanding in-house residential provision, and implementation of a plan to increase our fostering provision and support to foster carers. This plan is focused on increasing the volume and skill-base of our in-house foster carers in order to provide greater sufficiency and stability. This includes strengthening our marketing and recruitment processes to improve commercial appeal and application experience. A focus on peer-support, meaningful engagement, accessible training and a defined model (e.g. Mockingbird) will support the retention and capacity building of our existing carers.

We will increase the availability of local residential care and children's homes by:

- Building a new children's home in Weymouth by September 2021 for up to 5 young people, who need longer term residential care.
- Working with partner organisations to expand the range of residential care in Dorset. We will encourage existing partners to develop this provision and block contract the homes. We will also tender to offer Dorset Council properties to be developed as new independent sector children's homes for Dorset Council's exclusive use under 'block contracts', along with a lot to enable new providers to contract with us.
- Review our children's home for children and young people who are disabled and look at how the service can be provided differently – exploring the potential to deliver the service in less institutional homes, and linking the service with dedicated foster carers and short breaks providers to deliver a graduated response.

g. Voice of our children in care

We have an active Children in Care Council, supported by a Commissioned Service, Participation People. The Children in Care Council are engaged with the Corporate Parenting Panel and there is good engagement of Senior Officers with the Children in Care Council. During Covid we continued to meet fortnightly with a focus on keeping in virtual contact touch and maintaining support for members, playing games and taking part in fun activities. The Children in Care Council is currently a small group of young people and a focus of the work this year will be to increase the representation and attendance at the group so there is a greater reach to more children in care. Feedback has been received through the annual Children in Care Council and a learning event has taken place on 3 September to explore the feedback received and agree action to be taken.

Our Corporate Parenting Strategy 2020-2023 has been co-produced with our Children in Care Council (CLiCC). Our children in care continue to hold the Corporate Parenting Board (CPB) to account through challenge cards which are tracked and CLiCC monitor the actions and re-challenge where necessary. Our Service Manager for Corporate Parenting is working closely with Participation People and CLiCC ensuring improved co-production within the organisation.

We commission Advocacy and Independent Visitor services for our children in care through Action for Children (AfC). During Covid 19 staff have operated at full capacity and met the growing

demand for the service. Between April and June 2020 AfC have delivered 161 episodes of advocacy support. This is 103% increase on the previous quarter.

h. Independent Visitors

28 young people (5 young people living out of county) were supported by having an Independent Visitor during the year 2019. We currently have 17 young people matched with an Independent Visitor – most of the contact between young people and their Independent Visitor during Q1 has been by phone, text or video chat. During Covid 19 it was not possible to progress with matches in the usual way. Contact with young people who are waiting to be matched has mainly been through phone calls although face -to-face meetings with young people are now being resumed.

In Q1 2020, the feedback from young people remains positive in terms of the service provided with 100% of young people reporting they were very happy with their Independent Visitor.

We know we need to do more to ensure that all young people that could benefit from an Independent Visitor are aware of and understand how to access the service.

i. Summary and next steps

Going forward will see the strengthening of our work with children and families through the embedding of multi-disciplinary teams providing early support to families to reduce the need for children to come into care.

Our work with older children will be strengthened through the introduction of the Harbour Adolescent Service providing intensive support through Targeted Youth Work (Contextual Safeguarding).

Reducing the number of case transfer points and supporting consistency of worker will see stronger relationship between social workers and their children who they will be able to support throughout their involvement with children's social care services.

4.10 The Harbour

We are implementing a different way of supporting and providing care to our young people at The Harbour in Weymouth and Portland. The Harbour programme is based on the successful *No Wrong Door* model and replaces traditional young people's homes with hubs which combine residential care with fostering, outreach support, and supported lodgings. The hub will have a dedicated multi-disciplinary team which will work with young people on the edge of care, edging towards care, supporting placement stability and reunification – working with families on a strengths based, relationship based, restorative model in a shared approach with partner agencies. Every young person in The Harbour will be supported by a key worker from a team of trusted and skilled workers. These workers will stick with the young person through thick and thin to access the right services at the right time and in the right place to meet their needs.

We have secured capital investment to develop an existing council building and are currently seeking planning permission for both a 2 bedded Harbour Hub and support /assessment space and a separate 5 bedded residential home. We will co-produce the accommodation and delivery model with young people.

As part of our New Model – Dorset Children Thrive and in anticipation of these developments, we have created a team of family workers to begin working with young people and their families in a different way to prevent care entry and reunification. We have also created a complex placements team in our fostering service. Both these teams are to help create operational capacity to move to a new model of delivery by Winter 2021.

4.11 Missing Children and Children at Risk of or Linked to Exploitation

a. Missing children

There has been a reduction in the numbers of our Children in Care having a missing episode in the last 12 months- 14% (previously 17% reported in Self-Assessment February 2020). While we have a downward trend in the number of children with a missing incident each month, both for all children and our children in care, we know we have more to do to strengthen our work with all children who are reported missing.

