

# Public Document Pack

**Sefton Council** 

MEETING: OVERVIEW AND SCRUTINY COMMITTEE (CHILDREN'S SERVICES AND SAFEGUARDING)

DATE: Tuesday, 6th June 2023

TIME: 6.30 p.m.

VENUE: Committee Room - Bootle Town Hall, Trinity Road, Bootle, L20 7AE

## Member

Councillor  
Cllr. Judy Hardman (Chair)  
Cllr. Natasha Carlin (Vice-Chair)  
Cllr. Danny Burns  
Cllr. Clare Carragher  
Cllr. Leo Evans  
Cllr. Christine Howard  
Cllr. Christopher Page  
Cllr. Mike Prendergast  
Cllr. Carol Richards  
Cllr. Tom Spring  
Maurice Byrne, Healthwatch  
Mrs Sandra Cain, Independent  
Advisory Member  
Karen Christie, Healthwatch  
Stuart Harrison, Diocese  
Joan McCarthy, Archdiocese  
Cheryl Swainbank, PGR

## Substitute

Councillor  
Cllr. Peter Harvey  
Cllr. Paul Tweed  
Cllr. Greg Myers  
Cllr. Jennifer Corcoran  
Cllr. Gareth Lloyd-Johnson  
Cllr. Phil Hart  
Cllr. John Joseph Kelly  
Cllr. Tony Brough  
Cllr. Steve McGinnity  
Cllr. John Kelly

COMMITTEE OFFICER: Debbie Campbell, Senior Democratic Services Officer  
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**If you have any special needs that may require arrangements to facilitate your attendance at this meeting, please contact the Committee Officer named above, who will endeavour to assist.**

We endeavour to provide a reasonable number of full agendas, including reports at the meeting. If you wish to ensure that you have a copy to refer to at the meeting, please can you print off your own copy of the agenda pack prior to the meeting.

# **A G E N D A**

## **1. Apologies for Absence**

## **2. Declarations of Interest**

Members are requested at a meeting where a disclosable pecuniary interest or personal interest arises, which is not already included in their Register of Members' Interests, to declare any interests that relate to an item on the agenda.

Where a Member discloses a Disclosable Pecuniary Interest, he/she must withdraw from the meeting room, including from the public gallery, during the whole consideration of any item of business in which he/she has an interest, except where he/she is permitted to remain as a result of a grant of a dispensation.

Where a Member discloses a personal interest he/she must seek advice from the Monitoring Officer or staff member representing the Monitoring Officer to determine whether the Member should withdraw from the meeting room, including from the public gallery, during the whole consideration of any item of business in which he/she has an interest or whether the Member can remain in the meeting or remain in the meeting and vote on the relevant decision.

## **3. Minutes of the Previous Meeting** (Pages 5 - 14)

Minutes of the meeting held on 6 March 2023

## **4. Sefton Place - Community Emotional Health and Wellbeing Services Update 2022 - 2023** (Pages 15 - 50)

Report of the Cheshire and Merseyside Integrated Care Board, Sefton Place

## **5. Children's Services Improvement Programme** (Pages 51 - 66)

Report of the Executive Director of Social Care and Education

## **6. Children's Social Care Overview of Practice** (Pages 67 - 106)

Report of the Executive Director of Social Care and Education

## **7. Safeguarding Learning and Development Offer** (Pages 107 - 118)

Report of the Executive Director of Children's Services and Education

- 8. Education Scorecard** (Pages 119 - 136)  
Report of the Executive Director of Children's Social Care and Education
- 9. Ofsted Inspection Reports** (Pages 137 - 146)  
Report of the Executive Director of Children's Services and Education
- 10. Parent Governor Representative** (Pages 147 - 150)  
Report of the Chief Legal and Democratic Officer
- 11. Cabinet Member Reports** (Pages 151 - 158)  
Report of the Chief Legal and Democratic Officer  
Appendix B - Cabinet Member - Education - Update Report – To Follow
- 12. Work Programme Key Decision Forward Plan** (Pages 159 - 180)  
Report of the Chief Legal and Democratic Officer
- 13. Dates of Committee Meetings 2023/24**  
To note that the Committee meetings scheduled to be held during the Municipal Year 2023/24 are as follows:
- Tuesday, 26 September 2023, 6.30 p.m., Town Hall, Southport
  - Tuesday, 14 November 2023, 6.30 p.m., Town Hall, Bootle
  - Tuesday, 30 January 2024, 6.30 p.m., Town Hall, Southport
  - Tuesday, 12 March 2024, 6.30 p.m., Town Hall, Bootle

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## OVERVIEW AND SCRUTINY COMMITTEE (CHILDREN'S SERVICES AND SAFEGUARDING)

MEETING HELD AT THE TOWN HALL, SOUTHPORT  
ON MONDAY 6TH MARCH, 2023

- PRESENT:** Councillor June Burns (in the Chair)  
Councillor Spencer (Vice-Chair)  
Councillors Danny Burns, Carlin, Hardman, Lloyd-Johnson, McKee, Murphy and Prendergast
- ALSO PRESENT:** Ms. J. McCarthy, Archdiocese  
Ms. C. Swainbank, Parent Governor Representative  
Councillor Doyle – Cabinet Member – Children's Social Care  
Councillor Roscoe, Cabinet Member – Education  
Councillor Lynne Thompson  
7 members of the public

### **48. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor Wilson and Maurice Byrne, Healthwatch.

### **49. DECLARATIONS OF INTEREST**

No declarations of any disclosable pecuniary interests or personal interests were received.

### **50. MINUTES OF THE PREVIOUS MEETING**

A proposal to amend the Minutes by the addition of wording to reflect that it had been agreed at the previous meeting that Committee Members would be provided with the Minutes of the Improvement Board, was debated. A vote took place and the proposal was lost by 3 votes to 6.

A proposal to amend the designation of the Commissioner for Children's Services, was put forward.

**RESOLVED:** That

- (1) subject to the following amendment to Minute No. 41, the Minutes of the meeting held on 31 January 2023, be confirmed as a correct record:

The replacement of the words "independent Improvement Board Chair" with the words "Commissioner for Children's Services"; and

- (2) the dissent of Councillor Murphy against the decision to agree the Minutes as being a correct record, be recorded.

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OVERVIEW AND SCRUTINY COMMITTEE (CHILDREN'S SERVICES AND SAFEGUARDING) - MONDAY 6TH MARCH, 2023

## 51. CHILDREN AND YOUNG PEOPLE COMMISSIONED HEALTH SERVICES UPDATE

The Committee considered the report and presentation of the Cheshire and Merseyside Integrated Care Board, Sefton Place. The report provided an overview of the performance of children and young people commissioned health services delivered by Alder Hey Children's Hospital NHS Foundation Trust, including:

- Autistic Spectrum Disorders (ASD) and Attention Deficit Hyperactivity Disorder (ADHD) assessment and diagnostic service
- Children and Adolescent Mental Health Service (CAMHS)
- Speech and Language Therapy (SALT)
- Other therapy services: Continence, Dietetics, Occupational Therapy and Physiotherapy

It was anticipated that a detailed CAMHS/mental health update would be submitted to the next meeting of the Committee on 6 June 2023.

Peter Wong, Children and Young People Commissioning Lead, Sefton, gave a presentation that outlined the following:

- Children and Young People: Autistic Spectrum Disorders (ASD)
- Children and Young People: Attention Deficit Hyperactivity Disorder (ADHD)
- Specialist CAMHS
- Therapies

Members of the Committee raised the following questions/issues:

- Work being undertaken on early interventions and anxiety associated with certain conditions.
- Increased publicity and communication regarding the useful information available on CAMHS.
- The use of rapid response vehicles for adult mental health triage and the difficult transition to adult services.
- Delays associated with speech and language therapies.
- Pathways to be followed by 18-year-olds.
- Numbers of children and young people waiting over 18 weeks for CAMHS appointments.
- Plans to try to increase assistant practitioners within the speech and language service.
- The practice of paediatricians going into specialist schools to undertake assessments.
- Regional and national comparisons with Sefton's waiting times.
- The diagnosis rate for ADHD and the new ASD/ADHD digital referral platform being piloted with education.
- Difficulties faced by parents with more than one child following assessment pathways.

RESOLVED:

That the children and young people commissioned health services performance update be noted and accepted.

**52. SEFTON SAFEGUARDING CHILDREN PARTNERSHIP (SSCP) ANNUAL REPORT 2021-2022**

The Committee considered the report of the Assistant Director of Children's Services (Quality Assurance and Safeguarding) on the Sefton Safeguarding Children Partnership (SSCP) Annual Report 2021-22. Detailed within the Sefton SCP annual report 2021-22 was the work undertaken by the Sefton Safeguarding Children Partnership, whose purpose was to safeguard children and work together with a collective aim to better improve the outcomes for children and young people.

The Sefton SCP Annual Report 2021-22 was attached to the report and outlined the following:

- Introduction
- Covid 19
- Voice of the Independent Chair/Scrutineer
- Child Death Overview Panel (CDOP)
- Local Child Safeguarding Practice Reviews (LCSPRs)
- Multi-Agency Quality Assurance and Audit Activities
- Multi-Agency Training and Development
- Local Authority Designated Officer (LADO)
- Conclusion

Members of the Committee raised the following questions/issues:

- Additional detail on changes required within the partnership culture.
- Reasons for waiting for 12 months to obtain qualitative data regarding lack of escalation activity across the partnership and possible actions to address.
- The limited partnership challenge to drift and delay.
- Multi-agency training and the impact of SSCP training.
- A request was made for the Police and other Multi-Agency Safeguarding Hub (MASH) team members to report to the Committee in future.
- Was training and development sufficient to address concerns regarding lack of escalation and how was the effectiveness of training measured? A report presented to the Improvement Board on the matter could be submitted to a future meeting of the Committee.
- Reasons why training was not compulsory.
- The definition of expected and unexpected deaths.
- Reasons for the relatively high number of child deaths and the impact of the pandemic.

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- Issues associated with the transient nature of the social care workforce.

RESOLVED: That

- (1) the report be noted;
- (2) representatives of the Police and other Multi-Agency Safeguarding Hub (MASH) team members be invited to attend a future meeting of the Committee; and
- (3) the Assistant Director of Children's Services (Quality, Assurance and Safeguarding) be requested to submit the report presented to the Improvement Board on training and development to a future meeting of the Committee.

### **53. CHILDREN'S SERVICES IMPROVEMENT PROGRAMME**

The Committee considered the report of the Executive Director of Children's Social Care and Education updating on progress made against the Children's Services Improvement Plan and providing an overview of quality assurance activity.

The following appendices were attached to the report:

- Improvement Plan
- Youth Engagement Toolkit
- Quality Assurance Framework

Members of the Committee asked questions/raised matters on the following issues:

- The possibility of front-line practitioners accessing training within the Academy.
- Data on the quality of case audits and reasons why the data had not been submitted previously to the Committee. A proposal was made for data on case audits to be a regular standing item on future Committee agendas.

RESOLVED: That

- (1) the progress made and the priorities for the next quarter be noted; and
- (2) the Assistant Director (Quality, Assurance and Safeguarding) be requested to submit data on the quality of case audits to future Committee meetings on a regular basis.

### **54. EDUCATION SCORECARD**



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## OVERVIEW AND SCRUTINY COMMITTEE (CHILDREN'S SERVICES AND SAFEGUARDING) - MONDAY 6TH MARCH, 2023

The Committee considered the report of the Executive Director of Children's Social Care and Education presenting the Education Scorecard.

The Education Scorecard was attached to the report and set out statistics on:

- Pupil absence
- Pupil exclusions
- Education, Health and Care Plans
- Early Years Foundations Profile
- Phonics
- Key Stage 1
- Key Stage 2
- Key Stage 4

Members of the Committee asked questions/raised matters on the following issues:

- The possibility of including a category of English as a second language in future. Different factors could be considered.
- Formatting issues within the Education Scorecard. A revised version would be circulated to Committee Members.

RESOLVED: That

- (1) the data contained in the Education Scorecard be noted;
- (2) the Assistant Director Education be requested to consider the possibility of including a category of English as a second language in future Education Scorecards; and
- (3) the Senior Democratic Services Officer be requested to circulate a revised version of the Education Scorecard to Committee Members.

### 55. EDUCATION, HEALTH AND CARE PLANS

Further to Minute No. 42 (4) of 31 January 2023, the Assistant Director of Children's Services (Education) reported verbally on children with Education, Health and Care Plans (EHCPs), including the following:

**Nursery to reception** - achieved by 15 February 2023 deadline, 47 children, 45 placed for September 2023, 41 named in line with parental preference (2 children continued placement not impacted by deadline).  
**Year 6 to Year 7** - achieved by 15th February 2023 deadline, 141 children, 102 placed for September 2023, 91 named in line with parental preference (39 continuation of placement not impacted by deadline).  
**Year 11 to Year 12** - no data yet as deadline would be 31 March 2023.  
**Number of assessments completed in February 2023** - 87 plans were finalised in February, which was the highest number of plans completed in

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a single month since the Performance Indicator tracker was created in 2019.

**Outstanding assessments** - decreased from 186 to 93.

Members of the Committee asked questions/raised matters on the following issues:

- The anticipated date for confirmation of Reception places.
- Waiting times beyond 20 weeks for EHCPs.
- The estimated completion timescale.
- The appeals process for high schools.
- The number of preferences parents were able to indicate for high schools.
- The number of academies in Sefton.

RESOLVED:

That the information provided on Education, Health and Care Plans be noted.

### **56. OFSTED INSPECTION REPORTS**

The Committee considered the report of the Assistant Director of Children's Services (Education) updating on recent Ofsted Inspection Reports and the work of the School Improvement Team.

The following schools had been inspected and reports received during the Autumn term of 2022:

- Our Lady Queen of Peace Primary School
- Savio Salesian College
- St. Mary's Catholic Primary School
- St. Andrew's Academy
- King's Leadership Academy Hawthorns
- Thomas Gray Primary School
- Norwood Primary School
- St. Michael's High School
- St. Oswald's CE Primary School
- Hatton Hill Primary School
- Formby High School

A Summary of Ofsted Outcomes and Support during Autumn 2022 was attached to the report.

RESOLVED:

That the report be noted.

### **57. LGA TRAINING PROPOSALS AND FREQUENCY OF MEETINGS**

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The Committee considered the report of the Assistant Director of Corporate Resources and Customer Services (Strategic Support) outlining proposals for the Local Government Association (LGA) to provide training for Members of the Committee and for all Members in relation to corporate parenting.

The report also sought approval for the Committee to return to its normal pattern of five meetings per year.

The report outlined information on:

- LGA Proposals
- Dedicated support for the Overview and Scrutiny Committee (Children's Services and Safeguarding)
- All Member Corporate Parenting Briefing
- Support for Members of all Overview and Scrutiny Committees
- Support for the Chair of the Overview and Scrutiny Committee (Children's Services and Safeguarding)
- Support for all Scrutiny Chairs and Vice-Chairs
- Frequency of Meetings during 2023/24

Members of the Committee asked questions/raised matters on the following issues:

- Whether further training would be provided in the event that the dedicated support for the Overview and Scrutiny Committee (Children's Services and Safeguarding) identified further training requirements.
- Concerns regarding the proposed frequency of meetings for 2023/23 and the possibility of Members not receiving sufficient information. Additional ad hoc and informal meetings could be held at the Chair's discretion, if deemed necessary.

RESOLVED: That

- (1) the proposals for training by the Local Government Association be endorsed; and
- (2) the Committee return to the normal cycle of 5 meetings per municipal year.

### **58. CABINET MEMBER REPORTS**

The Committee considered the report of the Chief Legal and Democratic Officer submitting the most recent update reports from the Cabinet Member – Children's Social Care, and the Cabinet Member – Education, whose portfolios fell within the remit of the Committee.

The Cabinet Member update report – Children's Social Care, attached to the report at Appendix A, outlined information on the following:

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- Children's Social Care
- Youth Justice Service:
  - Performance
  - Youth Justice Partnership
  - Prevention Projects
  - Education

The Cabinet Member update report – Education, attached to the report at Appendix B, outlined information on the following:

- Attendance
- Exclusions
- Special Educational Needs and Disabilities (SEND)
- School Improvement
- Early Years
- Virtual School
- Educational Psychologists
- Alternative Provision

Councillors Roscoe and Doyle attended the meeting to present their reports and to respond to any questions or issues raised by Members of the Committee.

Members of the Committee raised the following questions/issues:

- The resignation of the Executive Director of Children's Social Care and Education.
- Additional Assistant Director posts within the Children's Services function and the stability they offered to the Service.
- Concerns that a new Executive Director could change recent developments within the Service.
- The possibility of external candidates for the Executive Director position and their access to the Children's Services Improvement Plan.

RESOLVED:

That the update reports from the Cabinet Member – Children's Social Care and the Cabinet Member – Education be noted.

### **59. WORK PROGRAMME KEY DECISION FORWARD PLAN**

The Committee considered the report of the Chief Legal and Democratic Officer seeking to:

- review the Committee's Work Programme for the remainder of the Municipal Year 2022/23;
- identify any items for pre-scrutiny by the Committee from the Key Decision Forward Plan;

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- receive an update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee; and
- note the information provided in the separate report on the "Education Scorecard" and to consider the possible re-establishment of a Working Group to review the topic of Secondary School Performance and Attainment Working Group.

The following appendices were attached to the report:

- Appendix A - Work Programme for 2022/23;
- Appendix B – the latest Key Decision Forward Plan items relating to the Committee.

Since the agenda for the meeting was published, a further Key Decision Forward Plan had been produced and the Committee was invited to identify any items for pre-scrutiny, as set out in the supplementary agenda at Appendix C.

Members of the Committee raised the following questions/issues:

- Consideration of Children and Adolescent Mental Health Service (CAMHS). A detailed CAMHS/mental health report was anticipated for the next meeting on 6 June 2023, and further consideration could be given following submission of the report.
- A vote on the re-establishment of a Working Group to review the topic of Secondary School Performance and Attainment Working Group indicated that the consensus was not to re-establish the Working Group.

RESOLVED: That

- (1) the Work Programme for 2022/23, as set out at Appendix A to the report, be noted, along with any additional items to be included and agreed;
- (2) further to Minutes numbered 52 (2) and (3) and 53 (2) above, the following items be added to the Committee's Work Programme for 2023/24:
  - (a) representatives of the Police and other Multi-Agency Safeguarding Hub (MASH) team members be invited to attend a future meeting of the Committee;
  - (b) the Assistant Director of Children's Services (Quality, Assurance and Safeguarding) be requested to submit the report presented to the Improvement Board on training and development to a future meeting of the Committee;
  - (c) the Assistant Director (Quality, Assurance and Safeguarding) be requested to submit data on the quality of case audits to future Committee meetings on a regular basis; and

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- (d) further consideration be given to Children and Adolescent Mental Health Service (CAMHS) during 2023/24;
- (3) the Key Decision Forward Plan for the periods 1 March – 30 June 2023 and 1 April – 31 July 2023, be noted;
- (4) the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee be noted; and
- (5) the information provided in the separate report on the “Education Scorecard” be noted and a Working Group to review the topic of Secondary School Performance and Attainment Working Group, be not established.

<b>Report to:</b>	Overview and Scrutiny Committee (Children's Services and Safeguarding)	<b>Date of Meeting</b>	6 June 2023
<b>Subject:</b>	Sefton Place - Community Emotional Health and Wellbeing Services update, 2022 - 2023		
<b>Report of:</b>	Cheshire and Merseyside Integrated Care Board, Sefton Place	<b>Wards Affected:</b>	Sefton wide
<b>This Report Contains Exempt / Confidential Information</b>	No		
<b>Contact Officer:</b>	Peter Wong, Transformation & Partnerships Senior Manager (Children and Young People)		
<b>Tel:</b>			
<b>Email:</b>	Peter.wong@southseftonccg.nhs.uk		

### Purpose / Summary of Report:

To provide an update of the performance and developments of children and young people's commissioned emotional health and wellbeing services and support, 2022 - 2023.

### Recommendation:

To note and accept the Sefton Place Community Emotional Health and Wellbeing Services update, 2022 - 2023.

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## **Sefton Place - Community Emotional Health and Wellbeing Services update, 2022 - 2023**

### **1. Introduction**

This report focuses on the performance and developments of Sefton's mental health services, specifically in light of the ongoing increases in the volume and nature of demand, and the challenges this presents.

Since the onset of the pandemic in March 2020, the impact of COVID on children and young people's emotional health and wellbeing has been widely reported both at a local and national level. Mental health services have experienced an unprecedented and sustained increase in demand and the number of urgent, high risk and complex cases continues to be a concerning feature. For example, between 2019/20 and 2022/23, Alder Hey Children's Hospital Specialist CAMHS experienced a 42% increase in referrals received, and a 49% increase in referrals accepted to the service.

On a strategic and operational level, the local system and services continue to respond and adapt to the ongoing challenges and are working collaboratively on approaches and new pathways and models of delivery. At the same time, national, regional and local mental health strategies and plans for children and young people's services continue to focus on the implementation of the NHS Long Term Plan ambitions and the associated increases in mental health investment as detailed in the Mental Health Investment Standards.

Notably during 2022/23, these ongoing challenges and developments have been happening against a backdrop of significant change for the NHS, as regional Integrated Care Boards were established on 1 July 2022, taking over the NHS planning and commissioning functions of the former Clinical Commissioning Groups. Whilst this report does not directly focus or reflect the impact of these changes on the planning, commissioning and delivery of mental health services, there are frequent references to NHS Cheshire and Merseyside Integrated Care Board (C&M ICB) and Sefton Place, as the new NHS statutory commissioning organisation.

Throughout the report, there is a key focus on developments in mental health services for children and young people and a dedicated section highlighting projects and initiatives which are improving the emotional health and wellbeing offer across Sefton (section 4). Notably there have been some significant developments in the mental health support and pathways for Sefton's most vulnerable groups, such as implementation of the Key Worker team and establishment of Gateway meetings.

The report also reflects the further development and strengthening of the relationships across Sefton's Emotional Health Partnership and some of the early intervention and prevention work that is happening both in the local community and schools.

**2. Alder Hey Specialist Child and Adolescent Mental Health Services**

**2.1 CAMHS**

**2.1.1 Overview of Performance**

Throughout 2022/23, Alder Hey Specialist Mental Health Services have continued to experience a significant increase in demand following the Covid-19 pandemic. While referrals received have remained steady for 2022/23 compared to the previous year, a higher proportion were accepted for Specialist Mental Health Services and the referral rate is still significantly increased compared to 2019/20 which evidences a continued increase in demand.

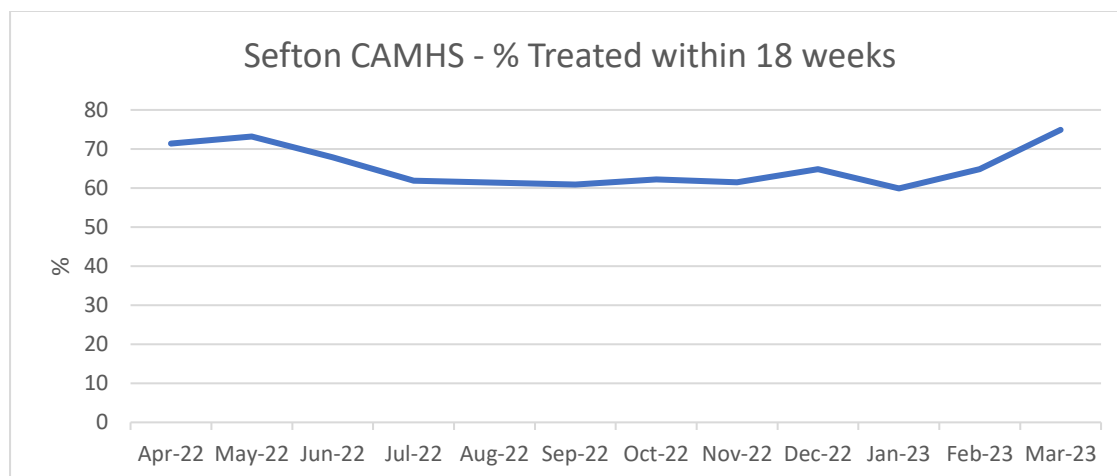
**Table 1: Number of referrals received and accepted – Sefton Community Mental Health Services**

Financial Year	Referrals Received	Referrals Accepted
2019/20	1335	720
2020/21	1234	695
2021/22	1837	935
2022/23	1893	1073

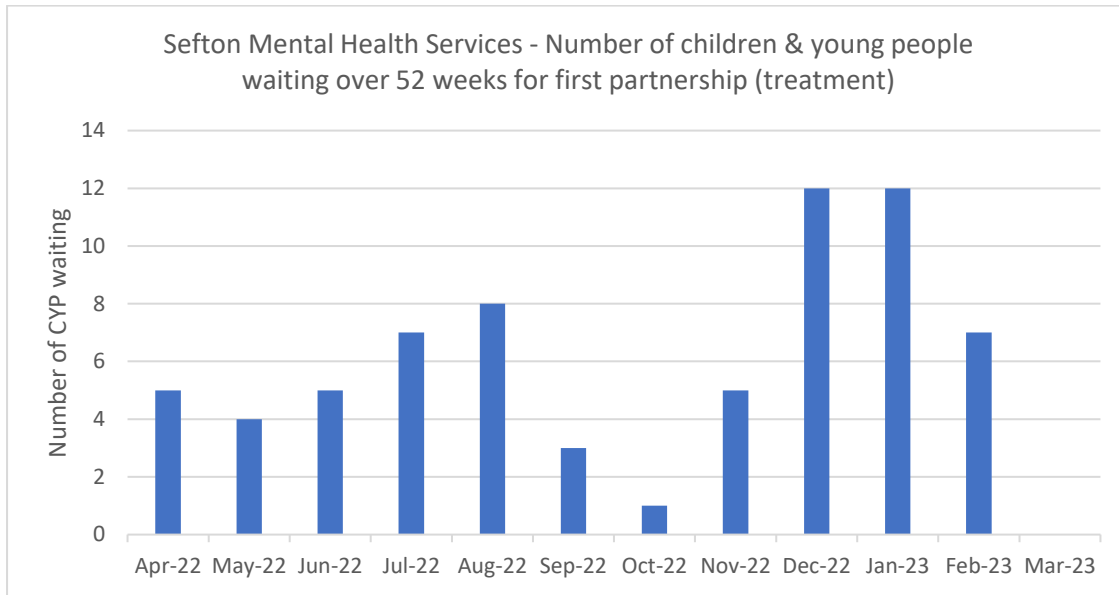
Between 2019/20 and 2022/23, there has been a **42%** increase in referrals received, and a **49%** increase in referrals accepted for the service (**Table 1**).

During 2022/23, there has been an overall improvement in waiting times which is expected to continue to improve following investment in capacity within the service from September 2022. In March 2023, the percentage of children and young people receiving treatment within 18 weeks improved to **74.9%** and there were zero children and young people waiting over 52 weeks for treatment. (**Charts 1 & 2**).

**Chart 1: Referral to treatment compliance – Sefton Community Mental Health Services, 2022/23**



**Chart 2: Number of Children and Young People waiting over 52 weeks for their first partnership, 2022/23 – Sefton Community Mental Health Services, 2022/23**

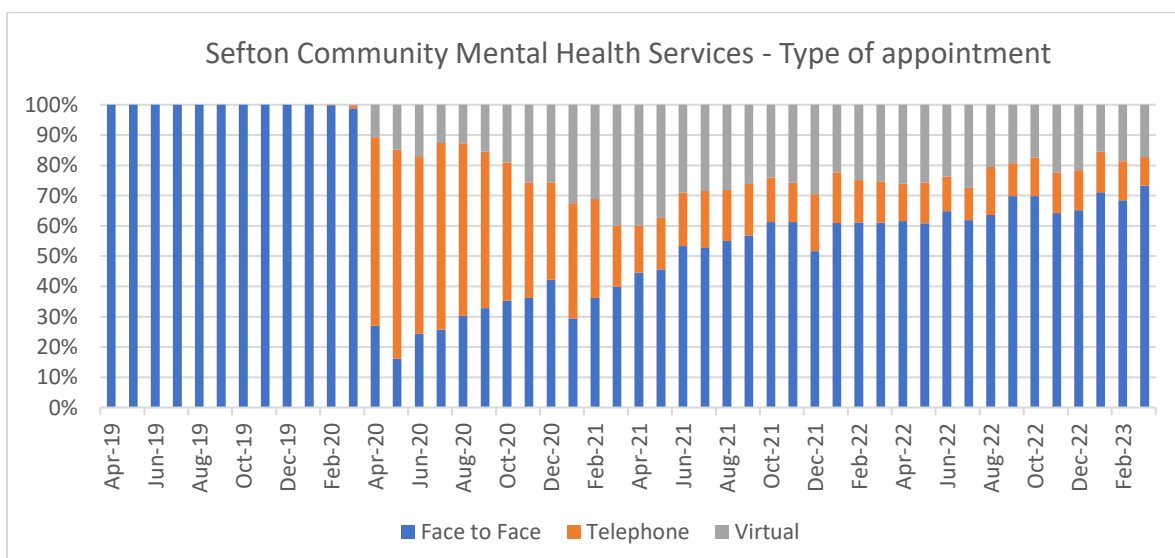


In 2022/23, the service had **9,830** attended contacts with children and young people which is an increase of **21.5%** compared to 2019/20. This increase in contacts is due to increased investment as well as improved productivity within teams.

The covid-19 pandemic saw the rapid introduction of telephone and video appointments, in order to maintain service provision during this period. Whilst services have gradually returned to predominantly face-to-face delivery, virtual options do offer flexibility for children and young people and this still remains an option for delivery of specialist mental health services. In addition, virtual options facilitate staff to attend 'virtual' professional meetings more flexibly and contribute to multi-agency meetings.

In line with national expectation for NHS commissioned services, during 2022/23 approximately 70% of appointments were offered face-to-face and 25-30% of appointments virtually within Sefton Community Mental Health Services (**Chart 3**).

**Chart 3: Modality of appointment attended – Sefton Community Mental Health Services**



### **2.1.2 Challenges and risks**

- Managing demand and the increased urgency and acuity of demand remains a challenge for all mental health services. A number of young people have poor functioning and a lack of social contact which can make service engagement resource heavy. There are an increasing number of children and young people who have significant risky behaviour and attempts to end life at a younger age; this impacts on service demands, as increasing time in service and intensity of support required over a sustained period.
- Transition to adult services continues to remain a challenge. There have been delays in transition to Adult Community Mental Health Teams by up to 4 months. In addition, young people are supported to complete treatment if that is clinically indicated past their 18<sup>th</sup> birthday. Sefton Community Mental Health Services continues, along with the Crisis Care Team, to improve the 16/17 service offer provided by MerseyCare and Alder Hey.
- In the last year, there have been challenges around recruitment due to a national shortage of appropriately trained mental health staff. There have been some recent improvements, with successful recruitment and vacancies being filled. In addition, new roles, such as wellbeing practitioners, are being recruited to improve timely access and increase the range of interventions provided.

### **2.1.3 Plans going forward**

- Considering new ways of working including piloting of low intensity pathway during 2023/24
- Focus on recruitment incentives to address challenges in recruitment to mental health services, a national issue
- Continued development of new roles within mental health services
- Accessing additional training for entry level staff; working with the Improving Access to Psychological Therapies (IAPT) collaborative to attract HEE funding for new roles.
- Along with the Crisis Care Team, Sefton Community Mental Health Services continue to work on 16/17-year-old transition pathway with MerseyCare.

### **2.1.4 Oversight and management of risk**

- Oversight of mental health access and waiting times is via the Alder Hey performance framework and is reported to commissioners through the Alder Hey contract monitoring process.
- All urgent children and young people who breach a three week wait, or children and young people waiting over 18 weeks receive a harm review and / or a waiting list appointment to enable re-triage and escalation, if needed
- While waiting, all parents are offered a “while you wait” parent support offer
- Continued co-production of services with service users to ensure the voice and views of children and young people is at the heart of service delivery

## 2.1.5 Managing demand

- All children and young people on choice and partnership waiting lists are sent a waiting list letter. This includes details of the offer from Kooth, information on Crisis Care Support and details of parent support (Fresh Plus).
- Waiting list appointment/harm reviews for all children and young people waiting over 18 weeks are done, which ensure an outreach re-triage and escalation if needed
- Low intensity group work is offered as an intervention where appropriate

## 2.2 Alder Hey Eating Disorders Service

### 2.2.1 Overview of performance

Referrals have remained steady in 2022/23 compared to the previous year but are still significantly increased compared to 2019/20 showing an overall sustained increase in demand. In 2022/23, **243** referrals were accepted to the service which is an increase of **66%** on 2019/20 (**Table 2**).

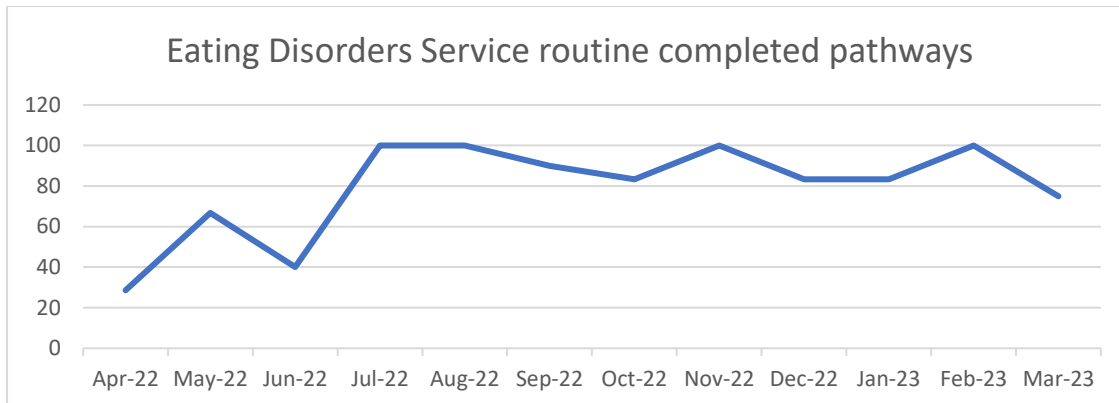
**Table 2: Referrals received and accepted – Eating Disorder Service**

Financial Year	Referrals Received	Referrals Accepted
2019/20	179	146
2020/21	265	182
2021/22	446	267
2022/23	403	243

In 2022/23, the service had **3,979** attended contacts with children and young people which is an increase of **87%** compared to 2019/20. This increase in contacts is due to increased investment and recruitment, as well as staff working additional hours to meet demand. There has also been an improvement in waiting times to access the service throughout 2022/23 (**Chart 5**).

There have been **14** urgent referrals received within the last 12 months, with **8** seen within 1 week. The reason for urgent and routine breaches is often due to parent/patient choice or non-attendance, rather than capacity issues.

**Chart 5: Percentage of routine pathways completed within four weeks of referral – Eating Disorder Service**



During summer 2022, a pilot was undertaken to provide a day programme of support for young people admitted to an acute paediatric ward at Alder Hey with an eating disorder. Initial feedback was positive but was paused during the winter period in response to acute paediatric bed capacity pressure. It is anticipated that this will re-start in the summer and the model will continue to develop whilst works start on the proposed standalone Eating Disorder Day unit.

In November 2022, a phased approach to offer a service to young people with Avoidant Restrictive Food Intake Disorder (ARFIDs) commenced with referrals initially being received from acute physical health colleagues. This has been rolled out to accept referrals from community services in March 2023, with plans to further roll out to wider health teams in September 2023.

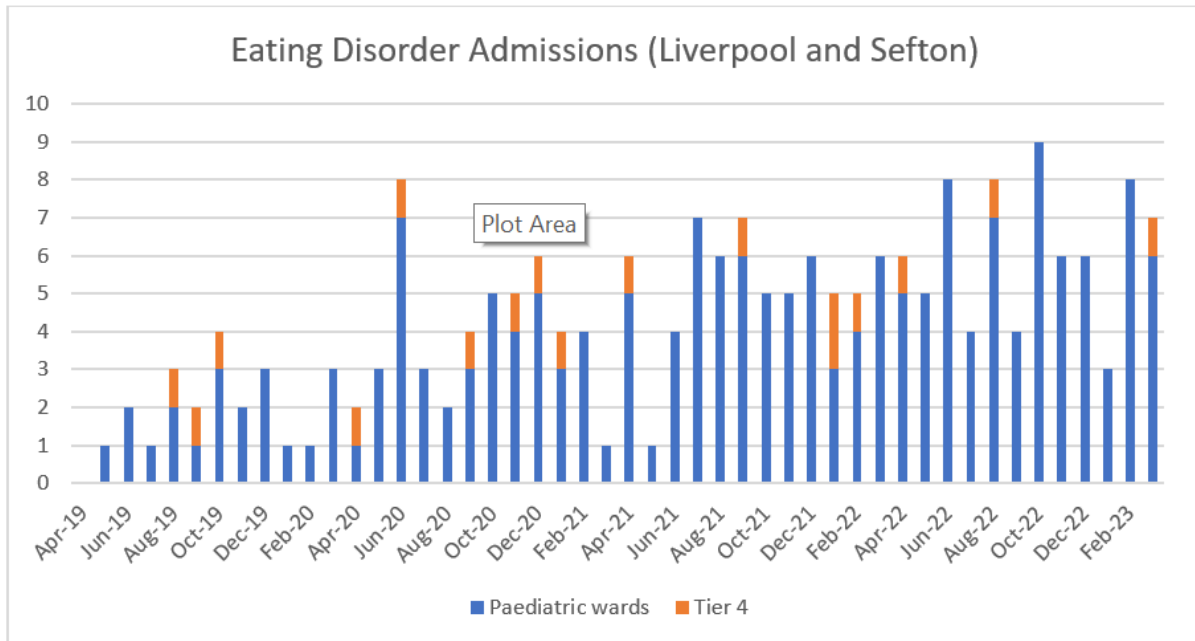
In addition to increased referral rates, the service has also seen:

- An increase in admissions to paediatric wards or Tier 4 inpatient units, with an increased length of stay due to a lack of Specialist Eating Disorder beds (**Table 3 & Chart 6**)
- Late referrals from primary care services have led to an increase in the number of children and young people presenting at their first assessment at a high physical risk due to weight loss and requiring a paediatric admission to stabilise their physical health and support re-feeding
- A decline in the health of young people known to the service

**Table 3: Number of admissions, and length of stay – Eating Disorder Service (all areas)**

Financial Year	Total Number of Admissions (Paediatric and Tier 4)	Average Length of admission Paediatric Ward	Average Length of admission Tier 4
2019/20	23	10	137
2020/21	47	14	234
2021/22	63	19	328
2022/23	74	17	142

**Chart 6: Number of Eating Disorder Admissions to paediatric and Tier 4 beds – Eating Disorder Service (all areas)**



### 2.2.2 Challenges and risks

- Lack of Specialist Eating Disorder beds nationally, but particularly locally meaning that there is a requirement to admit young people to paediatric wards, sometimes with additional support from Prometheus at a significant cost (approx. £320k 2022/23)
- The service continues to see an increase in demand and acuity
- There are continued challenges with recruitment as services are expanding nationally

### 2.2.3 Actions to address

- Increased the number of support staff for Eating Disorder Team, including supporting recruitment of Health Care Assistants (HCAs) for paediatric wards, with additional eating disorder training. This is providing additional support to young people admitted to Alder Hey.
- Utilisation of additional specialist support, provided by Prometheus, when young people are admitted to a paediatric ward while waiting for a specialist eating disorder Tier 4 bed.
- Day programme pilot to reduce length of admission.
- Consideration of new roles / career pathways, with additional training for entry level staff.
- Commissioning of whole team training to ensure staff are appropriately trained for the patient cohort.
- Introduction of recruitment benefits to attract new staff to the services.
- Increased links with Cheshire and Merseyside Eating Disorder Service (CHEDS), which is a regional Tier 4 service.
- Clinical Lead is the C&M Eating Disorder development group lead

**2.2.3 Developments:**

- Development of a standalone Eating Disorder Day Unit following a successful NHS England capital bid.
- Continued expansion of the ARFID offer.

**2.3 Alder Hey Crisis Care Service**

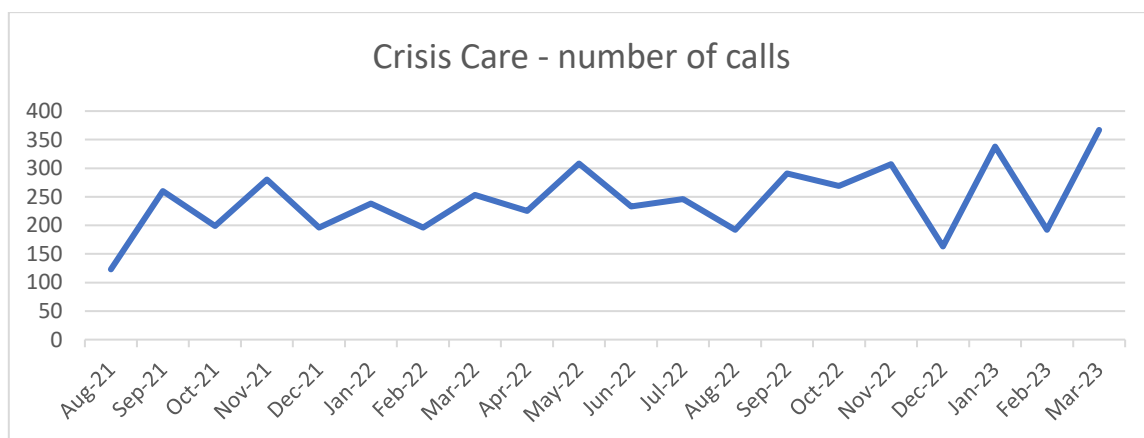
**2.3.1 Overview of performance**

Alder Hey provide a 24/7 service for children and young people in Sefton and Liverpool which offers mental health advice and guidance to children and young people, their families and carers and any professionals supporting their care. They also receive calls from the ambulance service and the police amongst other agencies where a young person is in crisis at home or in a public area. The service offers direct support to Alder Hey and Ormskirk emergency departments and provides face to face and virtual assessments for children and young people presenting in crisis. The service also offers access via a Freephone telephone line and text messaging service.

During 2022/23, the demand for the service has continued to increase, with an increase in levels of risk, complexity and acuity (**Charts 7 & 8**). During this period, **45%** of the calls made to the Crisis Care team were regarding young people not previously known to Alder Hey Specialist Mental Health Services, with March 2023 being the busiest month for the service since April 2020 (**Charts 7 & 8**).

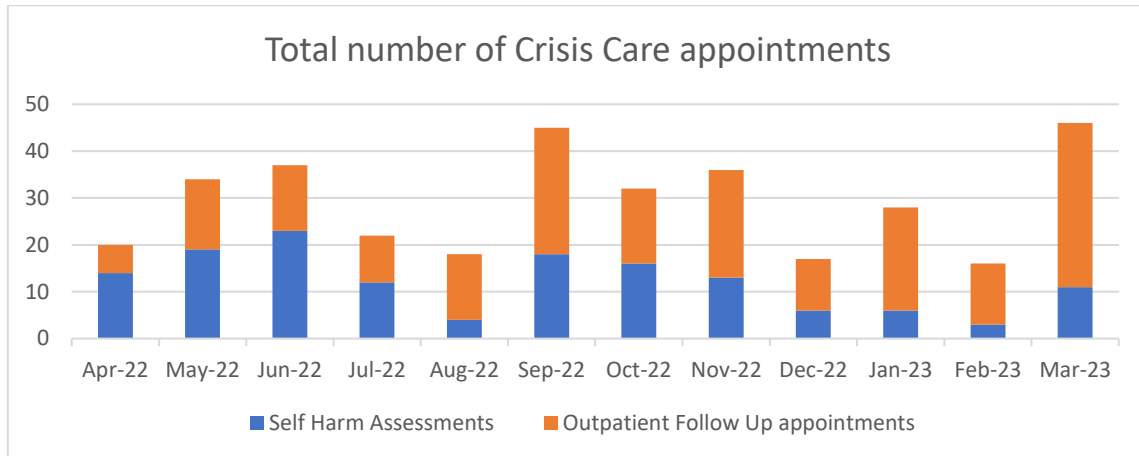
Whilst the demand for the service has continued to increase, the number of children and young people attending Alder Hey Emergency Department due to their mental health has reduced (**Chart 9**), with the number of children and young people needing an acute paediatric admission to Alder Hey following an attendance at Alder Hey Emergency Department also reducing (**Chart 10**).

**Chart 7: Total number of calls made and received – Alder Hey Crisis Care Service**

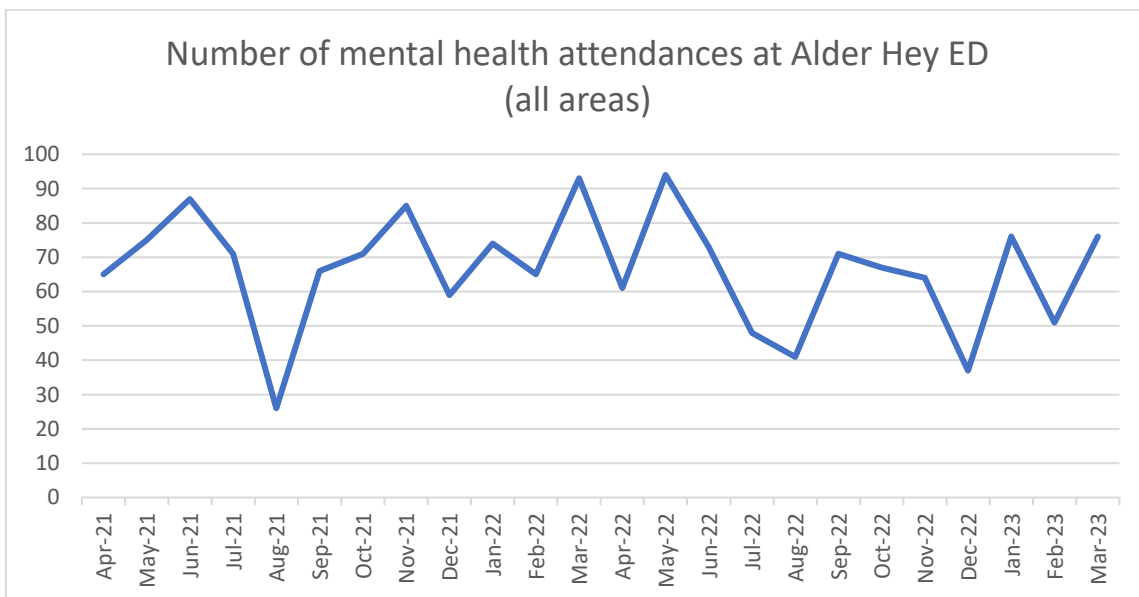




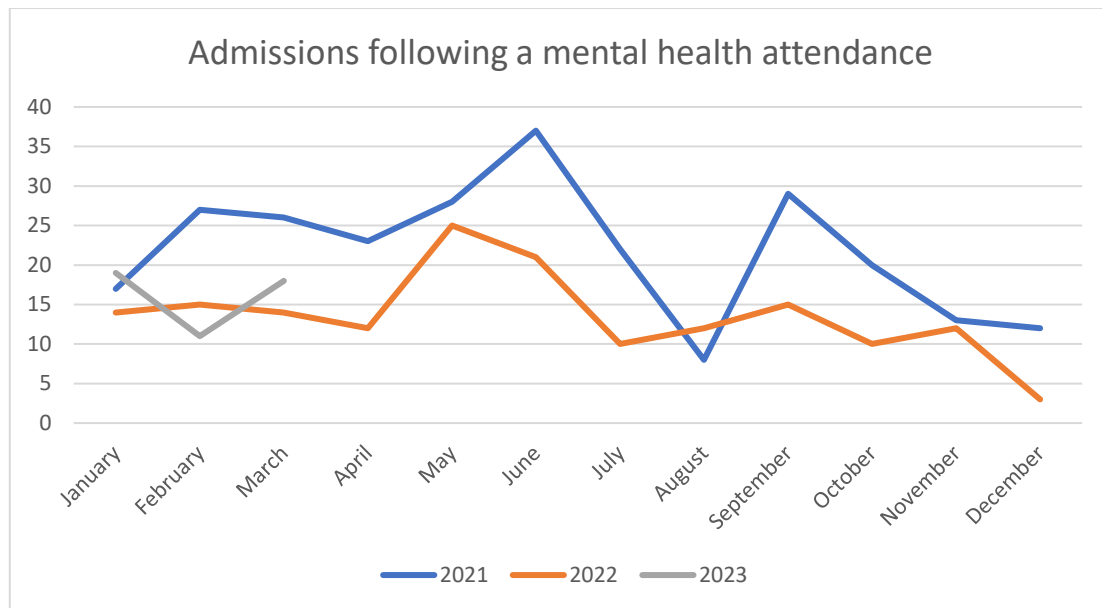
**Chart 8: Total number of outpatient appointments – Alder Hey Crisis Care Service**



**Chart 9: Number of mental health attendances at Alder Hey Emergency Department (all areas)**



**Chart 10: Total number of admissions to Alder Hey Hospital following a mental health attendance at the Emergency Department**



The Crisis Care Service received investment in 2021/22 as part of the Mental Health Investment Standard and Delivery Plan to sustain the 24/7 Crisis Care line and develop a home-based intensive treatment team. All four functions of the crisis care service model are now in place:

- 24/7 phone line
- Home Based Treatment Team (HBT)
- Crisis response
- Crisis resolution

**2.3.2 Challenges and risks**

- In the last year, there have been challenges around recruitment due to a national shortage of appropriately trained mental health practitioners. There have been some recent improvements, with posts starting to be filled.
- Risk of burnout of current workforce due to demands/additional shifts.
- Transition to adult services remains a concern – along with Sefton Community Mental Health Services, the Crisis Care Team will continue to work on the 16/17 transition pathway with Merseycare.

**2.3.3 Plans for future**

- Along with Sefton Community Mental Health Services the Crisis Care Team will continue to work on 16/17 transition pathway with Merseycare.
- Introduction of recruitment benefits to attract new staff to the services
- Reviewing skill mix across service to attract newly qualified staff into posts within the team

- Introduction of new posts (Youth Intensive Psychological Practitioners, Advanced Clinical Practitioner)
- Improved training offer – including sleep practitioner training, Solution Focused Therapy training
- Beat the Burnout programme introduced for all staff
- Introduction of a ‘relationship meeting’ between Alder Hey Children’s NHS Foundation Trust, Southport and Ormskirk NHS Foundation Trust and West Lancashire NHS Foundation Trust to improve communications between providers

### 2.3.4 Developments

- CAMHS/AMHS Transition worker now in post – to support transition between children/young people and adult services, and to support improvements in the 16/17-year-olds crisis pathway.
- Home Base Treatment/Intensive Support Team (HBT/IST) model – recruited to appropriate staff groups and the clinical pathway has been finalised. Team members are participating in Gateway and DSD meetings/processes (see sections 4.2 and 4.3). Improved links with Sefton Community Mental Health Services, with representatives from Sefton Community Mental Health Services attending MDTs to improve patient pathways. The team has prevented admissions and facilitated discharges.
- Advanced Clinical Practitioner in post from January 2023, supporting Crisis Care and HBT/IST teams.
- Continuing to work with local providers and NHSE regarding 111 options for Mental Health, and Mental Health Response Vehicle plans. On track to go live with 111 in March 2024.
- Involvement in National Crisis Young Persons Task and Finish Group

### 2.4 Mental Health in Schools Teams (MHSTs)

#### 2.4.1 Overview of performance

Sefton Mental Health in Schools Teams (MHSTs) provide evidence based, low intensity intervention and are provided by Alder Hey Children’s Hospital. Sefton has two fully established MHSTs and implementation of a third team commenced in January 2023. Through a national bid process, Sefton was successful in securing its third mental health support team as part of Wave 8 of the national roll out of the programme.

The three MHSTs provide support to 60 identified schools across Sefton with a focus on early intervention through Whole School Approach (WSA) and 1:1 interventions. Sefton MHSTs have successfully engaged with all schools and have developed new interfaces to maximise co-production with Mental Health Leads (MHLs) which has been reviewed positively.

In 2022/23 referrals increased significantly across both north and south teams with a total of 69 referrals in Q2 and 208 in Q3, following the service opening to all referrals from schools. This has stabilised in Q4 2022/23 (**Table 4**).

**Table 4: Number of MHST referrals from schools in Q2 - Q4, 2022/23**

Quarter	North	South	Central (new team)	Total
Q2	23	46	N/A	69
Q3	101	107	N/A	208
Q4	67	80	7	154

#### **2.4.2 Challenges and risks**

- The main challenges in 2022/23 relate to recruitment and retention of qualified Educational Mental Health Practitioners (EMHPs) due to progression opportunities elsewhere, impacting capacity.
- Limited capacity of EMHP trainees during initial 12 month training programme, however case load numbers increase once qualified.
- Development of internal waiting list during Q2 following increased demand which is not equal across schools.
- Capacity challenges for the EMHPs/MHPs (Mental Health Practitioners) linked to schools with higher demand.
- Low intensity model does not meet the needs of children in Pupil Referral Units (PRUs) and Social Emotional Behavioural Difficulties (SEBD) specialist schools due to the complex nature of their presentations.

#### **2.4.3 Actions to address**

- A significant recruitment drive was undertaken during Q2/3 resulting in successful recruitment of the Wave 8 team. There is further fixed term recruitment ongoing within the team.
- The service has seen an improvement in the ability to recruit qualified EMHPs
- Focus on group offer for schools to support management of increased demand.
- Improved training offer – with staff undertaking additional training to meet the needs of the young people.
- Regular consultation with Mental Health Leads (MHLs) in schools regarding any young people on the waiting list.
- To support PRUs and SEBD specialist schools, senior MHPs and Team Leads have undertaken additional training (NVR, IAPT) to facilitate WSA, psychoeducation and consultation.

#### **2.4.4 Plans for future**

- Facilitation/development of group work and WSA
- Close monitoring of waiting list in collaboration with schools

### 2.4.5 Managing demand

- All young people on the waiting list will be allocated to MHPs and EMHPs recently recruited. The service is confident that all young people referred will receive assessment within the academic year.
- All young people on the waiting list have received a letter and confirmation that the service will be in contact with signposting information i.e. crisis care.

### 2.4.6 Developments

- To support staff retention the service is nominating Qualified EMHPs to complete the Senior EMHP course and for MHPS to complete the Supervision course.
- The service has also supported staff training in high intensity models ensuring a greater range of interventions are available to meet a broader range of needs.
- The national registration process for qualified EMHPs has recently been launched. As a large employer of these roles Alder Hey has engaged with the national team and will support individuals to achieve this registration, further supporting staff retention.

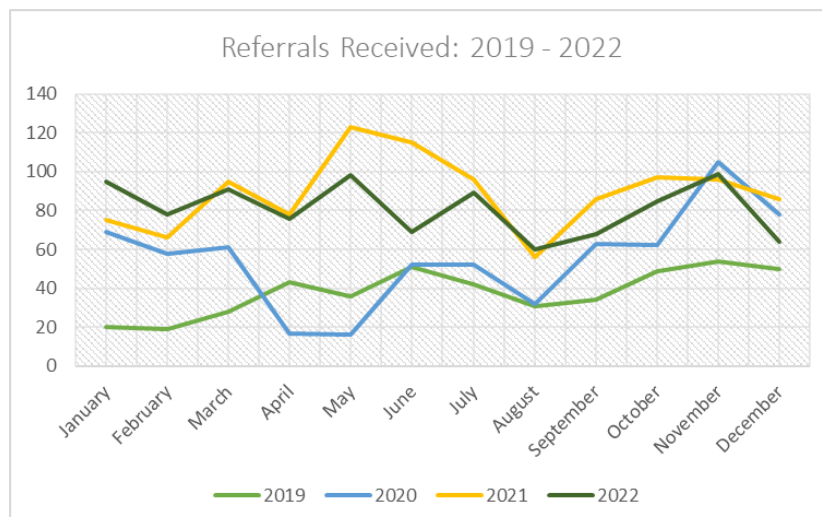
## 3. Third sector mental health providers

### 3.1 Referral rates

Throughout 2022/23, levels of demand have continued to be challenging for third sector providers, Venus and Parenting 2000 and the services continue to experience a sustained increase in referrals as outlined in the tables and graphs below. At its peak, Venus experienced a 134% increase from pre-pandemic levels. These have remained at a high rate throughout 2022 with an 112% increase from 2019 figures.

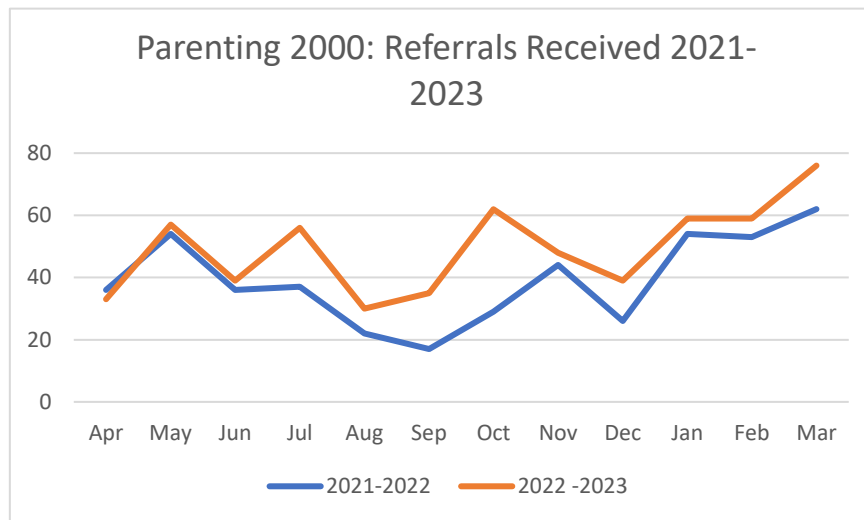
#### Venus referral rates, 2019 - 2022

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
2019	20	19	28	43	36	51	42	31	34	49	54	50	457
2020	69	58	61	17	16	52	52	32	63	62	105	78	665
2021	75	66	95	78	123	115	96	56	86	97	96	86	1069
2022	95	78	91	76	98	69	89	60	69	84	99	65	973



**Parenting 2000 referral rates, 2022 - 23**

Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
<b>2021-2022</b>	36	54	36	37	22	17	29	44	26	54	53	62	470
<b>2022-2023</b>	33	57	39	56	30	35	62	48	39	59	59	76	593



**3.2 Waiting times and new waiting time management initiatives**

The challenges of the ongoing high levels of demand has had some significant impacts on waiting times as outlined below. To provide some short term additional capacity and support, C&M ICB (Sefton Place) agreed some further non recurrent funding in January 2023 to enable Venus and Parenting 2000 to deliver ongoing 'open access' support for those children and young people on the waiting list. Providers have also reviewed and developed differentiated assessment and treatment pathways and introduced some new ways of working to facilitate more appropriate and timely access to emotional health and wellbeing support.

