



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru  
Care and Social Services Inspectorate Wales

**Inspection of the arrangements for the  
Assessment and Care Management  
of Children in Need in Wrexham  
County Borough Council**

**March 2013**



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## **Date of Inspection**

12 March 2013-15 March 2013

## **Inspection Team**

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## **Acknowledgements**

The inspectors wish to thank the council officers for the support provided to the inspection both in terms of prior planning and in supporting the on site inspection activity, and to the families, carers, partner agencies and staff who participated in this inspection.

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## 1. Introduction

- 1.1 In 2010 the Care and Social Services Inspectorate Wales identified assessment and care management of children as areas for improvement for Wrexham County Borough Council (CBC). An inspection was undertaken in 2011 and the current inspection is a follow up inspection the need for which was identified in the 2011/12 annual evaluation of performance report.
- 1.2. The 2011 inspection of the arrangements for the assessment and care management of children in need in Wrexham CBC was undertaken in November and December 2011. The inspection found some examples of good practice, positive relationships with partner agencies and an energetic approach to the development of preventative services. The inspection also found that significant improvement was needed in a number of critical aspects of the assessment and care management processes. Some areas requiring improvement had been identified by the council's own performance management. Improvement actions were being introduced but these had not at the time of the inspection provided clear evidence of improved outcomes for children.
- 1.3 The performance evaluation report 2011/12 recognised that the council was continuing to make improvements in several areas, including the timeliness of child protection process and procedures. The continuing high rates of re referral in children's services, the slow rate of improvement in the timeliness of initial and core assessments and in some performance indicators relating to looked after children however, prompted a further inspection of children's services.

1.4 This inspection has concentrated on the performance of the council in responding to referrals and contacts. A sample of cases referred to the council between October and December 2012 was selected for inspectors to analyse. These dates were chosen in order to try to gain as up to date a picture of performance as possible but it is acknowledged that this has limited the extent to which the council's performance, in terms of the longer term management of cases eligible for social services intervention, can be commented upon.

## 2. Methodology

- 2.1 The field work consisted of a team of inspectors from the Care and Social Services Inspectorate Wales conducting inspection activities on site in Wrexham, over four days from 12 March 2013 to 15 March 2013.
- 2.2 The inspection's focus was to evaluate the timeliness and quality of assessment and support to children in need and their families both from council services and from those which the council commissions and operates in partnership.
- 2.3 The inspection team looked at the cases of children who had received an initial assessment from the Children's Prevention and Social Care service. The cases had been referred to the council between 1 October 2012 and 31 December 2013. In line with the complexity of cases there had been limited involvement in some cases, and more extensive involvement in others.
- 2.4 The inspection team looked at council performance in relation to four assessment criteria, both in terms of current performance and possibilities for improvement for the future:
- (i) Children, young people and their families/carers are supported by assessment, care management and review practices which comply with national policy, statutory guidance and regulations.
  - (ii) Children, young people and their families/carers benefit from consideration and use of a range of support services appropriate to their needs.
  - (iii) Children and young people and their families/carers are supported by staff who are properly supervised and receive appropriate management support.
  - (iv) Improved outcomes for children, young people and their families/carers are supported by effective, consistent performance management and quality assurance.

- 2.5 Before the commencement of the fieldwork on site the council provided a range of documents regarding the council's delivery of support to children and families in need of assistance.
- 2.6 On site the inspection team examined nineteen cases that had received an initial assessment, some of which had then been provided with support from the children's services. A sample of staff supervision files was also read.
- 2.7 The inspection team met with social workers, team managers, senior managers, children, families and partner organisations. Evidence was gathered from all these activities.
- 2.8 Two families who had received a referral to Together Achieving Change (TAC) were also interviewed by inspectors
- 2.9 Additional evidence was gained from CSSIW thematic and regulatory inspection activity.



### **3. Headline Summary**

- 3.1 The case file analysis indicates that the council has improved performance in a number of areas. These include the timeliness of initial assessments and of decision making. The council has introduced a number of measures to improve the quality of recording. A visit report form has improved reporting of whether a child was seen during the visit. There was improvement in the quality of recording found on the case files.
- 3.2 The quality of assessments was found to be inconsistent and remains an area requiring improvement. Examples of satisfactory assessments were seen by inspectors. Other assessments were seen to be weak, lacking in detail and analytical rigor, particularly regarding risk assessment and risk management. The council has itself identified that further improvement in the quality of assessments is needed and is in the process of introducing new risk assessment procedures. These changes were scheduled to come into operation after the inspection was completed.
- 3.3 The council has achieved improvement in terms of the reduced number of re referrals received by the department. However, two examples where multiple referrals were received before an assessment was undertaken were seen. There was a further case where the case analysis indicated that earlier assessment should have been undertaken. Of the 19 cases reviewed by inspectors, 7 were completely new referrals and 12 had been referred to the department on 1, or more, previous occasion. In some cases this was within 12 months. It is recommended that the council review the procedures it has in place to ensure that repeat referrals are consistently allocated for assessment in line with its policy.
- 3.4 The council has continued to develop its preventative services and inspectors received very positive feedback from service users who had accessed the Team around the Child (TAC) service. In addition working relationships with other agencies were reported to work well.

