

**A REPORT FOR THE LONDON BOROUGH  
OF ISLINGTON ON THE MANAGEMENT  
OF CHILD CARE WITHIN THE  
NEIGHBOURHOOD SERVICES  
DEPARTMENT**

**Emlyn Cassam  
B.A.(Hons) C.Q.S.W**

**Research fellow at the  
University of East Anglia**

**Formerly  
Director of Social Services  
Norfolk County Council**

**July 1993**

**Brian A. Mc Andrew  
M.A, F.inst mgt., F.I.P.M., F.R.S.A**

**Independent Consultant**

**Formerly  
Chief Executive  
London Borough of Enfield**

## 01 ACKNOWLEDGEMENTS

We wish to acknowledge the considerable help and assistance we were given by the people we interviewed and the administrative and professional staff who supported us. The area we were studying was a difficult one and we heard many distressing stories. We were impressed that even in the most controversial circumstances people were united in wanting only the best for the children of Islington and their families.

It may be decided that on individual cases work remains to be done and we will submit documentation and comments to any future enquiry subject to individuals who submitted those ideas and or documents agreeing.

We have tried to reflect the honesty and co-operation we received in the review we now submit. The advice and comments we received runs into many volumes. Although it could not all be recorded in the report it was considered in detail and was the basis of our recommendations to council.

Emlyn Cassam

Brian A. Mc Andrew



## 02 TERMS OF REFERENCE

The following were the terms of reference agreed between the London Borough of Islington and the Department of Health.

1 To examine the care and range of services provided to children and young people accommodated at Islington's children's homes and the management of those services.

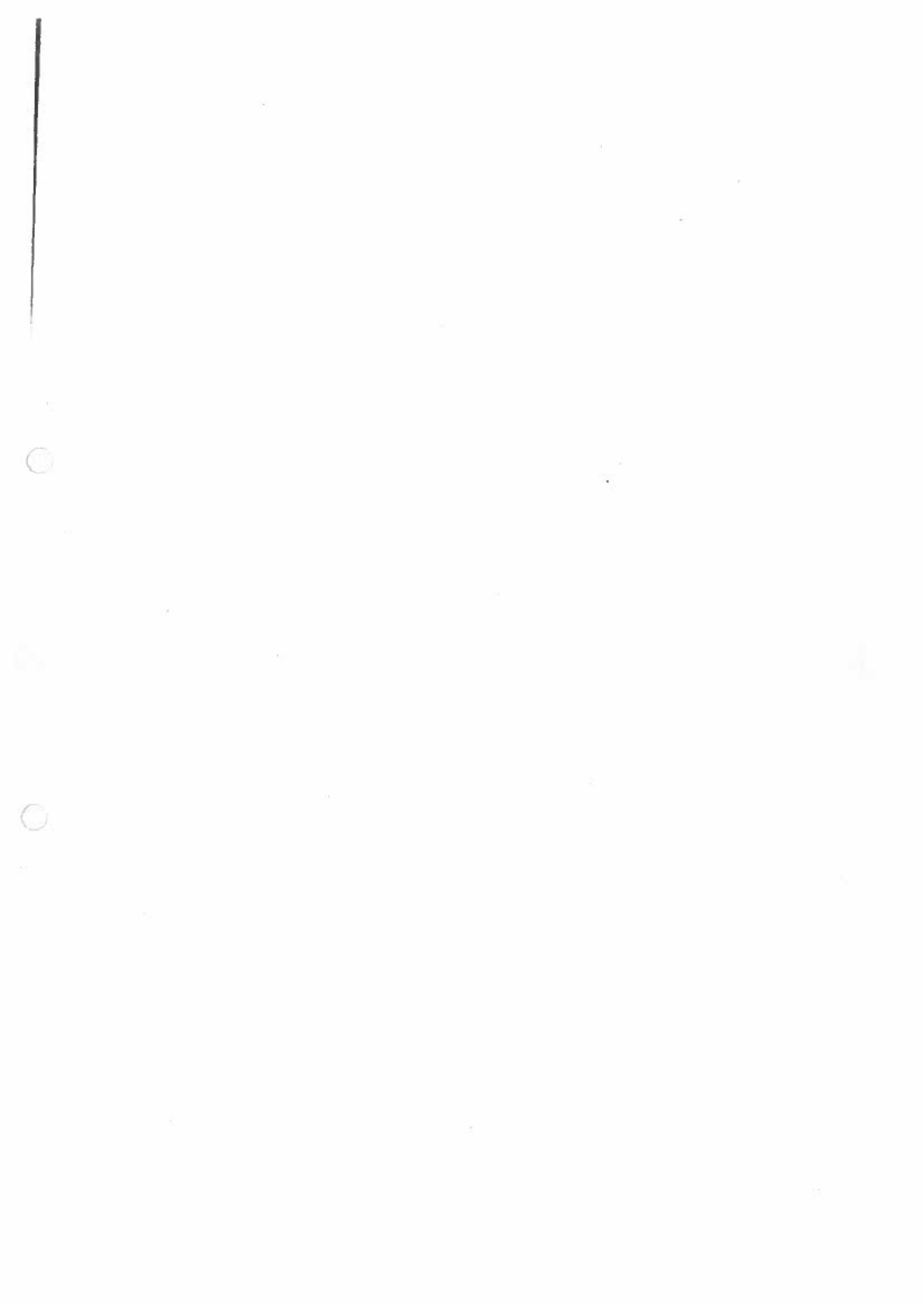
2 To examine the arrangements for the effective management of child care services and cases between the Neighbourhood Services Department and its neighbourhood offices.