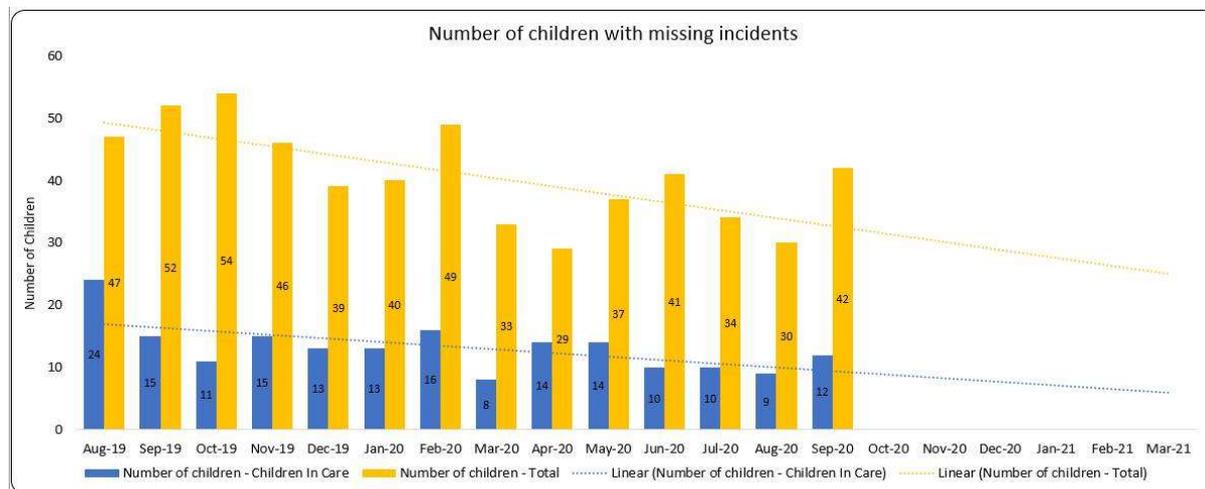


Figure 14: Number of children with missing incidents

b. Return Home Interviews

Between 1st March and 31st August there were 333 incidences of missing involving 141 children of which 37 were children in care. Return home interviews were offered in 219 incidents and 150 RHI's were completed in this period with 88 children engaging with at least one RHI (62% of all children). 62 RHI's were completed within 72hours of the child returning although 126 were completed within 3 days of notification of return. There has been a reduction in the completion of RHI's offered and timeliness of RHI's completed during the Covid 19 pandemic. In part this was due to how missing episodes were being reported and recorded.

Since August 2020 the return home interviews have been undertaken by the new Harbour Outreach Adolescent Service. We are now seeing a strengthened service with improvements to timeliness and engagement with young people in completing Return Home Interviews. From 7th September there have been changes made in ChAD around the recording of missing notifications which will also improve the timeliness and response to missing children. We are also working with Police to also identify ways of improving the timeliness and accuracy of missing notifications and return notifications.

Moving forward we are working to ensure we are offering preventative work at the earliest opportunities to reduce the number of missing children and missing episodes. We are strengthening our systems and processes to ensure that the themes arising from return home interviews are captured and shared to consider how we prevent and protect missing children. We are currently updating our guidance and protocols around missing children to reflect our new locality model and The Harbour Outreach Service to ensure the right response is offered at the right time.

We are also working with Police colleagues to implement the Philomena Protocol for all missing children across Dorset and this will replace the current missing passport for children who are known to go missing.

c. Children at Risk of or Linked to Exploitation

Children and Young People who are at risk of exploitation continue to a focus of our work since the JTAI in May 2018. To strengthen our practice, we introduced the Children At Risk of or Linked to Exploitation (CAROLE) Model in April 2019. A 12-month fixed term Pan Dorset Child Exploitation Transformation Lead role was in post between October 2019 and August 2020 facilitating engagement across the partnership to develop and promote the child exploitation toolkit.

Multi agency mapping has been undertaken to identify the children and hotspot areas of concern for child exploitation taking into consideration: missing episodes, individual Child Exploitation risks assessments, children missing education, children who have experienced fixed term exclusions and health. The mapping has identified that 7 out of the top 10 hotspots are in the Chesil area of Weymouth and Portland, 2 are in North – Sherborne and Gillingham and 1 in Purbeck – Bovington.

On 31st August 2020 there were 86 children identified as at risk of or linked to exploitation across the county– 20 significant risk, 53 moderate risk and 13 emerging risk. 64 children have had a Multi-Agency Child Exploitation (MACE) review meeting within the preceding 3 months. MACE meetings should take place every 6 weeks where significant risk is identified and every 12 weeks where moderate risk is identified. There were 5 children whose risk increased within review period and 25 children whose risk decreased during the review period.

There is more to do to strengthen practice and ensure that themes and intelligence relating to child exploitation are shared and coordinated from individual children’s MACE meetings to inform the Operational Impact meeting and the CAROLE Tactical group. We are developing the roles of Child Exploitation Champions within each locality area to drive the co-ordination of themes and intelligence sharing from an individual child level and locality level into the partnership through the Impact meetings and CAROLE Tactical group. The role of the Child Exploitation Champions will be to share and disseminate intelligence and themes relating to child exploitation and support the Prepare, Prevent, Pursue and Protect delivery plan. 4.12 Adoption

4.12 Adoption Services

Adoption Services are provided through the Regional Adoption Agency (Aspire), which serves the Dorset Council and BCP Council areas. Aspire has been in place since July 2017. Dorset Council retains the Agency Decision Maker responsibility.

From 1st April 2019 to 31st March 2020, 60 adoptive families were approved. The sufficiency target for the year was 50, based on placing 60 children a year for whom adoption is the plan.

21 prospective adopters have been approved in since 1st April 2020, and at the time of writing, a further 30 prospective adopters are in assessment, with an additional 9 families taking a break between stages 1 and 2 of the assessment. It is expected that a further 6 families will be approved before the end of Q2 2020-21.

8 children who have ceased to be looked after in the last six months have been adopted. 3 of the children were 5 years or older. The average number of days for a child to move to their adoptive families from coming into care in the last 12 months was 435. There are a further 18 children in care in an adoption placement where an order is expected in the next few months.

The increase in number of children where the child’s plan for adoption has been changed was considered and reported to the Aspire Strategic Partnership Board. It reflected work in Dorset to ensure that the children had the correct permanence plan where their needs had changed, or it was not possible to identify adopters. Aspire will be working alongside Dorset in the Strengthening Services Plan to confirm reasons for changes in adoption plan and reasons for Special Guardianship breakdowns.

A review is being undertaken with Aspire to fully consider impact and outcomes for children within the existing RAA to support future plans for service delivery. This will be completed by January 2021.

4.13 Care Leavers

a. Our Care Leavers

We currently have 262 young people receiving leaving care services, and we know that this number will significantly increase by end of August 2021 with 91 of 16/17-year olds already present in our resident care group.

