



Joint inspection of services to protect
children and young people in the
West Dunbartonshire Council area

20 March 2012



HAPPY TO TRANSLATE

The inspection of services to protect children¹ in the West Dunbartonshire Council area was carried out in October and November 2011. We looked at the services provided by health, the police, the council and the Children's Reporter. We also looked at the services provided by voluntary and independent organisations. Our report describes how good they are at protecting children and keeping them safe. To find this out we read a sample of children's files which were held by these services. We talked to a number of children and their parents and carers to listen to their views about the services they had received. We also spoke to staff in these services who worked with children, parents and carers and to senior managers who were responsible for these staff and the services they provided.

What we found and tell you about in this report is based on a sample of children and families. We cannot promise that this will be the same for every child in the area who might need help.

A team of inspectors gathered all the information and helped to write this report. These inspectors have experience of working across the range of services involved in protecting children. Inspection teams include professional staff who work in council areas elsewhere in Scotland.

The Care Inspectorate carried out inspections of West Dunbartonshire fostering and adoption services linked to the inspection of services to protect children. Any recommendations or requirements are reported on the Care Inspectorate website, www.careinspectorate.com

¹ When we refer to children in this report we mean children and young people under the age of 18 years.

Contents

1. The area	1
2. Particular strengths that make a difference to children and families	2
3. Example of good practice	2
4. How well are the needs of children and families met?	3
5. How good is the management and delivery of services?	5
6. How good is leadership and direction?	6
7. How are services improving?	6
8. What happens next?	7

1. The area

West Dunbartonshire is situated in the West of Scotland. It covers an area of 159 square kilometres. It is one of the smallest and most deprived council areas. West Dunbartonshire has a population of 90,570 with 20.4% under the age of 18 years compared to the Scottish average of 19.9%.

The number of children referred to the council for child protection enquiries decreased between 2007 and 2010. The level of referrals is lower than that for Scotland as a whole. The proportion of children on the Child Protection Register (CPR) in West Dunbartonshire council is 1.7 per 1000 which is lower than the national average 2.8 per 1000.

2. Particular strengths that made a difference to children and families

- Getting the right kind of help as soon as difficulties arise and for as long as it is needed.
- Making sure children are safe and well cared for when placed with relatives and friends in an emergency.
- Working hard to help children remain, whenever possible, in their own families, schools and communities.
- Getting to know them well and taking their views seriously.

3. Example of good practice

- **Support to Children and Families** – the Community Planning Partnership’s approach to improving outcomes for vulnerable children and families

4. How well are the needs of children and families met?

Children can exercise their right to be safe. They are helped to do so through useful information, advice and support at school, in their homes and communities. Staff actively promote children’s knowledge and skills in using the Internet and mobile phones safely. Parents, carers and staff are well-informed about risks to children and how they can help them to keep safe. **Support to Children and Families** provides a comprehensive approach for timely, well co-ordinated help to improve the lives of children and families. A wide range of beneficial parenting support is provided in groups or with individuals to suit the particular needs of families. This is

very effective in developing parenting skills and building confidence. Staff ensure that children are kept safe by seeing them at home frequently, including making unannounced visits. Children affected by domestic abuse and parents of vulnerable unborn babies are identified early and support is put in place quickly. Families report that the help they get is giving them and their children better opportunities in life.

Staff, including those working with adults, recognise signs that children may be in need of protection. They are alert to concerns which build up over time. Staff share relevant information well and act on concerns promptly. Social workers and police officers plan carefully how they will investigate concerns about children. They are sensitive to children's feelings and give consideration as to how best to communicate with them. Families report positively on the high levels of support they receive when concerns are being investigated.

When it is not safe for children to remain at home, alternative arrangements are made to care for them without delay. Staff make thorough checks to ensure other family members or friends can provide suitable care arrangements in an emergency. They use legal measures and foster placements appropriately to keep children safe.