3 To examine a range of personnel matters concerned with the management of staff who are subject to allegations in the Evening Standard articles of professional malpractice

4 To make recommendations

# CONTENTS

01	Acknowledgements	ii
02	Terms of reference	iii
1.	Executive summary	1-3
2.	Introduction	4-9
3.	Our methods	10-12
4.	How Islington is organised	13-24
5.	The standards by which we make our judgements	21-26
6.	What our information indicates	
	6.1. Needs of service users	27-29
	6.2. Morale	30-33
	6.3. Vision, values and management systems	34-39
	6.4. Organisation of field work	40-45
	6.5. Neighbourhood management	46-48
	6.6. The policy unit and specialist services.	49-51
	6.7. Residential care	52-58
	6.8. Senior management	59-63
	6.9. Structure	64-75
	6.10. Administration	76-78
	6.11. Personnel	79-90
	6.12. Training	91-93
	6.13. Setting standards	94-94
	6.14. Monitoring and inspection	95-97
7.	Evening Standard allegations and further enquiry	98-99
8.	Conclusions and recommendations on structure	100-107
9.	Other conclusions and recommendations	108-112



# 1 EXECUTIVE SUMMARY

## 1.1 Introduction

The introduction details how the enquiry came into being following allegations in the Evening Standard.

An interim report was produced and its findings were accepted by the Council. This final report focuses on the managerial changes we believe to be necessary to provide an acceptable level of service to children, young people and their families.

## 1.2 Methods

We listened to over a hundred people and read scores of reports and files which we requested or which were submitted to us. We spoke to the reporters who wrote the original articles, the people who receive the services, those who provide them and their managers and supervisors. We reported to the chief executive, spoke to the social services directorate and to the chair of the social services committee.

## 1.3 Organisation

In section 4 we explain the structure by which services are provided in Islington. We regard this as important because we later identify these arrangements for child care as a major contributor to all that has gone wrong.

## 1.4 Standards

We detail in section 5 the standards by which we make our judgements. As this is a management review it seemed highly relevant to state what we regard as the hallmarks for a well managed service. We lay particular emphasis on values, vision, performance oriented management and the provision of quality throughout the organisation.

## 1.5 Analysis

The major analysis is in section six under detail headings listed in the contents page. We make recommendations where appropriate at the end of each section. These are summarised in chapter nine and ten. Our major conclusions are that ;

- standards of some child care work are unacceptable
- the structure is unworkable
- communication and understanding of roles is poor
- there is an absence of good management practice
- morale is low and relationships are poor

When the original neighbourhood offices system was set up it was a time of relative plenty. Since that time resources have been spread ever more thinly in a very complex structure.



We make recommendations to change the situation we discovered which affirm the Council's decision to provide a community based system of devolved management. To achieve this we have recommended a structure which maintains a generic intake service at all neighbourhood offices whilst reorganising other social workers and their management along more specialist lines. We regard improving the spirit and style of the organisation as equally important to making structural changes and recommend accordingly.

We were not set up nor was there time to do a disciplinary enquiry. It would be premature to make judgements on culpability before the work on organised abuse is completed. We found that judgements on individual performance were masked by the complexities and confusion of the structure.

#### **1.6 Allegations and unfinished business**

In section 7 we indicate that further work may be required and draw attention to the urgent need to address how the allegations of organised abuse were handled.

#### **1.7 Structure recommendations**

Section eight lists all the recommendations about structure

#### **1.8 Other recommendations**

This section gives a chronological list of all recommendations other than structural.

## 2. INTRODUCTION

### 2.1 Purpose

The purpose of this report is to make recommendations as to how the London Borough of Islington might modify and improve its delivery of Social Services. The precise terms of reference are set out on page 3. They were agreed with the Department of Health.

### 2.2 Background

This report has been commissioned by the Borough on the advice of the Department of Health following perturbing articles in the London Evening Standard which included amongst its allegations:

- that children accommodated in Homes were involved in drugs and prostitution and that Islington was failing in its duty to protect them
- that management did not listen to the concerns of their residential and field staff about the standards of care being offered
- that inadequate care and control were being given to children who were accommodated

- that the agencies in Islington had not investigated thoroughly the complaints that paedophiles had access to children in care and that there was a possibility that a paedophile ring existed. In addition, certain Islington staff were said to have hindered Police investigations. The Evening Standard quoted the cases of several children which exemplified the allegations.

Immediately following the newspaper articles, Islington commissioned two consultants (Jo Tunnard and Brian McAndrew) to assess the current situations of the children described in the Evening Standard and to comment on whether or not they believed the Homes to be out of control.

On receiving this Interim Report in February 1993, the Council accepted the recommendation contained in it that a further consultant be appointed, who had a more detailed knowledge of the management of a Social Services Department. This was Emlyn Cassam.

### **2.3 Concerning this report**

The time scale for carrying out this report has been short. We formally started on May 18 1993 and had to hand the final report to the Chief Executive by the end of July 1993.

Following initial negotiations between Islington and each of the consultants, the number employed was reduced from three to two.

The allegations concerning paedophile rings are being dealt with by the Department of Health - not by this report.

Right up to the time we were writing the draft report, people were making appointments with us in order to make specific allegations, complaints and recommendations for change. Any suggestion that children were currently not receiving adequate care was immediately referred for the appropriate action, but we have not been able to investigate all the allegations. We have however used what we were told to inform our analysis of the way the Neighbourhood Services Department is working.

Some of the allegations made about individuals are worrying, although we stress that we have not investigated them to see whether or not they are true. We recommend some further investigation for the following reason:- even though we believe that if our recommendations are carried out, the chances of bad practice will be reduced, it is people who provide safe care - not structures.

## 2.4 What we have tried to do

Our task has been primarily to use the allegations, complaints and information we have obtained from a large number of sources to reach a view as to whether the organisation of services in Islington is providing an acceptable and safe level of Social Services.

We have not pursued 'responsibility' of individual members of staff; that was beyond our brief and our time scale. We would however point out that there have been, in our view, failings in Islington over several years. Many of these stem from trying to operate in an unclear and stressful system.

