



EAST RIDING

OF YORKSHIRE COUNCIL

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Dear Rachel

## **EAST RIDING COUNTY COUNCIL: PARTNERS IN PRACTICE TO THE DEPARTMENT OF EDUCATION**

### **PEER CHALLENGE OF SOCIAL CARE FRONT DOOR ARRANGEMENTS IN BARNSLEY: JUNE 2018**

Many thanks to you and your colleagues for taking part so openly and professionally in this peer challenge. This was the first challenge activity led by the East Riding of Yorkshire Council in its capacity as a Partner in Practice.

#### **1. Context**

In advance you asked us to specifically undertake:

A peer challenge to critically appraise the efficiency and effectiveness of Barnsley's Social Care front door arrangements, identifying strengths, areas for improvement and recommendations for further development.

- The challenge will look at all aspects of the front door. It will test Barnsley's front door self-assessment and will have a particular emphasis on practice and decision making (note: low levels of S47 compared with stat neighbours)
- The challenge will include an appraisal of partnership activity and engagement including the supporting role of the LSCB.

We agreed with you, that we would report our findings against the headings in the recently developed regional front door self-assessment which you had completed in December 2017, (validated January 2018). This PIP peer challenge was therefore a test of your self-assessment return in which all areas had been rated 'green'.

Continued/...

**Caroline Lacey**  
Chief Executive

The regional self-assessment tool is structured to encompass the following;

- Thresholds and policies (use of early help; consistent application of processes and procedures)
- Effectiveness of partnerships (levels of engagement, their application of thresholds, information sharing, partnership culture)
- Keeping every child at the centre (a culture that places the welfare of children at the centre)
- Quality of practice (quality of referrals, timeliness, managing risk, use of systems to screen, clarity of the role of the MASH, where/how does decision making take place? NFAs?)
- Resources (workforce) Nature, balance, capacity, capability, support, culture. Training: training and development activity, its availability, relevance and impact. Supervision. Social work methodology
- Good leadership and decision making (management of workflow; application of thresholds; monitoring)
- Outcomes (what difference is being made and how is performance changing? What systems are used to gather and monitor performance, how is PI used to inform improvement?).

Your preparatory work for this PIP Peer Challenge was extensive and was immensely helpful in enabling the PIP Peer Challenge team to appropriately focus its activity. The team received a warm welcome and excellent co-operation and support throughout the process. It was evident to us all that all those we met were committed to the LA and genuinely interested in learning and continued improvement.

It is important to stress that this was not an inspection. A team of peers used their experience to reflect on the evidence you presented through documentation, conversation and direct practice observation. We hope the conclusions, captured in our final presentation to you will assist you in your on-going improvement. We are as a team very confident that will be the case.

## 2. Process

The PIP Peer Challenge in Barnsley was provided by a team led by Pete Dwyer (ex-Director of Children's Services) and including experienced managers and practitioners from East Riding of Yorkshire Council. These were: David Radford, Service Manager, Safeguarding Children Board and Unit; Jonathan Connell, Early Years & Family Support Manager and Suzie Futter, Social Worker. The Challenge was managed and coordinated by Rob Mayall (Independent Consultant).

The team spent two days working in the local authority collecting evidence with which to frame their findings and then drew together and presented their conclusions on day three of the challenge. This activity took place on 26<sup>th</sup>, 27<sup>th</sup> and 28<sup>th</sup> June 2018. Prior to the on-site activity, colleagues in Barnsley shared a wide range of information with the team to support its preparations.

As well as a desk-based analysis of documentation, the PIP Peer Challenge process involved a wide range of on-site activities, including discussions with managers, practitioners and partners. We joined assessment visits, observed strategy meetings and decision-making practice and analysed a further 20 cases in specific detail.

This letter provides a summary of our findings which we discussed in detail at the feedback session with senior colleagues in Barnsley.