The lives of children in need of protection are improving. Children and families are benefiting from consistent relationships with staff who work closely together to meet their needs. Managers are strongly committed to keeping families together and ensure that children get all the help they need to continue to be cared for by their parents. When it is necessary for children to be looked after away from home, they benefit from arrangements to keep them at their own school and in contact with family and friends. Staff work hard to ensure that vulnerable children attend school regularly. A wide range of additional supports are successfully helping children to achieve more and raise their self-esteem. The health needs of most children are identified and met well. A dedicated service ensures that all children looked after away from home have their health needs assessed and any identified needs followed up quickly. Children looked after at home could benefit from a similar service. Effective

services are available to help children recover from abuse and neglect. Staff and carers receive valuable advice to help them understand and respond well to children's emotional needs. Children affected by parental drug and alcohol problems experience greater stability in their lives supported by skilled and experienced staff. Families benefit from flexible and practical help by home care staff and housing support services. In a few cases, children's needs are overlooked because staff focus too much on meeting parents' needs. Sometimes staff do not identify clearly the different and individual needs of children living together in the same family.

Staff have helpful guidance about what to do when children go missing from education services. Plans are in place to strengthen the response to children who run away from care placements or from home. Staff have guidance and training to help them respond to any child whom they suspect may have been brought into or moved around the country illegally. Social work staff are developing their practice to ensure they are better able to meet the needs of unaccompanied children who are seeking asylum. Lesbian and gay young people can get information, advice and support through a local youth group. Helpful work is done in all secondary schools to challenge prejudice and reduce sexual bullying.

Children and families benefit from very effective communication with staff. The views of children and families are sought using a range of helpful approaches. These are noted down accurately, often using their own words, and considered carefully at decision-making meetings. Children and parents benefit from trusting relationships with staff who spend time getting to know them well. Staff are honest and open in explaining to parents any concerns they have and what they expect them to do to improve their children's circumstances. Very young children benefit from careful observation by staff to identify any concerning changes to their well-being. Staff work hard to overcome barriers to communication experienced by some children and parents. Families report that they feel listened to and respected and have a high degree of confidence in the workers who support them.

5. How good is the management and delivery of services?

The quality of assessment of risks and needs continues to be variable. Initial assessments are increasingly helpful in identifying risks to children. Managers must give clearer and more consistent advice to social workers on the need for well-documented comprehensive assessments of risk. Staff are not sufficiently confident in using chronologies of significant events to help inform risk assessments. Staff working in adult services are making a more effective contribution to the assessment of risks and needs. They have a greater understanding of their responsibilities through helpful joint training. Attendance at and provision of written reports to child protection meetings is improving. Police and social workers do not always seek relevant health information to fully inform initial risk assessments. Managers recognise the need to consistently involve health staff in planning the response to child protection concerns. Children requiring medical examination for suspected physical or sexual abuse are examined by experienced doctors in a child-friendly environment. More children whose names are on the Child Protection Register (CPR) are benefiting from a comprehensive health assessment to identify their health needs. Staff are working together well to protect children from risks posed by sex offenders.

Staff understand the risks associated with abuse and neglect and what they need to do to help keep children safe. However, children's plans are not used well enough to review progress and take account of changing circumstances. Staff now need help from managers to understand the benefits of effective planning for individual children. Managers and staff have to ensure that individual children's plans include clear timescales, measurable changes and how desired outcomes are to be achieved.

The Chief Officers Group (COG) and the Child Protection Committee (CPC) recognise the importance of reviewing their work as a means of continually improving services to protect children. A structured and systematic approach to jointly evaluating key areas of work is at a very early stage of development. They have yet to gather sufficient evidence

to know what they are doing well and what they can do better. A much stronger focus on improving outcomes for children will help them achieve this. Some improvement activities are beginning to take place in individual services. These include a few positive examples of staff and service user involvement. Managers recently gained valuable experience of using a quality improvement framework. They have started to develop skills in jointly reviewing practice through reading children's records. Staff would benefit from further support in applying a wider range of methods to jointly evaluating their work. This would enable them to look more closely together at the impact of changes they make to practice and the delivery of services. Seeking feedback routinely from children and families about their experiences of the help they receive will greatly assist them in doing so.

6. How good is leadership and direction?

The COG and the CPC are strongly committed to protecting children. They communicate this effectively to staff and to the communities they serve. The COG is now well placed to renew its shared vision and agree more ambitious objectives to drive forward improvements in services to protect children. Chief Officers need to gather and make better use of performance management information to assure themselves of the effectiveness of services to protect children. The CPC would benefit from stronger direction from the COG to help prioritise and co-ordinate joint self-evaluation.