It is our judgement that the failings of the structure and systems mask any judgement of the managerial competence of individuals. It is right that the Council has to judge whether those who have overseen the present failings can deliver the changes we recommend. Such judgements are premature before the results of the enquiry into organised abuse have been published.

We would remind everyone that too much harping on the past can inhibit that process of rebuilding and therefore not be in the interests of those who require assistance from the Borough Council. Morale is important. Good quality services can only be delivered by a workforce that is properly motivated, enthusiastic

and proud to be associated with Neighbourhood Services in Islington. Picking over the bones excessively will not create that climate. And the people who will suffer will be the users of the service.

This report does not purport to be an appraisal of all the activities of the Neighbourhood Services Department. We have not carried out a comprehensive review of the services for people with mental health problems, those with learning disabilities, people with a physical disability, and elderly people. We have however looked at how the fieldwork services to those people are organised in the generic neighbourhood offices.

Because of its concentration on difficulties, the report focuses on what needs to be put right and does not emphasise what is going well. The authors have found things to commend in Islington, and we have had brought to our attention some areas of good practice.

We would like to state that although we have criticisms about how the 'neighbourhood' system is being operated, we can also see its clear advantages. What we are suggesting is modification rather than eradication.

## 2.5 Towards the future

Some of the action needed to improve services has already been put in train by the Director of Neighbourhood Services and other managers. Other plans have been put on hold pending our enquiries.

Throughout this report, problems and solutions have been viewed as much as possible from the point of view of the service user. In doing so, some cherished and traditional ways of doing things have been challenged. Many of the improvements recommended will require that councillors, staff, trade unions and other departments do the same. In this regard the open-minded reception given to the authors during their discussions in the Borough augurs well.

## 3. OUR METHODS

### 3.1. Listening and reading

We listened to people who received the services, those who provided the services and their supervisors and managers. We read files and the huge number of documents that were submitted together with a wide range of publications and reports relevant to child care practices. The existence of the enquiry was widely advertised to the public, clients and former clients and staff at all levels. Although some people asked to see us the majority of individuals and groups were interviewed at our initiative.

Over a hundred interviews (of individuals and groups) were carried out and they form the basis on which we have made our observations and recommendations. People were given pledges of confidentiality and we have not revealed our sources without the permission of the individuals who gave their evidence, experiences and suggestions. We were assisted and advised by selected professional and administrative staff who work under the same conditions of confidentiality as ourselves



### **3.2. Other consultants**

Before producing the interim report we consulted a wide range of people who were expert in child care. Before producing this report we were able to see the conclusions of recent studies by other consultants such as the Kings Fund. We commend these studies to members and we concur wholeheartedly with their findings.

As we developed our thinking we have checked out perceptions and ideas with a range of people including the Social Service Inspectorate and senior managers. The final product is, of course, entirely our responsibility

## 4. THE ORGANISATION OF SOCIAL SERVICES IN ISLINGTON

### 4.1 The Development of Neighbourhood Offices

Fieldwork social services have been decentralised in Islington since 1971. The original organisation had 10 area offices.

From 1982/3 Islington Council has been working to decentralise other operational services in order to achieve effective involvement of the community in setting local priorities and allocating delegated budgets. It was also envisaged that council officers would be able to respond more readily to the needs and strengths of the local community if they were physically based in the heart of the community.

Accordingly in 1985 the first phase of 24 Neighbourhood Offices opened. A formal link between community representatives, local councillors and Council staff was created by the setting up of a Forum to cover each office. During this time the social services staff in the neighbourhood offices were part of the Social Services Department and the responsibility of the social services management team

Within each neighbourhood office were teams of workers from social services, housing and

environmental health. Each of the specialist teams in each office was headed by a Neighbourhood Officer (Social Services, Housing etc.). A Neighbourhood Officer (Social Services) managed the fieldwork team, the home care service, and the day and residential establishments that fell within the geographical area covered by the neighbourhood office.

Groups of Neighbourhood Officers (Social Services) reported to an Assistant Director (Social Services), who may or may not have had a detailed knowledge of the client group or problem passed to them for consideration. To overcome this lack of expertise, each Assistant Director took a Borough-wide policy role for a particular client group.

In 1991/2 this structure was refined further by the amalgamation of Housing, Social Services and part of the Chief Executive's Department into the newly-formed Neighbourhood Services Department. Also within each Neighbourhood Office were certain staff from the Environmental Health Department who remained the professional responsibility of their own department, but who provided a service in the neighbourhood under a service level agreement. All the services in each neighbourhood office were placed under the control of twenty four Neighbourhood Managers posts which were inserted between Neighbourhood Officers and Assistant Directors. The

two main reasons for this move were to ensure greater co-ordination of services at a local level, and to place responsibility for services with a single person easily identified by the local community.

Neighbourhood Managers are now responsible for the operation of all services delivered from the Neighbourhood Office. This includes - amongst other things - housing benefits, housing repairs, rent arrears, homelessness, welfare rights, child abuse, foster homes, children's homes, mental health, physical and learning disability, home helps, residential and day services for elderly people. Neighbourhood Managers may, or may not, have a training or background in social services.

Neighbourhood Managers report to one of two Deputy Directors or three Assistant Directors, three of whom have a background in social services and two have not. Each Deputy and Assistant Director also has a responsibility for a particular specialist function (e. g. childcare), and acts as lead policy adviser and repository of specialist knowledge for the other assistant directors and neighbourhood managers. Senior Management posts do not manage the totality of resources assigned to their speciality; only those that happen to be situated in the neighbourhoods which report to them.

With the present structure it is possible for a neighbourhood officer (social services) to have no one with a social services qualification above them in line-management (as their neighbourhood manager, their Deputy or Assistant Director and Director of Neighbourhood Services could all be from a Housing background).

