Inspection of local authority arrangements for the protection of children
Reading

Inspection dates: 11 March to 20 March 2013
Lead inspector Martin Ayres HMI

Age group: All
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Inspection of local authority arrangements for the protection of children

The inspection judgements and what they mean

1. All inspection judgements are made using the following four point scale.

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<th>Judgement</th>
<th>Description</th>
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<tr>
<td>Outstanding</td>
<td>A service that significantly exceeds minimum requirements</td>
</tr>
<tr>
<td>Good</td>
<td>A service that exceeds minimum requirements</td>
</tr>
<tr>
<td>Adequate</td>
<td>A service that meets minimum requirements</td>
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<tr>
<td>Inadequate</td>
<td>A service that does not meet minimum requirements</td>
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Overall effectiveness

2. The overall effectiveness of the arrangements to protect children in Reading is judged to be adequate.

Areas for improvement

3. In order to improve the quality of help and protection given to children and young people in Reading, the local authority and its partners should take the following action.

Within three months:

- Reading Safeguarding Children Board (RSCB) in conjunction with Thames Valley Police to improve the current police arrangements for screening and assuring the quality of all domestic abuse referrals to children’s social care
- RSCB to review the application of the threshold criteria in practice within agencies to ensure agreed levels are understood and being consistently applied
- The council and RSCB to establish effective arrangements to enable children and young people to participate in meaningful ways in protection planning processes
- The council to ensure that supervision records are reflective and support effective case analysis and planning in order to fully demonstrate progress and service impact in improving outcomes
- The council, partners and RSCB to routinely consider ethnicity and diversity issues in all strategic and developmental planning and ensure data derived from individual cases are being collated for this purpose
- The council to strengthen the role of child protection officers to scrutinise the quality of assessments and plans presented to case conferences and to routinely report on service impact and outcomes.
- The council to review member’s awareness of child protection to ensure that they receive regular and appropriate levels of training.

**Within six months:**

- The council, in conjunction with partners, to implement systems to capture the lived experiences of children and young people as integral parts of early help and protection assessments, analyses, plans, reflective staff supervision and case auditing.
- The council, in conjunction with partners, to define practice standards for assessments, case analysis and planning and supervision to enable line managers to establish greater levels of scrutiny and performance oversight.
- The council to establish overarching policies and operational frameworks to promote more effective permanency planning for children under 12 years and the coordination of relevant services for older children and young people.
About this inspection

4. This inspection was unannounced.

5. This inspection considered key aspects of a child’s journey through the child protection system, focusing on the experiences of the child or young person, and the effectiveness of the help and protection that they are offered. Inspectors have scrutinised case files, observed practice and discussed the help and protection given to these children and young people with social workers, managers and other professionals including members of the Local Safeguarding Children Board. Wherever possible, they have talked to children, young people and their families. In addition the inspectors have analysed performance data, reports and management information that the local authority holds to inform its work with children and young people.

6. This inspection focused on the effectiveness of multi-agency arrangements for identifying children who are suffering, or likely to suffer, harm from abuse or neglect; and for the provision of early help where it is needed. It also considered the effectiveness of the local authority and its partners in protecting these children if the risk remains or intensifies.

7. The inspection team consisted of four of Her Majesty’s Inspectors (HMI) and one additional inspector.

8. This inspection was carried out under section 136 of the Education and Inspections Act 2006.

Service information

9. The Borough of Reading has a child population aged 0 – 17 years of over 33,000, equating to 21% of the total local population. Since 2001 the overall population has expanded by 12,000 a significant proportion of which are children aged 0 – 4 years. The local population is very diverse with 49% of children and young people from non-White British backgrounds attending schools. This compares with 27.5% nationally. From 2011 to 2012 there were 2,164 births of which almost half were children born to mothers who were born outside the United Kingdom. The level of childhood poverty at 24% is higher than the regional average of 16.5%. Twelve of the 93 Lower layer Super Output Areas (LSOA’s) for Reading are amongst the 20% most deprived in England.

10. A Children’s Trust has been in place since 2009 with representation from statutory agencies, independent and voluntary sector providers and user groups. The council is reviewing the Children’s Trust in the context of the Health and Wellbeing Board to enhance and establish service commissioning opportunities across the partnership. The Reading Safeguarding Children Board (RSCB) is independently chaired with
arrangements in place for joint working with other safeguarding boards in the region.