In addition, we have 121, 21-25-year olds for whom we have a duty to keep in touch with annually and who can return to receive an active service should they need support. We therefore have a total of 474 eligible and former relevant care leavers for whom we offer a level of leaving care service

Most of our young people (86%) remained in care until their 18th birthday. While this is an improving picture, we know not as many of our young people are benefiting from Staying Put arrangements as we would like. We continue to look at how we are supporting foster carers to continue to provide a safe and stable home for our young people after they turn 18 and into adulthood.

b. Keeping in touch

We are in touch with most of our care leavers between 19 and 21 years of age (93%) and our 17 and 18-year-old young people (92%). During Covid 19 we were in touch with nearly all of our care leavers weekly. Of the 262 relevant and former relevant, we were in contact with 257 (98%) during this period. Of the 5 young people we were not in contact with, one care leaver has elected not to have contact with us, 2 care leavers have no right to remain living in the UK (appeal rights exhausted) and have not responded to attempts to contact them and 2 are living with family and don't want us to contact them.

c. Finding the right place to live

Whilst most of our care leavers are in suitable accommodation (92% of 19 to 21-year olds) we know we need to do more to ensure all our care leavers have safe and stable accommodation that meets their needs. To date we have no local authority housing allocation from our Dorset housing providers, and we need to drive this work forward to secure affordable long-term housing for care leavers.

A report went to Cabinet in March 2020 recommending the creation of additional supported accommodation for care leavers. Dorset Council are now in the process of purchasing accommodation to provide a range of accommodation offers to meet the needs of our care leavers.

Work is also ongoing with Adult services to reconfigure the former young people's supported accommodation contract. This is a former Supporting People budget which could be combined with existing spend on care leaver accommodation to increase purchasing power. There is now a sub-regional framework for supported accommodation for care leavers.

16 out of 262 care leavers are living in unsuitable accommodation. 2 in custody, 2 residence not known, 8 in emergency and B&B accommodation placed through Homelessness legislation, 4 are in unstable accommodation staying with friends. Short term use of bed and breakfast provided by the Housing Department to exercise their duties under the Homelessness legislation to avoid homelessness is generally considered suitable.

For the 8 care leavers who have been placed in emergency accommodation, including B&B, under the Homelessness legislation, PA's work closely with the Housing officer and care leaver to help them move on as quickly as possible into secure affordable and suitable housing.

One of the major challenges due to COVID19 has been a delay for move on within both the private rented and home choice housing sectors. Limited private rented properties were advertised during this time and there were also COVID19 restrictions in place which prevented moving. The home choice bidding system was closed temporarily due to COVID19, preventing any bids on local housing association properties until this re-opened mid-July 2020. The impact of these delays and other emergency measures taken during COVID19 includes a current processing time of up to 16 weeks for housing register applications meaning that new applicants are unable to access the home choice system until their applications are completed.

The impact of COVID19 delay will begin to reduce as colleagues in our Housing Departments are able to catch up with volume of work and demands, and the private housing sector become more confident to advertise properties once again.

d. Employment, Education and Training

Despite being in touch with most care leavers, we are not supporting enough of our young people to be in education, employment or training, with 50% of 17/18-year olds and 44% of 19 – 21-year olds accessing education, employment or training. This is area where we need to strengthen practice and will be working with our partners to improve our offer for young people leaving our care. This reflects a diverse group of young people whose needs are complex due to a number of factors including disability, mental health, use of substances which disrupt opportunities in terms of education, employment or training and coming late into care due to family breakdown having already disengaged from formal education.

There are achievements to celebrate. We currently have 31 care leavers at University and 2 dedicated Personal Advisors (PAs) working with care leavers who are studying at University to ensure that our undergraduates maintain their places in their education settings. We are delighted in the achievements of our 9 young people who graduated this year in the following:

- Forensic IT - Bournemouth University
- Social Work - University of Plymouth
- Biomedical Science - University of the West of England with a placement year at Virginia University in the US
- History - University of Kent
- Musical Theatre - The London College of Music
- English - University of Birmingham
- Politics – University of Westminster
- Music Production – Academy of Contemporary Music Guildford
- Photography – Plymouth

Three of these young people also plan on going on to do a post graduate course.

We have recently successfully recruited additional PAs to the team and once in post, we will be able to increase our capacity to support care leavers at University, strengthen practice and improve our NEET offer to care leavers. To support this, we have recently agreed a protocol with two of our Job Centre Plus centres which aims to provide:

- Co-ordinated support to engage young people into Education, Employment, Apprenticeships, Voluntary Work or Training.
- An early entry system and a smooth transition for those young people leaving care and needing to claim benefits.
- Prompt and accurate payment of benefits where these are required.
- Young people are empowered and enabled to gain sustainable paid employment through individual route ways.

All children in care and care leavers who apply for Dorset Council apprenticeships are guaranteed an interview, and the team have very recently collaborated with Dorset Council Highways and supported 3 care leavers to achieve an interview for a Highways apprenticeship.

e. Care Leaver Offer

We are partners with Coram Voice, together with 7 other Local Authorities, to deliver the New Belongings programme. This has been developed from the successful Bright Spots programme and young people have now completed the “*Your Life Beyond Care*” survey, which measures the subjective wellbeing of young care leavers. We have also undertaken a detailed self-assessment of our services with our partners as part of New Belongings to identify priorities for action. This work will inform our new Care Leavers Strategy and the development of an exceptional Care Leaver offer. Through New Belongings, we also have opportunities to come together with other Local Authorities to peer and practice learning.

A Care Leaver Offer is under development, setting out clearly what financial support is available to Care Leavers as they leave care and beyond, as well as what other support might be available to them. This work sets out a clear commitment to our Care Leavers framed around what they can expect from us as they become young adults.

f. Summary and Next Steps

Our work with Coram Voice and the New Belongings programme provides a framework to be ambitious for our Care Leavers. The feedback from Care Leavers from the “*Your Life Beyond Care*” support was very positive on the support they receive from their Personal Advisor, which was also back up by our own SMS based feedback in September 2020. This is aided by having a low staff turnover which means enduring relationships between Care Leavers and Personal Advisors.

We are beginning a piece of work to engage our future Care Leavers with their Personal Advisors as soon as possible after their 16th birthday, in order to provide a smooth transition from their social worker to the Care Leaver service. The Personal Advisor will work alongside the young person’s social worker, building a relationship before they become Care Leavers and co-producing their Pathway Plan. This will enable us to support young people with the skills they need as they move into adulthood, so they are more ready to leave care.