In 1993 eight neighbourhood offices were 'twinned' with eight others for financial reasons. The numbers of Neighbourhood Managers and Neighbourhood Officers (Social Services) were each reduced from twenty four to sixteen. Services were still to be offered from all twenty four sites, but Neighbourhood Managers could amalgamate social work teams and locate on one site, providing duty services solely from that site, with surgeries by appointment at the other site.

#### **4.2 Policy Sections and Specialist Groups**

The Council has always accepted that certain areas of social work policy and practice require specialist knowledge and experience. In order to provide this, Divisional Policy Teams have been set up for Children and Families, for Adult Services, and for aspects of Housing, Support Services and Community Development. (We shall, however, confine our comments to those relating to social services). These Teams produce policy papers for consideration by the

senior management team, prior to their being issued to relevant sections of the Department. Members of the teams also act as specialist advisors and participate in the allocation of residential places, although in the case of Children and Families, they control neither the access to beds nor the budget for out-Borough placements.

In addition, sections have been set up to deal with specialist areas of work. Some of these sections provide direct services for users (e.g. short-stay fostering, adolescent support, juvenile justice, emergency night duty, specialist services for people with disabilities, occupational therapy physiotherapy and health social work). Others provided the framework and advice for the services still to be offered by the neighbourhood teams (e.g. child protection). Others were a mixture, largely assisting neighbourhoods, but occasionally doing direct work with users (e.g. permanent family placement, community living).

#### **4.3 Clerical and Administrative Support**

This is provided generically. A support services manager in each neighbourhood organises, amongst other things, reception, financial systems, clerical and administrative help.

#### 4.4 Quality

At present this is placed in a research and quality section which reports to the Assistant Director (Quality and Finance Division). This section also registers and inspects private and voluntary homes. Discussions are taking place as to how far this section should be transferred to the Chief Executive.

It has been the view that all social work services would be inspected eventually. Up to the present time, however, this has not been achieved. Independent inspections of the Council's residential units for children are presently being carried out by Croydon Social Services Inspection Team - at the request of Islington.

Other aspects of a quality system are being provided by consultants, for example, the obtaining of views from all children in residential care, and the sampling of views of staff throughout the Department.

The Chief Executive's Quality Unit and the Neighbourhood Services Department have done Exit Surveys to sample user satisfaction of six neighbourhood offices.

#### 4.5. Residential Care for children

This presently is in a state of flux for the following reasons:

- a massive refurbishing programme
- a new Adolescent Strategy which has meant the closure of two homes and the change of function of another.
- a review of the function of the three Family Centres

Following these changes Islington will be left with

- 2 Family Centres -
- 1 Adolescent Resource Centre
- 3 Children's Homes
- 2 Respite Care Homes
- 1 Young Families Unit

During these changes and refurbishment's, children are being decanted into a home which will close at the end of the programme.

Islington's prime policy in child care is for children to be in families (preferably their own) and for older children to live as independently as possible. The Housing side of the Neighbourhood Services Department is used to obtain accommodation for older children. Some of the money saved by closing two



children's homes will be used to further these strategies, especially regarding adolescents. Other savings will be lost to the Department as a contribution to the £200,000 needed to be cut from the child care budget in 1993.

A Children's Resource Panel considers and allocates resources for all requests for residential accommodation both for Islington's own homes and for those run by other agencies. There is a recent history of there being too few places available, primarily because homes are being silted up with children who require family placements. The budget for placements in private/voluntary homes is under the severest pressure and usually overspent. It is not unusual for this panel to be unable to secure the most suitable placement.

Islington's homes and day centres are managed by the Neighbourhood offices in which they are situated. They have no separate management dedicated either to residential/day care for adults and children.

#### **4.6 General**

Finance looms large in the present consideration of services. The Council is having to curtail its expenditure. Cuts are already being sought from the budget of the Neighbourhood Services Department, and it is probable that this will continue

The social services part of the Neighbourhood Services Department has been in a state of flux for several years. Structural changes have been exacerbated by cuts. Within the last few months many local managers have changed neighbourhoods. These changes rest uneasily with the concept of local staff getting to know their local communities.

There was a wide spread strike in the department from September until February. This was about authority wide policies rather than a departmental dispute.

## **5. THE STANDARDS BY WHICH WE MAKE OUR JUDGEMENTS**

### **5.1 Quality Assurance**

One of the functions of management is to ensure that the consumer or user always receives what they expect and what they have been promised. This section of the report looks at the components of a quality assurance system for delivering social services.

### **5.2 Purpose, Values and Vision**

These come from a mixture of professional knowledge, political aspirations, needs of the local populace, direction from central government and the energetic hope of those who lead the organisation. Such views should be synthesised into clear statements of what the Council is trying to do and the ways in which it intends to do it. If this is done effectively, then all staff in the organisation can begin to share a common purpose and start to travel in the same direction.

### **5.3 Policy and Strategy**

To know where an organisation is going is but a start. Management also needs to be clear as to how it is going to get there. These steps should be able to be achieved within a realistic time scale. Progress should be monitored regularly.

## 5.4 Setting Standards

Standards are a means of judging whether or not the organisation is achieving its goals. They are therefore measurable. It should be axiomatic that standards should be achievable, otherwise the organisation is bound to fail. Standards can be set for:

- the outcomes necessary for a successful enterprise
- the inputs which will help to achieve those outcomes
- customer care

Unless an organisation has clearly defined and published standards, staff will not know what the agency expects of them and management will not be able to monitor or inspect progress. Moreover, neither the organisation nor the users of its services will know whether it is being successful.

## 5.5 Establishing the Process

Staff need clear direction, training, equipment, time and support to do the job expected of them. But even this will be insufficient unless they are enthusiastic, are motivated to achieve quality, are constantly searching for service improvements and are proud to be working for the Department. To achieve this an organisation

function independent from those who are responsible for service delivery. A common fallacy is to believe that Inspection is the main plank of a quality system. It is not. All it does is to inform whether or not all the other components of the system are operating effectively.

