

## **Report to CHILDREN AND YOUNG PEOPLE SCRUTINY BOARD**

### **Repeat Referrals in Children's Social Care**

**Portfolio Holder:** Councilor Shaid Mushtaq, Cabinet Member for Children and Young People

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**20 March 25**

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#### **Purpose of the report**

This is an update to a previous report to the board on the 20<sup>th</sup> March 24 titled 'Repeat Referrals in Children's Social Care' on the repeat referral performance, key challenges impacting on the performance indicator and the service response for improvement.

#### **Recommendations**

It is recommended that the Children and Young People Board notes the report and progress to date.

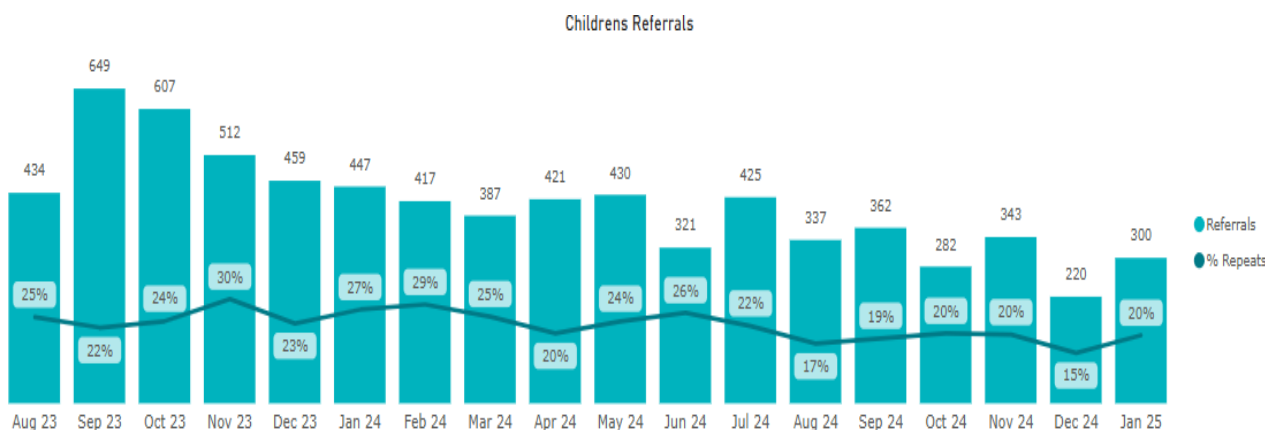
Repeat Referrals in Children’s Social Care

**1 Background**

1.1 This report to the board considers the current challenges across the Children’s Social Work Service, focusing in particular on the variable trajectory of repeat referrals within the last twelve months. A re-referral relates to a family who has received two or more referrals through to Children’s Social Care services within a twelve-month period.

**2 Current position**

2.1 Since April 23 the trajectory of re-referrals into Children Services has steadily increased with a peak of 30% in November of the same year. Variance has continued over the past 12 months, although there has been an overall, gradual reduction of the monthly percentage of cases into Children’s Social care that are considered repeat referrals..



2.2 Over the past 6 months, the rate of repeat referrals back into social care has been below the national benchmark of 22.4%, indeed dropping as low as 15% - the lowest rate since at least 2021. The next phase of work is to sustain this progress to ensure the rate remains at or below this benchmark.

2.4 The service has responded to this key performance indicator, as laid out in the report produced last year. In summary, the response has been multi-faceted. A Key Line of Enquiry and deep dive completed in October 23 led to a weekly meeting being embedded in the service the following month to review children who had experienced 2 referrals within a 6-month period to better understand themes and to provide challenge around the quality of practice.

2.5 Work has been completed within the service around safe step down of cases, ensuring children and families receive the right level of assessment and intervention. The service has made great strides to increase the ratio of permanent staff to support the reduction of frequent changes to staff and reliance on agency workers alongside the Getting to Good and Achieving Excellence programs, focusing in improving the quality of assessment and

intervention. Work has also been completed to move away from closing cases prematurely where consent is not explicit to a position of strengthening engagement with families, ensuring children are assessed and greater emphasis is placed on Children’s Social care and statutory partners to support children in need.

2.6 The above work completed in the service has also been further enhanced by work completed within the Multi Agency Safeguarding Hub (MASH) and the Duty and Advice Team (DAT). There has been a steady and continued reduction in cases progressing from contact to referral and assessment, and quality assurance work has highlighted improvements in the quality of screening to support better decision making at the front door. This has also supported a reduction of the total number of children requiring support or protection in Children’s services, bringing us closer to our statistical neighbours and benchmarks.

