



CHILDREN AND FAMILIES OVERVIEW AND SCRUTINY
COMMITTEE – 4 JUNE 2018

PROGRESS REPORT: OFSTED RECOMMENDATIONS AS PART OF
THE OFSTED CONTINUOUS IMPROVEMENT ACTION PLAN 2017 -
2020 - THE ROAD TO EXCELLENCE

REPORT OF THE DIRECTOR OF CHILDREN AND FAMILY
SERVICES

Purpose of report

1. To inform the Committee of progress made against the Ofsted Continuous Improvement Action Plan (OCIAP) in responding to the Single Inspection of Children's Social Care in November 2016.

Policy Framework and Previous Decisions

2. The Children and Families Overview and Scrutiny Committee (OSC) has previously received a copy of the Ofsted Continuous Improvement Action Plan, developed following the Ofsted inspection. A progress report was presented in November 2017.
3. The Committee requested that an update on the progress made against the 17 Ofsted recommendations be presented in June 2018. The underpinning action plan has been used to summarise the evidence made against the Ofsted recommendations and is attached as Appendix A to the report.

Background

4. The report is based on work undertaken through "The Road to Excellence", which is Children's Social Care's (CSC) Ofsted Continuous Improvement Action Plan for 2017 to 2020.
5. The OCIAP addresses the Ofsted findings by providing a strategic vision for improvement that is founded on four aims:
 - i. Being a Learning Organisation
 - ii. Embedding Excellent Practice
 - iii. Taking the Right Action at the Right Time, and
 - iv. Developing Policy and Performance

6. The action plan at Appendix A uses a RAG rating to indicate progress. Green is showing good progress and moving towards completion, amber is on track to deliver in a longer agreed timescale and red signifies areas requiring further focused work. As previously stated, the ratings provide a judgement of what evidence exists to demonstrate the departmental response to a recommendation. This evidence is largely taken from performance and business intelligence data, findings from quality assurance audits that are used together to monitor the progress of the OCIAP as well as staff input.
7. The summary of ratings is:
 - 5 recommendations are rated Green
 - 12 recommendations are rated Amber
 - 0 recommendations are rated Red
8. The recommendations vary in scale and scope and therefore some areas, especially those that start at a lower baseline, require longer timescales to produce demonstrable evidence of improvement. Progress is monitored via a monthly meeting of senior and middle managers that is chaired by the Assistant Director (Children's Social Care).
9. Highlights of progress (as detailed in Appendix A) are as follows:
 - A review of First Response (FR) led by the Assistant Director took place in December 2017 and showed significant improvements in processes and improved reporting through MOSAIC. Furthermore an Independent Consultant will carry out a mock inspection in May 2018.
 - Single assessment timeliness (completed within 45 days) in March reached 85.5% in First Response, although overall year to date, the figure will be 71.3% completed within timescale. Month on month this is an improving picture and is in the context of FR completing four times more assessments than pre the Ofsted Inspection. Further work is underway to improve the number of single assessments across the Service.
 - The rate of re-referrals in March 2018 was 22.6% compared to a previous high of 25.8%. Since February 2018 a monthly audit has taken place to sample no further action cases and re-referrals in First Response. This is showing robust management oversight and decision making.
 - The percentage of 'children becoming subject to a child protection plan for a second or subsequent time' has reduced from 25.9% to 15% in the period, although due to fluctuations, at the year end this figure will remain at 24%.

- 95.6 % of child protection cases were reviewed within timescales which remains high performance.
- Children in care with three or more placement moves has improved from 8.9% in 2016/17 to 7.7% at March 2018
- Dental Checks for Children in Care have improved from 74% to 86%
- Health Checks for Children in Care have improved from 75% to 78.8%
- The percentage of Strength and Difficult Questionnaires (SDQ) completed has increased to 78.6% from 45%, showing scores of 16 , which is the national average
- 90% of Pathways Plans have been completed by Quarter 4, which is a significant improvement. It should be noted that this figure will be impacted upon next Quarter by the increased offer to care leavers increasing the service responsibilities to include 21 to 25 year olds.
- The percentage of Care Leavers in Education, Employment or Training is 50.7%(112 young people); this is 2.6% better than Quarter 3 and moves Leicestershire into the second quartile by comparison with other local authorities.
- 88% of Care Leavers are in suitable accommodation. This is higher than Quarter 3 (84.6%) and places Leicestershire in the second quartile of local authorities using available comparisons.
- In March 2018, 88% of staff received supervision - this reflects the percentage of staff who had a supervision and excludes those ineligible for supervision due to maternity leave/sickness
- In March 2018 the average case load was 19 with some outliers and specific issues arising from capacity in particular service areas. These issues are being addressed but are a significant pressure on the service.
- Revised decision making panels are embedded, providing management oversight of key decisions and resource allocation.
- The published adoption scorecard measures on timeliness show:
- An average of 517 days from entering care to adoption is less than the statistical neighbour average of 549, but the lower figure is positive.

- An average of 195 days from court authority to place a child and the decision to match is less than the statistical neighbour average of 210. Again, the lower figure is positive.
- In the last 12 months, 45 young people were discharged from care onto a Special Guardianship Order (SGO), an increase of 29 when compared to the point of inspection.
- Around 37% of discharges from care have been a return home, which is better than both statistical neighbours and the England average.
- The permanence audit, which took place in November/December 2017 showed improved performance in the timelines and quality of the permanence decision of the child.
- The Ofsted Annual Conversation took place in February 2018 and the resulting letter recognised the progress being made. The Department is expecting a Focussed Visit later this year which it is expected may well focus on First Response.