#### **5.7 Involvement of service users.**

Part of the quality assurance process is making sure that users know what services they can expect. The Disabled Act (1986), The Children Act (1989) and The Community Care Act (1990) all impose duties on Social Services Authorities to inform potential users of what is available. There is also an obligation to consult service users and carers prior to publishing the Community Care Plan.

#### **5.8 Putting things right.**

For the dissatisfied service user there should be a complaints procedure which is advertised and is easy to understand and operate. This is now a statutory obligation on all Social Services Authorities. But just as importantly, the organisation should act decisively on internal information which indicates that standards are not being met

## 5.9 Review and Planning

Successful organisations set up systems of information which allow changing needs to be identified, and then use that information to adapt services accordingly.

## 5.10 Summary

The main ingredients for a quality assurance system are:

- A system for quality is driven by the requirements of the service user - not the needs of the organisation or the preconceptions of managers and staff
- A clear statement of aims and values should be produced and widely published
- An organisation needs vision and leadership together with a strategy for achieving its policies
- The climate of the organisation should engender enthusiasm, flair and pride.
- Staff should be motivated to 'own' the quality system. To do this there should be regular and effective consultation.
- Measurable standards of service should be set, which are achievable by the workforce.

- All members of staff should have the directions, resources, training, time, conditions and equipment to do the job expected of them.
- Monitoring of standards should be done by the workforce themselves, their line managers and, in an overall systematic way, by senior managers.
- Inspection should be seen by staff to be credible and knowledgeable about local conditions and difficulties. Faults should be addressed speedily.
- Service standards should be advertised and there should be a system for rectifying complaints.
- Users, carers and their representatives should be heard at all stages of the system.
- Changing needs should be identified and addressed.

## 6.1 PUTTING THE SERVICE USER FIRST

Several of Islington's policy statements, including the papers on the setting up of the Neighbourhood Services Department, imply that all services are being organised and delivered in the best way for individual service users. We do not believe that this is always the case.

The driving force for the organisation of services in Islington is the elected member's perception of what 'the community' wants. Indeed, the majority party has spelled out its views in its manifestos and has obtained a clear mandate from the electorate. What we are suggesting is that the needs of the users of some of the social services may not be the same as the majority of the community, and to organise services without paying particular attention to their requirements might not be appropriate. It should not be forgotten that the recent exit polls conducted in six neighbourhood offices showed that the number of callers who wanted to see a social worker was negligible. Moreover the number of social services agenda items before Forums does not indicate that the organisation of social services is the highest concern to the community.



Throughout this chapter we will be commenting on aspects of service delivery which seem to be driven by other motivations than getting the best deal for the social services user. There are other agendas, and in our view these sometimes come between the user and an effective service. To give a flavour of what we mean, below are a few examples where we are sure things would have been done differently had the needs of the service user been considered first:

- the imperative that with very few exceptions fieldwork should be delivered through generic social workers, who may or may not have the skill and training
- operating a duty system over 24 (now 16) offices, which absorbs so much staff time that other users are sometimes not getting a proper service
- failing to provide enough money over many years to keep children's homes in decent repair and furnishings
- staff withdrawing their services
- having a long-term Family Finding Unit which spends most of its time encouraging and supporting overworked neighbourhood social workers to assess foster parent applications. The

consequence is much activity but not enough suitable foster carers

- committees reducing budgets without seeming to accept publicly that services to the user could be affected, e.g. the reduction in clerical administrative help and the recent reduction in middle managers

If one always started from the perspective of the user, we are confident that Islington would decide to do things differently.

**RECOMMENDATION 1(for section 6.1)**

**Whenever services are being organised for groups of people in social need, the requirements of the service user should be considered first.**

## 6. WHAT OUR INFORMATION INDICATES

### 6.2 MORALE AND MOTIVATION OF STAFF.

To provide a quality service, it is necessary to have a workforce which 'owns' and shares the management's perception of quality, is motivated to deliver it, and is proud of the service being offered. Indeed, suggestions for overcoming difficulties and for improvements can sometimes best come from those who are in direct contact with the users.

In Islington we were disappointed to hear the views of so many staff who were dispirited and apprehensive. Many times we were told that the services are not safe, and that staff were fearful of the consequences - a view with which we concur. Other consultants working in Islington have received the same views. Quality services cannot be delivered by staff with such low morale.

This should not be interpreted as staff objecting to the concept of a Neighbourhood Services; most in fact were committed to working in small geographical areas. They were disillusioned about

- not being listened to
- their problems not being solved

- rarely seeing their senior managers
- not being truly consulted about proposed changes
- not receiving replies to letters

Despite this we were impressed by the loyalty shown by many staff to the Borough. They wanted to stay and help to make things better. It was touching to see the faith that many had in this review. They saw it as a vehicle for change. We hope they are right.

**RECOMMENDATION 2 (for section 6.2)**

**In planning and organising services the views of staff and their trade unions should be sought**

Part of the disillusionment comes from the belief that prior to 1990, Islington both had a Housing Department which was said to be second to none in London, tightly, efficiently and effectively managed, and had a Social Services Department with popular leadership and a good reputation. Staff in both sections have expressed the views that since 1991 the situation has deteriorated. Primarily this is because senior management had to be engrossed in trying to make a complex organisation work in a milieu of cuts in expenditure and new legislation. We are told that

senior management had to spend much of their time "fire fighting".

It is important to realise that although staff do not like there to be financial cuts, this does not seem to be their major worry.

There is also some cynicism as to whether there is the political will to make changes. Staff say that Social Services are not 'the flavour of the month', with many councillors because members remember their initial opposition to the creation of the Neighbourhood Services Department and because of the recent strike.

