

CREATING OPPORTUNITIES AND TACKLING INEQUALITIES SCRUTINY COMMITTEE	Agenda item no. 7
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Report of the Corporate Director for People and Communities		
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REVIEW OF PROGRESS AGAINST ACTION PLAN FOLLOWING OFSTED INSPECTION OF CHILDREN'S SERVICES, 2015

1. PURPOSE

- 1.1. This report provides an update on progress being made against the action plan developed following the OfSTED inspection in 2015. OfSTED inspectors made a number of recommendations following the inspection and their assessment of Children's Services as 'Requiring Improvement if they are to be Good'. Adoption services in Peterborough were assessed as already being 'Good' by the inspectors.
- 1.2. This report provides Members with information about progress made against this action plan, as we work to bring the quality of services to a consistently good standard.

2. RECOMMENDATIONS

- 2.1. Members are asked to note the content of this report, and in particular:
 - The positive progress that has been made in areas such as improving the stability of the workforce and the improvements in relation to compliance issues;
 - That while there have been improvements in a number of areas of practice, overall we are not yet delivering consistently good outcomes for children and young people, and not yet consistently recording and evidencing the quality of all the work that we do to support vulnerable children and their families.
- 2.2. Members are recommended to ask for a further report on progress against the OfSTED action plan in 12 months' time.

3. LINKS TO THE CORPORATE PRIORITIES

- This is linked to the priority of 'Safeguard vulnerable children and adults'.

4. BACKGROUND

- 4.1. The Inspection Report published by OfSTED in September 2015 identified some significant areas of strength in relation to Children's Services in Peterborough. These included early help and prevention services and adoption. Inspectors also expressed confidence in the leadership and management of the service to deliver continuing improvements. The inspection also identified a number of areas where action was needed if Children's Services in Peterborough were to be in a position to deliver consistently good outcomes for children and young people.
- 4.2. The findings by OfSTED were welcomed by senior managers and leaders in Peterborough and resulted in the development of a comprehensive action plan, progress against which is the subject of this report to Committee. This plan is being used to drive improvements in service delivery, and is kept under regular review.

- 4.3. The full action plan is available as Appendix 1 of this report. The plan is set out in such a way so as to evidence progress made after each review.
- 4.4. The remainder of this report provides a summary of progress made against the action plan, together with areas where continuing progress continues to be required.

Performance Management Information

- 4.5. Although there was significant performance management information available to managers in Children's Services at the time of the inspection, the issue identified by the inspection was that this information was not available in or close to 'real time'. Managers need timely performance information in Children's Services so that they can track the performance of plans and activities relating to individual children and young people.
- 4.6. Timely reporting also enables variations in expected performance to be investigated quickly. An example of this would be an unexpected increase in numbers of children subject to child protection plans, for example. At the moment this information is only available monthly or more in arrears. This makes it more difficult for managers to investigate reasons for a change of performance until after the change has happened.
- 4.7. Addressing this issue has required significant activity and investment. This has included upgrading the client database used in Children's Social Care [Liquid Logic] to the most recent version, the purchase of additional software [Business Objects and ClickView] which enables the display of information extracted from Liquid Logic to be displayed in performance dashboards accessible by managers and others within the service.
- 4.8. The current position in terms of the availability of performance data has not changed since the inspection. Data is available but is not yet available on a self-serve basis and, depending on the information, continues to be only available a day, week or month in arrears. Despite this, very significant progress has been made. The majority of the necessary software and infrastructure upgrades have been completed and the functionality of Liquid Logic has been significantly extended.
- 4.9. The outstanding actions relate to building the performance information 'dashboards' themselves. Test environments are scheduled for trial in July 2016, with an expectation that the first self-serve performance management information dashboards should be available from September 2016.
- 4.10. Access to information in this way will make a significant difference to practitioners and managers at every level in the service. At a strategic level, changing trends will be possible to identify at the time, rather than 4 to 6 weeks after they have become established. This will enable analysis of whether there have been changes in practice that need to be explored further, or whether there is clear evidence of changing needs that requires a strategic response.
- 4.11. Team managers will be able to have a clear view of the performance of their team and of any areas where performance needs to be addressed. For practitioners and managers alike, there is the potential to link performance, finance and outcome information, helping to establish a view of the types of intervention that are most likely to deliver outcomes while securing value for money.

