

3 July 2018		ITEM: 7
Children's Services Overview and Scrutiny Committee		
Children's Social Care Development Plan 2018 - 19		
Wards and communities affected: All	Key Decision: Key	
Report of: Sheila Murphy - Assistant Director Children's Social Care		
Accountable Assistant Director: Sheila Murphy - Assistant Director Children's Social Care		
Accountable Director: Rory Patterson – Corporate Director of Children's Services		
This report is Public		

Executive Summary

This covering report provides a progress update to the revised Children's Social Care Development Plan 2018 – 19. A copy of the Development Plan is available online.

1. Recommendation(s)

- 1.1 That Children's Overview and Scrutiny consider the progress and direction of travel for children's social care in completing the required actions from the Development Plan.
- 1.2 That Children's Overview and Scrutiny receive assurance that the Development Plan will deliver the required improvements.

2. Introduction and Background

- 2.1 The new Inspection of Local Authority Children's Services (ILACS) framework started in January 2018.
- 2.2 ILACS has a greater reliance on the use of ongoing intelligence to decide where and when to inspect. Ofsted will have access to data from various sources including annual data returns and the new annual self-evaluation. Under ILACS, local authorities are required to share their self-evaluation at the annual engagement meeting with Ofsted. Thurrock had their annual engagement meeting on the 9 May 2018. Authorities will be subject to unannounced inspections.
- 2.3 The ILACS is seen as being within a 'system' of inspection and engagement

with Ofsted and not a one-off event such as a 4 week Single Inspection Framework (SIF) inspection. Each Local Authority will have an annual engagement meeting with Ofsted. A month before the engagement meeting the Local Authority will send Ofsted the annual self-evaluation of their services. Within a 3 year period a 'Requires Improvement' Local Authority will receive 2 focused inspections and a standard full inspection of 2 weeks duration. Ofsted is keen to have a continuing dialogue with Local Authorities, in order to 'catch them before they fall'.

- 2.4 In response to the ILACS the department has established a Children's Social Care Development Plan which incorporates the recommendations from the previous SIF, as well as including areas for improvement identified through our own self-evaluation.

3. Issues, Options and Analysis of Options

- 3.1 Services to children, young people and families in Thurrock were judged to 'Require Improvement' by Ofsted in March 2016. The inspectors stated in their report that 'children and young people were found to be safe during this inspection, with none identified who were at immediate risk of significant harm without plans and services being in place to reduce these risks and to meet their needs'.

- 3.2 The Children's Development Plan builds on the work completed through the Ofsted Improvement Plan and is based on 8 priority action areas for the service. These are:

1. Recruiting, retaining and developing a skilled and confident social care workforce;
2. Providing coherent and coordinated early help services to children and their families;
3. Building consistent quality and timeliness of assessment; care planning and decision making for children in need and in need of protection;
4. Ensuring high quality support and services for looked after children and effective permanency planning. Ensuring timely purposeful post adoption support;
5. Putting the voice and day to day experience of the child at the center of social care practice;
6. All children missing from home or care must have access to a return interview. Analysis arising from risks faced by children missing from home or care and children missing from education, should inform action to reduce risk;
7. Supporting young people leaving care to have a positive and successful transition to adulthood and independence;
8. Embedding strong quality assurance and governance mechanisms to drive continual improvements in services.

- 3.3 Instability of the social care workforce has been a key priority for

improvement. The service was dependent on a high proportion of agency social workers, although it was acknowledged that a range of creative ideas had been implemented to improve recruitment; there has been a significant improvement made in this area, particularly in the recruitment of permanent Team Managers in the Children and Families Assessment Team (CFAT) and the Family Support Teams (FST). There has been an increase in the permanent recruitment of Social Workers in CFAT, FST and the Team for Disabled Children, who no longer has any agency staff members. At the time of the SIF inspection in March 2016 there were 60 agency social workers; at the end of May 2018 this number has been reduced to 39 agency workers.

- 3.4 The 2016 inspection found that the service for children looked after was not consistent and too many children became looked after on an emergency basis. A new service has been established to strengthen our approach to early intervention and prevention. Previous audits have suggested that the number of emergency admissions to our care has decreased. However this area of social work activity will continue to be monitored to ensure that progress continues to be made. Through more effective management of the service, the numbers of children in care and those on a child protection plan, have started to decrease during 2017/18 and are now more in line with our statistical neighbours. At the end of March 2017 there were 68 children per 10,000 of the child population subject to a child protection plan, whereas at March 2018 there were 54 per 10,000 subject to a child protection plan, in line with statistical neighbours average at 54.6. Looked after children were at 82 children per 10,000 at March 2017, that figure is 73.3 at March 2018 and statistical neighbours average are 68 per 10,000 of child population.
- 3.5 The 2016 Ofsted report said that more needed to be done to increase the number of in-house foster carers, as too many children and young people were placed out of the borough. Currently, more children are now placed with in-house foster carers than Independent Fostering Agencies, and there has been a clear shift in the balance of placements and increasing numbers of children are being placed in or near the borough. At March 2018, 87% of children in our care are placed within 20 miles of their home address, this compares favourably against the statistical neighbour average of 82% of children being placed within 20 miles of their home address.
- 3.6 The strategy is to increase the In-House foster placement capacity of 80 carers by 20% annually for the next 3 years. The intended outcome is that by 2020, Thurrock should be able to place up to 80% (230) of all children in care with In-House Foster Carers. To achieve this, a net increase of 45 new fostering household must be added to the current portfolio over the next 2.5 years. Our fostering recruitment target is a net increase of 60 approved carers by 2020. A net increase of 20 placements has already been achieved for 2017/18.
- 3.7 23 fostering assessments have been completed between 2017/18 which consists of 17 fostering households and 6 connected carers. 78.2% (18) were completed within the national timescale of 8 months from application to panel and approval. All new foster carers presented to panel within the last

three months were within national timescales which evidences an improvement in performance.