**3.2.1 Venus Star Centre**

Due to increased service demand and loss and reduction of funding streams, 2022/23 was an especially challenging year for Venus. In January 2023, the service took the very difficult decision to close its service to new referrals to bring waiting lists down to a reasonable level. At the time of the pause, 250 children and young people were on the initial assessment waiting list, with the longest wait at 8 months, together with a wait of up to 8 months for allocation for intervention. This meant that from referral to treatment a young person requiring routine treatment could be waiting as long as 15 months which represented an increase risk.

Introducing the pause allowed Venus to completely clear the back log of assessments and make considerable inroads into the treatment wait list, enabling the service to reopen its doors to new referrals from 15 May 2023.

With funding secured for 2023/24, Venus plan to adjust their offer to maximise access:

- A 4 week wait for assessment and improved waiting times for therapeutic treatment at around 3-6 months depending on the intervention.
- Introduce a new pathway following assessment to engage young people and their parent/carers in group sessions where there is a mild to moderate presentation. This will allow the service to offer interventions to a larger number of young people and their carers
- The separate pathway will reduce the delay in accessing support for all young people and their families, and support a reduction in the waits for one-to-one interventions for those with higher complexity or mental health risk.

### 3.2.2 Parenting 2000

In September 2022 and in line with 4 week waiting time ambitions, the service introduced the offer of a 'Ticking Over' session which is available within 3 weeks of referral and initial triage by a clinician. A 'Ticking Over' session is an initial half hour session with a therapist which provides a brief intervention and identifies any children and young people with further higher risk presentations who can be escalated for priority treatment.

Lower risk children and young people are provided information of low intensity group activity and other suitable resources within the community. During 2022/23, Parenting 2000 successfully diverted 95 lower risk referrals from one-to-one therapy to low intensity group activity, such as the Youth Well Being Mentoring Programme and 'Youth Circle' educational psychologist led support group.

#### Average current waiting times:

- Referral to 'Ticking Over' session - average 3 weeks
- 'Ticking Over' to assessment – shortest is 4 - 6 weeks for high risk with treatment straight after assessment
- Referral to treatment 'routine' waiting times for low risk who choose not to access any of Parenting 2000's waiting time initiatives is 10 -12 months

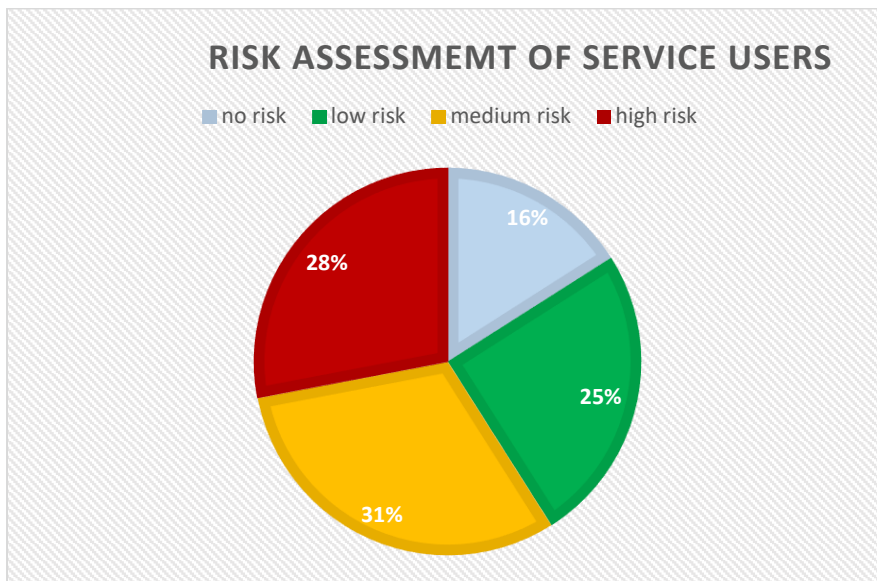
### 3.3 Assessing and managing risk

As with specialist CAMHS, 3<sup>rd</sup> sector partners have continued to witness high levels of mental health risk and complexity, particularly with regards to intentional self-harm, suicidal ideation, and disorder specific presentations. Both Venus and Parenting 2000 prioritise cases with identified risk for urgent assessment and/or treatment, which results in longer waiting times for routine appointments.

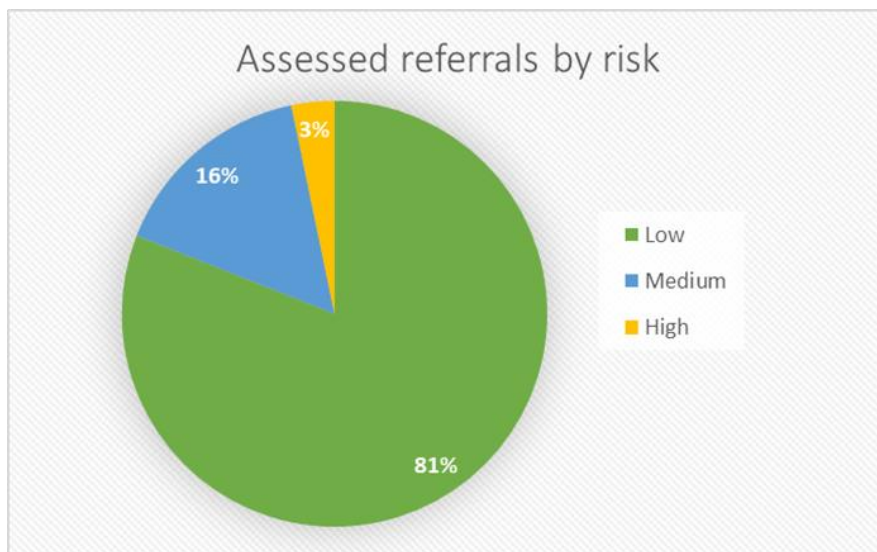
For both providers, cases with identified risk are prioritised for urgent assessment within 6 weeks. Following this, those with identified high risk commence treatment within 2 weeks and those with medium risk within 10 weeks.

The charts below show percentage of levels of risk for assessed cases.

**Parenting 2000 - levels of risk, 2022/23**



**Venus - levels of risk, 2022/23**



**4. Mental health system – further developments and updates**

**4.1 Tier 4 inpatient mental health**

As with all mental health services, there has been a continued high level of demand for T4 mental health inpatient beds since the pandemic and there is a ongoing recognised shortage of beds both locally and nationally, resulting in some young people with significant mental health needs being ‘stuck’ in acute beds and/or more frequently being placed ‘out of area’. Similarly, there are also insufficient specialist placements and/ or specialist community provision/support for when young people are ready for discharge, so delayed discharges can also be a common issue.



Whilst NHS E Specialist Commissioning is the responsible commissioner for Tier 4 secure and non-secure Child and Adolescent Mental Health Services (CAMHS) (including eating disorders), when there are no Tier 4 beds available, the local health system must hold and manage the risk and look for alternative solutions. In an increasing number of cases, this has involved the commissioning of additional specialist mental health support from private providers to contain and keep patients safe whilst they are in acute settings (as described in section 2.2.2). This spot purchasing of additional support has increased across all Cheshire and Merseyside 'places' and represents a significant financial burden for the system. C&M ICB is looking at an ICB commissioning solution to address the issues in the short to medium term and so reduce inefficiencies and costs.

Similarly, for those young people who present in crisis with challenging behaviour, but who do not have a mental health condition, the Local Authority is challenged in finding specialist community provision and/or specialist placements, as there is a shortage. This can also result in these young people getting stuck in an acute setting as timely and safe discharge is not possible and/or being placed in 'out of area' placements. The trauma and challenges of this situation are exacerbated for those children and young people in care and/or who have a learning disability and/or autism.

There are a number of national, ICB and Sefton Place specific workstreams which are addressing these system wide provision issues, some of which have been implemented or are in development, for example:

- Transforming Care – for those young people with a learning disability and/or autism, implementation of intensive support/home treatment services (section 2.3.4), key worker initiative (section 4.2) and development of 'places of safety';
- National new models of care and admission avoidance strategies, including introduction of 'Gateway Meetings' (section 4.3)

## **4.2 Implementation of Key Worker team**

As part of the national and C&M ICB Transforming Care programme and developments (4.1), Sefton Place was successful in being selected to be a pilot site for the key worker initiative.

The team commenced in post in January 2023 and are employed by NHS C&M ICB (Sefton Place). Consisting of a manager and 3 key workers, the team supports Sefton's most vulnerable children, young people (and their families) with a diagnosed learning disability and/or autism, with the express aim of preventing a mental health hospital admission and/or family/placement breakdown.

Those who are assessed at high risk of a Tier 4 admission sit on Sefton's Dynamic Support Database (DSD) and have access to the support of a key worker. The key workers have specialist knowledge and skills in working with people who have either a Learning Disability and/or Autism. They are not a clinical team.

To note, the DSD is for children and young people who have been diagnosed with a Learning Disability and/or Autism who display challenging behaviours and/or have mental health conditions which put them at risk of admission. This database has information about the child/young person and what areas of their care may require enhanced community support. The information helps services to work more closely together to manage a person's

support effectively and ensure good outcomes in the community. These children are discussed at a monthly multiagency tracker meeting.

#### **4.3 Establishment of Sefton Place ‘Gateway meetings’ and processes**

Over the last 12 months and in line with national new models of care and admission avoidance strategies, Sefton Place commissioners have been leading the development and establishment of ‘Gateway Meetings’ across the Sefton partnership. This is being supported by the wider C&M ICB through its dedicated ‘Gateway meeting’ project team.

Gateway meetings are a multi-agency approach to meeting the needs of young people who have moderate to severe mental health difficulties who have been identified at high level of risk of admission to Tier 4 CAMHS and/or placement breakdown. They are designed to ensure that the local system takes collective responsibility for the care and welfare of their young people. These are not to replace existing MDT meetings and frameworks, but are focused on the cases where there are specific system barriers and issues to securing appropriate support. Unlike those children and young people who sit on the DSD, a diagnoses of Autism or LD is not required to benefit from this process, however, as the concept and multi agency approach required for these different cohorts is essentially the same, Sefton has combined its Gateway and DSD tracker meetings. The combined group meets on a monthly basis and includes senior representation from social care, education, SEN team, CAMHS providers and Early Help teams.

Further information of the Gateway meetings and processes can be found here:

<https://www.levelupcm.nhs.uk/CYPMH-gateway>

To support with the management and oversight of complex cases and establishment/management of the Gateway processes, C&M ICB (Sefton Place) appointed a Complex Case Commissioning Manager who commenced in post in December 2022. The role is closely aligned to the work and developments of the Key Worker team functions and they are working together to develop and strengthen a whole system approach to the management and over sight of Sefton’s complex children and young people. This includes support in developing Sefton’s approach and offer for ‘Cared for Children’ and those on the ‘edge of care’, as part of Sefton Council’s Inspection of Local Authorities Children (ILAC) improvement plans.

#### **4.4 Crisis escalation pathways**

There has been a strengthening of systems and processes across the local mental health provider landscape, notably in developing crisis escalation pathways for those young people aged 16 – 18 who present in crisis at an adult A&E. A Cheshire and Merseyside wide pathway and protocol has been developed by adult and CYP community and acute trusts, who have also collaborated in the development of Standing Operating Procedures for management of crisis cases in an acute setting.

In addition, the newly established Gateway processes also includes a C&M ICB wide escalation or ‘resolution’ process for urgent and crisis cases. The resolution process is initiated should an initial Gateway meeting not be successful in agreeing and mobilising an appropriate system-wide plan to prevent further escalation of a young person’s mental health and/or placement breakdown.

The 'resolution' process includes a number of escalation levels from Level 1 at 'place' to Level 4 at NHSE regional, for exceptional cases when a resolution cannot be agreed at place or ICB levels. The expectation is that the majority of cases requiring resolution should be dealt with at a Level 1, place-based resolution meeting. Further escalation would only be required if there continued to be significant place-based disagreements about needs, provision or funding.

#### **4.5 Developing services for Cared for and Care experienced young people.**

Alder Hey Children's Hospital has sought the view of cared for young people who access Sefton's Community Mental Health Services to understand how services can be developed. Access data for this group of children and young people is reviewed quarterly and difficulties with data quality have been identified which are being reviewed.

In response to these audits, and with a focus to improve timely access for cared for children, a pilot project was introduced in September 2022. This pilot introduced a "professional" consultation with adults who look after the children and young people prior to meeting the young people themselves. This provided an opportunity to understand the context and to think about the best way to engage the child or young person in their mental health appointments, recognising the demand services can place on children to tell their story. This pilot improved timely access for cared for children and young people and has been positively received by social workers. Young people are also matched to practitioners to promote a better patient journey.

In addition, Sefton Place commissioners and colleagues are supporting Sefton Children's Social Care to develop a system wide approach and offer to improve the emotional health and wellbeing support available to cared for and care experienced young people.

Through the Safeguarding Partnership improvement work, Sefton Place is also leading on the delivery of an Emotional Health and Wellbeing action plan for this cohort, which includes a focus on increasing the awareness of the emotional health and wellbeing offer amongst professionals, so they can refer and signpost accordingly.

Health system partners are also supporting increases in the annual completion of the strengths and difficulties questionnaire (SDQ) which is a brief behavioural screening tool informing professionals of the status of a young person's emotional and behavioural development used as part a holistic assessment of need. This forms part of the child's health plan and appropriate referrals are completed with consent from the young person.

#### **4.6 Building Attachments and Bonds Service (BABS)**

A parent infant Building Attachment and Bonding Service (BABS) was introduced in Sefton in January 2022 to support parents to prevent the impact of Adverse Childhood Experiences (ACEs) on their parenting capabilities.

This service allows for early identification of parent/infant attachment issues to facilitate support or referrals into specialist services, ensuring positive parent and child relationship and wellbeing, with supported transition to parenthood through the use of targeted specialist psychological support. 34 families have so far been supported by this service.

Initially funded by funding secured by the Local Authority's Public Health programme, in 2023/24 this will be jointly funded by the Local Authority and NHS C&M ICB.

#### **4.7 Primary Care pilot – children and young people mental health roles**

Alder Hey Children's Hospital is working with the Primary Care Networks to pilot a collaboration between primary care and young people's mental health services and partnership agencies to deliver low intensity support to children and young people with mild to moderate mental health difficulties.

This has created additional workforce capacity to strengthen the integration of children and young people's mental health services in primary care. Two Band 5 Mental Health Practitioner and a Band 7 Senior Mental health Practitioner have been recruited and are due commence in post June/July 2023.

Exciting opportunities exist to bring in peer support workers and children's social prescribing which are also being explored.

#### **4.8 Framework for Integrated Care – national vanguard programme**

Sefton and Liverpool Places (then CCGs) were successful in their joint North Mersey expression of interest to be part of this national vanguard programme, which commenced in November 2022 with funding extended to the end of 2025

This new psychology led model aims to build on the current Youth Offending Team (YOT) provision and work with children and young people who are at risk of being criminally and/or sexually exploited and their families. It aims to embed an enhanced case management and trauma informed, strengths-based approach through training, consultation, assessments and interventions to the most vulnerable children and young people with complex needs. It is to be an integrated offer and will enhance existing provision including CAMHS and NHSE Liaison and Diversion.

The new staff team includes a Complex Needs Lead, Case Manager and Targeted Support Officers who are co-located with Sefton's Safeguarding Hub to facilitate joint working.

#### **4.9 Outreach for Youth Offending Team**

Through the development of the Framework for Integrated Care project, the interface between Alder Hey's Community Mental Health Services and the Youth Offending Team was identified a useful opportunity to improve access for this population. Violence Reduction investment secured by Youth Offending Team has enabled a mental health practitioner to be deployed for two days a week into the Youth Justice Service, which is timely given the national requirement to include access KPIs to mental health services for this cohort. This practitioner will offer timely assessments and brief interventions

#### **4.10 4 Week Wait Programme**

Sefton and Liverpool Places (then CCGs) were successful in receiving national investment for the 4 Week Wait Programme with the aim of reducing waiting times and being part of the

consultation into introducing a national access standard for children and young people's mental health.

The project focused on how referral pathways for NHS commissioned mental health services could be streamlined to avoid any unnecessary delays in waiting times, but also to explore what other types of 'help' that young people may benefit from while they wait for an assessment/treatment.

The initial scoping and process mapping was completed and facilitated by Aqua consultancy. The outputs from this work has initiated two further local workstreams, to include establishment of a redesign group to identify local pathway improvements and a separate capacity and demand workstream. Further development of these will commence in June 2023.

#### **4.11 SHOUT text service**

The SHOUT service is a 24/7 text message service for anybody that may be struggling with anxiety, loneliness or depression through to self harm or suicidal thoughts. The service is commissioned by C&M ICB on behalf of all nine places across the region, including Sefton.

Anyone messaging the service can expect a reply within 5 minutes of their text, and is supported to work through their worries and is signposted to any resources and potential services which may assist that individual's situation and circumstances.

#### **5. Kooth**

Online support via Kooth has been available in Sefton for over 3 years and the number of logins has grown to 4,856 during that time. Following a successful evaluation of the service in the summer of 2020, the service was re-procured on a 3-year contract, with the option to extend for another year. The age range was extended for those who can benefit from the service from 11 - 18 to 10 - 25 year olds.

A Kooth Stakeholder Management group has also been created to provide oversight and performance management of the service. It meets on a quarterly basis with membership including the three funding partners, schools, and children and young people – meaning the voice of the child is at the heart of making sure the service works for its key demographic.

During 2022/23, 735 new users registered with Kooth and there were 4,856 logins. There were more than 200 chat sessions with counsellors and 3,007 messages exchanged with counsellors and users. The most prominent presenting issue during chat sessions was anxiety/stress, followed by suicidal thoughts and self harm. 93% of users said they would recommend the service to a friend.

#### **6. 0 – 19 Services, Mersey Care NHS FT**

##### **6.1 Health Visiting**

Throughout 2022/23 the Health Visiting service in Sefton continued to support the emotional health and well-being of children and families by supporting and enabling parents to maintain and enhance their own emotional well-being and reduce their vulnerabilities to mental health

# Agenda Item 4

problems, as well as promoting the emotional well-being of children through giving advice around bonding and attachment and baby brain development.

The Service has reviewed and relaunched the Parent Infant Mental Health Screening Pathway to reflect NICE guidance to support improved identification of mental health support needs for parents.

The service provides support to parents through universal contacts in accordance with the Healthy Child Programme (2009) and when additional need is identified, universal plus support is provided through targeted contacts. In 2022/23 the service provided Universal plus contacts, which impact on children and family's emotional health and well-being as follows:

- 3186 additional contacts to support parenthood and the early weeks
- 1202 additional contacts for maternal mental health
- 1426 additional contacts to support Healthy 2 year olds and getting ready for school

## **6.2 Infant feeding**

Mothers with challenging mental health are supported to make informed choices about feeding /responsive parenting and understanding normal new-born behaviour, building resilience.

In collaboration with the BABS service, infant feeding discussions are included in the initial assessment as of March 2023.

Through a Specialist Service Audit, 94% of mothers stated that input from the service had positively impacted their mental health and understanding of safe and responsive feeding with commercial milk formulas and weaning.

## **6.3 School Health**

Working with children and families in schools, for example in school health drop-in sessions, community setting and in homes, school nurses provide holistic assessment of children and young people's mental health and wellbeing needs, and provide mental health promotion, prevention, and early intervention approaches, conducting health assessments to identify risk-taking behaviours and supporting children to keep safe.

## **6.4 ChatHealth text messaging service**

In May 2022, the School Health Service launched Chat Health, a text messaging service where young people can get confidential help and advice. School nurses offer advice and support about issues affecting young people including, emotional health, sexual health, relationships, alcohol and drugs and bullying. Children aged 11 to 19 living in Sefton can access this service. A trained healthcare professional will reply between 9am and 4.30pm and within 24 working hours.

ChatHealth aims to improve patient experience as it allows for an improved and more convenient access to the school Health service, enabling people to contact school nurses during the school holidays, and bringing improved response to need, leading to earlier intervention and improved, quick and easy access to health advice and support for young people.

Targeted provision is delivered to more vulnerable young people who may find it difficult to access services. Chat Health extends service provision to service users who may have not previously accessed the service. Research shows males are more likely to use a messaging service than seek face to face support.

The highest percentage of messages received in 2022/2023 relate to emotional health & wellbeing with 36% of contacts to the service with support, advice, and signposting to other services as needed. A number of these messages resulted in a face to face contact.

## **6.5 HealthForm – digital health questionnaire**

In 2022/2023 School Health have introduced 'touchpoints' as part of delivery of the Healthy Child Programme, a new electronic health questionnaire for children and young people. This is an opportunity for children in years 6,9,11 to complete a digital health questionnaire (HealthForm).

The Health Form provides an opportunity for young people to complete a health questionnaire, allowing them to respond to questions about their wellbeing. This identifies where individual support can be directed and develops a needs-led service. Questions relate to emotional health and wellbeing, including reported personal happiness. It also ascertains the impact of mood on ability to do tasks that are important to them. Year 9 and year 11 pupils receive a personalised health plan to support well-being. Onward referrals are made for appropriate support by a partner agency if needed.

An example of an intervention provided following the year 6 HealthForm delivery in 2022/2023 is the Year 6 Worries sessions (age appropriate) that the school health team delivers to promote resilience in those schools where elevated levels of worry are identified.

## **6.6 Happy 'N' Healthy Sefton**

The 0 -19 Service is part of the Happy 'N' Healthy Sefton, which consists of a range of public health commissioned partners working collaboratively to improve children and young people's health and wellbeing by promoting a holistic approach, whilst reducing health inequalities.

The service, which is newly formed in 2022 and due to be launched in the coming months, has a core team consisting of three staff members, with a 0-19 (Mersey Care) lead, Active Sefton lead and a Public Health Support Officer.

The core team act as the central point to co-ordinate integrated working and ensure that children and young people are signposted or referred into any support services that would meet their needs. They also provide advice, easy navigation into services, training and partnership working with wider stakeholders.

It is the role of the core team to ensure that public health messaging across all themed areas is embedded in service delivery of partners, whilst raising awareness of the service with wider stakeholders to ensure children and young people can access public health support that will benefit their needs and compliments other support they may be receiving.

## **7. Sefton CVS, Mental Health Programmes**

### **7.1 The Getting Back Project**

Delivered by staff from both MYA SPACE (performance art hub) and Person Shaped Support. It uses creative arts as a binding point in the learning process. Tailored to meet individuals' needs, offering advice & guidance to build confidence within a safe environment, helping each cohort make a successful return to school settings or get back to being themselves. Students experienced theatre, music and structured group work and were given the opportunity to focus on individual likes and needs. Young people set goals and built a pathway to either re-engage back fully into education or regain confidence to be themselves again.

### **7.2 Emotional Regulation (ER) Project**

Delivered by Venus. Not being able to understand and find the words to communicate how we feel to others can be the biggest barrier for a child or young person. These difficulties can often result in frustrations and anger. Feedback from education staff and parents/carers indicated that there was an increase and escalation in children and young people presenting with emotional dysregulation problems, which impacted on their daily emotional wellbeing, progress at school and relationships with family and friends.

### **7.3 'Bridging the Conversation'**

Delivered by Parenting 2000 these intensive therapeutic interventions work with young people to help them to tackle and reverse their emotionally based school avoidance/low attendance. The young people were matched to one of the three therapists for themed one-to-one sessions to establish the root causes of their low school attendance, working with them, their parent(s)/carer(s) and school to find a solution to reverse this.

### **7.4 Education and Mental Health Network**

Meetings take place each half term on a Zoom video call. The content includes a school sharing good practice, a partner agency sharing information about their offer, and an update from Mental Health Support Teams in Schools. There is also an opportunity to share information and network. Guests speakers for 2022/23 have included: Savio High School, Crosby High School, Meols Cop High School, Springwell School, Christ the King School, SEAS, Roberts Music, KOOTH, Samaritans, Thrive Network, ADDvanced Solutions, MYA SPACE, and Sefton Carer's Centre.

### **7.5 Thrive Network**

Meetings continue to take place bi-monthly on Zoom chaired by CVS's Children and Families Development Officer. Partners that attended in 2022/23 included: Sefton Early Help, Acting Angels, SWAN, Sefton SEN & Inclusion, Samaritans, Parenting 2000, Sefton Young Advisors, Place 2 Be, RASA Merseyside, Forefield Infants School, Sefton Carers Centre, We are with you, Merseycare, Larkfield Primary School, Sefton Local Offer, Mental Health Support Teams in Schools (MHST), Deyes High School, Sefton Children's Social Care, Roy Evans Foundation, Sefton Parent Carer Forum, Linaker Primary School, Active Sefton, KOOTH.



## 8. Access targets

NHS planning includes a commitment to increase the number of children and young people being supported by NHS funded community services, this is called an “access target”. It is the percentage of children young people accessing support compared to the suggested prevalence.

	<b>17/18 (Target 30%)</b>	<b>18/19 (Target 32%)</b>	<b>19/20 Target 34%)</b>	<b>20/21 (Target 35%)</b>	<b>21/22 (Target 35%)</b>	<b>22/23 Provisional (Target 35%)</b>
<b>South Sefton</b>	23.3%	29.4%	29.9%	34.6%	39.6%	44.7%
<b>Southport and Formby</b>	30.6%	38.1%	33.7%	37.0%	42.1%	45.8%
<b>Sefton Place</b>	26.9%	33.8%	31.8%	35.5%	40.5%	45.1%

There has been continued good progress in increasing access and meeting the access target across Sefton since 2017/18. Despite the impact of Covid-19 pandemic on the 2019/20 figures, preliminary end of year data indicates that we are again on target to exceed the 35% target for north and south Sefton and across Sefton Place in 2022/23.

## 8. ASD and ADHD services

To note, an update on these services has been included in the report given the close association between neurodevelopmental conditions and emotional health and wellbeing.

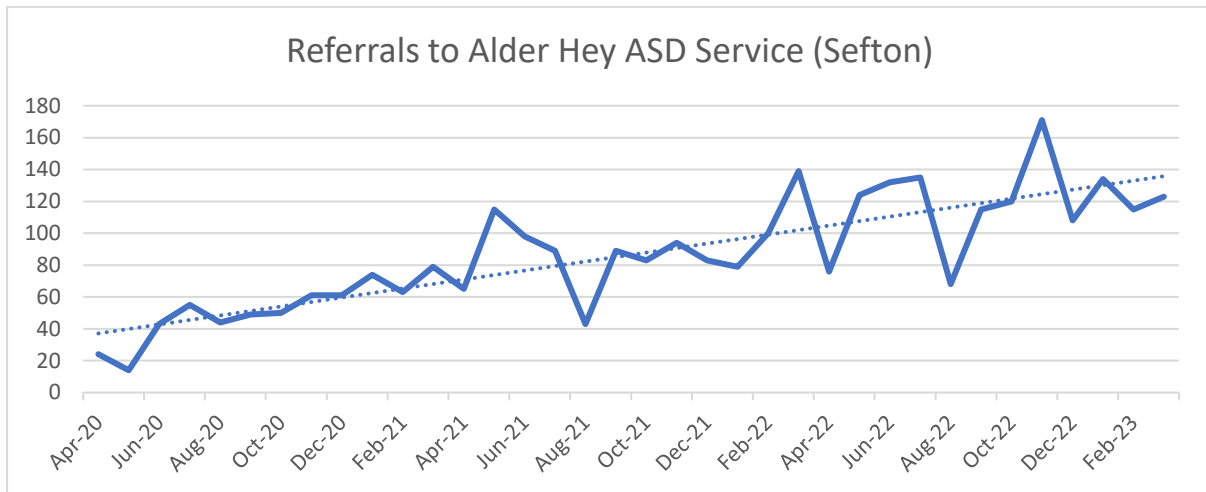
### 8.1 Alder Hey’s ASD & ADHD Assessment & Diagnostic Services (0 – 18)

#### 8.1.2 Overview of performance

There has been a sustained increase in demand for diagnostic assessment for ASD and ADHD since April 2020. This increased demand continues to impact significantly on capacity within the diagnostic pathways and has led to delays in completion of assessment pathways within locally agreed timescales.

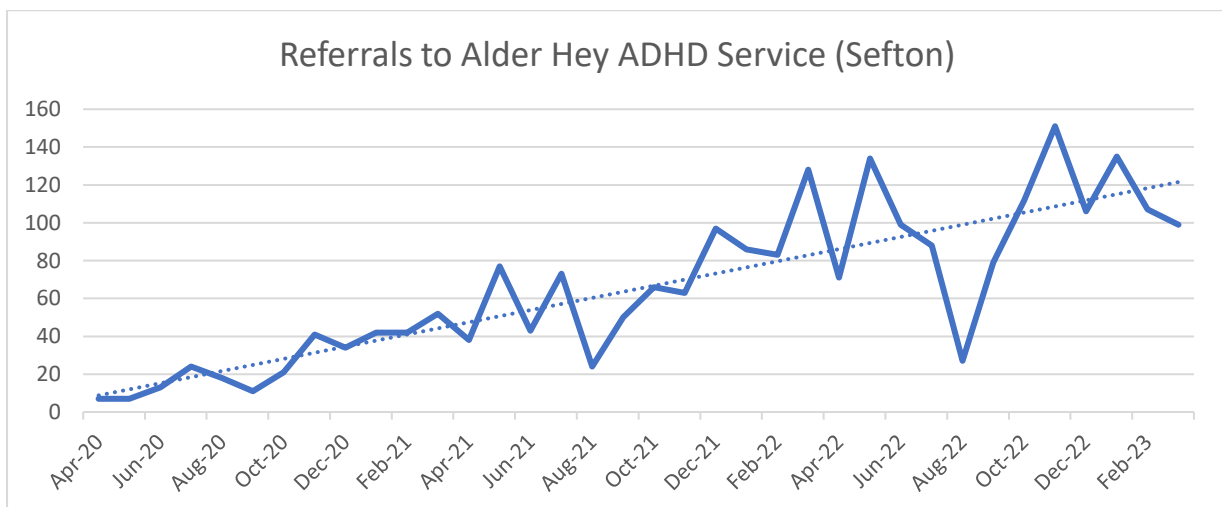
The Alder Hey ASD service has experienced an increase in referrals of **130%** in 2022/23 compared to 2020/21 which is detailed in **Chart 10**

**Chart 10: Referrals to Alder Hey ASD Service (Sefton)**



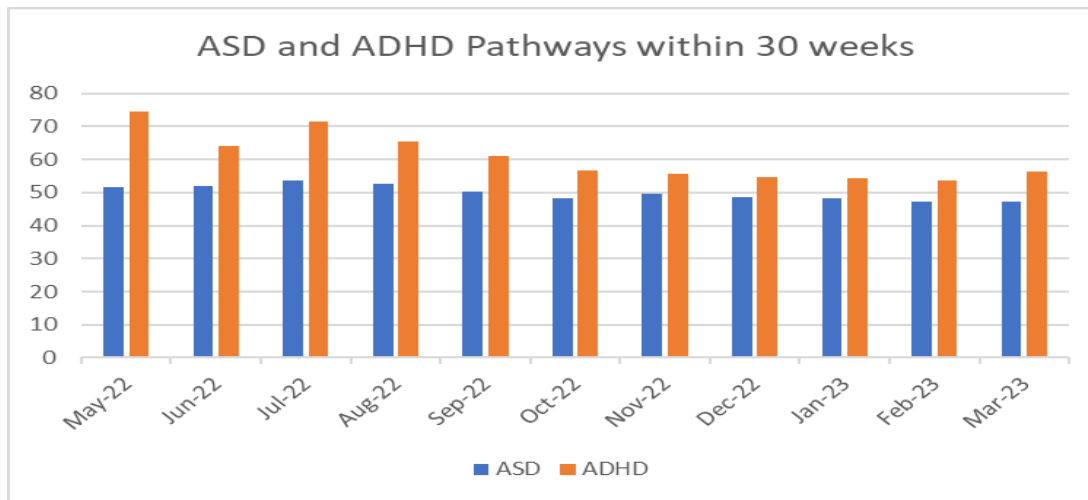
The Alder Hey ADHD Service has experienced an increase in referrals of **287%** in 2022/23 compared to 2020/21 which is detailed in **Chart 11**

**Chart 11: Referrals to Alder Hey ADHD Service (Sefton)**



The increase in demand over and above commissioned capacity has had a significant impact on waiting times and has resulted in a deterioration in compliance with the locally agreed metric of 90% of children and young people waiting for conclusion of their diagnostic pathway within 30 weeks. **Chart 12** demonstrates the deterioration in compliance with the agreed maximum time standard since May 2022.

**Chart 12: Reported Waiting Times May 2022 – March 2023**



**Chart 12** illustrates the % children and young people who are currently on the waiting list, where their waiting time for conclusion of their diagnostic pathway is within 30 weeks of referral. Children and young people may receive multiple assessments from members of the multidisciplinary team prior to an MDT discussion to conclude their diagnostic pathway.

### 8.1.3 Challenges and risks

- Demand for the service significantly exceeds available capacity. The service experienced a considerable increase in referrals during the COVID-19 pandemic and although referrals have been closely monitored to understand if this would stabilise following the pandemic this has not been the case and referral numbers have continued to grow.
- There are workforce recruitment challenges in the service due to a national shortage of appropriately trained and experienced staff. This is a particular challenge in the ASD service for the psychology workforce. The ADHD Service has experienced a high turnover of nursing staff over the past year, fortunately the service has recruited 8 new nurses who are starting in post April – June 2023.

### 8.1.4 Actions to address

- The ICB have agreed access to assessment and diagnosis for ASD and ADHD as a priority and discussions remain ongoing regarding investment into the service.
- Recruitment to vacancies is continuing and alternative career pathways and new roles are being explored.
- Service improvements to optimise the assessment and diagnostic pathways continue to take place, this is co-produced with children and young people and the Sefton Parent Carer Forum.
- Discussions continue with primary care regarding shared care arrangements for children and young people who are prescribed ADHD medication.

### **8.1.5 Plans / trajectories for recovery**

A recovery plan was shared with the ICB in October 2022 highlighting the sustained increase in demand and corresponding insufficient capacity in the service and required capacity and investment to address. Alder Hey proposed a recovery plan based on the timescales in the NHS England covid recovery delivery plan for tackling the backlog of elective care.

### **8.1.6 Managing demand**

The ASD and ADHD Services prioritise children and young people for assessments based on their waiting time length and on clinical urgency.

### **8.1.7 Developments**

#### **8.1.7 (i) ASD post diagnostic support programme**

As part of a pilot programme, delivered in partnership with third sector partners Addvanced Solutions, the ASD service has delivered an ASD post diagnostic programme of support which includes support for parents and carers through a social model of learning including telephone, email and online support, an Autism learning programme delivered to families and a targeted support programme called 'Riding the Rapids'. In addition, for all secondary age children, a workshop is offered to gain an understanding of autism as well as a specific intervention for a targeted group of children and young people who are offered additional support through 1:1 coaching for up to 10 sessions. This programme has been positively evaluated and opportunities for recurrent expansion are being explored.

An independent evaluation of the pilot was undertaken which demonstrated the positive impact for children, young people and families and the return on investment for the local system. On the basis of the evaluation, C&M ICB Transforming Care Programme agreed recurrent funding of £194k in 2023/24 to continue with the delivery of this service across Sefton and Liverpool Places.

#### **8.1.7 (ii) Neurodevelopmental community support programme**

C&M ICB (Sefton Place) has been successful in securing £50k non recurrent funding for the this support offer, as part of the C&M Learning Disability and Autism Transformation Programme (Beyond Programme). The neurodevelopmental community support offer is 'open access' and provides community based learning programmes and support for families with children/young people who have neurodevelopmental needs, regardless of a diagnosis. It is delivered by third sector partners ADDvanced Solutions.

Sefton families can access this support whilst they are on the ASD/ADHD assessment and diagnostic pathway if they wish.

#### **8.1.7 (iii) ASD peer support worker programme**

The Health Education England ASD peer support programme is due to launch in 2023 with training underway for peer support workers from both the voluntary sectors and parent carer

forums, as well as young people with support and supervision provided through the Alder Hey ASD Service. The development of the new autism peer support worker roles is an exciting opportunity for health service providers to harness the skills and lived experiences of autistic people, who, as part of the workforce will offer peer support to help other autistic people to maintain their wellbeing.

**8.1.7 (iv) ASD Schools Project**

A project has been developed in partnership with schools, school SENCO’s and the Sefton Parent Carer Forum to ensure that the graduated approach had been followed and was included as information in referrals to the Alder Hey ASD Service. This is to safeguard children and ensure they are supported appropriately at school. Practitioners in the Mental Health Support Team and Venus Star Centre have received training, and this is due to commence in September 2023.

**8.1.7 (v) Neurodevelopmental (ND) pathway developments**

Development of a local All Age Autism Strategy and an integrated ND pathway have been highlighted as a priority of Sefton’s Start Well programme and Sefton’s SEND Joint Commissioning Strategy. These programmes of work will focus on the development of a graduated offer of ND support, which provides the appropriate level of support and provision regardless of diagnosis. Through these developments, it is hoped that ND needs will be met holistically and that families, professionals and the wider system will become less diagnosis focused.

**8.2 Mersey Care’s ASD & ADHD Assessment & Diagnostic Services (18 – 25)**

**8.2.1 ASD Performance**

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
<b>Av. Waiting Times for ASD Service Diagnostic Assessment in Weeks</b>	84.2	84.7	86.2	87.5	88.1	87.3	89.2	88.5	89.3	91.1	90.3	85.2
<b>Total number of accepted new referrals to ASD service</b>	203	203	205	216	210	201	199	195	191	182	179	174

During 2022/23 waiting times for diagnostic assessment fluctuated and reach their peak in January 2023, and then decreased in February and March 2023. The data detailed above reflects a decrease in ASD referrals during 22/23 however, demand for the service continues to exceed assessment capacity.

As part of a waiting list initiative, SEND referrals continue to be prioritised and individuals are identified as part of the triage process, for those on the waiting list who are awaiting assessment, they are provided with information and/or signposted to local and national agencies/services that offer health and wellbeing support.

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## 8.2.2 Funding

Additional funding of £100k was committed to the service in 21/22, 22/23 and again in 23/24 to enable the service to recruit additional staff to support the post diagnostic support groups and to increase diagnostic assessment capacity. A business case that was submitted to Cheshire and Merseyside Transforming Care Partnership for additional non-recurrent funding to increase capacity for diagnostic assessments and post-diagnostic support was successful and this was awarded across North Mersey which includes Liverpool Place, as the service is jointly commissioned. This funding has also contributed to a subcontracting arrangement with a third-party organisation specifically to undertake clinical diagnostic assessments on behalf of the service to further reduce the waiting list.

## 8.2.3 Service Transformation

A service transformation group has been established with place leads from across North and Mid Mersey working in partnership with Mersey Care NHS Foundation Trust to review current service models, identify best practice and alignment of pathways to ensure parity of provision, whilst reducing variation.

## 8.2.4 ADHD Performance

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
<b>Av. Waiting Times for ADHD Service in Weeks</b>	54.9	56.3	51.7	52.2	54.7	45.8	40.4	40.4	26	16.4	15.3	9.9
<b>Total No. of accepted new referrals to ADHD service</b>	213	218	286	307	317	351	365	373	377	379	371	370

During 2022/23 waiting times for the ADHD service has improved significantly, with waiting times reducing from 54.9 weeks in April 2022 to 9.9 weeks in March 2023. The average waiting time for SEND individuals transitioning into the service is 6-8 weeks.

The data detailed above highlights a significant increase in referrals to the service and demand continues to outweigh capacity.

## 8.2.5 Funding

Additional funding has been committed to the service in 20/21, 22/3 and again in 23/24 which has enabled the service to complete a waiting list initiative which has identified individuals who no longer met the criteria for an assessment or did not wish to proceed, and a general welfare review was also completed as part of this process. The funding has also contributed to a subcontracting arrangement with a third-party organisation specifically to undertake clinical diagnostic assessments on behalf of the service to reduce the waiting list further, which has resulted in a significant decrease in waiting times during 2022/23.

### **8.2.6 Challenges / Risks**

At present, the view of the provider is that they are unable to discharge patients from the service due to a lack of shared care arrangements with primary care. As a result, annual reviews are having to be completed by Mersey Care which reduces their capacity to undertake new assessments and in turn impacts upon the waiting list.

Sefton Place does have a shared care agreement in place for ADHD medication, although difference of opinion on how this works in reality between Mersey Care and primary care mean that it is not being utilised as effectively as it could be.

Meetings have taken place with clinical leads in primary care and Mersey Care to understand the issues from both sides.

### **8.2.7 Service Transformation**

A service transformation group has been established with place leads from across North and Mid Mersey working in partnership with Mersey Care NHS Foundation Trust to review the current service models, identify best practice and alignment of pathways to ensure parity of provision, whilst reducing variation, which will be an interim measure whilst we develop a more sustainable model across Cheshire and Merseyside ICB.

A full-scale review of ADHD services commissioned across Cheshire & Merseyside is currently being progressed by the ICB, and this piece of work is being supported by the Innovation Agency who will assist with future service re-design and implementation. The first stage of this review is currently being progressed, which is to gain a detailed baseline understanding of the model and pathway that is currently operating in each place, which will conclude in June. Consultation and engagement with primary care, wider clinical services and experts by experience will be vital to ensure that the development of a new service model is sustainable long term.

## **9. Engagement and co-production**

### **9.1 Mental Health snapshot**

The Sefton Emotional Health Partnership has an established dedicated Communications and Engagement Group to help develop and drive a coordinated strategy and approach to its communication and involvement with Sefton's children, young people and their families.

In 2022/23 the group collectively developed and co-produced a of services, which provides an overview of commissioned children and young peoples' (CYP) mental health services that are available in Sefton. This aims to support professionals in making appropriate referrals into CYP mental health services, allowing CYP to access appropriate and timely support.

The mental health snapshot was developed following stakeholder feedback to provide an updated alternative to the previously created Mental Health Toolkit, which is a comprehensive directory of services to support young people. Frontline practitioner feedback helped shaped the development of the snapshot as it specified a need for a short, concise document that outlines mental health support for Sefton's young people.

The 2- sided snapshot has been created using the THRIVE model of mental health support and can be viewed here: <https://www.sefton.gov.uk/media/6226/cyp-mental-health-snapshot-final.pdf>

## 9.2 Sefton Young Advisors

Currently, the Sefton Young Advisors are the key group supporting community engagement and co-production activities with CYP across Sefton. Managed and recruited by Sefton CVS, they are trained consultants aged from 15-22 who support local organisations to engage CYP on a range of subjects and issues, helping the views and opinions of young people to be heard and understood. They are also members of Sefton Place's People and Communities Group, the local Thrive Network, Education and Mental Health Network, Strategic Youth Voice Steering Group and the Healthwatch Steering Group.

Some recent examples of how they have supported young people to share their views on emotional health & wellbeing services are highlighted below:

- Sefton Young Advisors Supported CCG with COVID Vaccine promotion Videos
- Young Advisors designed an on line survey re young people and mental health
- Young Advisors attended Healthwatch Patient Participation Group Meeting and did Q&A
- Young Advisors Supported Sefton Public Health with naming Happy & Healthy Hub Service
- Young Advisors have reviewed and updated the Youth Voice and Participation Toolkit working with the Sefton Youth Voice Strategic Steering Group. Currently developing training to go along side this
- Young Advisors took part in the Violence Reduction Partnership Funded Hope HAC, they facilitated a local event and attended a LCR event representing Sefton Mental Health was one of the topics discussed

## 9.3 Alder Hey Children's Hospital's Youth Forum and Camhelions Group

A key aspect of the engagement and co-production work at Alder Hey is to ensure that children and young people's voices are heard at all levels within the Trust. They aim to empower children and young people to be able to have a genuine impact upon decision making processes within the Trust.

The Camhelions are a participation group who work alongside Alder Hey's Community Mental Health Services and who aim to improve the service for other young people. The Camhelions work closely with the Alder Hey Youth Forum with many children and young people from Sefton being a member of both groups.

Below are some examples of the work and activities the Camhelions and Alder Hey Youth Forum have been involved in and which support development of mental health services:

- **The Big Emerging Minds Summit** – the summit took place at St Catherine's College, Oxford University to develop a workshop called 'Design your dream school for good



mental health'. Young people from Camhelions partnered with a research group called 'My Mind is My Own' to deliver the workshop to a cohort of people from educational settings.

- **Supporting interview panels and recruitment** - the Camhelions have taken part in interviews across the Trust, some of these involving senior staff interviews such as the head nurse and other roles within Sefton Mental Services.
- **Developing leaflets** - the Camhelions have also had the opportunity to attend meetings where the Crisis Care team were developing leaflets for young people.

Some of the reasons young people joined the Camhelions:

"I joined to help improve the service because a lot of the adults don't see the service from a young person's perspective, and I felt that I had the experience to help improve the service and get involved."

"I joined the Camhelions because I had a few negative experiences in CAMHS and wanted to have a say so that other young people don't have a similar experience. I have loved my time so far in the group as I have met lots of lovely people who have helped me."

**Report written and coproduced by the Sefton Emotional Health Partnership**

**Membership includes: Alder Hey Hospital NHS Foundation Trust, Mersey Care NHS Foundation Trust, Venus Star Centre, Parenting 2000, Sefton CVS and NHS Cheshire and Merseyside ICB (Sefton Place)**

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# Agenda Item 5

<b>Report to:</b>	Overview and Scrutiny Committee (Children's Services and Safeguarding)	<b>Date of Meeting:</b>	Tuesday 6 June 2023
<b>Subject:</b>	Children's Services Improvement Programme		
<b>Report of:</b>	Executive Director of Children's Social Care and Education	<b>Wards Affected:</b>	All
<b>Portfolio:</b>	Children's Social Care		
<b>Is this a Key Decision:</b>	No	<b>Included in Forward Plan:</b>	No.
<b>Exempt / Confidential Report:</b>	No		

**Summary:** To update members of the Committee on progress made on the Improvement Programme.

**Recommendation(s):**

(1) To consider and note progress made.

**Reasons for the Recommendation(s):**

To ensure that members of Committee are aware of the progress made.

**Alternative Options Considered and Rejected:** (including any Risk Implications)

NA

**What will it cost and how will it be financed?**

**(A) Revenue Costs**

There are no direct revenue implications with this report. Members will be aware that the Council's three year Medium Term Financial Plan takes account of this Improvement Programme and the resources required to support it.

**(B) Capital Costs**

There are no direct capital costs associated with the recommendations in this report.

**Implications of the Proposals:**

<b>Resource Implications (Financial, IT, Staffing and Assets):</b>
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<b>Legal Implications:</b>	
<b>Equality Implications:</b>	
There are no equality implications associated with this report.	
<b>Impact on Children and Young People: Yes</b>	
The actions in the Improvement Plan are designed to improve outcomes for vulnerable children and young people in Sefton. The Council recognises that it cannot deliver sustainable change without working together with wider partners across Sefton. Organisations from the public sector, schools, voluntary, community and private sector will need to work side by side to provide the support that our children and young people and their families need. It is our collective responsibility to create the right conditions for vulnerable children and young people to thrive.	
<b>Climate Emergency Implications:</b>	
The recommendations within this report will	
Have a positive impact	No
Have a neutral impact	Yes
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	Yes
There are no Climate Emergency implications associated with this report.	

## Contribution to the Council's Core Purpose:

Protect the most vulnerable: The Improvement Programme seeks to deliver change across Children's Services whose activity protects and supports those children and young people who have complex care needs.
Facilitate confident and resilient communities: Children's Services work with partners to support families in need of support and improve resilience.
Commission, broker and provide core services: Children's Services work with partners to support families in need of support and improve resilience.
Place – leadership and influencer: The Council will take a lead role in work with partners to deliver change in Children's Services
Drivers of change and reform: The Council will work with partners to deliver change in Children's Services.
Facilitate sustainable economic prosperity: NA
Greater income for social investment: NA
Cleaner Greener NA

## What consultations have taken place on the proposals and when?

### (A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.7238/23.) and the Chief Legal and Democratic Officer (LD.5438/23) have been consulted and any comments have been incorporated into the report.

### (B) External Consultations

The Executive Director Children's Service and Education and his leadership team engage with partners across Sefton regarding the Improvement Programme. The voice of children, young people and their families will be integral to delivering change.

### Implementation Date for the Decision

Immediately following the Committee meeting.

<b>Contact Officer:</b>	Jan McMahon
Telephone Number:	Tel: 0151 934 4431
Email Address:	jan.mcmahon@sefton.gov.uk

### Appendices:

There are no appendices to this report.

### Background Papers:

There are no background papers available for inspection.

# Agenda Item 5

## 1. Background

- 1.1 Members of the Committee will recall that of the Children's Serviced Improvement Programme continues to comprise of four themes;
- Quality - Ensuring the right staff are in the right place at the right time to deliver a consistent standard of good quality safeguarding services to children and families.
  - Improving Implementation of Learning - Using what we know and learn to continuously improve and enhance the services we deliver for children and families.
  - Improving Tools - Ensuring we have the right tools to enable the workforce to deliver high quality services for children and families.
  - Improving Strategic Partnerships - Effective partnership working to enable the delivery of common goals and a high quality multi-agency response for children and families.
- 1.2 The Improvement Plan also identifies four key areas that will be strengthened through the actions included; -
- Corporate Leadership
  - Governance & Partnerships
  - Practice
  - Enablers & Resources
- 1.3 The first two phases have involved significant change in Children's Services, this report updates on progress to date and the draft of Phase 3 of the Improvement Plan is currently in development.

## 2. Progress

- 2.1 The Council has approved a [Medium Term Financial Plan \(MTFP\)](#) which commits to recurrent additional investment for a three-year period improvement programme. The Improvement Plan informed the development of the MTFP with the Director of Children's Services advising the Chief Executive, s151 Officer and Deputy s151 Officer via a series of meetings on the resources required to fund the service. The investment made is intended to ensure that resources remain available to truly embed the change that is needed. Although currently there are only one-year settlements, the Council has prioritised this three-year commitment and provided assurance that this investment will be maintained into years 4 and 5 of this cycle.
- 2.2 To ensure the judicious use of resources the Director of Children's Services and the s151 Officer will continue to work closely together ensuring that strategic and financial planning are aligned. Through this ongoing dialogue the Council will be able to:
- Actively monitor and track the changes that will deliver the MTFP designed to enable and sustain short- and long-term improvements for example the impact of investing in the Social Work Academy and the deployment of the 2023 graduates, as well as recruiting 23 international social workers, so further stabilising the workforce and reducing the spend on agency workers.

- Make best use of the investment in Children's Social Care, deploying agreed additional resources to increase the pace of change, address backlogs and progress.
- Identify further opportunities for improvement and support the development of supporting business cases which will steer investment where it is needed and focus on long term priorities aimed at reducing future demand.

2.3 The Council has recognised that recruitment and retention of the right, stable and focused leadership team and wider workforce is critical. To combat recruitment and retention challenges the Council has taken a number of steps including:

- The creation of a new employer brand for Children's Services which is becoming increasingly recognised through external marketing and communications activity in order to target and recruit individuals who have the necessary skills to make a difference to families and young people across Sefton.
- Implementation of a further set of retention payments, changes to out of borough car mileage rates and Essential Car User Allowance.
- Co-location of the Children's Services team into one building with open planned spaces with areas for learning and a space for children and young people.
- Establishment of a Social Work Academy so that people returning to Social Work and Assessed and Supported Year in Employment (ASYEs) are supported throughout their accredited year through protected caseloads, intensive coaching and robust supervision.
- Approval of additional resources of £20m being provided for next year to reflect the budget requirement to deliver the service as set out by the Director of Children's Services (DCS).
- The recruitment of 23 international Social Workers.
- Demonstrating a commitment to ongoing professional development through the Family Valued model, development and training opportunities for managers and a commitment to delivering embedding good supervision.

These actions have included ensuring a stable and experienced leadership team is in place to lead the change and develop a consistent standard of good quality services to children and families. Although the DCS post is currently being recruited to, the leadership team is stable with the interim DCS being an existing Assistant Director and the team continues to have a strong commitment to improving the quality of professional practice and robust management oversight and taking suitable action when needed.

The impact of these actions has been recognised by Ofsted, inspectors have said:

*"Care has been taken to bring together children's services staff into a single location and improve working conditions. Social workers and managers are very positive about working for Sefton. Social workers report that senior leaders are highly visible and this is supporting a culture of openness and engagement. This makes them feel valued. Although social workers spoke positively about the support they receive from their*

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*line managers, there continues to be gaps in the regularity of supervision, and this is not consistently effective.”*

and:

*“Recruitment and retention continue to be a significant challenge in Sefton. High vacancy rates across locality teams mean that there is a high reliance on agency social workers. The retention package has recently been improved. Some progress is being made in recruiting social workers from overseas, with 20 social workers due to start by the end of May. The newly developed social work academy is enabling a considerable number of newly qualified social workers to develop core skills in a supportive environment. Protected caseloads allow these social workers to receive routine training and regular supervision while being able to carry out thorough work with children and their families. The quality of recording and planning in this team is more detailed than seen in other parts of the service. This is assisting the service to grow its own workforce. “*

- 2.4 The changes made have also led to the appointment of 11 permanent Service Managers, 24 Team Managers, and two Quality Improvement Managers who are also permanent. The combination of recruitment activity, deployment of graduates from the Academy and the recruitment of the international Social Workers means that by September 2023 over 50 more permanent staff will be in place.

The recruitment of additional capacity, development of the Academy and changes to the way of working have all contributed to more manageable caseloads. At the time of writing this report current caseloads within the Assessment teams range from 26 to 31 children but this is affected by factors such as being on duty. Officers are currently recruiting an additional team to this service to help support improved practice. Within our team which work with families on Children In Need or Child Protection Plans the average case load is between 14 and 24 children. Children With Complex Needs, which was highlighted in the last monitoring visit as a team with high caseloads has a current average of between 20 and 24 children. Within our Corporate Parenting team, a Social Worker will have an average case load of between 10 and 15 children which is varied by age range. Whilst recognised that the complexity in families over recent years has increased and this must be reflected in a reduction of allocated families it is still important to recognise that the caseloads have significantly reduced over the last twelve months, despite continuing high demands within the service.

- 2.5 To improve the pace of recruitment activity the Improvement Team has implemented a fast-track application process for Social Workers and will work with the Children’s Leadership Team to ensure a smooth transition for the graduates of the Academy and will also support a warm welcome for the international Social Workers.
- 2.6 Stabilisation of the workforce remains a priority. The Improvement Team will work with Corporate HR and Children’s Services to improve the analysis and usage of workforce information. It is anticipated that this will better inform operational workforce planning. The Improvement Team will also continue to track local rates of pay.



- 2.7 The Council and partners recognise the importance of building the right culture, ethos and values to sustain improvement and that this takes time.

The initial phases of the Improvement Plan put in place the foundations for cultural change within Children's Services through visible leadership, the co-location of staff and the introduction of Practice Standards. Through good communication and engagement with the workforce the Children's Leadership team changed the rhetoric away from uncertainty, clearly articulating the need for change, describing what good practice looks like, demonstrating a clear commitment to develop staff from within ([People Strategy](#)) through the Academy and the Family Valued Model, and most importantly of all, having high aspiration and ambition for the children of Sefton.

To date the Children's Leadership team has actively engaged frontline staff and drawing on their ideas to develop a long-term vision and a strategic plan for delivering high-quality front-line practice. Staff engagement sessions are held on a regular basis.

- 2.8 Demonstrating the impact of cultural change can take time, however, during the second Monitoring Visit Ofsted recognised

*"The co-location of social work teams in a single office base is supporting a positive change in culture. There is greater visibility of the DCS and the management team, and social workers feel more confident that they are supported in their practice and that they are valued. Social workers have a better understanding of practice expectations, through the introduction of practice standards."*

And

*"Social workers are positive about the change in culture in Sefton, describing a supportive working environment with a highly visible DCS and senior managers, which has been further enhanced by the co-location of social work teams. Social workers feel listened to and valued and are trying their very best to help improve children's lives. Social workers are positive about the reduction of caseloads and the introduction of relationship-based practice."*

- 2.9 The creation of the Family Time Team took place in October 2022, with this team, working closely with Social Workers, ensures that for families going through court processes that their time together is beneficial, engaging and as fun as possible. This change has made a real difference to families, below is some feedback from families:

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Menai Family Well Being Centre is a much better setting than where he has previously had sessions. He was really happy with the room used because he knew his son would enjoy exploring the light sensory room. Dad and son went on to spend the majority of the session in the light sensory room sharing some quality bonding time together. - A Sefton Dad



This centre is so much better for my children, there is lots of space for my children and lots more for them to do. It feels more homely and feels less like a contact centre. - A Sefton Mum



It was my first contact here and I was made to feel comfortable as soon as I walked through the doors, I was excited to see my son but also nervous at the same time. It's a lovely centre and I felt at ease and my nerves went away. - A Sefton Mum



I had a lovely time with my son and a lovely experience, I am going to make a memory book and I am excited to be doing Halloween activities. I received photographs and videos on my way home through WhatsApp and will cherish this. - A Sefton Mum



2.10 In parallel the Targeted Family Support Team was created, and this was a key element of the improvement work needed to improve the support to those families who do not require statutory Social Care. This team offers an intensive 12 to 20 week programme to families who need extra support. Applying an evidenced based approach based on Multi-systemic Therapy (MST) the team works intensively with consenting families within their own homes. They aim to:

- Reduce re-referral rates for Early Help and Children's Social Care.
- Reduce cases escalating to higher thresholds.
- Provide support at the right time to the right families.
- Reduce the need for children coming into care later in life.
- Provide exit planning into Universal Services and support partner agencies to be confident in supporting these families in the future.