Ensuring Consistent Quality of Practice

- 4.12. The current senior leadership team [the Director of People and Communities, the Service Director for Children and Safeguarding, and the Assistant Director for Children's Social Care] in Children's Social Care had been in place for less than 6 weeks at the time that the inspection took place.
- 4.13. One of the first actions undertaken by this then new leadership team was to undertake a detailed self-assessment in order to establish a bench-mark for ourselves about the extent to which the service was delivering good outcomes, and to identify areas of weakness.

This self-assessment identified that quality of practice was being impacted by high levels of turnover among social workers and managers. This was in turn impacting on the quality of relationships with children and families, on the level of management oversight of practice, the quality of plans and resulting in social workers holding caseloads that were too high.

- 4.14. Inspectors noted that in the short time that the new leadership team had been in place, these issues were beginning to be addressed. Our awareness of the issues that needed to be addressed in order to improve outcomes for children and young people in turn gave inspectors confidence in the leadership team's ability to continue to drive improvement.
- 4.15. Since the inspection, significant progress has been made in many of these areas. Staff turnover at head of service, team manager and social worker level has reduced significantly. At head of service level, four of five are occupied by permanent members of staff, all of whom have been in place since the inspection. We have now just successfully permanently recruited to the final head of service role, and expect the new appointee to commence by September 2016.
- 4.16. Only one team manager role is covered by a locum in the front line teams, and use of agency social workers has reduced across the whole service. This reduction in agency social workers has been particularly evident in the family support service. This is the area of the service that works with children subject to child protection plans, child in need plans and that makes the decision about whether children and young people need to come into care in order to be safeguarded and is an area where instability in the workforce has a particular impact on the quality of service experienced by children and young people.
- 4.17. At the time of the inspection, only 19 of the 32 qualified social worker roles in family support were held by permanently appointed members of staff. Today, 30 of these roles are held by permanently appointed qualified social workers. Progress towards continuing permanent recruitment is expected to continue following the introduction of a new recruitment and retention scheme. This scheme was previously agreed at Cabinet, and provides incentives for qualified social workers to join and remain in those posts to which permanent recruitment has traditionally been more difficult.
- 4.18. Securing a stable workforce is a vital step in achieving a consistently high standard of practice. It is very difficult to deliver high quality services in the face of high levels of turnover among team managers and social workers in particular.
- 4.19. Audits of case files are demonstrating consistent improvements in management oversight as evidenced by frequency of supervision and by management comment on individual case files since the inspection. A recent decision to increase the number of team managers in the family support service from four to five is expected to improve this further. This increase in management capacity should help to ensure that improved management oversight is more consistently evidenced in case files and in the recording of supervision – areas that the most recent audit continue to indicate is not yet taking place consistently. This increased management oversight should also become evident in helping to improve the quality of plans for children and young people.
- 4.20. Alternatively Qualified Team Support Workers joined the service in November 2015 as a 12 month pilot. These workers undertake direct work with 200 children in need cases, where an assessment by a qualified social worker has identified the type of intervention required and determined that presenting risks to children and young people are manageable without the need to allocate a qualified social worker to work with the family.
- 4.21. This pilot is proving to be successful; prior to the pilot, this group of children and young people would be allocated to qualified social workers who had a mixed caseload that would include a number of children subject to child protection plans or where we had issued legal proceedings because of high level concerns about risks of significant harm. Prior to the initiative to pilot alternatively qualified workers, the group of children assessed

as being at less risk of harm frequently received less attention from their social worker because higher risk children would draw attention away from them.

