

# Children's Services Improvement Programme Status Report

<b>Reporting Period</b>	April 2015	<b>Lead</b>	David Johnston			
<b>Status Summary including items for escalation</b>	<p>The DfE appointed Independent Chair of the Improvement Board, John Goldup, took up the role at the April Board meeting. Whilst he was satisfied with the work completed to date, he asked that future Status Reports and Board agendas focus on the Key Performance Indicators that are not showing significant improvement. As such, this report has been slightly reformatted to reflect this. He has also reviewed the membership of the Board to include the Chair of the Select Committee and representatives from the health providers.</p> <p>The pace of change in terms of actions completed continues to be rapid. The project and programme meetings and reports will continue to monitor this progress but will move attention to outcomes for children – the 'so what' factor.</p> <p>The Practitioners Board (a shadow of the Improvement Board made up of front line team representatives) met for the first time in April. It was a very good meeting with excellent input from attendees. This will have an impact on staff morale. The Board are looking to appoint their own Chair in the next month who will then attend the Improvement Board to ensure clear lines of communication between the two.</p>			<b>Progress Against Success Measures</b>	<b>Progress Against Actions in Month</b>	<b>Risks/ Issues</b>
				R	G	A
<b>Progress Against Objectives: Success Measures / Impact / Evidence / Deliverables</b>						
See attached data dashboard						
<b>Developments/ Achievements / Key Milestones reached this period:</b>				<b>Targets for next period:</b>		
<p><b>W1 – Improving Leadership Governance &amp; Partnerships</b></p> <ul style="list-style-type: none"> <li>- 3 Education &amp; Social Care Conferences were held with the aim of increasing communication and partnership working in order to safeguard children. A report from the conferences will be circulated to all schools and the Improvement Board in May</li> <li>- Developed opportunities for work-shadowing within each agency for front-line staff and managers</li> <li>- Heads of Service in social care committed to spending a minimum of 1 day a month workshadowing frontline teams</li> </ul>				<p><b>W1 – Improving Leadership Governance &amp; Partnerships</b></p> <ul style="list-style-type: none"> <li>- Increase attendance of all agencies at Strategy, ICPC and Core Groups <ul style="list-style-type: none"> <li>• Review process for sending invites to increase efficiency</li> <li>• Identify alternative venues / IT facilities for meetings</li> </ul> </li> <li>- Escalation group to begin audit of escalation reporting template</li> <li>- Develop a joint leadership strategy for organisations responsible for working with and safeguarding children in Buckinghamshire</li> <li>- Agree workplan for next 6 months</li> </ul>		
<p><b>W2 – Improving Quality of Social Work Practice</b></p> <ul style="list-style-type: none"> <li>- All children allocated</li> <li>- 72 audits completed with a focus on Children who have been looked after for more than 6 months - 78% of the audits completed were graded good or outstanding</li> </ul>				<p><b>W2 – Improving Quality of Social Work Practice</b></p> <ul style="list-style-type: none"> <li>- Maintain 100% allocation of cases to social workers</li> <li>- 100 audits to be completed in April <ul style="list-style-type: none"> <li>• SMT to moderate all 'inadequate' audits</li> <li>• Arrange for Essex &amp; Cambridgeshire to moderate audits</li> </ul> </li> </ul>		

- 89% assessments completed in 45 working days (from 76% in March) with 92% children seen during assessment)
- 'As Is' ICPC process mapped and performance issues identified (% completed in time moved from 4% to 7% following detailed analysis of data)
- Re-launched dispute resolution process

- completed to date
  - June audit to be a moderation of previous audits
- Increase % assessments completed in 45 days and % children seen during assessment
  - Review assessment process to remove duplication and increase efficiency
- Accurate recording and increased timeliness of ICPCs (from 7% in timescale in April to 60% in May)
  - Review assessment and child protection processes to remove duplication and increase efficiency
  - Work with CP Chairs and business support to ensure up to 25 ICPCs / reviews can take place each week
  - Sense check the data in ICS to ensure the current reported number is correct
- Increase % children in need with a plan (from 48% in Apr to 75% in May) and plans reviewed on time (from 67% in Apr to 80% in May) and recorded on ICS
  - Good practice template for recording visits to be implemented in all teams
  - Review ICS reporting process
- Increase timeliness of CP and LAC reviews
  - IRO Standards to be completed
  - Review 'As Is' CP process
- Aftercare standards to be completed and launched to ensure a continued improvement on the child's journey.
- Introduce a DSP objective ensuring all staff work to the practice standards in achieving outcomes for children.

