



Who Cares?

Protecting Children and Improving Children's Social Care



A report from Overview & Scrutiny





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Children's Social Care

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Preface

by Councillor Len Clark



Many of the findings of this Inquiry report into children's social care may not make comfortable reading for the Council. This is not by intent. Rather, it is the result of the intensive and forensic exploration of the evidence presented to the Inquiry, supported by authoritative independent audit reports. The conclusions and recommendations herewith were unanimously agreed by Inquiry Members and no challenge to the findings has been presented by the Council Executive or any of the principal contributors, all of whom have been consulted.

This is not an alternative report to that produced in response to the Improvement Notice. Clearly challenges of this magnitude did not emerge overnight. Unfortunately Birmingham's children's social care service has a history of underperformance over the past decade. The difficulties in children's social care are systemic and deeply ingrained so there is no quick fix. We need to face up now to the task of getting things right for the future. Whilst there is a need for urgent action in the short term to deal with the most pressing issues, the remit of the Inquiry is not just about what needs to be done immediately to satisfy the Department for Children, Schools and Families, but it is about sustainable progress in the longer term. It is about asking the question, in the light of our history of underperformance, how do we make sure that these improvements are sustained and embedded? Whilst there has been progress in terms of meeting the requirements of the Improvement Notice, I am of the opinion that if the fundamental performance issues highlighted in this report are not addressed purposefully it is unlikely that the short term improvements made will be sustained.

I acknowledge that many of the issues identified by the Inquiry are national issues and will require progress to be made by the national Social Work Task Force. Nevertheless, the national context applies to all local authorities and Birmingham's relative performance in comparison to other authorities has not been good.

I want our recommendations to act as a catalyst to ensure that children's social care is given the priority it needs and deserves to put it on a firm footing for the future. Fundamentally addressing these very serious concerns in respect of children's social care services in Birmingham must finally be an issue of priorities for the Cabinet. Failure to tackle these issues will mean that our most vulnerable children and families pay a heavy price.



Summary

Every child has the right to be cared for and protected from harm. A heavy responsibility has been rightly placed on key statutory services to ensure that this happens. Frontline staff in children's social care have a demanding task in keeping looked after children and those from our most troubled families safe and able to thrive. Social workers play a leading role but they cannot be effective on their own. They rely on support and co-operation from other agencies and professionals and on having the appropriate technology and equipment, access to supervision and enough time to devote directly to the families and children they are there to help. Recent events have shown that much more needs to be done to ensure that the services work together as effectively as possible to achieve positive outcomes.

Many of the areas which need improvement in Birmingham City Council are national issues. The work of this Inquiry was carried out against the background of the national Social Work Task Force which was set up by the government to undertake a comprehensive review of frontline social work practice and to make recommendations for improvement and reform of the whole profession. Many of the obstacles to the delivery of consistently high quality social work set out in the interim report of the national Task Force were also reflected in the findings of the Inquiry.

The main findings of the Inquiry were as follows:

- Lack of capacity at senior management level was highlighted as a major risk.
- The performance management culture and practice is variable across areas and teams.
- Improving performance management will require improved management information systems to provide accurate information and also improved training and development. The learning and development resource is inadequate and not fit for purpose which hampers the retention of staff because of the lack of ongoing professional development.
- Recruitment and retention of staff, especially of experienced staff, is a key area for improvement in Birmingham and capacity issues continue to hamper progress towards improvement.
- The capacity deficit is more serious than just the vacancy rate when sickness absence rates, poorly performing staff and those who have resigned but are working out their notice are included in the statistics. Over reliance on agency staff also exacerbates staff shortages and adversely impacts on budgets.
- The working environment is an important element adversely impacting on the children, young people and families we serve and the staff we employ. Inquiry Members were shocked and dismayed at the standard of accommodation at some sites.
- In terms of social work process and practice there is a lack of clarity about contacts and what constitutes a referral and which referrals should receive an initial assessment. There is concern that the screening of referrals is done by inexperienced staff with insufficient management oversight. Various problems with the CareFirst system were reported to the Inquiry which was generally not



perceived as being user friendly. The result is that social workers spend a high proportion of their time completing records which limits contact time with children and families. There is a lack of clarity about boundaries e.g. between the Common Assessment Framework process and referral, between referral and initial assessment. Our findings demonstrated an extremely fragile management structure and the inevitable conclusion is that the current social work model is not fit for purpose.

- Findings from an external authoritative audit of the case files of all children in care demonstrated that standards varied across the city and that overall the quality of case files for looked after children was not adequate.
- Serious shortfalls in performance in the in-house residential services were highlighted by an external review of the service commissioned by the City Council. The report highlighted the lack of clear long-term strategy setting out a vision and aspiration for the service, a lack of clarity about management functions, a lack of business processes to maintain homes and deal with staffing matters and a need to strengthen support services particularly Human Resources, IT and Finance.

Children's social care is a crucial service and it is clear that the issues highlighted in the Inquiry findings are compromising our ability to deliver quality services at the frontline to our most vulnerable children and families. The current model of service delivery is patently not working. Urgent investment is needed to address immediate and short-term issues but we also need to ensure that any changes made now are embedded and sustained to ensure that standards are improved for the future. This needs to be the City Council's top priority.



Summary of Recommendations

	Recommendation	Responsibility	Completion Date
R1	That the Cabinet be engaged in the direct oversight of the implementation of the Birmingham Children's Social Care and Safeguarding Improvement Plan.	Cabinet Member for Children Young People and Families	February 2010
R2	That progress on the implementation of the Birmingham Children's Social Care and Safeguarding Improvement Plan is reported to the Vulnerable Children's Overview & Scrutiny Committee in order to strengthen member involvement and facilitate critical engagement of members in performance monitoring. This should include regular reporting of the implementation of action plans for the Council in respect of Serious Case Reviews.	Cabinet Member for Children Young People and Families	April 2010
R3	That through the Working for the Future Business Transformation Programme the Council ensures that social workers are provided with the necessary IT systems, management information systems and equipment to enable children's social workers to perform their job adequately and that children's social workers office accommodation and IT needs are prioritised.	Cabinet Member for Children Young People and Families Deputy Leader	October 2010
R4	That offices are cleaned to an agreed standard, essential file storage is provided and outstanding maintenance work is addressed as a matter of urgency.	Cabinet Member for Children Young People and Families	April 2010
R5	That the Children, Young People and Families Directorate review the current social work model of service, consider alternative models and make recommendations on a new social work model.	Cabinet Member for Children Young People and Families	October 2010
R6	That the Children, Young People and Families Directorate identify what family support services currently exist, who provides them and engage with partners to ensure the provision of preventative family support services.	Cabinet Member for Children Young People and Families	April 2010
R7	That the involvement of Members in the disciplinary/grievance appeals process for posts below JNC level should be changed across the whole organisation.	Cabinet Member for Equalities and Human Resources	April 2010