### 3. Summary of Findings

The review team concluded that in Barnsley;

- Thresholds are fully understood by staff
- Early Help is having a significant impact on preventing children from needing to be referred to Social Care
- Decision making at the Front Door is strong and consistent
- Assessments were of an extremely high quality, evidencing effective partnerships, good information sharing and critically a real focus on the lived experience of the child
- Barnsley's workforce is experienced, confident, and staff consider themselves to be well supported in their work
- We saw evidence of strong, supportive and visible leadership
- A robust performance and quality assurance framework is well embedded
- The review team considered that Barnsley's self assessment of front door activity was accurate, and well informed, with all areas rated as 'green'.

### 4. Areas for Further Consideration – Summary

During the feedback session we discussed a number of areas for further consideration which are detailed in the findings below. We would in particular highlight;

- The need to review the 'request for service' form and the role of business support and ensure easy access to a Social Worker is available
- Ensure appropriate use of strategy discussions/meetings to support practice rather than just to ensure procedural compliance
- The potential for more genuinely joint ABE interviews with the Police
- Consideration of how Barnsley could better capture the views of pre-verbal children
- Explore the potential for further maximising the significant experience of Social Workers in Screening
- The need to review the availability of local Pre-birth assessment guidance
- Ensure that immediate safety plans are written and shared with families rather than just verbally agreed.

### 5. Detailed Findings

#### 5.1: Thresholds and policies (use of early help; consistent application of processes and procedures)

##### Strengths

We consistently heard partners describe a journey to where thresholds now feel right, the front door is accessible and agencies are clear about their responsibilities. One partner commented on the current effectiveness of the front door compared with it previously being '*... a barrier, with 'us and them'*'. We saw evidence of more appropriate contacts (leading to referrals) and we found pro-active work with schools to improve the quality of information shared with the front door. This work with schools is being led by members of

the Assessment Team and is valued by the schools. Schools also value early help surgeries, which are reported as being accessible and valuable.

There is a positive culture of ‘sustaining the gains’ which enables step up and step down processes to work effectively.

We saw evidence of assessment documentation being continuously improved as a result of feedback from users.

We found that the Local Safeguarding Children’s Board (LSCB) has also been instrumental in providing challenge within the system and supporting continuous improvement. As an example, the LSCB commissioned an audit of decision making in S17/47 cases and found this to be consistent and in line with standards.

### **Areas for Consideration**

- You have initiated work with the assessment team and school clusters which helps them to better understand and have improved confidence in relation to thresholds and processes for contacts/referrals. We understand that this cluster activity was initially in response to some schools referring at rates which suggested a lack of such understanding. This has involved a social worker from the Assessment Team meeting with small clusters of schools on a regular basis. Those schools which had been involved in this initiative were immensely positive about its impact, describing it as having multiple benefits: building relationships between schools and named social workers, creating an opportunity for positive networking and the sharing of practice and issues across schools and building confidence in the system. It may be that you will choose to extend this activity differentially, focussing proportionately on clusters where need is perceived to be greatest, but perhaps also consider what might be a minimal ‘core’ offer to all schools – for instance access to a named social worker to discuss issues where there is a lack of clarity about the relevance of a formal contact/referral.

## **5.2 Effectiveness of partnerships (levels of engagement, their application of thresholds, information sharing, and partnership culture)**

### **Strengths**

There is strong evidence of collaboration, oversight and challenge by partners at strategic and performance levels. In particular, the Children’s Trust (CT) and the LSCB play a visible and active role in providing strategic oversight: the Improvement Plan is jointly governed by the LSCB/CT; the LSCB and CT receive and scrutinise monthly performance reports; the LSCB is well-sighted on performance at the front door through its audit processes.

There is a consistent narrative from partners regarding the journey to now. All those we spoke to describe a shared drive and ambition for continuous improvement.

Strong partner relations are evident and well reflected in the emphasis on respectful challenge. This is being modelled at the highest levels, with constructive challenge being actively encouraged.

We saw evidence of partners taking responsibility for their part in safeguarding rather than referring to children’s social care with low level concerns.

Information sharing protocols are embedded and there was evidence of appropriate application in practice.