2.11 The interface between Early Help and statutory work is now more clearly and effectively differentiated. This change has been received positively by families and examples of feedback received are below:

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*When you became involved with my family you approached with empathy and compassion and unconditional positive regard. This approach empowered my family and especially myself to feel safe enough*

*to talk open and freely with out judgement or feeling belittled.*

*I know you went above and beyond in the fight for <the child's>s education. I was so overwhelmed with this situation I don't know how we would have got through this with out your care, compassion, support and knowledge.*

*I didn't know who or how to go about challenging <establishment> and fighting for <the child>*

*Debbie if this was the Olympic's then you have won the gold medal!!!!*

*You encouraged me to continue to fight when I had no fight left in me.*

*Your continued support throughout this battle has been truly amazing and again I can't thank you enough!!!!*

*You know myself and the Boys have rigid thought processes but you gently challenged us when needed.*

*This allowed me to see things differently and clearly and from someone else's perspective.*

*You validated my thoughts and feelings and*

*when appropriate challenged them especially when I was spiralling or out of line.*

*Just validating my thoughts and feelings was such a relief I thought I was going crazy and your reassurance made me feel safe and grounded. That alone has been invaluable to me and I can never thank you enough!!*

*I am sad that you have to Move on but I know the next family you are assigned to will be very lucky to have you!!*

*Thank you so much Bev for all your support. You have been warm and empathetic and acted as a real advocate for our family.*

*The time you gave the boys was invaluable and you were always led by the children, showing real sensitivity to the family dynamics.*

*I appreciate the support with meetings and keeping us on track, inline with what was best for our family.*

*We will miss you and always appreciate the positive impact you have made*

2.12 The Council has now commissioned an external diagnostic to review the Early Help offer to ensure its preventative capacity is maximised. The diagnostic will help Children's Social Care understand the viability and steps to the creation of a Family HUB model for Early Help, a new approach to the front door and an improved offer through Emergency Duty Team (EDT). The diagnostic will have a specific focus on partnership working.

2.13 A review of EDT has been undertaken and the Adults EDT (Approved Mental Health Professional - AMHP) are now line managed through a senior manager in Adult Social Care. This will reduce the impact on the service from ASC as co-ordination of AMHP will no longer be required of the EDT Children's Manager. Officers are exploring using existing Council payment options for daytime staff to support EDT. This will provide a consistent service, is seen as a good model for retention of staff and as good practice in other councils. EDT will be reviewed as part of the

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commissioned diagnostic inform a more intervention based model which will ensure a more responsive service for children and their families. This will ensure immediate safety for those at risk of significant harm whilst also intervening to support children to remain with their families where it has been assessed as safe to do so.

2.14 As members of the Committee are aware a new Quality Assurance Framework was put in place. Arrangements are in place for all managers and IROs to audit on a rota basis. Themed audits have included

- Supervision and oversight
- Role of males in the family
- Section 47 and strategy meetings
- CIN planning

Actions that support the findings of audits are in progress. These thematic audits are now supported by closing the loop audits undertaken by the Assistant Director, Principal Social Worker and Service Manager. There is a separate report elsewhere on the agenda to update Committee members on quality.

2.15 A key element of quality assurance is gathering feedback from children and their families. Feedback from children and families following audits of cared for children has included the following:

*'I have a good relationship with my SW we get on well, sometimes it takes her a long time to get back to me but she does listen to me.'* (feedback from cared for young person)

*'I think my feelings are taken into account within the plan. Initially I was having family time in a centre but asked to have it at home which has now happened.'* (Feedback from a dad of a cared for young person)

*Janet, the foster carer feels that <the child> is aware of why she is a cared for child in a child friendly way. She explained that <the child> has a voice and if she wants to speak with her social worker, he always ensures she*

2.16 Alongside the new Quality Assurance Framework a new supervision policy was introduced that will ensure that staff receive the appropriate support and training needed to deliver effective safeguarding services to families. However, the Children's Leadership team recognises that there is more work to do in this area,

strengthening supervision will have a significant impact on the quality of work with children and their families. The impact of training in supervision and management oversight is beginning to show in quality assurance. However, the team recognises that the frequency of supervision requires further attention, however there are areas of the service which has seen an increase in the level and quality of supervision such as in Locality Services.

- 2.17 Work has continued on rolling out the Family Valued Model with restorative practice and management oversight training being delivered. Further training will include assessment, planning and recording which will with the new Practice Standards and Quality Assurance Framework strengthen practice over time. The Leadership team are working hard to embed these mechanisms across Children's Services and to put in place processes that will provide assurance that practice standards are improving.
- 2.18 The revised Sefton Threshold document was launched in September 2022 following an extensive partnership consultation process. Over 200 people attended the launch event, chaired by both Children Services and representatives from the partnership. The document realigned specific safeguarding and support need criteria in line with the appropriate category of need. The new documents also bring a focus on both domestic abuse and child exploitation.

The revised document did coincide with an increase in the number of contacts into Children's Social Care which was an expectation due to the new safeguarding factors being included. Officers believe this, as well as the new screening tool for exploitation, has helped support an increase in identifying those at risk of exploitation much earlier. Officers continue to review the document and this will also form part of the upcoming diagnostic into the Integrated Front Door.

- 2.19 The Council has recently approved its Domestic and Sexual Abuse Strategy and is finalising its Partnership Action Plan with partners through the Domestic Abuse Partnership Board. To ensure there is alignment across objectives, the Domestic Abuse Partnership Board includes representatives from all statutory safeguarding partners. Additional support has been provided within the Multi-Agency Safeguarding Hub to assist with triaging referrals that contain domestic abuse. In addition, a Practice Improvement Team has been developed which supports Social Workers to understand the impact of domestic abuse on children and families they are working with and ensure that service pathways are in place and understood.

Sefton Safety Family Hub incorporates three temporary Social Workers who have been recruited who will focus primarily on improving practice with Domestic Abuse, creating multi-agency approaches and developing a new offer for families. They are being supported by an allocated Independent Domestic Violence Adviser and two workers from commissioned services (Sefton Women's And Children's Aid). As part of their role the Social Workers will deliver the Caring Dads perpetrator program which starts from mid-June. The team will partly operate from a family centre to deliver interventions with the intention of becoming a community hub of support and information for those families affected by domestic abuse.

A suite of supplementary training has been developed to support Mersey Care Children and Young People Sefton practitioners, including Child Exploitation, Domestic Abuse etc. All packages adopt a 'think family' approach. This is delivered by MerseyCare Foundation Trust safeguarding children specialist nurses. Health training evaluations are showing an improved knowledge base and increased level

# Agenda Item 5

of understanding in community health settings. Further analysis will be undertaken with GPs through the primary care network.

- 2.20 New family friendly conference facilities have been made available, and all conferences are now held in person. This has delivered a significant improvement in Child Protection conference timescales.
- 2.21 Increased robustness has been implemented around early de-planning and also those children subject to Child Protection planning and the Pre-Proceedings protocol. This has contributed to a stabilisation of the Child Protection cohort following a period of significant increase.
- 2.22 An action group, with a focus on improving assessments, has now concluded. A range of documents has been considered by the Senior Leadership Team and an implementation plan agreed. It is expected that the new approach will address the concerns raised in the most recent Monitoring Visit but it is too early to measure impact at this point.
- 2.23 New statutory visit templates have been devised which encourage practitioners to focus on the purpose of their visit and ensure the child's voice is captured. Quality assurance/auditing is identifying increasing examples of good quality, purposeful visits, although this is not yet universally embedded.
- 2.24 The development of the MySPACE team to deal with protection of children from exploitation. The team includes Council officers and professionals from health, police and other agencies. Named by cared for young people, the new team (Sefton Protection and Child Exploitation SPACE) provides an immediate response to these young people whilst delivering trauma informed approaches. The team is also Sefton's first child exploitation inter-agency service and families have benefited from the close working relationships between professionals. The development of the MySPACE service is linked to the development of our Family Hubs with the aim of a community-based Exploitation Hub being part of our new and improved offer for families.
- 2.25 Council teams and partners have been reminded of the importance of understanding the processes to be followed for children living in private fostering arrangements ([Sefton Local Safeguarding Children Partnership - Sefton SCP newsletters](#)). [The newsletter](#) has been disseminated for specific awareness raising in services where targeted needs identified - primary care (GP, dentistry & pharmacy). To further raise awareness of private fostering arrangements, Sefton SCP are delivering 30 minute virtual briefing sessions in April and September 2023. Arrangements are in place in the Safeguarding Partnership to monitor the impact of this.
- 2.26 A review of the capacity required to support the activity of the Local Authority Designated Officer (LADO). This means that appropriate support is now in place to ensure that related work is progressed to required timescales and there is robust management oversight. Plus this additional capacity is enabling the LADO to deliver training to professionals.
- 2.27 The Children's Sufficiency Strategy is now complete subject to consultation with stakeholders. There are 3 meetings being scheduled to finalise the delivery plan and ensure actions are measurable and outcome focussed. There is a strong statement around unregulated provision.

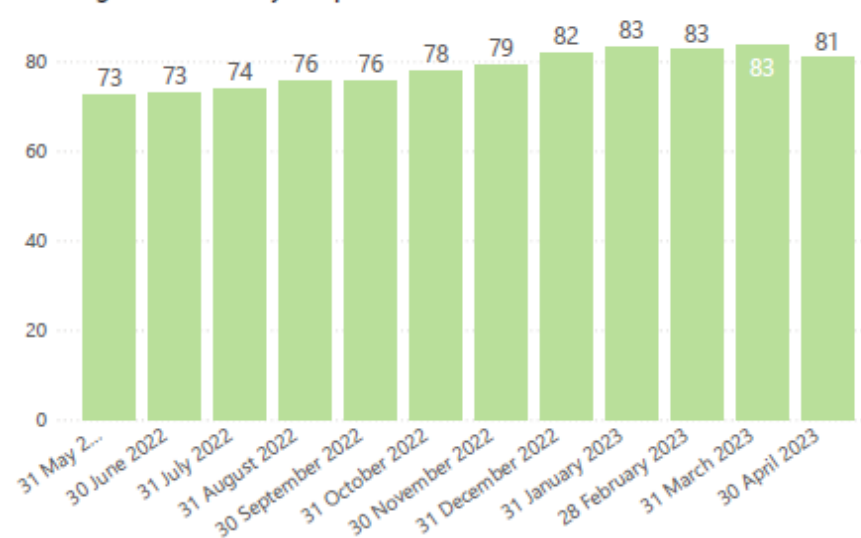
2.28 The implementation of Electronic Personal Education Plans (PEP). Training has been delivered with half termly online hubs (twilight sessions) are in place to provide ongoing training and support for designated teachers to ensure that practice is inclusive. Fortnightly drop in surgeries were put in place providing ongoing training and support to social work teams to ensure that Personal Education Plans (PEP) are an integral part of the care planning process.

This support has contributed to an improvement in the quality of PEPs, with 35% rated as green (a detailed PEP which identifies the child’s need through both pupil voice and SMART targets in order to support educational/emotional outcomes. The plan for the child is very clear). However, the leadership team recognises that completion rates also need to improve.

2.29 Working with the lead nurse for Looked After Children to improve the access to dentistry the Merseyside pathway has been developed). Although Dentistry remains the responsibility of NHSe, the NHS Place Team in Sefton have started gap analysis in relation to primary care services for children including dentistry with a focus on access for Cared for Children. The Strand Health and Wellbeing development will have a focus on support to improve health of complex families and will have dentistry services included in the phasing of this for children.

Since the ILACS the % of dental checks has improved.

Meeting the Statutory Requirement for Dental Checks (%)



2.30 The Emotional Health and Wellbeing Board is chaired by the NHS Place Director – additional investment has gone into mental health provision and in May 2023 a Children and Young People Round Table Event was convened. Chief Executives and Chief Operating Officers from partnership health trusts attended along with Clinical Directors and have committed to a collaboration agreement which sets out their intention to children and young people in Sefton and the prioritising of all health referrals for children who are cared for and setting out their role as a corporate extended family.

2.31 A review of Business Support has laid the foundations for a Business Support team that supports the service to deliver good practice and monitor performance. The

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capacity in this team will mean that Social Workers are spending more time with families and less time filling in forms.

- 2.32 Refreshing the [Finance policy](#) for care experienced young people which has improved the support for our young people leaving care and officers have worked hard with young people to improve the understanding and raise awareness of what they are entitled to.
- 2.33 Care experienced young people worked with the Communications Team to improve the Care Experienced offer [webpages](#) Our Space – Information for Cared For and Care Experienced young people (sefton.gov.uk) and this has been promoted to young people.
- 2.34 The implementation of [TriX](#), an online tool which stores policies and procedures. Staff have also received training in using this tool and there is now a greater understanding of policies and procedures.
- 2.35 The creation of an ICT group to agree and progress ICT development priorities. This established group is working well and has a clear roadmap for development. The ICT Group has reduced the need for all changes to go to the change group with minor changes being considered by the chair for approval immediate progression to the ICT Client Team. In terms of quick wins the group has progressed importing Wirral Liquid Logic forms which has reduced the need for new forms to be built by Sefton for example, standalone risk assessment and improved Independent Reviewing Officer/Child Protection mid-point check.
- 2.36 The Council has also changed its report template to ensure that when making key decisions the impact on children and young people is considered. This change will act a reminder to all officers and partners that when developing a report/strategy/action plan that they must consider the impact of the decision being recommended on children and young people. In addition to this the Council has reminded the workforce and partners of the importance of making use of the [Joint Strategic Needs Assessment](#) to inform decisions. In turn partners have provided updated contact information so that they can support the refresh of the various chapters of the JSNA at the appropriate time.
- 2.37 The Council is working hard to ensure that children and young people's voice, engagement and co-production with families is a central tenet of Council and partnership strategies. These steps have included a Council motion in January 2023 when the Council voted to make 'care experienced' a protected characteristic, putting it on equal footing with race and gender when it comes to fighting discrimination and ensuring equal opportunity for all.

In recognising 'care experienced' as a protected characteristic, the Council will actively seek out and listen to the voices of care experienced people in the same way they would ensure voices across the spectrum of age, gender, race and disability are heard. It will ensure that all decisions the Council make, the policies they set and the services they commission always consider the specific needs of care experienced young people and the impact on them.

At the same Council meeting revised its Consultation and Engagement Framework and affirmed the Council's commitment to ensuring that children and young people's voice, engagement and co-production with families is a central tenet of local authority and partnership strategies be re-affirmed. Following that meeting the



Council workforce and partners have been reminded to make use of the [Youth Voice Toolkit](#).

At April 2023 Council members considered the first [Listening to the Voices of Children and Young People](#) report and again reaffirmed its commitment to listening to the voices of children, young people and their families in the development of Council and partnership strategies; and invited members of SYMBOL be invited to attend and speak at a future Council meeting on a subject that is important to them.

- 2.38 The LGA has been commissioned to deliver additional training to elected members to ensure they know how to effectively discharge their duties, are committed Corporate Parents and that Scrutiny arrangements for Children's Services are robust and effective.
- 2.39 The Corporate Parenting Board now has representatives from across the political spectrum to ensure that responsibilities are everyone's business and consistency in compliance with statutory corporate parenting responsibilities and local standards as set out in the pledge. This is contributing to the embedding of corporate responsibility across the Council and partners to safeguard children and meet the needs of children in care and care leavers.
- 2.40 Work has continued to develop local residential care provision and ensure sufficient investment to support this and the Council has commissioned external support to support this work.
- 2.41 Officers have now established and mobilised a local framework of residential providers and taken steps to establish and build a relationship based commissioning model, this means face to face regular engagement with providers to understand levels of demand, ability to meet the needs of local children and any supported need to this, be practicalities or bringing in wrap around support from partners to maintain placements once made.
- 2.42 Work is underway to deliver a wider market engagement strategy in addition to those providers on our local framework and Strategic commissioning teams continue to work on a regional and local footprint to understand best practice and innovation and ensure this contribute to improvements in Sefton. Work on details demand and capacity modelling as part of our sufficiency planning continuous and a new phase of sufficiency planning that reflects tangible outcomes is being developed with key stakeholders.

### **3.1 Improvement Plan Priorities for the Next Quarter**

- 3.1 The Council has put in place the Improvement Team to support the delivery of change required and respond to the Commissioner's recommendations. The team will focus on key priorities such as recruitment

The Council will continue to focus on improving practice and a number of key priorities;

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- Stabilising the workforce
- Ensuring the right children are receiving the right at the right time
- Engaging the workforce and partners in the delivery of the required change.

3.2 It is recognised that evidence to improve practice and other areas to solidify the above measures requires more hard work, drive, commitment, positivity and energy but the recent stabilisation of Social Workers in practice, the recent audits and feedback from our workforce has provided a more positive outlook and officers have more confidence in knowing our strengths and weaknesses and the improvements required to improve outcomes for children, young people and families and are determined to deliver this transformation.

# Agenda Item 6

<b>Report to:</b>	Overview and Scrutiny Committee (Children's Services and Safeguarding)	<b>Date of Meeting:</b>	Tuesday 6 June 2023
<b>Subject:</b>	Children's Social Care Overview of Practice		
<b>Report of:</b>	Executive Director of Children's Social Care and Education	<b>Wards Affected:</b>	(All Wards);
<b>Portfolio:</b>	Children's Social Care		
<b>Is this a Key Decision:</b>	No	<b>Included in Forward Plan:</b>	No
<b>Exempt / Confidential Report:</b>	No		

**Summary:** This Overview Practice report contains performance management and quality assurance information in respect of Children's Social Care.

**Recommendation(s):**

Members of the Committee are asked to

1. Consider and note the information provided
2. Request the Executive Director of Social Care and Education to submit a further report to the next meeting of the Committee

**Reasons for the Recommendation(s):**

To support members of the Committee to fulfil the functions of an Overview and Scrutiny Committee as they relate to Children's Services and Safeguarding.

**Alternative Options Considered and Rejected:** (including any Risk Implications)

NA

**What will it cost and how will it be financed?**

**(A) Revenue Costs**

There are no direct revenue implications with this report.

**(B) Capital Costs**

There are no direct capital implications with this report.

**Implications of the Proposals:**

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<b>Resource Implications (Financial, IT, Staffing and Assets):</b>	
<b>Legal Implications:</b>	
<b>Equality Implications:</b>	
There are no equality implications associated with this report.	
<b>Impact on Children and Young People:</b>	
This report provides an overview of system health for safeguarding children.	
<b>Climate Emergency Implications:</b>	
The recommendations within this report will	
Have a positive impact	No
Have a neutral impact	Yes
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	Yes
There are no climate emergency implications as a direct result of this report.	

## Contribution to the Council's Core Purpose:

Protect the most vulnerable: The Improvement Programme seeks to deliver change across Children's Services whose activity protects and supports those children and young people who have complex care needs.
Facilitate confident and resilient communities: Children's Services work with partners to support families in need of support and improve resilience.
Commission, broker and provide core services: Children's Services work with partners to support families in need of support and improve resilience.
Place – leadership and influencer: The Council will take a lead role in work with partners to deliver change in Children's Services.
Drivers of change and reform: The Council will work with partners to deliver change in Children's Services
Facilitate sustainable economic prosperity: NA
Greater income for social investment: NA
Cleaner Greener NA

## What consultations have taken place on the proposals and when?

### (A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD7239/23) and the Chief Legal and Democratic Officer (LD.5439/23) have been consulted and any comments have been incorporated into the report.

### (B) External Consultations

The Executive Director Children's Service and Education and his leadership team engage with partners across Sefton with regard to the Improvement Programme. The voice of children, young people and their families will be integral to delivering change.

### Implementation Date for the Decision

Immediately following the Committee meeting.

<b>Contact Officer:</b>	Joe Banham
Telephone Number:	
Email Address:	joe.banham@sefton.gov.uk

### Appendices:

Appendix A Dashboard

Appendix B Children's Services Analysis Tool (CHAT)

### Background Papers:

There are no background papers available for inspection.

# Agenda Item 6

## 1. Introduction/Background

- 1.1 This Overview Practice report contains performance management and quality assurance information in respect of Children's Social Care.
- 1.2 The data sets presented are those felt to provide as concise a view as possible of 'System Health' and were selected in consultation with the Improvement Board Chair. They have been divided into subsets which speak to Demand, Timeliness, Effectiveness, Management and Outcomes.
- 1.3 The data is continually being developed in terms of how officers feel it supports understanding and also what level of data is available to use.
- 1.4 Data sets are presented with a direction of travel, and where possible a regional comparator, these are drawn in the main from the CHAT report (Appendix B). It is important to bear in mind that regional data in this report often lags some months behind the Council's sets so comparisons need to be regarded in that context.
- 1.5 Direction of travel for each data set is indicated as well as any commentary or actions in place. The data presented is often as a rolling 12 month figure, this is in line with the CHAT presentation and enables a clearer understanding of direction of travel. What this does mean is that significant changes recorded over a month or two (for example as in assessment timeliness) have a less significant impact on the 12 month figure.
- 1.6 Running alongside the performance information is detail and analysis of recent QA activity. This includes an overview of what was reviewed, what the outcomes were and any specifics around findings, plus any improvement actions this has informed.
- 1.7 Due to the report cycle it may be that up to date information in respect of those cases which have been moderated is provided verbally at the Overview and Scrutiny meeting.

# Sefton Children's Services Improvement Board

May 2023

## Performance Management and Quality Assurance Report

Performance metrics for this period begin to evidence stabilisation and some impact of grip in respect of demand and thresholds. Whilst the level of contacts received remains consistent, a decrease in the percentage of those contacts converted into referrals has held at approximately 25% for the last quarter - the previous period saw this rate sitting at approximately 33% converted into referrals. The impact of this change is a reduction of approx. 100 referrals a month into social care. This reduction can be accounted for by the increasing level of scrutiny applied to thresholds in this area of the service. Figures around rates of section 47s, Assessments completed and those that are concluded with no further action still provide evidence of a system which processes too much work. A number of workstreams are in place to address this but staffing challenges and agency occupancy, particularly in the Assessment Service continue to present a challenge in this regard.

Early Help and Integrated Front Door diagnostics, review and re-design are scheduled to start in May and the planned review will take 12 weeks to be completed. The review will focus on the thresholds, effectiveness, and the quality of 'Front Door', Early Help offer and partnership working.

Performance in respect of supervision and oversight is beginning to show evidence of sustained improvement, quality assurance is beginning to validate that the quality of this oversight is beginning to match the increase in compliance. There is some evidence that the Supervision and Oversight training provided in conjunction with our Leeds colleagues is beginning to evidence impact - however this is far from embedded, and it needs to be acknowledged that improvements are set against an extremely low starting position. Supervision and management oversight remains a focus of performance management and reports for each individual service area are available and scrutinised at each monthly performance meeting. This scrutiny has seen significant increases, particularly in the Localities (Help & Protections) teams over the last quarter - it is improvements in these teams which are driving the increase reported across the service as a whole.

Timeliness in respect of assessment completion has shown some significant increases in recent weeks, however the overall completion rate of 60% now tracks significantly below SN (statistical neighbour) rates of approx. 80%. A clear focus on this by Service Managers in recent months has seen this figure approach 100% in some services, however it remains to be seen if this high level of completion is sustainable given the staffing instability in the Services concerned. A focus on management oversight of assessments at the early (10 day) stage is providing some grip in respect of compliance in this area.

Other than open assessments which have climbed steadily since January (which was a 6 month low of 386), all other aspects of work are broadly static - the large number of assessments which conclude with no further work provides some explanation to the lack of immediate impact these fluctuations have, as well as the roughly 2 month time-lag between an assessment being commenced and then converting into an open CiN case.

498 open assessments  
 740 open CiN Need cases  
 330 open Child Protection cases  
 615 Cared for children.

Accordingly, case loads across the service are mostly static. These figures need to be treated with some caution as they do not take account of factors including FTE or the impact of internal case transfer on quality. It can be seen from these figures that the current case load in each service stands below the 6-month average.

Service	6-month average	Current
Assessment	23.3	22
Localities 1	16.6	16
Localities 2	20.5	19
CWCN	22.8	19
Cared For	14.1	14
Young Peoples Team	12.5	11
Care Experienced	16	15

Recent months have seen decreases in Child in Need and CP cases, and a gradual increase in Cared for Numbers. As has been discussed, a great deal of work leaves the system at the 'assessment' stage with approx. 50% of assessments completed resulting in no further action. The work to rebalance this area of the Service should support in addressing this issue. A clear



Impact of such a high volume of work being undertaken by a discrete area of the service is the impact on quality, this is compounded by the composition of the Assessment service which is predominantly made up of agency workers who move in and out of roles frequently. The impact of staff churn remains the single biggest feature reported negatively by families and a significant driver of poor work identified by quality assurance.

Performance and Quality in respect of our Child in Need cohort is an area that requires significant focus, along with the issues in respect of assessment volume and 'no further action', performance in respect of planning meetings is an issue and has significant impact on quality. Roughly 4 out of every 10 Child in Need meetings are either late or do not take place at all, this has an obvious impact on outcomes (evidenced through QA). When this is combined with the variable quality of the plans which are in place, then this is a clear area for focus.

Alongside work with our Leeds Partners to improve the quality of plans and assessments, Independent Oversight of all new CiN Plans will be introduced by the Safeguarding Unit. Two dedicated reviewing officers will oversee and chair all initial Child in Need meetings and then return to review those cases as they reach the 6-month stage. This review will include QA of the original assessment, support to create an inclusive, task focused and realistic plan as well as a clear programme of meetings up to the 6-month stage. At present, roughly 16 children a week become 'child in need', requiring approx. 10 meetings. This initiative will run for 6 months at which point it will be reviewed to assess impact. This work will also be supported by the introduction of the new team focusing on practice and provision of services for those working with children and families impacted by domestic abuse. Our own quality assurance as well as the evidence from Ofsted visits highlights this a clear area for focus.

A priority over the next 2 months is preparation for the next Ofsted focused visit which will be in respect of our 'Cared For' children. The advanced notice of timing and the area to be looked at has enabled a clear preparation plan to be put in place which is reviewed each week. All staff have been briefed in respect of this visit and the expectations that accompany it. Quality Assurance activity will be directed to support this visit as well as enhanced levels of senior management case review.

Given that approximately a third of our Cared for Children are allocated outside of the 'Corporate Parenting' service these actions are service wide.

Performance Management is beginning to support and provide evidence of a system that is beginning to show evidence of stabilising and responding to regular scrutiny, this however is far from embedded. Areas that receive challenge and attention do improve, however this can be at the expense of areas which are neglected. A clear example of this has been the recent stark increase in assessment completion timescales at the expense of visit timeliness for the same cohort. Performance data, whilst much improved, does not yet support effective 'Realtime' performance management at practitioner and first line TM level. This issue will be addressed by the completion of the fully functional, child level Power BI reporting system which will support proactive performance management. This will be completed by August 2023.

1	Overall Good or Improving Situation
2	Overall Improving but Impact Still Concerning
3	Not Improving

	Status	Metric Description	Previous Metric Value	Current Metric Value	Statistical Neighbours Avg Rate	Direction of Travel (DoT) Description	DoT Difference Indicator	Comment	Action
Demand	2	MASH Contact Starts in last 12 Months (Nos)	13490	13608		Change from Previous Month	▲		
	2	Referral Starts in last 12 Months (Nos)	4245	4161		Change from Previous Month	▼	See below. The decreasing percentage of contacts converted to referral in the last quarter is reducing the number of referrals in the system. It can be seen however that the number of contacts received has remained consistent.	
	2	Contact to Referral Conversion Rate Last 12 Months (%)	29.4	28.8		Change from Previous Month	▼	The last three months have begun to evidence a sustained decrease in the percentage of contacts converted into referrals. The last quarter figure has been roughly 25% as opposed to 33% in the previous period. With the number of contacts remaining roughly consistent, this drop equates to approx. 100 less referrals per month into social care.	
	3	Referral Starts in last 12 Months (Rate per 10,000 children)	784.7	769.2	579.3	Change from Previous Month	▼	in reference to the above narrative, this rolling 12-month figure is now beginning to drop, however it remains rated as red due to its distance from the rates of our statistical neighbours	
	3	Assessments Completed in last 12 Months (Nos)	4874	4716		Change from Previous Month	▼	See above, a gradually improving picture but still significantly higher than stat neighbour rates	
	3	Assessments Completed in last 12 Months (Rate per 10,000 children)	900.6	871.2	622.0	Change from Previous Month	▼	See above	
	2	Children in Need Plans – Currently Open (Nos)	774	772		Change from Previous Month	▼	This figure has stabilised in recent months, coming down from a high of approx. 950 open cases	A forthcoming exercise is planned to review those children in need cases which have been open for an extended period of time - the hypothesis that a number will be able to be closed or appropriately stepped down creating further capacity in the system. QA and performance management provides a clear indication that there remain quality and compliance issues in respect of our Child in Need Cohort. Moving forward all new CiN plans will be subject to the independent oversight of an IRO, who will then return to review the progress of the

								plan as it reaches the 6-month stage.
	3	Children Subject to Section 47 Enquiries in last 12 Months (Nos)	2020	2018		<i>Change from Previous Month</i>	▼	Figure continues to track significantly above the national and regional average.
	3	Children Subject to Section 47 Enquiries in last 12 Months (Rate per 10,000 children)	373.4	373.2	207.5	<i>Change from Previous Month</i>	▼	
	2	Child Protection Plans – Currently Open (Nos)	332	334		<i>Change from Previous Month</i>	▲	This cohort remains static with increased oversight of those children where early de-registration is proposed and also those who become the subject of pre-proceedings. Both changes have come in the wake of the last Ofsted visit and have been briefed out to partners
	2	Child Protection Plans – Currently Open (Rate per 10,000 children)	61.4	61.7	63.5	<i>Change from Previous Month</i>	▲	
	2	Cared for Children – Currently Open (Nos)	612	616		<i>Change from Previous Month</i>	▲	Cohort of Cared for children remains broadly static. The slight increase over the recent period has been driven more by a decrease in episodes ending rather than an increase in starts. A clear action plan is now in place to prepare for the next Focused Visit. It is known that this will be in respect of our Cared For children.
	2	Cared for Children – Currently Open (Rate per 10,000 children)	113.1	113.9	89	<i>Change from Previous Month</i>	▲	The rate of cared for children in Sefton remains significantly above the rate of our statistical and regional neighbours – any changes in this number will be gradual. It is of note that the number of these children who are placed at home with their parents now stands at the lowest figure seen for 12 months, at just under 13% of cared for children (79). This decrease is fuelled by a number of factors including improved dialogue with the Family Court and Cafcass.
Timelessness	3	MASH Contacts Actioned within 24 Hours – in last 12 Months (%)	23.6	22.8		<i>Change from Previous Month</i>	▼	
	3	Assessments Completed within 45 Working Days – in last 12 Months (%)	57.8	62.3	89.2	<i>Change from Previous Month</i>	▲	This figure now tracks significantly below comparator rates, however performance across March and April has seen significant improvement, with rates approaching 100% across the Service.
	1	Initial Child Protection Conferences held within 15 Working Days – in last 12 Months (%)	91.1	88.2	82.5	<i>Change from Previous Month</i>	▼	This KPI has been consistently high for the last 12 months and is a strong example of clear and effective practice between the Safeguarding Unit and operational Teams - the recent dip is the result of issues with a small number of identified cases, but has resulted in the pre conference procedure once again being briefed out and re-

								enforced across the service	
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Status	Metric Description	Previous Metric Value	Current Metric Value	Statistical Neighbours Avg Rate	Direction of Travel (DoT) Description	DoT Difference Indicator	Comment	Action
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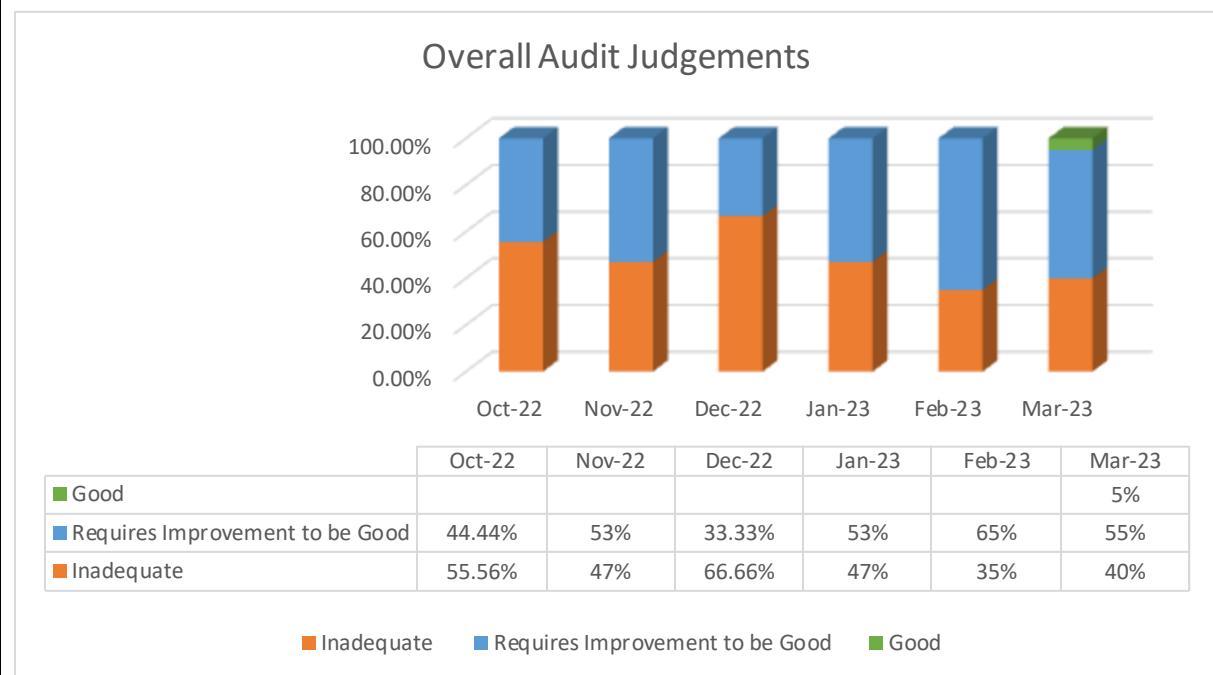
3	Children in Need (Open) with a Visit within the last 20 Working Days (%)	59.6	61.9		Change from Previous Month	▲	Whilst this figure has improved somewhat over the last month, it remains an area of focus and is symptomatic of the relatively poor performance in this area, especially when compared to those children who find themselves the subject of child protection planning. Staffing instability within this area of the service continues to act as a barrier to improvement in this area. The addition of independent oversight of all initial CiN plans should support improvements in both quality and performance in this area.	
1	Child Protection (Open) with a Visit within the last 20 Working Days (%)	92.5	89.8		Change from Previous Month	▼		
2	Cared for Children (Open) with a Visit within Statutory Timescales (%)	85.8	86.8		Change from Previous Month	▲	Whilst this figure remains high, discrepancies exist across the service. Performance in respect of those children within the localities service is somewhat lower. This perhaps reflects the pressures within that service as well as the breadth of work undertaken. A clear action plan is in place to prepare for the next focused visit which encompasses our Cared for children across the entire service	Enhanced oversight and support from the SGU in respect of those cared for children who are placed within the Localities teams.
3	Children in Need Plans Authorised within the last 20 Working Days (Localities Teams) (%)	55.7	53.5		Change from Previous Month	▼	Evidence of performance issues in respect of this cohort. Plan to introduce independent oversight of child in need.	

Effectiveness	2	Children with a Previous Referral within 12 months of their latest Referral - Rolling 12 Months (%)	26.5	26.4	21.1	Change from Previous Month	▼		
	2	Assessments Completed in last 12 Months with Outcome of No Further Action (%)	50.7	49.5		Change from Previous Month	▼		
	2	Children who became the subject of a Child Protection Plan for a subsequent time in last 12 Months (%)	17.6	17.2	25	Change from Previous Month	▼		
Management	2	Open Cases (CIN, CP, CfC) with Appropriate Case Supervision Recorded (%)	31.5	67.7		Change from Previous Month	▲	Performance in respect of case supervision has increased significantly over the last few months. This improvement has not been uniformly high across the service and still requires constant performance management to maintain. Quality assurance is beginning to evidence increasing quality of supervision in terms of driving outcomes and improving practice.	
	2	All Open Cases (CIN, CP, CfC) with Appropriate Management Oversight Recorded (%)	31.5	58.0		Change from Previous Month	▲	See above	
	2	Average Caseload (NB: this data does not use FTE as it is not currently available and hence actual average caseload will be slightly higher than the figures reported here)	15.8			Change from Previous Month	▲	See data in summary section. A review of caseloads across all areas of children's services shows that current caseloads in all areas of the department sit below the 6-month average	
	2	Vacancy Rate	68.86	68		Change from Previous Month	-	There has been a slight decrease in the number of vacancies.	
	2	Agency		68		Change from Previous Month	-		
	2	Sickness Absence	-	4.22%		Change from Previous Month	-		
	Outcomes	2	Cared for Children (Open) with 3 or more Placements (%)	9.4	8.5		Change from Previous Month	▼	
2		Cared for Children (Open) with 3 or more Social Workers (%)	17.3	17.4		Change from Previous Month	▲		
2		Care Experienced aged 19-21 Currently in Education, Employment, or Training (%)	30.8	36.7	50	Change from Previous Month	▲		

Quality Assurance

In March 2023, 20 children’s records were audited from across the service. All managers are now engaged in the process which is proving effective in terms of strengthening everyone’s understanding of what good looks like and reinforcing practice standards. Leeds partners have also completed an audit in March and audits are completed each month by the Quality Assurance Team.

The theme, “Effective Supervision and Management Oversight”; was chosen as a key area for improvement and to gain a snapshot in time as Leeds were due to commence Team Manager Training with 3 cohorts of Managers at the end of March. Audits over the last 3 months have shown steady improvement in the quality of practice in Sefton and **in March 2023, a first audit was judged ‘Good’ overall** (see direction of travel chart below.) This audit has been moderated by the AD Quality Assurance and Service Manager for Safeguarding who confirmed the grade.



It is significant to note that 2 audits were graded “good” in the “Supervision and Management Oversight” domain for the first time; both grades were upheld when moderated. We saw more reflective discussion and consideration of the child’s care plan in these audits; together with better action tracking with clear timescales and ownership; regular supervision and layered management oversight which led to more positive impact.

A dip sample was also undertaken with Leeds colleagues who have delivered Management Oversight and Supervision practice learning sets. We considered 6 supervision records of managers who had attended the training and 6 supervision records of managers who had not attended any of the training. We found greater evidence of a supervision mindset developing, more frequent supervision, better structured recording, more attention given to the child’s plan and professionally curious questions amongst the 3 managers who had attended the training showing early impact. Leeds will reinforce issues noted further in subsequent training.

**Key findings linked to theme**

- Supervision is sometimes too infrequent to be effective in driving the child’s plan resulting in drift and delay.
- There is not always challenge recorded by the Team Manager when there are long delays in families receiving support.
- Management oversight is not always clear in respect of why decisions were made.
- Actions arising sometimes remain outstanding for a long period of time/ are not always followed up.
- More recently, supervision records are evidencing more reflective discussion, positively impacting upon the child’s outcomes.

**Other areas for improvement:**

- Significant delays in the family receiving the identified support and intervention impacting on the child's stability and also resulting in parents losing trust and dis-engaging with key workers.
- Planning for permanence is not focussed upon early enough for some children and it is not always clear what the long- term plan is.
- Multi-agency meetings are not frequent enough to progress the child's plan and improve outcomes for the child/family.
- Changes of social worker have caused a start again approach and hindered progress of the plan in some cases.
- There is not always an up-to-date assessment to inform planning and parents/carers continually report that they have not received copies of assessments and plans.
- Case summaries contain information that is out of date and do not always reflect the child's current living arrangements.

In April 2023, 22 children's recorded were audited. The theme was "whole family approach to domestic abuse" following Social Work Week learning and to coincide with launch of new Safer Families Hub to gain a snapshot in time. Moderation is still to be undertaken. Initial grades are promising with **2 audits being awarded an overall good grade** and a further reduction in those being graded inadequate. Further detail will be provided to next Improvement Board.

Provisional data for April:

April 2023	No. of audits	%
Good	2	9%
RI	15	68%
Inadequate	5	23%

#### Feedback from Families

To triangulate findings from audit, we gain feedback from children and families regarding their experiences with Sefton Children's Services. Across March and April, feedback was received from 26 parents/carers and 2 young people.

The parent/carers who rated the service as good felt well supported by their current social workers/child social care support workers and felt the plan for their families were progressing. The parents/carers who rated the service as poor was mainly due to frustrations with changes in social worker, poor communication from their social worker, not receiving copies of the assessment/plan and not receiving the support promised to them.

*'The child social care support worker was excellent and always responded immediately when she was involved and would contact the young person to speak with him when I let her know he was having a melt down, she also visited regularly.'*

*'I think my feelings are taken into account within the plan. Initially I was having family time in a centre but asked to have it at home which has now happened.'*

*'This is my first time involved in adoption planning and would like to say that everybody has been really kind and thoughtful and if I have needed to speak to anybody, they have got back to me to answer my query.'*

*'The support has been good, it would be better if there was a less turnover of staff. When a social worker leaves I need to know who to contact in the mean time by a named person.'*

*Mum feels that all the support that was promised has not materialised. "Lots of promises of help but nothing came from help requested." She says she has sought help herself from parenting groups and family. Done it all on her own.*

*Mum has had to tell her story three times which is upsetting and frustrating for her.*

#### Pace of Practice Improvement

The churn of staff and impact on social work allocation, especially in the Help and Protection and Assessment Teams continues to impede progress. Workstreams are in place to improve staffing stability, assessment and plans and there will be an ongoing focus on transfer protocol and pre proceedings work. Additional recruitment has occurred/ is planned to increase capacity and provide greater focus:



- 23 International Social Workers due to join Sefton - Summer 2023
- 2<sup>nd</sup> permanent Practice Improvement Manager in post on 13.06.23
- Specialist teams set up - My Space, Family Group Conferencing & Safer Families Hub (who will take a whole family approach to domestic abuse and launch Caring Dads Service in Sefton)
- 2 dedicated Reviewing Officers will oversee and chair all initial Child in Need meetings and then return to review those families as they reach the 6-month stage.
- Interim AD Transformation Team will focus on Early Help and workforce stability – Feedback from families/partners highlights impact of changes in social workers/ poor communication is a significant issue.
- 9 Frontline participants to join Sefton in September and increase in Social Work Apprenticeships available.

### **Capturing good practice**

A good practice library is being added to as we see more examples of good work. When an audit is graded good, strengths based summaries have been produced and will be cascaded. We have also introduced “Make A Difference Interviews” which allow us to meet with practitioners when a good outcome is identified to drill down on actual practice using “appreciative enquiry” techniques.

Examples of good audits will be anonymised and shared to support auditors and the QA Manager and Service Manager have been reviewing new auditors audits to consider quality and give direction if required and positive feedback. We want to be sure audits are clear, well structured (to ensure we can use them to measure progress effectively) and that actions are timely, and that they include issues raised by families to achieve outcomes they also identify and prioritise.

### **Ofsted Monitoring Visit July 2023:**

The last ILACS inspection provided a clear view of practice in respect of our cared for children. This has formed the basis of an action plan to prepare for this visit, with clear actions and time bound tasks assigned to individuals and reviewed on a weekly basis by SMT and AD.

Quality assurance activity will focus on the experiences of “cared for children” over the next 2 months with increased oversight from SM/AD level, ongoing monthly deep dive audits (Themes EPEPs and children’s input into their plans). All Independent Reviewing Officers will be observed conducting children’s meetings with a focus on participation and effective care planning. Dip samples will consider impact of Sefton recently launched “Go To” direct work tools on practice, referrals for Independent Visitors/Advocates, experiences of Unaccompanied Asylum-Seeking Children, Children Placed with Parents (PWP) and those subject to Section 20. 2 About Me books have been created to support specific work with our “cared for children” ensuring we understand their lived experiences, current circumstances, and views. Advice has been issued to support good case summaries and writing directly to children. A matrix has also been produced to support practitioners understanding of what good looks like in audit; an idea suggested by a social worker showing commitment to increase insight and understanding. Team Managers and Social workers have also been provided with useful good matrix to support assessment work and leaflets etc have been created to support relational practice.

Performance data will be considered in an ongoing way to plan additional preparatory work.

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# Children's services Analysis Tool (ChAT)

Based on Ofsted's ILACS Annex A dataset (2020) / Inspection Report

## Sefton

30 April 2023

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Headline figures

**Contacts**

Contacts in the last 6 months 7,719

**Early Help / Common / Targeted Assessments**

Early Help in the last 6 months 3,283

**Referrals**

Referrals in the last 6 months 2,123

**Social Care Assessments**

Total assessments in the last 6 months 3,292

Assessments completed in the last 6 months 2,398

Ongoing assessments 894

**Section 47 enquiries and Initial Child Protection Conferences (ICPCS)**

Section 47 enquiries in the last 6 months 853

ICPCs that started from an S47 in the last 6 months 201

**Children in Need (CIN)**

Total CIN in the last 6 months 2,896

CIN started in the last 6 months 519

CIN ceased in the last 6 months 504

Current children in need (snapshot) 2,392

**Child Protection Plans (CPP)**

Total CPP in the last 6 months 568

CPP started in the last 6 months 206

CPP ceased in the last 6 months 234

Current children subject of a child protection plan (snapshot) 334

**Children Looked After (CLA)**

Total CLA in the last 6 months 699

CLA started in the last 6 months 104

CLA ceased in the last 6 months 78

Current children looked after (snapshot) 621

**Care leavers**

Care leavers currently in receipt of leaving care services 593

**Adoptions**

Children adopted, waiting to be adopted, or had an adoption decision reversed in the last 12 months 38

Children adopted in the last 12 months 6

Children waiting to be adopted (snapshot) 32

Children with decision reversed in the last 12 months 0

**Adopters**

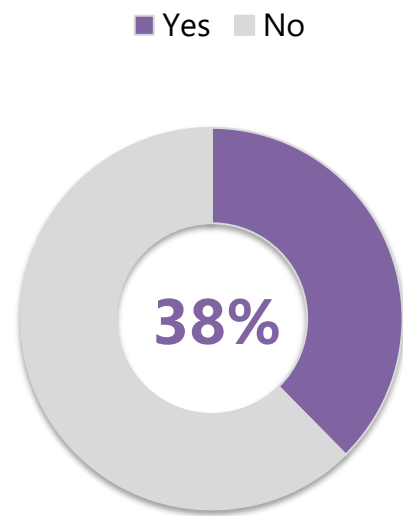
Prospective adopters in the last - 12 months NOTE from April 2018 RAA (AIM) data 263

Contacts in the last 6 months

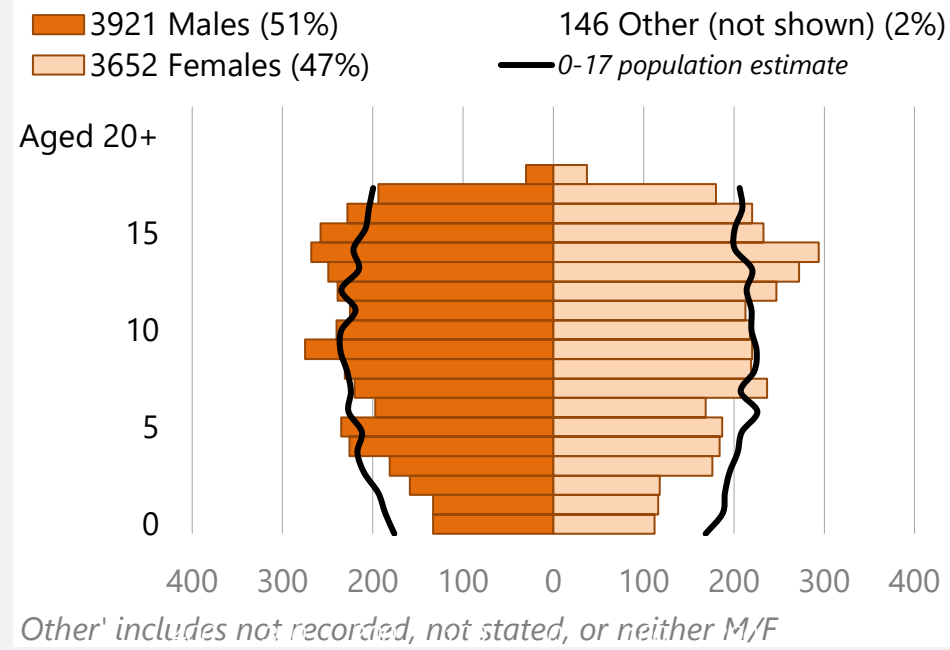
from 31/10/2022 to 30/04/2023

7719 contacts

Contacts for children who also appear on Referrals



Age and gender

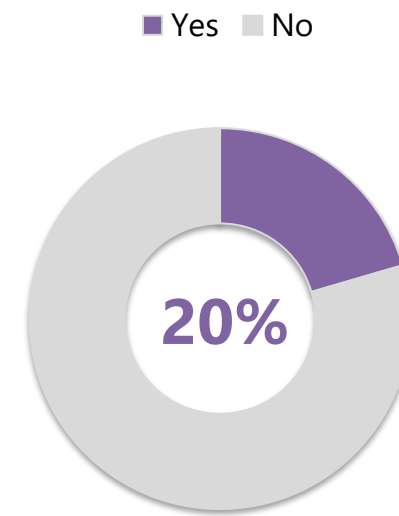


Early Help in the last 6 months

from 31/10/2022 to 30/04/2023

3283 Children with an Early Help Episode

Early Help cases that also appear on the Referrals list



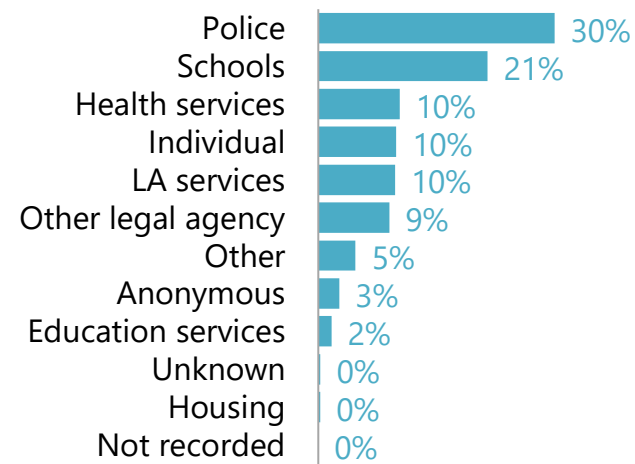
Age and gender



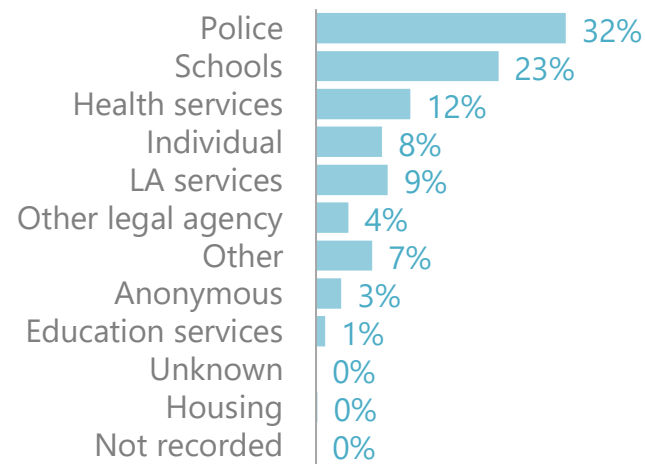
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Source of contacts compared to source of referrals

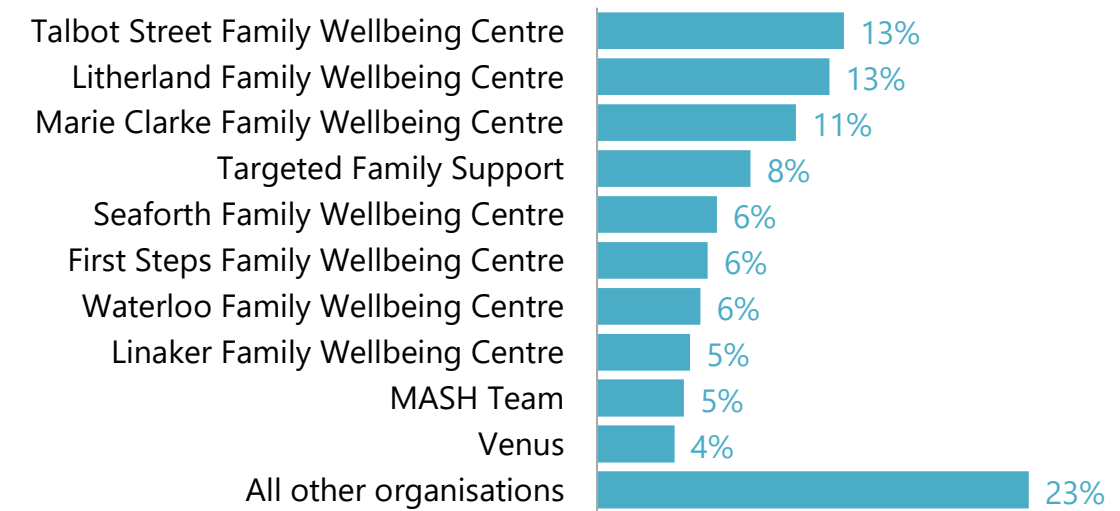
Contact source



Referral source comparison



Lead Organisation



Children with multiple contacts in period

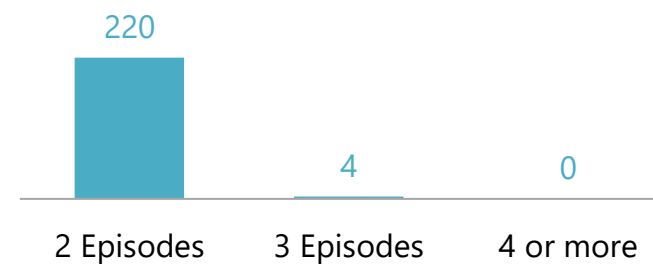


Ethnic backgrounds

White	66%
Mixed	3%
Asian or Asian British	0%
Black or black British	1%
Other ethnic group	1%
Not stated	29%
Not recorded	0%

See page 22 for comparisons

Children with multiple episodes in period



Ethnic backgrounds

White	64%
Mixed	2%
Asian or Asian British	0%
Black or black British	1%
Other ethnic group	1%
Not stated	32%
Not recorded	0%