4.14 Education and Inclusion

a. School Performance

From inspection data prior to Covid we know that 76% of Dorset schools are rated good or outstanding and 76% of our children in care attend schools that are rated good or outstanding. We know this is below the national figure. Test and examination data on attainment in schools shows that for children in Key Stage 2 attainment is low across reading, writing and mathematics, but particularly mathematics. This is a particular issue in Middle Schools, reflecting a national trend.

Our aim is to work in partnership with all Dorset schools in the essential task of strengthening schools, raising standards and diminishing the difference in the achievement between different groups and individuals.

Our Strengthening Schools practice framework will provide support and challenge to our schools on their improvement journeys. We will work in partnership with all schools to support our entire education ecosystem to strengthen school to school collaboration and the sharing of best practice. This will build on the positive work of our schools through the pandemic and the improved communication and collaboration with the local authority.

Attainment and progress in all key stages needs to improve and school improvement strategies are being developed with our Head Teachers on a new model, utilising expertise in the whole sector to drive improvement. This is based on the model that we have developed in the Covid period, where

schoolwork took place in clusters to mutually support schools, with coordination from the council. We have reformatted our education support services and locality work to ensure that we have increased capacity to support schools. Our aim is to identify best practice and ensure this is shared across the system. We want to enable our schools to do more for themselves and build their capacity and strength.

b. Inclusion

Fixed term and permanent exclusions have increased over the last 3 years but dropped during the Covid period. We know this impacts children's ability to achieve their education potential, but also increases risk of harm and exploitation and we are working closely with our schools to ensure our children are supported to remain in full-time education wherever possible. In our new locality model, we have inclusion leads who will work proactively with schools and young people, bringing staff and resource to seek to prevent exclusions through targeted work.

We have a Multi-Agency Children Missing Out on Education and CME (CMOE) Action Group that assesses level of need for all Dorset young people missing out on education as notified by any Dorset schools and Alternative Provision (AP) settings. A CMOE Meeting takes place each month to ensure that there is practical multi-agency action taking place to support young people. Young people are supported in placement in either schools, learning centres or alternative provision following permanent exclusion. The meeting is attended by senior officers who ensure that action is taking place at pace and, can direct education and social care support where this is not already in place for the young person or family. The action group meeting keeps an ongoing record of actions and outcomes in relation to the Children Missing Out on Education and follow up work between meetings is by relevant staff in each locality. Priorities based on this year's data are being identified for locality focus from September. Although the numbers of young people permanently excluded has been increasing in both Dorset and nationally, the Children Missing Out on Education Action Group's multi-agency work has been central to leading to a decrease in the time that Dorset young are spending out of education.

c. Children and young people with SEND

We have approximately 2,900 children with Special Educational Needs supported through an Educational, Health and Care Plan and 6,700 children and young people identified with SEN Support needs. We work with 35 children and young people who have a Child in Need Plan and 103 Children in Care that are also supported by an EHCP.

EHCPs in Dorset Council are increasingly produced within statutory timescales. Whilst Covid-19 impacted the performance of our service, the resilience and agility of the team and proactive culture has been a strength.

The SEND service has seen a consistent flow of Education, Health and Care Needs Assessment Requests (EHNCA's) with approximately 17% of all requests in the year to date being received by parents. Covid-19 has not resulted in a reduction in the number of requests for assessment and our team has worked hard to sustain performance despite the challenges we have faced.

Dorset Council is experiencing significant pressure on the High Needs Block funding in order to provide for the needs of children and young people with SEND. Parents have told us that we have real strength in our SEND services for our youngest children. They have praised our existing early help service links to schools in the localities and the Team Around the Family approach we take to working with families, schools and early help.

Our new EHCP forms, templates and review paperwork were developed in partnership with a wide range of parents, partners and settings, with information and training events for parents and stakeholders. We are committed to ensuring that SEND improvement work continues to be developed in partnership with families and young people and is communicated effectively. We

have a clear focus on embedding robust quality assurance processes within our SEND statutory work and in conjunction with partner services and parents.

We are increasing local special school provision to address the needs of children with complex communication difficulties and working with health colleagues to support young people in managing mental health. We have a mental health in schools project running in two pilot areas and would hope to roll this out across the county. Parents and schools have asked for more educational psychology support and we have prioritised an increase to this provision in our staffing restructure.

The Dorset Parent Carer Council (DPCC) was formed in June 2009 and has over 700 members across Dorset. The membership is made up of parents and carers of children who have a variety of special needs from complex medical to challenging behaviour to learning or physical difficulties and more.

The DPCC have a positive and active role in supporting the development of services that affect children with special educational needs and/or disabilities. They are represented on the Corporate Parenting Board, SEND Delivery Group, Transition Steering Group and Strategic Alliance for Children & Young People. The DPCC take a professional and considered approach that strikes a good balance of challenge and support to the council.

d. The Virtual School

Dorset Virtual School undertake three Personal Education Plan (PEP) meetings a year for our children in care, one each term, in partnership with young people and their carers, social workers and the designated teachers in schools/settings. The current PEP return rate is over 99% which although not nationally reported on, compares favourably with regional informally reported return rates amongst South West Virtual School Heads' termly meetings. The Virtual School Governing Body also has a Governor Champion for the quality of Personal Education Plans.

Schools and education providers are supportive of strengthening our working towards greater early intervention to ensure that children and young people are supported at the earliest opportunity. The move to locality services will enable earlier identification of need, pooling the detailed knowledge of providers, education, early help and social care services in order to promote greater inclusion in schools for all our children in Dorset.

e. Elective Home Education

The number of Elective Home Education (EHE) young people has increased in recent years. Within our locality working we are reshaping our processes with these families to ensure that children are receiving a meaningful education. We are working closely with a group of parents to redefine our policy in this area in order to ensure that we have greater engagement with parents who choose to home educate.

Supporting our families that choose to electively home educate is a key focus of the new Dorset Children Thrive model as the Council strengthens its model for monitoring the quality of EHE.