Proposals/Options

10. That the Committee considers the progress made against the Ofsted Continuous Improvement Action Plan to date.

Consultations

11. The Road to Excellence is a departmental continuous improvement plan so has naturally included a wide range of Children and Family Services staff in its development. Engagement with partner agencies has primarily been through the Local Safeguarding Children Board where partners have fed in their views of the Plan.

Resource Implications

12. Resource implications of responding to the Ofsted inspection have already been agreed through the growth bid.

Timetable for decisions

13. Not applicable.

Conclusion

14. The progress made against the Ofsted Continuous Improvement Action Plan is presented to the Committee.

Background Papers

The Ofsted report: Leicestershire Inspection of services for children in need of help and protection, children looked after and care leavers. November to December 2016
<http://ow.ly/16uB30gfp7d>

The Road to Excellence (Plan on a Page)

<http://politics.leics.gov.uk/documents/s131465/Ofsted%20funding%20Appx%20A%20-%20Plan%20on%20a%20Page%20CIP.pdf>

The Continuous Improvement Ofsted Action Plan
 (embedded in Self Evaluation February 2018)

Self-Evaluation February 2018

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Circulation under the Local Issues Alert Procedure

None

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List of Appendices

Appendix A – Progress against Ofsted recommendations as part of the Ofsted continuous Improvement action Plan 2017-2020- The Road to Excellence

Equality and Human Rights Implications

15. Responding to the findings of the Ofsted inspection will improve services for all groups of children and families.

Appendix A
Progress against Ofsted recommendations as part of the continuous improvement action plan 2017-2020- The Road to Excellence.
Overview and Scrutiny Committee June 2018

Ref.	Ofsted Recommendation	Progress RAG	Targets	Outturn Performance 2016/17	Performance Q4 18 or by month	Target March 18	Target 2020	Evidence of Completion or Evidence of Progress by March 2018	Further Actions in progress	Lead Officer
1.	Ensure that performance management information is based on accurate data, so that all areas requiring improvement can be identified and progressed in a timely way.	A	<p>The service has a suite of performance reports that are accurate, up-to-date and enabling managers to evidence progress against key performance indicators. This will show good performance against statutory indicators enabling managers to see and immediately address any arising concerns.</p> <p>Measure</p> <p>All daily, weekly and monthly reports are in place by June 2017 for First Response, Child Protection and Children in Care.</p> <p>By December 2018, reports for Fostering & Adoption are developed in Tableau (currently manual).</p> <p>Annual returns for the Department of Education show LCC to be performing well against Statistical Neighbours and National Indicators.</p>	N/A	System generated	In place	In place	<p>Reports (daily, weekly and monthly) available for First Response, Disabled Children Team, Child Protection, Child Sexual Exploitation team and Children in Care.</p> <p>Accuracy of data is routinely monitored at Children's Social Care (CSC) monthly performance meeting. Managers increased access to Tableau reports are quickly highlighting performance and data inaccuracy as reports are 'live'. Delays in recording are addressed.</p> <p>Examples of progress made include :</p> <p>i) As of 31.3.18 Pathway Plans showing that 90% are completed</p> <p>ii) Dental Checks have improved from 74% to 86%</p> <p>iii) Health Checks improved from 75% to 78.8%</p> <p>iv) SDQ percentage completed 78.6% from 45% but still showing scores of 16 – national average</p> <p>Group established, chaired by AD (CSC) is progressing system generated reporting for Fostering & Adoption. Although progress is being made not all reports are yet system generated.</p>	<p>Weekly meetings are taking place with Head of Service to address data quality issues. This is addressing any accuracy and inputting issues and is an improving picture.</p> <p>Work is in progress to develop Tableau reporting for Fostering and Adoption.</p>	<p>Business Intelligence Performance Manager – Emma Jones</p> <p>Assistant Director Children's Social Care – Sharon Cooke</p> <p>Nicci Collins Head of Service CIC</p>

Ref.	Ofsted Recommendation	Progress RAG	Targets	Outturn Performance 2016/17	Performance Q4 18 or by month	Target March 18	Target 2020	Evidence of Completion or Evidence of Progress by March 2018	Further Actions in progress	Lead Officer
2.	Ensure that management oversight of practice fully complies with supervision policy requirements and supports effective case progression and decision-making.	A	<p>Case decision processes consistently demonstrates robust management oversight. Evidence of good clear plans for children.</p> <p>Measure</p> <p>Weekly and monthly performance reports show good performance in timeliness of supervisions.</p> <p>Outcome of case file audits are graded good or outstanding for management decision and oversight.</p>	84% (Dec 16)	88% (March 18)	88%	100%	<p>The frequency of supervision has been monitored on a monthly basis which has helped to secure a compliance of 88% across Early Help and Children's Social Care March 2018</p> <p>Practice Development Steering Group have looked at and revised the supervision template and the piloting of it. The findings led to a more in-depth discussion about the nature of supervision and if this needs to be more of a significant overview of supervision; this is on the agenda for the next Practice Development Steering Group.</p> <p>A specific Supervision Audit has been agreed</p> <p>Practice Development Group developing a more reflective approach to supervision and ensuring that staff are provided with opportunities for reflective learning. The directorate is part of the regional work on reflective supervision</p> <p>Practice Standards have been launched which will enable practice to be directed and in auditing activity, to be used to inform judgements</p>	<p>Additional work required within Mosaic to enable monitoring of supervisions through Tableau reports is in progress.(March 18)</p> <p>Two thematic audits showed management oversight graded good or outstanding as 54%; does not reflect full year and further work is required. Trigger points for management oversight has been enhanced during the last 6 months but are not reflected in this %. Follow up action takes place to ensure that any actions that don't meet good or outstanding are addressed by managers.</p> <p>Learning programme for senior practitioners and team managers to include training and mentoring approaches to develop supervisory skills and competence (June 2018)</p> <p>Reflective Supervision & management oversight is part of the core offer for Senior Practitioners and Team Manager</p> <p>A focus on the quality of supervisions for Children in Care in line with SOS completed with managers January 2018</p> <p>Key Decision Discussions implemented to improve management oversight of complex cases.</p> <p>Cases being audited in First Response with a particular focus on management oversight and decision making, Contacts, referrals and Strategy Meetings</p>	<p>Head of Service Field Social Work – Anita Gurry</p> <p>Head of Practice Excellence Moira O' Hagan</p> <p>Head of Service Children in Care – Nicci Collins</p> <p>Anita Gurry – Head of Field Social Work</p>