As described above we noted effective, proactive relationship building with schools through cluster meetings, with targeted support to specific schools.

Schools also reported that when contacting the front door, they were met with efficient Business Support Unit call-takers and prompt access to the screening team.

There is strong evidence of partnership input to assessment, planning and decision making. We observed a step-down meeting and noted that partners were clear on their responsibilities and the part they might take in moving children towards positive outcomes.

Co-location is seen as strength and is facilitating timely sharing of information and effective decision making/planning.

### **Areas for Consideration**

- Keep under review how information from the health community is best included in the screening process
- Consider the degree to which professionals can/should be able to access consultation with social work trained screening professionals. When this does happen, it is reported as invaluable – enabling partners to discuss more problematic cases before deciding on whether to make a formal contact through to the front door
- The ‘Request for Service’ document has the potential to give the wrong message in predetermining the need for a particular service. In so doing it runs the risk of negating the role of the screening team. It would be more appropriate to talk of a “Request for Advice/Support”.

## **5.3 Keeping every child at the centre (a culture that places the welfare of children at the centre)**

### **Strengths**

Assessments are child focused and the voice of the child is clearly heard. The basis of decision making is the impact actions will have on the life of the child.

A genuine commitment is evident in the organisation to remaining absolutely child-centred and outcome focused rather than process driven. This was evidenced in the documents we read (including case files), our conversations with partners, managers and practitioners and our observations of practice. Particular examples include;

- Local team leaders reported positively on senior leaders’ commitment to keeping the child at the centre of social work practice
- The Improvement Plan shows ambitions to further increase the real engagement of children, for example you are enabling some children to chair their own reviews
- The workforce demonstrated a genuine child focused approach, articulating this in how they analysed cases and decided future actions
- ‘What is Life Like for this Child?’ on the assessment template is an excellent example of promoting a child focused approach to assessment
- The child’s voice was clearly visible and influential in the assessment process

- Good use of direct work with a range of tools being used by social workers to engage and enable children to express their views
- The CSE strategy meeting we observed demonstrated a very clear focus on the child as the focus of concern, whilst understanding the significance of the wider system.

### **Areas for Consideration**

- Ensure creative ways of capturing the lived or potential lived experience of a child unable to currently verbally express their views. You may want to consider including a question on the assessment template, 'if this child could talk, what might they say?'
- Reassure yourself that, wherever possible, the voice of the child is considered and where possible captured at the screening stage as well as in assessments.

## **5.4 Quality of practice (quality of referrals, timeliness, managing risk, use of systems to screen, clarity of the role of the MASH, where/how does decision making take place? NFAs?)**

### **Strengths**

This is an area of particular strength. The Improvement Plan demonstrates evidence of a clear move to deliver high quality practice, building upon the authority's previous focus that sought to ensure compliant practice.

Staff were able to describe a known social work methodology. A strengths based approach is evident and assessment templates find a helpful balance in guiding practitioners.

There is evidence of a good use of intervention tools deployed by staff and some evidence of the use of literature/research to support analysis within assessments.

An integrated CSE resource brings expertise and capacity which operates successfully within the mainstream early help and safeguarding system. Weekly CSE meetings take place, with a risk assessment tool actively completed and the CSE strategy meeting we observed demonstrated excellent multi agency working, through prompt sharing of relevant history and background information and clear decision making and action planning.

Assessment Team managers praised the preliminary activity of the screening team indicating that this has helped improve efficiency and effectiveness (and timeliness) of resulting assessments. From our experience this recognition of the part played by individual teams in making front door processes effective is not always evident elsewhere in the country. It illustrated a sense of 'whole team' and spirit of shared endeavour.

The strategy meetings we observed were well attended and demonstrated detailed sharing of risk and decision making.

A proactive approach is taken to identifying potential risks posed when children from out of area are placed locally.

There is an impressive language of 'sustaining the gain' – ensuring that organisational processes do not disrupt interventions, for example in striving for continuity of relationships in the step-up and step-down arrangements.

The co-location of different agencies has been very effective. Benefits we heard about and observed included: improved information sharing, quick decision making and robust strategy meetings.