The following actions are being taken to improve the support for children who are home educated:

- A co-production group of parents has been formed to support with communication models and assessing the 'suitability' of home education being provided.
- Future work with the co-production group will develop parental guidance information and clear processes for communicating with families about the education being provided.
- Our Inclusion Leads in each locality are responsible for the monitoring the quality of EHE, liaison with social care and developing strong partnerships with our families to deliver better outcomes.
- Person-centred approaches will be used in order to ensure that the voice of the family and the child or young person are at the centre of the support.

4.15 Young People at Risk of Homelessness

Our protocol for young people at risk of homelessness has been reviewed jointly with colleagues in housing and legal services. Delayed by Covid 19, we will be jointly delivering workshops to housing and children's services practitioners to ensure that it is robustly embedded. In the meantime, we have established a robust information sharing pathway in MASH with housing colleagues and continue to optimise relationships as we develop strategic plans and services within localities.

4.16 Private Fostering

We are aware that we are presently working with a small number of children who are privately fostered in comparison with other similar areas. Private Fostering Assessments are undertaken within the localities and practitioners and we are developing a Private Fostering Champion social worker to ensure children who are privately fostered are identified, assessed and receive Children in Need or Early Help support where required. Part of the role will be to develop an action plan to increase awareness and promote an understanding of private fostering across Dorset and we will closely monitor the impact of this through the locality Line of Sight Meetings.

We have a contract with Bournemouth, Christchurch and Poole (BCP) Council who identify, assess and support private fostering arrangements made through language schools in the Dorset area. The contract was established in November 2016 (due to expire March 2021 with renewal/extension options under consideration) with Bournemouth Borough Council, who had their own dedicated Private Fostering team and existing links with language schools and guardianship companies, to safeguard all language and guardianship school students across the Dorset County Council area who are staying with host families in private fostering arrangements in Dorset. We've received an excellent service from BCP who have been proactive in publicising private fostering arrangements and undertaking appropriate checks and assessments.

Between the 1 April 2020 – 30 June 2020 there has been no new work completed by the private fostering team in respect of language students for Dorset Council in this quarter, due to all of the language schools closing as a result of Covid 19. There were three students who remained in their private fostering arrangements, which was primarily because they were not able to get flights home. The private fostering team supported them through this period, with some increased contacts to ensure that their needs were being adequately met. There were no concerns identified regarding how the children's needs were met. The carers involved worked hard to ensure that the students still had a positive experience for their stay, despite the restrictions. All three students have now returned to their families.

4.17 Local Authority Designated Officer

The Local Authority Designated Officer (LADO) role sits within our Quality Assurance and Partnerships Service

During Q1 2020 we had 104 Contacts made with the LADO with 18 progressing to referral (17%):

- 5 of the 18 related to an allegation against a foster carer (28%)
- 5 where the subject was a residential worker (28%)
- 3 from health (17%)
- 6 from Education, Early Years, connected person and other (33%).
- Between July and August 2020 there were 44 Contacts with 7 progressing to referral (16%)
- 3 of the 7 were from Education (43%),
- 3 related to allegations about a foster carer (43%)
- 1 connected person foster carer (14%)

We are further developing the LADO function following a recent review which identified areas for development as well as good practice. We have refreshed our policy which has included the

development of practice standards to support improved practice and enhanced reporting. We have strengthened our communication with our partners to raise the profile of the LADO in Dorset and have developed a customer feedback system.

5. HOW DO WE KNOW

5.1 Performance Management

We have a wealth of performance data available and this is accessible to managers and all staff through our intranet pages, an accessible managers' dashboard. This is further supplemented by performance and monitoring information available to front line managers through MOSAIC, our electronic social care record.

We are continuously improving and refining how we use our data and intelligence and have developed and implemented a new Performance Management Framework (PMF) that sits alongside our Quality Assurance Framework. Through our new PMF, managers are now systematically reviewing performance of their respective services and providing exception reporting to the monthly Performance Board attended by the Extended Children's Services Leadership Team and Business Partners. The Performance Board focuses on three critical questions for all aspects of our performance:

- What's going well?
- What are we worried about? and importantly,
- What are we doing about it?

The Board is restorative in approach – high support and high challenge, and solution focused. Managers across the service are feeding back the impact of the meetings in developing a deep and shared understanding of our performance and how it can be used to drive continuous improvement.

Key messages from our Performance Board, alongside a dashboard of key indicators are reported on a monthly basis to the Corporate Performance Board and Elected Members to ensure they have a strong line of sight to performance.

As part of our Performance Management Framework we have implemented a quarterly whole service Quality Assurance and Performance Management Conference providing the opportunity for all managers (Team Managers and above) to come together to triangulate the information from our quality assurance and performance monitoring activity, reflect on learning and to focus on our continuous improvement.

We have undertaken significant work to develop our performance reporting and a new Performance and Impact Report to enable our Strengthening Services Board to monitor progress of our Strengthening Service Plan. This work is part of a wider programme to develop a whole service Key Performance Indicator report supplemented by thematic dashboards. This work is progressing well with dashboards now in place for MASH, SEND and the Virtual School with additional dashboard already under development.

We have worked extensively to ensure we are able to support our vulnerable children throughout Covid-19 and bring together all of our information as a partnership to enable us to do this effectively. Our Vulnerable Children Tracker has been fundamental to this and has enabled us to ensure that help and support is targeted quickly to our children and their families depending on risk levels.

5.2 Quality Assurance Framework

Our Framework was launched in October 2019 to incorporate a collaborative audit approach that is undertaken by the operational managers within the service alongside our practitioners. A

proportion of those audits are also moderated by the QA service and senior managers to assure ourselves that our managers can correctly identify the quality of practice. The approach is now well embedded and enables a reflective conversation with the practitioner to support holding the child at the forefront of our practice and what is working well or what we are concerned about. Actions are identified and tracked by the QA service and we are improving how these are recorded to enable robust oversight and progress that will be built into Mosaic in the coming months (ICS). While these improvements are being established interim additional scrutiny is now in place and ensuring completion and that our approach is outcomes based rather than focusing on process alone. Audit learning reports are produced on collation of all the audits and shared at a QA action group with managers who are involved in agreeing either localised action plans or strategic practice improvements for the service. Again, this is fully supported and overseen by QA and a refreshed approach to our QA action group to ensure we are closing the learning loop. As we further develop our practice framework, we will be ensuring templates are updated to facilitate strengths based and relationship-based discussion in line with our new practice framework.