R8	That the impact of the payment of a market supplement on the recruitment and retention of social workers should be reviewed every twelve months.	Cabinet Member for Equalities and Human Resources	April 2010
R9	That training provided to members in relation to Regulation 33 Elected Member visits to duty and assessment teams should be transferred to Children, Young People and Families identifying costs and how this will be resourced and that regular reports should be presented to Vulnerable Children's Overview & Scrutiny Committee to enable formal monitoring of Regulation 33 visits by Scrutiny.	Cabinet Member for Children Young People and Families Cabinet Member for Adults and Communities	April 2010
R10	That progress towards achievement of these recommendations is reported to the Vulnerable Children's Overview & Scrutiny Committee in April 2010. The Committee will schedule subsequent progress reports thereafter, until all recommendations are implemented.	Cabinet Member for Children Young People and Families	April 2010

1 Background to the Review

1.1 Introduction

- 1.1.1 The Annual Performance Assessment (APA) of services for children and young people which was published on 17 December 2008 judged Birmingham to be 'inadequate' in the area of 'Staying Safe'. The APA highlighted a number of issues which had already been identified as challenges.
- 1.1.2 Following the receipt of the APA letter, the Leader of the Council established a high level Task Force to drive through improvements in children's social care services. The group is chaired by the Leader of the Council and includes the Lead Member for Children, Young People and Families, the Lead Member for Adults and Communities, the Strategic Director of Children's Services, the Strategic Director of Adults and Communities and the Chief Executive. The Task Force proposed the setting up of an all-party Scrutiny Inquiry.
- 1.1.3 In January 2009 the Co-ordinating O&S Committee established a Scrutiny Inquiry into Protecting Children and Improving Children's Social Care to examine evidence on social care and to make recommendations to the Task Force. (Appendix 1- Terms of Reference)
- 1.1.4 The Scrutiny Inquiry was chaired by Cllr Len Clark and membership comprised Cllr Margaret Sutton, Cllr Barbara Tassa, Cllr Zoe Hopkins, Cllr Jon Hunt and Cllr Emily Cox.



- 1.1.5 The Inquiry held numerous evidence gathering sessions, meeting weekly initially, and has analysed the available trend data and has heard evidence from a wide range of witnesses including staff and managers, the Delivery Support Unit, Human Resources, Unison, West Midlands Police and Elected Members as well as receiving the results of work commissioned from external consultants. Inquiry Members have also visited social care offices and spoken directly to front line staff and operational managers.
- 1.1.6 At the start, the Inquiry was looking at the reasons for the poor performance of children's services but it soon became apparent that issues concerning Human Resources, Finance and accommodation were inextricably linked. During the course of the evidence gathering a clear consensus has emerged around the areas requiring improvement.

1.2 Our Approach

- 1.2.1 Our approach has been to feedback to the Leader's Taskforce on issues as they emerged from the evidence, to make suggestions as we went along and not to wait for the final report to make recommendations.
- 1.2.2 For example, it emerged in evidence when looking at workforce capacity and in looking at effective social care practice elsewhere, that there is much work that is currently done by social workers which could be done equally well by suitably skilled graduates, who are not qualified social workers, thus freeing up qualified social workers to spend more time with children and families. This Inquiry has already recommended a Graduate Support Scheme, modelled along the lines of the Children's Practitioner role in the Hackney model. This involves the recruitment of Children's Practitioners who do not have a social work qualification but are graduates with a good first degree who have the ability and skills to do many of the tasks previously done by social workers. If successful, the graduates will be offered the opportunity to progress their careers via an MA social work qualification.
- 1.2.3 We have already taken two interim reports to the Leader's Task Force highlighting urgent issues many of which are already being addressed as part of the work being done to meet the improvement targets in the Improvement Notice.

1.3 National and Local Perspective

- 1.3.1 Many of the areas which need improvement in the City Council are national issues. The work of the Inquiry has been carried out against the background of the Social Work Task Force. The Social Work Task Force, which is chaired by Moira Gibb CBE and met for the first time in February 2009, was set up by the Government to undertake a comprehensive review of frontline social work practice and to make recommendations for improvement and reform of the whole profession.
- 1.3.2 The Social Work Task Force is due to publish its final recommendations in the Autumn but published its interim advice to government about the state of social work in England at present, in



which it sets out the nature and scale of the challenge, in July 2009. The interim report stresses that the challenges facing social work did not emerge overnight and that full reform will take time. It sets out the main obstacles to the delivery of high quality social work namely:

- social workers do not have enough time to devote to the families they are trying to help due mainly to staff shortages and bureaucracy;
- there is frustration at some of the tools and support they are given to do their jobs;
- new social workers do not feel properly prepared and supported for the job and there is a lack of ongoing development and specialisation;
- the profession doesn't speak with a strong national voice;
- performance management systems are not driving quality;
- social workers feel that their profession is undervalued, poorly understood and under constant media scrutiny which makes it hard to do their jobs and hard to attract new recruits into the profession.

1.3.3 It reiterates that the supply of high quality staff cannot be instantly remedied; that building leadership within the profession will require time and patience and that building a new understanding of the role and purpose of modern social work will likewise take time. It is interesting to note that many of the obstacles to the delivery of high quality social work identified in the interim report are the same issues which have emerged from the evidence presented to the Inquiry.

1.3.4 The City Council was issued with an Improvement Notice in February 2009 (Appendix 2) requiring that the Council demonstrate clear evidence of improvement in outcomes against a range of measures. These range from improving timescales for dealing with Initial and Core assessments; reviewing cases of looked after children and increasing participation of children in care in reviews to reducing the vacancy rate for social care staff. The Children, Young People and Families Directorate has set up an Improvement Programme, which includes an extensive change management programme with input from external consultants PricewaterhouseCoopers to bring about rapid improvement in outcomes. We are aware that there has been a letter sent to the Leader acknowledging that progress has been made on various fronts.

1.3.5 The issues currently faced by the Council did not emerge overnight. There is a history of underperformance in terms of delivering children's social care particularly safeguarding services in Birmingham. Previous Commission for Social Care Inspection (CSCI) annual inspection reports dating back to 2000 have provided a clear indication that children's social care was not performing adequately and for a substantial period of time during that last 10 years the service has been in special measures. The remit of the Inquiry is not just about what needs to be done immediately to satisfy DCSF but it is about sustainable progress in the longer term. It is about asking the question, in light of our history of underperformance, how do we make sure that these improvements are sustained and embedded? Whilst noting progress in terms of meeting the



requirements of the Improvement Notice, the Inquiry is of the opinion that if the fundamental performance issues highlighted in this report are not addressed purposefully, it is unlikely that the short term improvements made will be sustained.

