



**care**  
inspectorate

# Joint inspection of services to protect children and young people in the Fife Council area

14 June 2012



HAPPY TO TRANSLATE

The inspection of services to protect children<sup>1</sup> in the Fife Council area was carried out in March 2012. We looked at the services provided by health, the police, the council and the Children's Reporter. We also looked at the services provided by voluntary and independent organisations. Our report describes how good they are at protecting children and keeping them safe. To find this out we read a sample of children's files which were held by these services. We talked to a number of children and their parents and carers to listen to their views about the services they had received. We also spoke to staff in these services who worked with children, parents and carers and to senior managers who were responsible for these staff and the services they provided.

What we found and tell you about in this report is based on a sample of children and families. We cannot promise that this will be the same for every child in the area who might need help.

A team of inspectors gathered all the information and helped to write this report. These inspectors have experience of working across the range of services involved in protecting children. Inspection teams include professional staff who work in council areas elsewhere in Scotland.

The Care Inspectorate carried out inspections of Fife fostering and adoption services linked to the inspection of services to protect children. Any recommendations or requirements are reported on the Care Inspectorate website, [www.careinspectorate.com](http://www.careinspectorate.com)

---

<sup>1</sup> When we refer to children in this report we mean children and young people under the age of 18 years.

# Contents

1. The area	1
2. Particular strengths that make a difference to children and families	2
3. Examples of good practice	2
4. How well are the needs of children and families met?	2
5. How good is the management and delivery of services?	4
6. How good is leadership and direction?	6
7. How are services improving?	6
8. What happens next?	7

## 1. The area

Fife council area is situated on the east coast of Scotland. It covers an area of 1325 square kilometres. Fife has a population of 363,460 with 20.8% under the age of 18 years compared to the Scottish average of 20.5%. It has a mix of traditional and modern industries with a large service sector. Within Fife 10% of the authority area is among the most deprived nationally. The administrative centre of the authority is in Glenrothes.

The number of children referred to the council for child protection enquiries increased between 2006 and 2010. The level of referrals is higher than that for Scotland as a whole. The proportion of children on the Child Protection Register (CPR) in Fife is 3.8 per 1000 which is higher than the national average of 2.8.

## 2. Particular strengths that made a difference to children and families

- Joint approaches to raising children's awareness of internet safety.
- Progress made by Chief Officers in improving services to protect children.
- An improved culture of information sharing and joint working.

## 3. Examples of good practice

- The **CEDAR Project** - helping mothers and their children to recover from their experiences of domestic abuse.
- **Multi-Systemic Therapy (MST)** - keeping vulnerable young people safe and meeting their needs.
- **Barnardos Advocacy Project** - supporting children to express their views at child protection meetings.

## 4. How well are the needs of children and families met?

Staff help children learn how to keep themselves safe through a range of well established programmes delivered in schools. This includes advice about safe use of the internet and mobile phones. Many vulnerable children benefit from staff working together to get them the help they need when they need it; although the right help is not always available in all areas. Schools provide effective help to children as soon as concerns arise about their wellbeing. Housing staff are alert to concerns that a family may not be coping. Flexible and personalised practical help is making a positive difference to children's lives. High levels of support

are provided over long periods of time to assist families with parenting routines. Vulnerable pregnant women are provided with effective support by specialist midwives. Better support is being offered earlier and continues following the birth. Police share information with social workers when children are affected by domestic abuse although more support could be offered at an earlier stage if this information was shared routinely with health and education staff.

Staff across services are alert to signs that a child needs immediate help. Increasingly staff in adult services understand their responsibility to share information when they have concerns about children. Concerns reported to the contact centre do not yet receive a reliable and consistent response. Staff do not always recognise the impact of accumulating concerns quickly enough. This leads to delay for some children in getting the help they need. Some children's health needs are overlooked when there are immediate concerns about their safety. Police and social workers place a high priority on keeping families informed during investigations. When children are unable to remain at home they are placed in alternative accommodation, using legal measures if required. Suitable background checks are usually carried out when children are placed with friends and family.

