



London Borough of Barking & Dagenham

Single Inspection of Services for children in need of help and protection, children looked after and care leavers

LA ACTION PLAN

Barking and Dagenham's OFSTED action plan in response to the Inspection of Services for children in need of help and protection, children looked after and care leavers (May 2014)

Area for Improvement (1): Ensure that sufficient checks and enquiries are undertaken before any unplanned removal of children from their families. This concerns the exercise of police powers of protection. This was an area for improvement in the last inspection.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement
1.1	Ann Graham	Teresa De Vito	May 2014 to March 2016	Improved checking of all information and enquiries undertaken before removal of children. 100% of PP cases audited monthly - learning shared with police colleagues and social care staff.	In place. Every PP case has been audited by our QA Manager since April 2014. The audits have demonstrated improved checks and enquiries being undertaken before any unplanned removal of children.
1.2	Ann Graham	Beverley Hendricks	July 2014	Significant reduction in Police Protection (target is 20% reduction in PP numbers by March 2015). Emergency Protection Orders (EPO) more readily accessible with legal advice.	Completed. The Police Protection Strategy and Protocol have been revised and signed off with Police and Social Care. The impact of these are monitored via the monthly joint strategic meetings with Borough Police, CAIT and Social Care, which have all taken place on schedule with representation of CAIT at every meeting.
1.3	Tony Kirk Kevin Jeffrey	Beverley Hendricks	From July 2014	Protocol agreed. Audits demonstrate Police contacting social care at the earliest opportunity.	In place. Joint training with the police has taken place as part of MASH development. In addition, monthly meetings with the out of hours service also takes place. We are also commissioning Family Support resource to assist out of hours and borough police to reduce the 'risk' and alleviate the need for accommodation or execution of PP.
1.4	Ann Graham	Vikki Rix	Oct 2014		Completed. Police Protection and EPO numbers and trends are now included in the quarterly safeguarding triggers performance report and discussed in meetings with Lead Member, Chief Executive, DCS and Divisional Director of Complex Needs and Social Care. Impact. Good progress has been made with a reduction in PP numbers in the borough. Police Protection numbers from April to September 2014 total 33, representing 31% of all those entering care. This compared to 64 at the end of September 2013 (41% of all those entering care entering on PP). Our target is a 20% reduction in use of police powers by March 2015. Based on current numbers, we cannot have more than 5-6 PPs each month.
1.5	Ann Graham	Teresa De Vito Vikki Rix	Quarterly (review March 2016)		On track. Q1 2014/15 report was presented to the LSCB PQA Committee in September 2014. Q2 report will be presented to the LSCB in December 2014. This report will provide audit findings and recommendations in addition to numbers and trends, which are reducing. In addition, London wide discussions on increases in PP are taking place through the London Safeguarding Boards and London Divisional Directors of Children's social care meetings.
1.6	Cllr John White	Helen Jenner	Jan 2015		Due January 2015.

Area for Improvement (2): Improve the quality of referrals to children's social care by partner agencies to ensure that timely and appropriate decisions are based on all relevant information.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement	
2.1	DCS and LSCB Chair to write to all partner agencies reminding them of the importance of good quality referrals to social care, which should include all relevant information of the family and clearly identify concerns.	Helen Jenner Sarah Baker	Teresa De Vito	Nov 2014	More detailed information on the family and identified concerns and improved quality of referrals leads to improved assessment quality and timescales and full range of issues identified.	Letter will be drafted once guidance on completing the MARF is produced. This will be sent out along with the letter from the DCS and Chair of LSCB reiterating the importance of good quality referrals. The letter, guidance and MARF to be placed on LSCB website.
2.2	Produce guidance and training on completing the new Tri-Borough Multi Agency Referral Form (MARF) across partner agencies and ensure good quality information is included and distributed to partner agencies. MASH to check for compliance and quality. Place on LSCB website.	Ann Graham Meena Kishinani	Beverley Hendricks Teresa De Vito	Nov2014	100% of all referrals by partner agencies include all family details and concerns identified by April 2015. % of re-referrals remains below 15% and lower than benchmarks (25%) by April 2015.	On track. MASH is checking for compliance and quality. MASH is feeding back to referring agencies on quality of information provided and escalating when all family details not included on the referral. New Tri-Borough (LBBB, Redbridge and Havering) Multi Agency Referral Form (MARF) has been produced and agreed - to be distributed at the MASH launch in November 2014. MASH will lead on the consultation and twice yearly outreach programme targeting schools, midwifery, health visitors, housing and voluntary sector covering MARFs and good quality referrals. Dedicated officer appointed to commence outreach work effective from November 2014. Multi-Agency Audits twice yearly on the quality of social care referrals. Periodic report to BDSCB.
2.3	Train Child Protection Leads in schools on completing MARFs demonstrating what good quality looks like (see 2.1).	Meena Kishinani	Teresa De Vito	Dec 2014		On track.

