

CHILDREN FIRST

Practice Improvement Plan

DRAFT JULY 2019



Foreword - Our 'Children First' commitment

West Sussex County Council is committed to putting **Children First** and improving the services in everything we do. We are clear that the positive change we want to achieve for our children will require everyone to work together, including partner agencies and corporate colleagues who have a vital role to help create the environment where good social work can flourish.

By working together with our partners we intend to ensure consistently high standards in the care and protection we provide to children who need it, enabling the best possible outcomes.

To help achieve our intentions we have established an independent, multi-agency Improvement Board with a remit to offer independent rigorous scrutiny of our arrangements and progress of the twelve recommendations of "what needs to improve", outlined in Ofsted's inspection report published in May 2019.

Our plan takes a 'What Good Looks like' approach to social work improvement (on the ground coaching and support to managers, training, performance, practice standards, clarity about roles, responsibilities and expectations). The actions outlined in the plan are designed to give frontline staff the tools and resources to achieve sustainably good outcomes against the Ofsted recommendations.

Paul Marshall

Cabinet Member
for Children and Young People

John Readman

Director of
Children's Services

Practice Improvement plan - Our approach

This plan is our Practice Improvement plan to specifically focus on the areas of improvement identified by Ofsted. We have defined actions against each of the 12 areas, the outcomes and impact we want to achieve and how we will know we have achieved improved outcomes. The actions are a broad overview of what needs to happen to address the area of concern identified in the inspection, and enable our leaders, managers and front line practitioners (who have all been involved in the development of the plan) to understand what needs to happen to make the required improvement. This is a time-specific piece of work covering year one, to take immediate action from the date of inspection.

Our approach to implementing this plan and how we will monitor our progress will be through the Improvement Board, Programme Board and project work. The actions required will be broken down into work streams: Workforce and Development, Practice and Standards, Leadership and Governance, Partnerships, and Service Design. This will enable detail under each of the actions, with task and finish groups to implement the operational changes required with sufficient pace. The Programme Board will be responsible for overseeing the progress being made and addressing any barriers, along with the Improvement Board.

However we recognise that the failings identified are the result of a bigger system issue, and to simply focus on the “fix” does not provide a sustainable solution to prevent these failings re-occurring. We also acknowledge that the areas of improvement do not fully incorporate wider service development, and we have now started to develop a multi-agency Children First strategy. This will be in partnership with the Health and Wellbeing Board and other county partnerships. This enables us to think creatively and innovatively to achieve the best outcomes for children in West Sussex as a whole, and more importantly to embed and sustain long term improvement over the coming 3-4 years.

	<p>children's social care workforce,</p> <p>1.3 including practice guidance and procedures and the quality of staff induction and training.</p>		<p>implementing practice standards, procedures and clear simplified process maps as a quick service guide for key areas</p> <p>1.2.2 Embedded WSCC 'employee conduct standards' and expectations' in the implementation of standards.</p> <p>1.3 Establish a Staff Workforce Group</p> <p>1.3.1 Develop and implement a specific Children's Service Staff induction programme.</p> <p>1.3.2 Design, consult on and agree a Practice Leadership programme for Advanced Practitioners, Group Managers, Service Development Managers and Service Leaders.</p> <p>1.3.3 Implement Practice Leadership Programme.</p> <p>1.3.4 Evaluate the impact of the Practice Leadership Programme.</p> <p>1.3.5 Establish a 'community of practice' led by practice champions/educators to embed good practice starting with neglect and Pre-birth work.</p>		<p>HR/all managers</p>	<p>6. % increase of staff with appraisals (review incremental progress)</p> <p>Target: 95% by March 2020.</p> <p>7. % increase of new staff with probation reviews completed.</p> <p>Target: 95%</p> <p>8. % increase in number of staff completing mandatory training and role specific training.</p> <p>Target: 95%</p> <p>9. Feedback from the newly devised practice forums for both new and existing staff demonstrate increased staff satisfaction.</p> <p>10. Training feedback forms show % of staff who rated the training as successful, immediately after the training, one month later and three months later (through supervision).</p> <p>Target: 90%</p> <p>11. Compliance with practice standards is part of our audit process</p> <p>Evidence including:</p>
--	---	--	--	--	------------------------	--