2 Findings

2.1 Leadership and Management

- 2.1.1 The Inquiry was concerned as to whether sufficient account had been taken of the specialist responsibilities at strategic management level required for children's social care services following the transfer from social care and health to the new children, young people and families directorate. This has been found to be demonstrably insufficient.
- 2.1.2 The lack of capacity at senior management level was highlighted as a major risk in the first interim report. Since then, Colin Tucker has been appointed as Service Director for Children's Social Care which will help to build capacity, skills and knowledge at a senior level in Children's Social Care where the current agenda is at its most challenging. Three Interim Assistant Directors, who are partly funded as part of the package of support provided by DCSF, have also been appointed to be responsible for specific aspects of children's social care. Advertisements have now been placed for permanent posts.
- 2.1.3 The evidence from case audits, variable performance across teams and poor performance in some teams points to a lack of capability and competence amongst some senior and middle operational managers.
- 2.1.4 This acknowledgement of the need to invest in senior staff to ensure we have the capacity and capability in the leadership of the directorate to drive the necessary improvements and change of culture is welcomed. These appointments now put the Council in a better position to provide the leadership needed, not just to take forward the Improvement Programme, but to provide the commitment and consistency of approach to ensure that the changes are embedded and maintained.

2.2 Performance Management

- 2.2.1 The performance management culture and practice is variable across areas and teams. For example, there are considerable variations in performance across areas for both initial and core assessments. Despite the fact that some areas are performing better than the national average and statistical neighbours, when variations are taken into account, we perform less well than our statistical neighbours and the national average.
- 2.2.2 The fact that the teams are very scattered at the moment hinders consistent and effective performance management. There were examples from site visits carried out by Inquiry members,



of Operations Managers endeavouring to manage up to 9 teams of over 100 staff, across split sites. The consequence is a limited ability to supervise, monitor performance, engage with staff and to manage effectively.

- 2.2.3 There have been shortfalls in the service provided by the Children's Social Care Human Resources team. Historically there has been a lack of sufficient, clear and reliable human resources management information which has hindered effective performance management. The Inquiry found a lack of reliable staffing information, no trend data and no site specific sickness information and a lack of support to managers in tackling individual poor performance. This has clearly had a detrimental impact on management performance. Provision of accurate management information which is fit for purpose and meets operational needs is crucial to the ability of managers to improve performance and effectively plan and direct resources to meet demand.
- 2.2.4 In conjunction with the need for accurate management information, there is also a requirement for managers to use the data provided proactively and to apply consistent processes to effect change and improve performance. There was evidence from an independent, authoritative external report reviewing the in-house residential services the findings of which have been accepted by the Council. This showed a lack of expertise in dealing with significant disciplinary issues and a need to address sickness levels by applying established Council policy. Evidence was presented that amounted to systemic malpractice in relation to the implementation of approved HR policy and practice by operational managers.
- 2.2.5 There is also a need to improve the provision of training and development if we want to improve the ability to improve performance. The learning and development resource is inadequate and not fit for purpose. This hampers the retention of staff because of the lack of provision of ongoing professional development. There is a need for a Learning and Development Strategy for Social Workers, which would include minimum requirements for their continued registration but also a continual development programme to ensure the highest quality child care and safeguarding practice.
- 2.2.6 There are clearly areas of good practice within Birmingham which could help to improve the city's performance but we need to develop consistency in practice between areas and teams. There is a need for a clear performance management framework which drives up performance from the top of the organisation through to individual accountability to drive up underperformance and develop a strong performance management culture at all levels.

2.3 Recruitment, Retention and Rewards

- 2.3.1 Recruitment and retention of staff, especially of experienced staff has been identified as a key area for improvement. Specifically:
- We have a significantly higher percentage of vacant posts than our statistical neighbours and the national average.



- Whilst annual spending on staffing has increased, it still remains below the national average and that of statistical neighbours.
- We have less social workers and care managers per head of population than statistical neighbour authorities.

2.3.2 The Inquiry team received conflicting data on benchmarking and pay and conditions. Although there is evidence that Birmingham is regarded as a tough place for social workers to work, the evidence challenged the view that remuneration is a pivotal reason for problems with recruitment and retention. There is no overwhelming evidence that pay is the single significant reason for not being able to recruit staff (but it may be an issue in retention).

2.3.3 There was no evidence that market supplements or golden hellos are the answer either. The market supplement cannot be used for mortgage applications and is not pensionable and golden hellos have been paid incrementally not in a lump sum, which makes them less attractive. Since market supplements were introduced in 2007, they would appear to have had a negligible impact on the recruitment situation. There is clear evidence from the audit reports that they are not related to staff performance. As a matter of good practice, market supplements should be reviewed and evaluated by senior management at regular intervals to ensure that they are fair, relate to the current market conditions and are serving the intended purpose. In principle, supplementary payments should be related to performance and determined through the PDR process. This will enhance the ability of managers to manage.

2.3.4 This need to increase the ability of managers to manage links to the issue of member involvement in the personnel appeals committee at all grades across the Council. Inquiry Members were told that grading appeals were dealt with by officers for grades 1-7 with no Member appeal panel and that grievances do not go to a Member appeal panel. As Members are only involved in appointments at JNC level and above, Member involvement in dismissal appeals for all grades would seem anomalous. This is an inconsistency which needs to be reviewed.

2.3.5 Capacity issues continue to hamper progress towards improvement. Detailed work is now in progress to quantify resource shortfalls to meet increased demand and plan for short and long term recruitment and retention requirements. The Directorate and Human Resources are currently working with Aston Business School to undertake a qualitative survey of new starters, post holders and recent leavers to establish a fact base of employee opinion on factors affecting attraction, retention and leaving.

2.4 The Demand Capacity Issue

2.4.1 When looking at capacity, there was confusing data about vacancy rates at different levels in the organisation but it would appear to be 24% across all grades of staff and 14% for qualified social workers. However it is also apparent that the capacity deficit is more serious than just the vacancy rate. When sickness absence rates of over 20%, poorly performing staff and those who have



resigned but not left are included in the statistics, the situation is much more serious than it would first appear. When these are included, it emerges that almost half of the teams have some level of underperformance or under-functioning. Over reliance on agency staff also exacerbates staff shortages and adversely impacts on budgets. The extent of that impact cumulatively is in the order of 30% under-capacity, which based on an annual staffing budget of around £100 million is costing in the region of £30 million. This problem was evident in all previous inspections and despite numerous initiatives which have delivered temporary improvements, the improvements have not been sustained.