Area for Improvement (3): Ensure that child protection strategy discussions are focused on all children in families, are clearly recorded, have engagement from all relevant agencies and identify clear and achievable outcomes.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement	
3.1	Produce and implement practice standards for all social care managers and key partner agencies and ensure that all practitioners have London Child Protection (CP) procedures on desktop. Implement and monitor for compliance and quality of recording.	Ann Graham Meena Kishinani	Beverley Hendricks Teresa De Vito	Oct 2014	Audits of CP strategy discussions/meetings show improved recording, better information exchange, better attendance and quality of discussion, information received in a timely manner, clear rationale for decisions and timescales for action. Information fed back to LSCB.	On track - a local set of practice standards is being produced. Due for completion end of October 2014.
3.2	Ensure, where appropriate, multi agency "sit down" child protection strategy meetings with partner agencies takes place to improve engagement and decision making of all relevant agencies.	Ann Graham	Beverley Hendricks	Ongoing	<u>Baseline</u> - the baseline will be confirmed by case file audits from October 2014. Case audits show standard of strategy discussions are less variable, focused on all children, clearly recorded with outcomes.	In place. Practice Managers are holding sit down multi agency strategy discussions as the case determines. The issue of working with CAIT re: capacity challenges remain.
3.3	Undertake quarterly audits of child protection strategy discussions - audit for compliance and quality. Report to Practice Development and Outcomes Group and follow up with practitioners.	Meena Kishinani	Beverley Hendricks TMs in CN&SC	Oct 2014 Quarterly	Attendance at ICS refresher training monitored. Non-attendance escalated to senior management. Performance reports show improved ICS recording on CP screens including timeliness and outcomes.	On track. Quarterly audit of CP strategy discussions has commenced with report to be completed by end of October 2014. Baseline to be produced and milestones and targets to be set.
3.4	Provide ICS refresher training on recording child protection strategy discussions for all team managers and practice managers in social care.	Meena Kishinani	Dan Monahan	Dec 2014		On track. Easy to use ICS screenshots have been re-circulated to managers and practitioners to support better recording of CP strategy discussions. Refresher training for all managers is being scheduled into the ICS training programme and this training is mandatory.