11. Contacts and referrals in respect of children and young people who may be at risk of significant harm are initially processed by a newly established multi-agency safeguarding hub (MASH) which analyses and prioritises incoming work prior to assessment by the access and assessment team (A&A). Community-based children’s social care services for children in need, child protection and looked after children are delivered through three locality teams. There are further services for intensive support including teenage conception, a directly managed substance misuse service (SOURCE), the youth offending service and post-16 partnership services. Emergency and out of hours services are organised on a pan-Berkshire basis and include adult service responsibilities.

12. Service commissioning and planning of children and young people’s health services and primary care services are currently undertaken by NHS Berkshire West. Universal services such as health visiting, school nursing, and paediatric therapies are delivered primarily by Berkshire Healthcare NHS Foundation Trust. The acute hospital providing accident and emergency services for children and young people is the Royal Berkshire Hospital and the Royal Berkshire NHS Foundation Trust provides maternity and new-born baby services. There are 30 General Practitioner (GP) services in the locality, including a walk-in health centre in the centre of Reading. Child and adolescent mental health services (CAMHS) are provided by Berkshire Healthcare NHS Foundation Trust. Services for children with learning disabilities and who have complex health needs are also provided by this Trust. Policing for the borough is provided by Thames Valley Police.

13. At the time of this inspection there were 172 children or young people who were the subject of child protection plans. This represents a small reduction since February 2012. Of this group 33% were aged under five years, 45% were aged 5 – 11 years and 19% aged 12 years or older. The remainder related to children who were unborn. Categories under which children and young people had been made the subject of protection plans are neglect (54%); emotional harm (34%); physical abuse (9%); sexual abuse (2%) and multiple categories (1%).

14. Reading has 47 schools comprising 37 primary schools, seven secondary schools, three special schools and one pupil referral unit. There are nine schools under the Academy Framework (six of these schools have converted to academy status since September 2010, and one free school). Early Years service provision is delivered predominantly through the private and voluntary sector in 55 settings. Additionally, there are five local authority maintained nurseries and 20 schools with nursery classes. Post-16 years education and training is provided by one university, one
college of further education and seven upper schools with sixth form facilities.

15. A range of family support services are delivered through four locality based children’s action teams (CATs), 13 children’s centres and extended services in schools. These teams deliver a wide range of universal and targeted services and use of the common assessment framework (CAF). Family support and prevention services are provided by the edge of care service (which delivers intensive and targeted support to vulnerable children, young people and families).
Overall effectiveness

16. The overall effectiveness of local authority arrangements to protect children and young people in Reading is adequate. Since the last inspection of safeguarding and services for looked after children in February 2012 progress has been made in strengthening the arrangements for identifying children and young people at risk of significant harm and responding to their needs. In the course of this inspection no children or young people have been identified where it is judged that they are at risk of significant harm or where they are not being adequately protected. Progress is being made in a number of key areas, such as securing a more stable workforce and developing early help services. However, there are some key elements of practice, strategy and process that need to be improved further in order to ensure that service provision and planning is consistent and more clearly informed by the lives and experiences of children and young people at the core of all activities.

17. Elected members, the Managing Director of the council, Director of Education, Social Services and Housing and senior managers all show ambition for the council in securing and maintaining high quality services to protect and safeguard vulnerable children and young people. Ambition is shared by partner agencies and reflected in the allocation of resources to meet service needs and demands. The partnership as a whole has a good understanding of the needs of the borough, the changing demography and strengths and weaknesses of current services. All the issues identified in the course of this inspection have been understood by the partnership with clear commitments for appropriate action. The council and partnership are seeking to sustain current achievements in protecting vulnerable children and young people, stepping up the pace of continuous improvement and in developing systems to achieve greater levels of service consistency, including performance management.

18. There has been a concerted drive to secure a wide range of local services to support children and their families to reduce the escalation of difficulties. The provision of CATs, use of CAFs and other key services are having a positive impact on the ways children and families are supported. However, the coordination of services and help is not yet consistent and in some instances is confusing to children and parents. Although appropriate attention is being paid to the needs of children and families from minority ethnic groups or where disability is a feature in individual cases the information is not being used in a strategic context to commission relevant services.

