

To: Education and Children's Services Policy Board

On: 23 May 2024

Report by: Director of Children's Services

Heading: Joint inspection of services for children at risk of harm in Renfrewshire

1. Summary

- 1.1 As part of a rolling programme of improvement work, the Care Inspectorate lead joint inspections of services for children and young people at risk of harm. The remit of these joint inspections is to consider the effectiveness of services for children and young people up to the age of 18 at risk of harm. The legislative basis for the inspection is Section 115 of part 8 of the Public Services Reform (Scotland) Act 2010.
 - 1.2 In addition to the Care Inspectorate the joint inspection team includes representatives from Healthcare Improvement Scotland (HIS), Education Scotland and His Majesty's Inspectorate of Constabulary in Scotland (HMICS) and volunteer Young Inspectors.
 - 1.3 The inspections look at the difference community planning partnerships are making to the lives of children and young people at risk of harm and their families. They take account of the full range of work including services provided by social workers, teachers, health visitors, police officers and the third sector.
 - 1.4 The Care Inspectorate has commenced the inspection process for Renfrewshire and this report provides members with information on the background to inspection, details key phases of the inspection and confirms the local governance arrangements locally.
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2. Recommendations

- 2.1 It is recommended that the Education and Children's Services Policy Board note the following:
 - [a] the joint inspection of services for children at risk of harm in Renfrewshire has been confirmed by the Care Inspectorate;

- (b) the scrutiny activity starts with a staff survey on 13 May 2024, continues with file reading on 17 June and then engagement with children, young people and families on 19 August 2024; and
 - (c) the Strategic Manager Children and Justice/Depute Chief Social Work Officer will be the Renfrewshire inspection co-ordinator and the Children's and Justice Services Manager (Assurance and Change) will be the depute inspection co-ordinator.
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3. Background

- 3.1 The Care Inspectorate, at the request of Scottish Ministers, lead joint inspections of services for children and young people at risk of harm. The remit of these joint inspections is to consider the effectiveness of services for children and young people up to the age of 18 at risk of harm. The legislative basis for the inspection is Section 115 of part 8 of the Public Services Reform (Scotland) Act 2010.
- 3.2 In addition to the Care Inspectorate the joint inspection team includes representatives from Healthcare Improvement Scotland (HIS), Education Scotland and His Majesty's Inspectorate of Constabulary in Scotland (HMICS) and volunteer Young Inspectors.
- 3.3 The inspections look at the difference community planning partnerships are making to the lives of children and young people at risk of harm and their families. They take account of the full range of work including services provided by social workers, teachers, health visitors, police officers and the third sector.
- 3.4 Children at risk of harm are defined as children up to the age of 18 years who need urgent support due to being at risk of harm from abuse and/or neglect. This includes children who need urgent support due to being a significant risk to themselves and/or others or are at significant risk in the community. The Care Inspectorate identify young people as children aged 13 to 17 years old.
- 3.5 Joint inspections aim to provide assurance on the extent to which services, working together, can demonstrate the following:
 - Children and young people are safer because risk have been identified and responded to effectively.
 - Children and young people's lives improve with high-quality planning and support, ensuring they experience sustained loving and nurturing relationships to keep them safe from further harm.
 - Children and young people and families are meaningfully and appropriately in decisions about their lives. They influence service, planning, delivery, and improvement.

- Collaborative strategic leadership, planning and operational management ensure high standards of service delivery.
- 3.6 The Care Inspectorate will look at the cases of 60 children and young people in Renfrewshire who in the two years prior to the 8 April 2024 have been involved in the processes below:
- 15 children or young people who have been subject to an Initial Referral Discussion (IRD), Child Protection Investigation or Child Protection Planning Meeting but has not led to their name being placed on the Child Protection Register.
 - 30 children or young people whose names have been placed on the Child Protection Register.
 - 15 young people who have been subject to the Vulnerable Young Person's process or Care and Risk Management Procedures (CARM).
- 3.7 A staff survey, a children and young people's survey and a parent and carers' survey will be undertaken. A position statement will also be provided, the content of which will be informed by the pre-inspection return and initial findings.
- 3.8 All information from the file reading, surveys and position statement will be triangulated through focus groups with staff and meetings with parents, carers, and young people.
- 3.9 There will be focus groups held for frontline staff, managers, and strategic leaders. The inspectors will also meet with Renfrewshire Children's Services Partnership (RCSP), Renfrewshire Child Protection Committee (RCPC) and Renfrewshire Public Protection Chief Officers Group.
- 3.10 The inspection will be completed within 22 weeks and the process and timings are set out below:

Phase 1	Phase 2	Reporting
<ul style="list-style-type: none"> • Notification • Pre-inspection return (week 3) • Professional discussions 1 and 2 (weeks 4 and 11) • Staff survey (weeks 4-6) • Record reading (week 9) 	<ul style="list-style-type: none"> • Children and young people and parents/carers surveys (open for 3 weeks) • Position statement and written evidence (week 12) • Onsite engagement and focus groups (week 14) • Professional discussion 3 (week 17) 	<ul style="list-style-type: none"> • Quality and consistency panel (week 18) • Draft report to partnership (week 18) • Report and video report published (week 22)

- 3.11 The lead inspector for this inspection has been identified as Sharon Telfer. Sharon will lead a team from the various inspection and scrutiny agencies and will be supported by local file readers for that activity.

4. Key dates for inspection in Renfrewshire

4.1 The inspection has two sets of key dates, the first associated with scrutiny activity and the second meetings between the Care Inspectorate and the leadership team in Renfrewshire.

4.2 The key dates for scrutiny and the area of scrutiny are:

- Monday 13 May to Friday 31 May 2024 – staff survey
- Monday 17 June to Friday 21 June 2024 – file reading
- Week commencing Monday 19 August 2024 – engagement with children and young people, families, and partnership staff.

4.3 The engagement with children, young people and families is set for the week that schools return from the summer break. There is a child and family survey which will require to be completed and the inspection co-ordinator will work with the lead inspector to ensure this is completed to ensure maximum participation by negotiating when the survey is issued.

4.4 The Care Inspectorate has set two dates for meetings with the partnership and provided a date for the third meeting with the time to be confirmed. The following dates should be noted as participation in these meetings if possible by the Chief Officers would be considered in the interests of the inspection process:

- Tuesday 14 May 2024 – 11.00am to 12.45pm
- Thursday 4 July 2024 – 11.00am to 1.00pm
- Wednesday 18 September 2024 (time to be confirmed).

5. Local governance arrangements

5.1 Each local area is required to identify an inspection co-ordinator at a sufficiently senior officer level to link with the Care Inspectorate. The Strategic Manager Children and Justice/Depute Chief Social Work Officer will be the Renfrewshire inspection co-ordinator and the Children's and Justice Services Manager (Assurance and Change) will be the depute inspection co-ordinator.

5.2 Each agency will already have been asked to identify a senior officer to support in the work to ensure that Renfrewshire is able to demonstrate the quality of services to protect children at risk of harm. A regular planning/preparation group has been established to ensure we respond as best we can to the inspection. The planning/preparation group will co-ordinate communication in relation to the inspection process.

5.3 Renfrewshire Child Protection Committee (RCPC) oversees the multi-agency protection of children locally. Elected members will recall from their training that RCPC has membership from the local authority, NHS, Police Scotland,

the third sector and Scottish Fire and Rescue. RCPC has an independent Chairperson and reports to the Chief Officer Group. The Chief Officer Group consists of the Chief Executive of the Council, the Police Scotland Divisional Commander and the Director of Nursing from NHS Greater Glasgow and Clyde. Elected members are updated on the work of RCPC and the Chief Officer Group via the Member Officer Group.

- 5.4 Appendix 1 to this report details the individual areas which will be considered by the Care Inspectorate and their joint inspection agencies. Appendix 2 details the grading utilised by the Joint Inspection Team.
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Implications of this report

1. Financial

None.

2. HR and Organisational Development

None.

3. Community/Council Planning

None.

4. Legal

Local authorities and all community planning partners have a responsibility to protect children from harm. The inspection is undertaken in line with Section 115 of part 8 of the Public Services Reform (Scotland) Act 2010.

5. Property/Assets

None.

6. Information Technology

None.

7. Equality and Human Rights

The Recommendations contained within this report have been assessed in relation to their impact on equalities and human rights. No negative impacts on equality groups or potential for infringement of individuals' human rights have been identified arising from the recommendations contained in the report.

8. Health and Safety

None

9. Procurement

None.

10. Risk

There are no specific risks identified in this report. Risk to children are identified and mitigated on a child protection planning basis.

11. Privacy Impact

None.

12. Cosla Policy Position

None.

13. Climate Risk

None.