Area for Improvement (4): Ensure that all key information is shared and considered at initial and subsequent child protection conferences through regular attendance by all key agencies.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement	
4.1	Increase levels of performance reporting on CP conference attendance and timeliness of sharing conference reports by agency, escalating poor performance at PQA sub group of LSCB, LSCB quarterly meetings and HWBB (GP attendance) and Children's Services DMT.	Meena Kishinani	Teresa De Vito	Quarterly 2014/15	Improved attendance at Conferences (particular focus on CAIT and GPs). Child Protection Conferences have full information (particular focus on CAIT and GPs). Improved timeliness on sharing of all conference reports. <u>Target</u> - % attendance and sharing report Attendance performance tracker for LSCB reports attendance increasing to 50% and sharing reports (when no attendance) to 100% by April 2015.	In place. Performance reports related to attendance at CP Conferences and sharing reports are established and data is shared at BDSCB. This report will be presented at every BDSCB meeting rather than quarterly in order for the Board to escalate poor performance. The September Board meeting discussed this in detail and this remains a performance and capacity issue. This is, however, being addressed. CAIT has committed to attending all initial Conferences and has installed a call in facility for Review Conferences until CAIT staffing increases. This issue has also been escalated and taken up by the London Safeguarding Board, who are progressing on behalf of London re: CAIT capacity, chaired by Cheryl Coppell (Havering CE). This is in place and is being monitored.
4.2	Monitor timeliness of sharing agency conference reports and compliance with standards set before Conference. IROs to escalate to Managers on non-compliance.	Meena Kishinani	Teresa De Vito	Oct 2014 Quarterly		
4.3	Independent Chair of LSCB to escalate attendance and non sharing of reports to Senior Leads of all agencies. Monitor for compliance and improvement.	Sarah Baker	Meena Kishinani	Oct 2014 Quarterly		On track. Following on from the September LSCB meeting, the Independent Chair is drafting a letter to escalate attendance and non sharing of reports to Senior Leads of all agencies. This will be an ongoing process. Where necessary, the DCS will raise low attendance at Conferences (below 50%) with Community Safety Partnership and HWBB from December 2014.
4.4	Report and escalate levels of Police attendance at Conferences at quarterly meetings between LSCB Chair, LSCB lead Officer and Chief Superintendent Scotland Yard.	Sarah Baker	Meena Kishinani	Nov 2014 Quarterly		On track. The next meeting is in November 2014 and a core agenda item is Police attendance at Conferences.
4.5	Report and escalate levels of GP attendance at Conferences at HWBB and NHS England.	Sarah Baker	Meena Kishinani	Dec 2014 Quarterly		On track. GP attendance at Conferences is being escalated and discussed at the December HWBB meeting.

Area for Improvement (5): Ensure that assessments include children's wishes and feelings, provide a thorough consideration of parenting difficulties, their impact on the child, and a full analysis of risk.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement	
5.1	Managers at authorisation stage to ensure that analysis and the views of the child are evidenced within assessments.	Ann Graham GMs (CN&SC)	Team Managers (CN&SC)	In place	All assessments completed with clear evidence of case analysis and the child's voice, wishes and feelings being evident and integrated throughout the assessments process. The new baseline will be confirmed by case file audits from October 2014.	In place. Managers sign off all assessments and authorise on the basis that analysis and child's views are evidenced. If not assessments are rejected and SW needs to action. Ongoing practice.
5.2	Children's Services DMT to undertake quarterly reviews on the quality of assessments alongside social workers (OFSTED Model)	Helen Jenner	Beverley Hendricks TMs in CN&SC	Nov 2014 Quarterly	Assessments effectively identify needs and risks for children so that action to reduce risk is identified and families are clear about what change is needed and the consequence of no change.	Planned. Children's Services DMT will undertake a review of assessments alongside social workers in November 2014. This audit will take place with social workers and check for compliance in line with area for improvement 5.
5.3	Design and set up the new single assessment on Northgate ICS.	Meena Kishinani	Lee Fisher Dan Monahan	Nov 2014	Assessment audits show increase in the quality of assessments i.e. those rated as good and reduction in inadequate/adequate assessments.	On track. The Single Assessment has been created in the Test Environment of ICS. The Single Assessment has been demonstrated on ICS to senior managers for initial user feedback. Feedback and changes are being incorporated into test version. Plan is to upgrade ICS in the middle of November and the Single Assessment will go live by the end of November 2014.
5.4	Provide training to all SWs and Managers on how to complete the single assessment, focusing on the analysis of needs and risk, voice of the child - wishes and feelings, parenting factors and difficulties and impact on child.	Ann Graham	Laura Clements Baljeet Nagra Beverley Hendricks	Dec 2014	100% of assessments are seen and signed off by managers - not authorised if poor quality and core standard not met.	Planned. The single assessment and associated guidance have been produced. Training on a rolling programme will be delivered and compliance measured in supervision.
5.5	Provide ICS training and ICS guidance on how to record the single assessment on ICS to all social workers and managers.	Meena Kishinani	Dan Monahan	Jan 2015		Planned. ICS training is scheduled to commence December to January 2015 to all social workers.
5.6	Implement standards required for single assessment and monitor for compliance.	Ann Graham GMs (CN&SC)	Team Managers (CN&SC)	Jan 2015		From Jan 2015. The single assessment case recording practice guide has been drafted and will be formally adopted by the end of November 2014. Once the single assessment training has been completed and post go live date, audits checking compliance and quality will commence.