19. The Reading Safeguarding Children Board (RSCB) is operating satisfactorily in meeting the requirements of national guidance. Health representation on the Board currently lacks a designated doctor and this has been a deficit for too long. Plans are in place to remedy this position but at the time of this inspection the issue had still not been fully resolved.
The rate of referral to children’s social care services remains high and analysis of these referrals shows that the majority should have been screened by other agencies at an earlier stage. This is particularly true of the high rate of domestic abuse referrals from Thames Valley Police where it is estimated that 80% did not actually meet the threshold for referral in accordance with joint threshold criteria set by the RSCB and the partnership. As a result, inappropriate contacts and referrals are placing an unnecessary burden on front line social care services and potentially diverting attention from higher level cases. Police engagement in the MASH, issues of co-location and attendance at some planning meetings are also in need of resolution.

20. The quality of social work practice is adequate overall with some examples of innovation to improve outcomes for vulnerable children and young people. However, service standards are not sufficiently well defined to enable first line managers to consistently monitor and challenge practice to achieve greater levels of consistency and more rapid improvement. Similarly, overarching frameworks for permanency planning and for coordinating services for older children and young people are not fully established in ways that readily facilitate the measurement of service impact, outcomes and quality. The role of child protection officers who chair case conferences is insufficiently focused on scrutinising the quality of practice, setting planning objectives and measures and collating information for wider planning purposes.

**The effectiveness of the help and protection provided to children, young people, families and carers**

**Adequate**

21. The effectiveness of the help and protection provided to children, young people, families and carers is adequate. Children and young people who may be at risk of significant harm are appropriately identified within the community and referred to children’s social care. Where risks are identified plans are proportionate to the risks and needs and in most cases resources are deployed effectively to reduce risk and to secure the help needed. Communication across agencies is generally good and an escalation system is in place to resolve disagreements when contacts or referrals are made. Managers report that most issues are satisfactorily resolved without recourse to this system. Children and young people in the borough are benefiting from a diverse range of early help and preventative services. At their best, services are helping children and families to make lasting changes in their lives which improve their well-being and circumstances. Practitioners across the council and in partner agencies such as health are working together to ensure that more vulnerable children and families have more access to high quality early help. Inspectors saw no early help cases where children had been left at risk of significant harm. In some cases, such as domestic abuse, support
provided early in the identification of concerns was making a clear and positive difference to reducing the risk of harm.

22. Parents who spoke to inspectors and the large majority of those who have provided feedback to the council on the CAF feel that they have been supported effectively to enable them to provide better parental care to their children. The council monitors the proportion of CAF objectives that are met on a case by case basis but does not have a clear system in place to judge the overall impact of early help services in improving outcomes for children. Most parents who met inspectors stated they are treated with respect and listened to in meetings. The purpose of plans to protect children and young people from harm are generally understood by parents but in some instances the plans lacked precise aims and inclusion of detailed objectives to secure permanent care for children in timescales relevant to their ages. Arrangements to move cases where risks have been reduced from child protection to children in need and family support are generally understood by parents and adequate arrangements are in place to monitor the effectiveness of children in need plans in improving outcomes. Where family circumstances change and risks are seen to be increasing, appropriate action is taken to step cases up within the framework of child protection.

23. Although most parents state that the support provided has been helpful to them a few have expressed dissatisfaction with the number of social worker changes over relatively short periods of time and the impact this had on maintaining relationships and smoothly following agreed plans. This has partly been brought about the transfer of cases across teams but also the use of agency staff on short-term contracts. The latter has significantly improved over the last year with reduced staff turnover. Nevertheless, some pathways for access to services are complex and do not always aid planning continuity and consistency. Minutes of meetings are circulated quickly to parents although the actions required are not routinely defined in measurable ways. The views of children and young people are sought by social workers and others but these are not fully utilised as a basis for planning. Staff across the partnership make extensive effort to engage parents in plans but in some instances this has resulted in some planning delays for the children and young people involved. In this connection a proportion of plans lack contingency arrangements in the event that parents do not cooperate or where agreed services have not had sufficient impact in improving outcomes.

