



**CHILDREN AND FAMILIES OVERVIEW AND SCRUTINY**  
**COMMITTEE – 5<sup>th</sup> NOVEMBER 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. The purpose of this report is 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 has previously received a copy of the Ofsted Continuous Improvement Action Plan, developed following the Ofsted inspection. A progress report was presented at its meeting on 4 June 2018.
3. The Committee had requested that an update on the progress made against the 17 Ofsted recommendations be presented in November 2018, and that the report should focus on the areas of challenge that impact on progress of the OCIAP. 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) 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:
  - Being a Learning Organisation
  - Embedding Excellent Practice
  - Taking the Right Action at the Right Time
  - 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. The ratings provide a judgement of what evidence exists to demonstrate the departmental response to a recommendation. This evidence is largely taken from performance, business intelligence data and findings from quality assurance audits that are used together to monitor the progress of the OCIAAP alongside staff input.
7. The recommendations vary in scale and scope and therefore some areas, especially those that started at a lower baseline, require longer timescales to produce demonstrable evidence of improvement. This was the reason for a 4 year plan to drive improvement. Progress is monitored via a weekly senior managers meeting and a monthly meeting of senior and middle managers that is chaired by the Assistant Director (Children's Social Care).
8. The summary of ratings is:
  - 11 recommendations are rated Green
  - 6 recommendations are rated Amber. The challenges to progress against these are detailed later in the report.
  - 0 recommendations are rated Red
9. Progress is being made against all recommendations. Most significant progress is against the 11 recommendations that are now green. In summary progress is showing that :
  - Performance data and reports are being actively used by managers across the service to drive service improvements.
  - An Independent Review of First Response took place in May 2018 and the report reflected that thresholds at the 'front door' are well understood and are appropriately applied by staff within Children's Social Care. The report also set out that assessments are timely in completion but that further work is needed in relation to the quality of assessments. Work has been undertaken in respect of quality of assessments and an action plan formulated to address the identified areas. Audit and independent validation is seeing progress in this area.
  - First Response was subject to an Ofsted Focused Visit in October 2018. The outcome from this will be published in early November 2018.
  - Performance management, audit and quality assurance work shows that thresholds are understood by CSC. Timeliness of allocations and robust decision making is evident. Children at risk are responded to promptly and appropriately and there is an improving picture about the timeliness and appropriateness of action taken for Children in Need. Clear action plans are in place to further strengthen this area of work. Progress is evident in the reduction in repeat Child Protection Plans and the increase in permanence plans in place by the second Looked After Children Review.
10. Some examples to support this are :

- Repeat Child Protection Plans (CPP) beginning in September decreased to 8.1% within the month with, 3 of 37 children having previous plans. Year to date in 2018/19, 16.5% of plans beginning were repeat plans, compared to 24.0% for 2017/18.
- 94% of child protection cases were reviewed within timescales and whilst this is a slight deterioration from previous performance of 95.8% it remains above the performance of statistical neighbours (89.1%).
- The percentage of children subject to CPP that had been visited within the past 4 weeks was 90.7% at the end of September, an increase from 75.5% reported for the previous month.
- Children in care with three or more placement moves is 8% at September 2018, and places Leicestershire in the top quartile for placement stability. This demonstrates that more children are living in stable placements.
- Care Leaver measures at the end of September show that the Council is in touch with 94.6% compared to 93.4% of young people at the end of July 2018.
- The percentage of Care Leavers in Education, Employment or Training is 55.7% (134 young people); this is an improving picture and places Leicestershire into the second quartile in comparison to other local authorities. (The statistical neighbour percentage is 47%).

### **Amber Actions**

11. Six of the actions remain an amber RAG rating. Due to the fact that the recommendations vary in scale and scope, some areas require longer timescales to produce demonstrable evidence of improvement.
12. Full detail on the work being undertaken on the amber areas is contained in Appendix A but is summarised as follows:
  - Further development is required in reporting tools to support performance management
  - Full embedding of supervision policy and consistency in meeting standards for supervision requirements
  - Work to improve the consistency in quality of assessments and plans
  - Further work is required to embed practice for care leavers
  - Work is underway to redesign field social work teams in order to deliver a whole service approach to improve assessment and care planning for children.