Area for Improvement (6): Ensure that all children are seen in a timely manner, assessments are timely and thorough, and written plans consider all areas of need and identify the outcomes sought.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement
6.1 Team Managers to act upon practice alerts raised by IROs and ensure feedback impacts more effectively on quality. GMS to monitor compliance.	Ann Graham Meena Kishinani	Team Managers (CN&SC) IROs	In place	All children who meet the threshold for assessment receive a timely assessment that is of good quality. All assessments checked and signed off by managers.	In place. Practice alert process has been revised and implemented standards for CiN, CP and LAC. Quarterly reports on themes and trends to the Practice Improvement and Outcomes Group and linked to workforce development and principal Social Worker.
6.2 Implement a robust performance system to report on timeliness of seeing children. Performance report at monthly Complex Needs & Social Care Senior Management Team (SMT), Children's Services DMT and LSCB.	Meena Kishinani	Vikki Rix	Oct 2014 Reviewed monthly	Timescales for assessment fit to individual case and met. (Reviewing how to monitor as part of single assessment launch). All children seen alone (age appropriate) and in a timely manner.	On track. An assessment performance report is in development to report on timeliness of seeing children. This will become part of the local monitoring dataset in social care and reported on monthly. CiN, CP and LAC visits to children already establishing and reported on.
6.3 Develop procedures, standards and set of expectations required for care plans covering CiN, CP and LAC. Audit for compliance and quality.	Ann Graham Meena Kishinani	Group Managers (CN&SC) Teresa De Vito	Dec 2014	Improved timeliness without loss of quality - measured quantitatively and quality evaluated through audit and supervision notes.	On track. We are in the process of commissioning Tri.x to produce a set of local procedures across social care to improve practice. This is on track for being commissioned and delivered by the end of December 2014.
6.4 Recruit additional Social Workers and Managers to ensure case loads managed down and work effectively monitored.	Ann Graham	Group Managers (CN&SC)	April 2015	Baseline - 75% of assessments completed within 45 days. Milestone 80% by April 2015 85% by Sept 2015 Improved written plans with outcomes identified. All IRO's/CP Chairs to monitor statutory visits to children and receive reports from ICS.	In place. The Workforce Strategy has been revised and is in place. We have recruited a specialist Recruitment Manager to assist with stabilising the workforce in social care. This person has been in post since August 2014. A project plan and recruitment timetable has been developed and is being monitored via the project group and CS Programme Board. We have run 3 open days since the inspection and recruited 9 SWs. Additional Team Managers have also been recruited.

Area for Improvement (7): Introduce a permanency policy that emphasises parallel planning from the earliest point when children become looked after, as well as tracking of the timescales for individual children with a plan for adoption.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement
7.1 Implement a local adoption tracker with timescales for all individual children with a plan for adoption and monitor outcomes at Permanency Planning Group.	Ann Graham	Joanne Tarbutt	June 2014	Increased opportunities for adoption and improved adoption timeliness as measured locally and via DfE Adoption Scorecard. Improved permanency and parallel planning. Permanency Planning is corporately owned.	Completed. Adoption tracker implemented for all individual children with a plan for adoption. This is being monitored at Permanency Planning Group (PPG) on a monthly basis. In 2014/15 to date, we have adopted 19 children compared to 17 in the whole of 2013/14. Scorecard improvements should be evident when published next year (autumn 2015).
7.2 Ensure all IROs escalate cases of children who do not have a permanence plan at second review to social care team managers. Monitor for compliance.	Meena Kishinani	Teresa De Vito	Sep 2014 Quarterly	Permanency policy is evidenced from the beginning of the child's journey in social care. Robust monitoring of timescales and drift is challenged.	In place. Consistent representation from IROs (CPRS team) at PPG is now in place to ensure any delays in permanency planning is picked up via this service in addition to the Social Worker and Adoption Teams. Practice alert process monitors permanency policy and draft. IROs evidence of scrutiny on case files. reports and outcomes of audits presented at PPG. Drift on cases and care plan raised and challenged via PPG. Impact to be reviewed in December 2014.
7.3 Identify key practitioners/SWs for support and put in place improvement coaching for those practitioners/SWs with weak permanency planning.	Meena Kishinani	Linnet Whittaker	Impact Review April 2015		In place. Coaching is in place with social workers in need of improvement around permanency planning. Impact of coaching on practice to be evaluated April 2015.
7.4 Revise current permanency policy and agree Policy at Cabinet post consultation with LSCB, Corporate Parenting Group, HWBB and Children's Trust.	Ann Graham	Joanne Tarbutt	Nov 2014		On track. The permanency policy is currently being revised and on track for full version and launch by the end of November 2014. Members and other Council departments will receive the revised policy to improve awareness and knowledge of adoption. The Policy will be agreed by Cabinet following consultation with LSCB, Corporate Parenting Group, HWBB and Children's Trust.