			<p>1.3.6 Implement training on 'What Good Looks Like' for Social Workers, Practice Managers and other key frontline practitioners.</p> <p>1.3.7 Update the supervision template record to ensure it captures all training, effectiveness and impact on practice.</p> <p>1.3.8 Build upon current training programme available to practitioners and stipulate those courses that are mandatory for example graded care profile, neglect, radicalisation etc....</p>		<p>a) % of stat visits for CP, CIN and CLA in timescale Target: 95%</p> <p>b) % of Child & Family Assessments completed in maximum 45 working days Target: 95%</p> <p>c) % of children seen during the Child & Family Assessment Target: 95% Seen Alone Target: 70%</p>
--	--	--	--	--	---

Improvement Outcomes

The service will have increased capacity to lead and achieve improvement and good leadership with a well trained workforce, which is clear about standards and expectations. All roles will have clear defined work remits with responsibility and accountability.

All new starters will have a meaningful induction to the entire Children's Services to ensure our workforce understand the structure and services available to children and their families. We will have a workforce strategy that will evolve with the needs of the service and will support staff in career development and personal aspirations. Training will be role specific with mandatory training to address key areas that are important for the workforce so they have the right skills and knowledge to deal with the range of complexities facing children. Setting out what good looks like and clear understanding and identification of risk and need.

Children will experience timely, good quality and consistent intervention from a named Social worker at point of allocation and build trust without unnecessary changes of worker. Their voice will be heard and evidenced in assessments and plans with a good understanding of their lived experiences with and a detailed updated chronology.

Ref	Objectives / what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
2	The quality of social work practice, to assess, support and protect children who experience neglect.	Pg 3 Para 2 Pg 4 Para 8 Pg 9 para 34	<p>2.1.0. With the Safeguarding Children Partnership (formerly Children Safeguarding Board) update and launch of Neglect strategy, including a focus on prevention and Early Help.</p> <p>2.1.1. Social Care to have a dedicated Neglect action plan to address key areas including implementation of the Graded Care Profile and its impact and review process.</p> <p>2.1.2. Undertake a multi-agency audit of neglect cases to result in an agreed range of actions across the partnership: Audit to address: The promptness of identification, the use made of historical information, the extent to which there is an analysis of the impact of neglect on the child and the robustness of actions to improve outcomes.</p> <p>2.1.3. Scrutinise open Neglect cases to ensure there is good management oversight and supervision where required.</p> <p>2.2. Put in place neglect learning events to improve outcomes for children using live cases examples.</p>	Nov 2019 Jun 2019 Jan 2019 Aug 2019 Dec 2019	Jon Brydon/ Anne Marie Dodds/ Amanda Radley Sally Allen Head of QA Head of QA Learning and development/PSW	<p>12. % of neglect cases referred using the NIMT tool.</p> <p>Target 70% by Jan 2020</p> <p>13. Findings of the Multi-agency audits.</p> <p>14. % of children with CP Plans for Neglect with a graded care profile by the 1st review.</p> <p>Target: 80%</p> <p>15. % of repeat Child Protection Plans with a category of Neglect with a Graded Care Profile completed at point of 1st review:</p> <p>Target 90%</p> <p>16. % of repeat CP plans for Neglect</p> <p>Target: 25%</p> <p>17. % of cases with management oversight or supervision (in a 4wk period) where the primary need code is neglect</p> <p>Target: 90%</p>

			2.3. Develop and train staff to produce analytical chronologies that will identify chronic neglect and support earlier identification.	Dec 2019	Learning and development/PSW	
--	--	--	--	----------	------------------------------	--

Improvement Outcomes

The partnership will be able to identify and respond to neglect in a timely way and appropriately and referrals of neglect will have utilised the assessment tool (NIMT). We will have an effective Early Help offer to address neglect at an early stage to help reduce children living in chronic neglect before they are escalated to Social Care.