- 3.8 The Ofsted inspection of 2016 said that management oversight needed to be improved and regular supervision needed to be in place. The service has in place reporting mechanisms to monitor the regularity of supervision within required timescales (supervision to take place monthly), this information is scrutinised at the monthly performance meetings chaired by the Assistant Director, with all Service Managers in attendance. Current performance evidences compliance of supervision timescales at 85%. Remedial action is taken as required following these performance meetings. A programme of monthly audits is in place and the audit template has a section on management oversight and supervision for each case audited. Current performance indicates that more work needs to be undertaken to improve the quality of management oversight. Further work is being undertaken to clarify expected management standards and to drive performance to be consistently good. A Team Managers' monthly performance report has been in place since September 2017 and there is a section for the managers to report on monthly supervision requirements with opportunity to set out improvements in place within each team.
- 3.9 The Ofsted inspection 2016 stated that the organisation's use of management information and quality assurance was poor and this impedes improvement; Social Care managers have advised and supported the data team to provide a performance data digest which is regularly scrutinised by the Senior Management Team and the Corporate Director of Children's Services on a monthly basis to drive up performance. There is a Quality Assurance Framework for auditing cases and utilising the learning from these, with quality as its main focus. However, whilst there has been some investment to ensure that there is a full suite of data available to managers and that there is regular monthly audit activity taking place, there is still a need to embed this fully into practice.
- 3.10 Following series of workshops, social workers are responding positively to a culture of early permanency. Social workers involved with children subject to the Public Law Outline process are required to attend permanency planning meetings for advice and guidance. The tracking system introduced has made a real difference in early permanency, particularly for children suitable for adoption. Due to effective management oversight, robust adoption tracking and streamlined linking processes, the current adoption timeliness performance, over the 3 year average, is below England and Eastern Region average (which is good performance). 100% of looked after children adopted during 2017/18 were placed for adoption within 12 months of the decision for adoption and the average days between Placement Order and approval of match is 47.3. This is top quartile performance. This trend, if sustained, will make Thurrock one of the best performing authorities (for adoption timeliness) in England by 2020. However, more work needs to be done to increase the number of children

adopted from care.

- 3.11 Post Adoption and Special Guardianship support has been expanded to offer ongoing direct support to families to minimise crisis, disruptions, and breakdown. The offer is also extended to parents who require support to deal with the loss of children through adoption or special guardianship.
- 3.12 The Development Board continues to meet monthly to ensure that all of the recommendations and other areas for improvement have been implemented. The Board is chaired by the Corporate Director of Children's Services.
- 3.13 Effective progress continues to be made across all areas of the plan and additional input is being provided to address those areas that require this to remain on track. There are examples of some very good work and improvements in the service, recruitment and retention is providing for a more stable workforce with staff who are committed to Thurrock, which is positive. The biggest challenge is inconsistency in social work practice. We are investing in Signs of Safety training as our social work model which is being rolled out to all staff, this will focus on a strengths based approach to working with families that will drive up assessment quality and provide a consistent framework of intervention. We have been delivering monthly training practice workshops for the staff since February 2018 to drive up practice standards. There is still a strong focus on analysing and understanding our data in relation to missing children and Child Sexual Exploitation (CSE) and we continue to utilise additional resources for these tasks to ensure that Return Home interviews and CSE risk assessments are completed in a timely way. There is a focus on permanency planning for children. Quality Assurance process continue to be strengthened.

4. Consultation

N/A

5. Impact on corporate policies, priorities, performance and community impact

The completed development plan will allow the council to meet and improve upon its core statutory functions in the delivery of services for children in need of help and protection, children looked after and care leavers.

6. Implications

6.1 Financial

Implications verified by: **Nilufa Begum**
Management Accountant

There are no financial implications

6.2 Legal

Implications verified by: **Lindsey Marks**
Principal Solicitor Children's Safeguarding

There are no Legal implications

6.3 Diversity and Equality

Whilst there are no direct implications from this report, the work to implement the Development Plan will strengthen our ability to meet and improve the delivery of services for children in need of help and protection; children looked after and care leavers

Implications verified by: **Becky Price**
Community Development Manager

6.4 Other implications (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

N/A

7. Background papers used in preparing the report (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- Ofsted Single Framework Inspection Report dated 24.5.16

8. Appendices to the report

- Appendix 1 – Children's Social Care Development Plan (to be Tabled)

Report Author:

Sheila Murphy -
Assistant Director
Children's Social Care

Thurrock - Children's Social Care

Development Plan 2017-19

This Service Development Plan has been developed to retain the Ofsted inspection report recommendations and updated to include current improvement priorities. Delivery of the plan priorities will position the authority well to achieve a "good" rating in future inspection. The authority must be assured that the Ofsted recommendations are acted on to deliver better outcomes for children. Ofsted recommendations are identified in the plan as Ofsted 1, Ofsted 2 etc. The Development Plan has been developed around eight key priorities for improvement:	RAG Summary of all areas	
	Previous period	Current period
	2.0	2.6

	Previous period	Current period
1. Recruiting, retaining and developing a skilled and confident social care workforce	2.8	3.3
2. Providing coherent and coordinated early help services to children and their families	1.7	2.3
3. Building consistent quality and timeliness of assessment; care planning and decision making for children in need and in need of protection.	1.5	2.5
4. Ensuring high quality support and services for looked-after children and effective permanency planning. Ensuring timely purposeful post adoption support.	2.0	2.9
5. Putting the voice and day to day experience of the child at the centre of social care practice	2.0	2.0
6. All children missing from home or care must have access to a return interview. Analysis arising from risks faced by children missing from home or care and children missing from education should inform action to reduce risk	1.5	2.5
7. Supporting young people leaving care to have a positive and successful transition to adulthood and independence	2.3	2.4
8. Embedding strong quality assurance and governance mechanisms to drive continual improvement in services	2.6	2.9

Page 7

Specific actions to achieve improved outcomes for children and young people are set out under each of the eight priorities. Each action includes the timescales by which the improvement should be delivered alongside a clear indication of how success will be measured and evidenced. Progress will be RAG-rated and reported monthly to the Improvement Board. The report is linked to a separate dedicated performance report that will be updated monthly. Full details of the progress tracker are set out on the following page.

Governance - The Service Development Plan will be overseen by the Development and performance Board chaired by the Chief Executive. The Lead Member will also review progress.

1	The action has not yet started or there is significant delay in implementation. The action must be prioritised to bring it back on track to deliver improvement.
2	The action has started but there is some delay in implementation. The action must be monitored to ensure the required improvement is delivered.
3	The action is on track to be completed by the agreed date. Evidence is required to show that the improvement has been sustained.
4	The action has been completed and there is evidence that the improvement has been sustained. The action remains in the plan for monitoring.
5	The action has been completed and there is evidence that the improvement has been sustained. The action can safely be removed from the plan.