- 4.22. The impact of the pilot has been two-fold; this group of children with assessed lower levels of risk receive a much better service because the worker working with them does not hold higher risk cases. This means that the issues that need to be addressed within the family are addressed more quickly and difficulties are less likely to escalate and become more entrenched. Meanwhile, this group of workers has helped to contribute to qualified social workers holding lower caseloads. At the time of the inspection, average caseloads were above 23-25 across the service; they are now below 20 across the service.
- 4.23. Where services are recovering from a period of instability, the first priority is to bring stability to the service in terms of staffing. The next is to improve compliance with policies and procedures, ensuring that there are clear frameworks in place upon which to build consistency in practice. The improvement in the quality of the service in Peterborough is following this pattern. As noted above, staff stability is much improved; compliance is also significantly improved: assessments are being completed within the required timeframes, supervision is taking place consistently, and timeliness of visits is also much improved. While some areas of practice have improved, there remain areas where this is not yet consistent.
- 4.24. So while the most recent audit of the extent to which the voice of the child is present in assessments, plans and case notes shows considerable improvement, use of chronologies remains an area where progress has not yet been made consistently. An effective chronology enables a new worker to quickly understand key developments in a child's life – including in relation to any times when the family may have previously had social work involvement. Maintaining an up to date chronology that contains the right level of detail is not an easy task for any practitioner, particularly when the day to day work is highly pressured.
- 4.25. Independent chairs [of child protection case conferences] are now alerting team managers wherever they believe that a case worker has taken insufficient account of historical information in assessing risk and protective factors. This is helping managers to identify workers who need support in developing the quality of their practice.
- 4.26. Another area where practice remains inconsistent is in relation to management audits. Managers and leaders are required to undertake a certain number of casefile audits per month, which helps us to understand where workers may need additional support or where there are remaining practice issues. While these audits are taking place, the target numbers are not yet being met consistently. This is an area on which heads of service will focus on once again in coming months.
- 4.27. Despite these areas where there is a need for improvement, there are others where the mechanisms for delivering practice improvements are becoming more embedded. The Principal Social Worker chairs the social work forum, for example, and this is now used as a means for front line staff to be involved in the development and dissemination of good practice to their teams. Practice development workshops are taking place regularly, and we have now established a means of monitoring the impact of these on changes in practice.
- 4.28. Although there is more work to do to ensure consistency of plans, the quality is improving, and certain specific steps have been taken within the service to improve the robustness of planning for most vulnerable children. For example, a multi-agency unborn baby protocol has been developed with key partners. This sets out the roles of each key agency where there are significant concerns about an unborn baby. This means that we are becoming much better at undertaking parenting and risk assessments in a timely way before birth, enabling more effective planning to ensure good outcomes for the child.

- 4.29. This, combined with a new process around planning prior to issuing legal proceedings in relation to any child or young person means that social workers and team managers are now much more pro-actively planning for good quality permanent outcomes for children – through placements within the extended family, adoption or long term fostering. Importantly, they are also making sure that there are effective contingency plans should the initially preferred outcome not be possible to achieve.
- 4.30. Finally, all heads of service regularly review the progress of all children within their service area. There is less drift as a consequence, with many fewer children subject to child in need or child protection plans for 12 and 18 months or more than was the case at the time of the inspection. For children and young people in care, there is evidence of better care planning and the quality of pathway plans is improving.

Neglect

- 4.31. Inspectors identified evidence of significant levels of neglect within the City, a finding with which all partners working with children and families would agree. Inspectors recommended that both the Council and the Safeguarding Children Board develop neglect strategies in order that all those working with children and young people [and perhaps, most importantly, families with young children] are supported to improve outcomes for children affected by neglect.
- 4.32. The Council and Safeguarding Children Board have been working closely together to ensure that the two strategies complement one another. A multi-agency approach has been taken to developing the strategies and the assessment and support tools that practitioners can use to help them to identify and address neglect, hopefully before it becomes entrenched.
- 4.33. Both strategies will be presented to the July 2016 Safeguarding Children Board for agreement by all key partners working with children, young people and their families. The Board will then lead a series of training and workshop events to support practitioners in using the tools and approaches to support improved outcomes for children affected by neglect.

Child Sexual Exploitation and children and young people who go missing from home, care or school

- 4.34. Members will be aware of considerable activity to investigate child sexual exploitation in the City. This has resulted in a number of arrests and successful prosecutions of perpetrators who have exploited vulnerable young people. This activity has been accompanied by a significant programme of awareness raising and development of preventative measures to help the community to identify where children may be at risk of exploitation, and to know what to do if they suspect exploitation is taking place.
- 4.35. The OfSTED inspection recognised the considerable amount of work taking place in the City in this area and found that once child sexual exploitation was recognised, the response of agencies including the police and Children's Services was good. However they also identified that this response could be even better if there was better sharing of information between key partners about patterns of behaviour that may indicate a risk of Child Sexual Exploitation. Inspectors also identified that there needed to be a better and more consistent use of risk assessments by social workers wherever there were any signs of a young person being at possible risk of exploitation.
- 4.36. We can never be complacent about issues such as Child Sexual Exploitation, and it is very important that we maintain a strong focus on the issue. Since the inspection, we have developed a number of approaches to help us to identify risks of sexual exploitation and disrupt the activities of potential offenders at an early stage.
- 4.37. For example, we have established a multiagency strategic group that meets regularly and shares all intelligence and information about young people who may be at risk by virtue of

being missing from care or from home or being absent without permission from school. This information is linked to intelligence about the activities of those who are suspected of being involved in seeking to exploit young people.