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3.	Ensure that when a child is allocated to a social worker this is reflected in the social worker's caseload and that caseload size and management capacity across the service facilitate good-quality social work.	A	<p>Social Work caseloads are within agreed numbers:</p> <p>v) Assessed & Supported Year in Employment 12 – 15</p> <p>vi) Senior Practitioner 12 – 15</p> <p>vii) Social Worker (full time) 18 - 20</p> <p>So ensuring capacity for social workers to complete well evidenced assessment and intervention in a timely way, showing that plans are progressed in a child's timeframe.</p> <p>Increase Social work and management capacity.</p> <p>Measure</p> <p>Monthly performance returns show that caseloads are within the numbers above.</p> <p>viii) Assessed & Supported Year in Employment 12 – 15</p> <p>ix) Senior Practitioner 12 – 15</p> <p>x) Social Worker (full time) 18 - 20</p>		19 March 18			<p>The average number of cases per social worker has ranged from 17 to 19 cases since January 2017. There are some outliers to this with some individual workers showing caseloads in the 20's. Agreed additional capacity will further address this.</p> <p>Specific issues arise when agency staff leave creating significant capacity issues within teams and localities and at those times caseloads can rise significantly but this is kept under senior manager scrutiny and remedial action taken where necessary</p> <p>Social Worker caseloads within agreed number achieved in First Response, Disabled Children's team , CSE and Children in Care Teams.</p> <p>Child Protection and Strengthening Families include some teams / individuals experiencing caseloads in the 20's. This is being addressed by additional capacity and there are some variations in localities.</p> <p>Recruitment and retention work has been ongoing with the recruitment to a number of key posts. The recruitment to certain service areas and posts is proving more difficult. This is a national issue. This is being addressed via work on a recruitment and retention strategy.</p>	<p>Recruitment ongoing with additional business support resource to support the recruitment process.</p> <p>Recruitment and Retention Strategy is in draft for sign off at DMT June 2018. Immediate action in relation to market premium for certain key posts in place and there is a contract with Front-Line to host ASYE Unit from September 2018.</p> <p>Over the previous 3 months we have recruited to a number of Team Manager posts, some Senior Practitioners and in relation to experienced Social Workers it is proving more difficult; there are a number of ASYE's recruited who will take up post during the Summer and work is underway to support their assessed year in practice.</p> <p>Planned reduction on the reliance on agency / interim staff by March 2018 There does remain a higher number of agency workers than anticipated.</p> <p>Monthly reporting to senior management team on caseloads will continue to ensure robust oversight.</p> <p>New duty on Care Leavers Service has meant that there are 35 unallocated cases and 25 UASC cases waiting allocation; paper for increased staffing has been submitted to DMT to try to address this</p>	Assistant Director Children's Social Care – Sharon Cooke

Ref.	Ofsted Recommendation	Progress RAG	Targets	Outturn Performance 2016/17	Performance Q4 18 or by month	Target March 18	Target 2020	Evidence of Completion or Evidence of Progress by March 2018	Further Actions in progress	Lead Officer
4.	Review processes operating in the First Response Service to ensure the accurate recording of contacts, referrals, assessments and their timeliness.	G	<p>First Response demonstrates consistently a timely and proportionate response to children in line with the LSCB threshold document and Working Together to Safeguarding Children 2015.</p> <p>Measure</p> <p>Weekly and monthly performance reports show progress in line with Statistical Neighbours and national average.</p> <p>Targets are:</p> <ul style="list-style-type: none"> Referrals – manager 24 hour decision – 100% Re-referral rate Assessments completed in 45 days 					<p>All processes within First Response reviewed following inspection. Revised and refreshed operating model in place to ensure:</p> <ul style="list-style-type: none"> the accurate recording of contacts and referrals good quality assessments delivered in timely manner. <p>New Quality Assurance Framework for First Response and auditing of Contacts and Referrals in order to gauge decision making; latter in place since January 2018</p> <p>The review of the 'Out of Hours' (OOH) component has been completed with the new functional model in place. The consistency of the OOH service is improving and a dedicated team manager is in place working on shift with staff to oversee consistency and quality. The Out of Hours Handbook is currently being updated.</p> <p>Agency staff significantly reduced at TM, and SP level following successful recruitment campaign; further work in relation to SW's.</p>	<p>Work on the development of an integrated multi-agency front door has been impacted upon by changes within other agencies.</p> <p>Agreed prioritisation and grading framework with the police focusing on proportionate and appropriate responses to domestic abuse notifications and referrals. This new operating model is in place</p> <p>Work in First Response to embed and evidence SOS is in progress (June 2018)</p> <p>SMT review inspection visit to First Response took place and recommendations from this are incorporated into the new service delivery plan for 2018.</p> <p>An Independent review of First Response is taking place in May 2018 and has been delayed in order to adjust to the new requirements of ILACS Focussed Visit and will be treated as preparation for this.</p> <p>Impact Boards in teams with learning and quality messages in place since February 2018</p> <p>Weekly threshold meetings of managers in FRCD to look at threshold and to reflect on decision making</p> <p>New forms established for First Response to enable differentiation between Contacts and Referrals and improve reporting mechanisms.</p> <p>A monthly audit of re-referrals and NFA cases takes place in First Response is demonstrating improving decision making and oversight.</p>	Head of Service Field Social Work – Anita Gurry