Area for Improvement (8): Further develop consultation arrangements for children in care, including through increased representation of looked after children in the children in care group.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement
8.1	Ann Graham Jane Hargreaves	Erik Stein	Oct 2014	Consultation arrangements developed and widened, with larger numbers of LAC involved including Out of Borough. All children, young people and their carers to have knowledge and copies of the Pledge for CIC and understand how this links to the care they provide. Increased representation of LAC in CiC Council, across all age groups.	<p>Work is on track and progress is being made - Details of how to make a complaint and copies of the LAC Pledge have been re-sent to all looked after children. A Pre-Assembly briefing was delivered to Council Members regarding the work of the Children in Care Council to raise awareness and expectations, and to support the re-launch of the LAC Pledge in September 2014. Extremely positive feedback received and recorded. The IRO's will monitor the implementation of the Pledge through CiC Reviews.</p> <p>On track. The CiC Council has increased its membership from 7 to 9 since the inspection. The target is to reach at least 12 members by April 2015. Out of Borough LAC consulted through small group visits conducted by Children's Rights Officer. LAC now able to submit views via online review forms. 2800 website hits in previous quarter, with number of forms completed rising month on month. Impact to be reviewed by March 2015.</p> <p>On track. LAC survey to be conducted in Autumn 2014, with results reported to MCPG in Q4 2014/15.</p> <p>On track. CiC Pledge and care leavers pledge to be distributed together to all foster carers and residential staff by the end of October 2014. All in-house carers to be measured against Pledge in foster carer annual reviews and in SSW supervisions. All in-house, agency carer and residential worker to be asked specific questions at LAC reviews about how they are contributing to implementing the pledges.</p>
8.2	Ann Graham Jane Hargreaves	Erik Stein	Dec 2014	Baseline - 7 in April 2014 <u>Milestone</u> 9 by Sept 2014 12 by April 2015	
8.3	Ann Graham Jane Hargreaves	Erik Stein	Dec 2014		
8.4	Ann Graham	Joanne Tarbutt	Dec 2014		