To further strengthen the quality of audit we have introduced a triple locking process that will test our moderators to correctly identify good practice along with testing the quality of dip samples undertaken in the service. We are also moving our thematic audits to be undertaken by our advanced practitioners who are trained in specialist areas and can test that training and learning from audit has impacted on the quality of practice. This is vital to ensuring we can identify the right learning and the root cause of any practice challenges supported with a thematic and dip sample schedule aligned to our strengthening services plan.

Currently our performance in QA is positive in relation to conference timescales, reducing children subject to plans over 18 months, our children in care review timeliness and Designated Officer responses. However, we know we have some work to do to strengthen the quality of our Plans both CP and children in care (CIC) and currently looking to improve the way we chair conferences and chair our CIC reviews, including our QARO footprint. These improvements are led by a QA improvement plan to fully deliver improving the quality of the service.

Our Principal Social Worker recently appointed following an absence of this post is driving quality of practice and keeping front line practice at the forefront of strategic improvements. This will include the next steps from our reinvigorating SW practice to fully launch our practice framework by March 2020.

5.3 Audit Outcomes

Although we had a short auditing break when Covid first hit our audit compliance is strong with 95% return rate. Findings are identifying that most of our practice requires improvement to be good and we are considering a 'what good looks' like training approach to improve the quality of practice through our Advance practitioners. The main areas identified for us to strengthen our practice are in:

- Consistency of supervision
- Quality and focus of our planning in driving forward change for children
- Strengthening our use of chronologies and summaries
- Ensuring that the child's voice is always reflected in our recording and informing our planning

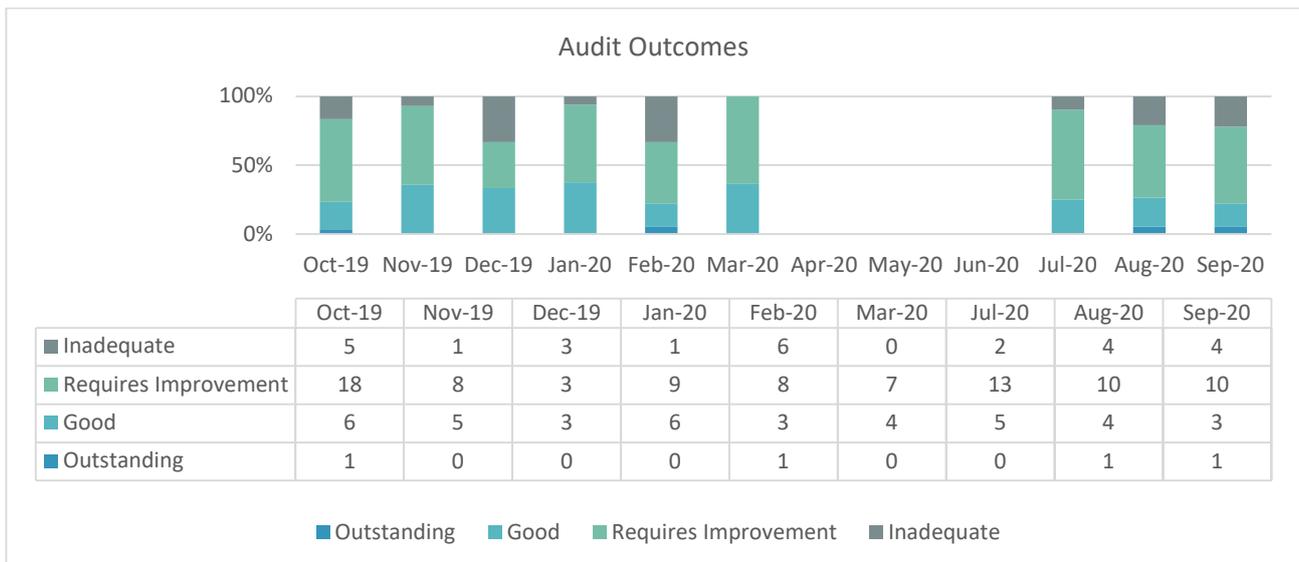


Figure 15: Outcomes of Audits

Findings are identifying that most of our practice requires improvement to be good and we are considering a 'what good looks' like training approach to improve the quality of practice through our Advanced Practitioners. The main areas identified for us to strengthen our practice are in:

- Consistency of supervision
- Quality and focus of our planning in driving forward change for children
- Strengthening our use of chronologies and summaries
- Ensuring that the child's voice is always reflected in our recording and informing our planning

Where practice is positive, we have some evidence of good partnership working and will continue to keep a focus on this to ensure that this is demonstrated across all our work. Our collaborative approach has also demonstrated that our staff know their children well and we are supporting them to ensure this is evidenced on the child's file. Feedback from our children and families in relation to the Quality Assurance service is generally positive and is used to inform service improvements.

5.4 Serious Case Reviews

Dorset published two Serious Case Reviews in September 2020 both having been delayed due to the Covid Lockdown.

S33 is about a child who died in the spring of 2018 following an Asthma attack. The review highlighted the importance of recognition and response to neglect, evidenced based assessment, intervention and the evaluation of progress to prevent and reduce the impact of chronic neglect.

S39 concerns a teenage boy who died in 2019. The inquest recorded death by misadventure, as the coroner was satisfied that he took his own life but did not intend to do so. The review highlighted generic learning for all agencies, but that work carried out with the family was proportionate and focussed with no indicators of risk that may have prompted further assessment or intervention.

Three Rapid Reviews were undertaken this year which resulted in one making a recommendation in September 2020 that a Safeguarding Practice Review (SPR) is to be undertaken. This relates to a 17-year-old child in care placed in a nearby local authority who took her own life. Since moving to SPR's our children will be referenced with initials or agree an anonymous name instead of numbers.