This page is intentionally left blank

Priority	Indicator	Polarity	2016/17	SN Average	Jul	Aug	Sep	Oct	Nov	Dec	Notes	YTD	DOT
P1	Social Work teams vacancies/ agency staff	Asked John Cooke				10					Asked John Cooke	10	
P1	SW Team Supervision timely %											0	

Priority 1	Outcome	Action	Success measure(s)	Lead	Responsible Officer	Time	RAG initial	RAG 01/18	RAG 03/18	RAG 05/18	Progress update
Ofsted recco14 There is permanent and stable social work workforce. The workforce is well qualified and motivated with access to high quality professional development and supervision focused on delivering excellent outcomes for children, young people and their families. There are attractive career pathways enabling the organisation to retain social workers and support them into advanced practitioner and management roles.		Create clear management structure for Children's Social Care that will strengthen leadership and pace of delivery of good services	Senior Management structure established	S Murphy		Jan-18	4	4	0	0	Costed structure in place.
			All Service Leader posts are filled by permanent staff	S Murphy		Apr-18	4	4	0	0	Permanent staff now in post Jan 18
		Implement a practice model of social work for Children's Services that will support the delivery of best practice;	Signs of Safety Model is in place and supported by front-line managers and staff	S Murphy	Joe Tynan	Sep-18	2	2	0	0	SOS model introduced programme of work in place to ensure consistent access to training
		OFSTED recco 14 Create a profile for the social work workforce required to deliver the current levels of activity; Establish a clear baseline for Children's Services and a practice and financial plan for delivery that will sustain the service	Caseloads are an average of 18; there are no unallocated child protection cases or cases where a child is looked after; MASH arrangements are effective in setting consistent threshold. There are sufficient staff to meet demand.	S Murphy	Joe Tynan Janet Simon	01 April 2018	4	4	0	0	There are sufficient posts in place and the number of vacant posts have reduced significantly in the last 12 months. Use of agency staff has reduced from over 70 to 44.
		Implement a workforce strategy with a focus on sustaining the recruitment and retention of social workers	Strategy in Place to sustain recruitment and retention. Reduced use of agency staff. Most staff permanent offering continuity to children.	S Murphy	Janet D	Jan-18	2	4	0	0	Recruitment + Retention Strategy in place to meet recruitment of SWs and front line managers. Will have sustained attention to further reduce vacancies below 20%
		Complete a knowledge and skills audit of the workforce to determine the current levels of professional competence and to inform the design of the learning and development offer.	PDR exercise 2018 will capture skills audit. 4/18: Practice standards put in place and learning development plan to be updated to reflect practice standards and required competencies and common issues arising from PDRs.			May-18	2	4	0	0	Required competence levels identified. Knowledge and skills statement and Social work practice standards introduced. Updated learning and development plan to be updated following PDRs May 18
		OFSTED recco 16 Improve the quality, frequency and recording of professional supervision to ensure that it is reflective, improves the quality of practice through case discussion and focuses on professional and personal development.	Supervision Policy, Supervision Record and Supervision Audit tool in place shows quality of supervision at least adequate. 90% of social workers received four-weekly supervision which is clearly recorded and effective. Supervision tracking system in place. To be evidenced through performance information and audit	Joe Tynan	Neale Laurie	Sep-18	2	2	0	0	Supervision Policy in place and fully operational. Auditing of supervision records shows inconsistency of supervision. Supervision policy for social workers in place and subject to monitoring and audit. Quality of supervision to be supported by further guidance and training.
		Leadership and management sessions help managers to build confidence and competence in delivering practice and performance improvement	There is evidence of engagement with middle and front line managers. Managers report more confidence and competence in managing performance and practice.	Wendy Brown and improvement consultant		Jan-18	2	2	0	0	Workshops planned to commence February to support middle and front line managers in driving improvement.

Previous period	3
Current period	3

This page is intentionally left blank

Priority	Indicator	Polarity	2016/17	SN Average	Jul	Aug	Sep	Oct	Nov	Dec	Notes	YTD	DOT
P2	Of cases closed % where outcomes met				99.7%	97.1%	99.5%	100.0%	100.0%	100.0%		0	
P2	Number of CAFs completed by HVs					2	7	5	4	6	4	0	
P2	% children seen within 15 days of referral						93.3%	97.1%	92.5%	90.8%	96.7%	0	

Previous period	2
Current period	2

Priority 2	Outcome	Action	Success measure(s)	Lead	Responsible Officer	Time	RAG Initial	RAG 01/18	RAG 03/18	RAG 05/18	Progress update
Page 11 Providing coherent and coordinated early help services to children and their families	Ofsted recco 2 Children and families in need of help are identified early and their needs are assessed; targeted support is provided to address the assessed needs child and their family which brings multi-agency services together to improve outcomes and reduce the likelihood of needs escalating so that they require support from statutory social work services.	OFSTED recco 2 Engage with partner agencies to implement an early help strategy and operational framework which clearly sets out the early help offer and referral pathways.	Early Help Services operate in a coordinated way and have a shared understanding of practice standards and thresholds Partners make early referral to early Help	Clare Moore	Teresa Goulding	Apr-18	2	2	0	0	Early Help Strategy in development in consultation with partners to be completed March 18. Consistent practice promoted by workshop sessions to incorporate SOS approach by June 18. Recording to capture outcomes by Feb 18
		A consistent approach to assessment and EH plans is established and evidenced through audit .Cases that step down from social care have good quality information that include risk assessment and contingency plans	Clare Moore	Joe Tynan	Jun-18	2	2	0	0	Outcomes star introduced. Threshold understood to be tracked in quarterly audit.	
		A consistent approach to assessment and puposeful EH plans to drive progress of work is established. OFSTED recco 2 A QA framework is embedded to support consistent practice. Step down referrals to EH prepared by social care make clear the support needed any continued risks and contingency and safety plans required at step down.	Clare Moore	Teresa Goulding	Jul-18	2	2	0	0	Outcomes star introduced. Threshold understood to be tracked in quarterly audit.	
		Targeted early help interventions are effective at preventing the escalation of children’s needs. 70% of early help assessments are closed with some or all outcomes achieved.	Clare Moore	Neale Laurie	Apr-18	2	3	0	0	Outcomes star introduced. Threshold understood to be tracked in quarterly audit.	
		Thresholds between early help and social care understood and applied proportionately.[AUDIT]	Clare Moore	Teresa Goulding	Apr-18	2	2	0	0	Currently 96.7% children seen within timescale tracked monthly. EH staff joined MASH on 15th Jan 18	
			Children are consistently seen within 15 days of referral or step down from social care	Clare Moore	Teresa Goulding	Apr-18	2	2	0	0	Currently 96.7% children seen within timescale tracked monthly. EH staff joined MASH on 15th Jan 18
			EH staff participate in MASH to support shared development of threshold and to reduce referrals needing a social care intervention	Clare Moore	Teresa Goulding	Apr-18	1	4	0	0	EH staff joined MASH on 15th Jan 18
			Increase use of CAF by Health Visitors	Clare Moore	Teresa Goulding	Apr-18	1	1	0	0	Tracking introduced Jan 18 as numbers reported remain low.