- 4.38. This group is leading to much better sharing of information between agencies and is helping to ensure that risks towards young people are being addressed. It is also reassuring that in a recent Joint Targeted Area Inspection in Bedfordshire which was focused on approaches to protecting children and young people from exploitation, this type of approach was praised by inspectors.
- 4.39. Our strategic response to children who go missing from home or care has also improved since the inspection. Return interviews when children go missing from home are completed by an independent agency [Barnardo's]. Children who go missing from care are offered return interviews from another independent agency [the National Youth Advisory Service].
- 4.40. Importantly, information from these interviews is collated and trends or patterns identified. This information is then shared with the multiagency strategic group described in paragraph 4.37 above. This ensures that any potential links with risks of exploitation are made.

Initial Health Assessments

- 4.41. Children and young people who come into care and remain looked after for more than 28 days should have an initial assessment of their health needs. Children and young people who remain looked after should have an annual health assessment, and this should include an assessment of their emotional and mental health.
- 4.42. The OfSTED inspectors made recommendations concerning both initial health assessments and the extent to which health assessments included consideration of emotional and mental health needs. These recommendations were made because in the financial year 2014/15, fewer than 20% of children and young people had an initial health assessment within the target timescale of 20 working days, and Children's Services had stopped using Strength and Difficulty Questionnaires [which provide an overview of a child's emotional health and mental wellbeing] in 2014, arguing that these were not necessary and that health assessments would address these issues without the questionnaire having to be completed.
- 4.43. Performance in respect of initial health assessments is much better; with 71% of children having such an assessment within 20 working days in May 2015, and monthly performance typically around the 70- 80% mark of assessments taking place within the target timeframe. Although improved, performance does remain below the stretch target of 95% that we have set ourselves, however. This is a challenging target to achieve for a number of reasons. The 20 day target is very tight; a number of steps are needed before a child can have a medical assessment. These include obtaining consent from the person with parental responsibility and arranging the actual appointment at a time convenient to child and carer. Even where these steps are completed, some young people refuse to have a medical assessment.
- 4.44. Because overall numbers coming into care in any one month are small, the refusal by one young person or the failure to complete an assessment in relation to a sibling group of two results in a significant variance in the percentage performance for that month.
- 4.45. A further challenge relates to children and young people who are placed outside the Peterborough area. In this situation, we are reliant on services in the host area to undertake the assessment – services that are often stretched in meeting their own local demand.
- 4.46. Members will be reassured, however, to know that our overall performance in terms of the percentage of children and young people who have an assessment of their medical needs

is good, with almost all children and young people benefiting from health assessments. The particular challenge is for all or most of these to be completed within the 20 working day timeframe which children and young people first become looked after.

- 4.47. Re-establishing the routine use of Strength and Difficulties Questionnaires has taken a little longer to achieve. This is partly because we wanted to address another perceived failing in the system in place when these were last used by the service – the perception that there was little strategic use made of the information that these questionnaires contained within them to improve services.
- 4.48. We have established a route for information from these questionnaires to be collated and fed into the Children in Care Board, chaired by the Assistant Director for Children’s Social Care. This information will help us to identify common support needs among our child in care population and, where necessary, use this information to inform the commissioning of support services.
- 4.49. The questionnaires, which are completed by the child or young person’s carers, are being fed into the annual medical review process, meaning that all children and young people will benefit from this approach by the end of this calendar year.