2.4.2 It was also apparent from evidence presented to the Inquiry, that there are areas where there are existing shortfalls and where external factors either already have or may soon result in increased demand being put on the service. Recent reforms in Care Proceedings have clearly had an impact on the number of cases issued. There has been a sharp increase in Care Proceedings cases issued since December 2008 which has had the effect of increasing delays in court proceedings in Birmingham. It should be stressed that the City Council has not been criticised for proceeding in too many cases, in fact the reverse, with the need for earlier intervention mentioned in a number of cases. The criticisms in the APA letter in respect of looked after children and children subject to Child Protection Plans may suggest that our thresholds for proceedings are too high.

2.4.3 Although further guidance is currently being awaited, it is clear that there are recommendations contained in Lord Laming's Report on the Protection of Children which could potentially have serious implications for us given the critical circumstances presented currently in respect of demand and capacity. Specifically:

- Recommendation 19 says that 'the DCSF must..... take appropriate action to ensure that all referrals to children's services from other professionals lead to an initial assessment, including direct involvement with the child or young person and their family and the direct engagement with and feedback to, the referring professional.' Ensuring all referrals lead to an initial assessment would be a change in practice and result in significant additional demand.
- Recommendation 20 says that 'All police, probation, adult mental health and adult drug and alcohol services should have well understood referral processes which prioritise the protection and well-being of children. These should include automatic referral where domestic violence or drug or alcohol abuse may put a child at risk of abuse or neglect.' Again, this is new and will increase demand.

We are still waiting for further governmental guidance on these recommendations.

2.4.4 There was evidence that caseloads are high compared to other authorities and combined with the evidence of social workers spending a high proportion of their time on completing records, actual contact time with children and families is extremely limited.

2.4.5 The independent external report on residential services previously referred to also showed evidence highlighting a lack of trust and respect between operational staff and Human Resources.



This was compounded by gaps in the support available to those services from Human Resources. A large number of staff were in posts following HR processes of redeployment, to which they were not originally appointed or indeed had the essential competencies required of these posts.

2.5 Accommodation

- 2.5.1 Inquiry Members visited all principal social care establishments in the course of the Inquiry and were shocked and dismayed at the standard of much of the accommodation. The appalling standard of accommodation at some sites impacts on the children, young people and families we serve and the staff we employ.
- 2.5.2 The working environment is an important element adversely impacting on our ability to recruit and retain staff. It is clear that much of the accommodation is below standard and that much of the accommodation is unsuitable. Buildings need to provide a healthy and comfortable working environment for staff. 'Fit for Purpose' accommodation is a key staff aspiration which would also improve morale. We need to ensure that buildings meet the work requirements of the teams with access to interview/meeting rooms and suitable contact rooms on site, a manned and welcoming reception for members of the public to use and offices for team managers to enable them to supervise and manage staff. In many instances basic maintenance requirements were not responded to e.g. insufficient and unclean toilet facilities, overcrowding and a lack of essential storage capacity for files. Basic maintenance tasks were clearly not being routinely undertaken.
- 2.5.3 It was also apparent that workers in children's social care are dispersed across different buildings in different locations with duty and assessment, care management and management teams working in different locations, which hampers working together effectively. This will be addressed eventually as part of Working for the Future Programme. However in the meantime conditions should be improved by at least ensuring that the offices are cleaned to an agreed standard, that essential storage for files is provided and by ensuring that outstanding maintenance work is addressed as a matter of urgency.
- 2.5.4 This highlights a serious long-term issue of City Council priorities. It raises the question of whether the property portfolio in social services is being given a sufficiently high priority? This must be addressed as a matter of urgency if we want to improve performance and may call into question the balance of investment in Business Transformation as against the immediate requirements to address what are essentially fundamentally unacceptable current conditions. Teams need to have appropriate accommodation to allow them to work as teams and there is evidence that working conditions, together with the issue of caseloads and a lack of good supported placements for student social workers with a protected caseload and the support of an experienced mentor, has a more serious and negative impact on our ability to recruit and retain staff than pay.



2.6 Social Work Processes and Practice

- 2.6.1 At the front door of services there is a lack of clarity about contacts and what constitutes a referral and which referrals should receive an initial assessment.
- 2.6.2 A substantial increase in referrals to the duty and assessment teams over the last year is evident. Since the Baby P case in Haringey there has been an increase in referrals and care proceedings. Over the past year there has also been an increase in referrals and practice from police for domestic violence. The police are now notifying social care and health of all domestic violence incidents (notified by the police on their form '392'). The evidence suggests that questions need to be asked about the current level of referrals.
- 2.6.3 The quality of referrals from other agencies including the police is reported to be very variable with workers having to spend valuable time following up information which should have been provided in the referral. The referral forms need to provide more guidance for external organisations on referrals to allow them to do their own investigations first and so to improve the quality of referrals.
- 2.6.4 There is concern that the screening of referrals is done by unqualified staff with insufficient management overview. There is a need to look at alternative appropriate 'front door' models using experienced staff to screen/filter inappropriate referrals. Members were told that a new joint screening process comprising the police, a senior social work practitioner and health worker is currently being put in place which will cover all nine police Operational Command Units with the aim of improving the screening of referrals and ensuring that an appropriate response is given. It is imperative that consistent joint screening of referrals is introduced at the earliest possible date.
- 2.6.5 Members were also made aware of some anomalies in data and recording such as the use of the CareFirst system "review and monitor" i.e. holding cases open for review after the closure of initial and core assessments, which put pressure on the service. Duty and assessment use "review and monitor" for children who do not reach the high threshold for service at the end of the initial assessment. Cases are not active or worked on or care planned because there is no service available. The "review and monitor" is also used for children awaiting transfer to care management teams and are described as "paused" whilst decisions are made. It is also apparent that CareFirst has not been fully implemented.
- 2.6.6 The cumulative impact of these issues is that the duty and assessment teams are not coping with the volume of demand and are therefore missing timescales and not progressing cases swiftly. There is a lack of capacity in care management teams to take cases and therefore duty and assessment teams are having to hold on to cases, causing a log jam.
- 2.6.7 Reports and interviews also indicate a lack of clarity about boundaries, for example, between the Common Assessment Framework (CAF) process and referral, referral and initial assessment. This creates confusion for operational staff resulting in inconsistency of practice and poor experience for children and their families. Specifically, there needs to be clarity between social care managers



and CAF managers on the relationship between CAF, referrals and initial assessments or when a child is no longer in need of a child protection plan.