### **Challenges to progress**

13. Whilst progress on the action plan is good, recruitment and retention of social workers remains the key area of challenge. Staff turnover, delays in getting permanent staff into post and over reliance on agency staff places additional pressures on service areas. This can result in higher than planned caseloads and can lead to children, young people and their families experiencing too

many changes of Social Worker. This adds pressure on front line managers and their ability to drive and embed the changes the department is making. In all of the areas identified above as amber, progress is being made. However, in order to deliver and embed practice the department needs a stable workforce at full capacity. For this reason the Recruitment and Retention Strategy is key to the continuous improvement plan.

14. Work on the Recruitment and Retention Strategy has been detailed in a separate report to the Committee. Following the Ofsted inspection in 2016, the department was given additional resource to increase its staffing capacity (37 additional posts), many at social work level, to support the continuous improvement journey. Whilst positive this has resulted in more recruitment activity over the last 12 months in order to recruit permanently to all of these posts. To give momentum to the OCIAP agency staff have been engaged during this period. It is hoped that as these changes become embedded over the next 12 months the benefits of the Recruitment and Retention Strategy will be seen more widely.
15. The department has recruited to over 30 Social Work posts this year, although the majority of these are ASYE (newly qualified social workers). Due to the enhanced support in the ASYE year and reduced caseloads the department is currently employing more agency staff, above establishment, to support newly qualified staff. This will ensure they get the best possible start in their professional career and that the children and families receive good services.
16. Currently (October 2018) there are 37 vacancies across the service that are actively being recruited to. There is 49 agency staff covering the vacancies, a number covering maternity and long term sickness, and additional capacity to support ASYE. Active recruitment continues and some agency staff choose to take up permanent posts with the County Council.

### **Consultations**

17. 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**

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

### **Timetable for decisions**

19. Not applicable.

### **Conclusion**

20. 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>

## **Circulation under the Local Issues Alert Procedure**

None

## **Equality and Human Rights Implications**

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

## **List of Appendices**

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

## **Officer(s) to Contact**

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

Ref.	Ofsted Recommendation	Progress RAG	Targets	Outturn Performance 2016/17	Performance Q4 18 or by month	Target March 18	Target March 2020	Evidence of Completion or Evidence of Progress by September 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><b>Measure</b></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 &amp; 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 Briefing September 2018 giving clear guidance on roles and responsibilities in relation to driving performance. Use of Tableau is increasing.</p> <p>Group established, initially chaired by AD (CSC) and now by the Head of Children in Care is progressing system generated reporting for Fostering &amp; Adoption. Although progress is being made not all reports are yet system generated.</p>	<p>Weekly meeting 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>Data KLoE meetings are being re-introduced fortnightly to address performance and data quality issues. Each meeting focuses on a specific element of the service, e.g. contacts, assessments, LAC etc.</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 March 2020	Evidence of Completion or Evidence of Progress by September 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.	<b>A</b>	<p>Case decision processes consistently demonstrates robust management oversight. Evidence of good clear plans for children.</p> <p><b>Measure</b></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% monthly (Sept 18)	Dec18 83%	83%	<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 Sept 2018; 84% in relation to Children's Social Care with 75% having met the standard for 10 supervisions or more in a 12 month period</p> <p>Refreshed Supervision policy completed and will be formally launched, followed by training in December 2018. This will be delivered by Research in Practice.</p> <p>Thematic Audit in respect of CSE/Missing showed that 42% met good or above (13 out of 31 cases) and 58% (18 out of 31 cases) showing that management oversight needed to be enhanced. Follow up action takes place to ensure that any actions that don't meet good or outstanding are addressed by managers. Positive to note that the feedback from children/young people and their families was excellent; practice noted as making a difference. Action Plan devised with Practice Excellence Team to address areas for development</p> <p>Learning programme for Senior Practitioners and Team Managers to develop supervisory skills and competence will be delivered by Research in Practice in December 2018.</p> <p>Fidelity to SoS have targeted workshops on key elements of SoS, the team provide case consultations and support the running of PODs, with a focus on First Response.</p> <p>Key Decision Discussions implemented and embedded across localities to improve management oversight of complex cases.</p> <p>Cases audited in First Response with a particular focus on management oversight and decision making, reflect that progress is being made. Independent review of First Response reflected that decisions were appropriate. This was evidenced in the Ofsted Focused visit as appropriate.</p>	<p>Additional work required within MOSAIC to enable monitoring of supervisions through Tableau reports is in progress. (Dec 18)</p> <p>Reflective Supervision &amp; management oversight is part of the core offer for Senior Practitioners and Team Manager – Aspiring Managers Programme launched to begin January 2018.</p> <p>To launch of the Supervision with Research in Practice in November 2018</p> <p>Management oversight remains a key part of all auditing activity</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> <ul style="list-style-type: none"> <li>Assessed &amp; Supported Year in Employment 12 – 15</li> <li>Senior Practitioner 12 – 15</li> <li>Social Worker (full time) 18 - 20</li> </ul> <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><b>Measure</b></p> <p>Monthly performance returns show that caseloads are within the numbers above.</p> <ul style="list-style-type: none"> <li>Assessed &amp; Supported Year in Employment 12 – 15</li> <li>Senior Practitioner 12 – 15</li> <li>Social Worker (full time) 18 - 20</li> </ul>		21 June 2018			<p>The average number of cases per social worker has ranged from 17 to 19 cases since January 2017. However as of June 2018 this has risen to 21 with some outliers at 30+. Agreed additional capacity will further address this. In September the average caseload was 19, First Response caseload was 22.</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>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 Strategy sign off at DMT June 2018. Market premium has been agreed for key posts and now in relation to Level 3 Social Workers.</p> <p>September saw the introduction of 2 new peripatetic social workers to the CiC Service, to enable transfer of cases from CP Service and manage caseloads.</p> <p>Capacity issues in the UASC team are being investigated.</p> <p>Recruitment ongoing with additional business support resource to support the recruitment process.</p> <p>Front-Line Social Workers recruited and in post September 2018.</p> <p>The newly enhanced ASYE programme is in place and will support those new ASYE staff who took up post during the Summer; new mentoring arrangements in place to support the development of practice.</p> <p>Social Worker Career Progression Handbook agreed and new panels being set up to address staff moving from Level 2 – Level 3.</p> <p>31.5 new social workers have been recruited and will be supported through induction and learning hub together with Practice Excellence Team.</p>	<p>There are still a higher than anticipated number of agency staff – retention remains a key priority and a key challenge to the improvement challenge.</p> <p>Monthly reporting to senior management team on caseloads will continue to ensure robust oversight and resolution.</p> <p>Embedding the recruitment and retention strategy</p>	Assistant Director Children's Social Care – Sharon Cooke