A targeted Neglect Action plan will facilitate the improvements to the service and provide agreement about how we identify, support, track and monitor Children in neglectful situations.

Children identified as suffering from neglect as part of Child Protection will be reviewed at 9 months to ensure graded care profiles have been completed and audit will ensure we are not causing delay and drift along with multi-agency audits to help understand if interventions by all are successful and achieving the desired impact.

Practitioners will be able to identify neglect and how to support or when to take action and recording of children’s needs in assessments and records will demonstrate a good understanding of historical family information and understanding of what life is like for children in circumstances of neglect.

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
3	The effectiveness of assessment and planning for children in private fostering arrangements and 16- and 17-year-old homeless young people.	Pg 5 Para 13,14	<p>3.1. Undertake an awareness raising programme across the partnership (workshops, leaflets videos).</p> <p>3.2. Training to staff to understand Private Fostering requirements and Homeless 16-17 year olds.</p> <p>3.3. Practice standards to capture requirements for those privately fostered and homeless 16-17 year olds.</p> <p>3.4. Guidance for children to understand their rights.</p> <p>3.5. Update the joint protocol with Housing to meet the needs of young people presenting as homeless.</p> <p>3.6. Revise protocols between D&B councils and WSCC to set out agreed working relationships and practice for assessment of housing and support needs for homeless 16/17 year-olds and Care Leavers, ensuring compliance with current legislation, and implement.</p>	<p>Nov 2019</p> <p>Aug 2019</p> <p>Aug 2019</p> <p>Aug 2019</p> <p>Nov 2019 & ongoing</p> <p>Sep 2019</p> <p>Dec 2019</p> <p>Dec 2019</p>	<p>Jackie Wood (JW)</p> <p>Learning and Development</p> <p>Ann Marie Dodds</p> <p>JW</p> <p>Ann Marie Dodds/ Housing</p> <p>Ann Marie Dodds/ Housing</p>	<p>18. Number of children in a Private Fostering Arrangement (trends report)</p> <p>19. % of PF visits in first 7 days Target: 95%</p> <p>20. % of Private Fostering Arrangements completed in timescales Target: 95%</p> <p>21. The effectiveness of planning for privately fostered children – identified through audits</p> <p>22. Assessments of 16/17yr olds will demonstrate options and rights to accommodation – through audit</p> <p>23. Multi-agency plan in place</p> <p>24. Protocol for 16/17 and Care Leavers in place</p> <p>25. Programme of briefing/training of staff in place</p>

Improvement Outcomes						
<p>Partner agencies and Social Workers will be able to recognise/respond to the specific needs of those privately fostered and homeless, ensuring good quality assessment of their needs.</p> <p>Children presenting as homeless will be made aware of their entitlements so they can make informed decisions about whether to be accommodated under S20 or not. Children will be placed in appropriate accommodation with the right support and knowledge of their rights and entitlements including post 18yrs.</p>						
4	The quality of plans, particularly in relation to the focus on critical issues for families, timescales for actions and the consideration of what will happen if improvements are not achieved or concerns increase.	<p>Pg 5 Para 9</p> <p>Pg 6 para 19</p> <p>Pg 9 Para 31</p>	<p>4.1. Training on effective care plans across the service (Early Help, CIN, CP, CLA and Pathway Plans).</p> <p>4.1.2. Review and redesign the templates used to record assessments and plans to facilitate focus on critical issues with clear actions and timescales (SMART).</p> <p>4.1.3. Implement an effective step up/down process to facilitate a clear transition from Social Care to EH with a continued Early Help Plan/CIN Plan to Social Care.</p> <p>4.2. QA service to monitor the quality and effectiveness of plans with a clear escalation process.</p> <p>4.2.2. Escalations to be tracked to support learning and development of services</p>	<p>Feb 2020</p> <p>Feb 2020</p> <p>Aug 2019</p>	<p>Sally Allen (SA)</p> <p>SA</p> <p>Head of QA</p>	<p>26. %of CIN, CP, CLA, pathway plans in place and reviewed.</p> <p>Target: 95%</p> <p>27. % of children subject to CP plans longer than 18 months.</p> <p>Target: 10%</p> <p>28. % of children subject to CIN plans longer than 2 years.</p> <p>Target: TBC</p> <p>29. Audit Feedback from Families who will be clear about expectations of them and what needs to happen to make the changes required and in what timeframe</p> <p>30. Audit of quality plans</p>