### Regional information Group Q2



2.7 A comparison against the region, the graph above shows the continued and steady reduction in children experiencing repeat referrals. The rate remains relatively high, however in the context of the overall referral rate being higher than average, the percentage is well below the national and regional average of 22%. Data for Q3 is not yet published so the most up to date comparison is unavailable, however we know that Oldham’s return of 18.4% continues to demonstrate the ongoing downward trend.

2.8 Tracking of weekly meetings initially indicated that there were some themes emerging that were team specific and in a small number of cases worker specific. This data enabled Heads of Service to target the work required alongside the learning from quality assurance activity linked to repeat referrals. This learning has been shared service wide, within management learning circles as well as with individual practitioners with the highest rates of repeat referrals being seen. Quality of assessment and a lack of curiosity have been identified themes, but most significantly

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was cases where parents were objecting to assessment and there were challenges in engaging families. The support provided has been well received and understood, driving the overall trend of reduced numbers of repeat referrals and more importantly, a reduced percentage of the overall number of referrals.

- 2.9 Tracking over the past 3 months has demonstrated fewer patterns indicating that themes relating to workers and managers have largely been successfully addressed. Engagement can still present as a barrier as this impacts upon the depth and quality of assessments, although is becoming less common. Variable quality of assessment remains the biggest issue impacting on repeat referrals, and work within the service continues to enhance and improve assessments. Quality assurance work is highlighting improvements but there is continued variability.

### **3 Key challenges and service response**

- 3.1 Whilst the last 6 months data evidence reduction in rates of repeat referrals, there is further work to be done to ensure that learning is embedded and rates remain low with smaller variance to month on month reporting.
- 3.2 We know that the service experienced challenge in terms of staffing stability and demand between May and July 24. Changes to the GM pledge impacted upon workforce stability across the wider work force. At the same time, demand on the Assessment and Intervention service reached levels of 1300 children being open for assessment and support with a peak in June of 1350 children (currently around 900 children open in service). The impact of high demand and a shifting workforce is ultimately further drift and delay and reduction in quality.
- 3.3 In addition, there has been a significant reduction in capacity within the service, with a team being disbanded as part of budget reduction in September 23 (Capacity reduced by an average of 125 children) and a drive to a permanent workforce with the introduction of 10 permanent ASYE's replacing Agency staff in the same month. As inexperienced, newly qualified social workers, their case loads are capped to support learning and development, and this shift led to a further average capacity loss of 120 children. To meet this reduction, additional scrutiny was put in place to provide challenge to children subject to child in need that had been open for longer than 6 months to ensure safe step down from statutory services, where proportionate.
- 3.4 A further 6 permanent ASYE's are coming into post in the month of March 25 and a further team is being disbanded at the end of this financial year to meet our budget requirements. The impact of this is being managed, and changes implemented in The Duty and Assessment Team within the MASH have seen a clear month on month reduction of cases allocated for assessment, with a real focus on earliest possible intervention, delivered by universal and universal plus services.
- 3.5 The service has been prepared for the changes to staffing and have managed to phase out most posts gradually, to minimize impact and disruption. Whilst there is less experience in the service, the management layer within the Assessment and Intervention Service is 100% permanent and are well briefed on the issue of repeat contacts and the drivers behind high rates and the remedies to prevent. We also have

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a growing establishment of permanent staff in service, By the beginning of April 25 two thirds of staff in Assessment and Intervention will be permanent.

- 3.6 Weekly meetings to discuss repeat referrals entering the service will continue to provide additional scrutiny, oversight and assurance.
- 3.7 Thematic learning will regularly be shared within the service, and manager cohort at regular intervals to react to any emerging trends, and to keep the conversation live and fresh. Given the increasing stability within the service, it is anticipated that the frequency of discussion relating to repeat referrals will reduce as the evidence noted is that the understanding and learning is embedded.

#### **4 Links to corporate outcomes**

- 4.1 Meeting our statutory duties as corporate parents of children looked after and care leavers and providing timely and appropriate access to services and support to meet the needs of children, young people and families in Oldham is central to the co-operative values of the Council:
- **Thriving Communities** where people have the power to be healthy and happy and can make positive choices about their lives.
  - **Co-operative Services** underpinned by collaboration, integration and innovation that improve outcomes for residents and create effective and seamless services.
  - **An Inclusive Economy** where everyone has a fair chance to improve their living standards, wages and skills.

#### **5 Conclusion**

- 5.1 Evidence from the last 6 months demonstrate the positive impact of the response regarding repeat referrals, however given that drivers to problematic levels and rate are varied and nuanced, there will continue to be drive and monitoring by Head of Service for Assessment and Intervention to provide ongoing scrutiny and challenge where required and for continued assurance.
- 5.2 The measures implemented have enriched understanding of the drivers at play and have resulted in the reduction we now see. All learning moving forward will be shared within the service to further strengthen and embed the progress made.