24. Progress has been made in the further development of early help provision since the last inspection and in responses to increasing levels of need. Provision includes a wide range of parenting programmes run by specialist family workers, universal and targeted early childhood services delivered through a network of well-located children’s centres and early years settings, and positive activities and targeted youth support for older young people. Four well led CATs manage the majority of early help and
preventative services in local communities. The contribution of health partners is improving with named health visitors attached to children’s centres and the development of targeted support for vulnerable young mothers. However, the timely and effective sharing of information between health and children’s social care to underpin early help interventions remains inconsistent.

25. There is a wide diversity of assessment and planning models in current use across different agencies and teams, together with a variety of pathways into, through, and out of services. This is reducing the effectiveness of service coordination and in some instances help is not being provided early enough following the emergence of difficulties. The council has recognised this issue and is about to launch an overarching early intervention strategy designed to simplify pathways and increase consistency. The need to strengthen further the council’s relationship with schools is also identified as a priority as local schools are exercising increasing autonomy in managing and commissioning their own support services. Since the last inspection, the council has improved the systems and processes for identifying, tracking and supporting children who go missing from home, care or school. A database of children missing from education, including those with very poor school attendance and those who are educated at home, is maintained and monitored systematically by council staff. Prompt action is taken when safeguarding concerns are raised.

26. The youth offending service, together with its partners, makes a positive contribution to early intervention and prevention. Clear impact is evidenced in the reducing numbers of young people entering the criminal justice system for the first time and the very low numbers of young people in police custody. Robust safeguarding arrangements support young people in secure institutions and in their transition back to the community. The council and its partners are taking positive action to raise awareness of the needs of children who have a parent in prison.

The quality of practice

Adequate

27. The quality of practice is adequate. Children and young people receive a timely and robust response to their needs for protection. Referrals that meet the threshold for a child protection enquiry are responded to promptly and information gathering and the coordination of a response with the police are effective. Statutory child protection enquiries are always undertaken by qualified social workers and these are well coordinated, robust and provide an effective response to safeguarding children. Strategy discussions are consistently taking place between police and social care and are timely. Whilst children and young people are adequately protected during investigations, actions are not always clearly
recorded to demonstrate the rationale behind decisions and the outcomes that are being sought.

28. All contacts are assessed by qualified and experienced social workers in the MASH team which also provides a consultation helpline to partner agencies. Currently, the MASH operates only as a screening process but plans are in place to extend the remit to fully engage police and health partners and to co-locate the service. Decisions taken in response to contacts and referrals are timely, proportionate and appropriately recorded. However, a significantly high number of contacts or referrals made to social care by partner agencies do not meet the jointly agreed thresholds for intervention. As a result, inappropriate contacts and referrals are placing an unnecessary burden on front line social care services which potentially could divert staff resources from more serious and higher level cases.

29. The timeliness of initial assessments has improved and is now in line with statistical neighbours, but the timeliness of core assessments remains slightly below. Overall, the quality of assessments is improving but some variations remain within and across teams. Identified gaps include the identification, focus and subsequent recording of risk and protective factors for the child that need to be resolved and the measures to be used to determine impact. The lived experience and voice of the child are not always fully captured or reflected and case chronologies are not routinely updated. As a consequence their effectiveness as an important practice tool is reduced.

30. Core group meetings take place regularly and are usually well attended. However, the groups and their recording do not always maintain a sharp focus on effective planning including reference to permanency planning, setting measureable objectives and defining expectations for action. Case conferences are mostly well attended with a significant improvement in police attendance at initial conferences although police attendance at review conferences continues to be inconsistent. Very few young people attend their conferences and processes to support attendance, such as advocacy, are not well embedded. This is recognised by the council and a new advocacy service has recently been commissioned specifically for children involved in child protection and children in need processes. The impact of this service has yet to be tested.

31. The overall quality of child protection reports is adequate with some examples of good practice. However, across the range of reports the quality is too variable. Some reports provide good quality information and analysis but others lack detail and evidence to underpin effective planning. Child protection officers, who chair conferences, focus well on facilitating meetings but their role in respect of scrutinising reports and assessments is under-developed. This includes reporting on the effectiveness of assessments and plans in improving outcomes. Although the RSCB
approved the use of a model (‘Signs of Safety’) to evaluate needs and risks 18 months ago, the use of this model still remains at an early stage of implementation. Wide scale training has been completed and limited piloting of the approach in case conferences is underway. A review of early findings is planned by the end of March 2013. It is recognised that much needs to be done to implement this approach and to improve the quality of practice in assessments, case conferences, core groups and children in need work. Where this model has been used it has enabled some parents to feel better engaged in case conference and in discussions about protection arrangements. The quality of legal advice and support during court processes is good and actions are being taken to more precisely define the time frame within which key planning actions and decisions are required. Although this is a useful development further work is required to fully establish and implement a robust overarching permanency planning strategy for children.