3.5 The council have taken measures to improve the management of performance including the creation of additional assistant manager posts and implementation of regular supervision. Although a comprehensive quality assurance programme was not in place at the time of the inspection, inspectors were informed that this will be in place by June 2013 and this should support the further improvement that is needed in assessment and care management performance.

## **4. Evaluation in relation to Criteria 1**

4.1 Children, young people and their families/carers are supported by assessment, care management and review practices which comply with national policy, statutory guidance and regulations.

### **Strengths**

Policies and procedures are in place and easily accessible.

Timely decision making in relation to referrals received.

Allocation of referrals to qualified workers

Timely review of CIN,CP and LAC cases reported

### **Areas for development /improvement**

Quality of assessments and planning.

Review of repeat referrals to ensure more timely allocation of referrals.

Further development of RAISE system to display record of all CP and other checks.

Review of the incidence of strategy discussions as opposed to strategy meetings.

Recording of risk assessment.

4.2 In Wrexham the Child and Family Assessment Team (CAFAT) receive all referrals and contacts made to the department. There is a permanent duty manager who manages and oversees the process. A member of the Together Achieving Change (TAC) team is also permanently placed in the duty room to facilitate discussions about whether a child or family is most appropriately allocated to a social worker in the Prevention and Social Care department, or offered a service by TAC. A CAFAT duty desk manual, Eligibility Criteria for Referral to the Prevention and Social Care department document and the Classification of Contact to CAFAT document is available to inform decisions.

- 4.3 Following the introduction of new procedures to distinguish contacts from referrals, the council has achieved a reduction in the rate of re referrals it receives. In the cases analysed, two examples were seen where repeat referrals were not allocated for assessment until after several referrals had been received. This is not in line with the council's policy. The introduction of a monthly multi agency audit of unallocated referrals (as adopted by some councils) may provide a more effective quality assurance of this part of the process.
- 4.4 In the case file sample, decisions were seen to have been made within 24 hours for 17 of the 19 cases, and decision making was seen to have been appropriate to this point for the majority of cases read.
- 4.5 For the majority of the cases analysed, assessments were undertaken on time. This observation is consistent with the performance indicators provided by the council. Although some assessments were identified as satisfactory by inspectors, others were seen to be weak or poor. One inspector described them as incident led assessments as opposed to holistic and they tended to be descriptive rather than analytical. One case was referred to the Head of Service because of the poor quality of the assessment recorded on the file and the lack of evidence that required actions had been taken. This referral was responded to quickly.
- 4.6 Chronologies and genograms were in place on nearly all files. Management oversight ensures that this is the case before files are closed or transferred. The genograms were sometimes very simple and the chronologies were not always completed in a way which indicated that they were regarded as a useful casework tool. The input of other agencies to assessments was seen and reflects the positive interagency working relationships that were reported to inspectors. There was limited evidence of formal feedback being given to referrers.

- 4.7 The council has acknowledged that improving the quality of assessments is a continuing priority for them. A combined assessment document was introduced recently. Its stated aim is ‘to be a more accessible document for children and young people and parents to read and understand and therefore enable them to feel that they are part of the assessment process’. A number of cases were chosen, as part of the case sample, where the combined assessment document had been used. These indicated the need for practitioners to ensure that analysis of the individual child as well as the family is fully recorded. This was only a small sample and did not provide conclusive evidence of improvement in the quality of assessments.
- 4.8 Increased management support and training on a new risk assessment methodology was being introduced at the time of the inspection. The council is a high achiever in terms of the allocation of referrals to qualified workers but this has not ensured that the required improvement in the quality of assessments across the board has been consistently demonstrated and further management activity to lead this improvement is needed.
- 4.9 Inspectors found that child protection strategy discussions were in general held in a timely way but saw very little evidence of strategy meetings being held. The council and police are aware of this issue and it will be considered under the Vanguard project which is being developed.

## **5. EVALUATION IN RELATION TO CRITERIA 2**

5.1 Criteria 2:- Children, young people and their families/carers benefit from consideration and use of a range of support services appropriate to their needs.