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4.	Review processes operating in the First Response Service to ensure the accurate recording of contacts, referrals, assessments and their timeliness.	<b>G</b>	<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 2018.</p> <p><b>Measure</b></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"> <li>Referrals – manager 24 hour decision – 100%</li> <li>Re-referral rate</li> <li>Assessments completed in 45 days</li> </ul>					<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"> <li>the accurate recording of contacts and referrals</li> <li>good quality assessments delivered in timely manner.</li> </ul> <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>Ofsted completed dip sampling during the Focus Visit in October 2018 which showed compliance with 24hour referral decision making</p> <p>The independent review of First Response reflected that thresholds and decision making appropriate.</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 in draft and being updated.</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>An Independent review of First Response took place in May 2018 and there is now a plan of work with First Response from Sep 18 to Feb 19 focused on improving the quality of assessments and embedding Signs of Safety.</p> <p>Impact Boards in teams with learning and quality messages in place since February 2018 and managers are positively encouraged to reflect on the impact of practice.</p> <p>Work in First Response to embed and evidence SOS is in progress (June 2018)</p> <p>Plans are progressing to re-locate the OOH team to Police station.enhance services to ensure we are supporting the right people at the right time.</p>	<p>Work on the development of an integrated multi-agency front door has been impacted upon by changes within other agencies.</p> <p>Based on the outcomes of the Ofsted focused visit the service Plan is being revised to address areas for improvement</p>	Head of Service Field Social Work – Anita Gurry