**W3 – Improving Strength & Capacity of the Workforce**

- Permanent appointment to 3 Head of Service roles and 1 of 2 remaining PIM roles
- 3 permanent social workers started in April and 3 more are due to start in May. A further 19 have been appointed but are awaiting start dates (including 9 Romanians)

**W3 – Improving Strength & Capacity of the Workforce**

- Increase number of permanent staff in qualified social worker roles
  - Advertise in Northern Ireland
  - Birmingham Community Care Live Recruitment Fair and active management of any contacts made

<ul style="list-style-type: none"> <li>- Agreed phase 2 of Romanian campaign</li> <li>- Workshop held with reps from across social care teams to develop induction programme for new staff</li> </ul>	<ul style="list-style-type: none"> <li>• Meeting in Guildford 19 May re SE Sector Improvement Programme &amp; Memorandum of Co-operation</li> <li>• Development of microsite to attract &amp; Investment in google clicks to pull more candidates to BCC website</li> <li>- Finalise Induction Programme</li> <li>- Fortnightly resource meetings with PIMs to actively manage the workforce</li> </ul>
<p><b><i>W4 – Improving Early Help &amp; the Front Door</i></b></p> <ul style="list-style-type: none"> <li>- Early Help Speed Dating events in Aylesbury and Wycombe for staff</li> <li>- Job advertised for Families First Coordinators</li> <li>- Completed Early Help Panel Pack for partners and gathered feedback and implementation options</li> <li>- Significant reduction in number of contacts (1406 in March to 1072 in April) and conversion to referrals (544 in March to 252 in April) which led to further analysis of MASH process</li> <li>- Repeat referrals reduced to 17% (was 24% in March) – this will have been effected by reduced number of referrals</li> <li>- Contact and referral process in MASH and First Response reviewed to remove duplication and inefficiencies</li> <li>- MASH review completed - MASH strategic and operational group agreed to investigate putting statutory cases through the MASH process</li> <li>- Recruited 2 additional CAROs</li> <li>- Review of performance information for First Response and significant changes to reports in order to understand throughput.</li> <li>- Commissioned independent consultant to assist in the reconfiguration and implementation of new MASH model.</li> </ul>	<p><b><i>W4 – Improving Early Help &amp; the Front Door</i></b></p> <ul style="list-style-type: none"> <li>- Launch coordinated Early Help Panel <ul style="list-style-type: none"> <li>• Implementation of Early Help panels in Aylesbury as a pilot</li> <li>• Proposal to Chesham Project Steering Group for the panel approach to be included</li> <li>• Partners to fund Panel Chair</li> </ul> </li> <li>- Increase % referrals where a decision is made in 24 hours <ul style="list-style-type: none"> <li>• Map ‘to be’ process for contact and referral process to ensure all working to the same process and roles, responsibilities and reporting is clear</li> <li>• Appoint additional manager to support decision making process (4 managers in total)</li> <li>• Investigate possible options for accommodation for MASH team</li> <li>• Implementation of “quick wins” identified in process mapping “as is” in Contact and MASH</li> </ul> </li> </ul>
<p><b><i>W5 – Improving Services for Children in Care</i></b></p> <ul style="list-style-type: none"> <li>- Decision has been made that when a young person (16-18 years) is in agreement, they will move to the AfterCare team, following consultation with young people.</li> <li>- Business Case for future delivery options for Fostering, Adoption and Residential services has been drafted and will be presented to Members in June.</li> <li>- Adoption data now available for the Dashboard and CYP Scorecard – shows timescales for both placements and matching decisions are improving</li> </ul>	<p><b><i>W5 – Improving Services for Children in Care</i></b></p> <ul style="list-style-type: none"> <li>- Improve the Timeliness of visits to Children Looked After <ul style="list-style-type: none"> <li>• Agree process for evidencing timely statutory visits to all looked after children and recording on the children’s case files whether they are spoken to alone</li> </ul> </li> <li>- Increase % Initial Health Assessments completed in timescale <ul style="list-style-type: none"> <li>• Review data each week to identify any teams / individuals who are not achieving 5 day consent timescale</li> <li>• Meeting with Commissioning colleagues to address lack of Community Paediatricians explore option of engaging</li> </ul> </li> </ul>