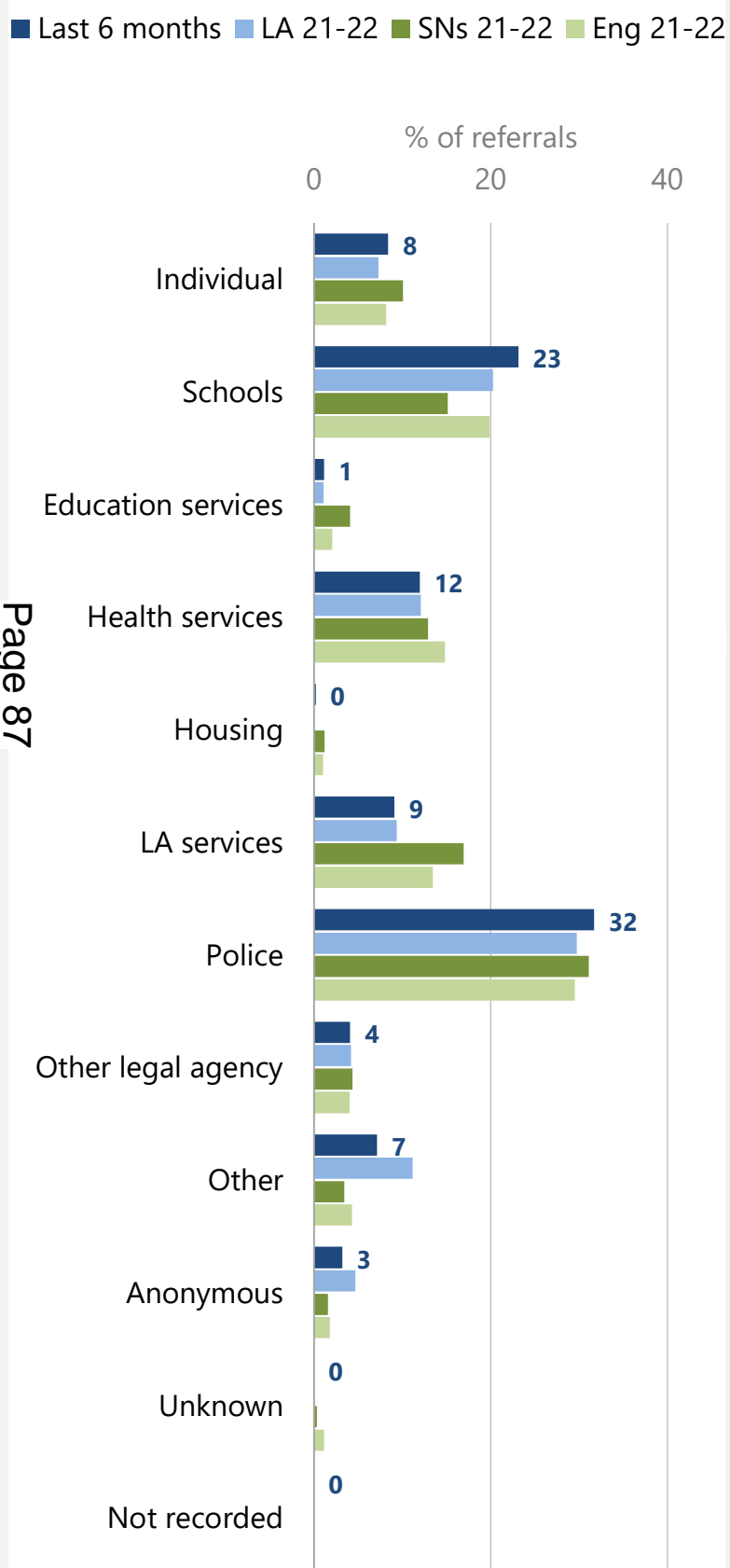
See page 22 for comparisons

Referrals in the last 6 months

from 31/10/2022  
to 30/04/2023

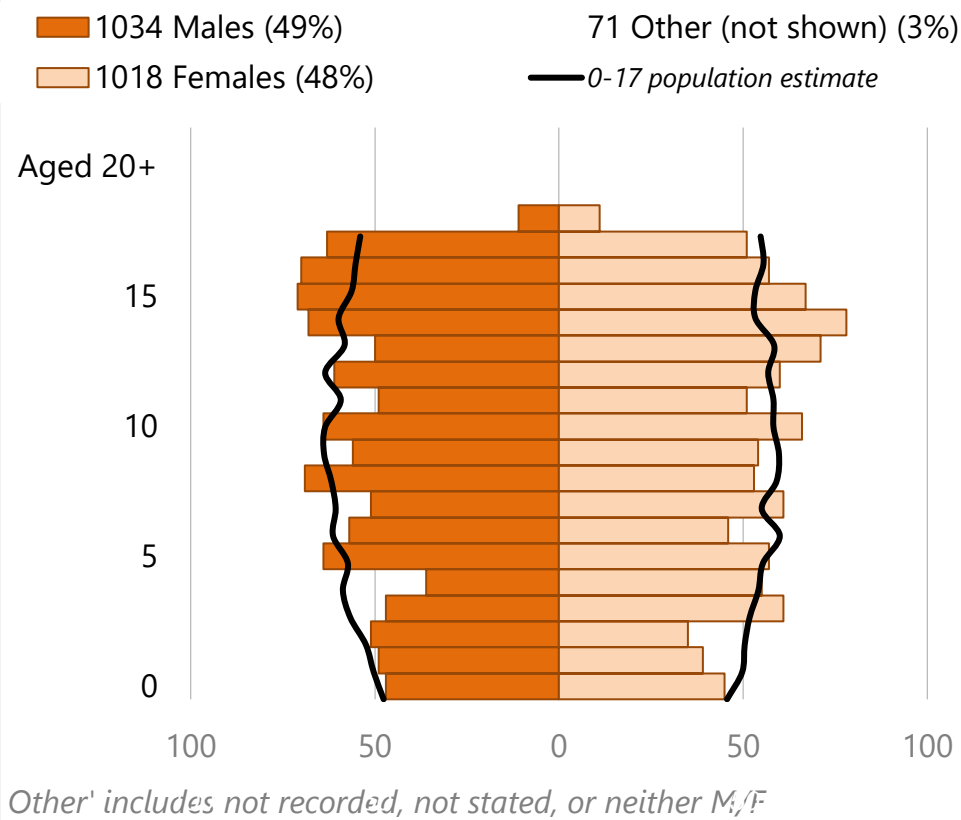
2123 referrals

Source of referral

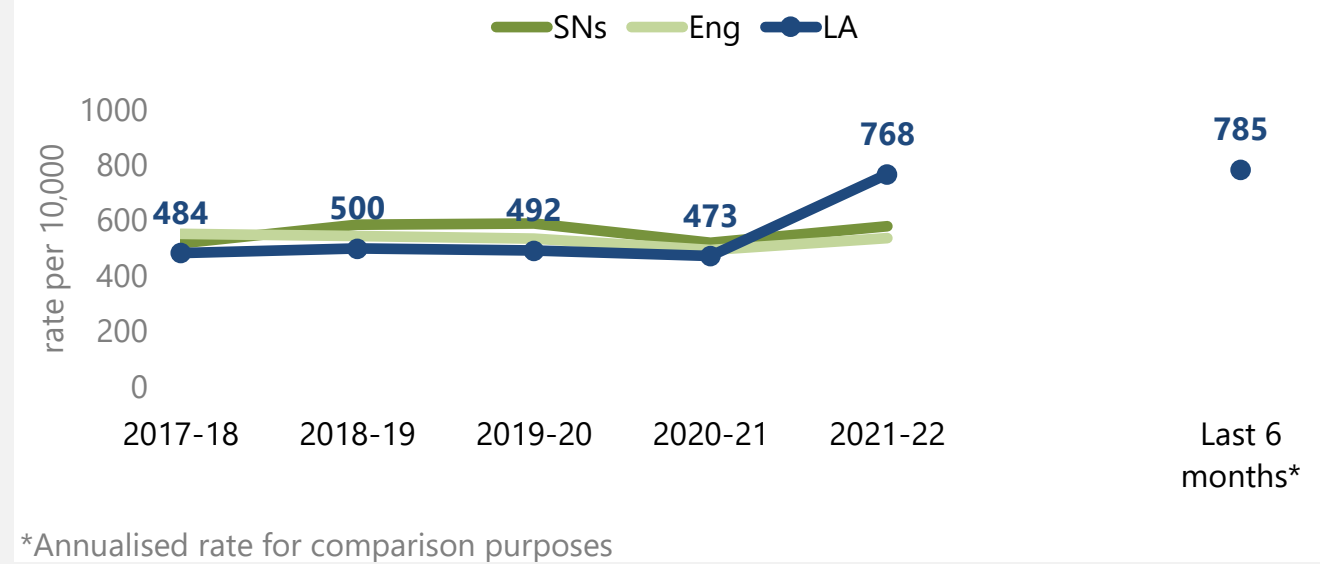


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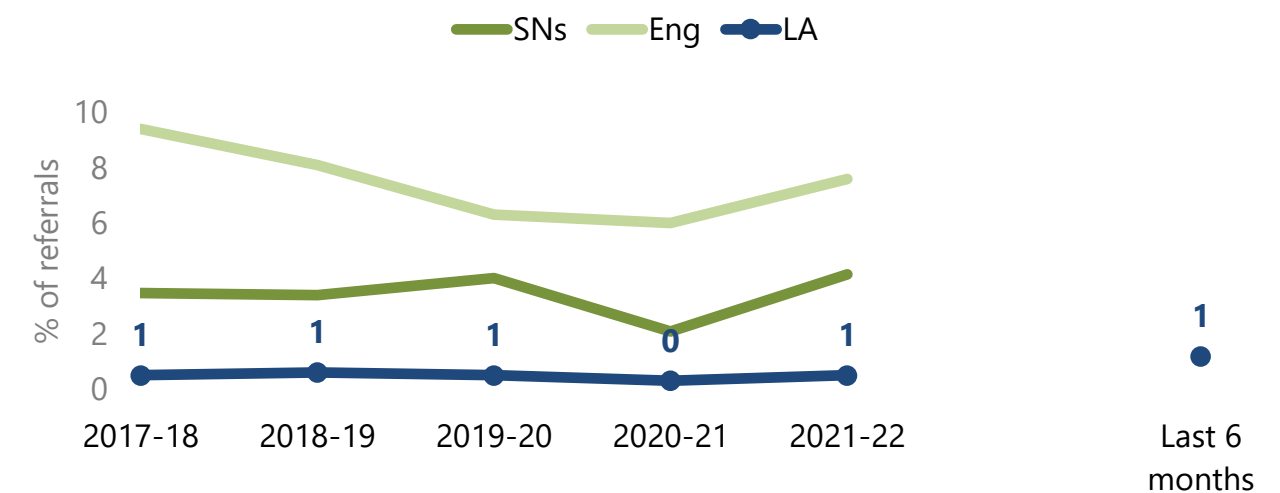
Age and gender



Rate of referrals per 10,000 children aged 0-17



Referrals with No Further Action (NFA)



Ethnic backgrounds

White	77%
Mixed	4%
Asian or Asian British	1%
Black or black British	3%
Other ethnic group	1%
Not stated	14%
Not recorded	0%

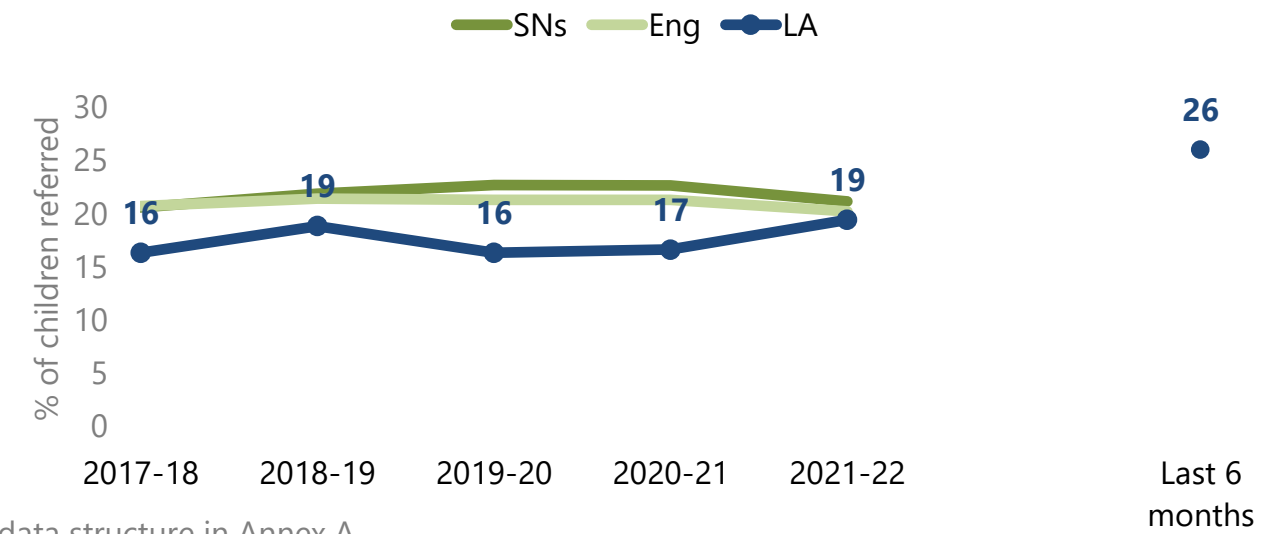
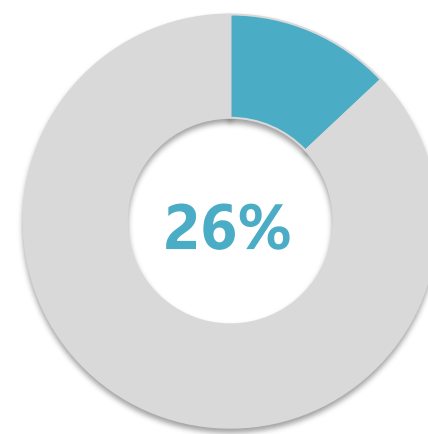
See page 22 for comparisons

Re-referrals: children with a previous referral within 12 months of their latest referral

523 children with previous referrals within 12 months of latest referral

First referral	1,488
1 prev referral	455
2 prev referrals	57
3 prev referrals	9
4+ prev referrals	2
Not recorded	0

■ Re-referral ■ First referral □ Not recorded

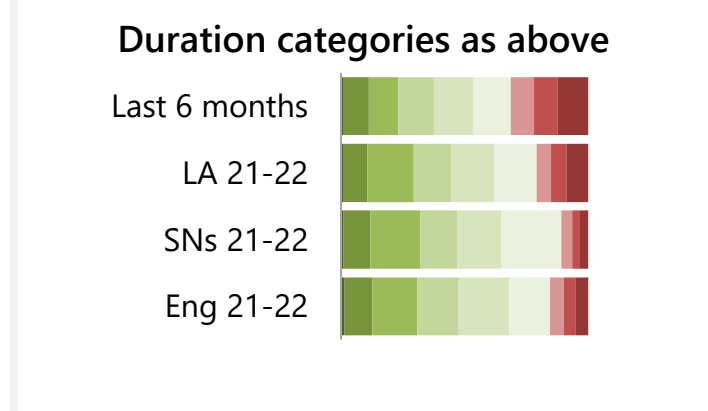
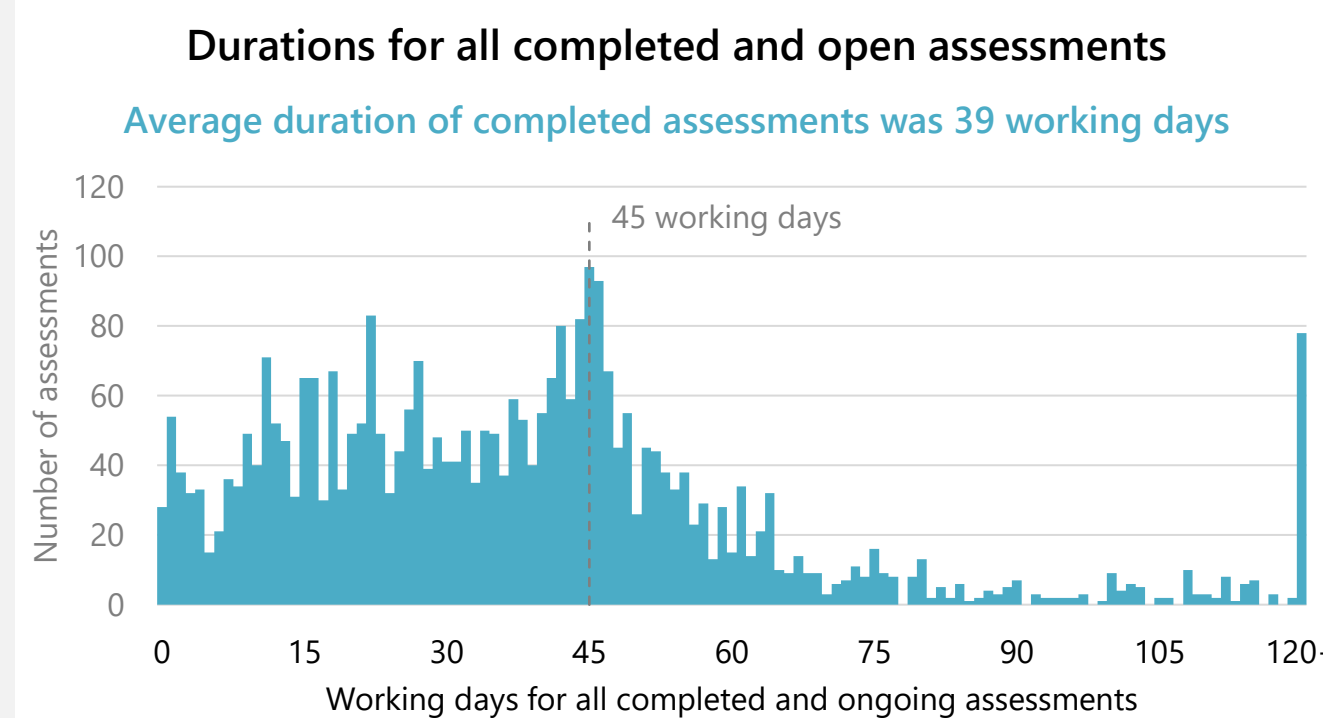
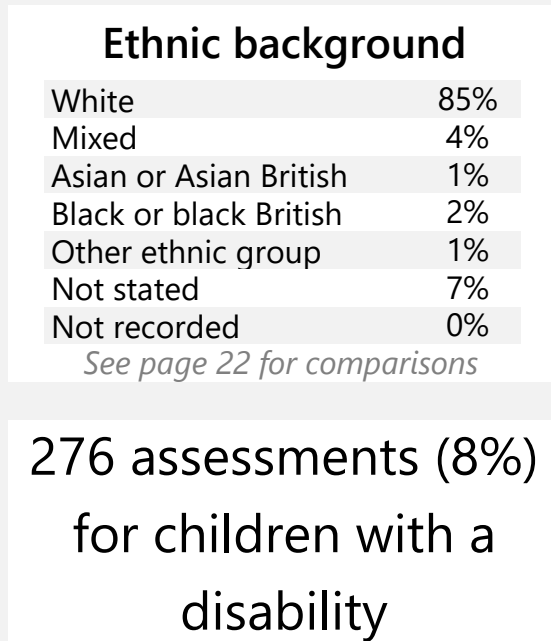
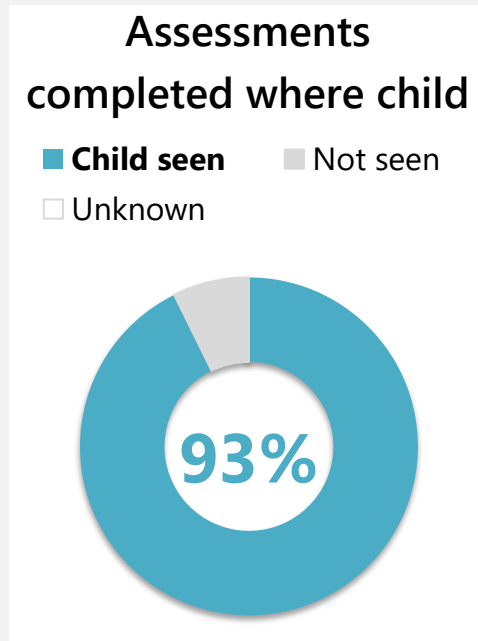
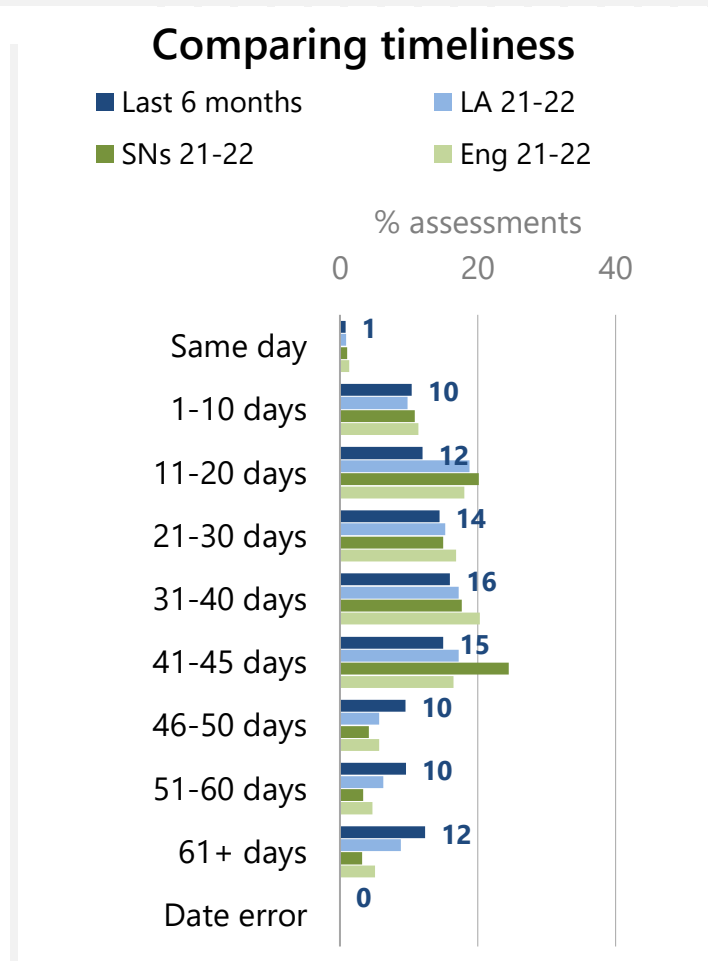
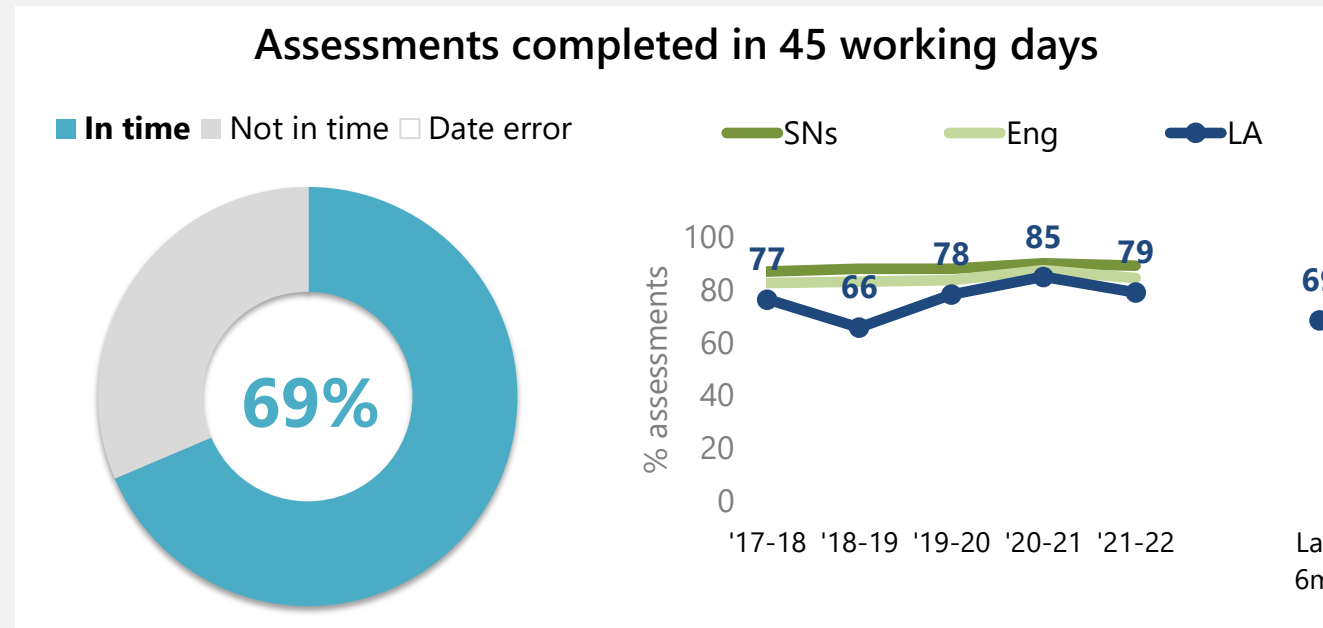
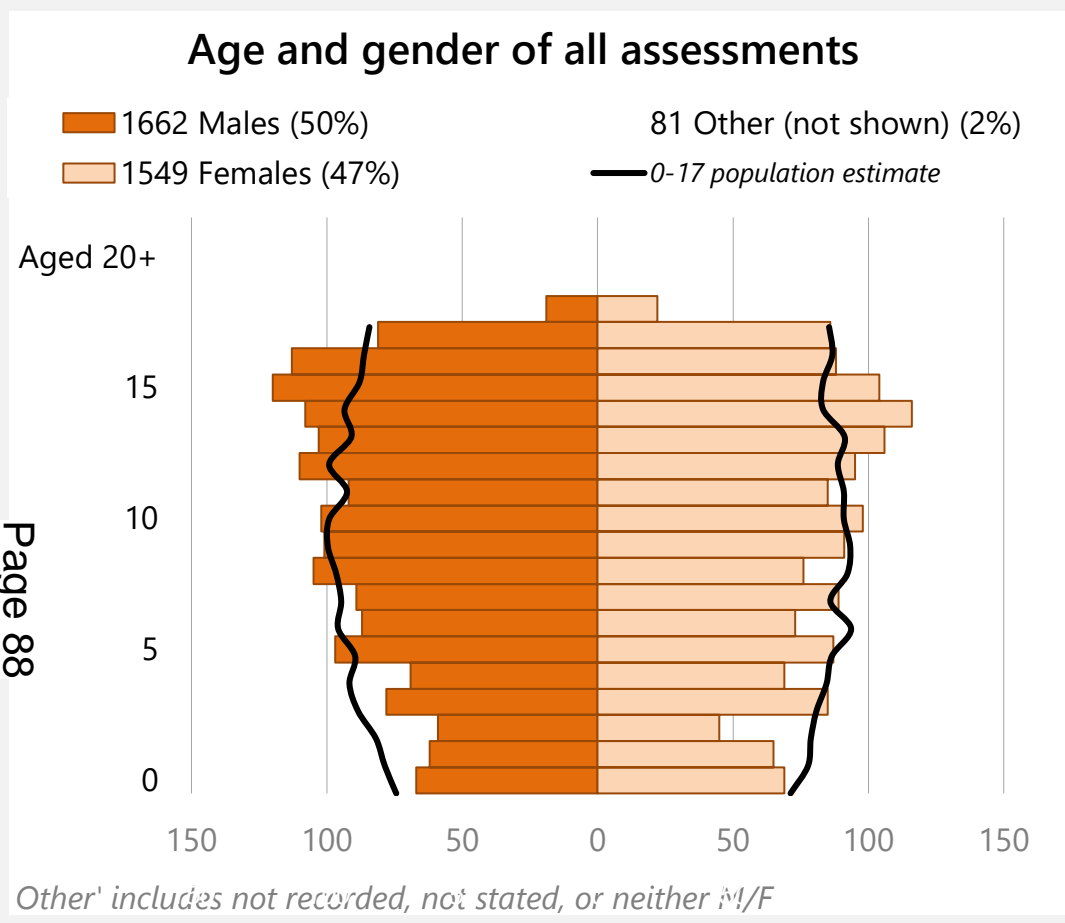
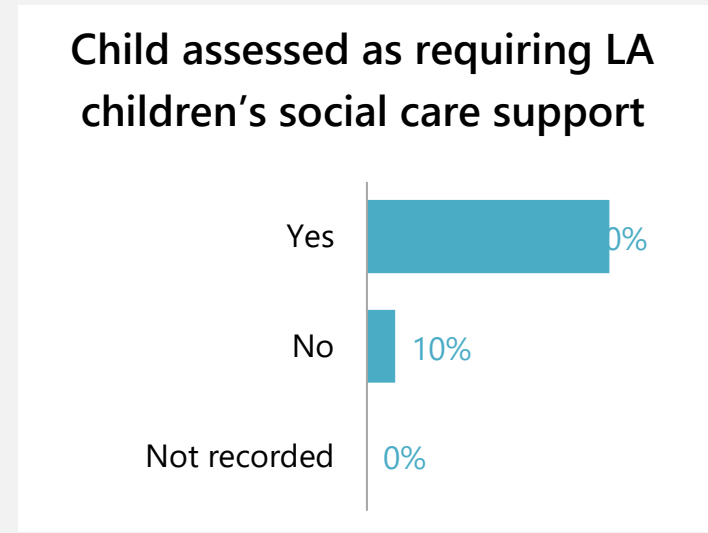
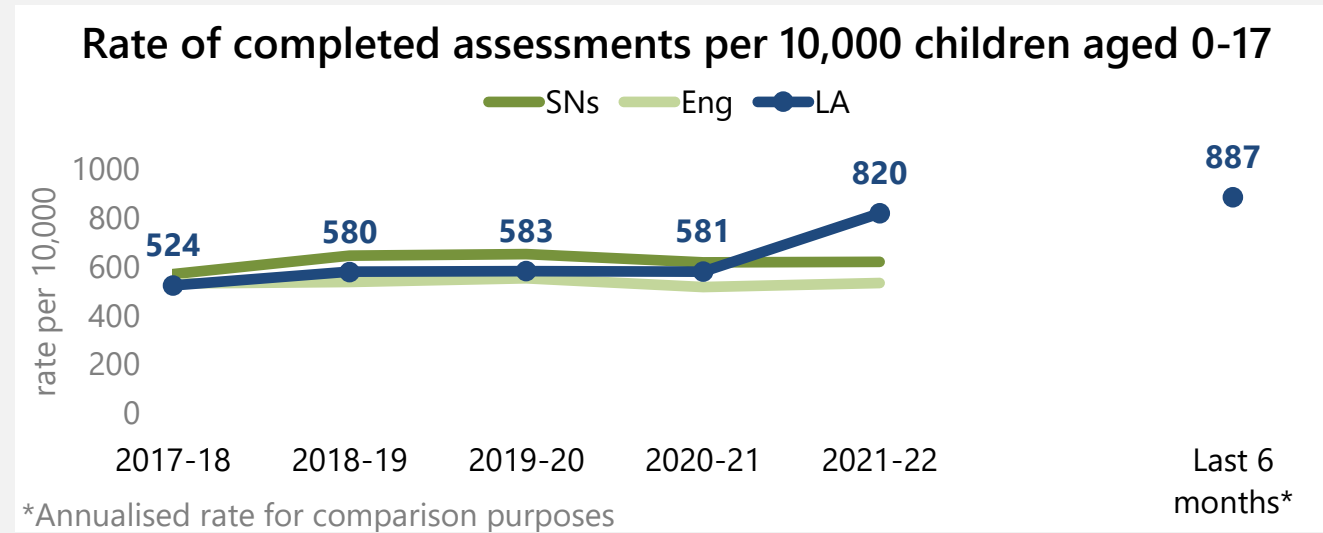


\*"Last 6 months" calculation differs slightly from national statistics, due to data structure in Annex A

Assessments in the last 6 months

from 31/10/2022  
to 30/04/2023

3292 total assessments  
894 open assessments  
**2398 completed assessments**





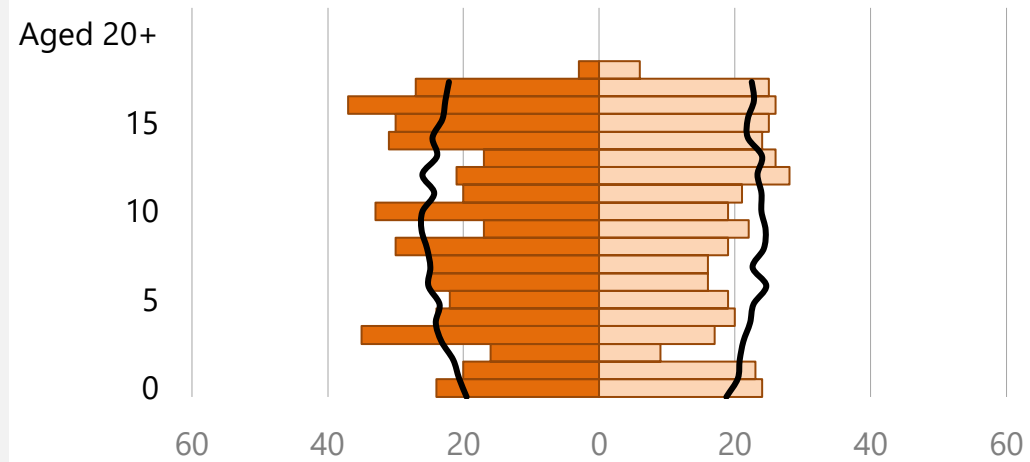
Section 47 enquiries in the last 6 months

from 31/10/2022  
to 30/04/2023

853 Section 47 enquiries

Age and gender

457 Males (54%)  
385 Females (45%)  
11 Other (not shown) (1%)  
— 0-17 population estimate



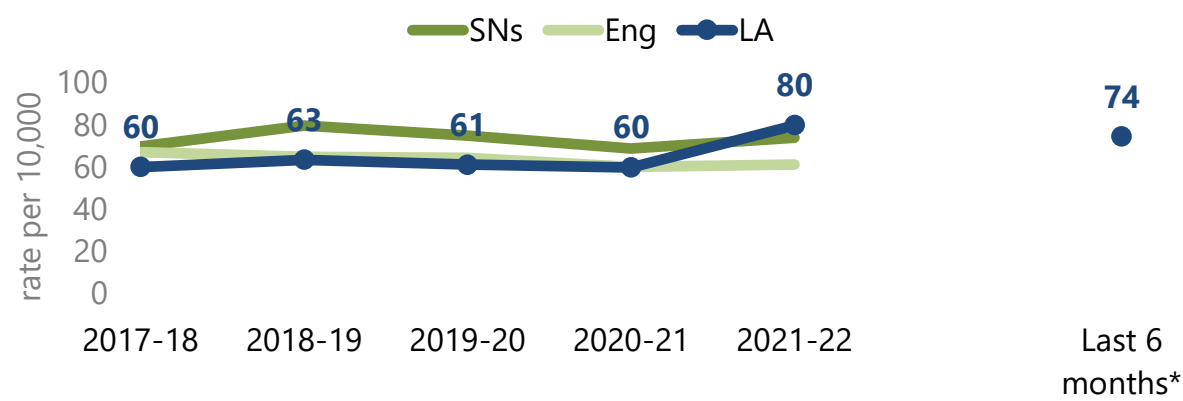
Other' includes not recorded, not stated, or neither M/F

201 Initial Child Protection Conferences (from S47 in period)

73% of completed S47s **did not require an ICPC**

ICPC not required may include S47s for open CPP where ICPC was not required, and may exclude children where an ICPC was required but has not yet occurred

Rate of ICPCs per 10,000 children aged 0-17



\*Annualised rate for comparison purposes

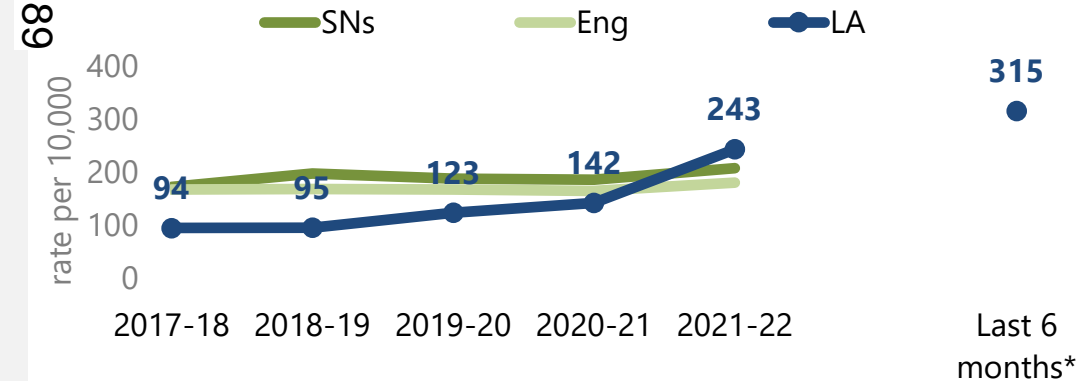
62 child(ren) with an ICPC in the 12 months preceding the latest S47\*

\*Including where latest S47 did not result in ICPC

82%

of ICPCs resulted in a child protection plan

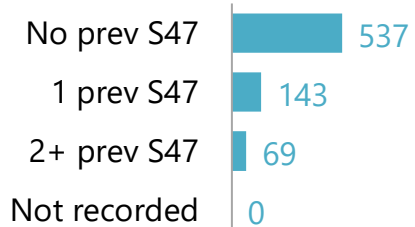
Rate of S47 enquiries per 10,000 children aged 0-17



\*Annualised rate for comparison purposes

48 S47s (6%) for children with a disability

Children with a S47 in the 12 months preceding the latest

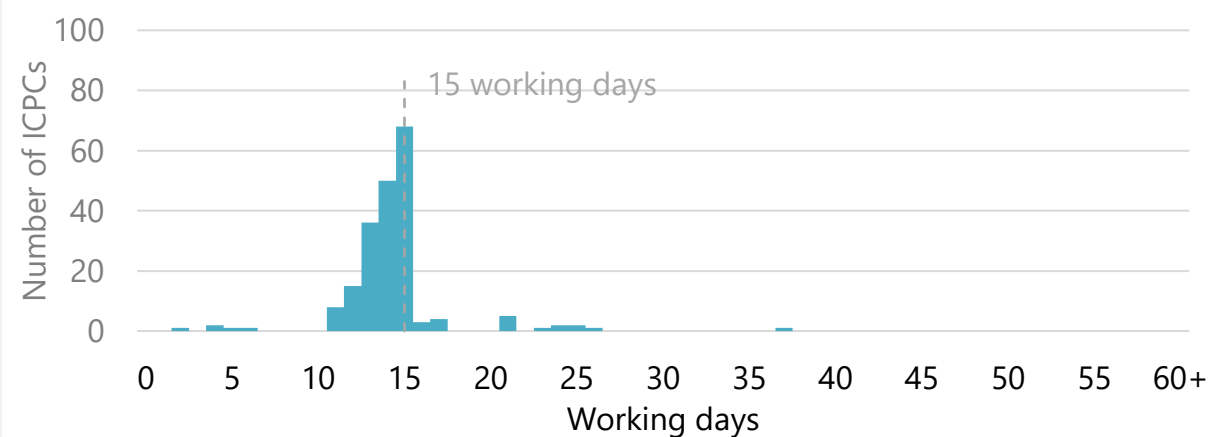


Ethnic background

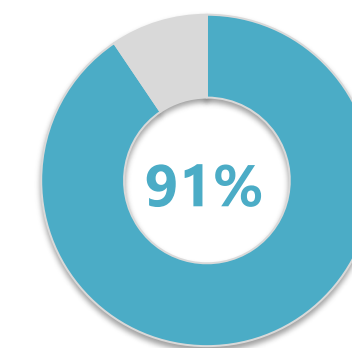
White	86%
Mixed	3%
Asian or Asian British	1%
Black or black British	3%
Other ethnic group	2%
Not stated	4%
Not recorded	0%

See page 22 for comparisons

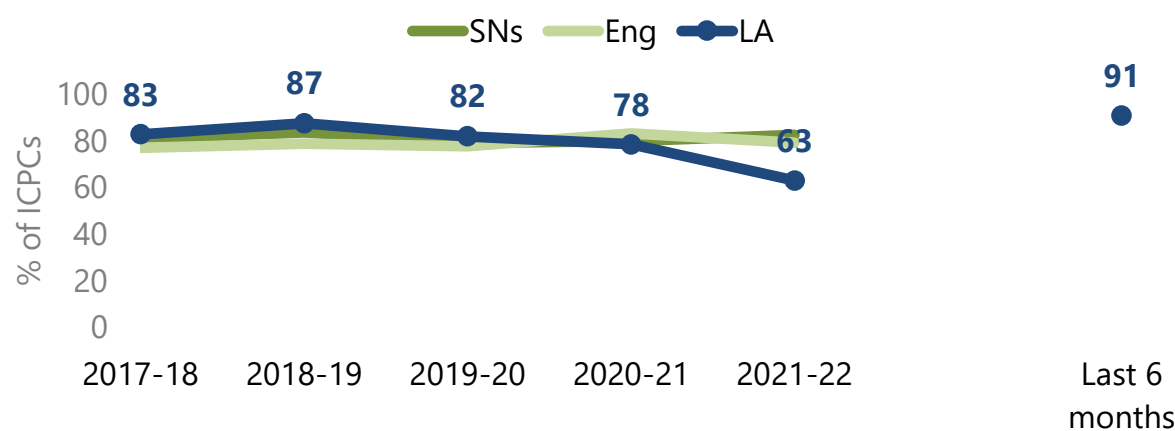
ICPCs occurred within 15 working days of the strategy discussion date



In time  
Not in time  
Date error

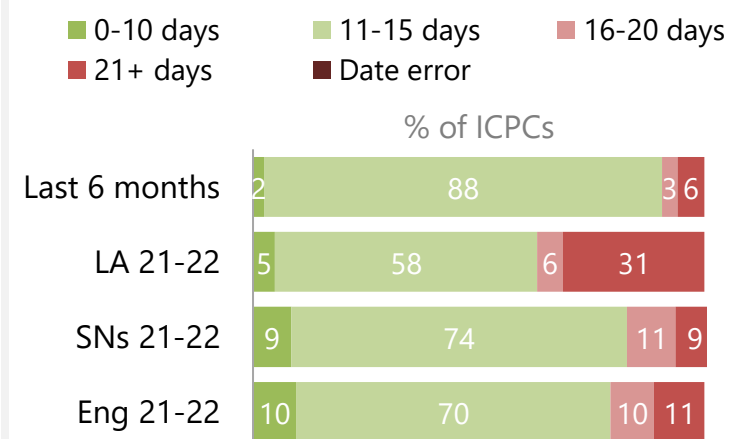


Trend of ICPC timeliness (within 15 days of S47 start)



\* Published comparator data includes transfer-in conferences

Comparing ICPC durations



Children in Need (CIN) - total, started, and ceased in the last 6 months

from 31/10/2022  
to 30/04/2023

**2896 total CIN in 6 months\***

\*Note: the numbers of children in need reported in ChAT are not directly comparable to published CIN census statistics due to an undercount of referrals and care leavers.

The children in need census includes any child referred to children's social care services in the year as well as any open case for whom the local authority was providing services. Ofsted's Annex A List 6 largely covers this cohort, with the exception of those with only an open referral and those accessing leaving care services.

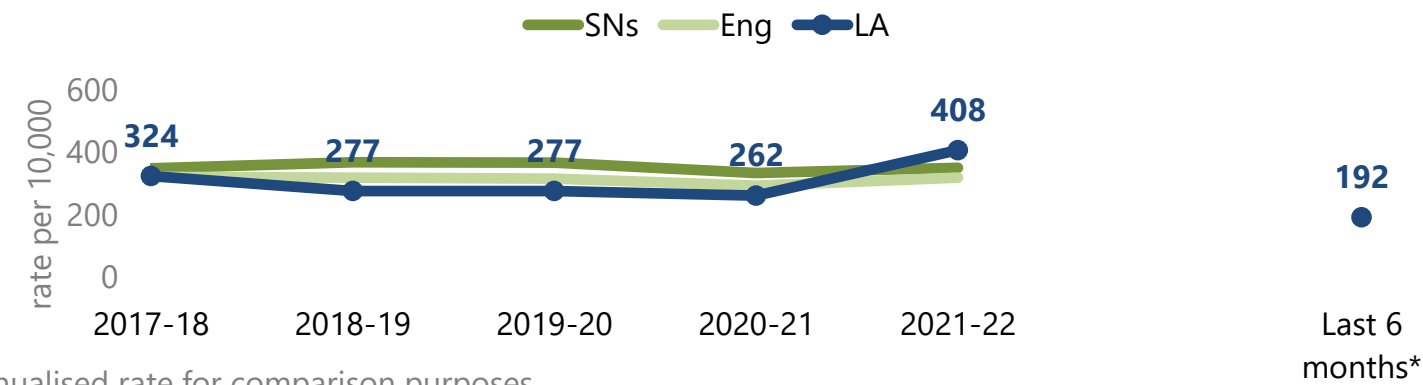
Page 90 For this reason the published children in need census statistics are not directly comparable to ChAT, however there is considerable overlap with ChAT undercounting the true value as it excludes open referrals and care leavers.

Cases included in Annex A / ChAT

Case status of children on CIN list	Number	Percentage
Looked after child	621	21%
Child protection plan	329	11%
Child in need plan	755	26%
Open assessment	687	24%
Closed episode	504	17%
Case status not recorded	0	0%
<b>Total (excluding case status unknown)</b>	<b>2,896</b>	<b>100%</b>

**519 CIN started in 6 months**

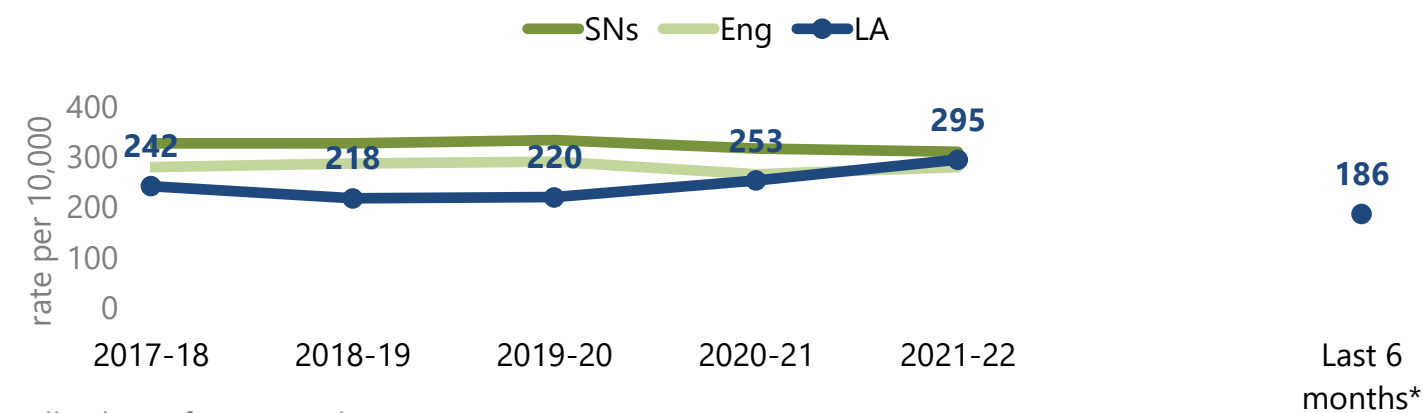
Rate of children who started an episode of need per 10,000 children aged 0-17



\*Annualised rate for comparison purposes

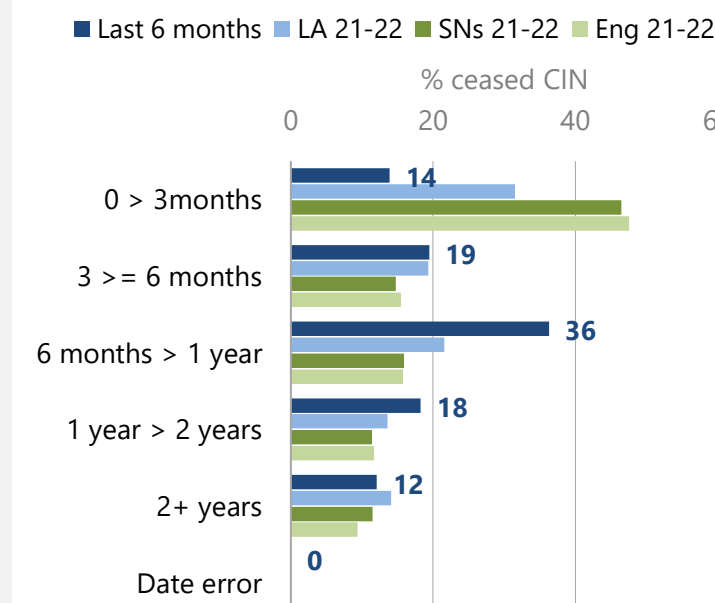
**504 CIN ceased in 6 months**

Rate of children who ended an episode of need per 10,000 children aged 0-17

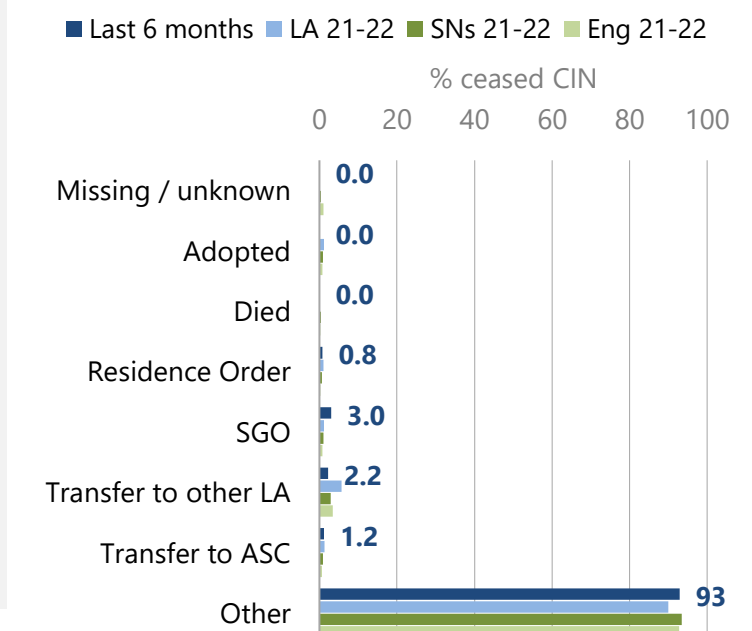


\*Annualised rate for comparison purposes

Comparing CIN ceased durations



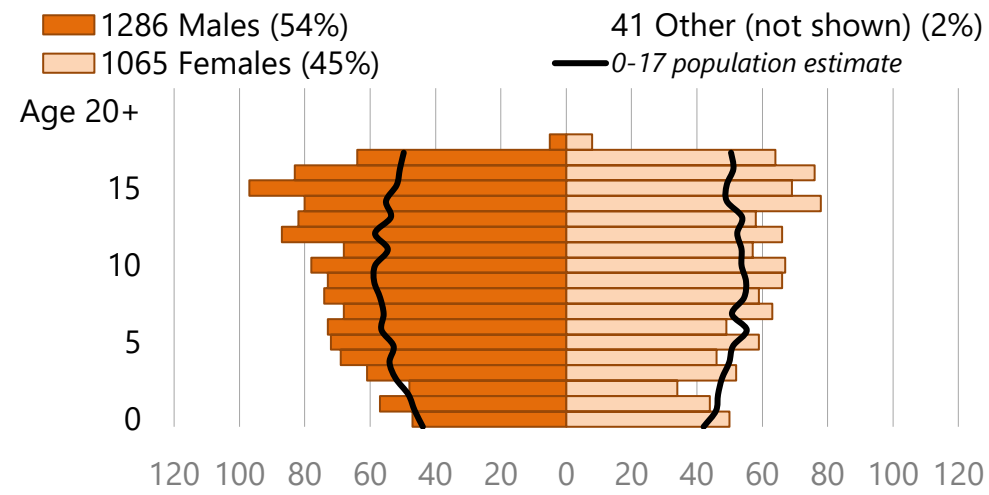
Comparing CIN ceased reasons



## 2392 Children in Need with an open episode of need\*

\*Note: Annex A figures in this section are not directly comparable to the published Children in need census statistics (see note on page 8)

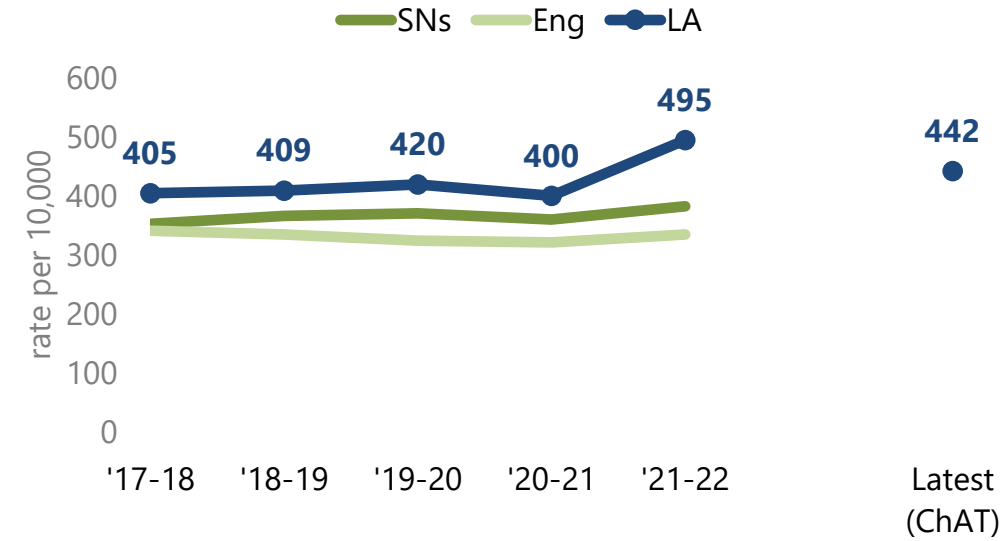
### Age and gender



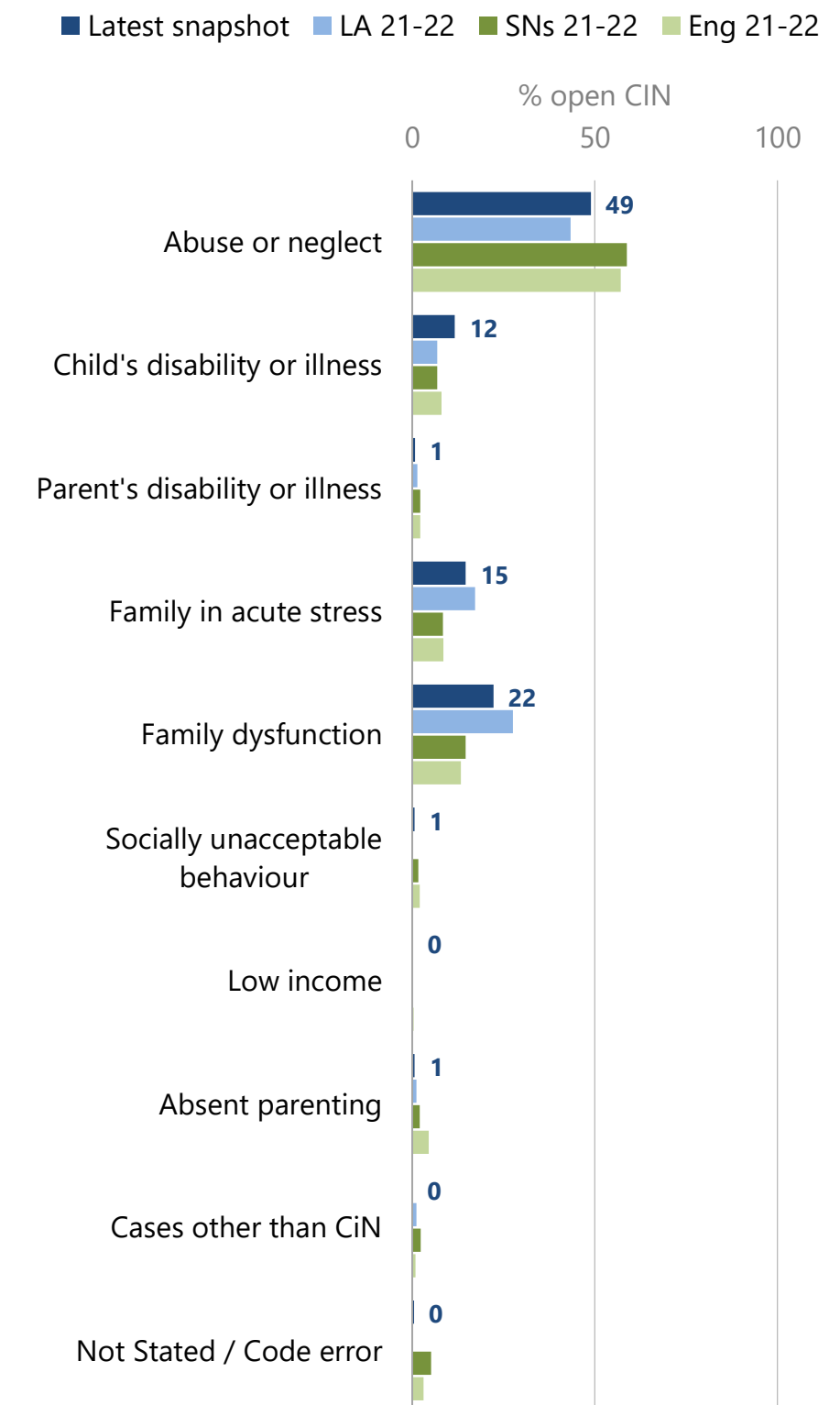
Page 91

\*Other' includes not recorded, not stated, or neither M/F

### Rate of open CIN per 10,000 children aged 0-17\*

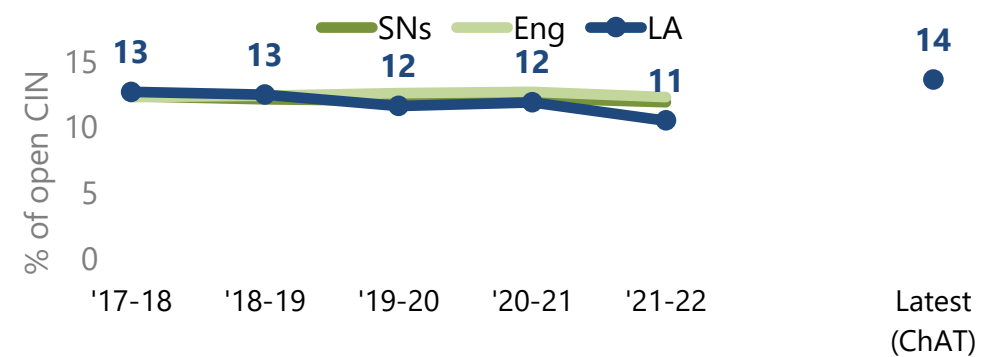


### Comparing primary need of open CIN

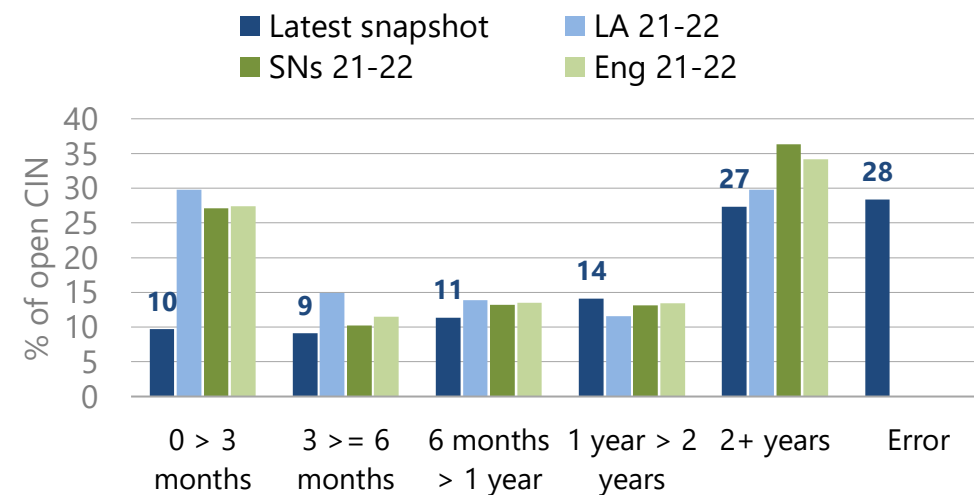


### 326 children (14%) with a disability

#### CIN with an open episode of need with a disability



### Comparing episode duration of open CIN

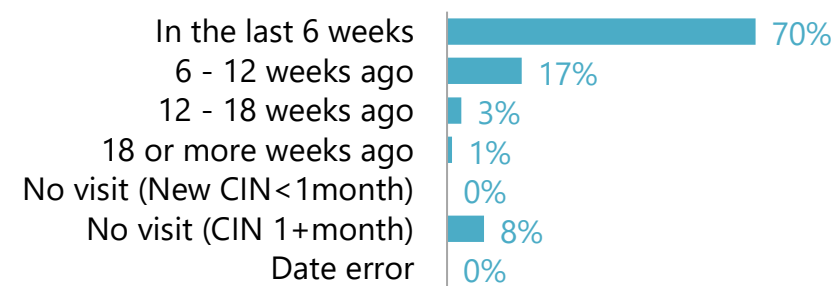


### Ethnic background

White	83%
Mixed	3%
Asian or Asian British	1%
Black or black British	2%
Other ethnic group	1%
Not stated	9%
Not recorded	0%