Children’s Participation and Corporate Parenting

- 4.50. OfSTED inspectors identified that more needed to be done to secure effective participation of children and young people in care, and that this, combined with a more robust approach to corporate parenting, would support elected Members and senior leaders to hear and act upon the views and experiences of children and young people.
- 4.51. There have been a number of significant activities in relation to these recommendations. The first is that additional funding has been secured to enable the recruitment of a dedicated participation officer to support children and young people in care and care leavers. A participation strategy and pledges for children and young people in care and care leavers have been developed in partnership with children and young people.
- 4.52. As well as setting out an undertaking to children and young people about the quality of the services they are entitled to expect, the pledge helps Members and senior leaders to judge services based on the experiences of children and young people in care, providing a bench mark against which these experiences can be compared.
- 4.53. Corporate Parenting responsibilities are significant and Members need support to carry them out effectively. With this in mind, training for Members who are part of the Corporate Parenting Panel or Committee through the Local Government Association has been arranged for autumn 2016.
- 4.54. The Leader has also been working to review the status of the Corporate Parenting Panel, and there will be a recommendation to full Council that the Panel is replaced by a Committee. Should Council agree to this change, Corporate Parenting functions would have the same status and formal authority as other Committees of the Council.
- 4.55. The proposals suggest that the Corporate Parenting Scrutiny Committee would meet formally and informally on an alternating basis. Press and public would be able to attend the formal meetings, increasing the level of openness and transparency about Council actions to secure improved outcomes for children and young people in care.
- 4.56. Closed informal meetings provide the opportunity to enable Members to engage with children and young people in care and care leavers in new ways. Feedback from children and young people to OfSTED inspectors was that they experienced Corporate Parenting Panel meetings as a ‘Snooze Zone’. The proposed change to Committee status brings with it the opportunity for informal meetings taking place in a completely different format, and to support the development of strong relationships between Members and young people in care and who have left care.

The Virtual School for Children and Young People in Care

- 4.57. OfSTED inspectors recommended that we review the capacity of the Virtual School to ensure that there was sufficient capacity to meet need. They particularly identified a lack of capacity to support young people in education beyond the age of sixteen.
- 4.58. A number of activities have taken place to address the areas for development identified by OfSTED. All children and young people of school age should have a Personal Education Plan [PEP]. The PEP sets out learning goals for children and young people, and identify whether additional support is necessary. The PEP is the main mechanism for evaluating whether the child or young person is making progress, and that any additional support or resources are delivering results and improving learning outcomes.
- 4.59. We have invested in an electronic PEP system, which enables central monitoring of individual pupil performance, making it easier to identify any children and young people who are not making the progress that might be expected, and to focus attention on these individuals to help address any difficulties they are experiencing. This has made the system of monitoring progress more efficient and effective.
- 4.60. Additional funding has also been identified to recruit a specific post-16 adviser for the virtual school. The intention is to recruit to this role in time for the new academic year, which will help to address the specific recommendation about supporting pupils aged 16 and above.
- 4.61. The impact of these changes will be evaluated; any indication that there continues to be a lack of sufficient resource to meet need will be addressed as these changes bed down.

Care Leavers

- 4.62. The inspection identified that many aspects of our support to care leavers are good. Specifically, they noted that care leavers felt safe in their accommodation, felt that they had been able to make choices about accommodation, and that the service supported 'Staying Put' arrangements well. Staying Put refers to the situation where young people aged 18 and above are able to remain with their former foster carers until age 21, with funding provided by the Council.
- 4.63. There were a number of specific recommendations made about how we can improve the support offered to care leavers, however. Progress against most of these recommendations has been generally good. Health passports and care leavers' information packs, for example, have been developed with care leavers and are now ready to be formally launched. These are an important part of helping young people to make the transition into adulthood. They describe their rights and entitlements, together with responsibilities. They provide information about sources of support and provide information about relevant medical histories that may be needed in later life.
- 4.64. The website for children in care and care leavers is one area where progress has been limited. This is in part because children and young people have not been particularly keen on the idea. Children in care now have access to an App called 'Mind of My Own' that enables them to provide feedback on and views about their care and support plans. There is growing evidence from a range of sources that young people increasingly expect to access information through Apps, and websites are becoming outdated from their perspective.
- 4.65. There is little point in investing in a form of communication that young people may not use, and so this aspect of the OfSTED action plan is currently being reviewed to assess whether it remains relevant, or whether other forms of communication and technology would have a greater impact.