- 2.6.8 The First Interim Report to the Leader's Task Force identified these problems in the relationship between duty and assessment teams and the CAF process and highlighted that clear agreement was needed about what happens when referrals are deemed inappropriate especially since this is key to addressing the levels of re-referrals and is key to shifting the focus more towards lower level intervention and prevention.
- 2.6.9 Referral criteria for CAF have recently been agreed and captured in a protocol which says that:
- If the thresholds to proceed to Initial Assessment are not met, the duty screening team will pass the case back to the referrer and the duty screening team will inform the CAF team of the 'pass-back'.
 - If there is a CAF in place, the assessment is used as a foundation to the Initial Assessment.
 - At the point where Specialist Children's Services intervention is no longer required but multi-agency support is still required, either the CAF lead practitioner involved prior to the referral to Specialist Children's Services will be contacted and the possibility of transfer back to this practitioner will be discussed, or, if there was no previous lead practitioner the social worker will convene a multi-agency Integrated Support Plan meeting. Under most circumstances the CAF lead practitioner for the child will come from the agency most actively involved with the child. The social worker and the new lead practitioner will agree a specific date when the lead practitioner role will be transferred.
 - An escalation process has been put in place to deal with any disputes around the transfer from Specialist Children's Services and the CAF process.
- 2.6.10 The CAF process is progressing but remains considerably under-developed (particularly for school age children) in terms of reach and consideration needs to be given to ensuring that the criteria set out in the protocol are followed and that the most appropriate agency most actively involved with the child takes responsibility for the CAF. It is most important that this occurs as services for children in need are sparse at present.
- 2.6.11 Further work is required to determine what family support services exist and who provides these services. There is a need to engage more with the third sector/private organisations to provide lower level preventative family support in order to reduce demand and level of re-referral to children's social care.
- 2.6.12 Our findings demonstrated an extremely fragile management structure and the inevitable conclusion is that the current social work model is not fit for purpose and that there is a need to review the current model and consider alternative models of service. These findings have been accepted by the Directorate which has as a matter of priority commissioned a review of and re-design of the screening, referral and assessment process facilitated by Pricewaterhouse Coopers.



2.7 Child Care Planning, Practice and Case Recording

2.7.1 Findings from an external authoritative audit of the case files of all children in care demonstrated that standards varied across the city and that overall the quality of case files for looked after children was not adequate.

2.7.2 On Child Care Planning and Practice the findings were stark:

- 53% Unacceptably Poor Practice
- 39% Acceptable
- 7% Good

2.7.3 The audit team found that the quality of child care planning and practice was variable with significant levels of poor or unacceptable practice as evidenced through recording but with isolated examples of good practice by individuals or teams. There was emerging evidence that the quality of practice may be associated with whether social work practitioners are qualified or not. Some one-third of practitioners who carry some case responsibility for children in care are unqualified.

2.7.4 Whilst the role of social workers is clear in departmental guidance this is not shown through practice. There were significant examples of statutory visits not being recorded, non-attendance at reviews, limited contact with children, little analysis of need, lack of clarity on practice responsibilities or interventions and little management scrutiny of planning or practice.

2.7.5 The findings on Case Files and Recording were no better:

- 54% Unacceptably Poor Practice
- 39% Acceptable
- 7% Good

2.7.6 The general impression of the service from the evidence of the quality of case recording is that case files and recording are not generally seen as a priority or an essential part of good professional social work practice. They remained an afterthought. The audit team found that often cases were a storage system for paper associated with children and as a storage system they were poor with time lapses in recording, information inaccurate or out of date and poorly ordered. Filing guidance was not being used and little reference was made to data protection legislation and access of users and family members to files.

2.7.7 It was recommended that every child should have the following arrangements in place:

- All case files should contain up to date and accurate front sheets, chronology, family background, case summaries and interventions.
- Records of social workers demonstrating understanding, analysis, intervention and outcomes.
- Child care plans based on thorough analysis of needs and interventions to improve lives.



- Case files should capture why the child is in care, key characteristics of the child and the future intentions and how they will be achieved.
- Files should demonstrate how the safety and wellbeing of the child is being met through the care plan.
- Managers are scrutinising the quality of practice and adherence to Council policies.

2.7.8 The audit highlighted the need to:

- Reassert good professional practice and management of the service.
- Produce reminder updates guidance on child care practice and recording.
- Create supportive conditions to make it happen i.e. administration, accommodation, training and more staff.
- Support managers to deliver improvements.
- Repeat the peer group audit by team managers.

2.7.9 The conclusions of this independent, authoritative external report and audit and recommendations for action have been accepted by the Directorate and are being implemented.

2.7.10 The findings need to be considered in the context of the findings of the National Social Work Task Force, referred to in section 1.3, about social workers not having enough time to devote to the families they are trying to help, and they also link to evidence given to the Inquiry in relation to systems and specifically Care First. Various problems with CareFirst were reported to the Inquiry which was generally not perceived as being user friendly. It was reported as cumbersome and slow. The system incorporates statutory requirements which are viewed as onerous and time consuming and the result is that social workers spend a high proportion of their time completing records which limits contact time with children and families. When social workers are spending such a high proportion of their time preparing case files and records and in consequence have limited contact time with children and families it is not acceptable that the quality of the case files and recording is unacceptably poor in the majority of cases.

2.8 Residential Services

2.8.1 An external review of the service was commissioned by the City Council to identify the current issues relating to the in-house residential services and propose a 'blueprint' for how this could be taken forward.

2.8.2 This should be set in the context that Birmingham has 23 children's homes and in January 2009, one was considered outstanding, nine were good, seven were satisfactory and six were inadequate. The Council has a declared position to ensure that no homes are inadequate by January 2010. The number of children's homes judged as inadequate has been reduced to three and of these a formal review has been commissioned.



2.8.3 It should also be noted that those homes which at the time were judged as satisfactory were vulnerable to becoming inadequate particularly following the information emerging from the audit of files referred to in section 2.7.