			<p>to Children Looked After and those subject to Child Protection plans.</p> <p>4.2.3. Audit of case supervision and management oversight to ensure they explicitly address the implementation of plans and learning to then feed back into service development.</p> <p>4.2.4. Expand on the use of MOMO to facilitate the views of the child in all plans including Early Help, CIN and CP.</p> <p>4.2.5. QA service to produce Annual reports to accurately evaluate impact by the service and the outcomes for children.</p>	<p>Mar 2020</p>	<p>Head of QA</p>	
<p>Improvement Outcomes</p> <p>Families will have an appropriate outcome focused plan with clear expectations that they understand , consistent with risk and need, and with clear contingency plans if progress isn't achieved. We will understand the impact of plans and support families and agencies to understand what the focus is with clear timescales.</p> <p>Children will not be subject to plans longer than necessary and will have the right level of support required by ensuring Step up/down is progressed in a timely and appropriate way.</p>						

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
5	The quality of social work recording, including the inclusion of intelligence and an analysis of the critical issues for children in return home interview records.	Pg 10 para 36 Pg 5 para 12	<p>5.1. Set out in the practice standards and to disseminate to managers with clear expectations of recording requirements.</p> <p>5.1.2. Including how the use of tools to gain children's views and wishes is reflected on the child's case records.</p> <p>5.1.3. Review of IT system to ensure it is fit for purpose and how workers and the service can work more creatively.</p> <p>5.2. Training and guidance to be produced for those undertaking Return Home interviews.</p> <p>5.2.1. Implementation of missing protocol to ensure this will facilitate effective return home interviews.</p> <p>5.2.2. Produce clear recording guidance on Return Home Interviews.</p>	Aug 2019 Nov 2019 Feb 2020 Aug 2019	Sally Allen Training and development/ HoS QA HoS QA Amanda Radley	<p>31. Quality monitored through dip sample and audit</p> <p>32. Percentage of children who have gone missing with a Return Home Interview Offered Target: 100%</p> <p>33. Percentage of children who have been missing and eligible for a return home interview within 72 hrs. Target 75%</p>

Improvement Outcomes

Children's records will have analytical and meaningful information recorded that clearly demonstrates risk, need and their voice. This will also be linked to assessment and planning so it is fully understood in the wider context of the case. Workers will be able to update records more regularly and easily to achieve this.

Those who go missing will be interviewed by someone they know (independent of care) or a suitably trained professional to enable understanding of the circumstances in which they went missing, in order to best support them and include them in their own safety planning and to reduce further episodes.