Ref.	Ofsted Recommendation	Progress RAG	Targets	Outturn Performance 2016/17	Performance Q4 18 or by month	Target March 18	Target 2020	Evidence of Completion or Evidence of Progress by March 2018	Further Actions in progress	Lead Officer
5.	Ensure that practitioners and managers understand and apply thresholds appropriately at every stage of the child's journey.	G	<p>All cases show the threshold in line with the LSCB threshold document has been consistently applied and children have received a timely and proportionate response in line with their assessed needs.</p> <p>Measure</p> <p>Performance shows a low number of:</p> <p>xi) Re-referrals</p> <p>xii) Repeat CP plans</p> <p>xiii) Permanence plan in place / CIC by the second review – 100%</p>	<p>17% (25% Q2)</p> <p>18.8%</p> <p>N/A</p>	<p>22.6% (March 2018)</p> <p>15% (March 18)</p> <p>Overall 24%</p> <p>Manual check made</p>	<p>22%</p> <p>18%</p> <p>100%</p>	<p>22%</p> <p>18%</p> <p>100%</p>	<p>The application of appropriate thresholds is generally monitored through repeated social care involvement and case file audits.</p> <p>The rate of re-referrals in March 2018 is 22.6% and is showing improved performance</p> <p>The proportion of repeat child protection plans to date is just under 24% and a deep dive audit has taken place in relation to this. Some excellent practice identified and a focus on neglect as a key theme. Only 10% of repeat plans had no CIN or EH Support between planning periods.</p> <ul style="list-style-type: none"> • Early identification of neglect • Working with issues of neglect • The interface between Early Help and Social Care. <p>Use of Peer Supervision to enable discussion to take place on thresholds and resolution of cases between Early Help and Social Care</p>	<p>Development of a neglect resource pack (December 2017) completed and information sent out to all staff through SMT Action Log to be used as a learning tool by managers in team meetings.</p> <p>Review of Threshold Document – July 18</p> <p>Reporting at 18 month in relation to permanence planning and recorded where a decision has been made. Development of performance report in relation to permanence in place at second review (April 2018).</p> <p>Implementation of Child's Journey Panels in January – Transition Oversight and Planning Meeting – Early Help to Social Care looking particularly at threshold issue and resolution of the right plan for the child.</p> <p>Case Decision Meeting for decisions around Public Law Outline, Care Proceedings and revised Permanence Panel all implemented January 2018</p> <p>A monthly audit of re-referrals and NFA cases takes place in First Response is demonstrating improving decision making and oversight.</p>	<p>Head of Service for Quality Assurance, Safeguarding and Improvement – Chris Nerini</p> <p>Head of Service Children in Care – Nicci Collins</p> <p>Heads of Service – Chris Thomas, Anita Gurry and Nicci Collins</p>

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6.	Ensure consistency in social work assessments, so that they are sufficiently in depth, are informed by good-quality chronologies, reflect the needs and identities of individual children, are updated regularly to take account of children's changing needs and circumstances and lead to outcome-focused plans.	A	<p>Performance reports evidence consistent use of:</p> <ul style="list-style-type: none"> xiv) chronologies, xv) assessment, xvi) outcomes focused plans <p>Measure Quality audit demonstrates that all cases have an up-to-date chronology, assessment and outcome-focused plan.</p> <p>Chronology</p> <p>Good quality plans</p> <p>Single Assessment Framework are completed in a timely way and are of a good standard</p>	N/A	*	80%	100%	<p>Practice standards for assessments have been developed as part of the Growing Quality in CSC framework. The standards, which have been introduced to all workers, set out clear expectations of good quality assessments across all service areas.</p> <p>A recent audit in First Response demonstrated that progress is being made in the number of cases having assessments graded good overall.</p> <p>*</p> <p>Chronologies and quality of plans are being audited currently as part of the thened audits running from May to June.</p>	<p>Practice Standards launched and now in use and audits will be completed against these standards</p> <p>EIP2 funding for SOS awarded to LCC in Sept 2017 and since that time real focus on role out and implementation of SOS.</p> <p>Practice Excellence Team established</p> <p>Development of Growing Quality frameworks - Growing Quality in Early Help launched 2017 at Pride in Practice event</p> <p>Work to improve the depth of practice is ongoing and will be supported by Practice Excellence Team</p> <p>Pride in Practice conference for practitioners to showcase good practice and key developments took place November 2017</p> <p>Social Work Conference took place in June 2017 and one planned for June 2018. Both of these are annual events</p>	<p>Head of Service Field Social Work – Anita Gurry</p> <p>Head of Service Safeguarding, Improvement & Quality Assurance – Chris Nerini</p> <p>Head of Service Practice Excellence – Moira O'Hagan</p>