The authority has undertaken a review of EDT contacts during May 2018. A sample of 30 contacts were all deemed to have been dealt with appropriately.

### **Areas for Consideration**

- Some practice and cultural issues are getting in the way of police and social workers jointly undertaking ABE interviews. In common with a number of the points made in this letter, this issue is not unique to Barnsley and it is something you are conscious of and intend to address through dialogue and debate. The challenge is not helped by limited observation facilities which prevent appropriate participation by social workers in the ABE process
- Consider whether separate triaging might help manage the high volume of DA/DV contacts. We understand the reasons for the high volume and if this cannot be addressed then perhaps the way in which the volume is managed can be
- Consider the respective roles of business support and the screening team in order to ensure optimum efficiency and a minimisation of duplicated activity
- Ensure that safety plans are written and immediately shared. We have no doubt that social workers have safety planning conversations with families and these were evident in some of the case work we analysed/observed, but an immediate shared written record of those conversations would be of benefit to families and provide assurance of timely intervention and support.

### **5.5 Resources (workforce): nature, balance, capacity, capability, support, culture. Training: training and development activity, its availability, relevance and impact. Supervision. Social work methodology**

#### **Strengths**

You have a stable, experienced and enthusiastic workforce and you are not reliant on agency workers. A workforce that cares about Barnsley as a place and are committed to the organization that they work for.

The screening team, by careful design, comprises experienced social workers. This ensures a high level of competence in a critical area of children's service activity.

There is evidence of close working relationships across front door practitioners and managers with a good awareness of each other's roles.

Social workers reported regular and consistent supervision which looks at cases as well as CPD.

Staff are engaged in continuous improvement. As an example we heard about how staff feedback has informed the selection and development of 'TED'.

There is evidence of social workers being deployed flexibly across screening and assessment functions to benefit the service and create professional development opportunities.

There is a wide range of professional support and development for social workers and increased opportunities to specialize. Staff also described improved access to training and development, sometimes on a South Yorkshire footprint.

### **Areas for Consideration**

- The availability of police officers to undertake joint visits following strategy meetings was raised as a challenge
- Police colleagues reported recent increase in the number of referrals and strategy meetings from social care to police. They are unclear whether this is a consequence of increased demand or changing processes and would benefit from communication to clarify this
- Consider enhancing development opportunities for staff, by ensuring opportunities exist for wider rotation. A particular example of this might be in the screening team, where there could be a real value in a measured rotation of staff to ensure that as well as staff having depth of experience, they also have regularly updated current or recent experience in the broader system and particularly face to face work with children and families.

## **5.6 Good leadership and decision making (management of workflow; application of thresholds; monitoring)**

### **Strengths**

Partners and staff consistently report how senior leadership have established and modelled a strong positive improvement and learning culture. This was articulated as;

- high support/high challenge, with reference to the most senior leaders actively seeking challenge
- visible leaders, with the Director of People and other senior colleagues visiting teams and accompanying front line social workers in their day to day practice (this was welcomed by social workers)
- a child-centered approach as evidenced through strategic documents, processes and messages from leaders
- a positive encouragement for social care to be more outward facing
- collaborative approaches which engage staff in continuous improvement and an ambition for ever-improving outcomes for children.

There is evident oversight of practice from different tiers of management. This includes modelling of best behaviours from the leaders including political leaders at the head of the organization.

Integrated Front Door team managers work effectively as a team. The screening and assessment teams show mutual respect and share workloads as appropriate. There is a strong sense of a team approach to a shared endeavour.

There is appropriately strong leadership of the screening team, modelling to all those around an open proactive and child focused style.

The involvement of managers in clear decision making is consistently well recorded.



### Areas for Consideration

- We were not always presented with a clear, coherent, precise and consistent description of organisational arrangements and current performance. We are clear that this is not because of system inconsistencies or performance failings, but that it is about all staff being clear about the key facts, figures and messages about improvement priorities.