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
6	Permanence planning for children, including the availability and use of foster-to-adopt placements Timeliness of assessments and planning for unborn babies.	Pg 3 para 3 Pg 6 Para 18 Pg 7 para 22,24 Pg 8 Para 28,29	<p>6.1. Workforce training around effective care planning.</p> <p>6.1.2. Review of the matching process and how placements are requested and identified including sibling placements.</p> <p>6.1.3. Refreshed Adoption strategy and review of how to enable foster to adopt placements.</p> <p>6.1.4. Update the process and policy in relation to reunification and define the role of the IRO in this process.</p> <p>6.1.5. Introduction of Disruption Meetings for Children Looked After.</p> <p>6.2. Update the unborn baby protocol to provide timely support and progression and how this links to care leavers who are becoming parents.</p> <p>6.2.2. Creation of specialist pre- birth workers so they have dedicated tracking and oversight at the earliest opportunity.</p> <p>6.2.3. Unborn baby action plan devised to look at implementation and assessment process for timely intervention.</p>	Sep 2019 Aug 2019 Jul 2019 Jul 2019	JW Sally Allen SD SD	<p>34. % of CLA reviews in timescale.</p> <p>Target 90%</p> <p>35. % of placement moves</p> <p>36. Number of children in Foster to Adopt Placements</p> <p>37. % of children who cease to be S20 due to reunification</p> <p>38. % of children stayed at home beyond 6 months:</p> <p>39. Percentage of Pre-Birth Assessments completed in timescales</p> <p>Target: 95%</p>

Improvement Outcome

Children will have timely CLA reviews and will be included in the planning to ensure needs and actions progressed to meet outcomes. We want our children to be in stable and suitable homes/placements at the earliest opportunity, and where things do not go to plan this will be reviewed so we can identify issues to be addressed.

To prevent delay and drift for our unborn children where risk and need is referred we will ensure Unborn assessments at the appropriate time by dedicated pre-birth workers who specialise in this work and can ensure interventions are appropriate and timely, with clear analysis of risk and need. This will be linked to our Court tracking so we have robust twin tracking and consider Legal Planning meetings when appropriate.

This will support us to identify those babies who are likely to come into care and unable to return home; Foster for adoption will be considered in every case.

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
7	The quality and timeliness of life-story work.	Pg 7 Para 23	<p>7.1. Provide specific training to social workers, managers and foster carers in relation to life story work.</p> <p>7.1.2. Outline in Procedures when and how life story work is to be undertaken and how this will be managed together with a toolkit to support.</p>	Sep 2019	Sarah Daly	<p>40. Audit of quality of life story work</p> <p>Target: TBC</p> <p>41. % of CLA audits that show children with Life Story work</p> <p>Target: 85%</p>

Improvement Outcomes

Workers will have capacity to prioritise life story work at the right time for Children in care, helping them to understand and accept what happened to them, and why.

Our Looked after Children can expect good quality life stories that are meaningful to them facilitating a secure base to explore their past, present and future. This will enable them to integrate their past into the present, in order to help them move into the future.

Ref	Objectives what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
8	The quality and regularity of supervision, management oversight, direction and challenge, at all levels.	Pg 11 Para 44	<p>8.1. Provide dedicated supervision training with clear policy around expectations for supervisors and supervisees with effective recording documents.</p> <p>8.1.1. Guidance to be produced on "Good Management Oversight" and when this is to be recorded and how.</p> <p>8.1.2. Develop a mechanism for group supervision and how Advanced Practitioners can contribute to reflective and systemic practice.</p> <p>8.1.3. Implement observation of supervision to facilitate learning for both the supervisor and supervisee and set out how outcomes for children are monitored.</p> <p>8.2. Training to managers in performance coaching and how to utilise business intelligence to support them in managing staff and teams.</p> <p>8.2.1. Redesign the performance dashboard to make it team specific and a specific dashboard for leaders to see business critical KPI's.</p>	<p>Aug 2019</p> <p>Aug 2019</p> <p>Dec 2019</p> <p>Feb 2020</p>	<p>Sarah Daly</p> <p>SD</p> <p>SD</p> <p>SD</p>	<p>42. % Percentage of open cases with an up to date supervision recorded within 6 weeks</p> <p>Interim target by Oct 2019: 70% Target by Mar 2020: 95%</p> <p>43. % of staff who have supervision recorded in the last three consecutive months:</p> <p>Interim target by Jan 2020: 80% Target by Mar 2020: 95%</p> <p>44. Key decisions will have management oversight demonstrated through audit</p> <p>45. Percentage of open cases with management oversight recorded in the last 6 weeks</p> <p>Interim target: 70% by Oct 2019 Target by Feb 2020: 90%</p>