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5.	Ensure that practitioners and managers understand and apply thresholds appropriately at every stage of the child's journey.	<b>G</b>	<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><b>Measure</b></p> <p>Performance shows a low number of:</p> <ul style="list-style-type: none"> <li>• Re-referrals</li> <li>• Repeat CP plans</li> <li>• Permanence plan in place / CIC by the second review – 100%</li> </ul>	17% ( 25% Q2 )	30.6% Sept 2018	22%	22%	<p>The application of appropriate thresholds is generally monitored through repeated social care involvement and case file audits.</p> <p>Transition Oversight and Planning Meeting – Early Help to Social Care looking particularly at threshold issue and resolution of the right plan for the child – has supported securing consistently and thresholds which has resulted in a decrease of referrals to EH and an increase to Strengthening Families</p> <p>Case Decision Meeting for decisions around Public Law Outline, Care Proceedings and revised Permanence Panel all implemented January 2018</p> <p>Independent Review of First Response May 2018 showed that threshold decisions are appropriate</p> <p>The proportion of repeat child protection plans to date is just under <b>16.5%</b> year to date.</p> <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>Discharge from care at the end of Sept: 78</p> <p>40 new permanence decisions made since January 2018, with 70 resource decisions (packages of support such for emotional wellbeing) agreed.</p> <p>Implementation of Child's journey panels in January 2018</p> <p>Introduced new procedures and guidance for panels and achieving permanency</p> <p>Development of performance report in relation to permanence.</p> <p>Practice Summit completed with Managers promoting understanding of emotional permanence.</p>	<p>Review of Threshold Document – September 2018 and partners through the LSCB are engaged (ongoing piece of work partners)</p> <p>The rate of re-referrals in September 2018 is 30% and is showing fluctuating performance. In depth work continues to address this.</p> <p>Permanence Summit for SW's to promote understanding of permanence has been planned (April 2019)</p> <p>Agree Service Improvement actions arising from Agency Decision Maker's permanence report (April 2019)</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.	<b>A</b>	<p>Performance reports evidence consistent use of:</p> <ul style="list-style-type: none"> <li>• chronologies,</li> <li>• assessment,</li> <li>• outcomes focused plans</li> </ul> <p><b>Measure</b> 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 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>A recent audit in First Response demonstrated that progress is being made in the number of cases having assessments graded good overall.</p> <p>Chronologies and quality of plans are being audited currently as part of the themed audits running from May to June and all teams were given a deadline by which to complete chronologies. The impact of chronologies has been seen in relation to the uplift of care plans and subsequent decision making</p> <p>Following the independent review of First Response, workshops have taken place in relation to the need to complete quality assessments which inform SMART Planning – June 2018 and work will be continued by Practice Excellence Team</p> <p>New assessment and SMART Child's Plan format developed and launched</p> <p>Social Work Conference took place in June 2018 with a focus on improving practice; getting it right for children and a review of components of good practice</p>	<p>SOS in Mosiac has been purchased and forms will be implemented in a staggered approach starting from November 2018 aiming to complete April 2019</p> <p>Undertake quality assurance to ensure that the Practice standards are supporting improved quality of assessments across the service.</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 planned for November 2018</p>	<p>Head of Service Field Social Work – Anita Gurry</p> <p>Head of Service Safeguarding, Improvement &amp; Quality Assurance – Chris Nerini</p>