Area for Improvement (9): Improve the quality of planning towards adulthood for those leaving care, with a greater focus on those not in education, employment or training, or with other vulnerabilities.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement
9.1	Ann Graham	Joanne Tarbutt	Dec 2014	Quality of care leavers planning towards adulthood improves. All care leavers have an up to date Pathway Plan and case file audit of pathway plans report increase in those rated good or better. Baseline to be established November 2014.	<p>On track. 100% of all care leavers aged 18 plus have an up to date pathway as at the end of September 2014/15 as was the case in 2013/14. 70% of LAC aged 16-17 have an up to date pathway plan and is in need of improvement. This is being monitored at performance senior management team monthly meetings.</p> <p>In place. Care leavers NEET is continuing to decline, reducing from 34% to 28% as at the end of September 2014. NEET performance is a standing agenda item at the Corporate Parenting Group. Pathway plans to be introduced for 15 year olds from January 2015 so that long term aspirations for EET are addressed in the year before GCSEs are completed. This will embed ownership of long term outcomes for young people with Social Workers at an earlier stage.</p> <p>NEET events are organised twice yearly by L2L - providers of post 16 EET options to attend and all young people aged 15+ to be invited. Reciprocal apprenticeship opportunities with other Local Authorities in East London to be explored within Children's Services.</p> <p>Completed. Care leavers group has been established and meets bi-monthly to monitor progress and outcomes, chaired by Divisional Director.</p> <p>On track. Care leavers pledge has been produced and is with our Marketing Department ready for distribution end of October 2014. Impact reviewed annually.</p> <p>On track. Service Manager of Learn 2 Live team is currently working with ICS Development Officer exploring options to simplify the current pathway plan. This review will substantially reduce the number of questions in the current plan and replace with a simple modified plan that is outcome focused, friendly, accessible and includes long term ambitions.</p> <p>On track.</p>
9.2	Cllr Channer	Joanne Tarbutt Helen Richardson	Ongoing	<p><u>Baseline</u> - % of care leavers aged 18 plus 100%</p> <p><u>Milestone</u> Maintain 100%</p> <p><u>Baseline</u> - % of LAC aged 16-17 with an up to date pathway plan 75%</p> <p><u>Milestone</u> 100% by April 2015</p>	
9.3	Ann Graham	Joanne Tarbutt	Oct 2014	Reduction in care leavers NEET. Gap between NEET LAC and local children reduced. Corporate Parenting Group key focus.	
9.4	Ann Graham	Joanne Tarbutt	Oct 2014	<p><u>Baseline</u> - % of care leavers known to L2L service NEET 34%</p> <p><u>Milestone</u> 30% by Sept 2014 25% by April 2015</p>	
9.5	Ann Graham	Joanne Tarbutt	Nov 2014		
9.6	Ann Graham	Joanne Tarbutt	Dec 2014		

Area for Improvement (10): Continue to improve the opportunities for young adults leaving care to continue living with their carers as part of 'staying put' arrangements.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement
10.1	Ann Graham	Joanne Tarbutt	Ongoing	Each transition decision to be fully analysed with the young person's future at the heart of decision making. This may lead to an increase in staying put and must lead to better pathway planning.	<p>In place. Staying put arrangements are discussed at all TCP meetings with care leavers. Audits show young people challenged to consider all options for their future and to consider the longer term consequences of their choices.</p> <p>On track. Staying Put discussions to be implemented for all LAC from the age of 15 upwards from Dec 2014 onwards.</p> <p>On track. We have commissioned a consultant to review and finalise our Staying Put policy, including financial implications, which will also outline implications for care leavers and carers. Due December 2014.</p> <p>Once our Staying Put policy has been agreed, a schedule of training covering expectations of Staying Put arrangements i.e. young people continue preparation for independent living and the carers role in this, will be delivered to all foster carers in early 2015.</p>
10.2	Ann Graham	Joanne Tarbutt	Dec 2014		
10.3	Ann Graham	Joanne Tarbutt	Dec 2014		

Area for Improvement (11): Develop and implement medium and long-term strategic service plans that fully take account of known and estimated increases in amount and type of demand for the whole range of services for vulnerable children.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement
11.1	Graham Farrant	Karen Wheeler	Dec 2014	<p>Council Plans MFTP reflect and address changing children's demographic and its implications - Dec 2014.</p> <p>Strategic plans ensure demands can be met.</p>	<p>Completed. A Corporate Peer Review was commissioned in July 2014 and undertaken by the LGA - this was aimed at reviewing impact of changing demographic in the borough and LA capacity to manage demand in Children's Services with declining resources. An action plan has been developed and recommendations are being implemented.</p> <p>Planned. A review with the LGA will look specifically at detailed financial planning to address demographic change. Report December 2014.</p> <p>On track - Demand led improvement work jointly commissioned with Newham and Havering commencing in October 2014. The first meeting is scheduled for 27th October to scope out the project.</p> <p>Planned as part of Council financial planning. MFTP for 2015/16 and beyond will be agreed by Cabinet February 2015.</p> <p>Due April 2015.</p> <p>Planned for April 2015.</p>
11.2	Helen Jenner	Ann Graham	Sept 2014 Report Dec 2014		
11.3	Helen Jenner Graham Farrant Cllr Bill Turner	Karen Wheeler	Feb 2015		
11.4	Helen Jenner Graham Farrant Cllr Bill Turner	Meena Kishinani Karen Wheeler	April 2015		
11.5	Graham Farrant Cllr Bill Turner Helen Jenner	Ann Graham	April 2015		