### **Strengths**

Good range of preventative services available.

Common assessment framework is used for referral to TAC or Social services prevention and social care.

TAC is receiving very positive feedback from service users and professionals.

Multi agency network events.

### **Areas for development/improvement**

Further development of therapeutic foster carer resource.

Voice of child needs to be more evident in assessment documentation in order to ensure that services are most appropriate to individual need.

5.2 The analysis of case files indicated that there has been improvement in the recording of ethnicity and choice of language since the last inspection with ethnicity recorded on 17 of the files read and language on 18. The religion of the child is less well documented.

5.3 Positive feedback was received from interviews with staff and service users about the services provided. There was felt to be a wide range of services and positive comments were made regarding the family centres, the Family Information Service, Flying start, the Integrated Family Support Service and the TAC. There was felt to be good interagency communication and working relationships. Most preventative services are reported to be easily accessible but waiting lists for Action for Children services were referred to and whilst there is no waiting list for TAC, allocation for this service is sometimes felt to be slow. Interviews with other agencies supported the positive view of interagency working relationships and are reflected in the Big Lottery report (July 2011-12).

- 5.4 The multi agency network events were seen as a very positive method of sharing information and understanding.
- 5.5 The TAC service which involves a multitude of services and agencies has an important part to play in the delivery of preventative services in Wrexham. Wrexham has taken a lead role in the development of this service which now provides a service to over 200 children and families.
- 5.6 The Common Assessment Framework (CAF) is used to make referrals to Prevention and Social Care or TAC; to simplify the referral process and avoid gaps in provision. Evidence was seen during the case file analysis of cases transferring from Prevention and Social Care services to TAC and back again as the needs of the family changed. Inspectors saw indications that the success of TAC project could result in it becoming the 'catch all' for cases that were borderline in eligibility for Prevent and Social Care. The quality of initial assessment including the analysis of risk is of primary importance to ensure that cases are appropriately allocated. Cases open to TAC should also be monitored systematically to ensure that needs are being met effectively and the level of risk has not escalated.
- 5.7 Inspectors spoke with two service users who had been involved with TAC services and both were extremely fulsome in their praise of the service. Another, who had recently been referred, spoke about the prompt response from the service.

- 5.8 The council provided the inspectors with information about Looked after Children in Wrexham. The numbers of children who become looked after each month has remained similar to last year but the number remaining in care for longer periods has increased slightly. The council is continuing to develop its resource of therapeutic foster carers to enable it to meet the needs of children and young people coming into care within Wrexham wherever possible. The numbers of therapeutic foster carers has not increased as quickly as hoped. There are now 3 sets of fulltime carers and 2 who provide respite. 2 more potential full time carers are currently being assessed and a recruitment campaign is planned for May.
- 5.9 The council reports improvement in the timeliness of visits to children including the statutory visits to looked after children. Their performance statistics indicate that 71% of children were seen during the initial assessment for the first 9 months of this year. This is supported by the case file sample read by inspectors where in 8 of the 19 cases a record was made that the child had been spoken with and in 16 it was noted that the child was observed. Analysis of the child being kept at the forefront of the process or of their wishes being considered was less positive. There was limited formal evidence on the case files of the assessment being shared with people, however closure letters seen on files and feedback received from a service user that the assessment had been shared with them in person and in writing suggested that this may happen more often than is recorded.



## **6. EVALUATION IN RELATION TO CRITERIA 3**

6.1 Criteria 3:- Children and young people and their families/carers are supported by staff who are properly supervised and receive appropriate management support.

### **Strengths**

Increase in management support through creation of new ATM posts.

Regular supervision being provided.

Good access to training.

### **Areas for development/improvement**

Consideration of staff and manager capacity.

Further development of RAISE IT system to support required standard of recording.

6.2 Staff stability within children's services overall has improved considerably and although 3 members of staff have left the CAFAT team in the last 12 months the council has had a good response to adverts and is expecting to fill all vacancies. At the time of the inspection however, the CAFAT team also had temporary vacancies due to maternity leave and internal promotions resulting a number of agency staff (5) in a team of 12 being in post. Current sickness rates in CAFAT are relatively low.

6.3 The findings of the caseload analysis raised questions for the inspectors about the capacity of the workforce and management team to bring about the required improvements in assessment and in recording. These were explored further in staff and manager interviews. A number of factors are thought to be relevant to this discussion.