			<p>8.2.2. Set up a process for performance oversight throughout the organisation and how this can be utilised at all levels</p>			
<p>Improvement Outcome</p>						
<p>Supervision of staff is a high priority in supporting our workforce. Supervisees will have regular supervision as set in policy, and will be provided with a record that also addresses personal wellbeing and development. Social workers will feel able to build effective professional relationships, develop good practice and have the space to reflect and use professional judgement while being supported in key decision making.</p> <p>Managers will have confidence in providing the right support and challenge and this will be evidenced on children’s files so they can understand how decisions were made about them.</p> <p>Children’s circumstances and lived experiences will be robustly reviewed to prevent delay and drift and they will be able to see this clearly on their file.</p>						

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
9	The Effectiveness of quality assurance arrangements.	Pg 3 para 4 Pg 5 para 9,10 Pg 10 para 35,36 Pg 11 Para 42,43	<p>9.1. Review of QA function to implement a structure that will provide confidence that quality is achieved and will support the delivery of Children's Services.</p> <p>9.2. Update and implement the quality Assurance framework, and agree how outcomes and success will be monitored to facilitate service improvement and good practice.</p> <p>9.3. Create a system to enable robust tracking of audit, compliance, actions and learning, to influence service improvement.</p> <p>9.3.1. Audit Schedule to be devised and implemented with an updated Audit tool.</p> <p>9.3.2. Work with business intelligence to enable audit tracking direct from children's recording system.</p> <p>9.3.3. Utilise the monthly performance reporting to identify any additional areas that require scrutiny through the auditing process.</p>	Oct 2019 Nov 2019 Sep 2019	John Readman /Head of QA Head of QA HOS QA	<p>46. Audit progress reports</p> <p>47. % of audit's undertaken with practitioner Target: 75%</p> <p>48. % of audits completed against the audit framework. Target 75%</p> <p>49. Audit actions completed within maximum of 20 working days of audit completion Target: 75%</p> <p>50. Quality of work identified through audit</p> <p>51. % of Proceedings that concludes within 26 weeks. Target: 80%</p> <p>52. Audit of PLO letters and work to evidence improved quality</p> <p>53. Attendance and representation across the service</p>

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
			9.3.4. Identify the key audit responsibilities as part of everyday practice for all line managers and equivalent.	Jul 2019	HOS QA	
			9.4. Create a learning authority which includes audits to be undertaken with the practitioner to facilitate learning and reflection. Include seeking user feedback as part of the audit process.			
			9.5. Embedding Quality Assurance into daily practice across the entirety of Children's Services			
			9.5.1. Align Early Help QA functions into Children's Services			
			9.5.2. Agree and implement a process for all children to have an allocated social worker (or PA) within 24 hours of being allocated to a team.			
			9.5.3. QA service to support one front door approach to improve access to Early Help.			
			9.5.4. Toolkit to be produced with good examples of practice for staff to access.	Nov 2019	Jackie Wood/ HOS QA	
			9.6. Create practice improvement forums to consider how consistency			

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
			<p>will be achieved across the service and how it can feed into the improvement work streams to assess impact.</p> <p>9.7. IRO and CPA roles to be reviewed to consider how they can provide robust timely tracking of Children’s needs with a clear escalation and action process</p> <p>9.7.1. Implement escalation process</p> <p>9.7.2. Track quantity and themes coming from escalations to develop learning</p> <p>9.8. Development of court specialist role to QA the work in pre-proceedings and those in proceedings.</p> <p>9.8.1. To update the tracking system of all cases in pre-proceedings and proceedings ensuring timely identification and completion of required assessments.</p> <p>9.8.2. Support the workforce in producing good quality plans and court documents ensuring the correct court process is followed and the local authority is compliant with the court timetable.</p>			

Improvement Outcome

A QA service that will support, guide and identify areas of improvement at an earlier stage.