5.5 Complaints, Compliments and Comments

We work closely with our Complaints Team to ensure processes are followed in managing complaints for children and families. With their support, we have continued to strengthen our restorative approach to complaints, with a focus on improving relationships and establishing learning. Between April 2020 – June 2020 we received a relatively small volume of formal complaints - 10 in total. We continue to be able to resolve most complaints informally, having received 28 in this period.

We have improved our response times for responding to complaints significantly, with 96% of complaints in Q1 responded to within 20 days compared to 86% in the same period last year. Four per cent of our complaints were fully justified and 15% had some level of justification. We have identified a small number (5) of learning points which we share with and work with the team.

We have also seen an increase in the number of compliments we receive, with 31 received in Q1 this year, compared to 11 in the same period last year and catching up with the total number received in 19/20 which was 39.

5.6 Feedback from our children, young people and families

We have developed an approach to measuring 'customer' satisfaction across services. For services that have an end closure point (such as CiN social worker involvement or EHCP application) a SMS message is sent at point of case closure.

For ongoing services (such as Care Leavers) a SMS is sent at a regular interval (i.e. every six months). These all collect information across 5 domains:

- Do you feel able to talk?
- Were you involved in decisions?
- Was the amount of contact right?
- Did we do what we said we would do?
- What difference has the support/service made to you and your family?

We also use these domains for spot surveys and to construct phone interviews with families.

The data is collated, analysed and reported on a quarterly basis, feeding into the Performance Board. A version of the report is also shared publicly on our 'Get Involved' webpage (www.dorsetcouncil.gov.uk/get-involved).

We have seen a steady improvement on overall 'customer' satisfaction, most notably on the areas that related directly to worker/service approach (as shown below).

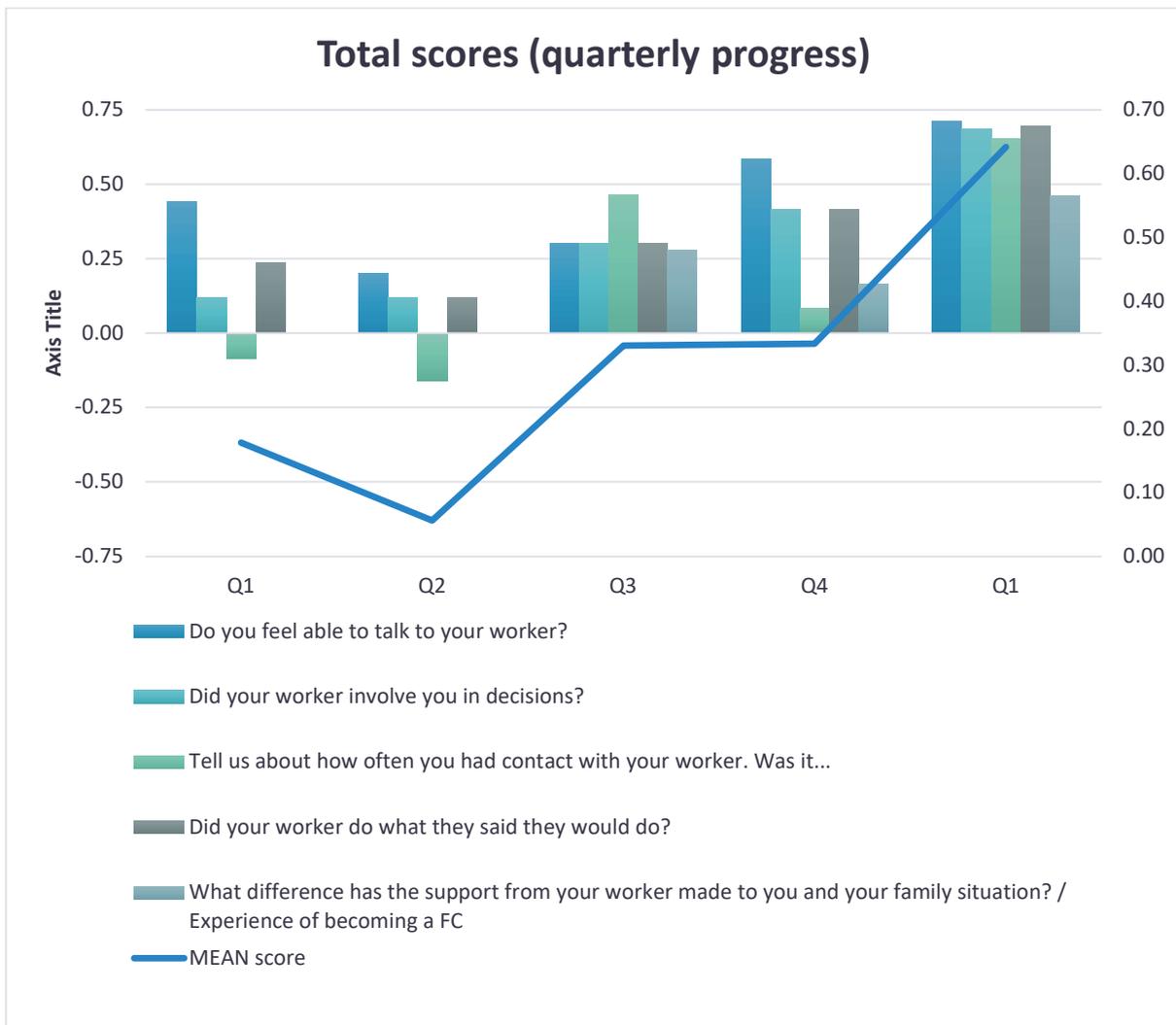


Figure 16: summarised position of 'customer satisfaction scores from Q1 2019 to Q1 2020

There is more work to do to ensure the 'customer' satisfaction questionnaires are being sent out consistently for every service area and to ensure feedback is being reflected on at a service level. Additionally, the Children in Care Council conduct an annual survey of all children in care. This comprehensive survey gives insight across several areas including:

- Perceptions on social workers, IROs, advocates and other professionals
- Perceptions on plans, including care, education and pathway
- Perceptions on processes such as reviews and complaints
- Feelings of wellbeing and support

The report is considered by CSLT, relevant service areas and explored through workshops across the workforce. A response with recommendations and action plan are presented to the Children in Care Council.