Ref.	Ofsted Recommendation	Progress RAG	Targets	Outturn Performance 2016/17	Performance Q4 18 or by month	Target March 18	Target 2020	Evidence of Completion or Evidence of Progress by March 2018	Further Actions in progress	Lead Officer
7.	Strengthen arrangements for permanence planning to enable all children looked after to be provided with a permanent home and family without undue delay, wherever this is possible.	G	<p>Permanence plan for children evidenced on all cases. The plan will have been agreed and children will be living in secure and stable placements where their long term needs are met.</p> <p>Measure</p> <p>Permanence plan in place for Children in Care by second review.</p> <p>Up to date Pathway plan in place for all young people in Care or Care Leavers aged 15 plus.</p> <p>Number of Children in care with three or more placement moves reduces.</p> <p>The proportion of children in placements for 2 or more years or adopted increases.</p> <p>Published adoption scorecard measures on timeliness :</p> <ul style="list-style-type: none"> ○ Average days from entering care to adoption being less than the statistical neighbour ○ Average of days from court authority to place a child and the decision to match being less than the statistical neighbour 					<p>A revised Permanence Panel has improved rigor and oversight to permanency planning. A practice summit on Permanency Planning was held in March 2017 to engage the workforce in a range of improvement work streams (Special Guardianship Orders, Legal Planning Meetings and Connected Carers). All groups have been reviewing processes, guidance, communications to improve the quality and timeliness of permanency planning. .</p> <p>Permanence Audit took place in November 2017 and showed improved practice permanency planning. Learning from the audit has been shared across the service.</p> <p>Good progress has been made in the following areas:</p> <ul style="list-style-type: none"> - Refreshed CiN guidance has been published. A process to alert of drift and delay on Child Protection cases has been established - Child's Journey Guidance and Panels implemented January 2018 to ensure earlier planning and permanence and the avoidance of drift <p>A rolling programme of case reviews is underway. Performance indicators for permanence show improved performance:</p> <p>xvii) Children in care with three or more placement moves. This has improved to 7.7% March 2018</p> <p>xviii) Published adoption scorecard measures on timeliness :</p> <ul style="list-style-type: none"> ○ Average of 517 days from entering care to adoption being less than the statistical neighbour average of 549 ○ Average of 195 days from court authority to place a child and the decision to match being less than the statistical neighbour average of 210 <p>xix) 90% of Pathway Plans now completed; this is excellent progress against the previous figure of 50%</p>	<p>Permanency is a strand of the Growing Quality campaign for 2017/18 as well as within the Departmental Plan</p> <p>Permanency will be part of the service training and support offer to all social workers.</p> <p>Permanence Planning Guidance updated January 2018</p> <p>Practice Summits held with a focus on child permanence reports as well as the implementation of a pilot permanence team to focus on adopters/carers which recruitment has started.</p>	Head of Service Children in Care – Nicci Collins

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8.	Ensure that children looked after are able to access timely and appropriate support to meet their therapeutic needs.	G	<p>That children, who are assessed as requiring additional support to address emotional wellbeing /mental health, have their needs identified and a plan put in place to meet their needs results in placement stability.</p> <p>Measure</p> <p>Average Strengths and Difficulties Questionnaire measure is in line with the national average – 16</p> <p>Completion rate of SDQ's</p> <p>Quality assurance audits evidence that a young person's emotional health and well-being is assessed and resources to address are in place.</p>	N/A	1	16	16	<p>The Dedicated Placements Support Team (DPST) has been instrumental in ensuring that the therapeutic needs of children in care are met. This is evident in improved placement stability performance measure of 7.6% (top quartile). The work of DPST includes:</p> <p>xx) 7 young people remaining in their current placement with intervention from support workers in the team</p> <p>xxi) 3 young people remaining at home with their parents after previously entering care</p> <p>xxii) 33 independent visitors being matched with young people in care</p> <p>Our specialist foster carer provision successfully enables children to return home through solo placements and working intensively with carers/parents. This has been alongside establishing CDM/Permanence Panel & Additional Resource Panel and Complex Care Panel with Health and Education services, where decisions are reached about placement requirements and the additional therapeutic services children need.</p> <p>For children in care who do not meet the threshold for CAMHS, we have provided funding for counselling sessions to a number of children. We also introduced CAMHS consultation sessions for carers, with sessions being booked months in advance. We have introduced more information/training and support at foster carer support groups (hubs) that address emotional health and reduced supervising social worker caseloads to improve accessibility and support when such issues arise.</p> <p>The new processes have seen the following outcomes:</p> <p>xxiii) Reduced waiting times for emotional support to the child and carer. Completion of specialist assessments to inform care planning, contributing to placement stability.</p> <p>Our Strengths and Difficulties Questionnaire (SDQ) measure is in line with the England average at 16.</p>	<p>Revised CAMHS contract to be in place by April 2018. This is completed</p> <p>Development of Mistle project as part of Care Placement Strategy to support most challenging young people in care to successfully experience family-based placements by summer 2018. This was awarded to Action for Children.</p> <p>In addition an improved offer for post Adoption and SGO support has been implemented</p> <p>Therapeutic Policy has been written and implemented which means more support for birth families – Agency Decision Maker sends out information when each decision is made.</p> <p>Improved offer for therapeutic support for families as well as care leavers to ensure needs are met and stability achieved</p>	Head of Service Children in Care – Nicci Collins