The service will take a more proactive and preventative approach to ensure plans for children at risk, in need, and in care are effective and timely at reducing risk/need, or securing permanence.

Audits alongside practitioners will support the service through greater awareness of its performance and, actions required, and, will be monitored, tracked and progressed. Findings will enable identification of themes and learning for the service to build on what works well and areas for development. We will also have direct feedback from our Children and families about how they view our interventions, and any learning and recognition of good work.

Where families are not able to make the changes for children to keep them safe and meet their needs, alternative arrangements will be considered under a formal PLO process that is tracked and monitored to ensure timeliness.

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
10	Staff recruitment and retention so that children experience fewer social workers.	Pg 5 Para 10 Pg 11 Para 40,41,42 Pg 8 Para 27	<p>10.1. Develop a new recruitment campaign to attract motivated, enthusiastic Social Workers to join West Sussex with a clear package of what they can expect.</p> <p>10.2. Retention offer to be made to all qualified Social Workers.</p> <p>10.3. Where NQSW's are in post additional agency support will remain in place to enable reduced and appropriate caseloads during the first year in practice.</p> <p>10.4. Staff to have access to appropriate training, supervision and employee counselling.</p> <p>10.5. Reduce caseloads to support staff to deliver best practice (<i>linked to action point 1</i>) with business support resource, where needed, and changes to business processes to facilitate more direct work with children.</p> <p>10.6. Update the new starter process so staff have I.T equipment on day one</p>	Jul 2019 Jun 2019 Jun 2019 Sep 2019 Feb 2020	Aretha Pitkin AP AP AP All	<p>54. Vacancy gap to be less than 10%</p> <p>55. Reduction of agency staff by March 2020 to 5%</p> <p>56. Over establishment rates in line with NQSW's</p> <p>57. HR/Training attendance logs</p> <p>58. Average Case load report – KPI 2</p>
Improvement Outcomes						

Staff to feel valued and supported through a period of improvement and those who are newly qualified will have the best opportunity to start their SW career with appropriate caseloads, with additional resource to achieve this so the service isn't impacted upon.

Our children can expect compassionate, caring and highly skilled Social Workers who will listen and work with them direct to understand their lived experiences and ensure they have a voice in everything we do for them.

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
11	The rigour and impact of corporate parenting arrangements.	Pg 6 Para 18 Pg 7 Para 20 Pg 9 Para 31 Pg 10 Para 38	<p>11.1. Dedicated training to all Corporate Parenting members and refreshed ToR.</p> <p>11.2. Build on the Children in care Council and co-opt young people to Corporate Parenting Board.</p> <p>11.3. Incorporate Children Looked After Participation Service/Children in Care Council feedback into Corporate Parenting board.</p> <p>11.4. Identify representation for foster carers to regularly attend Corporate Parenting Board.</p> <p>11.5. Refresh the data by developing a dedicated performance dashboard.</p> <p>11.6. Review of virtual school arrangements and implement tracking of PEP's.</p> <p>11.7. Create multi-agency operational groups to work collaboratively on issues impacting on CLA.</p>	<p>Nov 2019</p> <p>Nov 2019</p> <p>Nov 2019</p> <p>Jul 2019</p> <p>Sep 2019</p>	<p>Jackie Wood</p> <p>JW</p> <p>JW</p> <p>JW /Sarah Clark</p> <p>JW</p>	<p>59. Feedback form Children in Care Council</p> <p>60. Attendance by Young Person</p> <p>61. Representation of Foster Carer on Panel</p> <p>62. % of children with in-date PEPs</p> <p>Target: 90%</p> <p>63. A range of multi-agency target that will facilitate improvement to be made, including:</p> <p>64. % of IHAs' and HA reviews within timescales</p> <p>Interim target by Feb 2020: 75%</p> <p>65. % of CLA missing strats in timescale</p> <p>Interim target by Nov 2019: 80%</p>