2.8.4 The report highlighted four key issues:

1. **Strategy:** there is no clear long-term strategy that sets out a vision and aspiration for residential services which ensures that residential care is a placement of choice for some children.
2. **Management:** There is a lack of clarity about management functions which need to be in place to support front line practice in delivering outcomes for children in care. There is a lack of clarity over the roles of Assistant Care Manager, Care Manager and Registered Manager which is compounded by significant skills deficits and shortfalls in the knowledge and understanding of the basic requirements of good child care practice within this group. There were similar concerns over Operational Managers and around staffing at all levels up to heads of Service including lack of knowledge and understanding in undertaking direct work with children and lack of training for front-line staff and managers in their roles and responsibilities. There is an urgent need to focus on key management tasks and ensure the management team in each home has the requisite skills and experience to fulfil their obligations to children. Registered Managers also need support in areas such as Human Resources, Finance and IT to ensure they are effective in running the homes and meeting external and regulatory requirements. Verbal examples were provided that are indicative of what would amount to long-term malpractice over a period that has inevitably contributed to significant malfunctioning within this service.
3. **Practice:** The business processes to maintain the home and deal with staffing matters effectively is lacking. Internal business processes within the homes needed to be reviewed to ensure that they are child-centred, outcome focussed and meet the organisational requirements for the service. Roles and responsibilities are not well understood and staff are lacking the management support, supervision and training to develop their practice. The standard of recording is weak. A file audit revealed similar deficits to the audit of field social work files referred to in section 10. The ability to formulate the placement plan, risk assessment and behaviour management plan is not being achieved in the recording. The requirements for management information should be prioritised and business processes and documentation should be aligned to reduce administration.
4. **Support Functions:** There is a clear need to strengthen support services particularly Human Resources, Finance and IT.
 - a. Human Resources – there is a lack of trust and respect between operational staff and Human Resources. This is compounded by gaps in the support available to residential services from Human Resources. A large number of staff were in posts following HR processes of redeployment to which they were not originally appointed and who, in



some instances, were not competent. There is a combined lack of expertise in dealing with significant disciplinary issues and a need to address sickness levels by applying systems already in place. There is evidence of the same problems with recruitment and retention, sickness and absenteeism previously referred to, which were found elsewhere.

- b. IT – IT equipment and access that requires urgent upgrading is a key factor having a negative impact on performance improvement. Up to 75% of the computers currently being used require urgent upgrading.
- c. Finance – Registered Managers are unclear about which budgets they are responsible for. There is a need for clear accountability of budgets and training on and access to Voyager. There was evidence from finance that all budget holders were invited to attend training in the use of the Voyager system and to the availability of an ongoing training programme on Voyager for all budget holders, but no evidence about how many budget holders have actually attended training.

2.8.5 Following this review and the presentation of the First Interim report to the Leader's Taskforce, a project plan for residential services has been drawn up to respond to the shortfalls in performance highlighted. The project plan consists of three main drivers to deal with the issues around strategy, management and practice summarised above with two support projects to deal with the support functions and communications.

3 Conclusions

3.1 What This Means

- 3.1.1 Birmingham's children's social care services unfortunately has a history of underperformance over the past decade. This is evidenced by the Commission for Social Care Inspection (CSCI) Reports dating back to 2000. Up until 2005 children's social care was deemed not adequate. In 2005 the then star rating was one star and in 2006 children's services was awarded two stars. The question has to be raised as to why improvements were not sustained. This is critical to ensure that any investment in improvement at the present time is to be sustained.
- 3.1.2 The Inquiry Members were somewhat reassured to note that management had identified many of the issues highlighted in the evidence but also concerned at the lack of progress in addressing some of these issues previously identified. Throughout the Inquiry various indicators as to why improvement has not been embedded have emerged.
- 3.1.3 Piecemeal Approach - There have been numerous management action plans, projects and initiatives, many going on for a long period with little resulting action for change and no integration of planning. The Delivery Support Unit carried out a Priority Review in 2007 which resulted in an Action Plan which was agreed by the Specialist Services Management Team and



Executive. The Action Plan contained over 50 recommended actions which were not prioritised, with apparently unrealistic timescales and no apparent cognisance of whether there was capacity to deliver. Unsurprisingly most of the actions were not implemented. What is required for sustainable change is a whole system approach which integrates all the requirements for improvement. This will be assisted by a clear programme planning methodology. This is linked to the responsibility of Elected Members as corporate parents.

- 3.1.4 Members were not aware of the Delivery Support Unit Priority Review Report and Action Plan. How can Members properly engage in monitoring performance and gain adequate insight into the issues if they are not made aware of the relevant reports? Given the corporate parenting responsibility of all Elected Members, it is vitally important that appropriate reports/action plans are subjected to democratic consideration and scrutiny and therefore should, as a matter of Council policy, be considered and approved by the Executive Management Team, Cabinet and the relevant Scrutiny Committee. The role of Elected Members and the role of Scrutiny in receiving information around performance needs to be properly recognised, otherwise Members cannot effectively exercise their statutory responsibilities as corporate parents.
- 3.1.5 Leadership and Management – there are clear competency and capacity issues at the front line, middle and senior management levels in the children’s social care division. These issues need to be addressed and remedied promptly. The appointment of three Assistant Director posts and a new Service Director will assist by strengthening the leadership team.
- 3.1.6 Performance Management Culture – The remit and focus of the Service Director and Assistant Director posts needs to be a relentless pursuit of continuous improvement through determined performance management. This should not be confined to addressing and improving poor Key Performance Indicators (KPIs) but should extend to a deeper analysis looking at the quality of practice and management overview.
- 3.1.7 The difficulties in social care are systemic and deeply ingrained so there is no quick fix. Determined management effort will be needed to address these long-standing issues. There needs to be a realistic and phased programme of change with clearly defined timescales and a number of priorities for the first year.
- 3.1.8 There also needs to be effective political oversight – it is the responsibility of Elected Members to ensure that officers deliver the essential improvements required.

3.2 Resource Implications

- 3.2.1 There is substantial evidence of a lack of capacity and capability in the children’s social care workforce. However, as stated previously, there is no conclusive evidence that pay and rewards alone are a factor in the Council’s inability to recruit and retain experienced qualified social workers. It is also apparent that the current model of service delivery is not fit for purpose and that a programme of redesign from front door through to the end of the process is urgently



required. There are other models of good practice, notably the Hackney model, which can inform any re-design.

- 3.2.2 It may be that by re-designing the service there is a sufficient number of qualified social workers to deliver the service. However their roles and responsibilities and ways of working will need to change. This will demand strong leadership and a considerable shift in culture.
- 3.2.3 It is also apparent that in the longer term the benefits of the Children's Business Transformation Programme will have an impact. Preventative and early intervention with young children should reduce the number of children requiring complex and highly interventionist social work services as they grow up.
- 3.2.4 To address immediate and short-term issues urgent investment is needed in the following areas:
- Accommodation.
 - IT, management information systems, equipment and "tools" to do the job.
 - Learning, development and training.
 - Assessment and development of managers.
 - Development of family support services as an alternative to child protection children in care services.
- 3.2.5 Unless the Cabinet can readily identify additional revenue and capital to address the immediate and short-term needs, they will be challenged to address the balance of investment afforded to Business Transformation Programmes as against the urgent requirements presented by the findings highlighted in this Inquiry report. Alternative sources of funding such as the Area Based Grant need to be explored. Fundamentally addressing the very serious concerns that the Inquiry has in respect of children's services in Birmingham must finally be an issue of priorities for the Cabinet. This needs to be the Council's top priority.