This page is intentionally left blank

Priority	Indicator	Polarity	2016/17	SN Average	Jul	Aug	Sep	Oct	Nov	Dec	Notes	YTD	DOT
P3	% Assessments in 45 days				94.6	92.9	88.8	94.5	89.8	98.1		0	
P3	Plans graded good at audit %				50.0%	13.8%					Data for audits being collated	0	
P3	CP visits completed in timescale %										data on LCS being cleansed	0	

Priority 3	Outcome	Action	Success measure(s)	Lead	Responsible Officer	Time	RAG Initial	RAG 01/18	RAG 03/18	RAG 05/18	Progress update
	Ofsted recco 3 Risk is identified responded to and reduced. Assessments and plans are timely and analytical with clear identification of needs and risks and a focus on measurable goals and outcomes for children and young people, including planning for permanency where this is appropriate. Assessment identifies risks for each child and steps to reduce risk are included in a plan that is SMART. Children are seen and spoken to so that their concerns and day to day experience inform the assessment and plan. Visits are timely to support pace and purpose of the work.	OFSTED recco 2 The multi agency partnership with MASH develop and promote a shared understanding of threshold among partners. MASH ensure a timely proportionate response to contacts and referrals.	The MASH drives a shared understanding of threshold through partner agencies. The MASH have systems and practice in place to ensure a timely proportionate response to contacts and referrals ensuring risk is recognised and responded in a timely way. Performance reporting and audit evidence timely proportionate responses that reduce risks for children.	Joe Tynan	Shadiat Ogu	Apr-18	3	4	0	0	Threshold well understood and responses are proportionate to risk, timescales monitored to avoid delay in decision making. Urgent referrals receive a timely response. Less urgent referrals are also concluded in a timely way. Current performance 85% referrals resolved in 24 hours target 95%
	Risk is identified responded to and reduced. Assessments and plans are timely and analytical with clear identification of needs and risks and a focus on measurable goals and outcomes for children and young people, including planning for permanency where this is appropriate. Assessment identifies risks for each child and steps to reduce risk are included in a plan that is SMART. Children are seen and spoken to so that their concerns and day to day experience inform the assessment and plan. Visits are timely to support pace and purpose of the work.	Thresholds are appropriate and S47 strategy meetings meet statutory requirements and are completed in a timely way. Partner agencies particularly schools who know the child and family participate in risk assessment.	Strategy meetings records capture description of all household members and known visitors. The risks to each child. Describes the steps to be taken immediately to investigate concerns and reduce risk. Describe safety plan pending ICPC. Target 80% cases	Joe Tynan		Apr-18	2	2	0	0	Insufficient evidence of consistency. Being tracked through sample audit.
	Children are seen within 5 days of allocation for assessment to ensure the child is safe and their views and experience day to day inform assessment		Audit shows children seen in a timely way and their views inform assessment Target 90% child seen in 5 working days	Joe Tynan	Neale Laurie	Apr-18	2	4	0	0	Current performance shows 83% children are seen within 5 working days
	Ofsted Recco 3 Assessment is proportionate and timely takes into account history and the day to day experience of children		OFSTED recco 3 85% of child and family assessments (CLA and Pathway Plan assessments are completed within agreed timescales. All assessments include evidence of the child being seen and spoken to or presented if under 5yrs. The child's concerns inform the assessment. All assessments are informed by family history evidenced by a chronology. All assessments include a completed plan unless NFA outcome. Target 70% audits good or better	Strategic Leaders and all Service Managers	Neale Laurie	Oct-16	2	2	0	0	Currently 93.8% of assessments are completed in timescale (Good performance). Audit shows 10% judged inadequate. 30% good. Training plan via workshops from February to support improvement to 70% good
	A range of risk assessment tools are routinely used to inform safety plans in particular CAADADASH graded care tool and CSE risk assessment		Audit shows appropriate risk assessment tools used to inform assessment Target in 70% of cases	Joe Tynan	Neale Laurie	Apr-17	2	2	0	0	Safeguarding team manager auditing conference records and plans to promote good practice. Workshop with chairs to improve plans and promote use of risk assessment tools
	Ofsted recco 3 Plans are purposeful and SMART and drive the pace of the work to achieve change		OFSTED recco 3 Plans are specific, purposeful and timescaled - SMART Plans describe outcomes or goals for the child, actions to deliver goals and timescales. CIN/CP/CLA and pathway plans meet 70% good or better at audit	Strategic Leads and all Service Managers	Neale Laurie	Apr-18	2	2	0	0	Current practice still not consistently good. Practice workshops will support practice improvement to start Feb 18
	Strengthen timely decision making to ensure permanency is achieved for children so they know where they will live as soon as possible. Ensure children subject to PLO or in care proceedings do not drift. Ensure that robust plans are in place and that cases are progressing at a pace that matches children's needs.		All workers must be competent in engaging with children particularly children with communication difficulties including Children with disability team	Strategic Leads and all Service Managers	Wendy Brown	Apr-18	2	3	0	0	Children are consistently seen but further work needed through practice sessions to promote consistent quality of engagement.
	Direct work with all children informs assessment and plans		Visits to children on a CIN or CP plan must be completed in timescale Target 90%	Joe Tynan	Neale Laurie	Apr-17	2	2	0	0	Compliance and recording need to improve significantly; investment made in cleansing data, reports available for next update. CIN visit data not currently available.
	Visits to children must be timely to ensure children are safe		All cases have effective management oversight to ensure timely actions. Tracking process shows children do not remain subject to PLO for more than 20 weeks. Target 90%. To be evidenced through compliance reporting.	Joe Tynan	Neale Laurie	Mar-17	2	4	0	0	PLO Tracker in place to ensure review of PLO cases to avoid drift Reviewed monthly