32. CAFs are led by a variety of agencies following a well-established multi-agency screening process which allocates the most appropriate practitioner to support the child or family. Whilst schools are involved well in the CAF process, very few CAFs are currently initiated or led by health, voluntary sector or children’s centre workers. Some professionals, particularly those who do not regularly work with CAFs, find the current e-CAF system cumbersome and time consuming and report that this can sometimes be a barrier to children accessing early help. The quality of CAF assessments seen by inspectors was adequate overall, with a minority that were good. The quality of early help action plans, which often underpin team around the child (TAC) arrangements, was also variable. Few of those sampled had a sufficiently sharp focus on outcomes for children with clear and measurable success criteria. In some cases, the concerns and needs of parents appear to dominate the planning and review process with less clarity about the progress made by the children.

33. There is good awareness across the partnership of issues relating to child sexual exploitation. RSCB is assisting in raising levels of awareness and a multi-agency approach is established to identify and protect young people who may be specifically at risk. Although there are many good examples of individual projects working with young people to reduce risk there is a need to establish a robust overarching adolescent strategy to enhance the coordination of planning. There is also recognition by the council that more proactive work is needed to ensure that partner agencies are equipped to identity when children are privately fostered. Arrangements for monitoring the welfare of children in private fostering placements are established but the frequency of visits to monitor these placements is not consistent.
Leadership and governance

Adequate

34. Leadership and governance are adequate. Senior managers, key elected members of Reading Borough Council and leaders of partner organisations demonstrate an effective understanding of child protection issues and provision in the area. Key elected members are fully committed to improvements in child protection and early intervention. The council has protected children’s services provision in this and next year’s budget and commissioned a new electronic social care record system for August 2013. Member scrutiny arrangements of children’s safeguarding provision are weak. This is recognised and the council is returning to a committee system which will allow detailed public scrutiny by an all-party committee, in addition to reviewing the roles of the safeguarding panels and the strategic and performance information they receive. Members have access to some child protection training and development but this is not systematically evaluated in terms of the number of members who have received appropriate training or their current level of awareness on child protection and safeguarding matters.

35. Strategic priorities are appropriate and business plans are focused on key areas for improvement. A safeguarding action plan is in place that covers most of the previous inspection recommendations with detailed actions. A multi-agency early intervention strategy is in draft and due to be finalised shortly. It is acknowledged however that more needs to be done to consistently and systematically embed consideration of ethnicity and diversity in all strategic partnership planning, for example in the work of the RSCB and also council planning. Since the Safeguarding Looked After Children inspection senior and middle managers have put in place procedural improvements to address the majority of identified areas for development within children’s social care and there have been some areas of practice improvement. Senior managers acknowledge that the pace of change now needs to accelerate in order to set and achieve higher practice standards.

36. There are clear accountabilities between the RSCB, the Director of Education, Social Services and Housing, the Managing Director of the council, the Lead Member for Children’s Services and all other partners. The council and its partners are responding appropriately to the change in organisational requirements from Primary Care Trusts to Clinical Commissioning Group arrangements and the move to Health and Wellbeing Boards. In the short to mid-term it is recognised that further changes to the current governance arrangements will be required including absorption of Children’s Trust Board functions into the Health and Wellbeing Board in order to enhance commissioning opportunities across the partnership. Formal reporting and accountability between the council and its partners are established and information sharing between
the RSCB, the Children’s Trust Board, the Shadow Health and Wellbeing Board and other established forums are in place.