Staff across services are working well together to meet the needs of many children and their families. A wide range of support is enabling parents to feel more confident in caring for their children and improving children's circumstances. Increasingly children looked after away from home are having their needs met in more local family placements and schools. Managers are working towards ensuring that permanent homes for children are secured more quickly. Some parents who have experienced high levels of domestic abuse are being helped to keep themselves and their children safe through the Multi Agency Risk Assessment Conference (MARAC) approach. However, there is limited capacity to provide this very valuable support to a wider range of families. Some children's health needs are overlooked as health assessments are not requested early enough or carried out quickly enough. Children requiring services to help them recover from abuse and neglect are waiting too long to be seen by

specialist staff. The need of some children with disabilities for care and protection has only been recognised very recently. Staff have focused too much on helping parents manage disabilities and children's safety and wellbeing has not been given a high enough priority. Some children's long term needs are not being met well, with insufficient attention being given to the effects of neglect and emotional abuse on their wellbeing. Arrangements to meet the needs of children whose names have been removed from the child protection register (CPR) are inconsistent.

Staff have suitable guidance on what to do when children go missing from education. The Return Home Welfare Interviews (RHWI) provide a robust, multi agency response to help staff identify why children go missing and what further help may be required. The Child Protection Committee (CPC) has successfully raised awareness of children who may be brought into or moved around the country illegally. Lesbian and gay young people are supported very well by services working together effectively with national organisations such as LGBT Scotland and Stonewall Scotland.

Most children and families trust staff who get to know them well and understand their needs. For a small number of children communication is less effective due to frequent staff changes. In most cases staff sensitively and carefully consider how best to seek the views of children and families who have a difficulty in communication and expressing their views. Parents understand what needs to change to help keep their children safe. Families appreciate staff honesty and openness with them when discussing concerns. Children are benefiting from high quality independent support to ensure their views are considered carefully when decisions are being made about their lives. Most families feel well-prepared for child protection meetings and that their views are being listened to and accurately reflected in reports. Children have highly positive and trusting relationships with their foster carers.

## 5. How good is the management and delivery of services?

Information—sharing across services has greatly improved. Staff are working together better to develop an Initial Referral Discussion (IRD) process. As a result the planning and recording of the response to child protection concerns is starting to become more consistent. Concerns about children from frontline police officers are reviewed by police and then social work. A more comprehensive approach involving other services would ensure decisions reached are based on all relevant information. Public health nurses are starting to use well their risk assessment format to assess children’s health needs. Some social work assessments of risk and needs are thorough. However, overall the quality of assessments is still too variable. Staff need clearer guidance, support and tools to help them improve these to ensure that children’s needs are fully identified and met.

NHS Fife child protection services have developed and improved considerably. Central to this has been the continued effective role of the Child Protection Nurse Advisor and the appointment of a Lead Paediatrician for child protection. Appropriately trained staff undertake timely child protection medical examinations. Better understanding by staff across services of the benefits of a Comprehensive Medical Assessment (CMA), particularly in situations of chronic neglect, would further improve outcomes for children. Across services, staff work well together and share information effectively to manage the risk posed to children by sex offenders.

Staff, including those who work mainly with adults, are working better together to plan how to reduce risks and meet children’s needs. Attendance at child protection meetings is improving. A new approach and style of plan is helping staff to look more broadly at improving children’s wellbeing. Overall, the quality of individual plans is variable and more work is needed to improve consistency.

Chief Officers recognise the importance of reviewing their work to improve outcomes for vulnerable children and families. They have made this a high

priority for themselves, their managers and staff. A range of activities have been undertaken by individual services and by managers and staff across services working together. Helpfully, children and parents have been involved in some aspects of these. This work is managed effectively by the Chief Officers' Public Safety group (COPS) and the CPC. They are now well placed to identify progress in making improvements and identify areas where further work is needed. A greater focus is now needed on those areas that will make a difference to the lives of vulnerable children and families.

## 6. How good is leadership and direction?

Chief Officers' strong vision of keeping children safe is shared by staff at all levels across services. They take their responsibilities to protect children very seriously giving effective strategic direction to public protection work in Fife. The CPC is leading a multi agency approach to child protection. It is progressing identified actions to improve child protection work but would benefit from better prioritisation and organisation of timescales. The Children in Fife (CIF) group effectively directs children's services planning. They are making good progress in implementing a **Getting It Right For Every Child (GIRFEC)** approach to supporting families and meeting children's needs. Chief Officers and senior managers have a strong commitment to partnership working. This is mirrored at local level and many children and families benefit from staff working closely together to meet their needs. Some initiatives, with more than one service involved, are taking longer than planned because of time taken in reaching agreements.