### 5.7 Outcomes (what difference is being made and how is performance changing? What systems are used to gather and monitor performance, how is PI used to inform improvement?)

#### Strengths

The implementation of the Improvement Plan provides evidence of moving beyond compliance to quality. This is an important marker of your improvement journey and indicates an appropriate confidence in your performance metrics/trajectory and the efficiency of your systems and processes.

We saw high quality and comprehensive monthly performance reports, showing positive trends and including reflective analysis. We know from our numerous conversations that there is a process of analysing reports at the most senior level, crafting key messages, which turn information into intelligence, are then cascaded to managers.

There is a clear ownership of performance across the system:

*'It feels like performance is everybody's business'* (Team leader).

There is evidence of audit and analysis in relation to aspects of performance variance. An example of this would be S17/S47 audit activity previously referenced in this letter.

We noted timely completion of assessment processes.

Staff are comfortable and confident in using the IT system. They reported that TED is easy to use and produces quality reports.

#### Areas for Consideration

- Ensure that IT systems support step up and step down processes between early help and social care. Aim for assessments which build from one another and provide continuity of analysis and intervention rather than operating separately.

### 5.8 Case File Audit

By agreement we felt strongly that we could not comment confidently against the remit of the peer challenge without opportunity to assess the quality of practice in a sample of cases. This approach was warmly welcomed by the LA.

As a result, we identified 10 criteria against which to judge quality in assessment practice. Used that criteria to reflect on 20 case files including S17 and S47 assessments recording findings of whether our criteria was met/not met.

In undertaking this work we were mindful to consider the appropriate use of S17 or S47 and the appropriateness of decision making where cases resulted in NFA post-assessment. In all cases the team agreed with the decisions taken.

The results are attached as Annex 1 this letter. The overarching headline is that we saw high levels of compliance with the quality criteria chosen and if these cases are representative then frontline practice in Barnsley is of a consistently high standard.

## 6. Next Steps

You and your colleagues will wish to consider how you incorporate the team's findings into your existing improvement plans. We hope that you find our reflections helpful. We have included a copy of the feedback presentation provided at the meeting that followed the review.

It is important that this letter describes accurately what we have observed and analysed and that it provides you with an appropriate summary to facilitate change. If this letter contains any factual inaccuracies, please do not hesitate to contact Rob Mayall and amendments will be made as appropriate.

If you have any concerns or comments about the analysis or recommendations, do not hesitate to contact Pete Dwyer in the first instance.

It would be very helpful to East Riding if you could also complete the attached feedback template so that we can further develop the quality of our support to others as a Partner in Practice authority. Your feedback may also be shared with the DfE.

Once again, thank you for agreeing to receive a PIP Peer Challenge and to everyone involved for their positive and open participation.

Yours sincerely

A handwritten signature in purple ink, appearing to read 'K. P. Hall', written in a cursive style.

Kevin Hall  
Director of Children, Families and Schools  
East Riding of Yorkshire Council

| Criteria                              | Commentary   | % compliance |
|---------------------------------------|--|--------------|
| Evidence of a strength based approach | Use of 3 houses /other tools<br>Use of research<br>Resilience language<br>Strengths not always emphasised enough                                     | 75           |
| Use of historic information           | Excessive cut and paste can lead to an overwhelming volume of information for the family<br>Some repetition within the assessments<br>Can be lengthy | 100          |
| Assessment of risk                    | No pre-birth assessment tool<br>Risk not always prioritised<br>Lot of similarities between S17/47  | 95           |
| Partner info/ engagement              | Good depth of detailed information   | 95           |
| Voice of child                        | The views of non-verbal need to be captured<br>'What is life like for the child?' – Good   | 90           |
| Family engagement                     | Both parents and extended family members involved  | 95           |
| Sensitive to the equalities framework | Where a box has been checked, ensure that information is provided to substantiate.   | 75           |
| Management oversight                  | Often an in depth rationale  | 100          |
| Outcome appropriate                   | Good handover to early help<br>Not sure why a strategy meeting was needed prior to IPC   | 85           |
| Timeliness                            |  | 100          |