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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.	<b>G</b>	<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><b>Measure</b></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"> <li>○ Average <b>days</b> from entering care to adoption being less than the statistical neighbour</li> <li>○ Average of <b>days</b> from court authority to place a child and the decision to match being less than the statistical neighbour</li> </ul>	<p>manual</p> <p>8.1%</p> <p>69.3%</p>	<p>Reviewed manually</p> <p>80.5%*</p> <p>8% (Sept 18)</p> <p>69.1% (Sept 2018)</p> <p>457 days Sept18</p> <p>170 days Sept 18</p> <p>* figure being verified</p>	<p>100%</p> <p>95%</p> <p>7.5%</p> <p>69.3%</p> <p>515</p> <p>193</p>	<p>100%</p> <p>100%</p> <p>7%</p> <p>68.5%</p> <p>514</p> <p>192</p>	<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"> <li>- Refreshed CiN guidance has been published. A process to alert of drift and delay on Child Protection cases has been established</li> <li>- Child's Journey Guidance and Panels implemented January 2018 to ensure earlier planning and permanence and the avoidance of drift</li> </ul> <p>A rolling programme of case reviews is underway. Performance indicators for permanence show improved performance:</p> <p>Permanency is a part of the service training and support offer to all social workers.</p> <p>Pilot in Loughborough has been established looking at raising the quality of Child permanence reports</p> <p>Permanency is a strand of the Growing Quality campaign for 2017/18 as well as within the Departmental Plan</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>	<p>The Permanence team pilot launched at the beginning of September and will be evaluated in January 19. If successful, the Permanence Team's remit will be expanded to cover permanence reports for all children. Next steps to improve sufficiency in permanency includes:</p> <ul style="list-style-type: none"> <li>• Establish a dedicated adopter assessment team</li> </ul> <p>Transfer of post 3yr adoption support to the Adoption Team (agreed by DMT)</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.	<b>G</b>	<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><b>Measure</b></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	78.5% of LAC scored 16 or less	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 <b>8%</b> (top quartile). The work of DPST includes:</p> <ul style="list-style-type: none"> <li>○ 7 young people remaining in their current placement with intervention from support workers in the team</li> <li>○ 3 young people remaining at home with their parents after previously entering care</li> <li>○ 33 independent visitors being matched with young people in care</li> </ul> <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 &amp; 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> <ul style="list-style-type: none"> <li>○ Reduced waiting times for emotional support to the child and carer. Completion of specialist assessments to inform care planning, contributing to placement stability.</li> </ul> <p>78.5% of our LAC children are achieving an SDQ score of 16 or lower. 46% of LAC children achieving scores of 17+ were referred on to CAMHS (Sept 18)</p> <p>Revised CAMHS Offer 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 and is now in place</p> <p>In addition an improved offer for post Adoption and SGO support has been implemented and the qualitative data on feedback from SGO and Adoptive carers is very positive</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> <p>Monthly Operational Group in place with Health and LLR; Business Support to ensure improved performance is paying dividends and making a difference</p>	<p>Work is underway in relation to emotional well-being and joint working with health; young people to be included</p> <p>There have been increased LAC numbers now at <b>586 in Sept.</b> Weekly Placement Meetings are now held to oversee the allocation of foster placements.</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.	<b>G</b>	<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><b>Measure</b> 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 (up to Sept18</p> <p>LAC: 90% RI's offered to YP</p> <p>Non LAC: 100% RI's offered to YP</p> <p>Total for LAC and non LAC: 97.5% RI's offered to YP</p>	<p>Q3 data for Leicestershire children</p> <p>LAC: 24 individuals. 90 % RI's completed.</p> <p>Non LAC: 39 individuals 95% RI completed</p> <p>Total for Lac and non LAC : 100% of those MFH July and August had a RTI = 84 children</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> <ul style="list-style-type: none"> <li>○ The AD receives weekly reports on all missing young people and completed return home interviews. Any necessary action is taken.</li> <li>○ a standard letter from the Director has been devised. This is sent by the AD to any LA who do not meet their responsibility</li> <li>○ improved protocols for children that go missing more than 3 times in a 90 day period have been tightened.</li> <li>○ monitoring of children who go missing has been refreshed to better inform risk management and shared intelligence.</li> <li>○ the Missing policy and procedures have been updated on the LSCB website and promoted at a number of large events.</li> <li>○ Monthly reports provided for Lead Member who provide challenge to work completed</li> <li>○ programme oversight by the CSE and Trafficking Operation Group</li> </ul> <p>Work 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>Thematic Audit of CSE/Missing Cases took place May – June 2018 and as a result an action plan has been devised; components of which include joint working between CSE/Missing Service and Locality Teams and evidence of implementation of Practice Standards</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.</p> <p>Continue work to address completion of return interviews with children placed in LCC by other LA's (ongoing).</p> <p>There is more detailed analysis of trends and patterns for children missing under development in order to support intelligence around other forms of child exploitation e.g. gangs, county lines.</p> <p>We are working regionally on agreeing criminal exploitation standards</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 March 2020	Evidence of Completion or Evidence of Progress by September 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.	