List of Background Papers

Children's Services
JT/KO 16042024

Author: John Trainer, Head of Child Care and Justice Social Work
0300 300 0277
john.trainer@renfrewshire.gov.uk

2. The quality indicators

What key outcomes have we achieved?	How well do we meet the needs of our stakeholders?	How good is our delivery of services for children, young people and families?	How good is our operational management?	How good is our leadership?
1. Key performance outcomes	2. Impact on children, young people and families	5. Delivery of key processes	6. Policy, service development and legal measures	9. Leadership and direction
<p>1.1 Improvements in the safety, wellbeing and life chances of vulnerable children and young people.</p>	<p>2.1 Impact on children and young people.</p> <p>2.2 Impact on families.</p>	<p>5.1 Recognition and response to initial concerns.</p> <p>5.2 Assessing risk and need.</p> <p>5.3 Care planning, managing risk and effective intervention.</p> <p>5.4 Involving individual children, young people and families.</p>	<p>6.1 Policies, procedures and legal measures.</p> <p>6.2 Planning and improving services.</p> <p>6.3 Participation of children, young people, families and other stakeholders.</p> <p>6.4 Performance management and quality assurance.</p> <p>6.5 Securing improvement through self-evaluation</p>	<p>9.1 Vision, values and aims.</p> <p>9.2 Leadership of strategy and direction.</p> <p>9.3 Leadership of people and partnerships.</p> <p>9.4 Leadership of improvement and change.</p>
	<p>3. Impact on staff</p>		<p>7. Management and support to staff</p>	
	<p>3.1 Impact on staff</p>		<p>7.1 Recruitment, deployment and joint working.</p> <p>7.2 Workforce development and support.</p>	
	<p>4. Impact on the community</p>		<p>8. Resources and capacity building</p>	
	<p>4.1 Impact on the community</p>		<p>8.1 Management of resources.</p> <p>8.2 Commissioning arrangements.</p>	
<p>10: What is our capacity for improvement? Global judgement based on an evaluation of the framework of quality indicators</p>				

Care Inspectorate Six-point Evaluation Scale

The Care Inspectorate use the following six-point evaluation scale.

- 6 Excellent - Outstanding or sector leading
- 5 Very Good - Major strengths
- 4 Good - Important strengths, with some areas for improvement
- 3 Adequate - Strengths just outweigh weaknesses
- 2 Weak - Important weaknesses – priority action required
- 1 Unsatisfactory - Major weaknesses – urgent remedial action required

An evaluation of **excellent** describes performance which is sector leading and supports experiences and outcomes for people which are of outstandingly high quality. There is a demonstrable track record of innovative, effective practice and/or very high-quality performance across a wide range of its activities and from which others could learn. The Care Inspectorate can be confident that excellent performance is sustainable and that it will be maintained.

An evaluation of **very good** will apply to performance that demonstrates major strengths in supporting positive outcomes for people. There are very few areas for improvement. Those that do exist will have minimal adverse impact on people's experiences and outcomes. While opportunities are taken to strive for excellence within a culture of continuous improvement, performance evaluated as very good does not require significant adjustment.

An evaluation of **good** applies to performance where there is a number of important strengths that, taken together, clearly outweigh areas for improvement. The strengths will have a significant positive impact on people's experiences and outcomes. However, improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible.

An evaluation of **adequate** applies where there are some strengths, but these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve. Performance that is evaluated as adequate may be tolerable in particular circumstances, such as where a service or partnership is not yet fully established, or in the midst of major transition. However, continued performance at adequate level is not acceptable. Improvements must be made by building on strengths while addressing those elements that are not contributing to positive experiences and outcomes for people.

An evaluation of **weak** will apply to performance in which strengths can be identified but these are outweighed or compromised by significant weaknesses. The weaknesses, either individually or when added together, substantially affect people's experiences or outcomes. Without improvement as a matter of priority, the welfare or safety of people may be compromised, or their critical needs not met. Weak performance requires action in the form of structured and planned improvement by the provider or partnership with a mechanism to demonstrate clearly that sustainable improvements have been made.

An evaluation of **unsatisfactory** will apply when there are major weaknesses in critical aspects of performance which require immediate remedial action to improve experiences and outcomes for people. It is likely that people's welfare or safety will be compromised by risks which cannot be tolerated. Those accountable for carrying out the necessary actions for improvement must do so as a matter of urgency, to ensure that people are protected, and their wellbeing improves without delay