	Ensure recording standards are understood and consistently met so that the progress of work and the rationale for decisions is clear		Recording meets required standards and should be updated within 24 hours where recording of risk needed and within 2 weeks in all other cases. Monitor via audit target 80%. Decisions are clearly recorded and the rationale for decisions are clear. Monitor via audit Target 80%	Strategic Leads and Service Managers	Neale Laurie	Mar-17	2	2	0	0	Audit shows practice inconsistent. Review of recording system to be completed by March to support better recording.
	Risk is identified responded to and reduced. Assessments and plans are timely and analytical with clear identification of needs and risks and a focus on measurable goals and outcomes for children and young people, including planning for permanency where this is appropriate. Assessment identifies risks for each child and steps to reduce risk are included in a plan that is SMART. Children are seen and spoken to so that their concerns and day to day experience inform the assessment and plan. Visits are timely to support pace and purpose of the work.		Assessments of children with disabilities lead to the timely provision of protection; support and services. Assessments inform EHC Plans that are SMART Target 80%	Clare Moore		Jun-17	2	3	0	0	Timeliness of assessment is above target. Workers within the disabilities team have been trained on developing pathway plans for children open to the service. Quality of plans need further improvement
	Ensure the quality of assessments for children with disabilities, including the assessments of young people that are due to transition to adult services. Risk is recognised understood responded to and reduced.		Assessments of older children identify support needed at transition to adult services that will maximise independence. Target 80%	Strategic Leads and Service Managers		Jun-17	2	3	0	0	Quality of practice standards introduced and threshold document in place
	Children with a disability who are looked after have a pathway plan to support them in developing independence. Target 95%		Children with a disability have support to access education training and employment that will assist them in achieving independence.	Clare Moore		Jul-17	2	3	0	0	Joined up approach to resources panels put in place for children with acute or continuing health care needs or disabilities
	Target 70% case audits are "good" or better at audit. To be evidenced through casework audits.		Children with a disability have support to access education training and employment that will assist them in achieving independence.	Clare Moore		Jun-17	2	3	0	0	All young people needing a transition plan should have one agreed with adults services by 17years.
	Monitor formal case escalation procedure for the child protection conference service and the independent reviewing service.		Target 70% case audits are "good" or better at audit. To be evidenced through casework audits.	Strategic Leads and Service Managers	Neale Laurie	Jun-17	2	2	0	0	Audits still show inconsistent practice to be addressed through practice workshops starting Feb 18
	Child Protection Conferences provide robust challenge and decision making to drive plans to deliver reduced risk to children in a timescale suitable to the needs of the children.		A formal case escalation procedure is in place and effective at progressing cases towards improved outcomes where there is professional disagreement or concern about progress of actions. To be evidenced through compliance reporting and casework audits.	Joe Tynan	Neale Laurie	Dec-16	2	2	0	0	A formal case escalation procedure is now in place. Activity and performance is being routinely reviewed. Escalation needs to be more consistent and analysis of issues need to inform improvement. Escalations on quality of practice need to increase Mar 17. CP surgery and IRO issues surgery occur 6 weekly to review issues and resolution of issues raised with Social work managers QA framework developed.
	Conferences address risk in a proportionate way so families are not subject to child protection processes inappropriately		The use of categories for CPPs is monitored to ensure risk is recognised and response is proportionate. ICPCs are proportionate show challenge and robust evidenced decision making. Result in SMART purposeful plans that describe outcomes for children, the actions to be delivered; timescale for action and a contingency plan where needed and the consequence of no change is also clear. Monitor by audit.	Joe Tynan	Neale Laurie	Jun-17	2	2	0	0	Safeguarding Team manager auditing conference records and plans to promote good practice. Workshop with chairs to improve plans. Categories used reflect similar pattern to similar Las
	Ofsted Recco 5 Children and parents should be supported to participate in Conferences and their CLA reviews. Advocacy should be offered where this can support participation particularly for vulnerable participants. Reports must be shared with families prior to meetings so that they can see reported progress.		Participation rates for children in conferences and reviews increases. Monitor through monthly reporting Target 10% Children who need independent visitors have an offer. Independent visitors should be made available for children looked after who do not have family contact.	Joe Tynan	Neale Laurie		2	2	0	0	Participation of parents and children remains below target. Lead IRO identified to plan action to increase participation in reviews and conferences.
	Independent visitors should be made available for children looked after who do not have family contact.		Minutes of Conferences, record of decisions must be circulated within 24 hours. Conference record within 20 working days. Records of CLA reviews must be circulated within 20 working days. Monitor through monthly reporting Target 90%.	Neale Laurie			2	2	0	0	Participation of children in conferences remains below target As above. IROs reminded to seek allocation of independent visitor offer. Take up low.
	Records of conferences and reviews are shared with participants including children and families in a timely way		A permanence plan should be recorded by the second CLA review. Target 100% records show proposed permanence plan.	Neale Laurie			1	1	0	0	Actions sent out in 24 hours but minutes timescale not consistently met. New tracking system being developed to support improved performance.
	A permanence plan should be recorded by the second CLA review. Target 100% records show proposed permanence plan.		Audit of 2nd review records show Target 100% records show proposed permanence plan.	Neale Laurie			2	2	0	0	Audit shows practice inconsistent