Area for Improvement (12): Strengthen management oversight, including oversight of plans by conference chairs and independent reviewing officers, as well as formal social worker supervision, to reduce drift or delay in assessments.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Performance/Outcome	Progress to date and evidence of improvement
12.1	Ann Graham	GMs (CN&SC)	Dec 2014	Overall service improvement - better outcomes for children and young people and timeliness. Audit shows reduction in inadequate new plans to 0% by end of November 2014. 50% good by December 2014 (evidenced in audit and supervision notes).	<p>On track. Set of expectations for social care are in place. We are in the process of commissioning Tri.x to produce a set of local procedures across social care to improve practice and achieve consistency in practice standards. This is on track for being commissioned and delivered by the end of December 2014.</p> <p>On track. The Supervision Policy has been revised and re-launch due end of October. Supervision will take place in accordance with the new policy. Managers and staff understand what is expected of them.</p> <p>On track. This is in development with the GM for Child Protection reviewing Service producing a coaching model to ensure supervision improves.</p> <p>Completed. Midway reviews of CP and LAC reviews has been implemented. This is enabling IROs to escalate and challenge drift midway before the 6 month review with the social workers. Impact to be reviewed by December 2014 through case file audits of reviews.</p> <p>On track. The Social Care Workforce Manager and Principal Social Worker are working together to identify the quality issues in relation to management and supervision of staff. If training is required this will be provided.</p> <p>In place. Recruitment strategy and timetable is in place. Please refer to update provided in 6.4</p>
12.2	Ann Graham	GMs (CN&SC)	Oct 2014		
12.3	Ann Graham Meena Kishinani	Teresa De Vito Team Managers (CN&SC)	Nov 2014 Quarterly		
12.4	Meena Kishinani	Teresa De Vito	Nov 2014		
12.5	Ann Graham	Cherrylyn Senior Linnet Whittaker	Dec 2014		
12.6	Ann Graham	GMs (CN&SC) HR	April 2015		

Area for Improvement (13): Ensure that corporate parenting responsibilities are fully understood by elected members to achieve greater awareness and accountability across the local authority.

Action Description	Strategic Lead	Operational Lead	Timescale (By When)	Outcome	Progress to date and evidence of improvement
13.1	Ann Graham	Joanne Tarbutt	Nov 2014	Priorities for looked after children are driven and agreed by the Members Corporate Parenting Group and understood by all elected members. Good attendance at meetings and at training delivered to elected Members on Corporate Parenting Elected Members to achieve greater awareness and accountability.	<p>On track. The Corporate Parenting Group has a new Chair and ToR and governance is due for review in the autumn 2014.</p> <p>Completed. In response to the Lead Member of Children's Services requesting a more detailed and analytical report on LAC and care leavers, the local performance dataset has been revised and expanded considerably. The report provides an update on numbers and trends as well as trends in safeguarding, education, EET and health outcomes with benchmarks and analysis.</p> <p>On track. The 2013/14 Corporate Parenting report has been produced and is an agenda item at the October Corporate Parenting Group. From this report, a revised set of priorities and key actions will be discussed and agreed by the members. This will lead to a revised Strategy and action plan embedded and evaluated annually.</p> <p>Completed for 2014. A training session for new members was delivered to 20 Council Members regarding the work of the Children in Care Council to raise awareness and expectations in September 2014. Planned annual Pre-Assembly briefings by CiC group in place.</p> <p>To be completed by March 2015.</p>
13.2	Ann Graham	Vikki Rix	Oct 2014		
13.3	Ann Graham	Joanne Tarbutt	Annual		
13.4	Fiona Taylor	Fiona Jamieson	Annual		
13.5	Ann Graham	Joanne Tarbutt	March 2015		