Appendices

1. Terms of Reference
2. Improvement Notice
3. Witnesses



Appendix 1 – Terms of Reference

<p>Our key question:</p>	<p>This Scrutiny Inquiry is to examine in detail the issues arising out of the Ofsted Annual Performance Assessment of Services for Children and Young People in Birmingham City Council 2008 especially the areas for development identified in relation to the safeguarding and the welfare of the most vulnerable children.</p>
<p>1. How is O&S adding value through this work?</p>	<p>This piece of work will add value by contributing to the City Council's strategic outcomes as set out in the Sustainable Community Strategy 'Birmingham 2026 – Our Vision for the Future'</p> <ul style="list-style-type: none"> • Be healthy <ul style="list-style-type: none"> ○ by developing care and support to allow vulnerable children to live healthier and more independent lives. ○ By improving the health of Birmingham's children and young people and protecting them from potentially damaging lifestyles. • Enjoy a high quality of life by improving care services in the city • Make a contribution by protecting and nurturing vulnerable children.
<p>2. What needs to be done?</p>	<p>The key lines of enquiry will be:</p> <ul style="list-style-type: none"> • To examine social work processes and practice (including referrals, assessments, care planning and decision making) • To review data, systems and performance management (including Care First and quality assurance) • To look at recruitment, retention and rewards (including supervision, equipment and accommodation) • To consider capacity (including resources, skills, competencies, training and culture) • To undertake a comparative study of good practice in this area – comparing practice in Birmingham with other Local Authorities. <p>To engage with the appropriate Overview & Scrutiny Committees and require them to produce reports on particular aspects of the areas for development highlighted in the Annual Performance Assessment and to communicate these back to the Inquiry in the form of conclusions and recommendations.</p>
<p>3. What timescale do we propose to do this in?</p>	<ul style="list-style-type: none"> • Work outline to the Co-ordinating Overview and Scrutiny Committee for approval Friday 9th January 2009 • Evidence gathering to be undertaken between January 2009 and March 2009 • Initial Findings with recommendations communicated to the Leader's Task Group on Keeping Children Safe by end March 2009 • Further detailed analysis March – May 2009 • Draft report to be discussed by the Inquiry Group in May 2009; • Report to be presented to the City Council July 2009.
<p>4. What outcomes are we looking to achieve?</p>	<p>To understand the reasons for the weaknesses in relation safeguarding the most vulnerable children highlighted in the Ofsted APA 2008.</p>



	<p>To make practical and deliverable suggestions for improvement in the areas for development highlighted in the Ofsted APA 2008 which will lead to improvements in practice.</p> <p>To complement and inform the work being done by the Leader's Task Group on Keeping Children Safe by communicating initial findings to the Leader's Task Group on Keeping Children Safe.</p> <p>To link to the National Review of Social Work currently being undertaken by the Social Work Taskforce led by Moira Gibb, the Chief Executive of Camden which is due to report in Summer 2009 by communicating relevant findings about how improvements in front-line social work practice might be made.</p>
5. What is the best way to achieve these outcomes and what routes will we use?	<p>This enquiry will use three main methods to achieve the outcomes namely</p> <ul style="list-style-type: none"> • To communicate the initial findings with recommendations to the Leaders Task Group on keeping Children Safe by the end of March 2009. • To link to the National Social Work Taskforce • Report of the Inquiry to be presented to City Council

3.3 Member / Officer Leads

Lead Member:	Councillor Len Clark
Lead Officer:	Rose Kiely, Group Overview & Scrutiny Manager
Expert Link Officer:	Cheryl Hopkins, Service Director, Strategy and Commissioning

3.4 Time Frame for Core Phases of the Review

Meetings and evidence-gathering sessions:	January – April 2009
Drafting the report:	April 2009
Consideration of the draft report by the Committee:	May 2009
8-Day rule: Executive Comment:	May/June 2009
Reporting to the City Council:	July 2009



Appendix 2 – Improvement Notice

Improvement Notice

To: Name BIRMINGHAM CITY COUNCIL
Address Council House, Victoria Square, Birmingham, B1 1BB

This Improvement Notice is being issued due to poor performance/decline in:

Children's social care and safeguarding

on the basis of evidence provided by/contained in:

Annual Performance Assessment 2008, which judged Staying Safe to be 'inadequate'.

The following measure(s) are needed for you to comply with this Improvement Notice:

The Council must:

Demonstrate clear evidence of improvement in outcomes, evidenced by:

- Improvements in the following performance indicators:
 - NI 59 - increase the percentage of initial assessments for children's social care carried out within 7 working days of referral from the 2007/08 baseline of 62% to 69% in line with statistical neighbours.
 - NI 60 - increase the percentage of core assessments for children's social care carried out within 35 working days of their commencement from the 2007/08 baseline of 75% to 86% in line with statistical neighbours.
 - NI 66 – increase the percentage of looked after children cases reviewed within required timescales from the 2007/08 baseline on 85% to 94% (2% above current statistical neighbour average).
 - NI68 – increase the percentage of referrals of children in need to children's social care going on to initial assessment from 45.1% to 59.4% in line with the national average.
 - C63 - Increase percentage of children in care who participate in reviews from the 2007 baseline of 66% to 94% in line with statistical neighbours.
 - CF/C24 – Reduce percentage of children in care who are absent from school for more than 25 days in a year from the 2007/08 baseline of 15% to 12.3% in line with statistical neighbours.
 - Reduce the percentage of social care staff vacancies from the 2007/08 baseline of 24.7% to 17.7% (on trajectory to meet statistical neighbour average of 10.8%).
 - Increase the number of care leavers at age 19 who are living in suitable accommodation from 79.7% to 88.4% in line with statistical neighbours.



- Sustained progress in all other social care indicators throughout the term of this Improvement Notice.
- Robust evidence of qualitative assessment, provided to GOWM to inform progress reporting. In meeting the timescales for initial and core assessments, it is crucial that the quality of assessments is monitored closely. This will include quality assuring the recording of the work to ensure that assessments are of a consistently high standard.
- Increased relative spend on family support services, responding to Ofsted's judgement in 2008 APA, and demonstrable evidence that investment in safeguarding is at the levels required to meet the terms of this Improvement Notice and sustain the improvements in the service over the long-term.