This page is intentionally left blank

Priority	Indicator	Polarity	2016/17	SN Average	Jul	Aug	Sep	Oct	Nov	Dec	Notes	YTD	DOT
P4	Cases subject to PLO for no longer than 26 weeks %										Mailed Adriana and Andrews - L	0	
P4	Children seen within 4 weeks for adoption support %				100%	100%	100%	100%	100%	100%	Do not record	0	
P4	Timescale child entering care placement with adopters Days				215.5	215.5	215.5	215.5	215.5	215.5	ALB	0	
P4	Conference minutes circulated in 20 days %										Data to be collated	0	
P4	CLA review records circulated in 20 days %										Data to be collated	0	

Previous period	2
Current period	3

Priority 4	Outcome	Action	Success measure(s)	Lead	Responsible Officer	Time	RAG Initial	RAG 01/18	RAG 03/18	RAG 05/18	Progress update
			The Placement Sufficiency and Commissioning Strategy is in place.	Sue Green		Apr-18	2	3	0	re	Strategy in place focus on increase in local placements particularly foster care
		Ofsted rec 6 Develop edge of care services to reduce emergency admissions	The placement panel reviews children where emergency admission to care has occurred	Janet Simon		Jun-18	2	3	0	0	Weekly Panel reviews all children to review threshold and placement
			Ofsted rec 6 edge of care services established and showing impact	S Murphy		Apr-18	1	1	0	0	No resource identified to support the development; consideration for an invest to save business case
		Ofsted rec 8 Strengthen the impact of the Virtual School by implementing mechanisms to track the progress of all looked-after children and care leavers and ensure appropriate action is taken where they are not meeting levels of attendance or expected progress. Must include out of area children.	Ofsted rec 8 Mechanisms to track the attendance, progress and achievement of looked-after children 4-19 are in place for all children including out of area. Procedures and process for escalating cases where children are not making expected progress in place. Data on cases escalated gathered and analysed to inform service development	Keelley Pullen Headteacher Virtual School		Jan-18	2	4	0	0	All children are monitored in and out of area
			Gap between looked after children and other children is reduced at all key stages. To be evidenced through compliance reporting and performance information.	Keelley Pullen Headteacher Virtual School		Apr-18	2	3	0	0	Process used to escalate concern about individual children
			90% LAC attend a school graded good or better.	Keelley Pullen Headteacher Virtual School		Sep-18	2	4	0	0	Gap at key stages has improved
		Ofsted rec 8 Improve the quality and monitoring of all personal education plans with clear targets and action plans to achieve those targets.	80% of eligible looked-after children have a current personal education plan. Including out of area children	Keelley Pullen Headteacher Virtual School		Sep-18	2	3	0	0	84% children attend good or better schools one school RI at present so pupils being reviewed
			MPs are audited Target 90% SMART and ambitious	Keelley Pullen		Jan-18	2	3	0	0	Performance between 86 and 100% by year group
		Ofsted rec 7 Increase recruitment of foster carers.	Increase enquiries and assessments of foster carers	Janet Simon		Mar-18	2	2	0	0	Current performance: 53% judged good 22% judged amber. Guidance provided to promote quality
			Put in place a system to ensure that all foster carers have formal written confirmation of their delegated authority to make day-to-day decisions for the children in their care.	Janet Simon		Apr-18	2	2	0	0	Recruitment strategy in place current figures enquiries not available
			Household reviews and DBS updates are timely	Janet Simon		Apr-18	2	2	0	0	Foster Carers are clear about their delegated authority to make day-to-day decisions for the children in their care. To be evidenced through compliance reporting Target 100%
			Implement an awareness campaign with all agencies with access to children and young people to promote private fostering	Janet Simon		Apr-18	2	2	0	0	71.5% completed on time, 94% completed late 4.5% reviews outstanding for appropriate reasons
			Ensure that all private fostering arrangements have a current assessment and children are visited regularly (every 6 weeks in the first year and every 12 weeks in subsequent years).	Janet Simon		Apr-18	2	3	0	0	Routine awareness raising next 25/1/18
			Ensure access to FGC or family network meeting to identify potential carers when children may not be able to remain at home	Joe Tynan		Jun	2	3	0	0	Currently 11 children receiving services in line with other LAs
			Ensure SGO initial and full viability assessments are robust and children subject to a SGO have assessments and visits to address their needs.	Janet Simon		Apr-18	2	2	0	0	Assessment and plans in place
							2	2			Viability assessments are completed early in proceedings and within timescale. Target 100%
							2	2			Identify is checked at initial viability check and always prior to placement.

Priority 4	Outcome	Action	Success measure(s)	Lead	Responsible Officer	Time	RAG Initial	RAG 01/18	RAG 03/18	RAG 05/18	Progress update
		Review all cases where children are looked after under voluntary care arrangements (S20) to establish whether this legal basis is sufficient to ensure their safety and emotional security.	All cases where children are looked after under voluntary arrangements have been reviewed.	Nicole Laurie		Mar-18	2	3	0	0	Tracked monthly and numbers reducing
			Where voluntary arrangements are not sufficient to ensure a child's safety and emotional wellbeing appropriate action is initiated. Target 25% of CLA S20	Janet Simon		01/16/2018	2	3	0	0	Tracked monthly and numbers reducing
		OFSTED rec 3 Complete a review of all care plans for looked-after children to ensure that every child with a plan for long term care has a robust plan for permanence, also ensure that there is effective life-story work.	100% of looked after children in care for more than 4 months have an appropriate care plan and plan for permanence. Life story work has taken place or is planned, in accordance with the child's age and circumstances. Life-story work. To be evidenced through performance information and casework audits.	Nicole Laurie CSU		Apr-18	2	3	0	0	Review monthly for under 12% new process for over 12 yrs in place from February
				Strategic Leads and Service Managers		Apr-17	2	3	0	0	RCOs check life story work complete
		Ofsted rec 9 Ensure permanence tracking is up to date and used to identify care	Permanence tracker is checked by RCOs to identify drift and trigger intervention by RCO, Social Work Managers update tracker.	Janet Simon		01/02/18	2	4	0	0	Updated and reviewed monthly
		Ofsted rec 7 Establish an effective recruitment strategy for adopters including a foster to adopt policy.	Marketing is generating a steady number of potential adopters to meet need	Coram Contract		Dec-15	2	4	0	0	A media and recruitment strategy is in place currently meeting demand for 8 adopters
			Assessment timescales are met. Timescales in the Adoption score card are reducing.	Janet Simon			2	4	0	0	Adoption timescales improved since 2016
			Revised post-adoption support offer in place which provides children and adopters with support that meets their needs.	Janet Simon		Apr-17	2	4	0	0	Waiting times currently 2 weeks Assessment timescales met
			Post adoption support Waiting times for assessment do not exceed 6 weeks. Assessment is comprehensive timely within 45 days and results in a SMART support plan which is reviewed 6 monthly.	Janet Simon		Apr-17	2	4	0	0	Response within 2 weeks assessment within 4 weeks
		OFSTED rec 10 Develop and implement a comprehensive post-adoption support offer. There are a sufficient number of foster carers and adopters to meet need.	Targets: recruit 60 additional carers over 3 yrs.	Janet Simon			2	2	0	0	Fostering recruitment not achieving net gain in carers. Improved marketing agreed to drive recruitment. Marketing strategy and plan prepared MAR 18. Business case to escalate recruitment of in-house carers
			There are a low number of adoption breakdowns. To be evidenced through compliance reporting and performance information and 75% audit judged "good". Following breakdown children can access post adoption support.	Janet Simon		Apr-17	2	3	0	0	Adoption disruption low
		Where a plan changes from adoption the IRD and the ADM must be consulted to ensure alternative permanence plans are pursued without delay.	Children who have a change of plan still achieve permanence in a timely way.	Janet Simon		Mar-16	2	3	0	0	Children who have a plan for adoption where there is a change of plan are referred to ADM to review alternative permanence planning.

51.866d

Ensuring high quality support and services for looked-after children and effective permanency planning.

Ensuring high quality support and services for looked-after children and effective permanency planning.