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9.	Ensure that all children looked after who go missing are offered a return home interview and that information gained from all such interviews is used to inform risk management and shared intelligence.	G	<p>Performance shows reducing number of young people who repeatedly go missing. High completion of return interviews and evidence of these informing plans leads to a reduction in missing episodes, so helping to keep young people safe.</p> <p>Measure</p> <p>The number of young people going missing reduces.</p> <p>Take up of young people undertaking a return home interview (all young people and Children in Care.</p>	<p>Whole year: data for Leicestershire children</p> <p>LAC: 77% RI's completed</p> <p>Non LAC: 80% RI's completed</p> <p>Total for LAC and non LAC: 80% RI's completed</p>	<p>Q4 data for leicestershire children</p> <p>LAC: 23 individuals. 97 % RI's completed.</p> <p>Non LAC: 94 individuals 95% RI completed (8 not offered due to circumstances)</p> <p>Total for Lac and non LAC : 96%</p>	90%	95%	<p>This work is led by the Child Sexual Exploitation team. All return interviews are now completed by the Listening and Support Service, showing improved percentage of the timeliness of completion and quality. All children looked after who go missing are offered a return home interview. Within the Q3 and Q4 data returns we can evidence a further increase in the number of looked after children who are taking up the offer of a Return Interview; there is also an increase in the number of Return Interviews completed within the 72 hr time bracket. There remain a number of young people who refuse the interview. The completion of return interviews for children placed in LCC by other LA's remains an area of concern.</p> <p>xxiv) The AD receives weekly reports on all missing young people and completed return home interviews. Any necessary action is taken.</p> <p>xxv) a standard letter from the Director has been devised. This is sent by the AD to any LA who do not meet their responsibility</p> <p>xxvi) improved protocols for children that go missing more than 3 times in a 90 day period have been tightened.</p> <p>xxvii) monitoring of children who go missing has been refreshed to better inform risk management and shared intelligence.</p> <p>xxviii) the Missing policy and procedures have been updated on the LSCB website and promoted at a number of large events.</p> <p>xxix) Monthly reports provided for Lead Member who provide challenge to work completed</p> <p>xxx) programme oversight by the CSE and Trafficking Operation Group</p>	<p>We are confident going forward that we can achieve the targets identified in this report. We have formulated a plan to take this forward and improve the outcomes/figures for every looked after child who is reported as a missing person. Work will be completed with the relevant Children's Teams to review the complex cases with a view to completing an audit of the cases of children who are repeatedly reported as a missing person to measure timeliness and impact of RI's.</p> <p>Continue work to address completion of return interviews with children placed in LCC by other LA's (ongoing).</p>	<p>Head of Service Field Social Work – Anita Gurry</p> <p>Service Manager Child Sexual Exploitation – Donna Smalley</p>

Ref.	Ofsted Recommendation	Progress RAG	Targets	Outturn Performance 2016/17	Performance Q4 18 or by month	Target March 18	Target 2020	Evidence of Completion or Evidence of Progress by March 2018	Further Actions in progress	Lead Officer
10.	Ensure that, when a child in need plan relating to a child who has disabilities is reviewed, it reflects an up-to-date assessment, informed by the voice of the child and undertaken by a qualified and registered social worker.	A	<p>Disabled children who require a child in need assessment to support their plan have these undertaken, updated and reviewed by a qualified social worker.</p> <p>Measure</p> <p>Audit of CIN cases in the Disabled Children's Service demonstrate that assessments and reviews are completed by a qualified social worker, there is a current good quality assessment and the assessment is informed by the voice of the child.</p> <p>Overall good or outstanding</p>	33% (Mar 17)	*	100%	100%	<p>*A review of the 200 cases that were within the CIN Review cohort was undertaken in October 2017.</p> <p>Cases that were assessed as needing social work support were allocated within the DCS by January 2018.</p> <p>The remaining cases (less than 100) met the threshold for early help support. The plan was for these to all be stepped down at the point of their next CIN review. In excess of 50% have been stepped down as planned.</p> <p>The remaining cases still have open CIN Plans and are being managed by Child Care Workers with supervision by Senior Practitioners and Team Managers. They will be stepped down at their next review (unless at that time the assessed needs have changed). This has been delayed by recruitment of social work staff</p> <p>When cases are allocated to a Social Worker the time-scales for work are reviewed in supervision with Team Managers.</p> <p>DCS work to the Practice Standards used across C&F.</p> <p>A new Service Manager has been appointed (April 2018) and in post to oversee the work of the children with disabilities service and ensure that learning from audit and peer review is implemented</p>	<p>Cases held are allocated to a SW and reviewed within agreed timescales</p> <p>DCS work to the Practice Standards used within Children's Teams</p> <p>Learning from audits is implemented as well as learning from peer reviews.</p> <p>The remaining cases identified as meeting the threshold for Early Help will be stepped down by end of July 2018.</p> <p>The new Service Manager is leading key work around auditing and assessment; learning from the recent safeguarding audit shows this as a key area of work.</p>	Head of Service SEND and Children with Disabilities – Tom Common

Ref.	Ofsted Recommendation	Progress RAG	Targets	Outturn Performance 2016/17	Performance Q4 18 or by month	Target March 18	Target 2020	Evidence of Completion or Evidence of Progress by March 2018	Further Actions in progress	Lead Officer
11.	Ensure that support plans for special guardians and adopters are informed by a clear assessment of children's and carers'/parents' long-term needs and that good-quality specialist post-order support is made available to those affected by adoption and special guardianship when, and for however long, it is needed.	A	<p>Evidence of a support plan on all cases that is informed by a clear assessment, outlining support to help the young person achieve good outcomes and minimising placement breakdown / disruption.</p> <p>Measure</p> <p>Quality of support plans for SGO and adoption orders have improved.</p> <p>Quality assurance by the Agency Decision Maker, evidences quality support plans to address long term needs so reducing the risk of placement breakdown.</p>		*	100%	100%	<p>A refreshed SGO process is now in place. In the last 12 months, 45 young people were discharged from care onto an SGO, an increase of 29 when compared to the point of inspection.</p> <p>Post-adoption support offer has been refreshed alongside a range of accessible resources developed for carers. Increased capacity has been put in place with the establishment of a permanent post.</p> <p>In addition, a pamphlet for independent advice to birth parents is now in place, a dedicated post-adoption support worker has been employed and our first adoption newsletter published 2017</p> <p>A policy on post-adoption support is included as part of our local procedures and this will be used to develop further staff guidance.</p> <p>*Performance report in development. Manual audit by Team Manager shows support plans are in place. Further audits required to ensure consistently good quality.</p>	<p>Feedback has been sought from adopters in receipt of services from the adoption service to evaluate the impact of the first 6 months of implementation of the new offer.</p> <p>*An audit is scheduled take place in relation to SGO support plans.</p> <p>The updating of the Adoption website updated with new material is in progress</p> <p>A micro-site to support SGO's has been commissioned from Family Action.</p> <p>Revised CAMHS contract is in place.</p> <p>Recruitment to Special Guardianship Order Social Worker and Support Worker has been successfully completed</p>	Head of Service Children in Care – Nicci Collins

