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| <b>BRIEFING</b> | <b>TO:</b>           | <b>Improving Lives Select Commission</b>                |
|                 | <b>DATE:</b>         | Meeting – 16 June 2020                                  |
|                 | <b>LEAD OFFICER:</b> | Ailsa Barr<br>Assistant Director Children's Social Care |
|                 | <b>TITLE:</b>        | Re-referrals and repeat child protection planning       |

## 1. Background

- 1.1** The purpose of this briefing is to provide assurance the commission regarding concerns raised by members in relation to re-referrals and children becoming subject to a child protection plan for a second or subsequent time.

Referrals to children's social care and second/subsequent periods of child protection planning are both performance indicators reported to the Department for Education (DfE). The rate of referral is one of the indicators of need and a high rate of re-referral can be an indicator of the right services or intervention not being provided at the right time. Therefore, it is important to consider the local referral rate and be assured that all measures are being taken to understand and reduce the re-referral rate.

In order to understand Rotherham's context, it is important to see the local data in the context of regional and national data. In Rotherham we measure the re-referral rate, the percentage of children becoming the subject of a child protection plan for a second or subsequent time ever which is a national indicator and we also measure the percentage of becoming the subject of a child protection plan for a second or subsequent time in the last 2 years which is a regionally agreed measure and so not reported to the DfE.

When reviewing Rotherham's performance in relation to referrals and both measures for second and subsequent child protection planning the data compares favourable against, regional, statistical neighbours and national data.

### Re-referred in 12 months since referral date (CIN CENSUS DEF) (Lower is better)

| Local Authority | 2018/2019 | 2019/2020 (In-year Q4/YTD) RIA | Diff +/- |
|-----------------|-----------|--------------------------------|----------|
| Rotherham       | 21.30%    | 20.70%                         | -0.60%   |
| Regional        | 24.60%    | 23.60%                         | -1%      |
| Stat neighbours | 20.01%    | Not published yet              | N/A      |
| National        | 22.60%    | Not published yet              | N/A      |

| % of children becoming the subject of a CP plan for a second or subsequent time - ever - rolling 12 months (lower is better) |           |                        |          |
|--|-----------|------------------------|----------|
| Local Authority  | 2018/2019 | 2019/2020 (Q4/YTD) RIA | Diff +/- |
| Rotherham  | 21.20%    | 17.50%                 | -3.7%    |
| Regional   | 19.60%    | 19.80%                 | +0.20%   |
| Stat neighbours  | 18.39%    | Not published yet      | N/A      |
| National   | 20.80%    | Not published yet      | N/A      |

| % of children becoming the subject of a CP plan for a second or subsequent time within 2 years - rolling 12 months (Council Plan Indicator) (Lower is better) |                        |                        |          |
|---|------------------------|------------------------|----------|
| Local Authority   | 2018/2019              | 2019/2020 (Q4/YTD) RIA | Diff +/- |
| Rotherham   | 6.00%                  | 8.60%                  | 2.60%    |
| Regional  | 8.00%                  | 9.00%                  | 1.00%    |
| Stat neighbours   | Not a national measure |                        |          |
| National  | Not a national measure |                        |          |

It is important to understand that a re-referral isn't always a negative thing, there are occasions where the first referral and period of intervention can lead to a subsequent referral. For example – referral received due to a domestic violence incident from one partner to another and the assessment that follows identifies potential for harm to the children. Through the intervention the parent who has suffered domestic abuse ends the relationship with the abusive parent and after a testing out period the social care involvement comes to an end. At a later point the abusive parent becomes dissatisfied with the contact arrangements and makes a private law application to secure a legal order. Because there has been past social work involvement a referral is made (which becomes a re-referral) by the court for a social worker to provide a report to the court.

Conversely there are also situations where a re-referral is absolutely an indication that the last period of intervention did not progress the situation positively forwards and in these examples we tend to see the issues being repeated from one referral to the next meaning that opportunities to meaningfully engage with children and young people and improve their lived experiences are missed. Concerns in relation to this type of re-referral meant that the senior leadership team in social care undertook a piece of audit work focusing on re-referrals during late 2019 and early 2020.

The audit work undertaken in relation to re-referrals has indicated that there is a need to strengthen safety planning work prior to ceasing social work involvement. By strengthening safety plans we can be more confident that families have been supported to make effective changes. Meaning that in the future they will be able to respond to their own challenges and by ensuring that these plans work before ending social care involvement others working with the family (health partners, schools etc) will have a greater understanding of the networks around a family and how these networks can be engaged if additional support is needed as opposed to a re-referral being needed.

Good practice needs to be demonstrated throughout the period of intervention to ensure the best outcome. This is best achieved where workers and managers consistently apply

thresholds and where there are effective multi-agency relationships. The work in the service in relation to this area is focused on achieving the following:

- Good quality multi-agency information sharing and screening at the earliest opportunity to leading to .....
- a strong a clear assessment includes triangulation of information, professional curiosity, effectively considers historical information and uses a variety of methods to capture and understand the voice of the child which leading to .....
- a strong plan which sets out clearly what needs to change and how this will happen, and this leading to .....
- purposeful intervention, meaning that the family properly understand what the social worker and other professionals are worried about and are supported to make meaningful and lasting changes. An effective safe plan is developed and tested properly meaning that .....
- a safe exit can be achieved.

## **2. Key Issues: What's Working Well / What are we worried about?**

### **2.1 What's Working Well?**

- The data indicates that Rotherham's performance in relation to referral rates and second/subsequent child protection planning is comparable or better than data from other local authorities.
- Despite the relatively positive performance the senior leadership team within children's social care identified towards the end of 2019 that a focus on understanding the reasons for re-referral's and repeat child protection planning was required.
- Audit work has been completed in relation to re-referrals, this has involved heads of service and service managers reviewing 10 children's case files each and completing audit work relating to the reasons for referral and determining if this was avoidable or not.
- Regular audits are undertaken in relation to referrals that do not progress to social work assessment to provide assurance that thresholds are being consistently applied.
- There is an audit framework which provides opportunity to regularly review casework and provides insight to practice and provides learning opportunities which are shared with the workforce.

### **2.2 What are we worried about?**

- Data indicates that that Rotherham's performance in the areas explored is comparable with others, but this means still means about 1 in 5 children is referred to children's social care. Arguably this is too high, and we need to be tenacious in working to reduce this.
- If work is not completed to reduce the incidents or referrals and second/subsequent child protection planning the lived experience of vulnerable children in the Borough may not be sufficiently improved.
- Safety plans are not consistently tested out before social care involvement ends which contributes to a percentage of re-referrals.

### 3. Key Actions and Timelines

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| 3.1 | <ul style="list-style-type: none"><li>• Learning work to be developed within the service during June, July and August</li><li>• Key messages from audit work will be shared with the service and examples of good practice will be shared to assist with learning.</li><li>• The senior leadership team will review the data on a quarterly basis to consider progress made.</li><li>• A subsequent piece of audit work in respect of re-referrals will be planned for Jan – Mar 2021.</li></ul> |
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### 4. Recommendations: What are we going to do about it?

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| 4.1 | <ul style="list-style-type: none"><li>• That members note the information contained within the report and seek further assurance from the Assistant Director for Children's Social Care at subsequent meetings of the improving lives select commission.</li></ul> |
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