See page 22 for comparisons

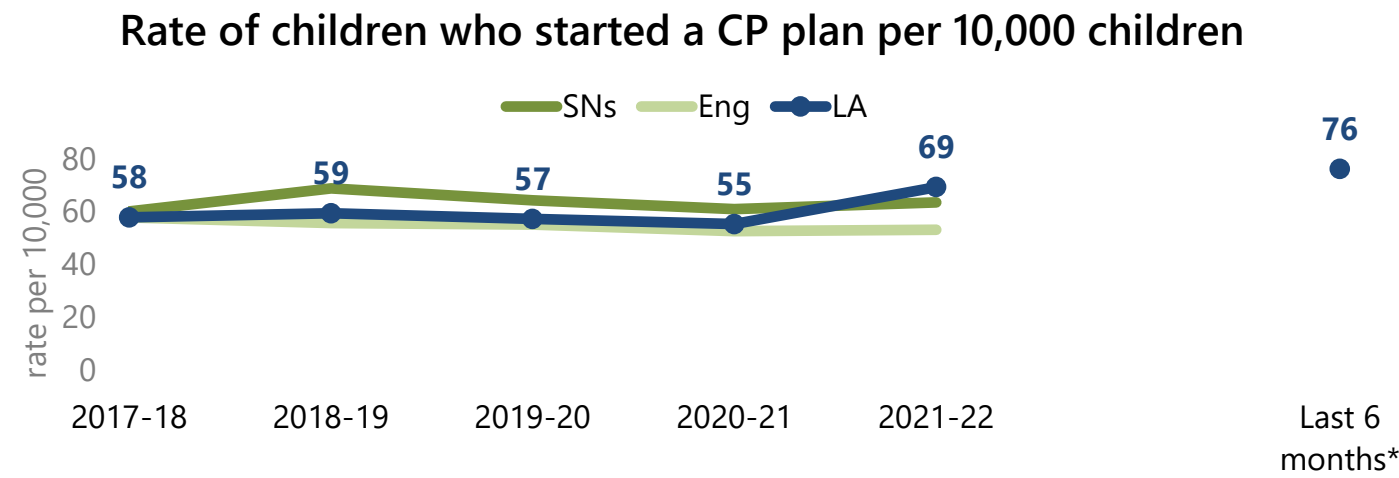
### Time since the child was last seen by social worker



Child Protection Plans (CPP) started and ceased in the last 6 months

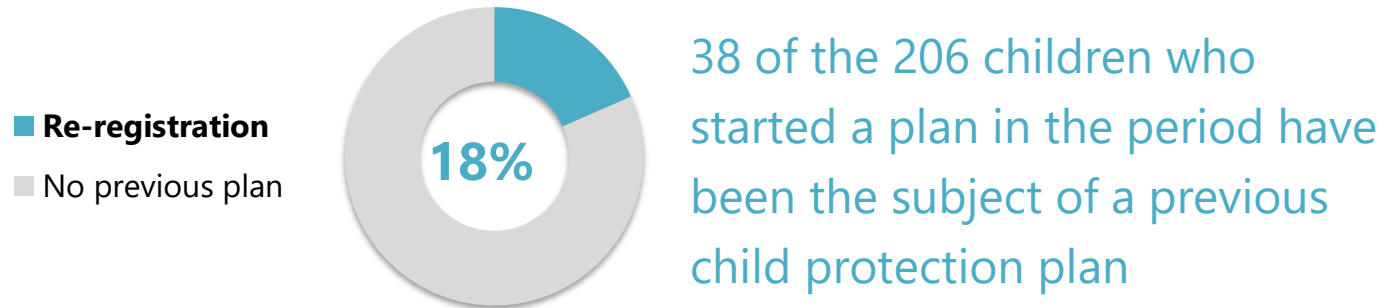
from 31/10/2022  
to 30/04/2023

206 CPP started in 6 months



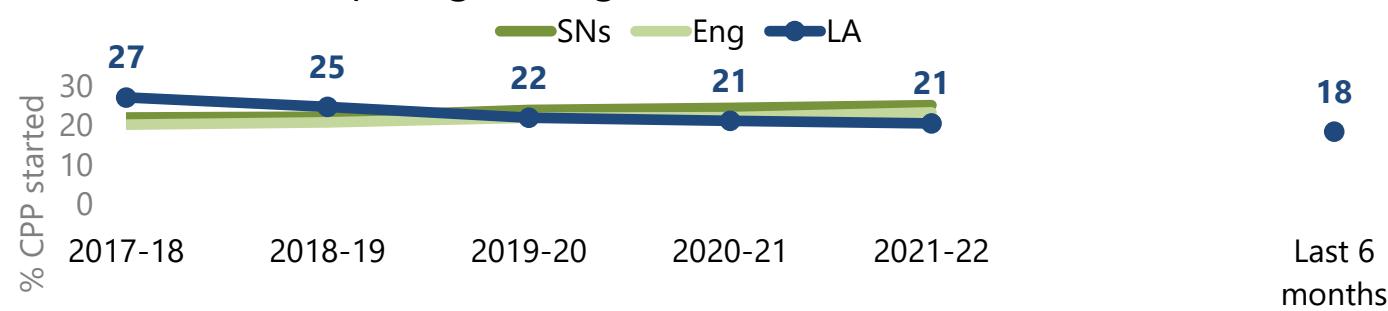
\*Annualised rate for comparison purposes

"Re-registrations" for children who started on a CP plan (ever)

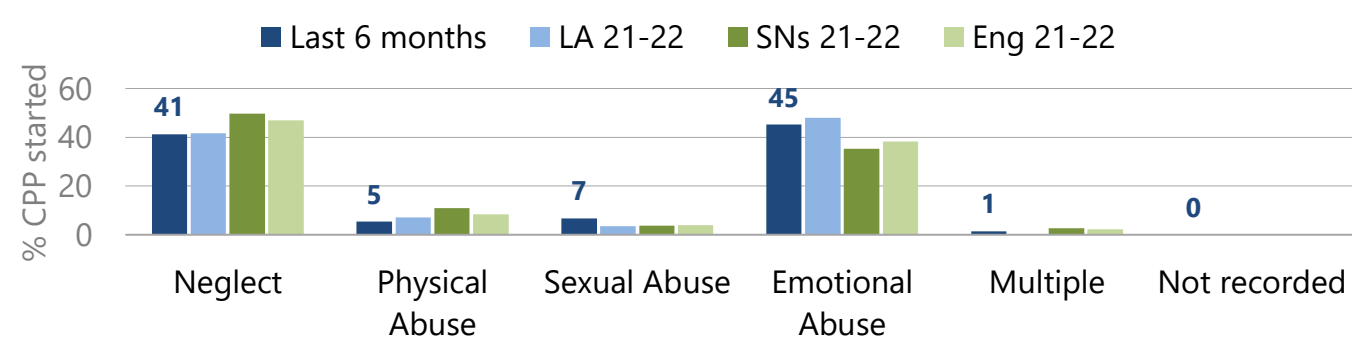


Page 92

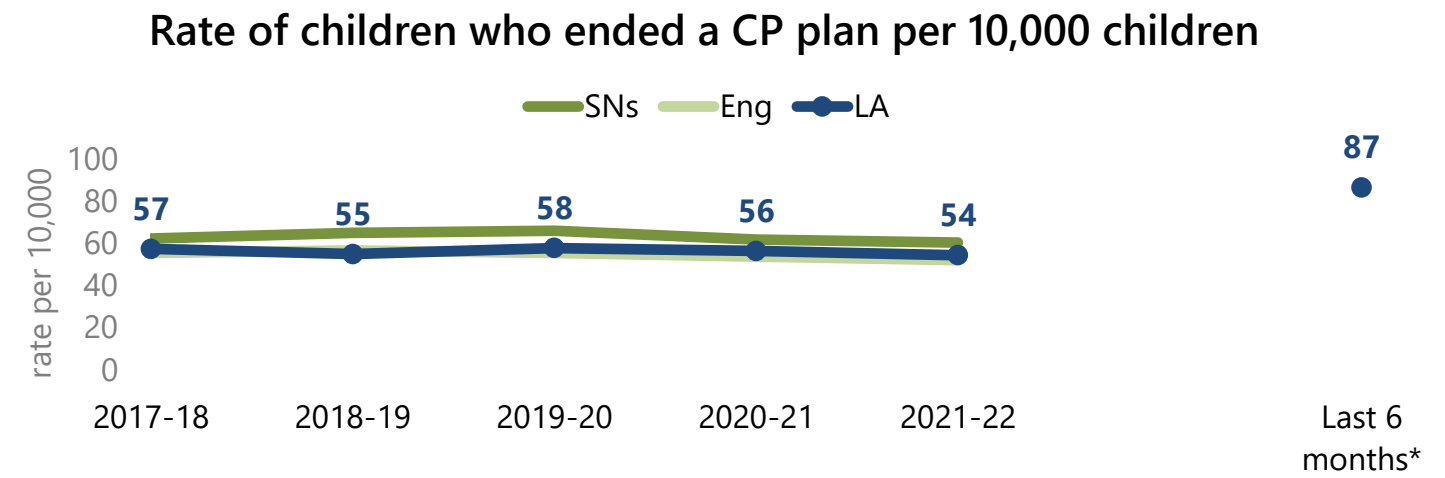
Comparing "re-registrations" for CPP started



Initial category of abuse for CPP started

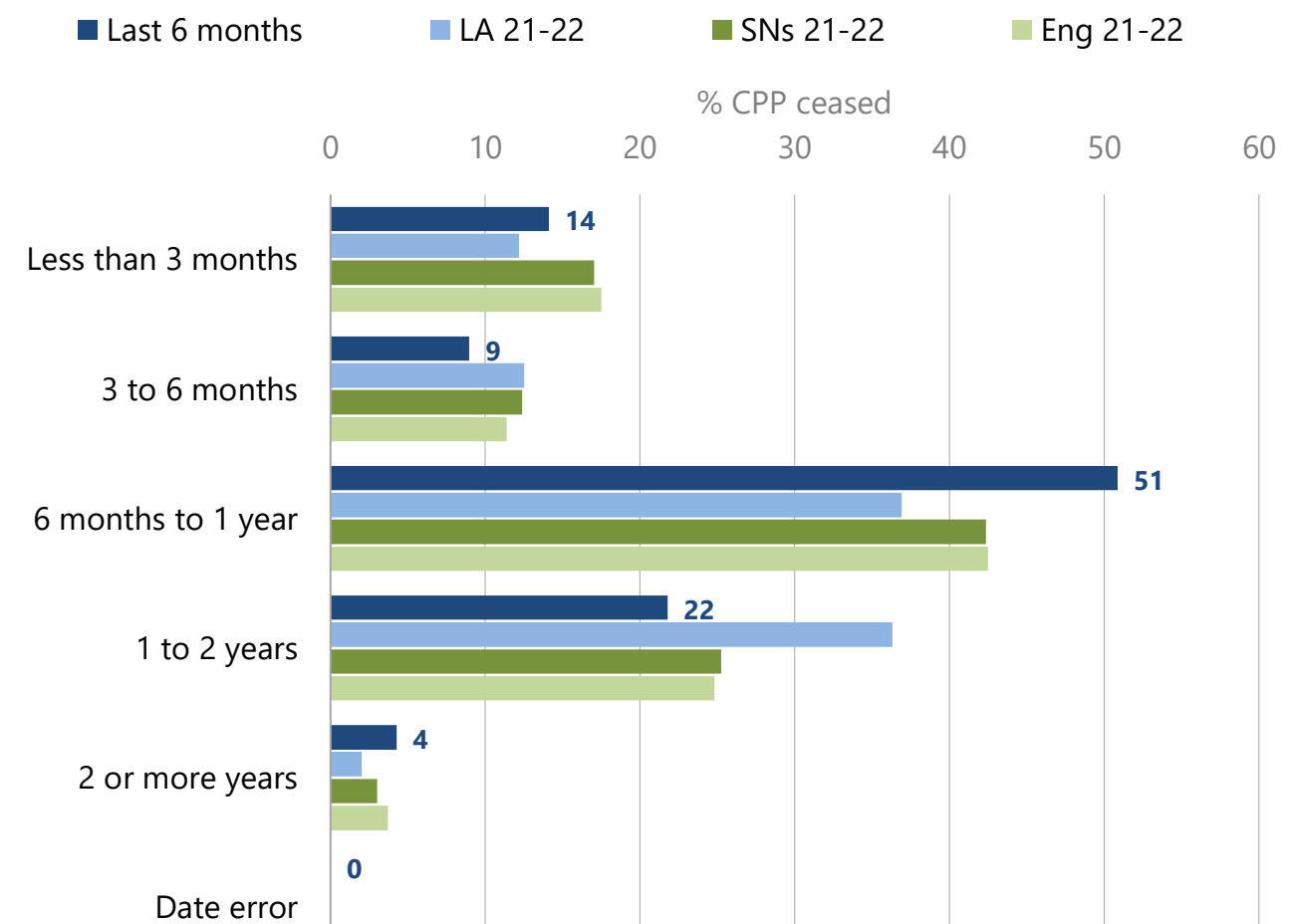


234 CPP ended in 6 months



\*Annualised rate for comparison purposes

Comparing plan durations for CPP ended



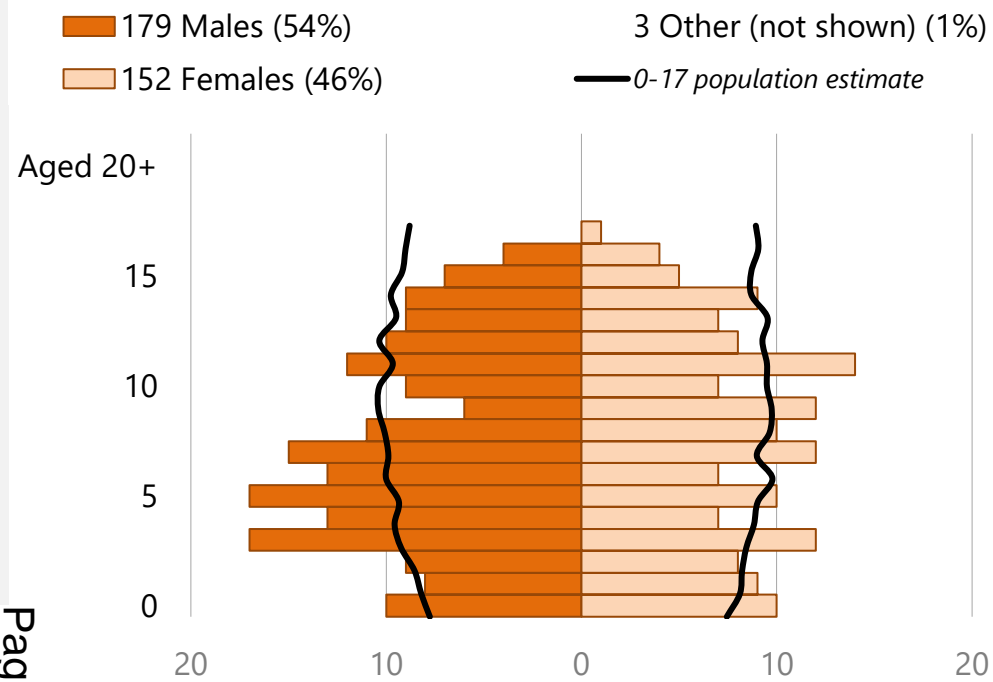
10 of 234 children ended a CP plan after 2 years or more

Child Protection Plans (CPP) currently open

Snapshot 30/04/2023

### 334 children currently subject of a Child Protection Plan (CPP)

#### Age and gender



Page 93

ther' includes not recorded, not stated, or neither M/F

#### Ethnic background

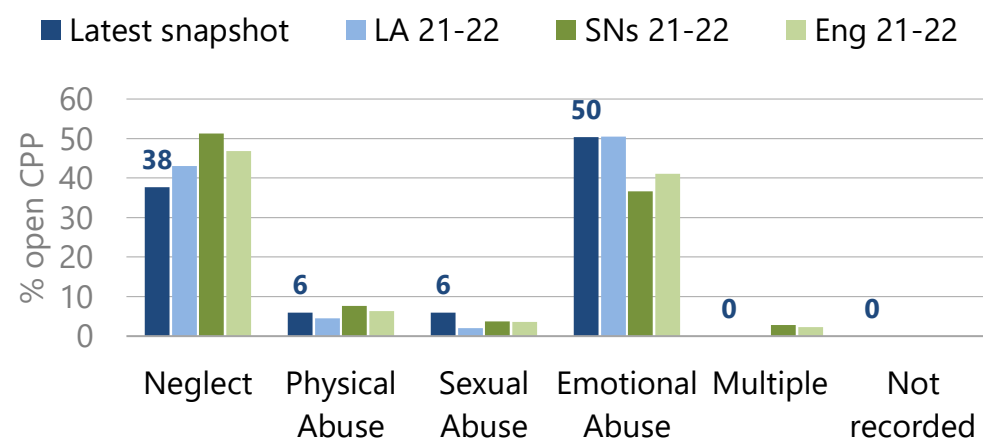
White	96%
Mixed	2%
Asian or Asian British	0%
Black or black British	1%
Other ethnic group	0%
Not stated	0%
Not recorded	0%

See page 20 for comparisons

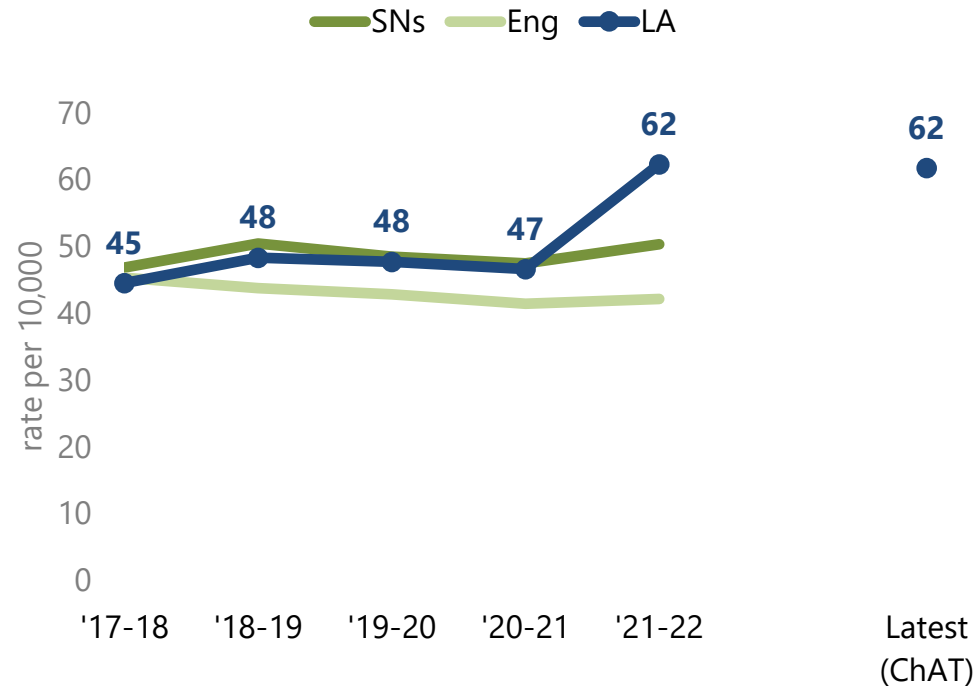
12 children (4%)  
with a disability

0 open CP subject to  
Emergency Protection Order  
or Protected Under Police  
Powers in last 6 months

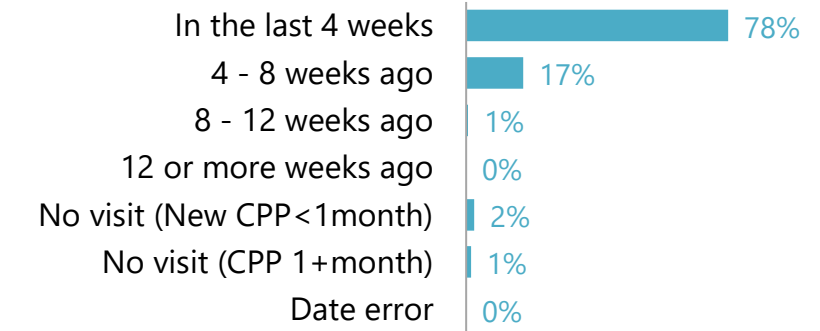
#### Latest category of abuse for current CP plans



#### Rate of CPP per 10,000 children aged 0-17

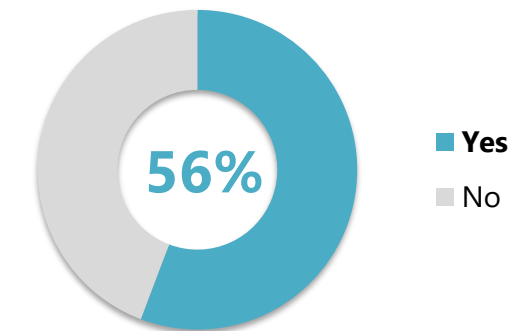


#### Time since the child was last seen

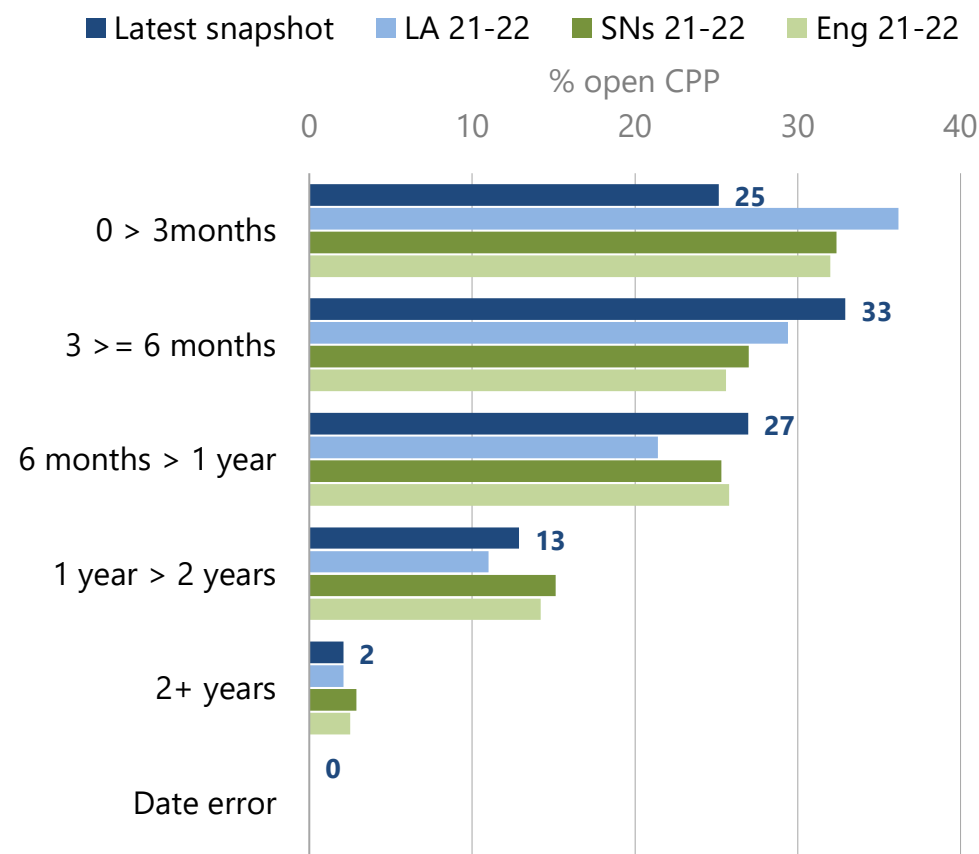


Open CPP **seen alone** at their last social work visit

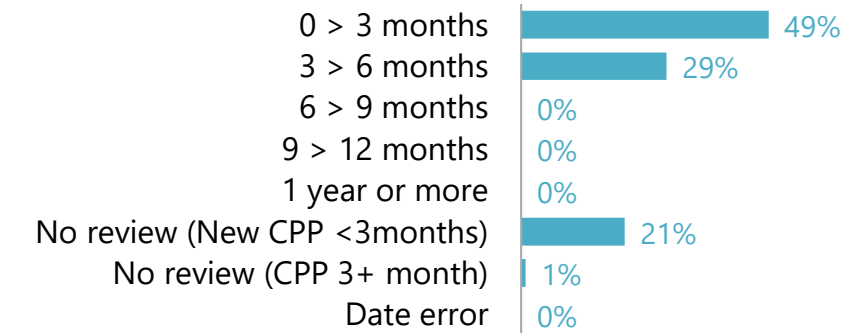
(excludes Not recorded or N/A)



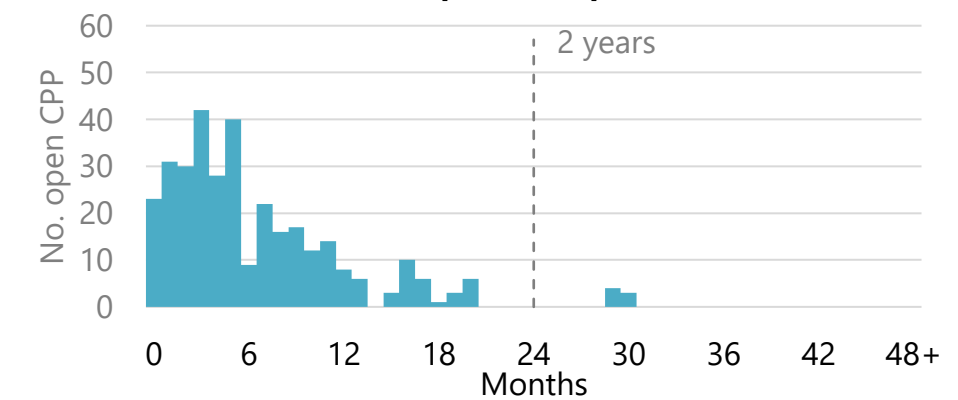
#### Comparing duration of open CP plans



#### Time since the child's latest review



#### Duration of current open CP plans (in months)

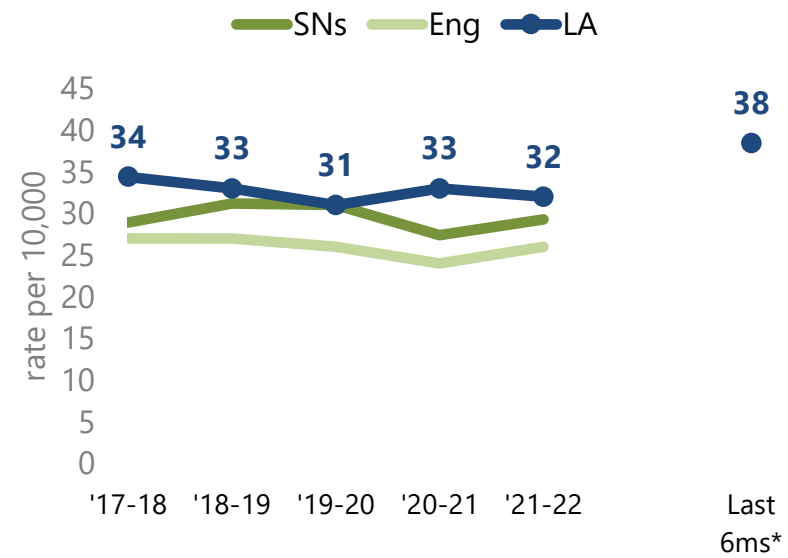


Children Looked After (CLA) started and ceased in the last 6 months

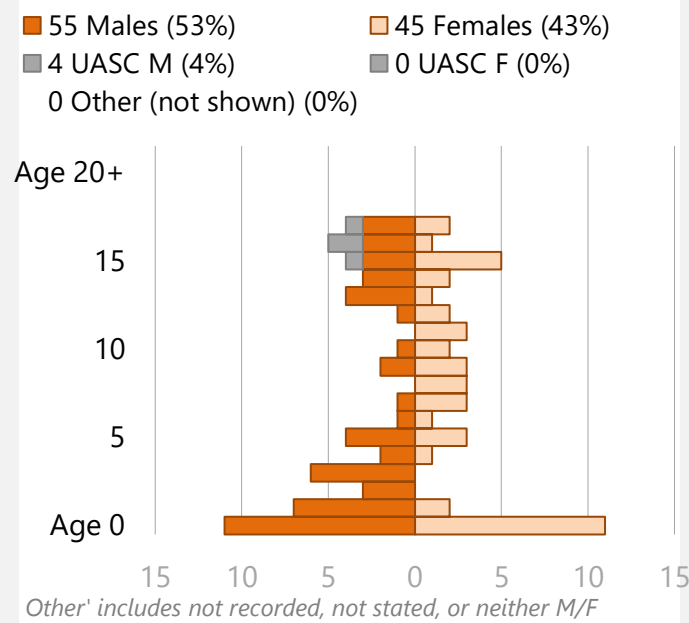
from 31/10/2022 to 30/04/2023

### 104 CLA started in the last 6 months

Rate of CLA started per 10,000 children



Age and gender



\*Annualised rate for comparison purposes

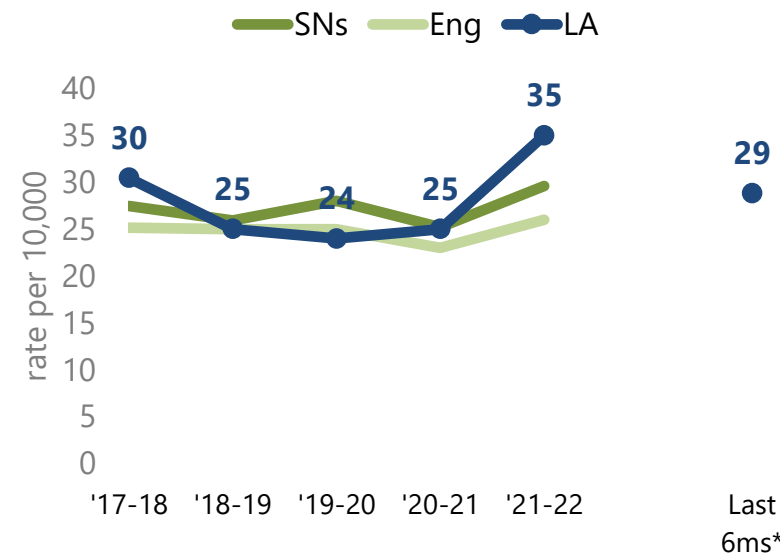
Other' includes not recorded, not stated, or neither M/F

4 of the 104 CLA starters were unaccompanied asylum seeking children (UASC)

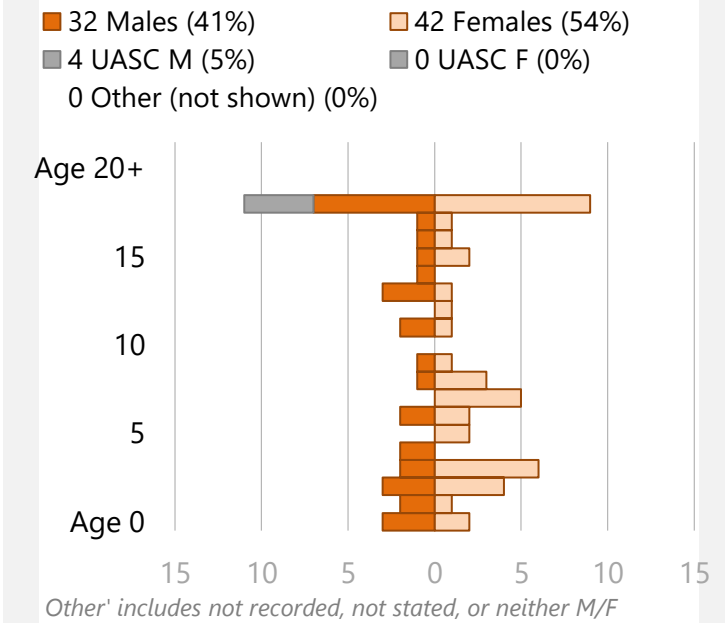
0 of the 104 CLA starters have previously been looked after

### 78 CLA ceased in the last 6 months

Rate of CLA ceased per 10,000 children



Age and gender

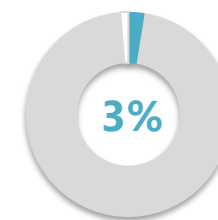


\*Annualised rate for comparison purposes

Other' includes not recorded, not stated, or neither M/F

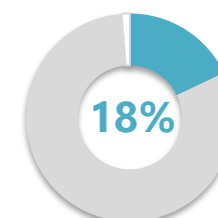
#### Reason episode of care ceased

##### Adopted



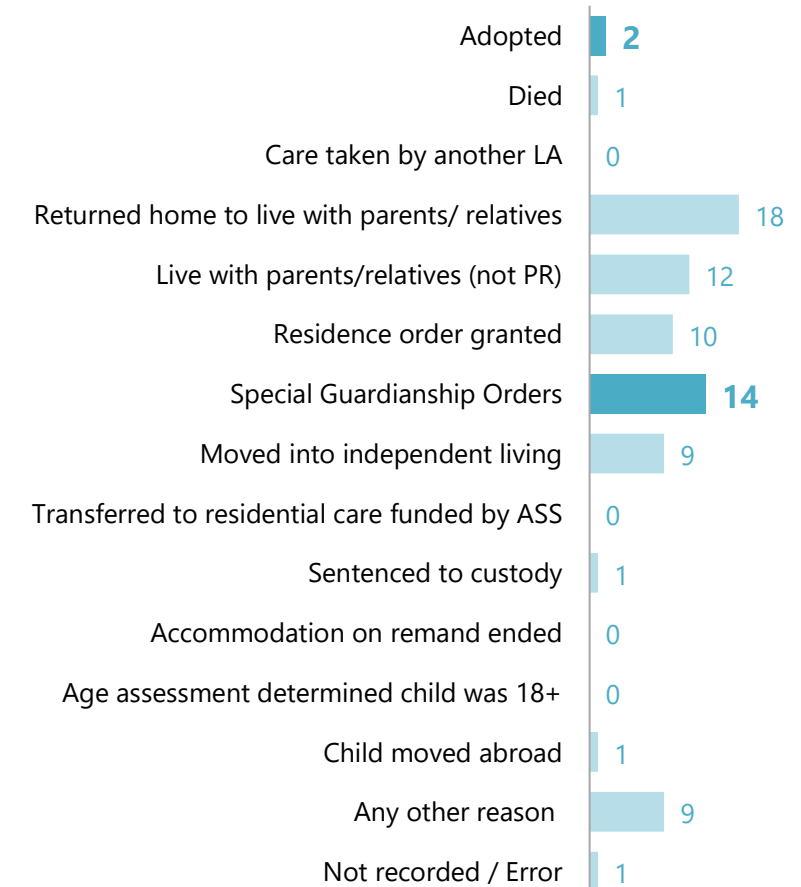
Last 6 months	2021-22 (published)		
	LA	SNs	Eng
3%	13%	11%	10%

##### Special Guardianship Order

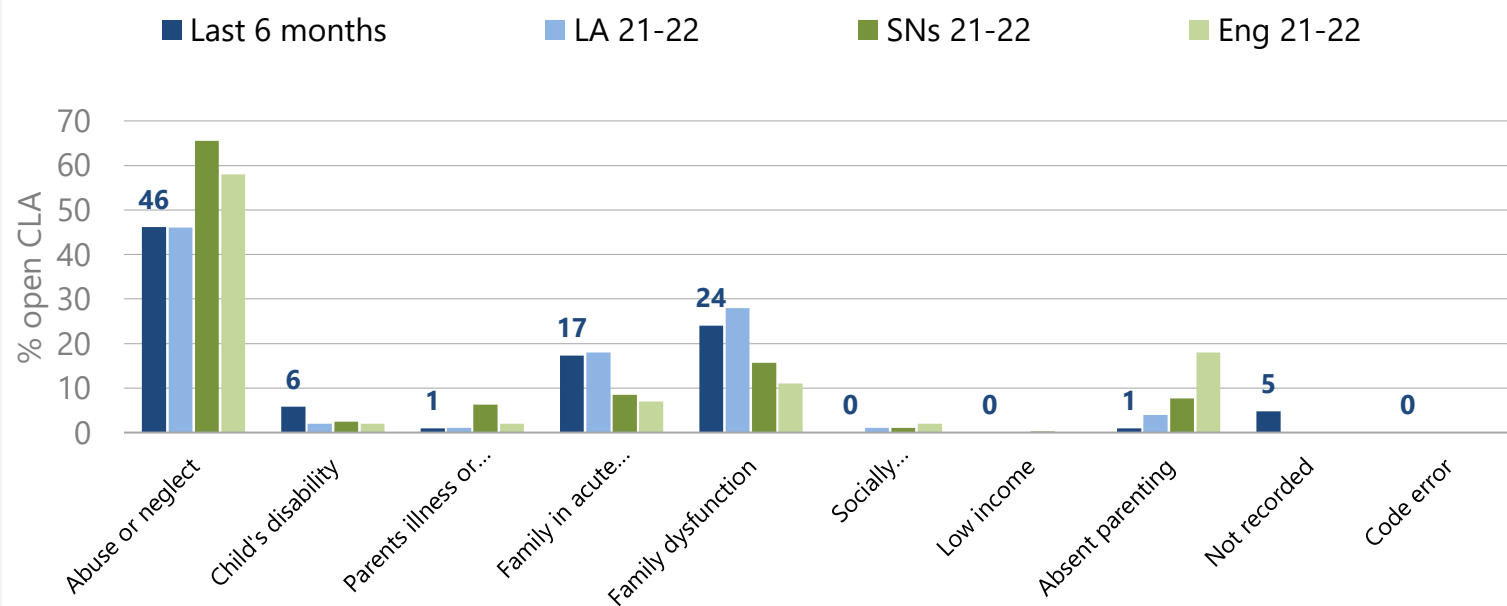


Last 6 months	2021-22 (published)		
	LA	SNs	Eng
18%	21%	17%	13%

##### Number of CLA ceased by reason in the period



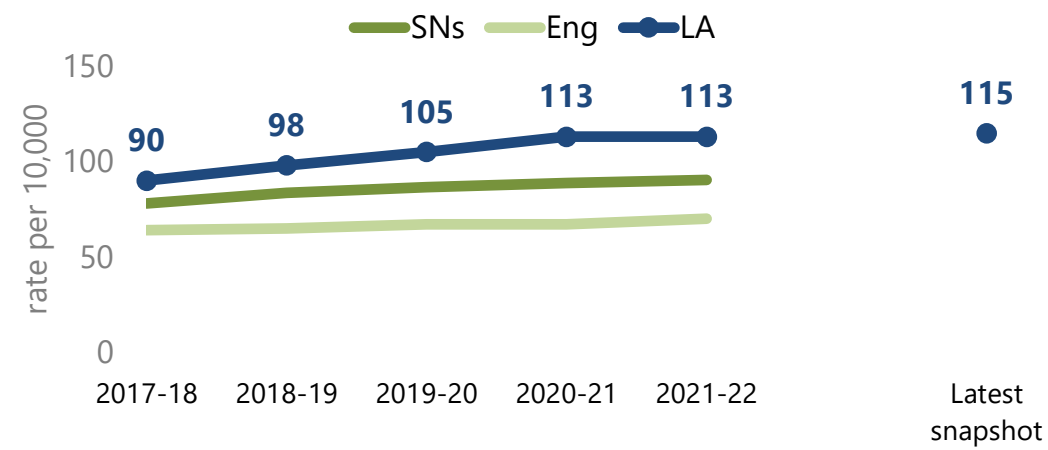
#### Comparing the primary need of CLA starters



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# 621 Children Looked After (CLA) with an open episode of care

Rate of CLA per 10,000 children (snapshot)



Ethnic background

	All CLA	Not UASC	UASC
White	91%	93%	0%
Mixed	4%	4%	0%
Asian or Asian British	1%	0%	31%
Black or black British	1%	1%	0%
Other ethnic group	3%	1%	69%
Not stated	0%	0%	0%
Not recorded	0%	0%	0%

65 children (10%) with a disability

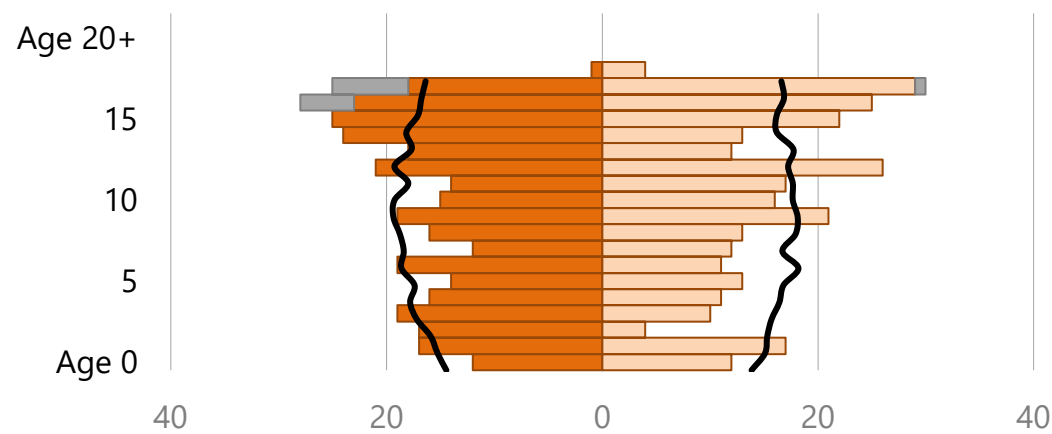
Permanence plan

	Number	%
Return to family	82	13%
Adoption	29	5%
SGO/CAO	6	1%
Supported living	14	2%
L/T residential	0	0%
L/T fostering	264	43%
Other	210	34%
Not recorded	16	3%

Age and gender

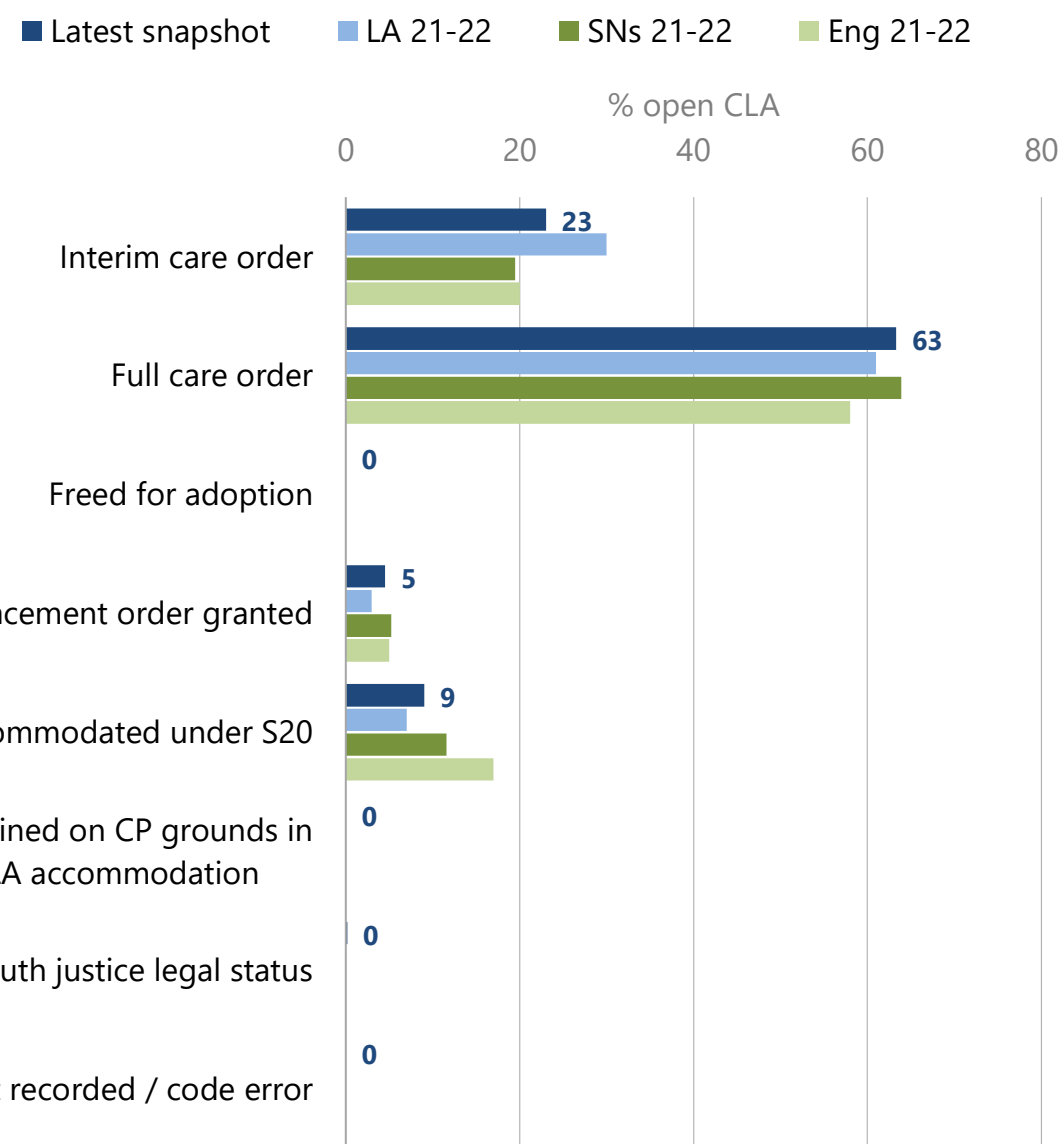
320 Males (52%)  
288 Females (46%)  
0 Other (not shown) (0%)  
12 UASC Males (2%)  
1 UASC Females (0%)  
0-17 population estimate

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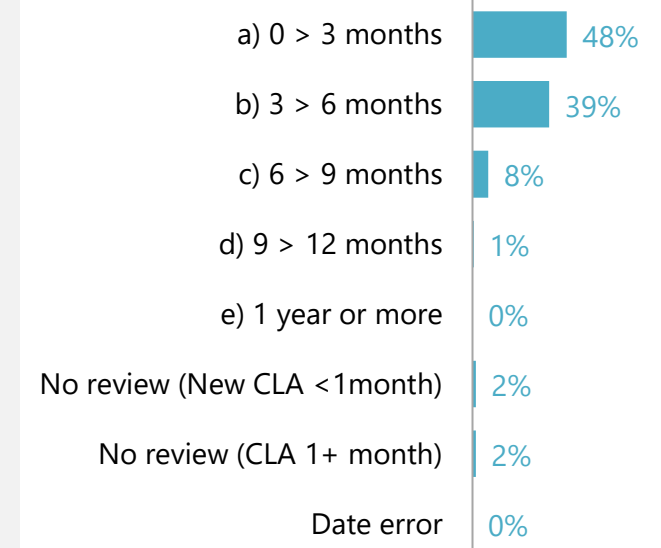


Other' includes not recorded, not stated, or neither M/F

Comparing legal status of open CLA (snapshot)

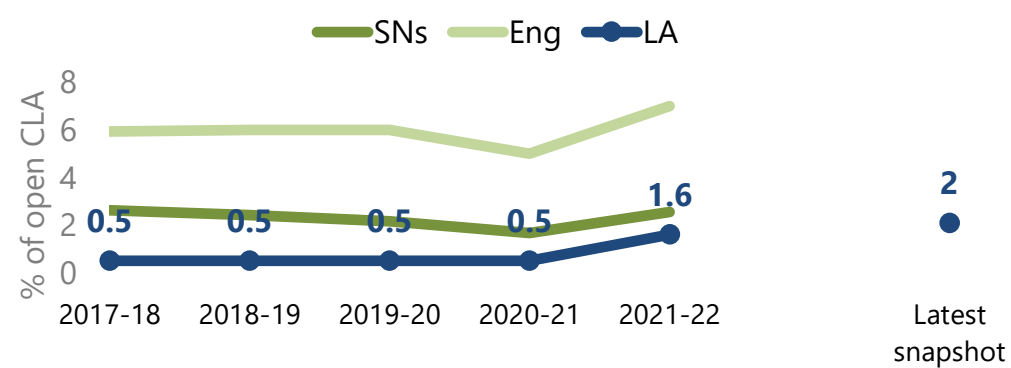


Time since latest review



13 open unaccompanied asylum seeking children (UASC)

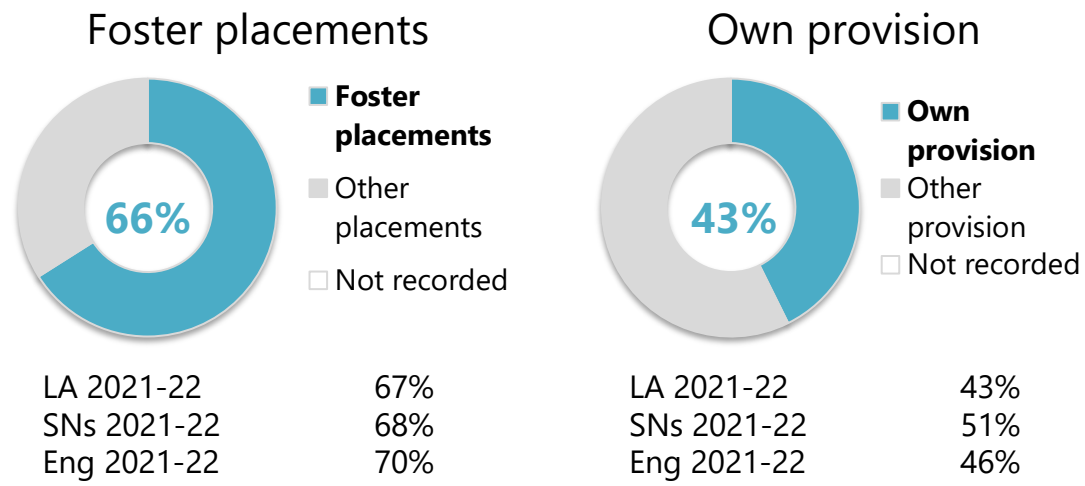
UASC as a percentage of CLA (snapshot)



Children Looked After (CLA) placements

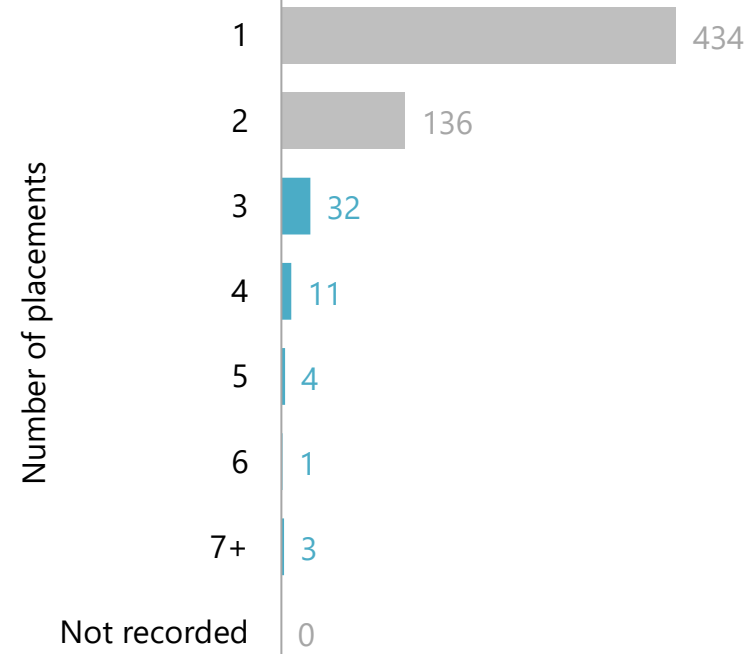
Snapshot 30/04/2023

CLA placements by type and provision



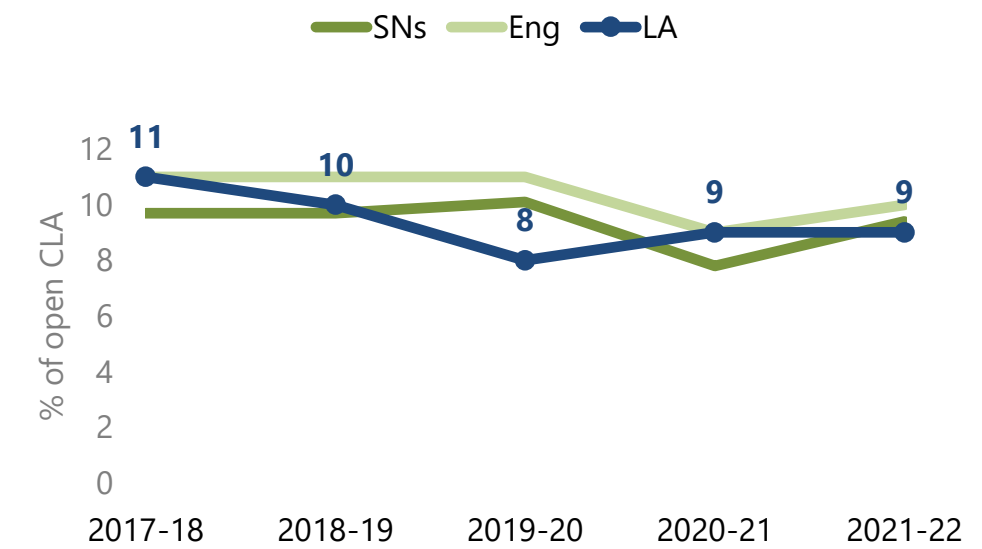
Placement type (open CLA)	Own LA	Private	Other	Total
Foster placement	257	129	24	410
Placed for adoption	2	0	4	6
Placed with parents	0	0	81	81
Independent living	0	1	1	2
Residential employment	0	0	0	0
Residential accommodation	2	23	0	25
Secure Children's Homes	0	0	1	1
Children's Homes	0	72	7	79
Residential Care Home	0	3	0	3
NHS/Health Trust	0	0	0	0
Family Centre	0	4	0	4
Young Offender Institution	0	0	1	1
Residential school	0	0	1	1
Other placements	4	3	1	8
Temporary placement	0	0	0	0
<b>Total placements</b>	<b>265</b>	<b>235</b>	<b>121</b>	<b>621</b>

Number of placements in the last 12 months



May include "status" changes as well as placements

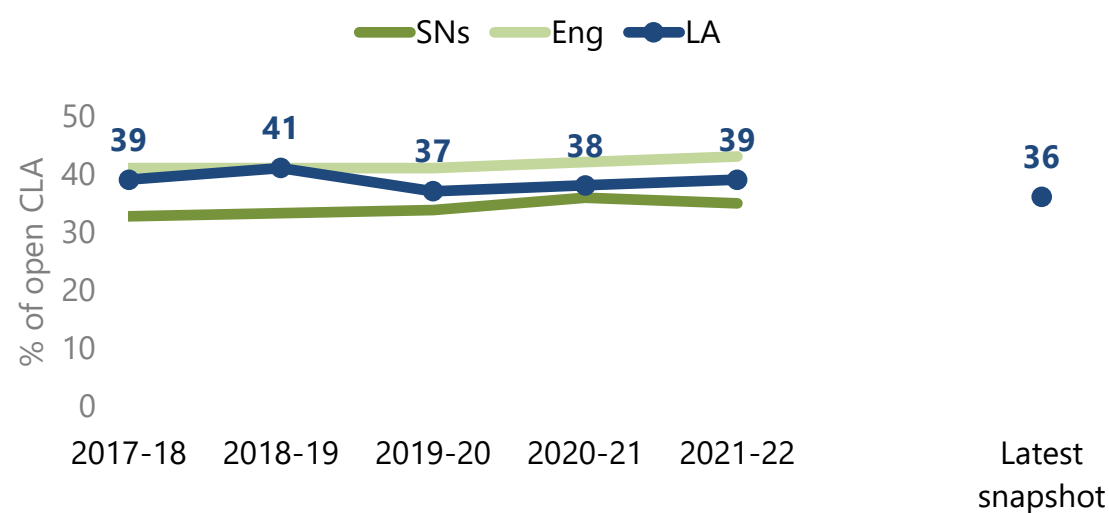
Comparing short term placement stability



Due to limited data in the Annex A dataset, ChAT does not present short-term stability alongside published statistics

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CLA placements out of borough



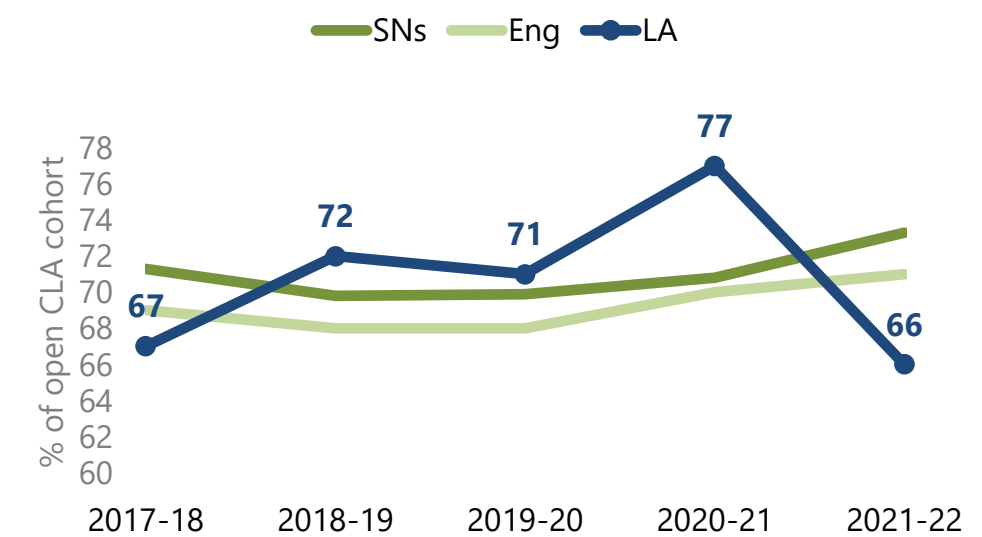
Duration of placements

Duration of latest placement for each current CLA aged under 16 who have been looked after for 2½ years or more



May include "status" changes as well as placements

Comparing long term placement stability



Due to limited data in the Annex A dataset, ChAT does not present long-term stability alongside published statistics



Children Looked After (CLA) health and missing/absent from placement

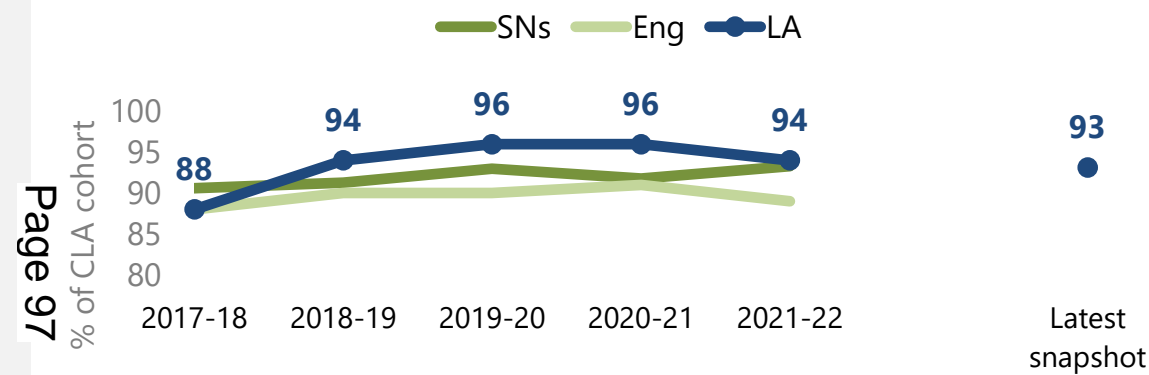
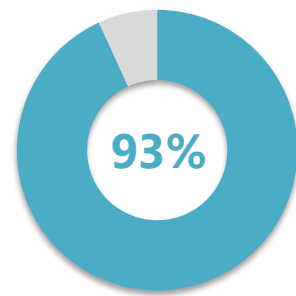
Snapshot 30/04/2023

Health

468 current open CLA looked after for at least 12 months

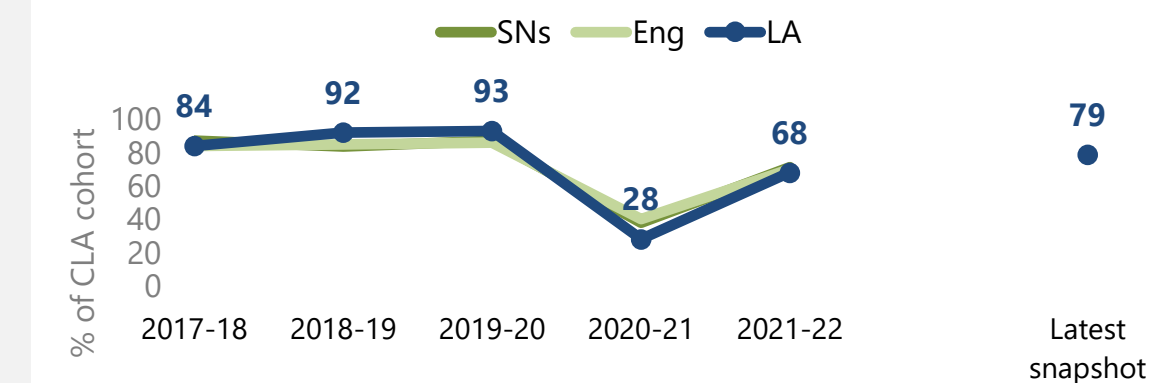
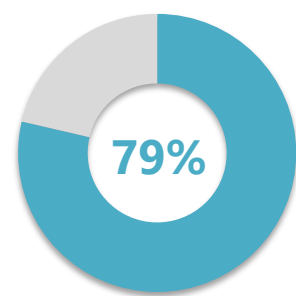
Health assessments

Current open CLA who have been looked after for at least 12 months with an up to date health assessment (in the last 6 months for CLA aged under 5, and in the last 12 months for CLA aged 5-plus)



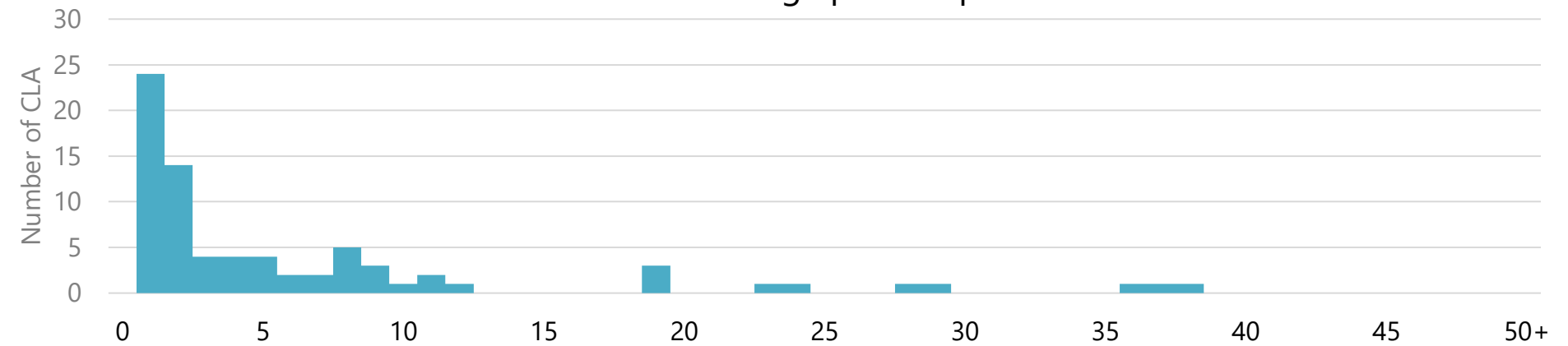
Dental checks

Current open CLA who have been looked after for at least 12 months who have had a dental check in the last 12 months.