Ref.	Ofsted Recommendation	Progress RAG	Targets	Outturn Performance 2016/17	Performance Q4 18 or by month	Target March 18	Target 2020	Evidence of Completion or Evidence of Progress by March 2018	Further Actions in progress	Lead Officer
12.	Improve the quality and management oversight of pathway planning and ensure consistency in the quality of advice and support provided by personal advisers to care leavers. This should include information about entitlements and provision of health histories.	A	<p>All young people in care 16 plus have a pathway plan in place that is based on assessment of need. Thus ensuring a young person is supported in education, employment and training and in suitable accommodation.</p> <p>Measure</p> <p>Up-to-date pathway plan in place.</p> <p>Independent Reviewing Officers to quality assure plans.</p> <p>Care leavers in suitable accommodation.</p> <p>'In contact figure' (relevant and former relevant).</p>	<p>manual</p> <p>79.3%</p> <p>90%</p>	<p>90%*</p> <p>88.0% (March 18)</p> <p>92%</p>	<p>95%</p> <p>92%</p> <p>90%</p>	<p>100%</p> <p>95%</p> <p>90%</p>	<p>Service restructure with additional resources agreed has seen good progress made with over 90% of pathway plans showing updates in the last 6 months.</p> <p>*The CiC Manager completed a full audit of Pathway Plans and confirmed that we have achieved 90% completion which is an improvement.</p> <p>Care Leavers in Education, Employment and Training data shows our figure of 54.5% to be higher than statistical neighbours and Care Leavers in suitable accommodation has sustained high performance at 88.0% which is above statistical neighbours.</p> <p>In contact reflects the frequency with which the LA is in touch with a care leaver – there is no set timescale for in contact and is driven by need reflected in the Pathway Plan. Tracking of this data set is further complicated by:</p> <ul style="list-style-type: none"> • In contact no longer has to be with the PA can be another professional • Care Leavers who refuse contact • It not being based on full year figure but 2 months before and 1 month after the birth date. <p>The Leaving Care Team has been established, staff recruited and cases transferred to that team. This will enable focused, strategic work to improve outcomes for care leavers and will improve accountability.</p>	<p>Application of social networking and other technological platforms available to increase the 'in contact' figure. The use of WhatsApp is being implemented imminently to enable to 'in contact' and has required approval by ICT and risk assessment</p> <p>Service Manager will prioritise:</p> <ol style="list-style-type: none"> Setting parameters of the 'In contact' report and this is running well Ensuring data is accurately recording in Mosaic (ensuring staff have clear instructions) <p>Pathway Plans are now completed and the latest figure of 90% shows improvement. Care Plans are recorded separately.</p> <p>New duties on Care Leavers Service has meant that there are 35 unallocated cases and 25 UASC cases waiting allocation; paper for increased staffing has been submitted to DMT to try to address this</p> <p>Care offer developed work with District Councils to exempt Care Leavers from Council Tax.</p>	Head of Service Children in Care – Nicci Collins

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13.	Ensure that practice for children who are subject to private fostering arrangements meets statutory requirements and that all staff and partners know how to recognise and notify a private fostering arrangement.	A	<p>Young people under 16 years who are living outside of immediate family, in the line with legislation, are identified and have appropriate plans in place.</p> <p>Measure</p> <p>Increased identification of Private Fostering arrangements</p> <p>Assessments completed in timescale.</p>					<p>Despite sustained work to address this area, numbers remain low. This is a national problem and numbers in other LA's are low. However, the following have been identified to support the work:</p> <p>xxxi) Private Fostering Strategy In place</p> <p>xxxii) Identify Private Fostering champion in Strengthening Families team to work across teams to improve practice</p>	<p>Work has been undertaken to raise awareness across the County and ensure improved identification. March 2018 however there are only 2 new families for assessment.</p> <p>It is noted that the low numbers of private fostering arrangements is a national issue.</p>	Head of Service Children in Care – Nicci Collins
14.	Improve assessment and care planning for children on the edge of care or returning home, or with complex needs requiring a period of intensive intervention (which may include Residential Care) so that it is clear how positive change is to be achieved and sustained.	A	<p>All children on edge of care have a clear plan of action for supporting them at home / in placement.</p> <p>Measure</p> <p>Placement stability rate (3+ placements in the last year)</p> <p>Long term stability - same placement >2 yrs.</p>	8.1%	7.7% (March 2018)	7.5%	7%	<p>As part of our Permanency Campaign we have focussed on strengthening Edge of Care arrangements, and helping returns to birth families. A review of our Edge of Care model and service has been completed and a new model is currently under consideration. Our Dedicated Placements Support Team (DPST) has provided support so that 3 young people remained at home with their parents after previously entering care. Excluding older children who moved to independent living, around 37% of discharges from care have been a return home, which is better than both statistical neighbours and the England average.</p> <p>A review of Strengthening Families role is underway as part of the Care Placement Strategy.</p>	<p>Proposed re-modelling of the offer in Strengthening Families to take place to strengthen the offer to those children and young people on the edge of care is still in progress and has required consultation with staff as this will tie in with changes to other parts of the service.</p> <p>Work across Strengthening Families and Early Help to provide targeted to support families in crisis (Feb 2018)</p> <p>Develop family networks model (SOS training) to identify support by summer 2018.</p> <p>Post Adoption/SGO support in place to reduce the number of family breakdowns leading to re-admission to care; to form part of the Care Placement Strategy</p>	Head of Service Field Social Work – Anita Gurry