There is presently a gulf in perception between many social services staff, their senior managers and their councillors, which will have to be addressed before staff morale and motivation is improved.

**RECOMMENDATION 3 (for section 6.2)**

**When considering this report, councillors, managers and staff should divest themselves of the baggage of the past and make a fresh start in giving the best service possible in the present financial climate**

**6 WHAT OUR INFORMATION INDICATES**  
**6.3 VISION, VALUES AND MANAGEMENT SYSTEMS**

**6.3.1 Values**

We found little evidence of any work to produce and publish the shared beliefs of those who managed and provided services. Without this it is difficult to build teams, trust and understanding. This is a critical issue in highly devolved structures used to provide neighbourhood services. One of the bonuses of published beliefs is the knowledge that colleagues at all levels will approach new situations and issues on the basis of those shared values. This helps with consistency of practice and the difficulties of communication throughout a complex organisation. We did find, amongst service providers, a strong desire to reassert the basic beliefs of the service. We are told that the Policy Committee will address this issue on 15 July.

**6.3.2 Conflicting Values**

The situation is not neutral in that clear evidence exists of strongly conflicting and unresolved beliefs at all levels of management. These differences can be used as the tension that creates change, indeed without such tensions change will not occur. However there has to be a process of gaining understanding of agreed and disagreed values. Such a process might leave some

people profoundly disagreeing with the stated values of the service. That would indicate that they were in the wrong organisation. Milder differences are the price and strength of the diversity of human kind but even here behaviour should confirm the agreed values. Those who are in receipt of children's services should be aware of the values that guide the choices of those who provide the service. This provides an opportunity for service users to know what to expect, to influence change and develop those values. We believe that such values should be published.

### 6.3.3 Vision

We asked managers at all levels what was the long term vision for the department in general and for families and children's services in particular. The answer was short and frank, there wasn't one. This would explain why we got the impression that activity was largely a short term response to current issues. There has of course to be such a response and no one could dispute that there has never been so much to respond to.

The organisation is not in a healthy state if all the resources that are given to reflect and think and get ahead of the game are used up in short term fire fighting. Such resources include a good percentage of the time of senior managers.



A vision is not a detailed management plan but rather an exciting picture of where you want to be in the long term. It is a device for having the best possibility of shaping the future rather than being its victim. Having vision, widely shared and understood, throughout the organisation is a hallmark of a well run organisation. This is especially true for politically-led organisations.

#### **6.3.4 Policies, Objectives and Management Systems**

After vision and values comes the familiar hierarchy of policies, objectives and the strategies for their achievement. The main policy document on child care is dated 1984. It is a very advanced document for its time and could be said to anticipate the 1989 Children Act. None the less it requires updating. We have seen documents prepared by people in policy development that cover a range of issues raised by recent legislation. What appears to be lacking is a systematic, overall involving approach which puts Islington in charge rather than being confined to responding to yet another crisis or piece of legislation.

#### **6.3.5 Direction**

In the absence of vision, values and comprehensive policies there is a lack of direction. This was widely reported at all levels of management and by service providers. Several senior managers said that the system was simply not working. One person said that they could not get out fast enough.

### **6.3.6 Strategic Management**

Strategy is about achieving policy, goals etc. If these are not in place a strategic approach to management is not possible. Having policy, vision etc. in place is more than having a range of published documents. These things are only ever in place if they are widely understood and practised. We found little evidence of that.

### **6.3.7 Performance Management and Quality Assured Services**

It is not possible to have a performance management or quality management system without agreement on what it is the system is to produce. An appraisal scheme is being introduced. This will greatly assist all management processes. If done well it will answer the two most fundamental questions that employees ask ; what do you expect of me? and how am I doing? A good appraisal scheme will involve continual change and improvement. As the scheme improves it can become the main way in which the whole of the organisation is aligned to achieving the long term vision and the shorter term goals that have been set. The scheme will have limited value until these are agreed.

### 6.3.8 Setting Priorities

Priorities appeared to be determined at neighbourhood level. At this level they appear to be a response to the immediate demands of those who walked through the door or more commonly by what other agencies refer. There were very differing needs between different offices and the structure allows for an appropriately different response. There are also established patterns of service in response, for instance to a large number of hostel places for the mentally ill being sited in a particular neighbourhood. Amongst local managers we found some valuing of this freedom to choose. We also found a feeling that they were managing with wide freedoms in the absence of managerial direction. In that context the feelings were of abandonment rather than freedom.

The neighbourhoods saw current new issues as the centre's priorities. The need to issue guidance on current issues was understood and occasionally appreciated. Some service providers said that they felt swamped and could not read all that was issued. Local managers complained that current new issues took precedence over ongoing ones without any apparent process of choosing.

### 6.3.9 An agreed theory of child care

Developing values for child care could reasonably be extended to produce a theory of child care agreed as the basis of best practice in Islington. The residential units do have statements of purpose but as we drew attention to in the interim report this did not provide sufficient clarity for the running of facilities. The agreed theory would be the basis on which institutions are run, on which interventions and inspections are made and on which individual performances are judged. An external consultant has been working in the department to produce practice manuals and other guidance for staff working within residential units. This will assist in developing agreed theories and filling out statements of purpose. It is not an alternative for an exercise involving relevant people and developing shared values and agreed theories of child care.

#### RECOMMENDATION 4 (for section 6.3)

That the Neighbourhood Service Department begins a programme of management development to produce agreed values, vision and management systems..

## 6.4 ORGANISATION OF SOCIAL WORK AT NEIGHBOURHOOD LEVEL

In Islington, social workers are expected to be able to deal with almost any complex problem which arises within their district. This might just have been possible some ten to fifteen years ago, but it is now an unrealistic expectation.