- 6.4 In the CAFAT team only three members of staff were reported to have more than 3 years experience with the rest being more recently qualified. The relative limited experience of staff working in this area places particular pressures on management support.
- 6.5 The issue of the numbers of qualified social workers employed by the council in relation to the child population figures for Wrexham was raised in the previous inspection report. The council has taken some measures to address capacity issues through the employment of one additional social worker in the Leaving Care Team and two additional assistant team manager posts, one deployed in the Family Support Team and one in CAFAT.
- 6.6 Caseload numbers appeared to inspectors, to be high within the CAFAT team. Both managers and social workers acknowledged that the numbers were partly inflated by cases which were awaiting formal closure. Managers also pointed to the fact that each child in a family is counted separately.
- 6.7 During the last inspection the requirement for social workers to maintain both electronic and paper files was contributing to the difficulties being experienced in maintaining good quality recording. Social workers are now only required to work with electronic files on a day to day basis but are required to create paper files at the point of closure for all cases where there was previous involvement or information. This seems to be contributing to the build up of cases awaiting closure on caseloads. Managers have taken action to address this by providing support workers to help complete these tasks. Although measures are being taken to reduce caseload size the rate of through put of cases dealt with by CAFAT as the department responds to the higher than average number of referrals it receives, will continue to cause work pressures and require the council to consider whether there is sufficient capacity to achieve the required improvements.

## **7. EVALUATION IN RELATION TO CRITERIA 4**

7.1 Criteria 4:- Improved outcomes for children, young people and their families/carers are supported by effective, consistent performance management and quality assurance.

### **Strengths**

Supervision takes place on a regular basis and is valued by staff and managers.

Managers are provided with regular performance reports on an individual team level.

### **Areas for development/improvement**

Further development of the RAISE system to support practice.

Introduction of quality audit arrangements to support targeted improvement actions.

Involvement of service users.

Increased visibility of member engagement with front line staff.

7.2 The council has demonstrated improvement in the recording of supervision. This was identified as an area for improvement in the 2012 inspection report. Supervision files and supervision notes on case files read by inspectors, as well as interviews with staff and managers, indicated that supervision takes place on a regular basis and is felt to be effective. Annual performance development reviews are also taking place. The council provided evidence of capability issues being taken up with staff members.

7.3 In general training was felt to be accessible and useful. It is available to new members of staff and mandatory training is provided on a rolling programme ensuring that it is available. Training is not provided to agency staff.

- 7.4 The introduction of the visit proforma since the last inspection appears to have brought about improvements to the recording of home visits and to the recording of when a child has been seen. The council recognises the need for further improvements to be made to the RAISE IT system to enable social workers to maintain case chronologies more easily and for child protection and other checks to be easily seen, whether they have resulted in a positive report or not. Both these issues were also identified by inspectors. A risk assessment tool to support the introduction of a new risk assessment model is being embedded to the RAISE system.
- 7.5 Performance management arrangements include quarterly performance workshops and monthly meetings between the head of service, team managers and assistant team managers to review individual team performance. The performance manager visits individual teams to explain performance issues and specific performance improvement sessions have been held on subjects such as recording practice. Individual members of staff are encouraged to improve performance by individual action plans. However performance in some of the areas referred to earlier in the report, continues to show only slow improvement and in these areas the council needs to analyse the factors that are impinging on their improvement objectives.
- 7.6 The council has stated that they will be introducing a new audit process to be operational from June 2013, which will provide information on the quality of decisions and assessments and include families in this process. At present however, there is limited evidence of audit arrangements bringing about the required improvement in the quality of assessments.

7.7 Wrexham recognises the need to increase the participation and engagement of children and families in order to improve the quality of services through their feedback and contribution to service design. Service user engagement is currently better developed in some services than others but some innovative ideas are being used to improve engagement in some of the more challenging areas which includes looking at practitioner behaviour. The council has developed 'The Big P' participation strategy for all children and young people. A network of participation activities is centred on the Wrexham Youth Forum 'Senedd Yr Franc which also links into the Welsh Youth parliament. A junior LSCB is also being developed.

7.8 The Lead member has undertaken visits to all front line teams recently, but inspectors found that some staff were not aware of member visits having taken place and the council may wish to reflect on these arrangements for the full benefit of them to be realised.

## **8. Recommendations**

- 8.1 The council has taken steps to introduce extra capacity to children's services. The high rate of referral indicates the need for a further review of the capacity in CAFAT.
- 8.2 Regular audit of decisions to close referrals without undertaking an initial assessment would provide the council with increased scrutiny of decision making and highlight cases where repeat referrals had been received.
- 8.3 The council needs to consider the introduction of more robust systems to ensure that it records the sharing of assessments with families
- 8.4 The use of strategy discussions and strategy meetings should be reviewed.