Ref.	Ofsted Recommendation	Progress RAG	Targets	Outturn Performance 2016/17	Performance Q4 18 or by month	Target March 18	Target 2020	Evidence of Completion or Evidence of Progress by March 2018	Further Actions in progress	Lead Officer
15.	Comprehensively review the current strategic plan for those young people not in education, employment or training (NEET), to ensure that a higher proportion of care leavers move to sustained education, employment or training.	A	<p>Care Leavers are supported in education, employment or Training.</p> <p>Measure</p> <p>Percentage of care leavers in education, employment and training increases</p>	50.4%	50.7%	52%	55%	<p>The review of the NEET Strategy has been completed and now includes a focus on care leavers. Underpinning actions like the restructuring of the Children in Care Service, access to Information, Advice and Guidance and collaborative work between the Virtual School (Fox Academy) and Leaving Care Team has progressed and the latest Care Leavers in Education, Employment and Training data shows our figure of 50.7% to be higher than statistical neighbours on the back of 3 years of continuously improving rates.</p>	<p>Information, Advice and Guidance Service will not be commissioned externally, but will be managed in-house, enabling greater flexibility of role, providing support for workers who have face to face contact with young people.</p> <p>Training for PAs has taken place and training for carers is scheduled</p> <p>Education Employment and Training (EET) panels to identify those most at risk of NEET are in place and will apportion appropriate support to improve engagement in EET. PAs are better informed and now have access to a wide range of resources, leading to them being better able to support client care leavers to be EET.</p> <p>EET Strategy has been launched and EET panels are calendared</p> <p>Action Plan focussing on vulnerable learners will be launched to include YOS, Teenage Parents and SEN</p> <p>The Leaving Care Team with additional Personal Adviser support is embedded and demonstrates improved pathway planning with young people.</p> <p>First Draft of Apprenticeship Offer to be submitted to the People's Strategy Board May 2018</p>	Head of Service Children in Care – Nicci Collins

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16.	Ensure that when homeless young people aged 16 and 17 need to be accommodated under section 20 of the Children Act 1989 that this is effected without delay.	A	<p>Homeless young people have their needs assessed and if they require section 20 accommodation, plans and support are immediately in place.</p> <p>Measure</p> <p>Regular audits demonstrate compliance.</p> <p>xxxiii) Homeless young people 16-17 have appropriate assessments of need.</p> <p>xxxiv) Young people deemed to be section 20 are provided with support in a timely manner.</p>	QA audit	QA audit	System generated reports show 100%	100%	The protocol to accommodate young people aged 16 and 17 under section 20 is in place and will be reviewed regularly.	<p>Housing Protocol is being reviewed and will be re-launched imminently</p> <p>Management Audit undertaken and findings fed back to ensure learning loop completed</p> <p>Audits currently underway (April/May 2018)</p>	<p>Nicci Collins Head of Service Children in Care</p> <p>Anita Gurry Head of Fieldwork Service</p>

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17.	Ensure that appropriate developmental programmes are in place for experienced and qualified staff, particularly for senior practitioners and first-line managers, and that the assessed and supported year in employment (ASYE) programme is appropriately overseen.	A	<p>The development and embedding of an accredited programme to support social workers at all levels from ASYE through to Senior Practitioners and Team Managers in place. Evidence a strong, stable and well informed professional workforce.</p> <p>Measure</p> <p>Stability of workforce:</p> <p>xxxv) Turnover rate of staff (FTE) 12.4</p> <p>xxxvi) Number of qualified social workers 215.5</p> <p>xxxvii) Vacancy rate 6.1</p> <p>xxxviii) Number of agency staff 12</p>			Figures released November 18		<p>The Social Work Steering Group has been re-established and targeted support to ASYE workers began in December 2016. A review of the current learning and development offer for the department is underway to inform a revised offer linked to the knowledge and skills framework for social workers.</p> <p>The next planned Social Work Conference is June 2018 and any information on the reforms and developments will be presented to staff. The conference will show case good practice.</p> <p>Practice Development Group has been working to ensure that practice is being developed and shaped.</p> <p>The Core Offer for SW's and Managers has been developed in conjunction with Learning and Development and future work will focus around leadership as well as the development of an induction programme</p> <p>Development of Front-Line within CSC will be established September 2018.</p>	<p>Launch consultation on a new social work progression pathway.(April 2018) consultation has taken place with managers and the union in relation to this</p> <p>Legislation April 2017 – still awaiting Government guidance.</p> <p>Development of a robust professional gateway via a progression process and panel arrangement.(September 2018)</p> <p>Using the theme of 'neglect', pilot a learning and development cycle called the 'learning loop', led by the Advanced Practitioners.(September 2018)</p> <p>Learning session took place in relation to the theme of 'neglect' and work also disseminated through SMT Action Log</p> <p>Agree proposal on 'grow your own' Social Worker approach as part of a Recruitment and Retention Strategy (Nov 2017)</p> <p>Development of Front-Line Social Work as part of the work in relation to recruitment and retention.</p> <p>Develop a central repository to hold good practice. (Jan 2018) This has been developed through the Learning Zone as a resource for all staff</p>	Head of Service Practice Excellence – Moira O'Hagan

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