Missing from placement

Number of missing episodes per CLA

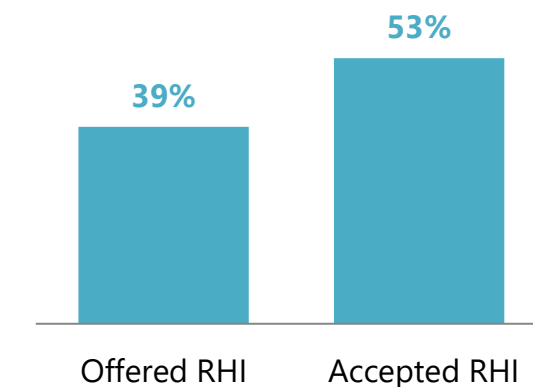


76 of 699 looked after children had a missing incident in the last 12 months

	Latest data	LA 21-22	SNs 21-22	Eng 21-22
Number of all CLA with a missing incident	76 of 699	73		
Percentage of all CLA with a missing incident	11%	9%	11%	11%
Total number of missing incidents for all CLA	509	297		
Average number of incidents per CLA who went missing	6.7	4.1	6.8	6.3

Missing incidents - return home interviews

	Latest data	
Missing children offered return interview	30 of 76	39%
Missing children not offered return interview	19 of 76	25%
Missing children return interview offer not recorded	27 of 76	36%
Missing children where return interview was n/a	0 of 76	0%



	Latest data	
Missing children accepted return interview	16 of 30	53%
Missing children not accepted return interview	14 of 30	47%
Missing children return interview acceptance not recorded	0 of 30	0%

Absent from placement

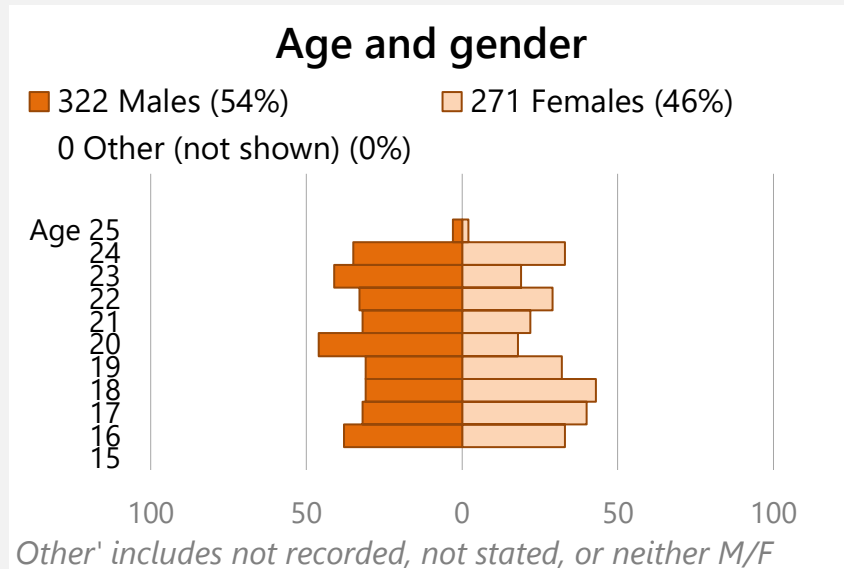
8 of 699 looked after children had an absent incident in the last 12 months

	Latest data	LA 21-22	SNs 21-22	Eng 21-22
Number of all CLA with an absent incident	8 of 699	c		
Percentage of all CLA with an absent incident	1%	c	3%	2%
Total number of absent incidents for all CLA	11	8		
Average number of incidents per CLA who were absent	1.4	1.6	4.3	3.5

Care leavers currently in receipt of leaving care services

Snapshot 30/04/2023

593 care leavers



### Ethnic background

White	88%
Mixed	3%
Asian or Asian British	2%
Black or black British	1%
Other ethnic group	6%
Not stated	0%
Not recorded	0%

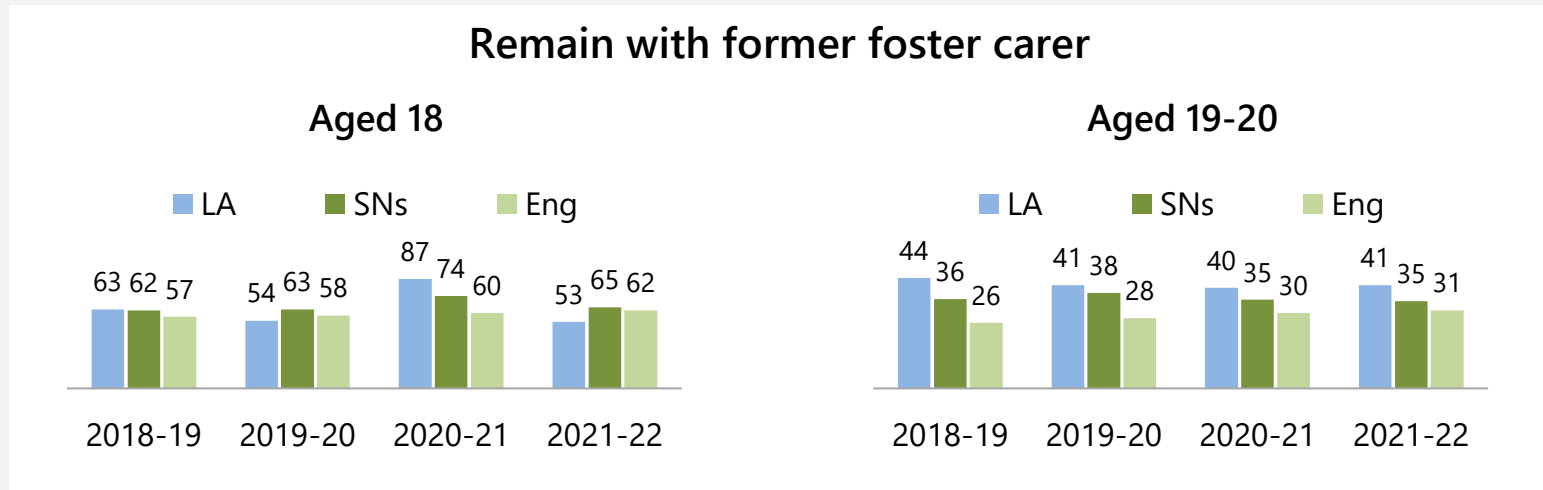
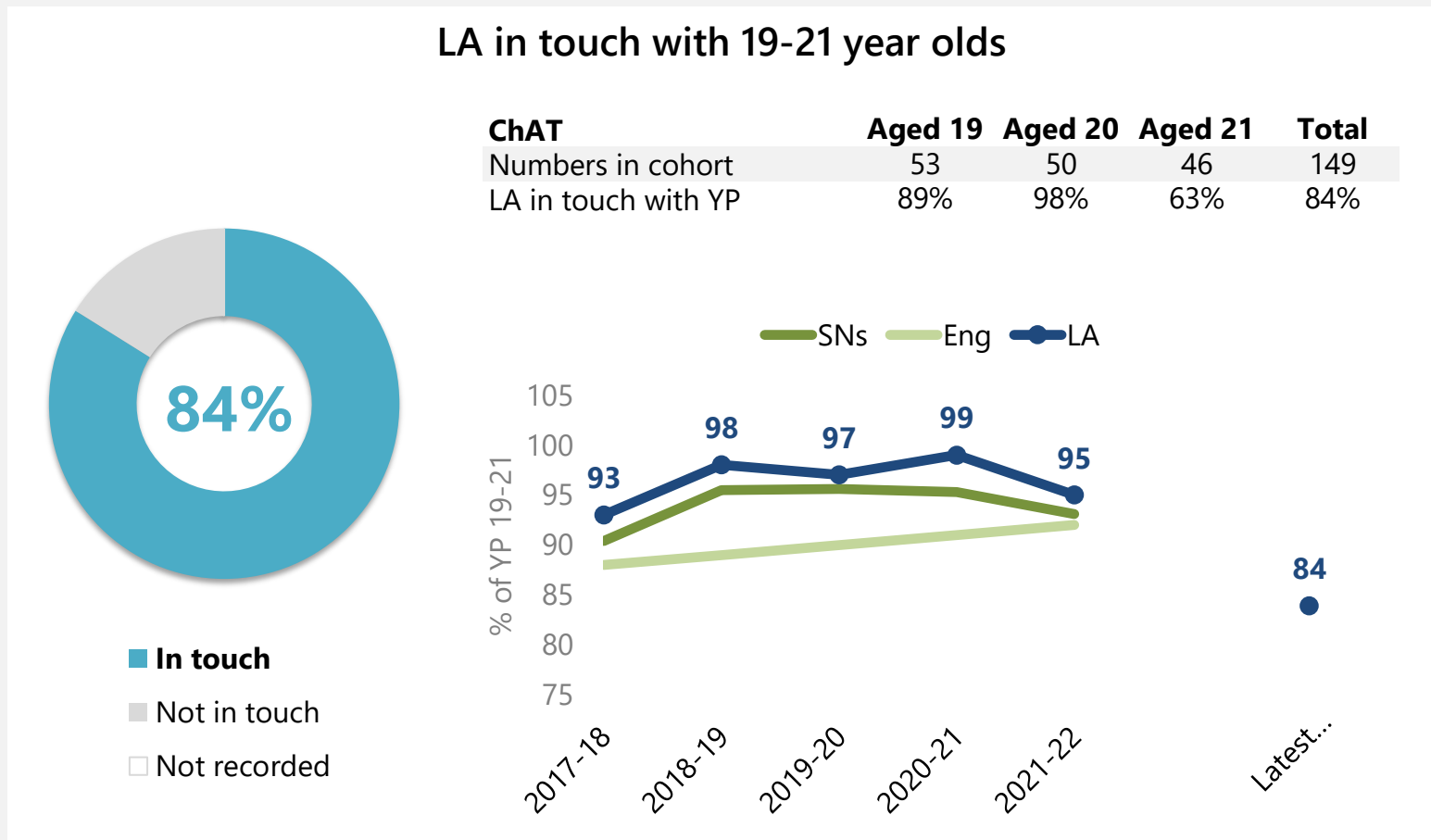
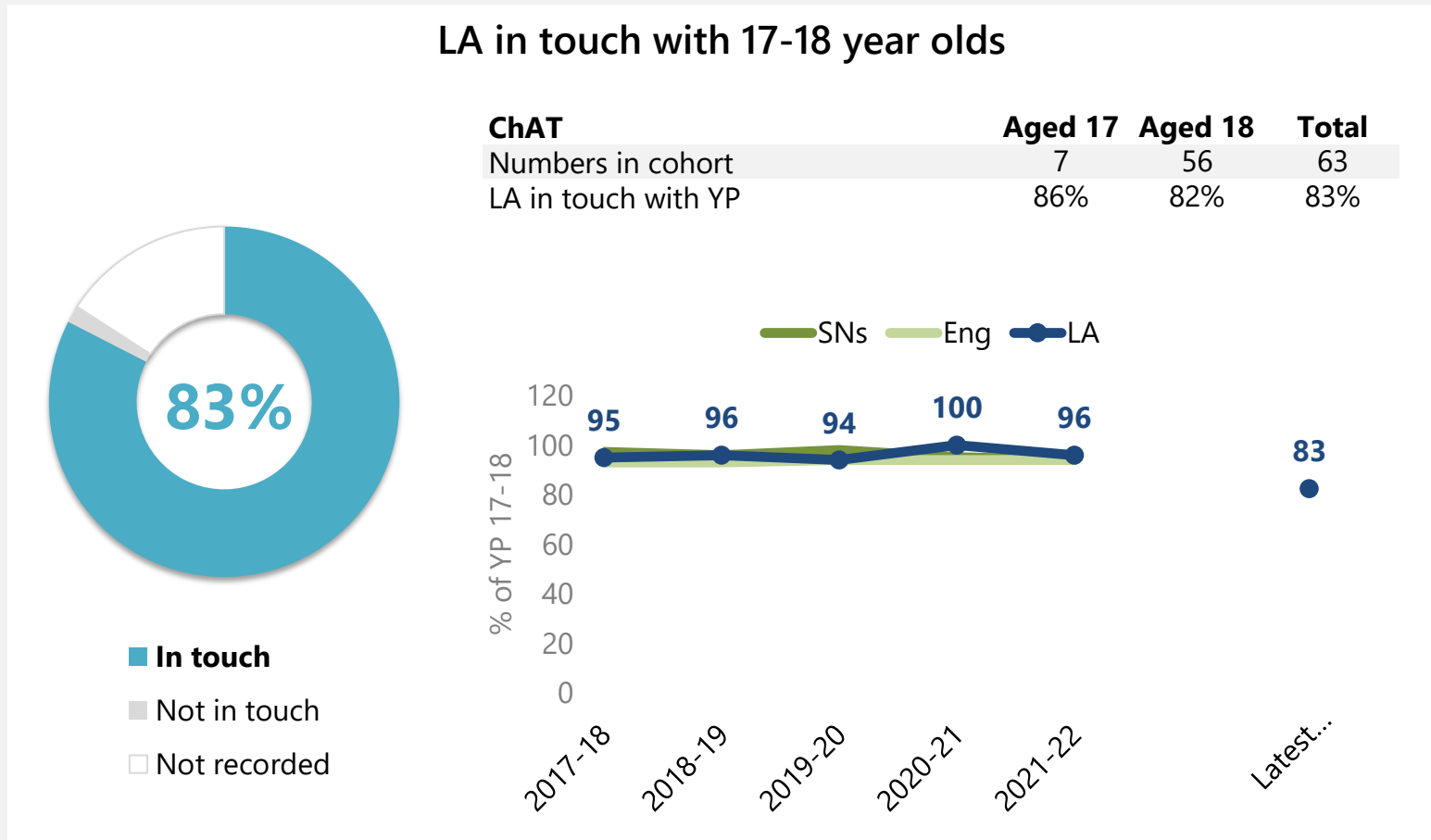
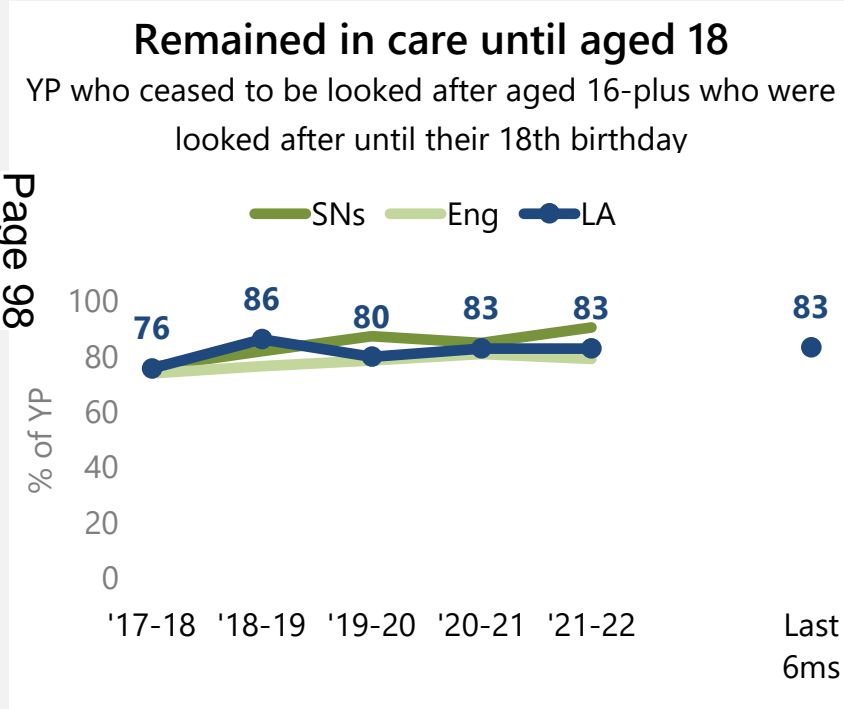
See page 22 for comparisons

105 (18%) care leavers with a disability

### Eligibility category

Relevant	8
Former relevant	368
Qualifying	113
Eligible	101
Other	0
Not recorded	3

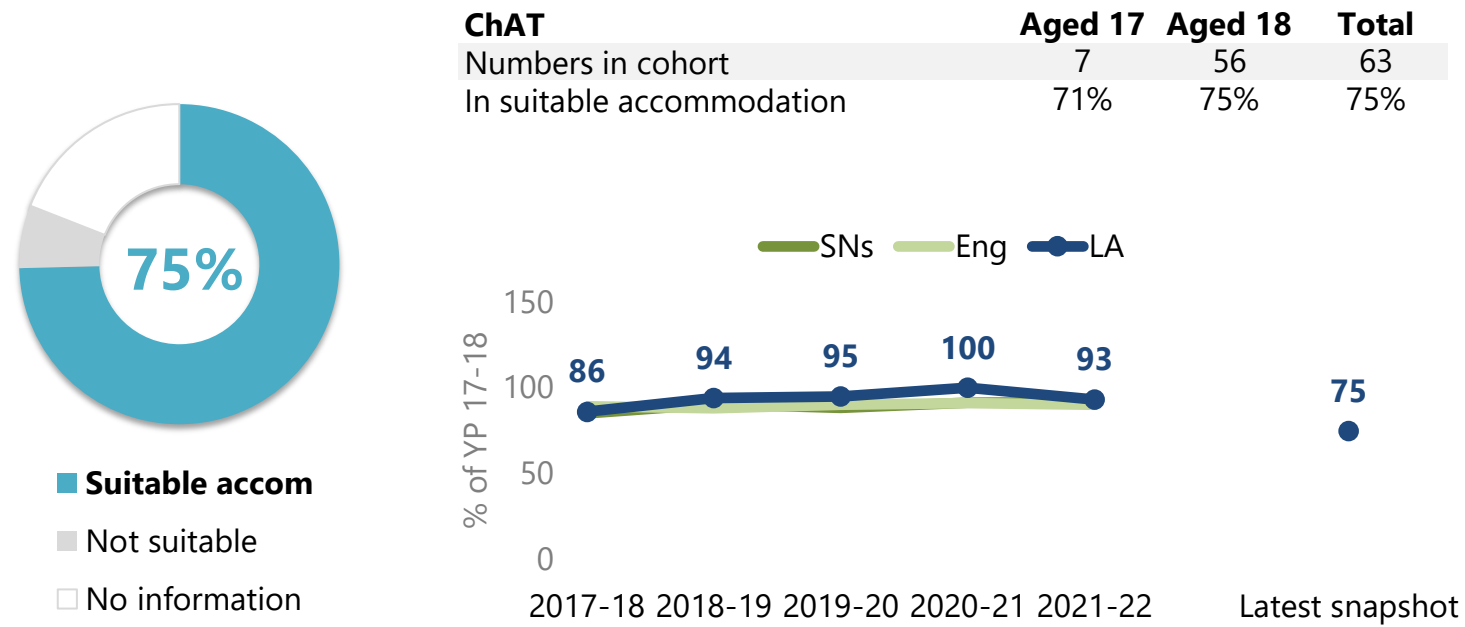
Relevant = YP aged 16-17 no longer looked after and eligible for leaving care services.  
Former relevant = YP aged 18-25 eligible for leaving care services.  
Qualifying = YP aged 18-25 in receipt of support but not eligible for full leaving care services.  
Eligible = YP aged 16-17 looked after and eligible for leaving care services



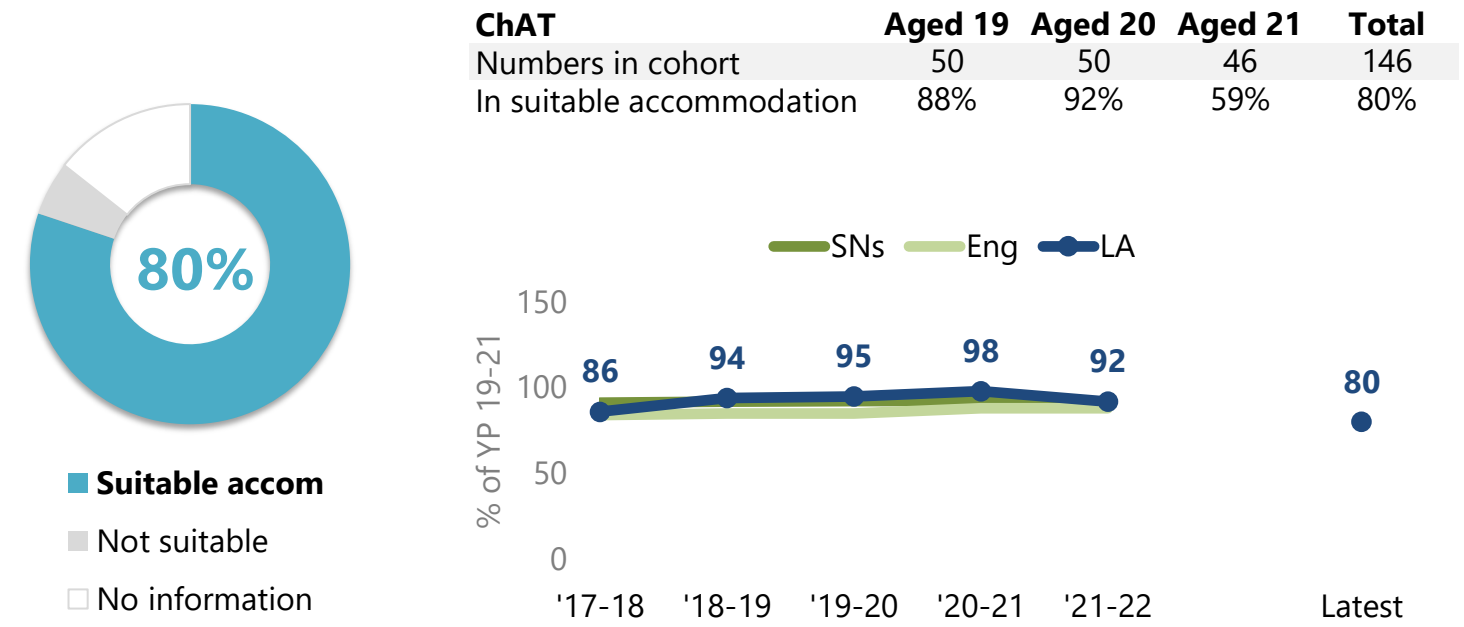
Care leavers accommodation suitability and type

Snapshot 30/04/2023

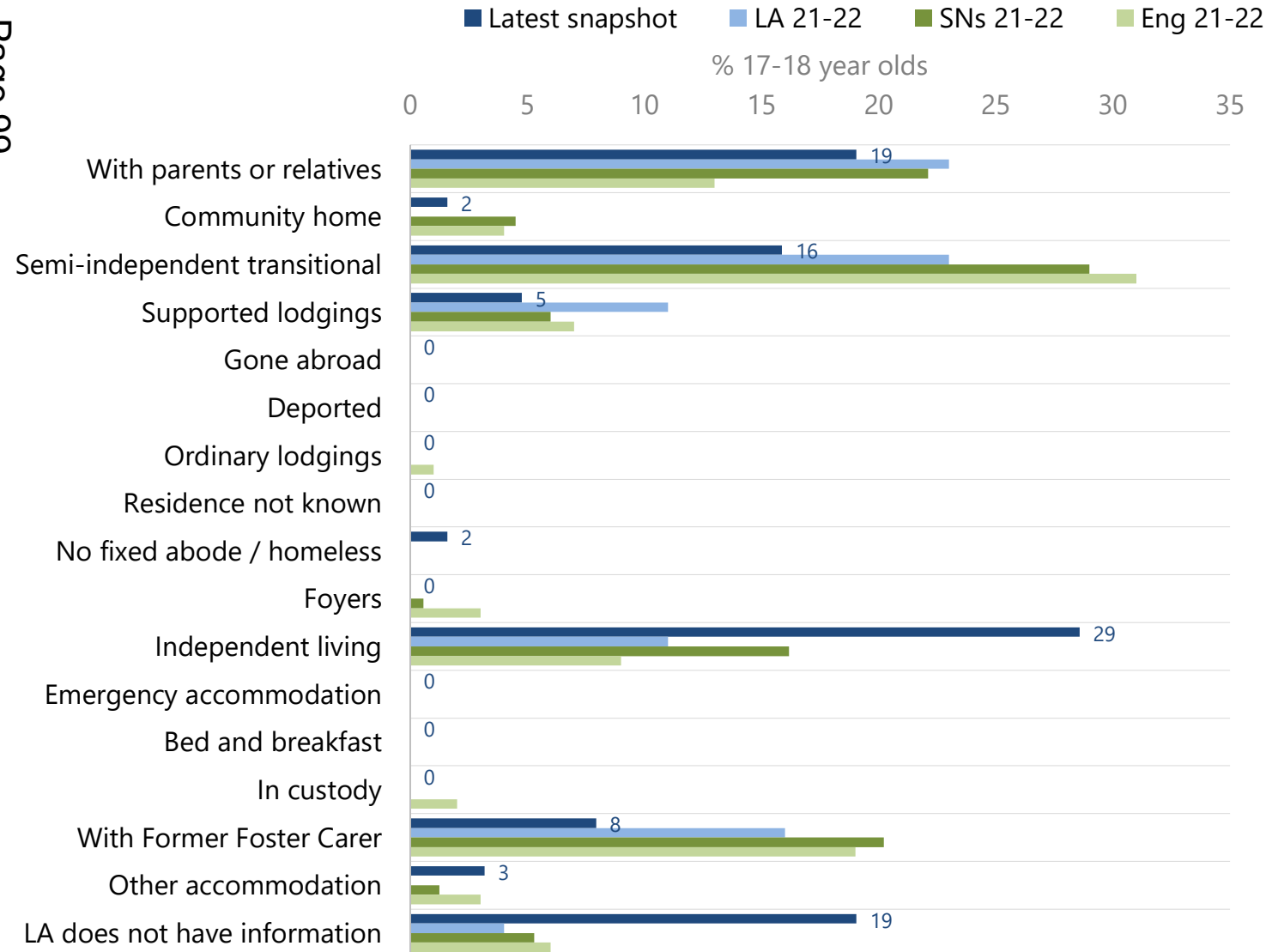
Accommodation suitability of 17-18 year olds



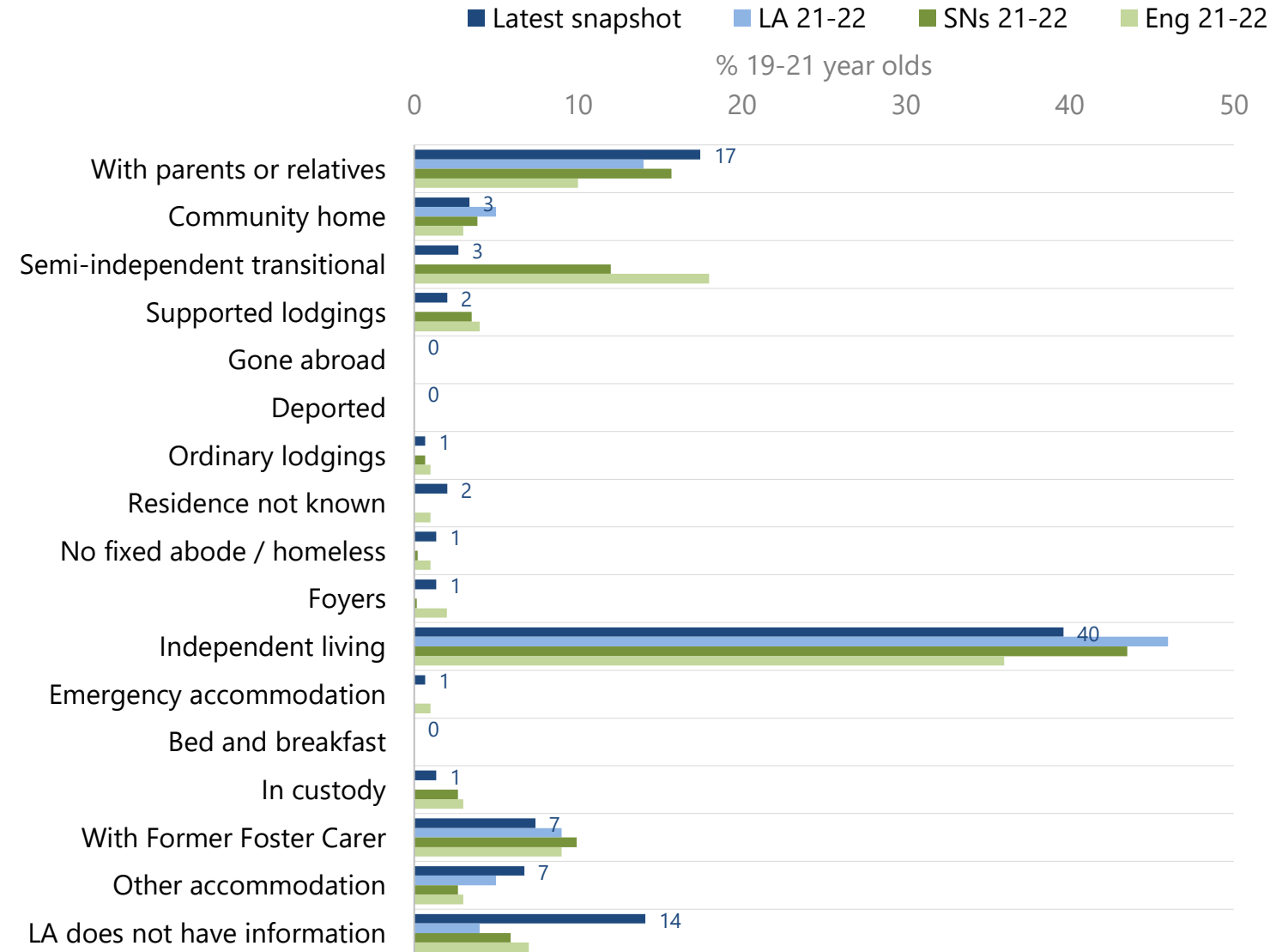
Accommodation suitability of 19-21 year olds



Accommodation types of 17-18 year olds



Accommodation types of 19-21 year olds

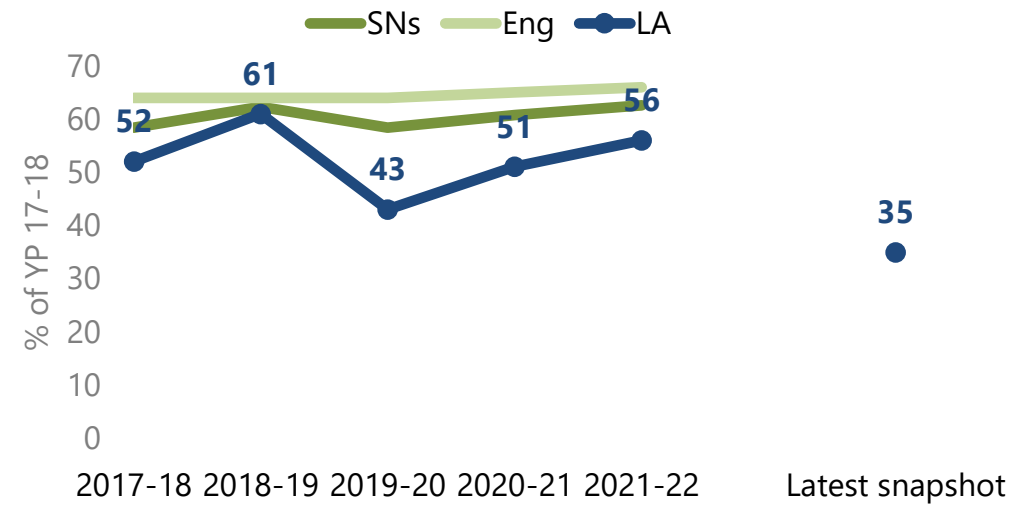
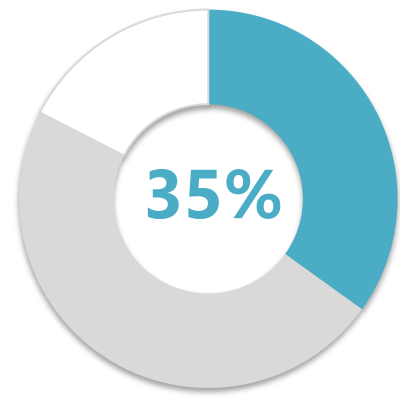


Care leavers activity (Education, Employment, or Training)

Snapshot 30/04/2023

Education, Employment, or Training (EET) of 17-18 year olds

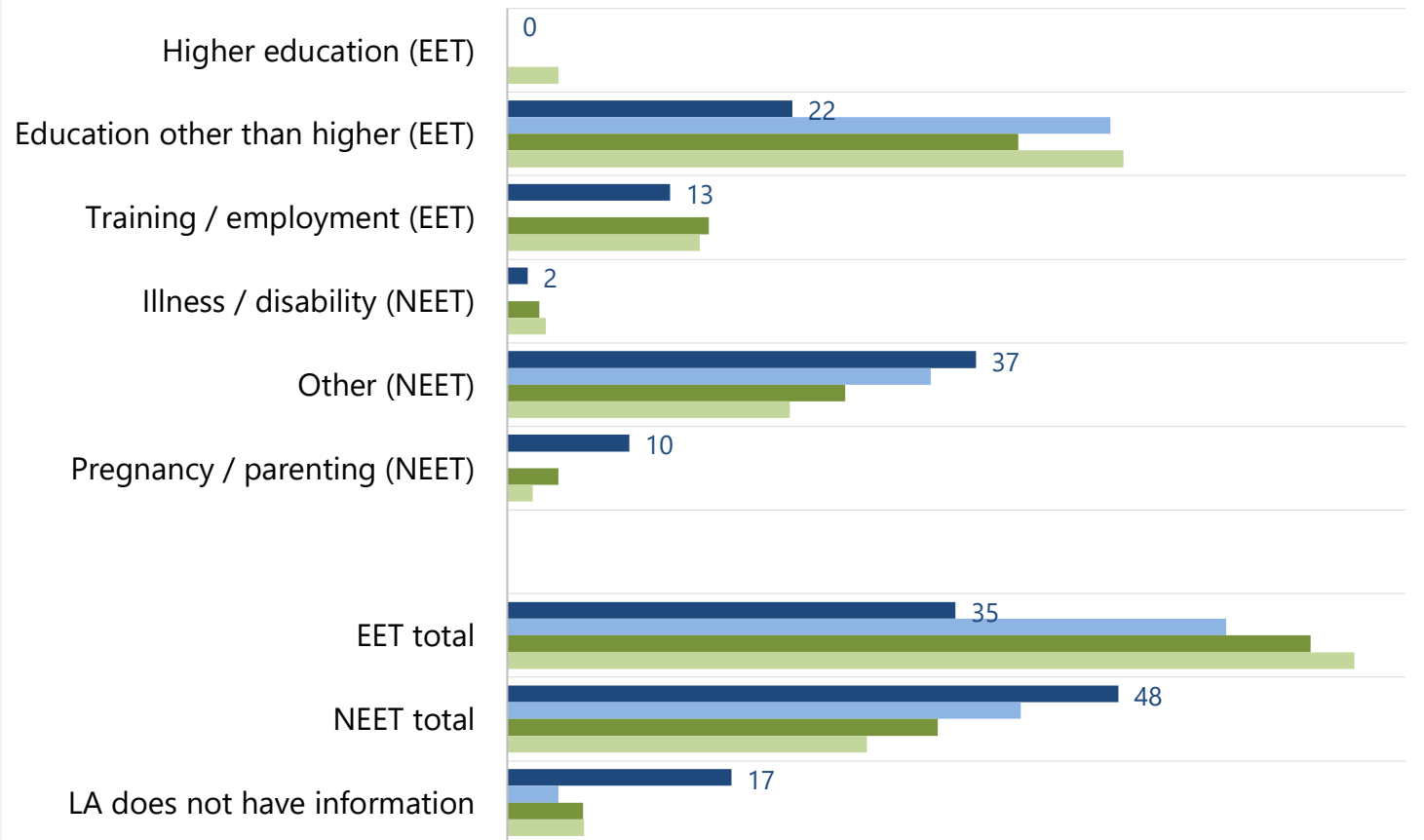
ChAT	Aged 17	Aged 18	Total
Numbers in cohort	7	56	63
In EET	57%	32%	35%



■ YP in EET ■ NEET □ No info

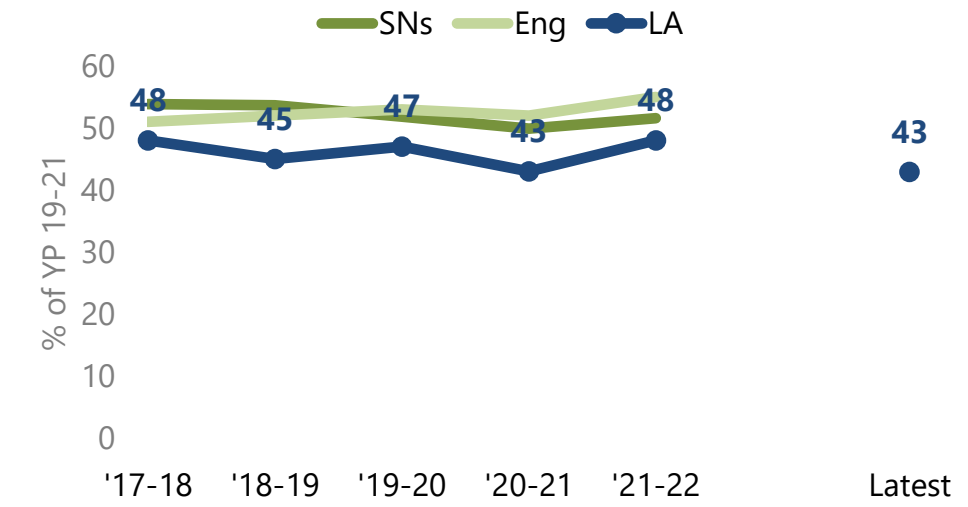
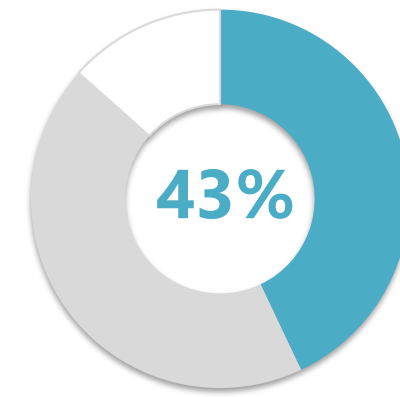
Activity types of 17-18 year olds

■ Latest snapshot ■ LA 21-22 ■ SNs 21-22 ■ Eng 21-22  
% 17-18 year olds



Education, Employment, or Training (EET) of 19-21 year olds

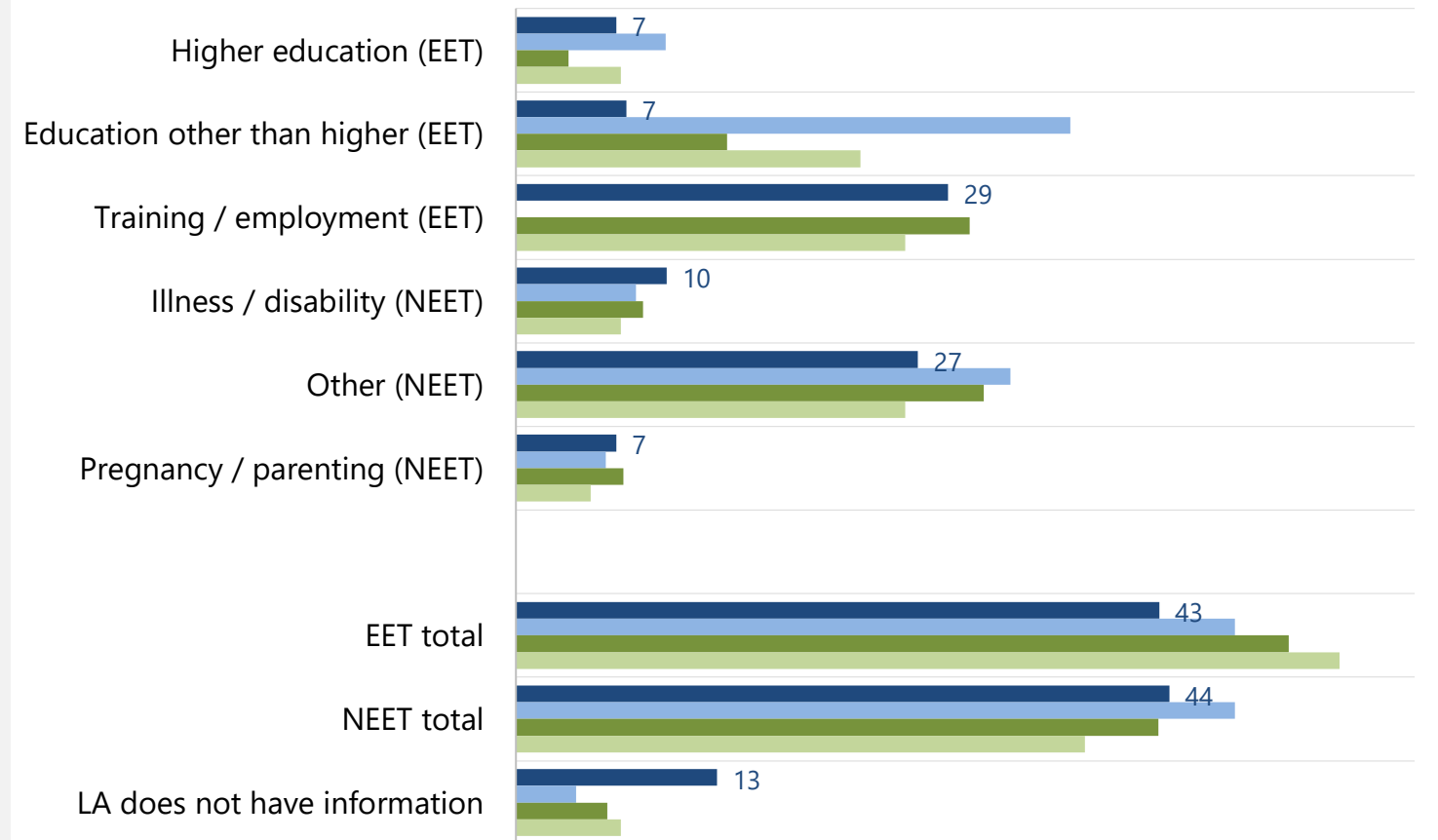
ChAT	Aged 19	Aged 20	Aged 21	Total
Numbers in cohort	53	50	46	149
In EET	43%	48%	37%	43%



■ YP in EET ■ NEET □ No info

Activity types of 19-21 year olds

■ Latest snapshot ■ LA 21-22 ■ SNs 21-22 ■ Eng 21-22  
% 19-21 year olds



Children adopted, waiting to be adopted, or had an adoption decision reversed in the last 12 month from 01/05/2022 to 30/04/2023

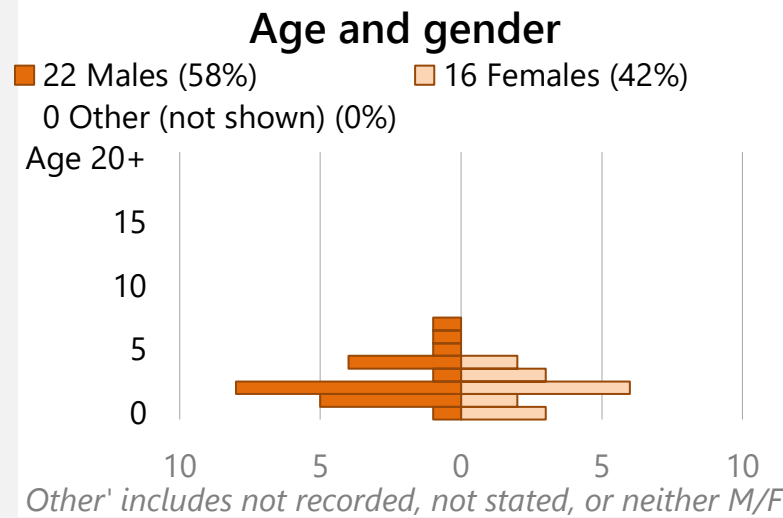
### 38 children

- 6 Child/ren adopted last 12 months
- 32 Child/ren waiting to be adopted
- (24 Child/ren waiting with placement order)
- 0 Child/ren with decision reversed

#### Ethnic background

White	97%
Mixed	3%
Asian or Asian British	0%
Black or black British	0%
Other ethnic group	0%
Not stated	0%
Not recorded	0%

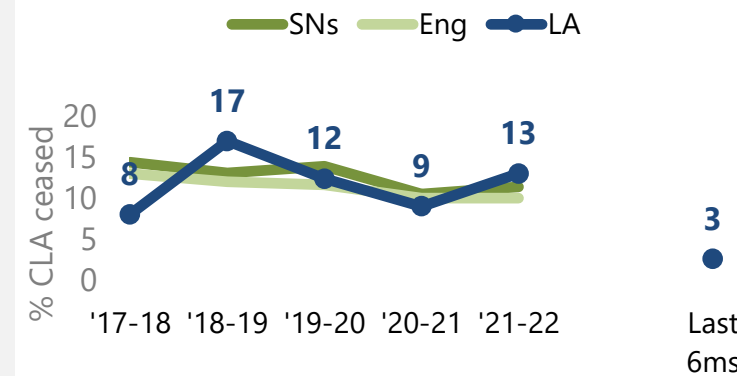
See page 22 for comparisons



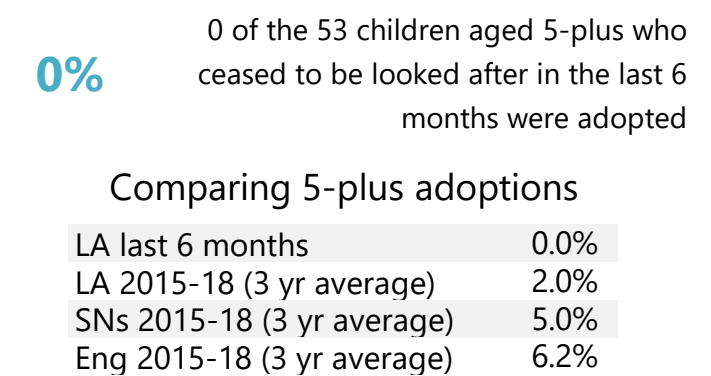
0 children (0%) with a disability

Of the 78 children who ceased to be looked after in the last 6 months, 2 was/were adopted (3%)

#### Children ceased who were adopted

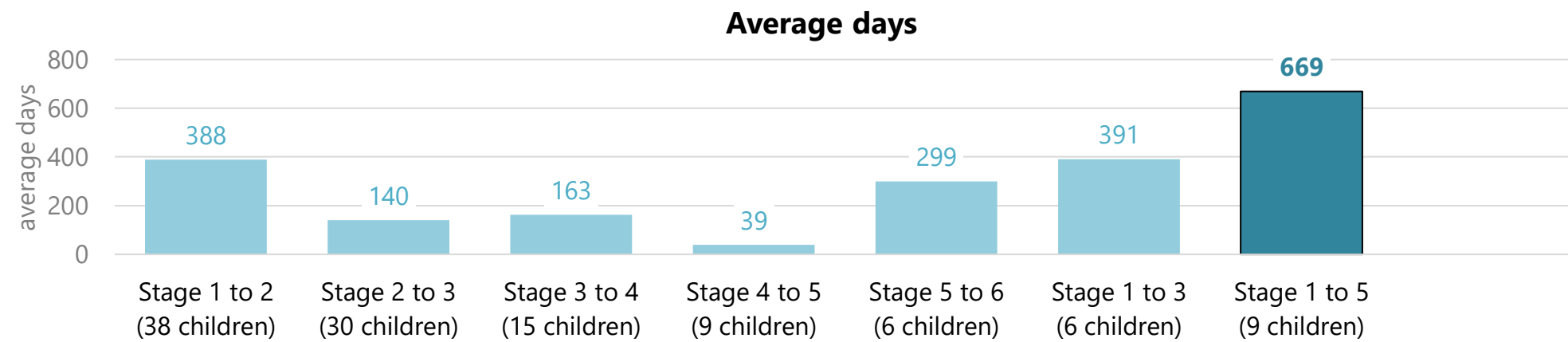


#### Children aged 5-plus who were adopted

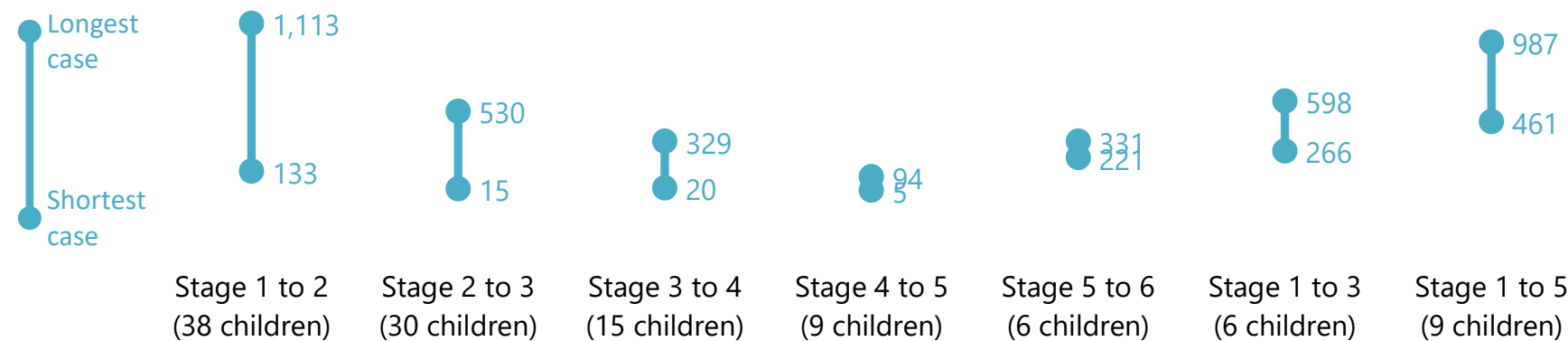


### Timeliness of each stage of the adoption process

Average duration of each stage (number of days)