6. FUTURE PLANS

6.1 Emerging Issues

a. Quality and availability of placements

Finding the right homes for our children is an ongoing and significant issue for us both in availability and ensuring quality of provision. Safeguarding issues have been identified in a number of external providers of residential care which is impacting on our children and the need to find alternative placements at pace within the context of Covid 19 and reduced availability.

We are prioritising our quality assurance and joint working between the new brokerage team and operational teams to strengthen our understanding and oversight from our Quality Assurance Officers (IRO's), particularly in external residential care placements.

b. Responding to the pandemic

We also are actively working with our partners on implementing what we have learned through supporting children, young people and families through the pandemic.

It is ever more important that the following themes will be weaved into all the work that we do together.

- **Personalisation:-** Successful recovery will be achieved through the continued personalisation of our approach to working with our children, young people and families.
- **Digital Working:-** Digital working across the local area is likely to continue as a feature of our work. However, we realise this is not inclusive for all our families.
- **Better Together:-** Co-production and collaboration are more important than ever. Dorset Children Thrive will enable this through our new model and new Children, Young People and Families Plan.
- **Agile Working:-** We have acted at pace often with high levels of anxiety and concern across the network- we learnt quickly and adjusted our approach with our partners
- **Forecasting:-** We have developed a rich Performance Framework we know better now our emerging trends and our operational delivery – all embedded within a strong strategy.

c. Strengthening Services Plan

Our Strengthening Services Plan is comprehensive and captures all actions being taken to strengthen our service offer, a summary of which is included as Appendix 1.



Strengthening Services for Children and Families in Dorset

OUR PARTNERSHIP PLAN TO STRENGTHEN SERVICES FOR CHILDREN AND FAMILIES: SUMMARY

Introducing our Strengthening Services Plan

We want Dorset to be the best place to be a child; where communities thrive, and families are supported to be the best they can be.

We are completely committed to delivering this vision together, building on the work we have undertaken so far through our Strategic Alliance for Children and Young People and are on a journey together to develop and strengthen our services for children and families in Dorset.

The aim of this plan is to drive forward the short and medium-term work to strengthen and improve our services. The plan brings together outstanding action we still need to embed that has been raised through previous inspections and further areas for development we have identified through audit and self-assessment.

Our work in this plan sits alongside our work to develop and deliver our longer-term vision for children and young people in Dorset through our Children, Young People and Families Plan 2020-2023. We will work together as a partnership both at a strategic and operational level to ensure we are able to strengthen the shared 'system' of our collective services to get the very best outcomes possible for our children and families.

This plan is presented in three sections following the continuum of need from early help, to services to protect vulnerable children, services for children in care and care leavers, underpinned by robust leadership, management and governance.

Strategic accountability for the delivery of our Strengthening Services Plan will be through the Strengthening Services for Children and Families in Dorset Board, a multi-agency Board comprised of executive level senior leaders across the partnership and including Elected Members.

The Projects

There are 31 Projects in our Strengthening Services Plan each of them led by a senior Project Lead from the partnership. The Projects are summarised overleaf.

STRENGTHENING SERVICES FOR CHILDREN AND FAMILIES: OUR PROJECTS

Children and young people who need our help and protection receive good quality help and support in the right part of the system and are safe

- Strengthen the identification of risk through universal services and our collective Early Help offer so that all children and families benefit from support that makes sustainable change and prevents problems from escalating in the future
- Ensure there is a consistent understanding of the Continuum of Need so that children receive the right support from the right service at the right time
- Strengthen Integrated Front Door and MASH arrangements to ensure a robust and timely partnership and Safeguarding response to need
- Improve the recognition of risk and harm to children
- Deliver a collaborative response to improve the lives of children and young people who are at risk of or experiencing exploitation
- Ensure a robust approach and response to managing allegations of abuse, mistreatment and poor practice by professionals
- Strengthen the quality and impact of social work practice with children in need, children at risk of significant harm and children in care
- Strengthen prevention and support to vulnerable young people and their families
- Assure that robust arrangements are in place for children who are disabled social work services
- Strengthen Private Fostering arrangements
- Work with the Community Safety Partnership to strengthen and support interventions regarding Domestic Abuse
- Ensure robust arrangements are in place for children and young people who are Electively Home Educated
- Ensure robust joint arrangements are in place between children's services, housing and wider partners to support vulnerable young people and families at risk of homelessness
- Ensure a robust partnership approach to children and young people with neurodevelopmental and complex emotional health and wellbeing needs
- Deliver outstanding SEND services for our children and young people and define a clear pathway for preparation for adulthood
- Ensure robust management oversight is in place to the quality and practice across services

Children in Care and Care Leavers receive good quality help and support and thrive in a setting that is right for them achieving good outcomes that set the foundation for a stable and happy future

- Strengthen the Corporate Parenting offer in Dorset
- Improve the quality and timeliness of care and permanence planning so that children live in their forever home as soon as possible
- Strengthen arrangements to improve education, employment and training outcomes for children in care and care leavers
- Ensure robust arrangements are in place so that all children in care and care leavers are receiving health services that are improving their health outcomes
- Ensure children in care and care leavers with emotional health and wellbeing needs get the right help and support at the right time
- Strengthen contact/Family time arrangements so that children in care are supported to have meaningful contact with family members
- Strengthen fostering arrangements in Dorset so that more children and young people are cared for close to their communities, friends and networks
- Ensure sufficiency and quality of local residential placements for children in care and suitable accommodation for care leavers

Strong and robust strategic leadership that is ambitious for our children and young people with clear and sustainable plans for improvement

- Establish robust operating and governance arrangements that enable senior leaders to maintain a line of sight to services
- Undertake a review of panels to ensure children and young people are receiving access to the right service as quickly as possible
- Strengthen performance management arrangements to ensure that operational, senior managers and Elected Members have a firm grip on performance
- Embed a learning culture across Children's Services and the partnership so that learning systematically informs practice and service development
- Ensure there is effective professional development that is accessible to the children's workforce
- Recruit and retain high quality practitioners making Dorset Council the employer of choice for Social Workers
- Ensure that the voice of children, young people, parents and carers' influences services and puts children and families at the heart of decision making

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