Build capacity and capability to deliver and sustain improvements by:

Ensuring robust leadership and implementation of an effective change programme covering all staff and elected members with a clear focus on improving outcomes for children particularly for the most disadvantaged:

- Increasing capacity at senior leadership levels within children's social care, and in particular ensuring that there is an effective Senior Management Team in place by co-operating with GOWM and RIEP in building capacity and capability and engaging with sector-led expertise.
- Carrying out a specific programme of work to analyse the needs and segmentation of the looked after children population and children on the edge of care and their families. Through this process develop a programme of evidence-based interventions and services which will ensure an appropriate population of looked after children and enable those who return home from care and those on the edge of care to remain safely supported in birth or wider families.
- Rigorously monitoring a robust action plan for making improvements across children's social care, looking in particular at the areas of weaknesses highlighted by Ofsted in the Council's 2008 Annual Performance Assessment, and engaging in regular monitoring, scrutiny and quality assurance of social care performance, both internally and in conjunction with GOWM/DCSF.
- Working with the external support team commissioned by DCSF to embed effective performance management and supervision across children's social care services and demonstrate over the 12-month period of this Improvement Notice improvements in the quality of practice and assessments as well as the timeliness of those assessments.
- Developing and effectively monitoring the children's workforce retention, training and development strategy to ensure effective implementation in conjunction with the CWDC practice-based initiatives currently being implemented in Birmingham.

Developing services and front-line practice:

- Reviewing the process for referrals to children's social care so that all partner agencies, including schools, are clear when they need to refer and the process for doing so while ensuring that targets for initial and core assessments are met and the quality of assessments is high.



Children's Social Care

- Reviewing placements of looked after children including those in residential accommodation, to ensure that they are the most appropriate for responding to the needs of each child, including with respect to educational attainment, and that there is an allocated social worker for every child. Each child's reviews to be chaired by a named Independent Reviewing Officer responsible for scrutinising the quality of care planning with arrangements being in place to ensure that senior management are informed of any deficits in individual children's care plans so that appropriate action can be taken. Developing and implementing a strategy to develop a range of placement options close to children's homes with clear targets.
- Ensuring that regulatory requirements for children's homes are met and to reduce the existing number of inadequate judgements made following Ofsted inspections, with processes in place to avoid looked after children being placed in homes judged by Ofsted to be inadequate provided by external providers.
- Arrangements to consult with looked after children are in place to inform individual care planning and wider strategic development of looked after children's services; with regular reports on the quality of corporate parenting from the Children in Care Council, the Independent Reviewing Officer service and others being made available to lead members and senior managers to inform future development of looked after children's services.

Working with others:

- To co-operate with GOWM and others as appropriate and with a full review of the LSCB to ensure that an effective LSCB is in place. To have an action plan in place to deliver identified improvements in safeguarding arrangements and to address improvements required in Serious Case Reviews as identified by Ofsted.

Improvement against the above measures will be assessed:

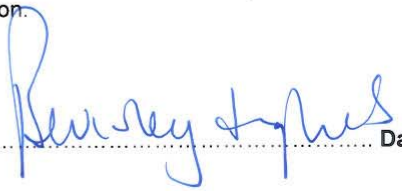

February 2010, with a review at the end of July 2009.

by:

The Department for Children, Schools, and Families, who will, on the basis of measurable progress towards the targets outlined above, advise Ministers on any necessary follow-up action.

Failure to comply with this Improvement Notice by the assessment date may lead to:

The Secretary of State for Children, Schools and Families using statutory powers of intervention (s497A Education Act 1996) to direct the Council to enter into an appropriate arrangement to secure the necessary and rapid improvements required in children's social care provision.

Signed:  Date: 



Appendix 3 – Witnesses

The Inquiry members wish to thank the following witnesses for taking the time and trouble to provide evidence to the Inquiry, either by attending and giving evidence in person or by providing written reports or both.

Councillor Les Lawrence, Cabinet Member, Children, Young People and Families

Councillor Sue Anderson, Cabinet Member Adults and Communities

Councillor Alan Rudge, Cabinet Member, Equalities and Human Resources

Councillor Reg Corns

John Hemming MP

Tony Howell, Strategic Director, Children, Young People and Families

Cheryl Hopkins, Service Director, Strategy and Commissioning, Children, Young People and Families

Seamus Gaynor, Policy Development Manager, Children, Young People and Families

Ann Wackett, Senior Policy Officer

Amjid Mahroof, Corporate Policy and Performance Acting Team Manager

Janet Denny, Head of Service, Children Young People and Families

Yvette Waide, Area Head of Children's Services, Specialist Services

Linda Turner, Senior Business Change Manager

Penny Arcatinis, Children's Data Manager

Jon Needham, Common Assessment Framework Co-ordinator

Chris Atkinson, Chief Educational Psychologist

Carol Douch, Head of Safeguarding Children

Jane Robson, Assistant Director Adults and Children, Legal and Democratic Services

Ian Hayward, Excellence in Information Management Programme Head

Malkiat Thiarai, Senior Responsible Officer for Excellence in Information Management

Susanna Newing, HR Business Partner, Children Young People and Families

Denise Wilson, Head of City Finance, Children, Young People and Families



Children's Social Care

Louise Phillips, Family Support Worker

Sue Butler, Family Support Worker

Keith Stone, Family Support Worker

Michael Forbes, Family Support Worker

Fran March, Health Manager, South Birmingham PCT

PC Alan Nevin, Multi-Agency Gang Unit, West Midlands Police

Gayle Wickson, Parent

Louise Newman, Parent

Mandy Tyler, HYPE Project, Heart of Birmingham PCT

Chief Superintendent Gareth Morgan, West Midlands Police, OCU Commander Bournville Lane

Detective Inspector Kay Wallace, West Midlands Police

Maggie Riley, Consultant

Vivian O'Neale, Consultant

Chris Cooper, Lead Convenor, Children's Services, UNISON

Gary Bell, Consultant, Modernising Working Practices

David Allen, David Allen Consulting Limited, Audit of Child Care Planning, Practice and Case Recording

Kay Whyte-Bell, Children's Services Adviser, Government Office for the West Midlands

Steve Love, Consultant, Report on Birmingham City Council Residential Services

Additional information/Reports provided by:

Councillor Margaret Byrne and Ian Burman, Team Manager - Adoption Panel Report

Tony Green, Research & Policy Officer – Children's Social Care - Best Practice Report

Louise Barnett, Research & Policy Officer – Report on Member Visits to Social Care Establishments

PricewaterhouseCoopers –Report of the Diagnostic Phase of External Support to Birmingham City Council

The Inquiry members also extend their thanks to:

Cheryl Hopkins, Service Director, Strategy and Commissioning for attending all the meetings and providing advice and assistance as the Expert Link Officer for the Inquiry

Viv Smith, Committee Manager