The Mental Health Act, Children Act and Community Care Act all demand detailed knowledge and competencies, and the training requirement alone virtually rules out the option of social workers being totally generic. Moreover, Islington's residual stock of trained and experienced social workers is declining. The workforce still has some unqualified staff, a few agency workers and a recruitment pattern of appointing newly qualified but inexperienced staff. We believe that Islington is at risk of serious failures in social work performance.

That is not to say that the 'Neighbourhood' concept is wrong. It is not. We heard good examples of the significant benefits accruing through working in small geographical areas and knowing its resources as well as its needs. There has to be balance between these advantages and ensuring that the staff have the time.

knowledge, support and experience to deal with complex and potentially dangerous problems.

For example to maintain a duty system for all twenty four (now sixteen) neighbourhood offices took a disproportionate slice of social work resources. This is at a time when the 'professional audit' carried out in June / July 1992 showed that most of the child care work was not up to standard in the areas of recording, assessment, direct work with young people, or compliance with statutory regulations on the placement of children and review of cases, or, so far as could be established with any evidence, the appropriate supervision of work.

According to a senior manager, Islington is often failing to achieve minimal compliance with currently expected standards in relation to the more complex aspects of child protection work.

The above deficiencies in quality are hardly likely to have been improved by the reduction in managers in April 1993.

In common with other London Boroughs there is a backlog of work in community assessments, in finding foster parents, and demands from families and children means that work for adults receives a generally low

priority. Children (over the age of 5) and adults with special needs are being added to this backlog of work.

A further problem lies with mental health social work. Over the years lengthy training programmes have attempted to bring large numbers of social workers up to the 'Approved' status. Few new Approved social workers seem to be emerging at present, and this makes it difficult to cover duty in all offices. This situation is exacerbated by Islington's failure to renew the approvals of the social workers approved over five years ago. This is causing concern to the Mental Health Commission. In the view of the authors some of the social workers approved several years ago may not be able to have their approvals renewed because they do not do a significant amount of work with people who have mental health problems. We understand that this has been reported to the social services policy sub-committee, who are awaiting our report.

One of the tasks of a social worker is to ensure that networks of social care are put round vulnerable people. Such networks can involve a number of agencies. A network for an elderly person could involve home care, a geriatrician, G.P., district nurse, day centre, meals on wheels, occupational or physiotherapist, whereas a network of agencies involved with an under functioning family with small children would be different, as too would networks for

people with learning difficulties, mental health problems. truancy etc. Developments in social care networks often depend on the trust and confidence that professionals have for each other, attributes which are built up through personal contacts. In our view, to expect individual social workers to key into too many different kinds of networks may reduce their effectiveness.

The above problems are made worse by poor office facilities, an erratic standard and quantity of administrative help and a high turn over of staff in some offices. Despite a massive training programme, there is insufficient training for all staff in all the new legislation, and even if training was sufficient staff could not find the time to do it.

We have received much conflicting advice about how many neighbourhood offices there should be. To this question the simple answer is "as many as the Council is able to finance adequately". The neighbourhood office model is expensive and we understand that the Council is facing severe financial problems which are likely to continue. If the Council is likely to be forced to make further cut backs in the number of offices we would recommend that the Council consider taking an initiative that would give a longer term stability.



Within the above framework, there is no professional reason why a generic social services reception / intake facility should not operate in all the offices which are open to the public. What is professionally necessary, however, is to have larger groups of social workers to enable them to acquire and use specialist knowledge and skills. In our view there is no safe alternative to this arrangements.

**RECOMMENDATION 5 (for section 6.4)**

Social workers should be grouped into specialisms and work in one, two or more neighbourhoods. As a minimum there should be specialisms for adult care, families and children and for mental health. There are also strong arguments for further specialisation in respect of learning disabilities, child protection and for people with sensory disability:

**RECOMMENDATION 6 (for section 6.4)**

The number of neighbourhood offices should depend on the ability of the Council to fund them adequately without diverting resources away from people in complex social need. A long term view is needed.

RECOMMENDATION 7 (for section 6.4)

For each of the neighbourhood offices there should be a generic reception / intake facility.

RECOMMENDATION 8 (for section 6.4)

The generic reception could report to a neighbourhood officer social services but we would prefer it to be the responsibility of the neighbourhood manager, who can co-ordinate such work with other reception duties. It can also provide the neighbourhood managers with information about the area relevant to servicing the forum.

## 6.5 MANAGEMENT OF SOCIAL SERVICES IN THE NEIGHBOURHOODS.

The Neighbourhood Officer for Social Services (NOSS) and the Assistant (ANOSS) face all the difficulties of social workers (outlined in 6.4 above) and more besides. The NOSS also manages any residential and day-care establishments in the neighbourhood, be it a children's home, day centre for people with learning difficulties, home for elderly people or whatever, plus managing the home care service and being the budget holder for many of these activities.

In our view, the detailed knowledge base required to run all generic fieldwork, residential, day care and home care services is surely beyond the scope of most middle managers.

Even if the NOSS had the knowledge, they have not had the tools to do their job. For the past two years the department has been developing commissioning the CRISSP computerised information system, which, we are told, will soon be operational. At present they suffer from inadequate information systems, lengthy recruitment procedures and a lack of clerical help which leaves these officers to do their own typing and

arranging of child protection conferences. On top of that whilst their numbers have been cut back from twenty four to sixteen their workload remains the same. Most of them have been obliged to move neighbourhood in the last three months.

Islington can be proud of the service being given by their middle managers. But in our view those managers, despite their commitment, are placed in a system which almost guarantees failure at some time or other.

In chapter eight we discuss a new structure. As far as middle managers are concerned, we will recommend that they be divested of residential and day care establishments, and that each specialises in either child and family care or in services to adults. Such reductions in scope of their management will give them the opportunity to increase their knowledge base in their specialist area, and impart it to the staff they control. We are convinced that this would improve quality of output.