The COG has helpfully taken on wider responsibilities for adult protection and the management and monitoring of sex offenders. The potential to develop better integrated working through adopting a public protection approach has yet to be realised. The Community Health and Care Partnership (CHCP) is beginning to identify opportunities to improve services and reduce inequalities for vulnerable children and families. Staff benefit from working within a very strong child centred culture. There is a high level of co-operation amongst teams working across services. Strengthened leadership of fostering and adoption services is improving outcomes for children who cannot return home.

7. How are services improving?

Highly successful early intervention and parenting strategies are making a significant and positive difference to the lives of vulnerable children and families. Planning arrangements for integrated children's services are becoming more streamlined. The work of the CPC has resulted in a number of important achievements including raising public awareness and involving children in reviewing information leaflets. Clear recommendations for practice changes have resulted from a recent case review. Current joint monitoring of child protection processes provides a sound basis for further development.

Notable improvements in the quality of outcomes for children in need of protection have been made. More emphasis and priority needs to be given to improving key processes such as assessments of risks and needs and planning to meet individual children's needs.

8. What happens next?

We are confident that services will be able to make the necessary improvements in light of the inspection findings. As a result, we will make no more visits in connection with this inspection. Our link inspector will maintain contact with services to support and monitor improvements.

We have agreed the following areas for improvement with services in the West Dunbartonshire Council area.

- Improve assessments of risks and needs and outcome focused planning for individual children.
- Strengthen leadership and co-ordination of joint self-evaluation by the Chief Officers Group and Child Protection Committee to deliver continuous improvement.

Quality indicators help services and inspectors to judge what is good and what needs to be improved in the work to protect children and meet their needs. You can find these quality indicators in the HMIE publication **How well do we protect children and meet their needs?** Following the inspection of each local authority area, the Scottish Government gathers evaluations of four important quality indicators to keep track of how well services across Scotland are doing to protect children and meet their needs.

Here are the evaluations of these for the West Dunbartonshire Council area.

Children are listened to and respected	very good
Children are helped to keep safe	very good
Response to immediate concerns	very good
Meeting needs and reducing long term harm	very good

We also evaluated the following aspects of the work within the local authority area.

Self-evaluation	weak
Improvements in performance	good

Managing Inspector: Emma McWilliam
March 2012

To find out more about inspections or get an electronic copy of this report go to www.careinspectorate.com

If you wish to comment about any of our inspections, contact us at enquiries@careinspectorate.com or alternatively you should write in the first instance to Care Inspectorate, Compass House, 11 Riverside Drive, Dundee DD1 4NY.

Our complaints procedure is available from our website www.careinspectorate.com or alternatively you can write to our Complaints Team, at the address above or by telephoning **0845 600 9527**.

If you are not satisfied with the action we have taken at the end of our complaints procedure, you can raise your complaint with the Scottish Public Services Ombudsman (SPSO). The SPSO is fully independent and has powers to investigate complaints about Government departments and agencies. You should write to SPSO, Freepost EH641, Edinburgh EH3 0BR. You can also telephone 0800 377 7330, fax 0800 377 7331 or e-mail: ask@spso.org.uk More information about the Ombudsman's office can be obtained from the website at www.spso.org.uk

This report uses the following word scale to make clear the judgements made by inspectors.

excellent	outstanding, sector leading
very good	major strengths
good	important strengths with some areas for improvement
satisfactory	strengths just outweigh weaknesses
weak	important weaknesses
unsatisfactory	major weaknesses

Headquarters

Care Inspectorate

Compass House

11 Riverside Drive

Dundee

DD1 4NY

Tel: 01382 207100

Fax: 01382 207289

We have offices across Scotland. To find your nearest office, visit our website or call our Care Inspectorate enquiries line.

Website: www.careinspectorate.com

Email: enquiries@careinspectorate.com

Care Inspectorate Enquiries: 0845 600 9527

This publication is available in other formats and other languages on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànanan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ہے بای تہ سرد یم رونا بز رگی د روا ولکش رگی د رپ شرازگ تاعاشا ہی

ਬੈਨੜੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

ی ر خ ا تاعل بو تاقی سننتب بلطلا دن ع رفاوتم روشنملا اذه

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

© Care Inspectorate 2012

Published by: Communications

Printed on recycled paper.

Please recycle me again!



Corporate member of
Plain English Campaign
Committed to clearer communication

420