Learning from Complaints

- 4.66. Complaints have the potential to provide important information about how users of services experience those services, and provide a means for helping services to improve. OfSTED inspectors identified that services in Peterborough were not evidencing that we were learning from the findings of complaints, or that practice changed as a result of complaints.
- 4.67. There has been a considerable amount of work to improve the way that complaints are responded to; practitioners and managers respond to complaints in a less defensive and more conciliatory way. Fewer complaints go out of timescale or escalate through the stages as was the case at the time of the inspection.
- 4.68. Quarterly fact sheets summarising themes from complaints are produced by the quality assurance service and these feed into practice workshops and management meetings.
- 4.69. While these are all positive developments, we would acknowledge that there is more for us to do to ensure that learning from themes within complaints is having a demonstrable impact on strategic service development or on staff training and development. This is an area for focus over the coming 6 to 12 months.

5. KEY ISSUES

- 5.1. The inspection itself provided a very useful and intensive assessment of the strengths and areas for development of Children's Services in Peterborough. The action plan developed in response to the recommendations following the inspection have provided a clear framework for managers and leaders to use to deliver sustainable improvements in service quality and outcomes for vulnerable children and young people.
- 5.2. Key issues arising from the implementation of the action plan include:
 - Securing sustainable improvements in the quality of practice and hence outcomes for children and young people in a complex service such as children's social care takes time and dedication;
 - This is particularly the case where services are recovering from issues such as high levels of staff turn-over, high proportions of locum managers at every level and high caseloads such as was the case in Peterborough in the lead up to the OfSTED inspection;
 - The initial focus in an improvement journey such as this is on stabilising the workforce, and there have been significant improvements in this area;
 - Although not specifically addressed in this report, key performance indicators such as the timelines of assessments have improved significantly since the inspection, indicating that compliance issues are also being addressed;
 - Caseloads have fallen, care planning is more effective and management oversight is significantly improved; and
 - We have yet to achieve a consistently good standard of practice across all areas, however. While much individual work with children and their families is very good, this is not always recorded effectively, and not all children and families yet benefit from good quality assessments and purposeful, effective intervention.
- 5.3. The foundations for continuing improvements are in place. The focus for the service in the coming six to twelve months is to ensure that practice is at a consistently good standard, and this is our aim for the next 9 to 12 months.
- 5.4. Peterborough is a challenging City for Children's Services, however. There is a high level of needs that results from relatively high levels of deprivation, especially in some areas of the City. The diversity of the population – while offering the City many benefits – also presents challenges in terms of differing cultural expectations and in respect of resources resulting from translation and interpretation needs.

- 5.5. Smaller authorities such as Peterborough are also less resilient to unexpected developments or sudden changes in need. Larger authorities are able to more easily move resources around to manage sudden increases in need; there is less flesh on the bone in Peterborough.
- 5.6. These factors all contribute to making the City a challenging place to ensure consistently good outcomes over time. That said, our practitioners and managers are working hard to achieve this and remain very dedicated to achieving the best outcomes for the vulnerable children and families with whom they work.

6. IMPLICATIONS

- 6.1. Work to deliver consistently good outcomes for all children and young people in the City continues, and much progress has been made since the inspection.
- 6.2. Other services are also changing alongside those commissioned and provided by the Council; we are working with key health partners to deliver integrated Child Health Services and to improve Child and Adolescent Mental Health Services. Schools are also working to deliver a large range of extended services including activities outside of school hours, parenting support and individual pastoral support to pupils.
- 6.3. While this report is concerned with providing Members with an update in relation to the work of Children's Services in delivering the improvements identified as being needed through our initial self-assessment and subsequent inspection, delivering consistently good outcomes for children and young people does require partnership working across health, care and education sectors. We are fortunate here in Peterborough that this is an area of strength.
- 6.4. There are no particular Human Resources or Legal implications arising from this report.
- 6.5. This report is relevant to all wards in the City.

7. CONSULTATION

- 7.1. This report has been shared with senior managers within Children's Services, together with Legal and HR Services.

8. NEXT STEPS

- 8.1. The OfSTED action plan will continue to be reviewed and used as a benchmark for the delivery of sustainable improvement in Children's Services.
- 8.2. Work for the next period will focus on supporting the development of consistently good practice, as evidenced within the written records contained within children and young people's files.

9. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985:

- 9.1. Inspection of services for children in need of help and protection, children in care and care leavers in Peterborough.

10. APPENDICES

- 10.1. Action Plan following inspection of Children's Services by OfSTED in 2015 – July Update.