Priority	Indicator	Polarity	2016/17	SN Average	Jul	Aug	Sep	Oct	Nov	Dec	Notes	YTD	DOT
P5	CLA visits in time %										data currently being cleansed, wi	0	
P5	PEPs up to date %						97.10%				88.80% Only collected quarterly	0	
P5	PEPs judged good at audit %										69.40%	0	

Previous period	2
Current period	2

Priority 5	Outcome	Action	Success measure(s)	Lead	Responsible Officer	Time	RAG Initial	RAG 01/18	RAG 03/18	RAG 05/18	Progress update
Putting the voice and day to day experience of the child at the centre of social care practice	The views, wishes and experiences of children and young people are fully and consistently considered in social work assessments, care plans (including the PEP), case conferences, visits and reviews.	OFSTED recco 3 Ensure that children are seen regularly in line with agreed timescales and that their views and day to day experience inform assessments, care planning and reviews.	95% of children are seen in a timely manner by social workers when completing social work assessments (within 10 w/days). 90% of children subject to child protection plans are seen every 10 w/days. 95% of looked-after children are seen every 6 weeks. 95% of children in need are seen every 4 weeks. To be evidenced through performance information, casefile audit and dialogue with children.	Strategic Leads and Service Managers	Neale Laurie	Mar-17	2	2	0	0	A programme of improving the quality of the data on LCS is taking place through January and February. Reporting will resume when this work is undertaken
		Support the Children in Care Council to develop their role so they are able to engage, support and represent the views of all children and young people who are looked-after.	Development programme to support the Children in Care Council established and implemented to help them engage with the wider LAC group	Janet Simon		Sep-16	2	2	0	0	Update not available
		Ofsted recco 15 The views of young people inform service development.	The views and experiences of all looked-after children are represented through the Children in Care Council. To be evidenced through an annual review or impact statement. There is evidence in the annual report of the Corporate Parenting Board of the impact of Children's views on service development.	Janet Simon		Mar-17	2	2	0		Corporate Parenting group meets regularly. Annual review of impact not yet in place.

This page is intentionally left blank

Priority	Indicator	Polarity	2016/17	SN Average	Jul	Aug	Sep	Oct	Nov	Dec	Notes	YTD	DOT
P6	Children missing from home offered return interview %										Information being collated	0	♦
P6	Children missing from care offered a return interview %										Information being collated	0	♦

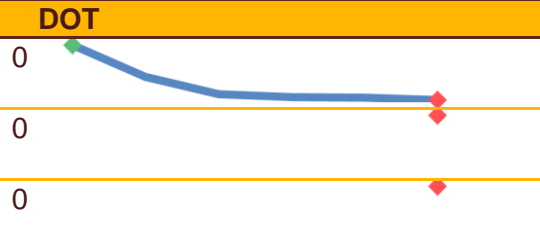
Previous period	2
Current period	3

Priority 6	Outcome	Action	Success measure(s)	Lead	Responsible Officer	Time	RAG Initial	RAG 01/18	RAG 03/18	RAG 05/18	Progress update
All children missing from home or care must have access to a return interview. Analysis arising from risks faced by children missing from home or care and children missing from education should inform action to reduce risk		Ensure tracking arrangements for children missing from home, care and education or at risk of CSE or at risk from gangs bring together key information from partner agencies to inform risk assessment and safety planning. Analysis of feedback from return interviews and risk assessment informs analysis of trends and hotspots. Information is used to proactively reduce risk by the multi agency group.	There are clear arrangements in place to systematically gather information in relation to: children missing from home; children missing from care; Children missing education; Children at risk of CSE; Children at risk through gang affiliation.	Janet Simon		Jan-18	1	3	0	0	Multi Agency meetings fortnightly to review risk for children. MASE data sharing commenced Dec 17
	Ofsted recco 4 All children missing from home or care must have access to a return interview. Analysis arising from risks faced by children missing from home or care and children missing from education should inform action to reduce risk	Ofsted recco 4 All children who are missing from home or care are offered a return interview Target 100%	Children at risk of sexual exploitation or Gang exploitation are identified and risk-assessed to ensure appropriate safety planning, intervention and referral to the multi-agency sexual exploitation group or Gangs group. To be evidenced through casework audits. All children missing receive the opportunity for a return interview. Target 100% To be evidenced through compliance reporting and casework audits. There is evidence of a multi agency response to trends and hotspots to disrupt activities that place children at risk	Janet Simon		Jan-18	2	2	0	0	Audit November 17 and next May 18 results informing practice. Return home interviews completed by open door. Referral arrangements being streamlined to increase number of children offered interviews. Missing from home 76% referred, all offered interview but take up 38%. For looked after children 94% referred, 98% offered and take up low at 23%. Work with provider to understand how we increase take up which is often low as young people can be ambivalent about take up.

Return home interviews

This page is intentionally left blank

Priority	Indicator	Polarity	2016/17	SN Average	Jul	Aug	Sep	Oct	Nov	Dec	Notes	YTD	DOT
P7	Care Leavers in EET %				73.2	69.6	67.7	67.4	67.3	67.1		0	
P7	Care Leavers with an up to date pathway plan %									88.80%		0	
P7	Pathway plans judged good at audit %									53.30%		0	



Priority 7	Outcome	Action	Success measure(s)	Lead	Responsible Officer	Time	RAG Initial	RAG 01/18	RAG 03/18	RAG 05/18	Progress update
Supporting young people leaving care to have a positive and successful transition to adulthood and independence	PI	OFSTED recco 11 Ensure social workers and personal advisers keep in touch with care leavers. Care Leavers are encouraged to stay put in their foster placement post 18yrs. Residential units keep in touch with their care leavers post 18yrs to offer support.	90% of Care leavers are in contact with their social workers and personal advisers. To be evidenced through surveys and focus groups.	Michele Lucas	Patience Koleosho	Apr-17	3	3	0	0	Data not available this month
		Produce a clear and accessible statement and policy that sets out the rights and entitlements of care leavers.	Statement and Policy developed that informs care leavers about their rights and entitlements leading to an increased take-up of services. To be evidenced through surveys and focus groups.	Michele Lucas		Dec-17	2	3	0	0	We have developed, financial policy for care leavers. Information for young people has been produced and shared with young people 16yrs plus.
		Ofsted recco 12 Improve assessments and pathway plans so that they reflect the needs and aspirations of young people and which involves them in the planning process.	100% of eligible looked-after children have a current pathway plan that supports their transition into adulthood and appropriately reflects their needs and aspirations. Target 95% up to date 75% judged good at audit.	Janet Simon	Adriana Cimpean	Dec-17	2	2	0	0	Current performance 88% Audit shows 53% good so further work to drive consistency
			Pathway assessments and plans are reviewed in required timescales to support transition planning	Janet Simon	Adriana Cimpean	Jul-17	2	2	0	0	Introduce improved pathway plan audit to follow
			Opportunities for apprenticeships and work-based training for care leavers are increased ; Target TBC	Michele Lucas	Patience Koleosho	Apr-17	2	2	0	0	Work with apprenticeship schemes to ensure take up by CLA. Work with colleges to achieve sustained engagement of CLA.
			Ofsted recco 13 Increase % of care leavers are in education, employment or training. To be evidenced through performance information. Target TBC	Michele Lucas	Patience Koleosho		2	2	0	0	Work with apprenticeship schemes to ensure take up by CLA. Work with colleges to achieve sustained engagement of CLA
			Care leavers can access suitable accommodation. There is sufficient accommodation to meet needs and young adults are able to access secure tenancies when they are ready to manage a tenancy.	Head of Housing		Apr-17	3	3	0	0	A range of accommodation has been commissioned to offer choice to young people
			Looked-after children have a greater choice about their accommodation when they leave care. Can access a secure tenancy when ready to manage a tenancy	Head of Housing		Apr-18	3	3	0	0	
	Care leavers know their health history	100% of care leavers are provided with their Health Passport and helped to understand their health history	CLA Nurse		Jun-17	2	2	0	0	Update information not available	