## 7. How are services improving?

Chief Officers and the CPC have strengthened their leadership of services to protect children and meet their needs. Children's plans are more clearly set out and in some cases show how their lives are getting better. Managers gather information and increasingly use this to improve

services to keep children safe. They find out what works elsewhere and are getting better at using this to improve practice. Staff are increasingly considering ways to ensure children and families get the right help at the right time nearer to where they live. The CPC could further improve the pace of change by concentrating on a few important priorities. Staff are increasingly working well together at every level and this is helping to improve children's wellbeing. Children's experiences could be further improved through a stronger focus on the quality of service they receive.

Senior managers are working together more effectively to support staff in reviewing how well they are keeping children safe and meeting their needs. Managers gather information about how well services are working. They need to look more closely at the difference the action they then take makes to the safety and wellbeing of the most vulnerable children. Staff are listening to the views of children and their families who use services to protect children. They are using this information more routinely to make service improvements.

## 8. What happens next?

We are confident that the services will be able to make the necessary improvements in the light of the inspection findings. As a result, we will make no more visits in connection with this inspection. Our link inspector will maintain contact with services to support improvements.

We have agreed the following areas for improvement with services in the Fife Council area.

- Strengthen the response to child protection concerns.
- Strengthen arrangements to ensure children's needs, including health needs, are met well.
- Improve the quality and consistency of assessments of risk and needs.

Quality indicators help services and inspectors to judge what is good and what needs to be improved in the work to protect children and meet their needs. You can find these quality indicators in the HMIE publication **How well do we protect children and meet their needs?** Following the inspection of each local authority area, the Scottish Government gathers evaluations of four important quality indicators to keep track of how well services across Scotland are doing to protect children and meet their needs.

Here are the evaluations of these for the Fife Council area.

<b>Children are listened to and respected</b>	<b>good</b>
<b>Children are helped to keep safe</b>	<b>good</b>
<b>Response to immediate concerns</b>	<b>satisfactory</b>
<b>Meeting needs and reducing long term harm</b>	<b>satisfactory</b>

We also evaluated the following aspects of the work within the local authority area.

<b>Self-evaluation</b>	<b>good</b>
<b>Improvements in performance</b>	<b>good</b>

**Managing Inspector: Joan Lafferty**  
**June 2012**

To find out more about inspections or get an electronic copy of this report go to [www.careinspectorate.com](http://www.careinspectorate.com)

If you wish to comment about any of our inspections, contact us at [enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com) or alternatively you should write in the first instance to Care Inspectorate, Compass House, 11 Riverside Drive, Dundee DD1 4NY.

Our complaints procedure is available from our website [www.careinspectorate.com](http://www.careinspectorate.com) or alternatively you can write to our Complaints Team, at the address above or by telephoning **0845 600 9527**.

If you are not satisfied with the action we have taken at the end of our complaints procedure, you can raise your complaint with the Scottish Public Services Ombudsman (SPSO). The SPSO is fully independent and has powers to investigate complaints about Government departments and agencies. You should write to SPSO, Freepost EH641, Edinburgh EH3 0BR. You can also telephone 0800 377 7330, fax 0800 377 7331 or e-mail: [ask@spso.org.uk](mailto:ask@spso.org.uk) More information about the Ombudsman's office can be obtained from the website at [www.spso.org.uk](http://www.spso.org.uk)

This report uses the following word scale to make clear the judgements made by inspectors.

excellent	outstanding, sector leading
very good	major strengths
good	important strengths with some areas for improvement
satisfactory	strengths just outweigh weaknesses
weak	important weaknesses
unsatisfactory	major weaknesses

## Headquarters

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY  
Tel: 01382 207100  
Fax: 01382 207289

We have offices across Scotland. To find your nearest office, visit our website or call our Care Inspectorate enquiries line.

**Website: [www.careinspectorate.com](http://www.careinspectorate.com)**

**Email: [enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)**

**Care Inspectorate Enquiries: 0845 600 9527**

This publication is available in other formats and other languages on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànanan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ہے بای تہ سرد یم رونا بز رگی د روا ولکش رگی د رپ شرازگ تاعاشا ہی

ਬੈਨੜੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

ی ر خ ا تاعل بو تاقی سننتب بلطلا دن ع رفاوتم روشنملا اذه

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

© Care Inspectorate 2012  
Published by: Communications  
Printed on recycled paper.  
Please recycle me again!



Corporate member of  
Plain English Campaign  
Committed to clearer communication

**420**