	<p>and training local GPs for the over 5's and Saturday Clinics</p> <ul style="list-style-type: none"> <li>- Develop robust ICS reporting mechanisms to support monitoring success measures</li> </ul>
<p><b>W6 – Improving Tools</b></p> <ul style="list-style-type: none"> <li>- Staff survey responses analysed, action plan developed and communicated with all staff – key area of work is increasing trust in the Senior Management Team (see workstream 1)</li> <li>- ICS Support Officer for Unit Coordinators appointed along with 2 additional ICS floor walkers</li> <li>- LADO Module business process agreed and module testing completed</li> </ul>	<p><b>W6 – Improving Tools</b></p> <ul style="list-style-type: none"> <li>• LADO Module go-live. Training and prep for adoption recruitment module implementation</li> <li>• Recruitment of PAs for Senior Management Team</li> <li>• Continue development of Adoption Recruitment Module</li> <li>• Recruit ICS Trainer</li> <li>• Continue development of report for unallocated cases</li> </ul>
<p><b>W7 – Improving the BSCB</b></p>	<p><b>W7 – Improving the BSCB</b></p>
<p><b>Early Help and Thresholds</b></p> <ul style="list-style-type: none"> <li>• Thresholds consultation period concluded. 241 responses from across the partnership. Headline findings presented to 19<sup>th</sup> May Board. More detailed work now to be taken forward through P&amp;P Sub Group</li> <li>• Results of Early Help Audit fed back to May Board.</li> <li>• Panel process for Early Help: Partnership pack agreed at Early Help Sub Group with final sign off at JET scheduled for 21<sup>st</sup> May.</li> </ul> <p><b>Child Sexual Exploitation</b></p> <ul style="list-style-type: none"> <li>• CSE 'Pop-Up' event held on 20<sup>th</sup> May with approx 150 colleagues from across the partnership.</li> <li>• CSE Strategy to be finalised following 20<sup>th</sup> May event.</li> <li>• CSE data incorporated into BSCB dashboard – but more work to do on local dataset.</li> <li>• Formal decision and early work to undertake an SCR on all historical CSE cases arising from the various TVP Operations. Agreement to secure additional capacity to BSCB Team to co-ordinate the 4 current SCRs.</li> </ul> <p><b>Child's Voice and Journey</b></p> <ul style="list-style-type: none"> <li>• Plan for cyber safety conference starting to take shape (response to Scrutiny Enquiry)</li> </ul>	<p><b>Increasing Effectiveness and Impact</b></p> <ul style="list-style-type: none"> <li>• Revised TOR for BSCB signed off at May Board.</li> <li>• Revised TOR and workplan for all except Policies and Procedures Sub Group (and this due to change in chair)</li> <li>• Member compact signed off at May Board</li> <li>• Vice chair elected to BSCB</li> <li>• Director of Public Health now attending BSCB.</li> <li>• Joint Protocol discussed at HWB and BSCB – will continue round other Board included in the document before final version for sign off agreed.</li> <li>• First draft of BSCB dashboard presented to May Board alongside Improvement Board dashboard. P&amp;QA Sub Group will continue to work on BSCB dashboard based on Board feedback.</li> <li>• Significantly higher level of challenge across the partnership at last two Board meetings as evidenced by minutes and challenge log</li> <li>• Comms partnership meeting scheduled for 26<sup>th</sup> May.</li> <li>• First draft of Training Strategy update completed.</li> <li>• Website consultation underway with professionals (still delay with young people consultation due to staff absence)</li> <li>• Two week review of the use of Escalation completed across the partnership. Review period ended on 15<sup>th</sup> May. Results</li> </ul>

starting to be returned to BSCB for analysis.

- Meeting with TVP Vulnerable People's Unit to discuss improving across TVP area working particularly around CSE, the multi-agency audit programme and TVP LSCB budget contributions for future years.

<b>Key Risks and Issues</b>				
<b>Ref</b>	<b>Risk / Issue</b>	<b>Mitigating Action</b>	<b>Owner</b>	<b>RAG</b>
394	IF we are unable to attract and retain experienced and qualified staff THEN we will be unable to meet the improvement plan targets and improve children's safeguarding in Bucks	Overseas recruitment, revised terms and conditions, R&R Strategy	G Quinton	A
407	IF the number of referrals continue to substantially increase THEN the increased pressure on an already stretched team could result in staff absence and a reduced level of service	Work with partners to ensure that they understand our thresholds and their role in provision of Early Help Services Flex the workforce to meet changes in demand through the use of agency workers Work with contractors to ensure we always have approved agency staff to start immediately	C Douch	A
392	IF compulsory reviews are not occurring at the required times by the relevant people due to a lack of compliance / ownership THEN children who require care could experience unnecessary delays and crucial information could be missed	A regular audit programme has been established to routinely examine care files and ensure reviews are being undertaken in a timely manner	C Douch	R