			<p>11.8. Consider alternative approach to achieving Initial Health Assessments within timescales.</p> <p>11.9. Create a mechanism for recording children’s health histories to enable them to access in the future.</p>			<p>66. % of Care leavers in suitable accommodation</p> <p>Target: 90%</p>
--	--	--	---	--	--	--

Improvement Outcome

Those with corporate parenting responsibilities will have the skills and information to offer robust challenge to ensure positive outcomes for our children in care.

The service will have representation of the voice of those in care and this voice will have direct impact and influence to the Service and key partners.

The holistic needs of CLA will be addressed fully, including, education, health (such as IHA’s), social, emotional and overall wellbeing.

Children who come into care will feel that the LA and all key partners champion their needs and will listen, respect, and care to enable them to have the best outcomes; this includes those who leave our care.

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success
12	The active engagement of all relevant partners to tackle weaknesses in services and improve outcomes for children.	<p>Pg 4 Para 6,7</p> <p>Pg 6 Para 15,16</p> <p>Pg 8 Para 26,27</p> <p>Pg 9 Para 30,31</p>	<p>12.1. Development of an independent multi-agency Improvement Board to review our approach to key areas of weakness, including the development of the Children First Strategy that will set out our commitment.</p> <p>12.2. Set up an operational approach to working with partners to review approaches to the multi-agency work, with a clear escalation and resolution process.</p> <p>12.3. Work with partners to agree an action plan to improve the Multi-agency work including Strategy Discussions, CP medicals, threshold for referrals education provision for children with complex needs and support around accommodation for Care Leavers.</p> <p>12.4. Review with the LSCP the partnership reports and documents such as the Threshold Document</p>	<p>Jun 2019</p> <p>Sep 2019</p> <p>March 2020</p>	<p>John Readman</p> <p>Jon Brydon (JB)</p> <p>JB</p>	<p><i>More to be confirmed with partners</i></p> <p>67. % of CLA children in education</p> <p>Target: 90%</p> <p><i>Multi-agency data reports</i></p> <p>68. Lower number of contacts with an outcome of No Further Action</p> <p>Interim target: 51% to 30 % by Dec 2019 Target by Mar 2020: 20%</p>

			and learning from SCRs to improve effective partnership working.			
			12.5. LSCP to raise awareness of the Managing Allegations process at all levels and training to Social Workers and partners in recognising when the designated officer is to be informed.	Dec 2019	JB	
			12.6. Safeguarding to review how allegations are managed and the designated officer's role in tracking and timely progression.	Dec 2019	JB	69. Clear evidence of timeliness in referring and case duration from the tracker
			12.7. Implement a contextual safeguarding approach across the county focusing on extra familiar risk	Dec 2019	JB/ Amanda Radley	70. Increase % of completed CE risk assessment tool by partners Target: 80% 71. Evidence through disruption work via exploitation group

Improvement Outcome

Effective partnership working that can not only meet the statutory requirements but will actively work in collaboration to improve ways of working to enable the best outcomes for children, where Safeguarding is everybody's business. This will include features such as: Timely IHAs, CLA to remain in education, Care leavers support, effective partnership strategy discussions and more.

Children's workforce, community groups and partners are fully aware of the LADO role and reporting requirements. Utilising the LADO as a point of consultation where appropriate.

Effective progress tracking of allegations, which will improve timeliness and conclusion.

Effective partnership working to understand roles and responsibilities. Creating safer laces for children and partners recognising and responding to exploitation more effectively.