<b>G</b>	<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><b>Measure</b></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.</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 - this is now complete</p> <p>All Cases held within DCS are allocated to a SW and reviewed within agreed timescales</p> <p>All cases meeting the threshold for Early Help have been stepped down to Early Help. 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 have been stepped down to Early Help as of July 2018.</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&amp;F and have had the opportunity to shadow colleagues in First Response. DCS SW work to the Practice Standards used within Children's Teams</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>	The DCS Service Manager is leading key work around auditing and learning from the reviews will be incorporated into the DCS service plan and implemented through the cycle of service and team meetings, individual supervision, CPD and other workshops.	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 March 2020	Evidence of Completion or Evidence of Progress by September 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.	<b>G</b>	<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><b>Measure</b></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, <b>45</b> young people were discharged from care onto an SGO, an increase of 29 when compared to the point of inspection. <b>25</b> have been discharged to SGO since January 2018 to June 2018</p> <p>Feedback has been sought from adopters and SGO carers in receipt of services from the Permanence Team to evaluate the impact of the first 6 months of implementation of the new offer. The carer voice has been overwhelmingly positive.</p> <p>Post-adoption and SGO 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>All SGO places have support plans in place, this has been evidenced through management oversight and manual audit completed by Team Manager which shows plans in place. Further audits required to ensure consistently good quality.</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>A micro-site to support SGO's has been commissioned from Family Action and has been implemented.</p> <p>Recruitment to Special Guardianship Order Social Worker and Support Worker has been successfully completed. Consideration is being given to the transfer of the supervising Social Workers for Kinship Carers to the Team Around the Child to ensure equality of service</p>	<p>An audit is scheduled to take place in relation to Kinship Care, SGO and adoption support plans. The first audit was completed looking at the quality of reviews for Kinship Carers. A range of improvement activity is now underway, as an outcome of this audit. SGO support plans quality audit is planned for November 2018.</p> <p>The updating of the Adoption website updated with new material is in progress – the recruitment element is completed. Support information will be uploaded by January 2019. The Virtual School have also launched a new website which includes information for previously LAC.</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 March 2020	Evidence of Completion or Evidence of Progress by September 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><b>Measure</b></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>*</p> <p>90.8% (Sept 18) ~</p> <p>94.6% (Sept 18) ~</p> <p>~ data updated mid-Oct 18 to capture recording backlog</p>	<p>95%</p> <p>92%</p> <p>90%</p>	<p>100%</p> <p>95%</p> <p>90%</p>	<p>Care Leavers in Education, Employment and Training data shows 55.7% and those in Suitable Accommodation (90.8%) have sustained performance.</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"> <li>In contact no longer has to be with the PA can be another professional</li> <li>Care Leavers who refuse contact</li> <li>It not being based on full year figure but 2 months before and 1 month after the birth date.</li> </ul> <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"> <li>Setting parameters of the 'In contact' report and this is running well</li> <li>Ensuring data is accurately recording in Mosaic (ensuring staff have clear instructions)</li> </ol> <p>Pathway Plans are now completed and the latest figure of 80.5% shows improvement. Care Plans are recorded separately.</p> <p>New duties on Care Leavers Service have been addressed following a paper to DMT and additional resources being agreed; all cases allocated.</p> <p>Care offer developed work with District Councils to exempt Care Leavers from Council Tax. The Care Leaver Team has started a 3 month program of consultation with staff, partners and young people to map the priority areas of the offer that require development. The mapping will cover 4 areas including economic stability, health, emotional wellbeing and suitable accommodation. The first mappings will be available in Dec 18.</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.	G	<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><b>Measure</b></p> <p>Increased identification of Private Fostering arrangements</p> <p>Assessments completed in timescale.</p>		YTD 2018: 3 PF assess. underway/complete			<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> <ul style="list-style-type: none"> <li>○ Private Fostering Strategy In place</li> <li>○ Identify Private Fostering champion in Strengthening Families team to work across teams to improve practice</li> </ul> <p>Work has been undertaken to raise awareness across the County and ensure improved identification. However as of Sept 2018 there were still only 4 children open for assessment.</p> <p>The service has sent leaflets to all schools and GP practices in the county and all private schools in the City. By September 18, despite the distribution of 7000 leaflets and the use of professional networks, the Private Fostering numbers remain low.</p> <p>There is a continued commitment to meeting regularly to review Private Fostering with the next being set for the latter part of October.</p>	<p>It is noted that the low numbers of private fostering arrangements is a national issue.</p> <p>There is a Planned programme of awareness rising with Six monthly progress reports presented to SMT</p>	Head of Service Children in Care – Nicci Collins