Previous period	2
Current period	2

This page is intentionally left blank

Priority	Indicator	Polarity	2016/17	SN Average	Jul	Aug	Sep	Oct	Nov	Dec	Notes	YTD	DOT
												0	
												0	
												0	

Priority 8	Outcome	Action	Success measure(s)	Lead	Responsible Officer	Time	RAG Initial	RAG 01/18	RAG 03/18	RAG 05/18	Progress update
Services and outcomes for children and young people are continually improving because there are effective management and governance systems in place.		Implement a multi-agency strategic plan with agreed priorities to shape services for children and young people in Thurrock based on a clear understanding of local need.	H&WB board plans in place	Rory Patterson		Nov-16	3	3	0	Jan-00	Meets regulary
			Information on local need gathered and analysed			Jan-17	3	3	0	0	JSNA being updated
			Priorities agreed;			Nov-16	3	3	0	0	
			Strategic plan is in place which informs the work of multi-agency partners and the local commissioning of services in line with need. To be evidenced through compliance reporting.			Dec-16	3	3	0	0	LSCB Business plan in place
		A multi Agency CLA strategy is in place and is updated to reflect priorities identified to improve outcomes for looked after children.	The CLA strategy progress is reported to the Corporate parenting board.	Sheila Murphy	Janet Simon	Apr-17	3	3	0	0	CLA strategy updated. Consultation commenced with partners and CICC.
			The Board reports annually on the impact of the plan and the Board's work to Cabinet.			May-17	3	3	0	0	Corporate Parenting Board workplan updated
		Ensure that governance arrangements are in place to drive forward the strategic plan and working closely with the LSCB and Health and Wellbeing Board.	See above LSCB Chair meets with DCS and Lead Member		Director of Children's Services	Mar-16	3	3	0	0	Governance arrangements agreed and in place.
			Monthly performance group in place; a comprehensive quality assurance framework is in place	DCS	S Murphy	Jan-18	3	3	0	0	Performance data set established; Quality Framework in place.
		The quality assurance framework clearly supports the service to test the quality of practice, prioritise areas for improvement, and measure the impact of change on children and young people.	Information gathered through the quality assurance framework informs practice and service development. To be evidenced through minutes of the Practice Improvement Group, Service and Training Plans		Director of Children's Services		3	3	0	0	Practice Improvement Group established meets monthly. Findings inform practice workshops, held locally. Audit shows practice still inconsistent. QA findings not being consistently used by managers to drive practice and performance change. Nov 17
Services and outcomes for children and young people are continually improving because there are effective management and governance systems in place.		Ofsted recco 1 Refresh the performance management framework and datasets (strategic and operational) so that managers are able and address areas of poor performance and celebrate improved performance.	Strategic and operational datasets are in place	Sheila Murphy	Iqbal	Feb-18	2	3	0	0	A monthly dataset Team level reports are available live on LCS.
			Monthly Performance meeting in place.	Sheila Murphy		Feb-18	2	3	0	0	Performance reviewed monthly for social care and CSU
			DCS performance Board in place	Rory Patterson		Feb-18	2	3	0	0	Monthly meetings in place supported by elected members
			Performance Management Information is used at all levels of the Service to monitor performance and informs practice and service development. To be evidenced through minutes of the Practice Improvement Group, Service and Training Plans.. To be evidenced through compliance reporting.	Sheila Murphy		Feb-18	2	2	0	0	Performance information is used at each tier of management to monitor activity and performance to acknowledge good performance and take action to address poor performance. Managers use performance data to drive practice. Reporting to be improved and introduced through workshops commencing Feb 18 Routine case audits and themed auditing established for children's social care show Audit programme to be updated for 2018/19
			Terms of Reference and membership are updated and work plan developed	Sheila Murphy		May-17	3	4	0	0	Updated work programme agreed with the Corporate parenting group for Sept 17
			The corporate parenting group is able to demonstrate its impact on improving outcomes for looked-after children. To be evidenced through an annual review or impact statement.	Director of Children's Services		Apr-18	3	3	0	0	Corporate Parenting group meets regularly supported by work plan. Work to start to produce annual impact statement.
			Review all strategies, policies and operating procedures to ensure these are current, appropriate and in line with statutory and other best practice guidance. Ensure that all strategies, policies and protocols are accessible and understood by all the professionals working to them.	Neale Laurie		Sep-17	2	4	0	0	Policies and operating procedures are updated and made available to staff via Tri-X Briefing on specific strategies, policies and procedures linked to themed workshops.
			Standards of social work practice are improved through the implementation of a clear and accessible manual of strategies, policies and operating procedures. To be evidenced through compliance reporting.								
			Standards of social work practice are improved through the implementation of a clear and accessible practice framework. To be evidenced through compliance reporting. Sign of Safety practice introduced.	Sheila Murphy		Sep-17	3	3	0	0	Practice standards in place Practice standards yet to be developed for early help SOS practice introduced
			Implementation Plan developed	Iqbal		Feb-18	2	2	0	0	Time table for implementation agreed for March18
All teams use recording system to capture their work	Strategic Leads and Service Managers		Feb-18	2	2	0	0				

Previous period	3
Current period	3

This page is intentionally left blank