Range in days between shortest and longest cases at each stage

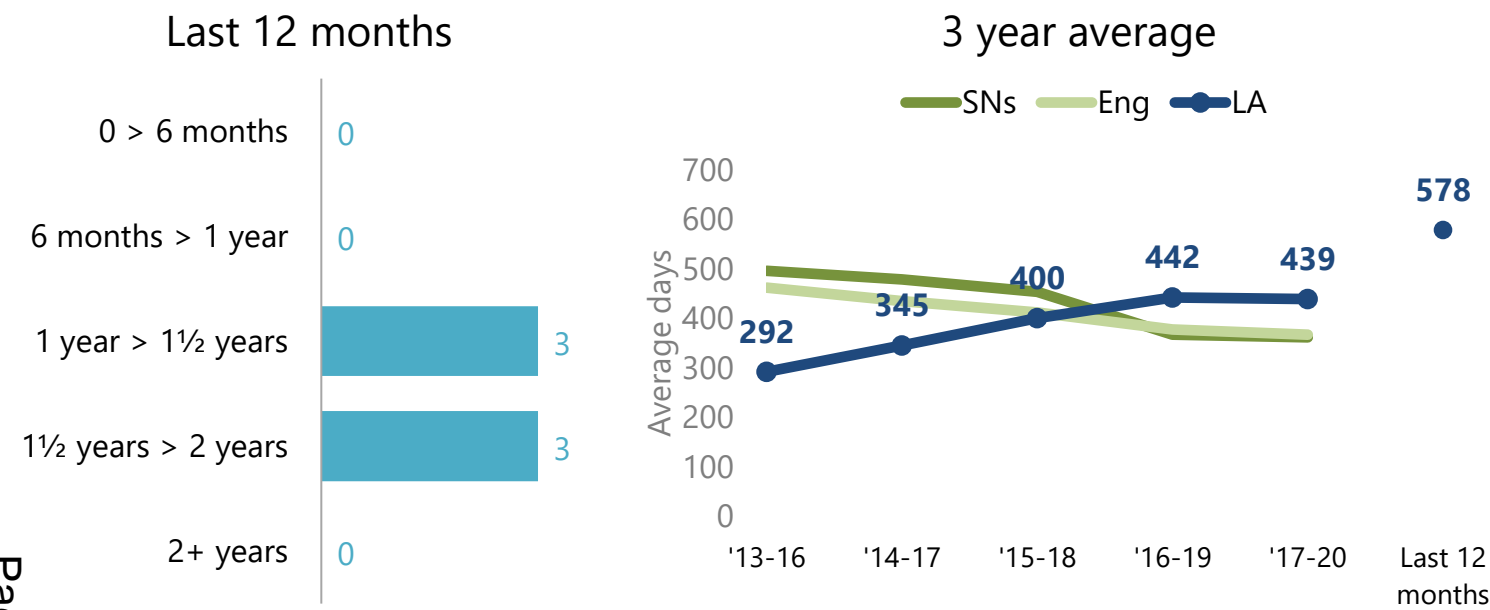


Adoption benchmarking

from 01/05/2022  
to 30/04/2023

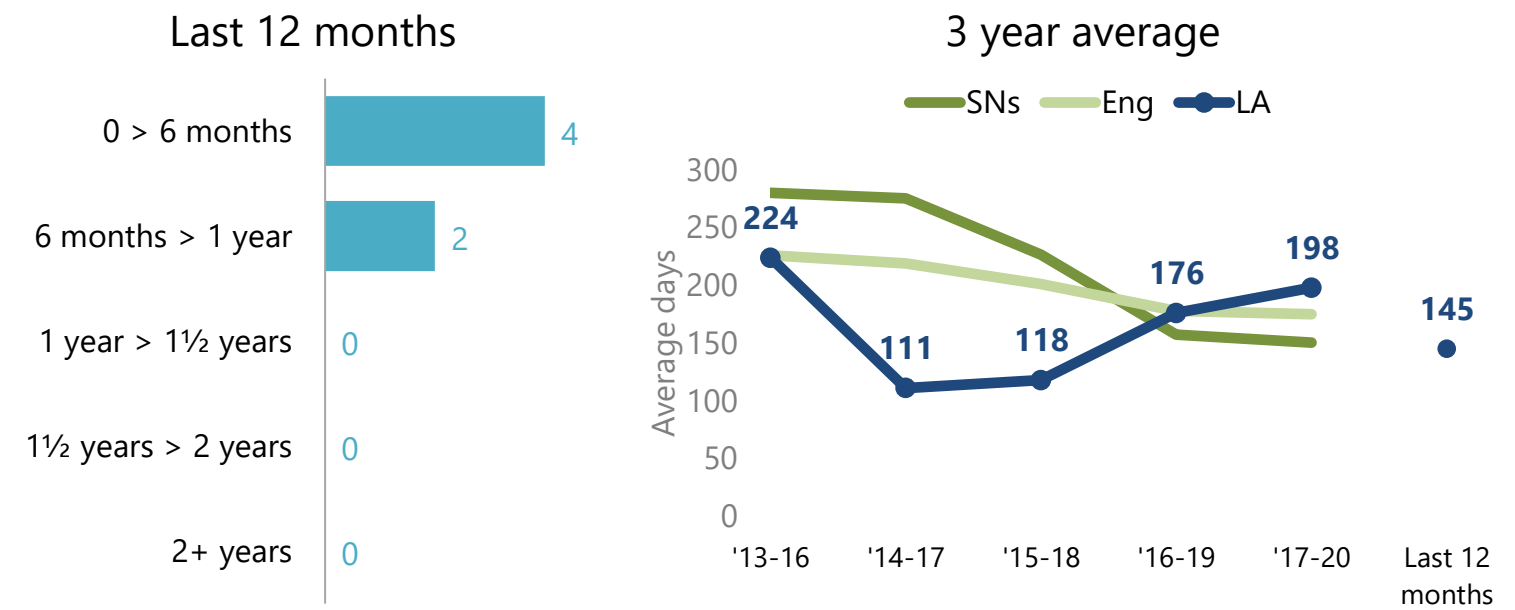
(A10) Time between entering care and placed with family for adopted children

**578 days** Average number of days between entering care and moving in with adoptive family for adopted children (adjusted for foster carer adoptions)  
6 children



(A2) Time between placement order and deciding on a match

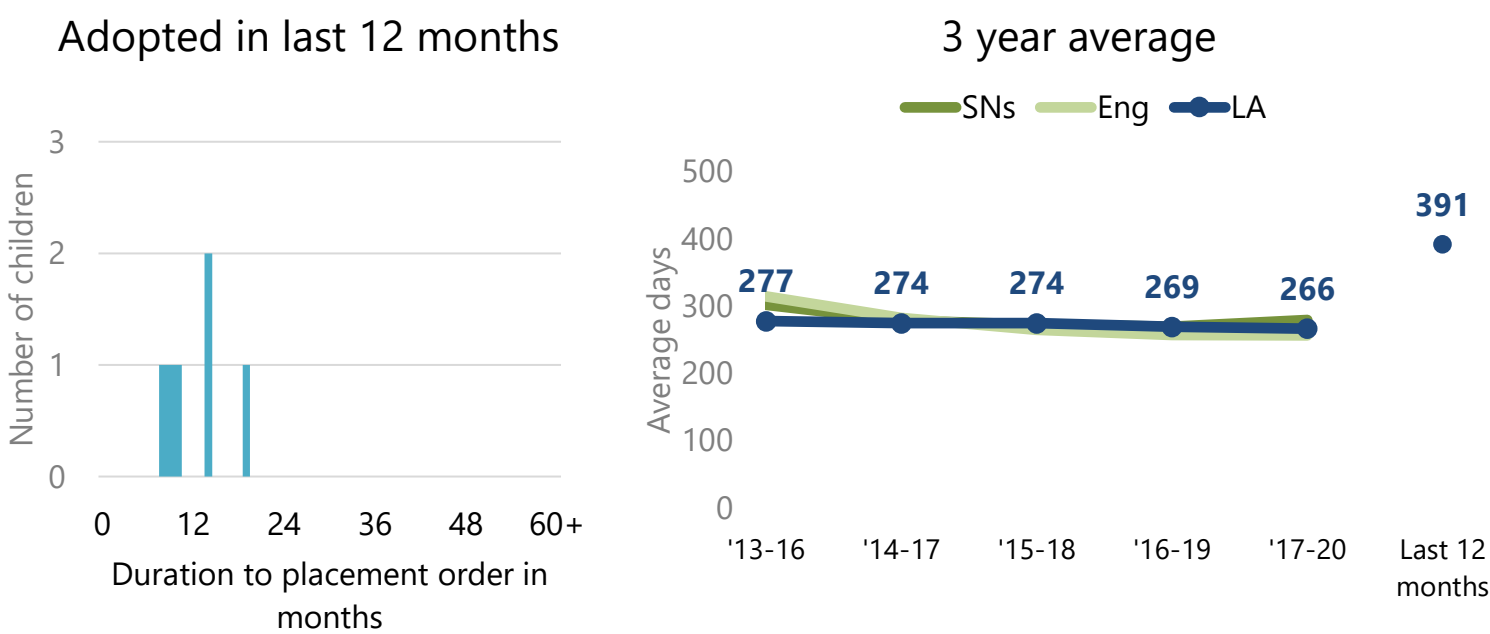
**145 days** The average number of days from the date of the placement order to the date the child was matched to prospective adopters  
6 children



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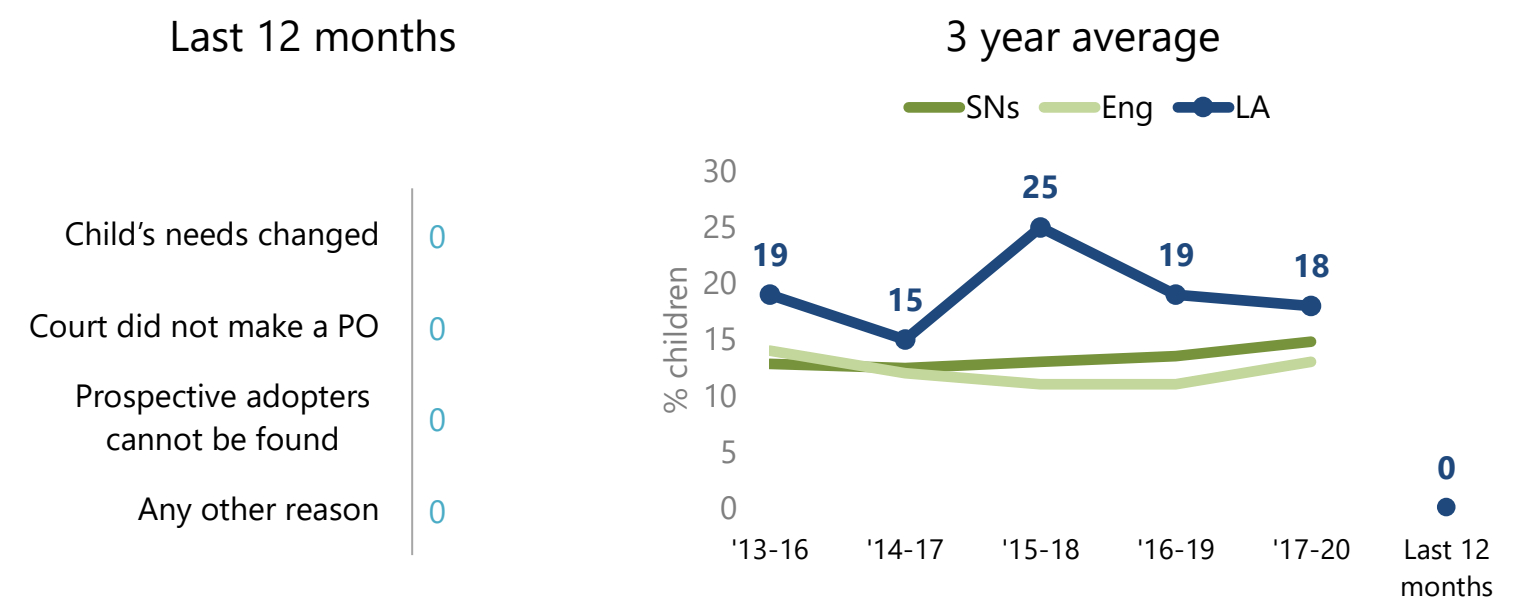
(A20) Time between entering care and placement order

**391 days** Average time between a child entering care and a local authority receiving court authority to place a child, for children who have been adopted (days)  
6 children



(A5) Permanence decision changed away from adoption

**0%** Children where there was a decision that the child should no longer be placed for adoption  
0/38 children



Prospective adopters in the last - 12 months NOTE from April 2018 RAA (AIM) data

from 01/05/2022  
to 30/04/2023

## 263 prospective adopters (138 families)

### Prospective adopter current status

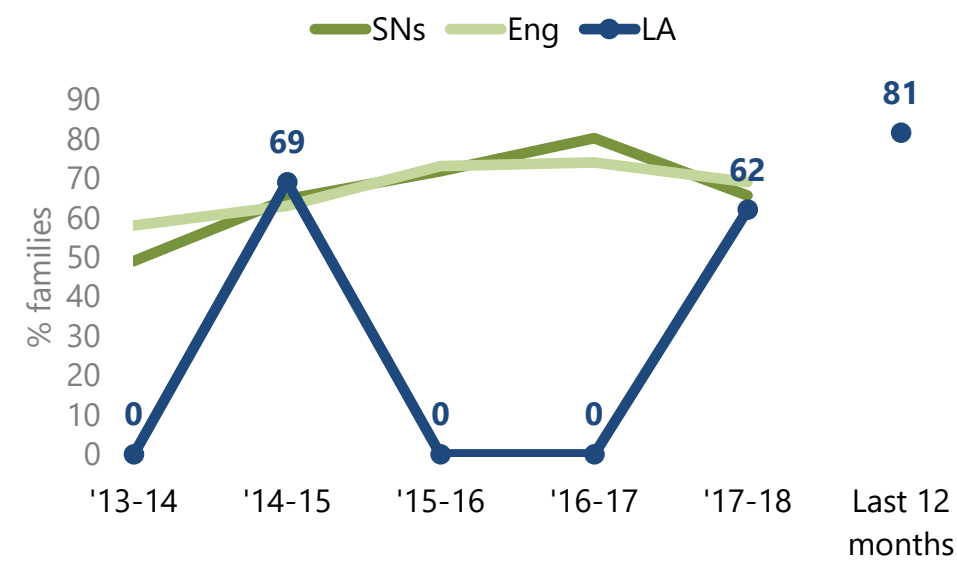
	Adults	Families
Child adopted	61	31
Child placed	41	21
Child matched	4	2
Application	117	63
Enquiry	0	0
Withdrawn	40	21

### Ethnic breakdown

	Adults %	Children %
White	97%	97%
Mixed	0%	3%
Asian or Asian British	1%	0%
Black or black British	0%	0%
Other ethnic group	0%	0%
Not stated	1%	0%
Not recorded	0%	0%

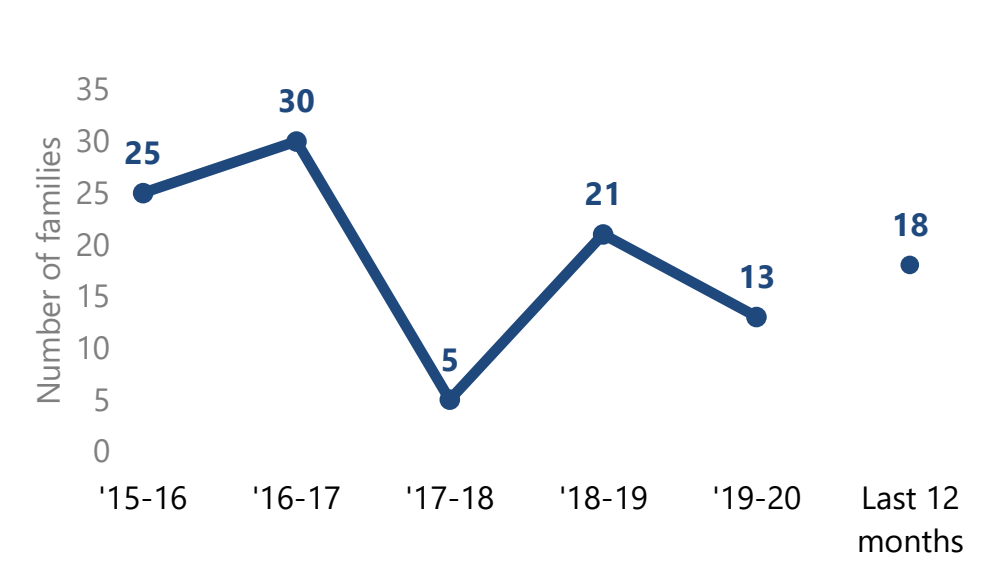
### Adoption Scorecard A12 - wait to be matched

Percentage of adoptive families matched to a child who waited more than three months between approval and matching (discontinued)



### Adoption Scorecard A15 - new ADM decisions

Number of new ADM decisions for children in the year (ADM = Agency Decision-Maker)

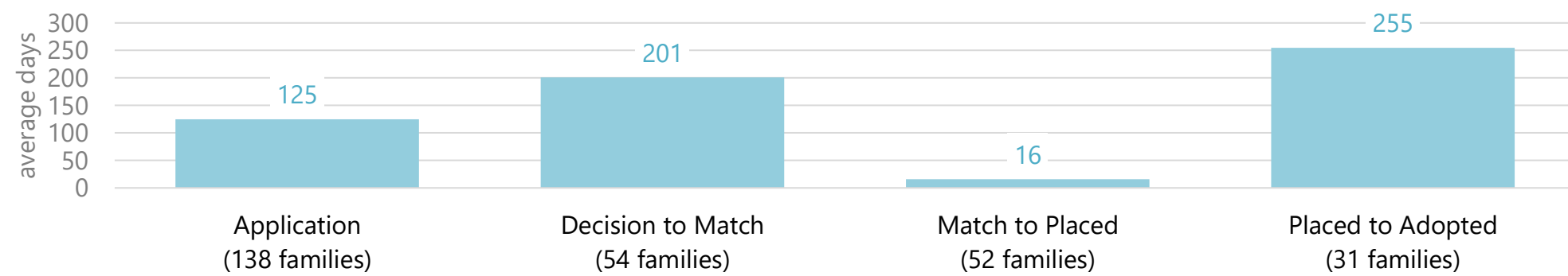


### New two-stage adoption process

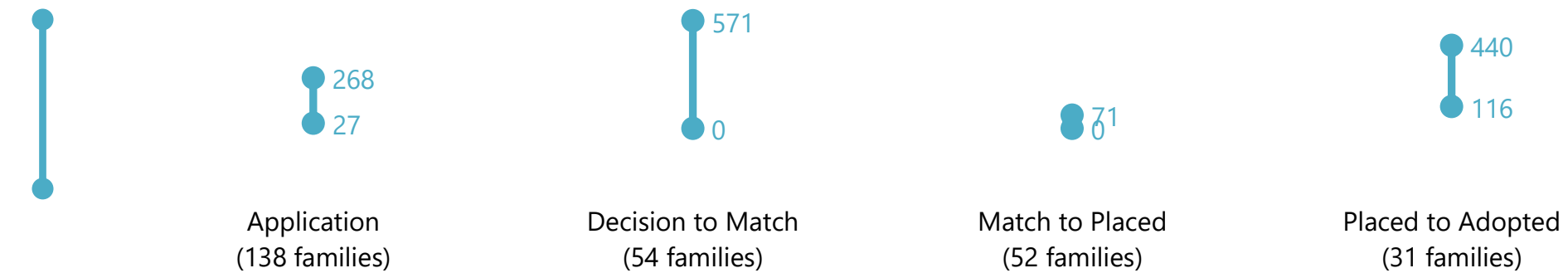
- Stage 1 start** Registration of interest
- Stage 1 end** Decision of suitability to adopt
- Stage 2 start** Adopter's wish to proceed
- Stage 2 end** Agency Decision-Maker (ADM decision)
- Matched** Family matched with child(ren)
- Placed** Child(ren) placed with family
- Adopted** Adoption order granted

### Duration of each stage of the adoption process

Average duration of each stage (number of days)

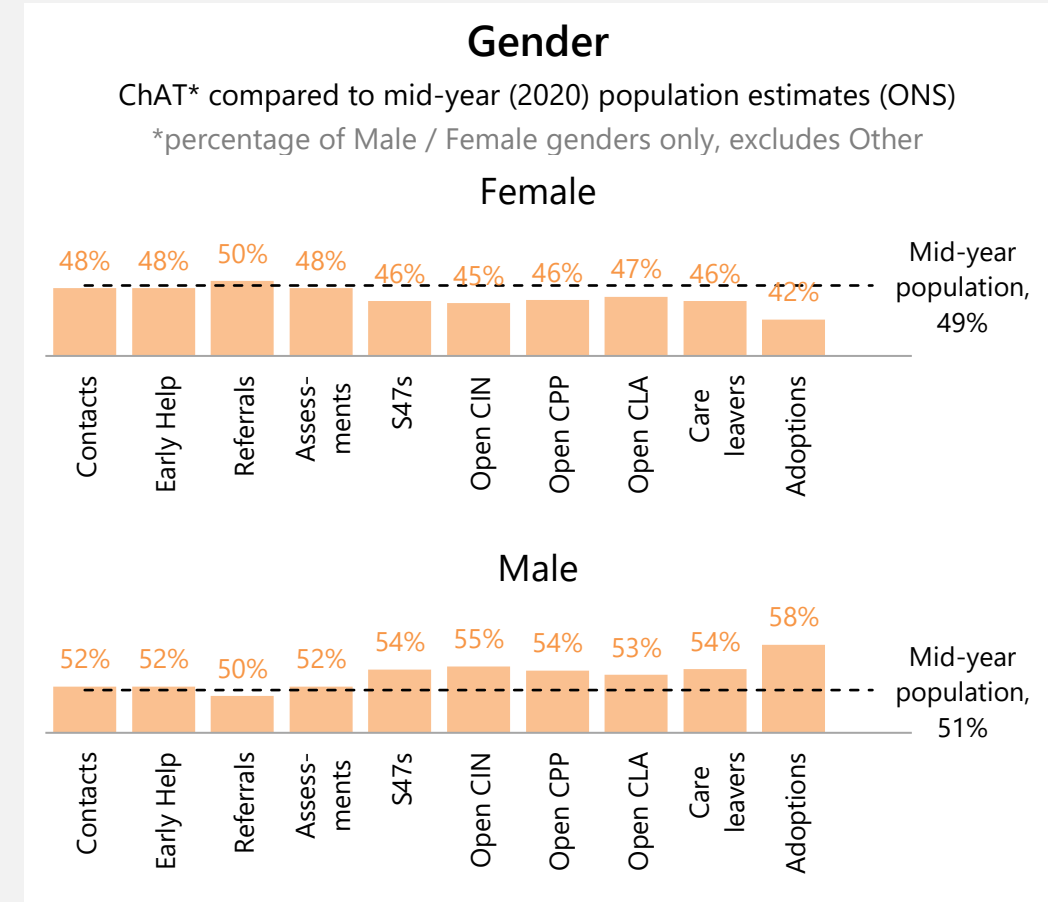
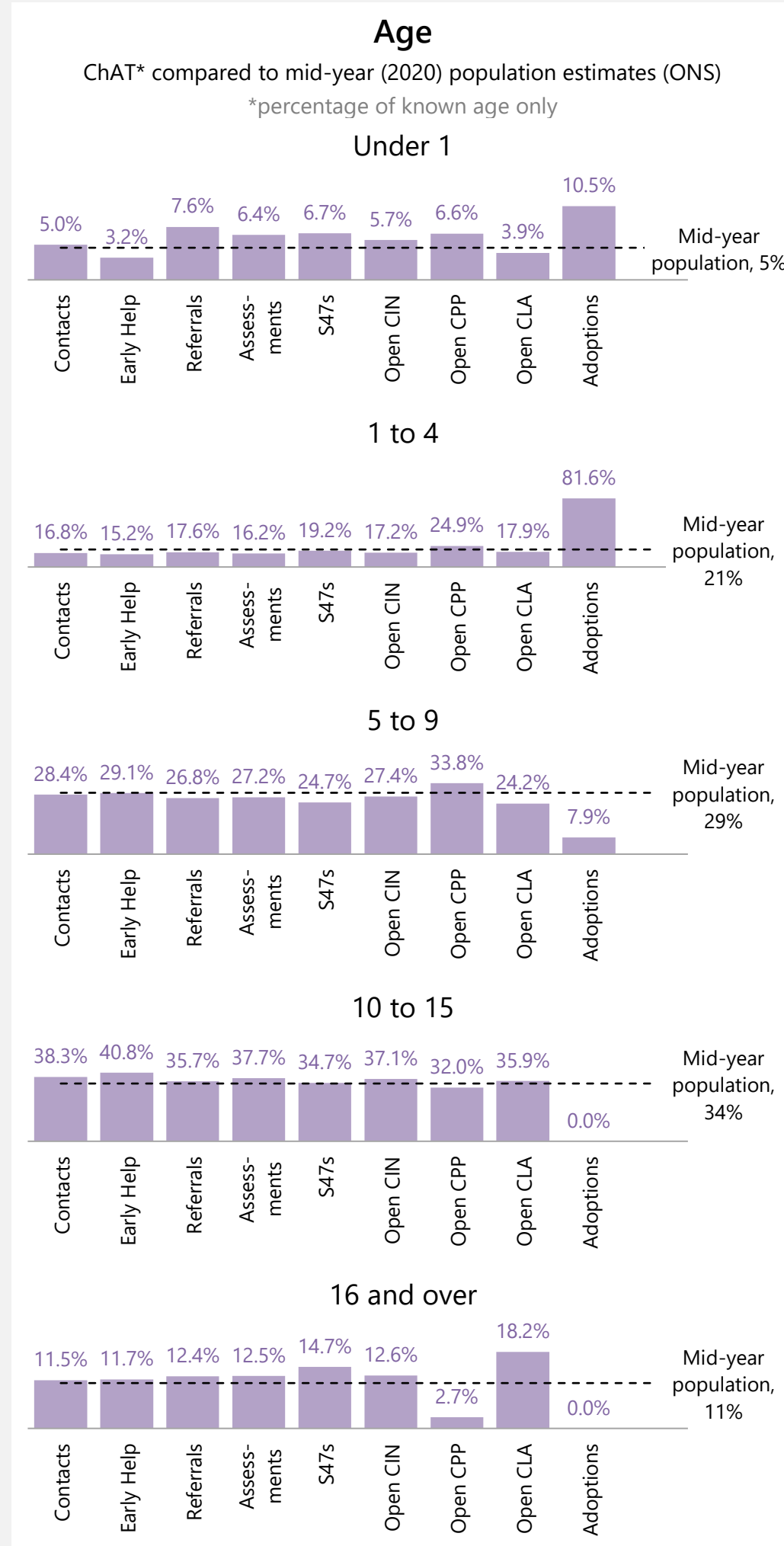
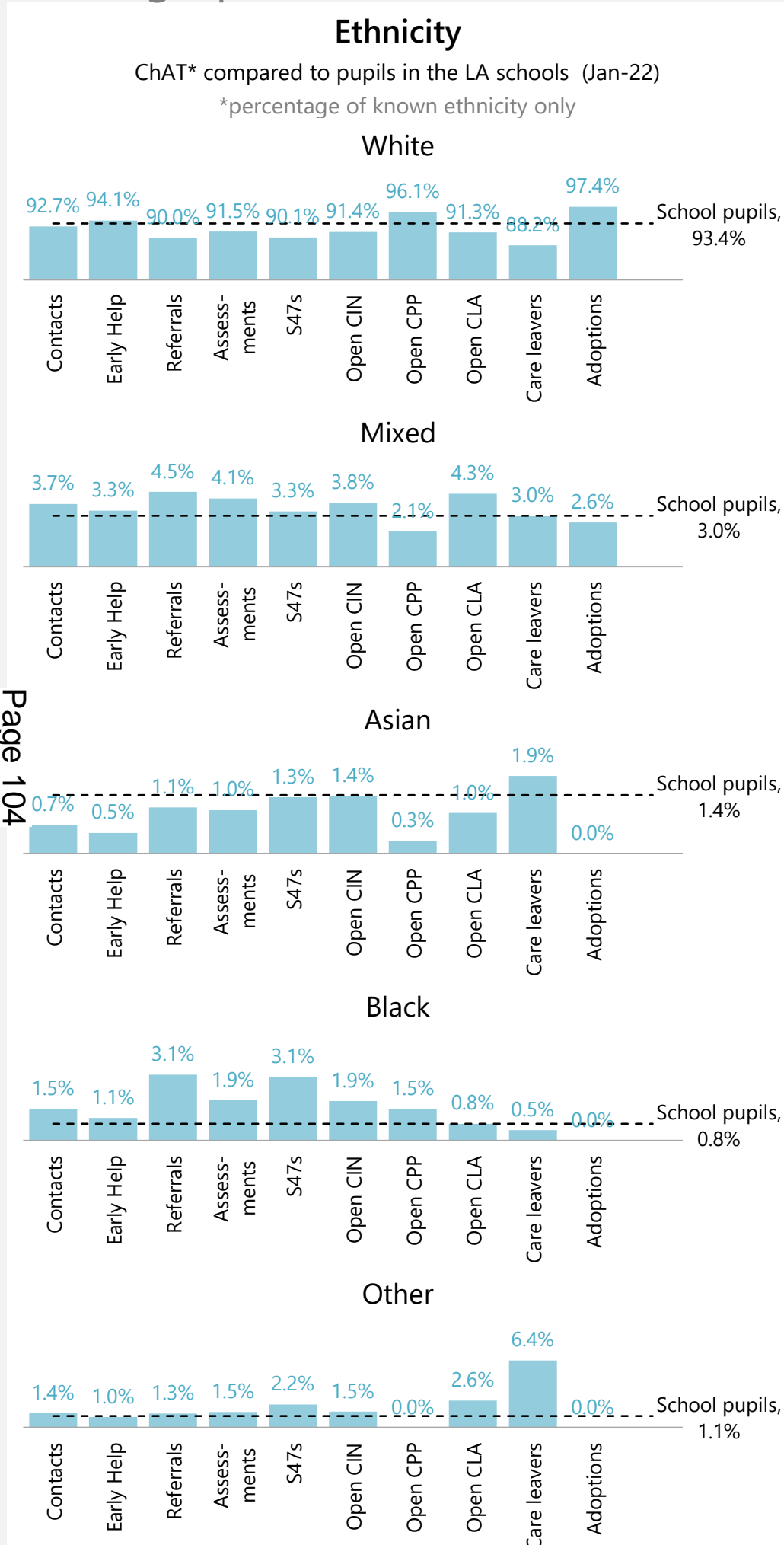


### Range in days between shortest and longest cases at each stage



Demographics of children across all areas of children's social care

Snapshot 30/04/2023



### Comparing CLA demographics

CLA figures compared to published population statistics

**Ethnicity** \* compared to school census

	LA Latest snapshot			LA 2022			Eng 2022		
	CLA	Pop	% difference	CLA	Pop	% difference	CLA	Pop	% difference
White	91	93	lower -2%	93	93	no dif 0%	73	73	higher 1%
Mixed	4	3	higher 43%	5	3	higher 65%	10	7	higher 48%
Asian	1	1	lower -31%	c	1		5	12	lower -58%
Black	1	1	no dif 0%	c	1		7	6	higher 19%
Other	3	1	higher 136%	2	1	higher 83%	4	2	higher 79%

**Age** \* Comparator is ONS mid-year population estimates

	LA Latest snapshot			LA 2020			LA 2020		
	CLA	Pop	% difference	CLA	Pop	% difference	CLA	Pop	% difference
Under 1	4	5	lower -16%	5	5	higher 9%	5	5	no dif 0%
1 to 4	18	21	lower -14%	18	21	lower -14%	14	22	lower -36%
5 to 9	24	29	lower -17%	25	29	lower -15%	18	29	lower -38%
10 to 15	36	34	higher 4%	37	34	higher 7%	39	34	higher 16%
16-plus	18	11	higher 68%	15	11	higher 39%	25	10	higher 144%

**Gender** \* Comparator is ONS mid-year population estimates

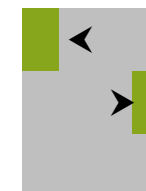
	LA Latest snapshot			LA 2020			LA 2020		
	CLA	Pop	% difference	CLA	Pop	% difference	CLA	Pop	% difference
Male	53	51	higher 4%	51	51	no dif 0%	56	51	higher 9%
Female	47	49	lower -5%	49	49	higher 1%	44	49	lower -10%



Comparisons of headline figures and performance data to published statistics

The table below shows the Local Authority's latest data for each indicator as calculated in ChAT, and the direction of travel since the latest published statistics (where available).

Decreasing, low is good

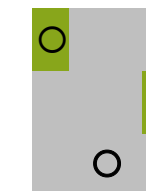


Increasing, high is good



No change, not RAG rated

Lowest 25% quartile, low is good



Highest 25% quartile, high is good



Mid 50% range, not RAG-rated



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Indicator	Latest data (ChAT)			Latest published statistics for all local authorities					
	LA	Direction of travel		LA	SNs	Eng	LA compared to mid-50% range of all LAs		Date
Referrals received (annual rate per 10,000 of children)	785	Increase	➤	768	579	538	Higher	○	2021-22
Referrals to social care that were within 12 months of a previous referral (%)	26	Increase	➤	19	21	20	In range	○	2021-22
Assessments completed (annual rate per 10,000 of children)	887	Increase	➤	820	622	533	Higher	○	2021-22
Assessments completed within 45 working days (%)	69	Decrease	⬅	79	89	84	In range	○	2021-22
Children subject to section 47 enquiries (annual rate per 10,000 of children)	315	Increase	➤	243	207	180	Higher	○	2021-22
Children subject of an initial child protection conference (annual rate per 10,000 of children)	74	Decrease	⬅	80	74	61	Higher	○	2021-22
Initial Child Protection Conferences held within 15 working days of the start of the section 47 enquiry (%)	91	Increase	➤	63	82	79	Lower	○	2021-22
Children in need (snapshot rate per 10,000 children)	442	Decrease	⬅	495	382	334	Higher	○	2021-22
Children who are the subject of a child protection plan (snapshot rate per 10,000 children)	62	Decrease	⬅	62	50	42	Higher	○	2021-22
Children who became the subject of a CP plan for a second or subsequent time (%)	18	Decrease	⬅	21	25	23	In range	○	2021-22
Children who ceased to be on a CP plan whose plan lasted 2 years or more (%)	4	Increase	➤	2	3	4	Lower	○	2021-22
Children who are looked after (snapshot rate per 10,000 children)	115	Increase	➤	113	90	70	Higher	○	2021-22
Children looked after who had a missing incident in the period (%)	11	Increase	➤	9	11	11	In range	○	2021-22
Children looked after who were away without authorisation in the period (%)	1	-	↑ ↑	c	3	2	Higher	○	2021-22
Children looked after who had their teeth checked by a dentist in the last 12 months (%)	79	Increase	➤	68	71	70	In range	○	2021-22
Children looked after who had their annual health assessment (%)	93	Decrease	⬅	94	93	89	In range	○	2021-22
Children who ceased to be looked after in the period who were adopted (%)	3	Decrease	⬅	13	11	10	In range	○	2021-22
Children who ceased to be looked after in the period due to a Special Guardianship Order (%)	18	Decrease	⬅	21	17	13	Higher	○	2021-22
Children leaving care over the age of 16 who remained looked after until their 18th birthday (%)	83	Increase	➤	83	91	79	Lower	○	2021-22
Care leavers aged 19-21 in suitable accommodation (%)	80	Decrease	⬅	92	90	88	In range	○	2021-22
Care leavers aged 19-21 in education, employment, or training (%)	43	Decrease	⬅	48	52	55	Lower	○	2021-22
A1 - Average time between entering care and moving in with family for children who were adopted (days)	578	Increase	➤	404	522	486	Lower	○	2015-18
A2 - Average time between LA receiving placement order and LA deciding on a match with family (days)	-	-		118	227	201	Lower	○	2015-18

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# Agenda Item 7

<b>Report to:</b>	Overview and Scrutiny Committee (Children's Services and Safeguarding)	<b>Date of Meeting:</b>	Tuesday 6 June 2023
<b>Subject:</b>	Safeguarding Learning and Development Offer		
<b>Report of:</b>	Interim Director of Children's Social Care and Education	<b>Wards Affected:</b>	(All Wards);
<b>Portfolio:</b>	Children's Social Care		
<b>Is this a Key Decision:</b>	No	<b>Included in Forward Plan:</b>	No
<b>Exempt / Confidential Report:</b>	No		

## Summary:

This report provides a summary of training provided by the SSCP for 22/23 as well as agency engagement.

## Recommendation(s):

(1) To consider the information provided and note the report.

## Reasons for the Recommendation(s):

The report responds to a request at a previous meeting of the Committee.

## Alternative Options Considered and Rejected: (including any Risk Implications)

NA

## What will it cost and how will it be financed?

### (A) Revenue Costs

There are no direct revenue implications associated with this report.

### (B) Capital Costs

There are no direct capital implications associated with this report.

# Agenda Item 7

## Implications of the Proposals:

<b>Resource Implications (Financial, IT, Staffing and Assets):</b>	
<b>Legal Implications:</b>	
<b>Equality Implications:</b>	
There are no equality implications	
<b>Impact on Children and Young People: Yes</b>	
The training provided seeks to improve skills and knowledge across Children's workforce the Children's Workforce to safeguard children.	
<b>Climate Emergency Implications:</b>	
The recommendations within this report will	
Have a positive impact	No
Have a neutral impact	Yes
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	Yes
There are no climate emergency implications as a direct result of this report.	

## Contribution to the Council's Core Purpose:

Protect the most vulnerable: The training seeks to improve skills and knowledge across Children's workforce whose activity protects and supports those children and young people who have complex care needs.
Facilitate confident and resilient communities: The training of partners supports the workforce to effectively support families in need of support and improve resilience.
Commission, broker and provide core services: N/A
Place – leadership and influencer: N/A
Drivers of change and reform: N/A
Facilitate sustainable economic prosperity: N/A
Greater income for social investment: N/A
Cleaner Greener N/A

## What consultations have taken place on the proposals and when?

### (A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.7241.23) and the Chief Legal and Democratic Officer (LD5441.23) have been consulted and any comments have been incorporated into the report.

### (B) External Consultations

NA

### Implementation Date for the Decision

Immediately following the Committee meeting.

<b>Contact Officer:</b>	Joe Banham
<b>Email Address:</b>	joe.banham@sefton.gov.uk

### Appendices:

Appendix A Training Data

### Background Papers:

There are no background papers available for inspection.

# Agenda Item 7

## 1. Overview

- 1.1 The report provides a summary of training provided by the Sefton Safeguarding Children Partnership (SSCP) for 22/23 as well as agency engagement.
- 1.2 Sefton SCP Learning and Development offer has provided the multi-agency children's workforce with opportunities to influence and impact upon their safeguarding children practice and responsibilities.
- 1.3 Collaboration for SSCP Learning and Development offer is informed by SSCP Business Priorities, national learning and local need and concentrates on areas identified from previous reporting year e.g., April 2022-March 2023. This has included:
  - Design and deliver an enhanced training programme specific to the partnership safeguarding priorities.
  - Launch the revised Level of Need Guidance across the partnership.
  - Provide training offers in response to audit activity across the system.
  - Deliver briefings for the partnership on national reviews and safeguarding research.
  - Be responsive to training needs that are highlighted in Ofsted Inspections.
- 1.4 All the areas of work identified from the previous year's annual report have been achieved. The SSCP have also strengthened the reporting arrangements through the SSCP structure to ensure there is oversight at all levels on training applications and attendance across the multi-agency partnership.
- 1.5 Moving forward, attendance and engagement will be a standing item at all Learning and Development subgroups. This will be included in the subgroup Chairs report to be presented to the Safeguarding Forum which in turn will be reported up to the 3 Key Leads for their oversight.
- 1.6 During the period April 2022-March 2023 **48** courses offered (virtual and face to face model) with **1395** professionals attending. Appendix A contains a detailed breakdown of training provision and attendance for the period.

## 2. Forward Planning

- 2.1 Forward Planning for SCP Partnership for 2023/24 is as follows:
  - Respond and offer training programme reflecting SSCP Priorities and embed and sustain current offer to ensure all agencies access the learning and development offer .
  - SSCP Learning and Development Subgroup to develop a work plan to share with strategic leaders.
  - Contextual Safeguarding -Sustain and embed opportunities for childrens workforce to understand Harmful Sexual Behaviours.
  - Identify tool to support and identify Harmful Sexual Behaviours practice e.g Brook Traffic Light Tool and develop a model to cascade across Partership.
  - Further embed SERIOUS Self Harm and Suicide Prevention training.

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- Develop Sexual Health Briefing in Partnership with Sefton Sexual Health Service
- Deliver 30 minute briefing on Neglect Screening Tool
- Design SWAY Briefings on Harmful Practices
- Devise Briefings for Neglect Screening Tool and Revised level of Need
- Respond to National Panel Reviews
- Hold sessions on the revised Working Together Guidance if available if guidance is updated.
- Support Children Social care Improvement Plan and develop Private Fostering Briefing and Newsletter.

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# Agenda Item 7

	Education	Health	Health Breakdown	Ind/Private/EY Provider	Sefton Council (CSC)
<b>Apr-22</b>					
Managing Allegations Briefing - 25 April 2022 (V) 1.5hr	11	2	S&O(1) GP(1)		1
Contextual Safeguarding (S Bore) 28 April 2022 F2F	7	2	AHH(1) M'Care(1)		5
<b>May-22</b>					
Working Together 4 May 2022 (V)	17	4	S&O(1) GP(1) Mcare(2)	8	5
Domestic Abuse (Adv) 10 May 2022 F2F	4	1	AHH(1)	2	1
SERIOUS (suicide prev) 16 May 2022 AM F2F	8	1	Mcare(1)		4
(DSL) (Education ONLY) 19 May 2022 (V) AM	27				
<b>Jun-22</b>					
Child Exploitation 8 June 2022 AM (V)	3	3	Mcare(3)	3	3
SMART Record Keeping - 13 June 2022 30 mins (V)	9	5	S&O(3) GP(1) AHH(1)	4	0
Domestic Abuse Awareness – 14 June 2022 AM (F2F)	1	2	Mcare(2)	0	0
C&YP Mental Health 20 June 2022 (V) 2 hrs	6	4	S&O(2) Mcare(2)	2	4
Protecting Children against Exploitation (Police) - 21 June 2022 (V) 10-11.30am	7	1	Mcare(1)	1	3
Working Together 23 June 2022 F2F	13	2	Mcare(1) AHH(1)	3	1
Contextual Safeguarding (S Bore) - 29 June 2022 F2F	8	6	Mcare(4) S&O(2)	2	7
(DSL) (Education ONLY) - 30 June 2022 (V) AM	28	0		0	0
<b>Jul-22</b>					
Supporting C&F Imp by drug, alcohol MH issues - 4 July 2022 AM (V)	11	4	Mcare(4)	2	7
Domestic Abuse (imp on the child) - 12 July 2022 AM F2F	5	5	Mcare(4) AHH(1)	1	1
<b>Sep-22</b>					
C&YP Mental Health (CAMHS) 20 Sept 2022 F2F AM	11	1	Mcare(1)	1	5
Working Together			Mcare(0)		

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21 Sept 2022 F2F	19	0	AHH() M'Care()	5	1
(DSL) (Education ONLY) 27 Sept 2022 (V) AM	46	0		0	0
<b>Oct-22</b>					
SERIOUS (Suicide Prevention) 4 October 2022 F2F AM	4	8	S7)(1) Mcare(6)	1	5
C&YP Mental Health Eating Difficulties (CAMHS) 7 October 2022 F2F AM	3	3	Mcare(3)	0	3
Domestic Abuse (SWACA) 12 October 2022 F2F	2	3	Mcare(2) S&O(1)	3	3
Managing Allegations Briefing 13 October 2022 (V) AM	10	3	AHH(1) S&O(1) GP(1)	3	2
Working Together 18 October 2022 F2F	21	1	Mcare(1)	2	5
<b>Nov-22</b>					
SMART Record Keeping Briefing 7 November 2022 (V) AM	23	9	Mcare(3) GP(2) AHH(3) CCG(1) NHSE(1)	2	6
Online Safety 8 November 2022 (V) AM	18	5	Mcare(3) AHH(2)	2	8
Neglect Training 15 November 2022 AM V	12	4	Mcare(2) AHH(2)	2	8
Protecting Children against Exploitation (Police) 22 November (V) AM	7	10	Mcare(2) AHH(2)	1	9
Working Together 24 November F2F	16	1	s&o(1)	2	8
Understanding the role of Rainbow Centre and SARC (V) 28 November PM	8	10	Mcare(10)	3	5
Child Sexual Abuse (S Bore) 29 November F2F	8	5	Mcare(2) AHH(2) S&O(1)	4	9
<b>Dec-22</b>					
Neglect Training (V) M Calder 6 December PM	10	7	Mcare(5) AHH(1) GP(1)	2	6
Domestic Abuse 7 December F2F AM	5	2	Mcare(2)	2	6
<b>Jan-23</b>					
Working Together 11 January 2023 F2F	19	5	Mcare(4) CCG(1)	5	3
Learning from National Review (Arthur & Star) (V) 12 January 2023 AM	8	5	Mcare(5)	6	6

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DSL (Education only) (V) 16 January 2023 AM	32	0		0	0
FII/Perplexing Presentations 31 January 2023 1pm V	15	2	GP(2)	2	6
Level of Need Briefing 20 Feb 23 V 1 hr	16	0	0	5	5
SMART Record Keeping 21 Feb 2023 V 1hr	14	1	AHH(1)	2	2
Working Together 22 February 2023 F2F	11	0		7	6
SERIOUS Training 1 March 2023 PDC (AM)	7	1	Mcare(1)	2	9
Cyber Crime (Police) 7 March 2023 V 1hr	12	1	Mcare(1)	3	12
Level of Need Briefing 8 March 2023 V 1 hr	10	2	Mcare(1) CCG(1)	4	23
Neglect Screening Tool Briefing 15 March 2023 V 30 mins	9	3	Mcare(3)	3	2
DSL (Education only) (V) 16 March 2023 AM V	42	0		0	0
Working Together 22 March 2023 F2F	18	1	S&O(1)	4	3
Role of the Rainbow/SARC 23 March 2023 V 1 hr	5	11	GP(2) Mcare(3) S&O(6)	5	6
Neglect Screening Tool Briefing 30 March 2023 V 30 mins	13	2	Mcare(2)	2	1
<b>TOTAL</b>	<b>619</b>	<b>148</b>		<b>113</b>	<b>215</b>

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VCFS	Housing	Police	Criminal Justice	Total Attendance	Total Places Offered
				14	30
2	1		1	18	30
				0	
6				40	40
1	1			10	30
5				18	25
				27	40
				0	
4	1			17	25
3			1	22	40
0	1			4	30
6				22	40
3				15	30
2		2		23	35
4				27	35
0				28	35
				0	
4				28	40
0		1		13	25
				0	
2				20	25

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9				34	35
0				46	50
				0	
0				18	25
1				10	25
0				11	25
2				20	40
2				31	35
				0	
2				42	55
1				34	50
3				29	40
3				30	40
1				28	35
0		2		28	40
1				27	30
				0	
6		1		32	40
1				16	25
				0	
0		1		33	35
3				28	40

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0				32	40
1				26	40
5			2	33	40
1				20	40
0		2		26	35
2				21	25
3			1	32	40
4			3	46	50
0				17	40
0				42	50
1			1	28	35
1				28	40
0			1	19	30
95	4	9	10	1213	

# Agenda Item 8

<b>Report to:</b>	Overview and Scrutiny Committee (Children's Services and Safeguarding)	<b>Date of Meeting:</b>	Tuesday 6 June 2023
<b>Subject:</b>	Education Scorecard		
<b>Report of:</b>	Executive Director of Children's Social Care and Education	<b>Wards Affected:</b>	(All Wards);
<b>Portfolio:</b>	Education		
<b>Is this a Key Decision:</b>	No	<b>Included in Forward Plan:</b>	No
<b>Exempt / Confidential Report:</b>	No		

## Summary:

To present the Education Scorecard.

## Recommendation(s):

That the data contained within the Scorecard be noted.

## Reasons for the Recommendation(s):

Overview and Scrutiny Committee (Children's Services and Safeguarding) provide scrutiny in relation to educational progress and data.

## Alternative Options Considered and Rejected: (including any Risk Implications)

Not applicable.

## What will it cost and how will it be financed?

### (A) Revenue Costs

Not applicable.

### (B) Capital Costs

Not applicable.

## Implications of the Proposals:

### Resource Implications (Financial, IT, Staffing and Assets):

All implications are detailed within the report.

# Agenda Item 8

<p><b>Legal Implications:</b> The Local authority has a statutory duty to provide support and challenge to educational providers. Measurement of success in this duty is related to educational attainment, attendance, exclusions, etc.</p>									
<p><b>Equality Implications:</b> The Committee will be kept informed of all equality implications, risks, and mitigations.</p>									
<p><b>Impact on Children and Young People:</b> Yes The Education Scorecard contains data on pupils within the Borough.</p>									
<p><b>Climate Emergency Implications:</b></p> <p>The recommendations within this report will</p> <table border="1"> <tr> <td>Have a positive impact</td> <td>No</td> </tr> <tr> <td>Have a neutral impact</td> <td>Yes</td> </tr> <tr> <td>Have a negative impact</td> <td>No</td> </tr> <tr> <td>The Author has undertaken the Climate Emergency training for report authors</td> <td>Yes</td> </tr> </table> <p>There are no climate emergency implications as a result of this report.</p>		Have a positive impact	No	Have a neutral impact	Yes	Have a negative impact	No	The Author has undertaken the Climate Emergency training for report authors	Yes
Have a positive impact	No								
Have a neutral impact	Yes								
Have a negative impact	No								
The Author has undertaken the Climate Emergency training for report authors	Yes								

## Contribution to the Council's Core Purpose:

<p>Protect the most vulnerable: The Education Scorecard provides data on all school children, including the most vulnerable.</p>
<p>Facilitate confident and resilient communities: As Above.</p>
<p>Commission, broker and provide core services: As Above.</p>
<p>Place – leadership and influencer: As Above.</p>
<p>Drivers of change and reform: As Above.</p>
<p>Facilitate sustainable economic prosperity: Not Applicable.</p>
<p>Greater income for social investment: Not Applicable.</p>
<p>Cleaner Greener: Not Applicable.</p>



## What consultations have taken place on the proposals and when?

### (A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.7245) and the Chief Legal and Democratic Officer (LD.5445) have been consulted and any comments have been incorporated into the report.

### (B) External Consultations

No external consultations were sought for this report.

### Implementation Date for the Decision

Immediately following the Committee meeting.

<b>Contact Officer:</b>	Tricia Davies
Telephone Number:	0151 934 4431
Email Address:	tricia.davies@sefton.gov.uk

### Appendices:

The following appendices are attached to this report:

Appendix A – Education Scorecard

### Background Papers:

There are no background papers available for inspection.

## 1. Introduction/Background

- 1.1 Committee have requested scorecard to be presented on regular basis – this is the second draft to be presented.
- 1.2 The absence table has been updated due to a change in the attendance system used to collate this information. The IDAMS system gives a large improvement in accuracy of the attendance data.

# Agenda Item 8

## 2. Overview

### 2.1 Absence

The overall absence figures appear to be very close to last year's data. Absence for all students across Sefton from the beginning of the academic year up to 22<sup>nd</sup> May 2023 lies at 8% which is the same as the average absence in 2021/22. Primary schools are seeing a very slight improvement of 0.2% from last year data for now whilst Secondary schools are matching the 9.9% absence rate from the previous academic year. Special schools saw a 3.3% rise in their absence rate in the spring term from the autumn term which they now seem to be maintaining during the first half of the summer term. This leaves their current absence rate 1.3% higher than last year's total. The persistent absence figures show improvement so far across all areas when comparing to last year's totals with a significant improvement in primary schools who recorded a 3% drop in this statistic between the autumn and spring terms.

### 2.2 Exclusions

Overall, there was a slight increase of 0.2% in all pupils that have missed at least one session due to an exclusion in the spring term when comparing to the autumn term. The EHCP, secondary school and special school cohorts recorded slight increases during the same periods whilst, the SEN and primary school cohorts managed significant decreases. All areas are seeing improvements in the number of pupils missing sessions due to an exclusion when comparing to last year's averages.

### 2.3 EHCP & NEET

There is a steady increase in the percentages of young people with an EHCP who are maintained by Sefton schools attending mainstream provision over this academic year as well as in previous years. NEET figures on the other hand appear to fluctuate from period to period. This could be due to the recording practices used on our system.

### 2.4 National and Sefton Language Data

There has been a continuous year on year increase in the percentage of pupils in Sefton that can speak a language other than English. The latest Sefton average for this figure lied at 6.3% in 2021/22 which was 9.6% lower than the Northwest local authority average and 13.2% lower than the National average at the time.