37. The RSCB meets the minimum requirements of *Working Together to Safeguard Children 2010* and the Local Safeguarding Board Regulations. The RSCB has an effective independent Chair and a representative and steadily improving membership. The range of contributions to the work of the subgroups is good and subgroups have delivered useful work. A full Section 11 audit as part of a pan-Berkshire LSCB partnership has been completed and will be reported on shortly. Overall, the safeguarding partnership is effective, however some partners are not fully committed. For example although health engagement has improved there has been a significant delay in the appointment of the dedicated doctor post, which has been vacant for two and a half years. A doctor has now been identified by the PCT who can undertake this role with support from other doctors but this is yet to be formally confirmed with a firm start date. Similarly the failure of the police to improve the quality and screening of domestic abuse reports has increased greatly the pressure on the front line of children’s social care and additional service cost. This concern has prompted continuing representation to the police by the RSCB and the council without meaningful response or action. Police representation at child protection conferences is inconsistent and the RSCB has needed to prompt improvement during the past year. There is good local inter-agency cooperation and representation at multi-agency public protection conference (MAPPA) and multi-agency risk assessment conference (MARAC) meetings that are conducting business appropriately.

38. Detailed performance management arrangements are well established at all levels within children’s social care and are used effectively to improve monitoring and understanding of performance at whole service and individual team level. There have been some useful thematic audits including the examination of the increase of children coming to care and thresholds for care, examination of children in need and child protection referral activity to the assessment and action team. Child protection and children in need performance indicators are generally in line with national or statistical neighbours. However a number of out-lying indicators remain. These include high rates of referral to children’s social care, high numbers of children made the subject of child protection plans and the percentage of children subject to protection plans for the second or subsequent time. Similarly, the rate of looked after children per 10,000 population remains consistently above the all-England averages with a notably high annual ‘turnover’ of children starting to be looked after which creates significant budgetary pressure for the council. The combined RSCB and West Berkshire performance and monitoring subgroup has a common dataset and it is developing this further to build a picture of comparative statistical performance.
39. Some progress has been secured on quality assurance since the last inspection. However, a wider review of the whole quality assurance process is planned in order to address issues of planning consistency and process, capturing children’s lived experiences and quality performance measures. A system for externally reviewing six cases per quarter is in place as well as regular in-house sample audits. However, current audit formats are largely limited in focus to the monitoring of procedural compliance as opposed to quality, impact and outcomes. The link between individual case auditing, reflective staff supervision and appraisal has not yet been fully embedded in routine practice. The quality of management oversight is adequate but variation in the quality of case planning illustrates that quality assurance processes, particularly at first line management level are not yet fully embedded. While action has been taken to address poor individual staff performance the council acknowledges that the depth and consistency of practice improvements at the front line has been slow. Caseloads for social workers across the teams are manageable and enable offers of help and protection to children and young people at an appropriate stage.

40. The local authority and its partners understand the areas of strength in provision and those requiring further development. For example effective action has been taken to strengthen partnership working at a strategic and operational level to reduce the risks to and support for children who go missing from home, care or school. This has been a priority area of work for the RSCB over the last year, including multi-agency training to raise awareness of the risks of child sexual exploitation.

41. Staff demonstrate good morale and report they are well supported with manageable caseloads and access to regular supervision and peer mentoring. A comprehensive range of training and development opportunities is well regarded, particularly by newly qualified social workers. Evidence of regular supervision is now apparent in most case records although the quality of recorded individual case direction and regular formal supervision sessions is largely functional and process led in content without reference to reflection on analysis and outcomes for children and young people. The council has made progress on establishing a permanent and stable workforce. The workforce is ethnically diverse although it does not fully reflect the wide range of minority ethnic groups within the community.

42. The percentage of agency social workers has been significantly reduced across children’s social care services although some difficulty still persists in the external recruitment of experienced social workers and first line managers. In consequence the council has a significant proportion of less experienced and newly qualified staff who inevitably require consistent support and development to reach high practice standards. As a result more senior managers have had to act-down to provide appropriate cover. However, the range of support, training and development opportunities
for these staff is good and a focus on supporting front line managers and practice mentors is also evident. The workforce strategy, which is currently in draft, takes these considerations into account and recommendations are generally appropriate although it does not fully consider the representativeness of the workforce in relation to the ethnic diversity of the local population.

43. There is evidence of effective and continuous learning from complaints and other sources. The 2011/12 complaints report sets out an analysis of complaints along with the principal lessons learned with specific and detailed action plans. There have been no serious case reviews in the area for two years however the RSCB has effectively disseminated pertinent learning from serious case reviews in other safeguarding board areas as well as other relevant issues in newsletters.

### Record of main findings

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