RECOMMENDATION 9 (for section 6.5)

Neighbourhood officers social services and assistant neighbourhood officers social services should also be specialists, leading groups of specialist social workers

RECOMMENDATION 10 (for section 6.5)

Neighbourhood Managers should no longer be expected to manage residential and day care establishments

RECOMMENDATION 11 (for section 6.5)

Neighbourhood Managers should continue to manage housing functions, reception / intake, home care, general administration, relations with the community, advising the forum and drawing up neighbourhood plans. They should be relieved of their present responsibilities for social work, residential and day care.

## 6.6 THE POLICY UNITS AND SPECIALIST SERVICES

There is an acceptance by the Neighbourhood Services Committee that certain functions require specialists, and in chapter four we have described briefly what those functions are.

We have learned of some excellent work coming from these units and sections, especially in terms of setting out a policy framework for services. We do commend that work.

Severe problems do, however, exist in the following general areas:

- policy units are also expected to line manage certain specialist operational activities, which in respect of families and children sucks them into daily crises.
- as they have specialist knowledge, staff in the units are constantly being bombarded for advice, guidance and even direction. This may be right and proper to some extent. What is worrying, however, is that we are told that this intervention is needed sometimes to help to resolve conflicts between agencies or within the Department, or because of complaints about poor standards of work. These are problems which the line

management structure has been too diffuse and potentially ambiguous to sort out.

- because of the policy that contact with users should wherever possible be via the neighbourhoods, a number of knowledgeable and skilled practitioners spend the bulk of their time chasing up and enabling non-specialists to do the work. One has to question whether it would be better for those specialists actually to do some more of the work themselves.
- the present structural gap between policy makers and operational managers has led to very patchy implementation.
- we have been informed that despite the high quality of policies that have been developed, there are still areas of policy to be thought through. This we can confirm from our observations of what is happening in children's residential units. The Council has wanted to further decentralise operations for the last 18 months but has been unable to do so due to a lack of resources.

Specific difficulties to be tackled include:

- improving the system of finding and assessing long term foster parents, and the role of the Family Finding Unit.

- redefining the role and activity of the Children's Resources Panel. If it is to survive in something like its present form, the Chair should control the budget for placements otherwise the budget should be delegated to Neighbourhood Specialist teams.
- the relationship between the specialist team for children with physical and / or learning difficulty and the neighbourhoods needs to be reconsidered to ensure that children of all ages obtain a comprehensive service.

Although we have personal views as to how these difficulties can be resolved, the best solutions will depend on how far Islington accepts our recommendations for change.



## 6.7 RESIDENTIAL CARE FOR CHILDREN.

For a description of some of the conditions found in two children's homes, please refer to the Interim Report. We have visited five other children's establishments and can say that we did not find circumstances as bad as the original two. Nevertheless we found matters to give us concern.

When making our visits we knew that a full and detailed independent inspection was about to be carried out by the Inspection Unit from the London Borough of Croydon. Accordingly we only browsed through the administrative records, knowing that any deficiencies would be picked up by that inspection.

We had some difficulty forming accurate assessments of the usual quality of care because of the massive physical improvements and changes which are belatedly taking place or are to be carried out in the next few weeks. These renewals are taking place at the same time as a new strategy is being implemented for adolescents, and new roles being found for the Family Centres. Although we welcome the refurbishments, it is sad that they have only been deemed necessary in the past few months, when they have clashed with the

other changes. During this spring and summer the whole service has been disrupted.

Although much of this chapter will deal with deficiencies, we did meet some good practice. During our visits we noticed that staff respected children's privacy, and there appeared to be a good rapport between children and staff. Children who spoke to us on their own were lively and articulate, and sometimes appreciative of the efforts of individual members of staff. We were delighted to learn that Islington employed an independent consultant in September 1992 to obtain the views of all the children then being accommodated.

The main impression we received about the establishments was a sense of drift. There does not seem to be a set of standards common to all the establishments, and this causes resentment from staff and children. Sometimes children have seemed to be setting the agenda. At others there are fierce rules, such as in one family centre where no male is allowed into the residential unit at any time, be he boyfriend, father or brother of a resident. To a certain extent units are 'doing their own thing' and do not seem to be working to a common purpose.

RECOMMENDATION 12 (for section 6.7)

Clear standards of practice should be set by the Neighbourhood Services Committee and these should be inspected at least every six months, with any defects being rectified.

There are some good staff about whom children made warm comments; but these staff give the impression of being overwhelmed by the effort of trying to make the management system respond to problems. They feel they have no-one at senior management who can fight their battles for them.

We have also heard of incidents which are simply bad child care, and of staff who appear to have no commitment to the children. Some of these we have brought to the attention of senior managers, and we are pleased that they are being investigated.

We know that some of the children being accommodated are severely damaged and present staff with extraordinary challenges. We also accept that the pattern of problems we describe below have been found in homes run by other local authorities and private/voluntary institutions.

Nevertheless these are some of the unsatisfactory situations we found.

- in one establishment several children had been excluded from school. They were now receiving totally inadequate education. Sitting around all day with no activities programmed for them, they were utterly bored. It is little wonder that flare-ups have occurred. Of great concern was that no-one seemed to be taking responsibility to do something quickly to resolve the problem.
- we found several instances where plans for children had not come to fruition for months or even years. This has bred disillusionment and cynicism among those children. Some children's reviews were woefully out of time, and not all the delay could be attributed to the strike.
- physical conditions were sometimes wanting. We saw further evidence of poor maintenance. In one home due to be refurbished, the central heating had no effective controls, so radiators were hot on one of the warmest days of the year. This problem was said to date back to the 1980s. There was no integrated fire alarm system even though the Fire Brigade had recommended one. In one purpose built home, the video did not work and the washing machine was broken; moreover according to the older girls they were allowed no money to go to the laundrette. In this