# Appendix A - Education Scorecard

# Education Scorecard

Area	2022/2023			Annual		
	End of Autumn full term	End of Spring full term	Summer term Latest (22 <sup>nd</sup> May)	2018/19	2020/2021	2021/2022

Page 124 **Absence**

Absence Rate (Data recorded from the beginning of the academic year up to each specified period above)						
All pupils	8.1%	8.1%	8.0%	5.0%	5.0%	8.0%
EHCP pupils	11.9%	13.3%	13.3%	Currently Unavailable		
SEN support pupils	11.6%	11.7%	11.6%			
LAC	9.2%	8.6%	8.6%			
Primary	6.7%	6.4%	6.2%	4.3%	3.9%	6.4%
Secondary	10.0%	9.9%	9.9%	5.7%	5.9%	9.9%
Special	11.3%	14.6%	14.6%	9.5%	15.8%	13.3%

Students with persistent absence (as a % of overall students)						
All pupils	24.4%	22.3%	21.4%	11.7%	13.4%	25.3%
EHCP pupils	31.5%	34.1%	34.2%	Currently Unavailable		
SEN support pupils	33.1%	33.9%	33.1%			
LAC	20.5%	19.4%	19.0%			
Primary	20.8%	17.8%	16.5%			
Secondary	29.5%	27.5%	27.0%	13.8%	15.8%	28.3%
Special	33.8%	39.5%	38.8%	27.6%	49.4%	40.5%

Area	2022/2023				Annual			3 year trend
	Autumn 1 <sup>st</sup> half term	Autumn full term	Spring 1 <sup>st</sup> half term	Spring full term	2019/2020	2020/2021	2021/2022	

## Exclusions

Fixed Term Exclusions (Pupils who have missed one or more sessions due to an exclusion out of the whole cohort)								
All pupils	0.6%	1.3%	0.7%	1.5%	1.5%	1.6%	2.8%	2.0%
EHCP pupils	1.3%	2.7%	1.6%	3.0%	5.7%	5.5%	7.1%	6.1%
SEN support pupils	2.0%	3.3%	1.4%	2.7%	3.3%	3.3%	5.5%	4.0%
Primary	0.0%	0.9%	0.0%	0.2%	0.2%	0.3%	0.4%	0.3%
Secondary	1.1%	2.4%	1.5%	3.0%	2.2%	2.6%	5.4%	3.4%
Special	1.8%	2.8%	1.5%	2.9%	5.4%	3.7%	5.4%	4.8%

Area	2022/2023				Annual			3 year trend
	Autumn 1 <sup>st</sup> half term	Autumn full term	Spring 1 <sup>st</sup> half term	Spring full term	2019/2020	2020/2021	2021/2022	

## Education, Health and Care Plan

Provision (Data calculated from a single day snapshot towards the end of each period)								
% young people with an EHCP maintained by Sefton schools attending mainstream provision	21.5%	22.1%	22.6%	25.8%	18.4%	20.7%	22.5%	20.5%

## Not in Employment, Education or Training (NEET)

NEET cohort for Ages 16-19 (Data pulled from a single day snapshot towards the end of each period)								
No. of children	26	38	38	53	43	46	21	37

## National and Sefton Language Data

Language	2015/16		2016/17		2017/18		2018/19		2019/20		2020/21		2021/22	
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
Known or believed to be English	33,714	96.2	33,630	95.9	38,122	95.5	38,016	94.9	37,776	94.4	37,667	93.9	37,869	93.6
Known or believed to be other than English	1,325	3.8	1,419	4.0	1,801	4.5	1,997	5.0	2,169	5.4	2,313	5.8	2,546	6.3
Language unclassified	11	0.0	6	0.0	15	0.0	36	0.1	66	0.2	134	0.3	32	0.1
<b>Sefton Total</b>	<b>35,050</b>	<b>100.0</b>	<b>35,055</b>	<b>100.0</b>	<b>39,938</b>	<b>100.0</b>	<b>40,049</b>	<b>100.0</b>	<b>40,011</b>	<b>100.0</b>	<b>40,114</b>	<b>100.0</b>	<b>40,447</b>	<b>100.0</b>

2021/22	
NW LAs	England
83.8	80.1
15.9	19.5
0.3	0.4
<b>100.0</b>	<b>100.0</b>

Language	2015/16		2016/17		2017/18		2018/19		2019/20		2020/21		2021/22	
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
Known or believed to be English	16,631	95.5	16,941	95.4	21,734	95.0	21,722	94.4	21,542	93.9	21,278	93.3	21,240	93.2
Known or believed to be other than English	774	4.4	822	4.6	1,134	5.0	1,267	5.5	1,341	5.8	1,408	6.2	1,523	6.7
Language unclassified	5	0.0	2	0.0	9	0.0	23	0.1	51	0.2	113	0.5	16	0.1
<b>Sefton State-funded primary</b>	<b>17,410</b>	<b>100.0</b>	<b>17,765</b>	<b>100.0</b>	<b>22,877</b>	<b>100.0</b>	<b>23,012</b>	<b>100.0</b>	<b>22,934</b>	<b>100.0</b>	<b>22,799</b>	<b>100.0</b>	<b>22,779</b>	<b>100.0</b>

2021/22	
NW LAs	England
82.4	78.5
17.5	21.2
0.1	0.3
<b>100.0</b>	<b>100.0</b>

Language	2015/16		2016/17		2017/18		2018/19		2019/20		2020/21		2021/22	
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
Known or believed to be English	16,463	96.8	16,055	96.5	15,401	96.1	15,250	95.7	15,198	95.1	15,368	94.7	15,597	94.1
Known or believed to be other than English	540	3.2	583	3.5	616	3.8	679	4.3	779	4.9	854	5.3	965	5.8
Language unclassified	5	0.0	3	0.0	3	0.0	10	0.1	9	0.1	9	0.1	8	0.0
<b>Sefton State-funded secondary</b>	<b>17,008</b>	<b>100.0</b>	<b>16,641</b>	<b>100.0</b>	<b>16,020</b>	<b>100.0</b>	<b>15,939</b>	<b>100.0</b>	<b>15,986</b>	<b>100.0</b>	<b>16,231</b>	<b>100.0</b>	<b>16,570</b>	<b>100.0</b>

2021/22	
NW LAs	England
85.6	81.9
13.9	17.5
0.6	0.6
<b>100.0</b>	<b>100.0</b>

Language	2015/16		2016/17		2017/18		2018/19		2019/20		2020/21		2021/22	
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
Known or believed to be English	500	98.0	524	97.4	570	96.6	599	96.6	634	96.8	647	95.1	695	95.1
Known or believed to be other than English	9	1.8	13	2.4	17	2.9	19	3.1	20	3.1	25	3.7	29	4.0
Language unclassified	1	0.2	1	0.2	3	0.5	2	0.3	1	0.2	8	1.2	7	1.0
<b>Sefton State-funded special school</b>	<b>510</b>	<b>100.0</b>	<b>538</b>	<b>100.0</b>	<b>590</b>	<b>100.0</b>	<b>620</b>	<b>100.0</b>	<b>655</b>	<b>100.0</b>	<b>680</b>	<b>100.0</b>	<b>731</b>	<b>100.0</b>

2021/22	
NW LAs	England
87.6	85.0
12.1	14.6
0.3	0.4
<b>100.0</b>	<b>100.0</b>



## OFSTED breakdown by Schools

Key:

Key:

1 – Outstanding

2 – Good

3 – Requires Improvement

4 - Inadequate

School Type	Number of Schools														
	Sefton - All Schools					Sefton - Maintained Schools					Sefton - Academies				
	Total	1	2	3	4	Total	1	2	3	4	Total	1	2	3	4
Nursery	3	1 33%	2 67%	-	-	3	1 33%	2 67%	-	-	0	-	-	-	-
Infant	2	1 50%	1 50%	-	-	2	1 50%	1 50%	-	-	0	-	-	-	-
Junior	2	-	2 100%	-	-	2	-	2 100%	-	-	0	-	-	-	-
Primary	70*	8 11%	56 82%	4 6%	1 1%	62	7 11%	51 82%	4 6%	-	8*	1 13%	5 63%	-	1 13%
Secondary	18	-	11 61%	5 28%	2 11%	4	-	3 75%	1 25%	-	13	-	8 62%	3 23%	2 15%
Special	5	2 40%	3 60%	-	-	0	-	-	-	-	0	-	-	-	-
PRU	2	-	2 100%	-	-	2	-	2 100%	-	-	0	-	-	-	-
<b>Sefton Schools</b>	<b>102*</b>	<b>12 12%</b>	<b>78 76%</b>	<b>9 9%</b>	<b>3 3%</b>	<b>74</b>	<b>9 12%</b>	<b>60 82%</b>	<b>5 7%</b>	<b>-</b>	<b>21*</b>	<b>1 5%</b>	<b>13 62%</b>	<b>3 14%</b>	<b>3 14%</b>

Ofsted School Inspection Summary (Last updated on 30th March 2023)

\* Totals include the cohort of 1 new academy that has not been inspected yet

## Ofsted Breakdown by number of pupils

1 – Outstanding	2 – Good	3 – Requires Improvement	4 – Inadequate
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School Type	Number of Pupils														
	Sefton - All Schools					Sefton - Maintained Schools					Sefton - Academies				
	Total	1	2	3	4	Total	1	2	3	4	Total	1	2	3	4
Nursery	207	59 29%	148 71%	-	-	207	59 29%	148 71%	-	-	0	-	-	-	-
Infant	762	324 43%	438 57%	-	-	762	324 43%	438 57%	-	-	0	-	-	-	-
Junior	836	-	836 100%	-	-	836	-	836 100%	-	-	0	-	-	-	-
Primary	20,697*	2,407 12%	16,989 82%	930 4%	177 1%	18,270	2,178 12%	15,162 83%	930 5%	-	2,427*	229 9%	1,827 75%	-	177 7%
Secondary	16,906	-	11,988 71%	3,445 20%	1,473 9%	3,912	-	3,056 78%	856 22%	-	12,441	-	8,932 72%	2,036 16%	1,473 12%
Special	779	399 51%	380 49%	-	-	0	-	-	-	-	0	-	-	-	-
PRU	58	-	58 100%	-	-	58	-	58 100%	-	-	0	-	-	-	-
<b>Sefton Schools</b>	<b>40,245*</b>	<b>3,189 7%</b>	<b>30,837 77%</b>	<b>4,375 11%</b>	<b>1,650 4%</b>	<b>24,045</b>	<b>2,561 10%</b>	<b>19,698 82%</b>	<b>1,786 8%</b>	<b>-</b>	<b>14,868*</b>	<b>229 2%</b>	<b>10,759 73%</b>	<b>2,036 14%</b>	<b>1,650 11%</b>

School cohort data taken from Oct 22 Census.  
Ofsted School Inspection Summary (Last updated on 30th March 2023).

\* Totals include the cohort of 1 new academy that has not been inspected yet

Area	2018	2019	2022	3 Year Trend	Compared to 2019	National		
						2018	2019	2022

## Early Years Foundations Profile

% reaching good level of development								
All pupils	70.8	68.8	60.8	66.8	-8.0	71.0	71.8	65.2
Disadvantaged Pupils	53.2	54.0	41.7	49.6	-12.3	Not Available	Not Available	Not Available
FSM Pupils	53.1	53.5	41.6	49.4	-11.9	57.0	57.0	49.1
All SEN pupils	17.5	17.6	12.1	15.7	-5.5	Not Available	Not Available	18.8

## Phonics

% meeting required standard								
All pupils	82.8	82.5	75.0	80.1	-7.5	82.7	81.9	75.5
Disadvantaged Pupils	70.0	71.4	61.9	67.8	-9.5	71.7	70.8	62.5
FSM pupils	68.1	69.9	61.1	66.4	-8.8	70.2	70.0	62.0
All SEN pupils	40.5	39.8	35.3	38.5	-4.5	43.8	43.2	38.4

Area	2018	2019	2022	3 Year Trend	Compared to 2019	National		
						2018	2019	2022

## Key Stage 1

Reading - % reaching expected standard								
All pupils	73.1	74.6	65.8	71.1	-8.8	75.5	74.9	66.9
Disadvantaged Pupils	58.8	59.1	52.2	56.7	-6.9	62.4	61.8	51.6
FSM pupils	57.3	57.5	51.5	55.4	-6.0	60.2	60.4	51.2
All SEN pupils	23.0	30.8	26.5	26.7	-4.3	30.4	29.7	26.1
Writing - % reaching expected standard								
All pupils	67.8	67.7	54.2	63.2	-13.5	69.9	69.2	57.6
Disadvantaged Pupils	51.4	52.9	38.5	47.6	-14.4	55.4	54.7	41.2
FSM pupils	49.9	51.7	38.0	46.5	-13.7	53.0	53.3	40.9
All SEN pupils	14.8	19.1	14.2	16.0	-4.9	22.2	21.6	17.2

Area	2018	2019	2022	3 Year Trend	Compared to 2019	National		
						2018	2019	2022

## Key Stage 2

Reading - % reaching expected standard								
All pupils	79.0	73.4	77.0	76.5	3.6	75.8	73.8	75.0
Disadvantaged Pupils	67.1	61.8	65.5	64.8	3.7	64.2	62.3	62.5
FSM pupils	63.3	61.0	63.0	62.4	2.0	59.9	58.8	61.6
All SEN pupils	39.0	32.2	40.0	37.1	7.8	39.2	36.4	37.6
Writing - % reaching expected standard								
All pupils	79.6	77.0	67.6	74.7	-9.4	78.8	78.9	69.7
Disadvantaged Pupils	65.1	63.8	51.7	60.2	-12.1	67.4	67.9	55.3
FSM pupils	58.3	61.3	49.1	56.3	-12.2	62.4	63.8	54.4
All SEN pupils	26.4	25.6	23.1	25.0	-2.5	34.1	34.1	25.9

Area	2018	2019	2022	3 Year Trend	Compared to 2019	National		
						2018	2019	2022

## Key Stage 4

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Average attainment and score								
All pupils	44.9	44.2	45.7	44.9	1.6	44.5	44.7	47.1
Disadvantaged Pupils	34.7	34.4	35.2	34.8	0.9	36.8	36.8	37.6
FSM6 pupils	32.0	32.2	35.0	33.1	2.8	34.5	35.0	36.9
All SEN pupils	24.4	21.2	26.7	24.1	5.5	Not Available	27.6	29.3
% achieving grades 9-5 in English and Maths								
All pupils	39.4	35.9	44.1	39.8	8.3	40.2	40.1	46.6
Disadvantaged Pupils	22.1	17.9	23.7	21.2	5.9	24.9	24.8	29.7
FSM pupils	19.4	16.5	22.7	19.5	6.1	21.7	22.6	28.5
All SEN pupils	12.1	6.9	13.0	10.7	6.1	Not Available	13.8	18.2

Area	2018	2019	2022	3 Year Trend	Compared to 2019	National		
						2018	2019	2022

## Key Stage 4 (continued)

% achieving grades 9-4 in English and Maths								
All pupils	62.7	60.6	64.4	62.6	3.9	59.4	59.8	64.3
Disadvantaged Pupils	42.5	40.0	43.6	42.0	3.6	44.6	44.9	48.6
FSM pupils	37.8	36.9	43.1	39.3	6.2	40.2	41.5	47.1
All SEN pupils	22.4	16.5	28.6	22.5	12.1	Not Available	26.7	32.1





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<b>Report to:</b>	Overview and Scrutiny Committee (Children's Services and Safeguarding)	<b>Date of Meeting:</b>	Tuesday 6 June 2023
<b>Subject:</b>	Ofsted Inspection Reports		
<b>Report of:</b>	Executive Director of Children's Social Care and Education	<b>Wards Affected:</b>	(All Wards);
<b>Portfolio:</b>	Education		
<b>Is this a Key Decision:</b>	No	<b>Included in Forward Plan:</b>	No
<b>Exempt / Confidential Report:</b>	No		

## Summary:

To update the Overview and Scrutiny Committee (Children's Services and Safeguarding) on Ofsted Inspection Reports and the work of the School Improvement Team.

## Recommendation(s):

That the report be noted.

## Reasons for the Recommendation(s):

To appraise the Committee of developments.

## Alternative Options Considered and Rejected: (including any Risk Implications)

Not applicable

## What will it cost and how will it be financed?

### (A) Revenue Costs

Any support for schools provided by, or brokered, by the School Improvement Team leading up to or after Ofsted are contained and can be met from within existing budget provision.

### (B) Capital Costs

Not applicable

## Implications of the Proposals:

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<b>Resource Implications (Financial, IT, Staffing and Assets):</b> None directly	
<b>Legal Implications:</b> School Inspection Handbook, Education Act 2005	
<b>Equality Implications:</b>  There are no equality implications.	
<b>Impact on Children and Young People: Yes</b>  The report sets out gradings by Ofsted for schools that have been inspected.	
<b>Climate Emergency Implications:</b>  The recommendations within this report will	
Have a positive impact	No
Have a neutral impact	Yes
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	Yes
There are no climate emergency implications as a direct result of this report.	

## Contribution to the Council's Core Purpose:

Protect the most vulnerable: The School Improvement Team offers support to all schools receiving an Ofsted inspection.
Facilitate confident and resilient communities: As above.
Commission, broker and provide core services: As above.
Place – leadership and influencer: As above.
Drivers of change and reform: As above.
Facilitate sustainable economic prosperity: Not applicable.
Greater income for social investment: Not applicable.

Cleaner Greener: Not applicable.
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## What consultations have taken place on the proposals and when?

### (A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.7240/23) and the Chief Legal and Democratic Officer (LD.5440/23) have been consulted and any comments have been incorporated into the report.

### (B) External Consultations

Not applicable.

## Implementation Date for the Decision

Immediately following the Committee meeting.

<b>Contact Officer:</b>	Tricia Davies / Jacqui Patterson
Telephone Number:	07813544809
Email Address:	tricia.davies@sefton.gov.uk

## Appendices:

The following appendices are attached to this report:

- Ofsted Summary of Outcomes and Support Spring 2023 – Published results for the schools outlined.

## Background Papers:

There are no background papers available for inspection.

## 1. Introduction/Background

- 1.1 Schools can be inspected under Section 5 or Section 8 guidance.
- 1.2 Under the education inspection framework section 5 inspections, inspectors will make the following judgements about schools: overall effectiveness; quality of

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education; behaviour and attitudes; personal development and leadership and management. If the school offers early years provision and sixth-form provision, inspectors will also make judgements on these areas.

- 1.3 Under the education inspection framework section 8 inspections may be carried out for a range of reasons: schools judged to be good or outstanding at their most recent section 5 inspection; monitoring inspections of schools judged as requires improvement; monitoring inspections of schools judged to have serious weaknesses; monitoring inspections of schools judged to require special measures; any inspection that is carried out in other circumstances where the inspection has no specific designation, known as 'section 8 no formal designation inspection' and unannounced behaviour inspections.
- 1.4 The usual interval for section 5 inspections is within 5 school years from the end of the school year in which the last section 5 or relevant section 8 inspection took place.

## **2. Support from School Improvement Team:**

- 2.1 All schools currently judged Requires Improvement or Inadequate receive support and challenge from the School Improvement Team. In addition, the team also broker support. Schools with two RI judgements or judged inadequate receive support from the DFE including a National Leader of Education working with the school and the Local Authority on a school improvement programme.
- 2.2 All schools currently judged Good or Outstanding have access to a health check when in the Ofsted window. This enables the school to identify any areas that they need support with. The team will then provide or broker support if required.
- 2.3 Once the school receives the call a member of the team will contact them to check if any support is required and keep in contact throughout the inspection.
- 2.4 The Service Manager for School Improvement or the Assistant Director of Education Excellence meet with the lead inspector during the inspection and attend the final feedback.
- 2.5 Following the inspection report being released the team will again provide or broker support as appropriate.
- 2.6 The Local Authority are held to account by the DFE and the Senior HMI for school performance. The main focus of discussions is regarding all schools judged as Requiring Improvement or Inadequate, the capacity to improve and the impact of support provided.

## **3. Inspections – Spring term 2022**

3.1 The following schools outlined within the attached appendix have been inspected and reports received since the last meeting:


1. Redgate Primary School




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2. Meols Cop High School
3. Trinity St Peters Primary School
4. St John's Waterloo Primary School
5. Litherland Moss Primary School
6. Great Crosby Primary School
7. Kew Woods Primary School
8. St Philip's Primary School
9. St Elizabeth's Primary School
10. Chesterfield High School
11. Farnborough Road Infants School
12. Melling Primary School



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**OFSTED Summary of Outcomes and Support Spring 2023**

<b>Name of School</b>	<b>Inspection Date</b>	<b>Lead Inspector's Name</b>	<b>Latest OFSTED Grade</b>	<b>Previous Inspection Date and OFSTED Grade</b>	<b>Development Areas</b>	<b>LA Relationship and Support</b>
<b>Redgate Primary</b>	<b>2<sup>nd</sup> &amp; 3<sup>rd</sup> February 2023</b>	<b>Niamh Howlett - HMI</b>	<p><b><u>Section 8 ungraded remains Good</u></b></p>  <p>10256143 - Redgate Community Primary S</p>	17/10/2017 Good <a href="https://www.ofsted.gov.uk/inspections/2737921">2737921</a> <a href="https://www.ofsted.gov.uk">(ofsted.gov.uk)</a>	Assessment in some subject areas.	Good relationship. Works closely with all areas of Education Excellence.
<b>Meols Cop High School</b>	<b>2<sup>nd</sup> &amp; 3<sup>rd</sup> February 2023</b>	<b>Kate Bowker - HMI</b>	<p><b><u>Section 5 Good Ofsted   Meols Cop High School</u></b></p>	02/10/2012 Outstanding <a href="https://www.ofsted.gov.uk/inspections/2068107">2068107</a> <a href="https://www.ofsted.gov.uk">(ofsted.gov.uk)</a>	In a small number of subjects, teachers do not use assessment well enough to identify and address gaps in pupils' knowledge. Leaders should ensure that teachers identify pupils in key stage 4 who are falling behind and help them to read fluently, accurately and with good comprehension.	Strong engagement with Research School. HT sits on School Improvement Board.

Trinity St Peters Primary School	9 <sup>th</sup> & 10 <sup>th</sup> February 2023	Niamh Howlett - HMI	<p><b><u>Section 8 ungraded remains Good</u></b></p>  <p>10256175 - Trinity St Peter's C - 134988 - F</p>	16/11/2017 Good <a href="#">Ofsted   Trinity St Peter's CofE Primary School</a>	Remains Good but the next inspection will be a graded inspection as has potential to be Outstanding.	Good relationship. Works closely with all areas of Education Excellence.
St Johns Waterloo	9 <sup>th</sup> & 10 <sup>th</sup> February 2023	Michael Pennington - HMI	<p><b><u>Section 8 ungraded remains Good</u></b></p>  <p>10256152 - St Johns Church of England Pri</p>	1/11/2017 Good <a href="#">Ofsted   St John's Church of England Primary School</a>	Further develop the knowledge that pupils should learn.	Good relationship. Works closely with all areas of Education Excellence.
Litherland Moss Primary School	10 <sup>th</sup> & 11 <sup>th</sup> January 2023	Lenford White - HMI	<p><b><u>Section Good</u></b></p>  <p>10256100 - Litherland Moss Prim</p>	Academy	As subject teachers are developing in their roles they need to work on supporting teachers with how to build pupils knowledge over time.	Invited to attend feedback. Very limited engagement with the LA.
Great Crosby Primary School	1 <sup>st</sup> & 2 <sup>nd</sup> March 2023	Niamh Howlett - HMI	<p><b><u>Section 8 ungraded remains Good</u></b>50216350 (<a href="http://ofsted.gov.uk">ofsted.gov.uk</a>)</p>	27/11/2020 Good <a href="#">Ofsted   Great Crosby Catholic Primary School</a>	Development area phonics. Phonics – not consistent in all areas and needs monitoring.	HT has strong links with LA as Professional Partner.
Kew Woods Primary School	13 <sup>th</sup> and 14 <sup>th</sup> March 2023	Tim Vaughan - HMI	<p><b><u>Section 8 ungraded remain</u></b> 50216281 (<a href="http://ofsted.gov.uk">ofsted.gov.uk</a>)</p>	Academy	Refining areas of the curriculum.	Close relationship with LA. HT working with another school as part of School Improvement offer. SEND team have provided a lot of



			<u>s Good</u>			support to allow HT to have SEND qualification.
<b>St Philip's Primary Southport</b>	<b>13<sup>th</sup> and 14<sup>th</sup> March 2023</b>	<b>Niamh Howlett - HMI</b>	<u>Section 8 ungraded remains Good</u> <a href="https://www.ofsted.gov.uk/inspections/50216325">50216325 (ofsted.gov.uk)</a>	02/11/2017 Good <a href="#">Ofsted   St Philip's Church of England Primary School</a>	Safeguarding training needed and phonics needs monitoring for consistency.	Good engagement with LA. HT is a Professional Partner and we have one moderator at KS1.
<b>St Elizabeth's Primary School</b>	<b>28<sup>th</sup> &amp; 29<sup>th</sup> March 2023</b>	<b>Lenford White - HMI</b>	<u>Section 8 ungraded remains Good</u>  10240472 - St Elizabeth's Catholic -	08/06/2017 Good <a href="#">Ofsted   St Elizabeth's Catholic Primary School</a>	Enhanced pupils understanding of money/financial literacy. Phonics – make sure pupils are learning for themselves. Continues to be a good school.	Good engagement with LA.
<b>Chesterfield High School</b>	<b>w/c 27/03/23</b>	<b>Emma Gregory - HMI</b>	<u>Section 8 ungraded remains Good</u>  10282722 - Chesterfield High Sch	Academy	In a small number of subjects, some staff do not use assessment strategies well to identify and address some pupils' misunderstandings.	Good engagement with LA.
<b>Farnborough Rd Infants School</b>	<b>w/c 27/03/23</b>		<u>Section 8 ungraded remains Good</u>	12/11/2020 Good <a href="#">Ofsted   Farnborough Road Infant School</a>	Questioning skills. Phonics consistency and sounding phonemes	Strong engagement with LA. Experienced KS1 moderator. HT part of CPD group.

<p><b>Melling Primary School</b></p>	<p><b>21<sup>st</sup> &amp; 22<sup>nd</sup> March 2023</b></p>	<p><b>James Marsh HMI</b></p>	<p><b><u>Section 8 ungraded remains Good</u></b></p>  <p>10240229 Melling Primary School 10488</p>	<p>28/11/2017 Good <a href="#">Melling Primary School - Open - Find an Inspection Report - Ofsted</a></p>	<p>Staff training in phonics for those who need to be updated. Leaders in some subjects need to identify the precise knowledge so pupils learn more.</p>	<p>Good engagement with LA</p>
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# Agenda Item 10

<b>Report to:</b>	Overview and Scrutiny Committee (Children's Services and Safeguarding)	<b>Date of Meeting:</b>	Tuesday 6 June 2023
<b>Subject:</b>	Parent Governor Representative		
<b>Report of:</b>	Chief Legal and Democratic Officer	<b>Wards Affected:</b>	(All Wards);
<b>Portfolio:</b>	Children's Social Care Education		
<b>Is this a Key Decision:</b>	No	<b>Included in Forward Plan:</b>	No
<b>Exempt / Confidential Report:</b>	No		

## Summary:

To formally approve the nomination for a new Parent Governor Representative to sit on the Committee for a period of two years.

## Recommendation(s):

That the nomination received for a new Parent Governor to sit on the Committee for a period of two years be formally approved.

## Reasons for the Recommendation(s):

The Council's Constitution requires the Committee to have two parent governor representatives to sit on the Committee and there is currently a vacancy on the Committee.

## Alternative Options Considered and Rejected: (including any Risk Implications)

N/A

## What will it cost and how will it be financed?

### (A) Revenue Costs

There are no costs associated with the recommendation.

### (B) Capital Costs

There are no costs associated with the recommendation.

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## Implications of the Proposals:

<b>Resource Implications (Financial, IT, Staffing and Assets):</b> None	
<b>Legal Implications:</b> The Parent Governor Representatives (England) Regulations 2001 apply.	
<b>Equality Implications:</b>  There are no equality implications.	
<b>Impact on Children and Young People: Yes</b>  The appointment of Parent Governor Representatives to the Committee ensures that relevant expertise is taken into account by the Committee.	
<b>Climate Emergency Implications:</b>  The recommendations within this report will	
Have a positive impact	No
Have a neutral impact	Yes
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	Yes
There are no climate emergency implications as a result of the proposal.	

## Contribution to the Council's Core Purpose:

Protect the most vulnerable: The appointment of an additional Parent Governor Representative contributes towards the protection of children and young people within the Borough.
Facilitate confident and resilient communities: As above.
Commission, broker and provide core services: As above.
Place – leadership and influencer: As above.
Drivers of change and reform: As above.
Facilitate sustainable economic prosperity: Not applicable.
Greater income for social investment:

Not applicable. Not applicable.
Cleaner Greener: Not applicable.

## What consultations have taken place on the proposals and when?

### (A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.7237/23) and the Chief Legal and Democratic Officer (LD.5437/23) have been consulted and any comments have been incorporated into the report.

### (B) External Consultations

The Council's Governor Services Team have sought nominations from Parent Governors from schools within the Borough.

## Implementation Date for the Decision

Immediately following the Committee meeting.

<b>Contact Officer:</b>	Debbie Campbell
Telephone Number:	Tel: 0151 934 2254
Email Address:	debbie.campbell@sefton.gov.uk

## Appendices:

There are no appendices to this report.

## Background Papers:

There are no background papers available for inspection.

### 1. Introduction/Background

- 1.1 The Council's Constitution requires the Overview and Scrutiny Committee (Children's Services and Safeguarding) to have two parent governor representatives who have voting rights on education matters. Representatives are normally appointed for a two-year term of office. There is currently a vacancy on the Committee.
- 1.2 The Governor Services Team within the Council has sought nominations for a new parent governor to sit on the Committee and one nomination has been received.
- 1.3 The Committee is requested to formally approve the nomination received for a new parent governor representative to sit on the Committee for a period of two years. Details of the nomination will be reported at the meeting.

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<b>Report to:</b>	Overview and Scrutiny Committee  (Children's Services and Safeguarding)	<b>Date of Meeting:</b>	6 June 2023
<b>Subject:</b>	Cabinet Member Reports – March - May 2023		
<b>Report of:</b>	Chief Legal and Democratic Officer	<b>Wards Affected:</b>	All
<b>Cabinet Portfolio:</b>	Children's Social Care Education		
<b>Is this a Key Decision:</b>	No	<b>Included in Forward Plan:</b>	No
<b>Exempt / Confidential Report:</b>	No		

**Summary:**

To submit the Cabinet Member – Children's Social Care and the Cabinet Member - Education reports relating to the remit of the Overview and Scrutiny Committee.

**Recommendation:**

That the Cabinet Member – Children's Social Care and the Cabinet Member - Education reports relating to the remit of the Overview and Scrutiny Committee be noted.

**Reasons for the Recommendation:**

In order to keep Overview and Scrutiny Members informed, the Overview and Scrutiny Management Board has agreed for relevant Cabinet Member Reports to be submitted to appropriate Overview and Scrutiny Committees.

**Alternative Options Considered and Rejected:**

No alternative options have been considered because the Overview and Scrutiny Management Board has agreed for relevant Cabinet Member Reports to be submitted to appropriate Overview and Scrutiny Committees.

**What will it cost and how will it be financed?**

Any financial implications associated with the Cabinet Member reports which are referred to in this update are contained within the respective reports.

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(A) **Revenue Costs** – see above

(B) **Capital Costs** – see above

## Implications of the Proposals:

<b>Resource Implications (Financial, IT, Staffing and Assets):</b> None	
<b>Legal Implications:</b> None	
<b>Equality Implications:</b> There are no equality implications.	
<b>Impact on Children and Young People:</b> Yes	
Any implications on the impact on children and young people is set out within the appendices attached to this report.	
<b>Climate Emergency Implications:</b>	
The recommendations within this report will	
Have a positive impact	No
Have a neutral impact	Yes
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	Yes
There are no direct climate emergency implications arising from this report. Any climate emergency implications arising from the consideration of reports referred to in the Work Programme will be contained in such reports when they are presented to Members at the appropriate time.	

## Contribution to the Council's Core Purpose:

Protect the most vulnerable: None directly applicable to this report. The Cabinet Member updates provides information on activity within Councillor Doyle's and Councillor Roscoe's portfolios during the previous three-month period. Any reports relevant to their portfolios considered by the Cabinet, Cabinet Member or Committees during this period would contain information as to how such reports contributed to the Council's Core Purpose.
Facilitate confident and resilient communities: As above
Commission, broker and provide core services: As above
Place – leadership and influencer: As above
Drivers of change and reform: As above
Facilitate sustainable economic prosperity: As above



Greater income for social investment: As above
Cleaner Greener: As above

**What consultations have taken place on the proposals and when?**

**(A) Internal Consultations**

The Cabinet Member Update Reports are not subject to FD/LD consultation. Any specific financial and legal implications associated with any subsequent reports arising from the attached Cabinet Member update reports will be included in those reports as appropriate.

**(B) External Consultations**

Not applicable

**Implementation Date for the Decision**

Immediately following the Committee meeting.

<b>Contact Officer:</b>	Debbie Campbell
Telephone Number:	0151 934 2254
Email Address:	<a href="mailto:debbie.campbell@sefton.gov.uk">debbie.campbell@sefton.gov.uk</a>

**Appendices:**

The following appendices are attached to this report:

- Appendix A - Cabinet Member – Children’s Social Care - update report
- Appendix B - Cabinet Member – Education – update report

**Background Papers:**

There are no background papers available for inspection.

**1. Introduction/Background**

- 1.1 In order to keep Overview and Scrutiny Members informed, the Overview and Scrutiny Management Board has agreed for relevant Cabinet Member Reports to be submitted to appropriate Overview and Scrutiny Committees.
- 1.2 Attached to this report, for information, are the most recent Cabinet Member reports for the Children’s Social Care and Education portfolios.

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<b>CABINET MEMBER UPDATE REPORT</b>		
<b>COUNCILLOR</b>	<b>PORTFOLIO</b>	<b>DATE</b>
Mhairi Doyle	Children's Social Care	25 May 2023

## **CHILDREN'S SOCIAL CARE**

- We are starting to see some stabilisation in our permanent workforce with a slight increase of full time equivalent social workers.
- 23 International social workers have been recruited, with 9 due to start next month. The rest of the social workers appointed, will arrive following appropriate DBS checks and visa applications.
- Recent audit activity is showing an improvement in the number of cases which are graded 'Requires Improvement' or 'Good'. An Increasing number of good practice examples are being identified.
- We are in the process of developing an action plan following the results of our 'annual Survey' for cared for children and care experienced.
- Work is underway to plan events over the summer, care leavers week and Christmas for our cared for children and care experienced.
- MYSPACE, a team which focuses on the support for children at risk of exploitation and missing has been launched on the 24<sup>th</sup> May.
- Changes have been made to the fostering financial policy meaning that all carers are paid 100% of the fee for a second or subsequent child placed. This will support with our sufficiency and increasing the number of available foster homes for children.
- We are preparing for the next Ofsted monitoring visit and developed an action plan which has been shared with all staff. We meet weekly to track the progress.

## **YOUTH JUSTICE SERVICE (YJS)**

### **Performance**

The current performance against the key performance indicators (KPI's) remains stable. There was a slight increase in First Time Entrants (FTE) for the time period Oct 2020-21 compared to 2021-22 which aligns with a general increase across Merseyside. Local tracking for FTE has shown a very slight increase in quarter four 2022-23. Reoffending data tends to be historic due to the tracking processes, there was a significant reduction of 15% between years 2019-20 and 2020-21, however, this was during the time of Covid related lockdown and future tracking may show an increase. Sefton's custody rates have increased with one child sentenced and another on remand for a serious offence.

From August 2023, the performance data will include the ten new KPI's which will provide a richer picture of how the Youth Justice Service and partners support children who access our service.

### **Focus on Risk of Serious Harm and Violence**

At the Youth Justice Partnership Board 31<sup>st</sup> January, we delivered a case study relating to children in the cohort who were at high / very high risk of serious harm to others and those who had committed violent offences. The Partnership has subsequently met to discuss the findings in greater depth to determine what steps could be taken to address the concerns raised. The discussion centred on areas that could be optimised in the short term such as Probation referring younger siblings or children of their clients for support through Early Help. The partners raised some system issues such as the wider prevention and diversion offer for children to support them from an early stage. In addition, some broad issues around predictive analysis and shared data systems were discussed, and these were viewed as longer term ambitions.

The case studies will be presented to the Operational Partnership Group to obtain the practitioners perspective. A report will then be submitted via the Partnership Chair to take to the Safeguarding Children's Partnership with some questions to consider in addressing the issues raised.

### **Youth Justice Board Oversight Framework**

The Youth Justice Board (YJB) have introduced a new oversight framework to improve performance and ensure partners are aligned to deliver effective outcomes for children, identify good practice and ensure that youth justice services comply with grant conditions. The YJB have developed a Performance Oversight Board which will report to the Ministry of Justice. Each Youth Justice Service (YJS) will be allocated a Performance Lead and an assessment will take place for each YJS to determine where they are placed within four performance quadrants.

The performance quadrants are as follows:

1. Strong Performance -YJS's with HMIP rating of Good or Outstanding.
2. Satisfactory Performance - this is the default rating with no further detail provided.
3. Improvement Needed - YJS's with HMIP rating of Requires Improvement, some weaknesses in Annual Plan and possibly a dip in performance.
4. Poor Performance - YJS with HMIP rating of Inadequate and do not comply with YJB grant conditions.

The main areas of focus are performance against the Standards for Children in the Youth Justice System, compliance with grant conditions, leadership, local priorities and continuous improvement. Performance will be monitored quarterly and for YJS's that cause concern, these will be monitored more frequently and may receive additional support. All YJS's will be monitored through an action plan and for those in quadrants 3 or 4, they will submit their action plan to the YJB.

These arrangements will commence over the course of the next few weeks with the first YJB visit scheduled for end May. The YJ Partnership Board chair has been informed and the Board will be invited to a development session in the near future to understand the level of scrutiny, as all statutory partners are required to meet the YJB expectation.

## **Prevention Projects**

The Turnaround and Community Youth Connector projects are mobilised and each team are working with children and making some strong connections with community providers.

Turnaround works with children who are essentially 'pre- youth justice', however, the vulnerabilities and risk that the children in this cohort present are as equally concerning as those in the statutory cohort. We are engaging with external providers to deliver diversionary and educational activities and have already received some excellent feedback from children and families.

The Community Youth Connectors are working with approximately forty children (girls) alongside their schools in the north and south of the borough. The project will work with children who present low level emotional wellbeing concerns and are at risk of offending and exploitation. Children can access direct work with the Connectors and also engage in group work. The children and families will be connected to community provision to access ongoing support. Schools are very keen to access support and the YJS is considering further bids to the Merseyside Violence Reduction Partnership to extend the reach of the offer.

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# Agenda Item 12

<b>Report to:</b>	Overview and Scrutiny Committee (Children's Services and Safeguarding)	<b>Date of Meeting:</b>	6 June 2023
<b>Subject:</b>	Work Programme 2023/24, Scrutiny Review Topics and Key Decision Forward Plan		
<b>Report of:</b>	Chief Legal and Democratic Officer	<b>Wards Affected:</b>	All
<b>Cabinet Portfolio:</b>	Children's Social Care Education		
<b>Is this a Key Decision:</b>	No	<b>Included in Forward Plan:</b>	No
<b>Exempt / Confidential Report:</b>	No		

## Summary:

To:

- seek the views of the Committee on the draft Work Programme for the Municipal Year 2023/24;
- invite Committee Members to participate in informal briefing sessions during 2023/24, rather than establish a traditional working group;
- identify any site visits to be made during 2023/23
- to identify any items for pre-scrutiny by the Committee from the latest Key Decision Forward Plan; and
- note the training proposals available from the Local Government Association and in-house; and
- to receive an update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee.

## Recommendations:

That:

- (1) the draft Work Programme for 2023/24, as set out at Appendix A to the report, be agreed, along with any additional items to be included and agreed;
- (2) informal briefing sessions be held, as and when required, rather than establish a traditional working group during 2023/24;
- (3) an informal site visit by Committee Members be undertaken to meet with the Making a Difference (MAD) Group, and consideration be given to any other site visits that Members would wish to be undertaken during 2023/24;

# Agenda Item 12

- (4) items for pre-scrutiny from the Key Decision Forward Plan which fall under the remit of the Committee, as set out in Appendix C to the report, be considered and any agreed items be included in the work programme referred to in (1) above;
- (5) the training proposals available from the Local Government Association and in-house be noted; and
- (6) the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee be noted.

## **Reasons for the Recommendation(s):**

To determine the Work Programme of items to be considered during the Municipal Year 2023/24; identify scrutiny review topics which would demonstrate that the work of the Overview and Scrutiny “adds value” to the Council; and to comply with a decision of the Committee to update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee.

The pre-scrutiny process assists Cabinet Members to make effective decisions by examining issues before making formal decisions.

## **Alternative Options Considered and Rejected:** (including any Risk Implications)

No alternative options have been considered as the Overview and Scrutiny Committee needs to approve its Work Programme and identify scrutiny review topics.

## **What will it cost and how will it be financed?**

There are no direct financial implications arising from this report. Any financial implications arising from the consideration of a key decision or relating to a recommendation arising from a Working Group review will be reported to Members at the appropriate time.

**(A) Revenue Costs** – see above

**(B) Capital Costs** – see above

## **Implications of the Proposals:**

<b>Resource Implications (Financial, IT, Staffing and Assets):</b> None
<b>Legal Implications:</b> None
<b>Equality Implications:</b> There are no equality implications.
<b>Impact on Children and Young People:</b> Yes  Any direct implications on the impact on children and young people are set out within the report.



**Climate Emergency Implications:**

The recommendations within this report will

Have a positive impact	No
Have a neutral impact	Yes
Have a negative impact	No
The Author has undertaken the Climate Emergency training for report authors	Yes

There are no direct climate emergency implications arising from this report. Any climate emergency implications arising from the consideration of reports referred to in the Work Programme will be contained in such reports when they are presented to Members at the appropriate time.

**Contribution to the Council's Core Purpose:**

Protect the most vulnerable: None directly applicable to this report. Reference in the Work Programme to any other reports could impact on the Council's Core Purposes, in which case they will be referred to in the report when submitted.

Facilitate confident and resilient communities: As Above

Commission, broker and provide core services: As Above

Place – leadership and influencer: As Above

Drivers of change and reform: As Above

Facilitate sustainable economic prosperity: As Above

Greater income for social investment: As Above

Cleaner Greener: As Above

**What consultations have taken place on the proposals and when?**

**(A) Internal Consultations**

The Work Programme Report is not subject to FD/LD consultation. Any specific financial and legal implications associated with any subsequent reports arising from the Work Programme report will be included in those reports as appropriate.

**(B) External Consultations**

Not applicable

**Implementation Date for the Decision**

Immediately following the Committee meeting.

<b>Contact Officer:</b>	Debbie Campbell
Telephone Number:	0151 934 2254
Email Address:	<a href="mailto:debbie.campbell@sefton.gov.uk">debbie.campbell@sefton.gov.uk</a>

**Appendices:**

# Agenda Item 12

The following appendices are attached to this report:

- Appendix A - Work Programme for 2023/24;
- Appendix B – Terms of Reference for the Committee (extract from the Council’s Constitution); and
- Appendix C - Latest Key Decision Forward Plan items relating to this Overview and Scrutiny Committee.

## Background Papers:

There are no background papers available for inspection.

## Introduction/Background

### 1. WORK PROGRAMME 2023/24

1.1 The proposed Work Programme of items to be submitted to the Committee for consideration during the Municipal Year 2023/24 is set out at **Appendix A** to the report. The programme has been produced in liaison with the appropriate Heads of Service, whose roles fall under the remit of the Committee.

1.2 Members are requested to consider whether there are any other items that they wish the Committee to consider, that fall within the terms of reference of the Committee (set out at **Appendix B**). The Work Programme will be submitted to each meeting of the Committee during 2023/24 and reviewed/updated, as appropriate.

1.3 During the 2022/23 Municipal Year, the Committee agreed the following items for consideration during 2023/24:

No.	Item	Item Reference
1.	Representatives of the Police and other Multi-Agency Safeguarding Hub (MASH) team members be invited to attend a future meeting of the Committee.	Minute No. 59 (2) (a) of 06/03/23 refers.
2.	Standing Advisory Council on Religious Education (SACRE) annual report.	

1.4 The above items will be inserted into the Committee’s Work Programme for 2023/24, as appropriate.

1.5 **The Committee is requested to comment on the Work Programme for 2023/24, as appropriate, and note that additional items may be added to the Programme at future meetings of the Committee during this Municipal Year.**

### 2. SCRUTINY REVIEW TOPICS / BRIEFING SESSIONS 2023/24

- 2.1 It is good practise for Overview and Scrutiny Committees to appoint a Working Group to undertake a scrutiny review of services during the Municipal Year.
- 2.2 Rather than establish a traditional working group during 2022/23, all Members of the Committee were invited to participate in informal briefings on the work of Children's Services and Safeguarding, where the information was deemed to be useful. Informal briefings took place during 2022/23 on the Ofsted Report and Improvement Plan and on the Leeds Family Values model.
- 2.3 It is proposed that the Committee adopts a similar approach during 2023/24 and informal briefings can be arranged as and when deemed necessary throughout the Municipal Year.
- 2.4 **The Committee is requested to agree to hold informal briefing sessions, as and when required, rather than establish a traditional working group during 2023/24.**

### **3. SITE VISITS**

- 3.1 Prior to the Covid pandemic, it was common practice for Overview and Scrutiny Members to undertake site visits that were deemed relevant to their remit. It has been suggested that Members of the Committee may wish to visit the Making a Difference (MAD) Group, comprised of Care Experienced young people who work closely with the Council to support the improvement and development of services for cared for children and care experienced young people. The venue would be a location of the Group's choosing, but it is likely to be either Magdalen House or Bootle Town Hall.
- 3.2 There may be other site visits that Committee Members would wish to undertake during 2023/24, in order to view services or hold discussion with service users.
- 3.3 **The Committee is requested to indicate if it wishes to undertake any informal site visits to meet with the Making a Difference (MAD) Group, and/or if there are any other site visits that Members would wish to undertake during 2023/24.**

### **4. PRE-SCRUTINY OF ITEMS IN THE KEY DECISION FORWARD PLAN**

- 4.1 Members may request to pre-scrutinise items from the Key Decision Forward Plan which fall under the remit (terms of reference) of this Committee. The Forward Plan, which is updated each month, sets out the list of items to be submitted to the Cabinet for consideration during the next four-month period.
- 4.2 The pre-scrutiny process assists the Cabinet Members to make effective decisions by examining issues beforehand and making recommendations prior to a determination being made.

# Agenda Item 12

- 4.3 The Overview and Scrutiny Management Board has requested that only those key decisions that fall under the remit of each Overview and Scrutiny Committee should be included on the agenda for consideration.
- 4.4 The latest Forward Plan, published on 28 April 2023 and covering the period 1 June 2023 - 30 September 2023 is attached at **Appendix C** for this purpose. For ease of identification, items listed on the Forward Plan for the first time appear as shaded.
- 4.5 There are two items within the current Plan that fall under the remit of the Committee on this occasion, namely:
- Placements North West - Children's Social Care Service Provision
  - SEND Joint Commissioning Plan
- 4.6 Should Members require further information in relation to any item on the Key Decision Forward Plan, would they please contact the relevant Officer named against the item in the Plan, prior to the meeting.
- 4.7 At the time of drafting this report, the Forward Plan to be published on 31 May 2023, covering the period 1 July 2023 – 31 October 2023, is in course of preparation and any items that fall under the remit of the Overview and Scrutiny Committee will be shared with Members prior to the meeting.
- 4.8 **The Committee is invited to consider items for pre-scrutiny from the Key Decision Forward Plan as set out in Appendix B to the report, which fall under the remit of the Committee and any agreed items be included in the Work Programme referred to in (1) above.**

## **5. LOCAL GOVERNMENT ASSOCIATION / IN-HOUSE – TRAINING PROPOSALS**

- 5.1 During 2023/24, the Council secured a commitment for the Local Government Association (LGA) to provide training for Members of the Committee.
- 5.2 At the time of drafting this report, the following training is planned:

### **Dedicated support for the Overview and Scrutiny Committee (Children's Services and Safeguarding)**

Workshop sessions have been organised as outlined within the table below and Members are requested to note the details:

<b>Session</b>	<b>Potential dates – in person (6.00 - 8.00 pm) Bootle Town Hall</b>
Session 1  Introduction to children’s scrutiny and work programming.	Tuesday, 30 May 2023
Session 2  Recap on Session 1, engagement and working with others.	Tuesday, 25 July 2023
Session 3  Demonstrating value and influence and creating a strong organisational culture.	Monday, 2 October 2023

### **Support for Members of all Overview and Scrutiny Committees**

Two alternative training sessions for all O&S Committee Members will be held on Thursday, 15 June 2023, in Bootle Town Hall from 3.00pm to 5.00pm and from 6.00pm to 8.00pm

### **Support for all Scrutiny Chairs and Vice-Chairs**

Details to be determined.

### **Mentor Support for the Chair of the Overview and Scrutiny Committee (Children’s Services and Safeguarding)**

Arrangements to be made.

### **All Member Corporate Parenting Briefing**

The Council’s Corporate Parenting Officer will provide in-house mandatory Corporate Parenting training, as in previous years.

Four alternative one-hour briefing sessions will be held remotely via Microsoft Teams during 2023/24. Sessions have been arranged as follows:

- Monday, 19 June 2023, 2.00 p.m.
- Tuesday, 11 July 2023, 5.00 p.m.
- Wednesday, 1 November 2023, 6.30 p.m.
- Wednesday, 24 January 2024, 4.00 p.m.

5.3 **The Committee is requested to note the training proposals available from the Local Government Association and in-house.**

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## 6. LIVERPOOL CITY REGION COMBINED AUTHORITY OVERVIEW AND SCRUTINY COMMITTEE

6.1 During the October/November 2019 cycle of meetings, the Overview and Scrutiny Management Board and the four Overview and Scrutiny Committees considered a report on the guidance produced by the Ministry of Housing, Communities and Local Government relating to Overview and Scrutiny in Local and Combined Authorities following on from the Communities and Local Government Select Committee's inquiry into Overview and Scrutiny. This Committee considered the matter at its meeting held on 15 October 2019 (Minute No. 32 refers).

6.2 The Overview and Scrutiny Management Board and the four Overview and Scrutiny Committees all agreed the recommendations contained in the report, one of which being that updates on Liverpool City Region Combined Authority Overview and Scrutiny Committee (LCRCAO&S) be included in the Work Programme report considered at each Overview and Scrutiny Committee meeting.

6.3 In accordance with the above decision, information on the LCRCAO&S is set out below.

### 6.4 **Role**

The Overview and Scrutiny Committee was established by the Combined Authority in May 2017 in accordance with the Combined Authorities Order 2017.

The role of the Overview and Scrutiny Committee is to:

- Scrutinise the decision and actions taken by the Combined Authority or the Metro Mayor;
- Provide a "critical friend" to policy and strategy development;
- Undertake scrutiny reviews into areas of strategic importance for the people of the Liverpool City Region; and
- Monitor the delivery of the Combined Authority's strategic plan.

### 6.5 **Membership**

The Committee is made up of 3 elected Members from each of the constituent Local Authorities of the LCR Combined Authority, along with one elected Member from both the Liverpool City Region Liberal Democrat Group and the Liverpool City Region Conservative Group.

Sefton's appointed Members are Councillors Desmond, Hart and Howard (Scrutiny Link).

Representatives of the Liberal Democrat Group and Conservative Group on the LCR O&S will be reported to the next Committee meeting.

## 6.6 Chair and Vice-Chair

The Chair of the LCRCAO&S cannot be a Member of the majority group. The Chair will be appointed at the first meeting of the Committee on 21 June 2022,

## 6.7 Quoracy Issues

A high number of meetings of the LCRCAO&S have been inquorate in the past.

The quorum for meetings of the LCRCAO&S is 14, two-thirds of the total number of members, 20. This high threshold is not set by the Combined Authority but is set out in legislation.

The Combined Authority's Monitoring Officer will be looking to work with the Monitoring Officers from the other Combined Authorities to identify what problems they are experiencing with Scrutiny and how/if they had overcome them. Representations to Government would also be considered once all options locally to resolve the quorum issue had been exhausted. The CA Monitoring Officer would then be able to provide evidence to Government that the quorum level was obstructing the work of scrutiny within the CA.

## 6.8 Meetings

Information on all meetings and membership of the LCRCAO&S can be obtained using the following link:

<https://moderngov.merseytravel.gov.uk/ieListMeetings.aspx?CId=365&Year=0>

## 6.9 Latest Meeting – 1 March 2023

The latest meeting of the LCRCAO&S was held on 1 March 2023 and was inquorate.

Matters considered at the meeting related to:

- Metro Mayor Steve Rotheram's Update
- Appointment to the Audit and Governance Committee.

The next meeting of the LCRCAO&S will be held on 21 June 2023. Matters discussed at this meeting will be reported to Members at the next meeting of the Committee.

Details of all meetings can be obtained using the link referred to above

## 6.10 *The Committee is requested to note the update on the Liverpool City Region Combined Authority Overview and Scrutiny Committee.*

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**OVERVIEW AND SCRUTINY COMMITTEE (CHILDREN'S SERVICES AND SAFEGUARDING)  
WORK PROGRAMME 2023/24**

<b>Tuesday, 6 June 2023, 6.30 p.m., Town Hall, Bootle</b>		
<b>No.</b>	<b>Report/Item</b>	<b>Report Author/Organiser</b>
1.	Sefton Place - Community Emotional Health and Wellbeing Services Update 2022 - 2023	Cheshire and Merseyside Integrated Care Board, Sefton Place
2.	Children's Services Improvement Programme	Jan McMahon
3.	Children's Social Care Overview of Practice	Joe Banham
4.	Safeguarding Learning and Development Offer	Joe Banham
5.	Education Scorecard	Tricia Davies
6.	Ofsted Inspection Report (Spring Term)	Tricia Davies
7.	Parent Governor Representative	Debbie Campbell
8.	Cabinet Member Update Reports	Tricia Davies/Laura Knights/Debbie Campbell
9.	Work Programme Update	Debbie Campbell

<b>Tuesday, 26 September 2023, 6.30 p.m., Town Hall, Southport</b>		
<b>No.</b>	<b>Report/Item</b>	<b>Report Author/Organiser</b>
1.	Children's Services Improvement Programme	Jan McMahon
2.	Ofsted Inspection Report (Summer Term)	Tricia Davies
3.	Cabinet Member Update Reports	Tricia Davies/Laura Knights/Debbie Campbell
4.	Work Programme Update	Debbie Campbell

<b>Monday, 14 November 2023, 6.30 p.m., Town Hall, Bootle</b>		
<b>No.</b>	<b>Report/Item</b>	<b>Report Author/Organiser</b>
1.	Children's Services Improvement Programme	Jan McMahon
2.	Cabinet Member Update Reports	Tricia Davies/Laura Knights/Debbie Campbell
3.	Work Programme Update	Debbie Campbell

<b>Tuesday, 30 January 2024, 6.30 p.m., Town Hall, Southport</b>		
<b>No.</b>	<b>Report/Item</b>	<b>Report Author/Organiser</b>
1	Children's Services Improvement Programme	Jan McMahon
2.	Cabinet Member Update Reports	Tricia Davies/Laura Knights/Debbie Campbell
3.	Work Programme Update	Debbie Campbell

<b>Monday, 12 March 2024, 6.30 p.m. Town Hall, Southport</b>		
<b>No.</b>	<b>Report/Item</b>	<b>Report Author/Organiser</b>
1.	Children's Services Improvement Programme	Jan McMahon
2.	Ofsted Inspection Reports (Autumn Term)	Tricia Davies
3.	Cabinet Member Update Reports	Tricia Davies/Laura Knights/Debbie Campbell
4.	Work Programme Update	Debbie Campbell

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## CHILDREN'S SERVICES AND SAFEGUARDING

### MEMBERSHIP

10 Councillors, 4 voting church and parent governor representatives.

### TERMS OF REFERENCE

To fulfil all the functions of an Overview and Scrutiny Committee as they relate to Children's Services and Safeguarding and to review and make recommendations for improvement in relation to the following functions:

- School Improvement
- Children's Centres
- Special Educational Needs
- Early Years
- Early help – schools
- Statutory LEA functions
- Education Welfare
- Safeguarding
- Children with disabilities
- Looked after Children
- Fostering and Adoptions
- Family Support Pathway
- Targeted Family Support
- Youth Offending Team
- Post 14 Education

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## SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

**FOR THE FOUR MONTH PERIOD 1 JUNE 2023 - 30 SEPTEMBER 2023**

This Forward Plan sets out the details of the key decisions which the Cabinet, individual Cabinet Members or Officers expect to take during the next four month period. The Plan is rolled forward every month and is available to the public at least 28 days before the beginning of each month.

A Key Decision is defined in the Council's Constitution as:

1. any Executive decision that is not in the Annual Revenue Budget and Capital Programme approved by the Council and which requires a gross budget expenditure, saving or virement of more than £100,000 or more than 2% of a Departmental budget, whichever is the greater;
2. any Executive decision where the outcome will have a significant impact on a significant number of people living or working in two or more Wards

Anyone wishing to make representations about any of the matters listed below may do so by contacting the relevant officer listed against each Key Decision, within the time period indicated.

Under the Access to Information Procedure Rules set out in the Council's Constitution, a Key Decision may not be taken, unless:

- it is published in the Forward Plan;
- 5 clear days have lapsed since the publication of the Forward Plan; and
- if the decision is to be taken at a meeting of the Cabinet, 5 clear days notice of the meeting has been given.

The law and the Council's Constitution provide for urgent key decisions to be made, even though they have not been included in the Forward Plan in accordance with Rule 26 (General Exception) and Rule 28 (Special Urgency) of the Access to Information Procedure Rules.

Copies of the following documents may be inspected at the Town Hall, Oriol Road, Bootle L20 7AE or accessed from the Council's website: [www.sefton.gov.uk](http://www.sefton.gov.uk)

- Council Constitution
- Forward Plan
- Reports on the Key Decisions to be taken
- Other documents relating to the proposed decision may be submitted to the decision making meeting and these too will be made available by the contact officer named in the Plan
- The minutes for each Key Decision, which will normally be published within 5 working days after having been made

Some reports to be considered by the Cabinet/Council may contain exempt information and will not be made available to the public. The specific reasons (Paragraph No(s)) why such reports are exempt are detailed in the Plan and the Paragraph No(s) and descriptions are set out below:-

1. Information relating to any individual
2. Information which is likely to reveal the identity of an individual
3. Information relating to the financial or business affairs of any particular person (including the authority holding that information)
4. Information relating to any consultations or negotiations, or contemplated consultations or negotiations in connection with any labour relations matter arising between the authority or a Minister of the Crown and employees of, or office holders under, the Authority
5. Information in respect of which a claim to legal professional privilege could be maintained in legal proceedings
6. Information which reveals that the authority proposes a) to give under any enactment a notice under or by virtue of which requirements are imposed on a person; or b) to make an order or direction under any enactment
7. Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime
8. Information falling within paragraph 3 above is not exempt information by virtue of that paragraph if it is required to be registered under—
  - (a) the Companies Act 1985;
  - (b) the Friendly Societies Act 1974;
  - (c) the Friendly Societies Act 1992;
  - (d) the Industrial and Provident Societies Acts 1965 to 1978;
  - (e) the Building Societies Act 1986; or
  - (f) the Charities Act 1993.
9. Information is not exempt information if it relates to proposed development for which the local planning authority may grant itself planning permission pursuant to regulation 3 of the Town and Country Planning General Regulations 1992
10. Information which—
  - (a) falls within any of paragraphs 1 to 7 above; and
  - (b) is not prevented from being exempt by virtue of paragraph 8 or 9 above, is exempt information if and so long, as in all the circumstances of the case, the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

Members of the public are welcome to attend meetings of the Cabinet and Council which are held at the Town Hall, Oriel Road, Bootle or the Town Hall, Lord Street, Southport. The dates and times of the meetings are published on [www.sefton.gov.uk](http://www.sefton.gov.uk) or you may contact the Democratic Services Section on telephone number 0151 934 2068.

**NOTE:**

*For ease of identification, items listed within the document for the first time will appear shaded.*

**Dwayne Johnson**  
**Chief Executive**



## FORWARD PLAN INDEX OF ITEMS

Item Heading	Officer Contact
Placements North West - Children's Social Care Service Provision	Eleanor Moulton eleanor.moulton@sefton.gov.uk
SEND Joint Commissioning Plan	Darcy De Winter Darcy.DeWinter@sefton.gov.uk

## SEFTON METROPOLITAN BOROUGH COUNCIL FORWARD PLAN

Details of Decision to be taken	<b>Placements North West - Children's Social Care Service Provision</b> To seek approval of arrangements associated with Placements North West - Children's Social Care Service Provision			
Decision Maker	Cabinet			
Decision Expected	22 Jun 2023			
Key Decision Criteria	Financial	Yes	Community Impact	Yes
Exempt Report	Open			
Wards Affected	All Wards			
Scrutiny Committee Area	Children's Services and Safeguarding			
Lead Director	Assistant Director - Integrated Life Course Commissioning			
Persons/Organisations to be Consulted	Internal and external stakeholders			
Method(s) of Consultation	Meetings, briefings, emails			
List of Background Documents to be Considered by Decision-maker	Placements North West - Children's Social Care Service Provision			
Contact Officer(s) details	Eleanor Moulton eleanor.moulton@sefton.gov.uk			

**SEFTON METROPOLITAN BOROUGH COUNCIL  
FORWARD PLAN**

Details of Decision to be taken	<b>SEND Joint Commissioning Plan</b> To seek approval of SEND Joint Commissioning Plan (new priorities)			
Decision Maker	Cabinet			
Decision Expected	22 Jun 2023 Decision due date for Cabinet changed from 25/05/2023 to 22 June 2023. Reason: the plan is still being developed			
Key Decision Criteria	Financial	Yes	Community Impact	Yes
Exempt Report	Open			
Wards Affected	All Wards			
Scrutiny Committee Area	Children's Services and Safeguarding			
Lead Director	Assistant Director - Integrated Life Course Commissioning			
Persons/Organisations to be Consulted	Integrated Health Board; Various Staff and Stakeholders			
Method(s) of Consultation	Briefings, Meetings and Email			
List of Background Documents to be Considered by Decision-maker	SEND Joint Commissioning Plan			
Contact Officer(s) details	Darcy De Winter Darcy.DeWinter@sefton.gov.uk			

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