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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><b>Measure</b></p> <p>Placement stability rate (3+ placements in the last year)</p> <p>Long term stability - same placement &gt;2 yrs.</p>	8.1%	8.5% (Sept2018)	7.5%	7%	<p>There is agreement for the proposed re-design of localities to be implemented from 29<sup>th</sup> October 2018.</p> <p>As part of our Permanency Campaign we have focussed on strengthening Edge of Care arrangements, and helping returns to birth families. A new proposed model for Edge of care services is in place with 4 new strands for edge of care services being developed.</p> <p>Our Dedicated Placements Support Team (DPST) has provided support so that 3 young people remained at home with their parents after previously entering care. During the months of May, June and July <b>26</b> children returned home.</p> <p>Work across Strengthening Families and Early Help to provide targeted to support families in crisis (Feb 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> <p>Develop family networks model (SOS training) to identify support by summer 2018.</p>	Strengthening families and CP services under the re-design will form children and families services rather than to separate child protection and children in Need. This is to deliver a whole-service approach and to have a strong skill mix to ensure improved assessment and care planning for children. With a dedicated service to support children on the edge of care	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 March 2020	Evidence of Completion or Evidence of Progress by September 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.	G	<p>Care Leavers are supported in education, employment or Training.</p> <p><b>Measure</b></p> <p>Percentage of care leavers in education, employment and training increases</p>	50.4%	55.7% (Sept 18)	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 <b>55.7%</b> to be higher than statistical neighbours on the back of 3 years of continuously improving rates.</p> <p>Apprenticeship Offer was submitted to the People's Strategy Board May 2018 and was agreed. There are now 2 Care Leavers who have successfully secured apprenticeships.</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>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 which is showing improved performance</p> <p>The Leaving Care Team with additional Personal Adviser support is embedded and demonstrates improved pathway planning with young people.</p>	<p>Training for PAs has taken place and training for carers is scheduled</p> <p>Action Plan focussing on vulnerable learners will be launched to include YOS, Teenage Parents and SEN</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.	G	<p>Homeless young people have their needs assessed and if they require section 20 accommodation, plans and support are immediately in place.</p> <p><b>Measure</b></p> <p>Regular audits demonstrate compliance.</p> <ul style="list-style-type: none"> <li>Homeless young people 16-17 have appropriate assessments of need.</li> <li>Young people deemed to be section 20 are provided with support in a timely manner.</li> </ul>	QA audit	QA audit	System generated reports show 100%	100%	<p>The protocol to accommodate young people aged 16 and 17 under section 20 is in place and will be reviewed regularly.</p> <p>Housing protocol has been reviewed and is in final draft awaiting sign off incorporating new duty to refer homeless.</p> <p>Management Audit undertaken and findings fed back to ensure learning loop completed as a result further research has been completed to look at 16/17 provision and the quality of support offered.</p> <p>Reviewed and refreshed direction to staff with regards to the need for single assessments undertaken and where appropriate s20 accommodation offered to those meeting criteria.</p>	Yearly audit to be undertaken to ensure good practice	<p>Nicci Collins Head of Service Children in Care</p> <p>Anita Gurry Head of Fieldwork Service</p>
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.	G	<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><b>Measure</b></p> <p>Stability of workforce:</p> <ul style="list-style-type: none"> <li>Turnover rate of staff (FTE)</li> <li>Number of qualified social workers</li> <li>Vacancy rate</li> <li>Number of agency staff</li> </ul>	12.4	215.5	6.1	12	<p>Figures released November 18</p>	Figures released November 18	
								<p>A refreshed ASYE programme is in place, with a handbook for workers and managers developed.</p> <p>Career progression pathway launched for social workers at Level 2.</p> <p>New programme for aspiring managers developed and will run from January 2019.</p> <p>Department continues to grow its good relationship with learning and development service ensuring robust programme of learning in place for all staff.</p> <p>Development of a robust professional gateway via a progression process and panel arrangement is in place (September 2018)</p> <p>Learning sessions take place monthly with managers across children's social care providing tools and resources for them to take back to their teams on specific subjects e.g. neglect county lines, planning etc.</p> <p>3 annual conferences per year now established aimed at developing services for children and young people across the department and celebrating and sharing good practice.</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> <p>Recruiting aspiring managers and new first time managers for the aspire course starting in January 2019</p> <p>Review of ASYE programme following completion of first year of programme.</p> <p>New routes into social work developed – 6 social work apprenticeships have been offered to non-SW staff which will begin in January 2019.</p> <p>4 Participants in the Front-Line scheme will qualify in August 2019</p>	Head of Service Practice Excellence – Moira O'Hagan

