



# Children, Young People and Learning Policy Overview Committee

Date:

**WEDNESDAY, 15 APRIL** 

2015

Time:

7.00 PM

Venue:

COMMITTEE ROOMS 3 & 3A - CIVIC CENTRE, HIGH STREET, UXBRIDGE, MIDDLESEX UB8 1UW

Meeting Details:

Members of the Public and Press are welcome to attend

this meeting

## **Councillors on the Committee**

John Hensley (Chairman)
Brian Crowe (Vice-Chairman)
Nick Denys
Jem Duducu
Tony Eginton
Duncan Flynn
Peter Money
Jane Palmer

Jan Sweeting (Labour Lead)

Other Voting Representative

Anthony Little, Roman Catholic Diocesan.

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Lloyd White

Head of Democratic Services

London Borough of Hillingdon,

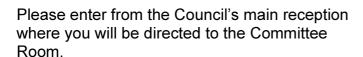
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# Terms of Reference

A central role of a Policy Overview Committees is to undertake in-depth policy reviews on specific issues. Reviews provide the opportunity to hear from members of the public and expert witnesses, including people from a wide range of external organisations. Reviews usually make recommendations to the Cabinet on how the Council could improve its work. They therefore perform an important role in opening up the policy-making process to a wider audience, including people who would not normally have the opportunity to participate.

This Committee undertakes the policy overview role in relation to the following matters:

- Education Services and statutory education authority functions
- School performance and attainment
- School Transport
- Relationships with Local Academies / Free Schools
- Pre-School & Early Years Services
- Youth Services & Careers Services
- Juvenile justice & probation services
- Adult Learning
- · Education and learning partnerships
- Music & The Arts
- Social care services for children, young persons and children with special needs
- Adoption and Fostering
- Family Services

# Agenda

| 1  | Apologies for Absence   |           |
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| 2  | Declarations of Interest in matters coming before the meeting   |           |
| 3  | Matters notified in advance or urgent   |           |
| 4  | To confirm that items of business marked Part 1 will be considered in public and that the items marked Part 2 will be considered in private |           |
| 5  | To agree the minutes of the meeting held on Wednesday 18 March 2015   | 1 - 8     |
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| 7  | Quarterly Child Social Care Audit Update 2014 - 2015  | 67 - 72   |
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| 10 | Update on the Implementation of Recommendations from past reviews of the Committee  | 79 - 92   |
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# **Minutes**

# CHILDREN, YOUNG PEOPLE AND LEARNING POLICY OVERVIEW COMMITTEE



18 March 2015

Meeting held at Committee Room 6 - Civic Centre, High Street, Uxbridge UB8 1UW

|     | Committee Members Present: Councillors John Hensley (Chairman), Brian Crowe (Vice-Chairman), Nick Denys, Jem Duducu, Duncan Flynn, Peter Money, John Morse, Jane Palmer, Jan Sweeting (Labour Lead) and Mr Tony Little.   |  |
|-----|---|--|
|     | LBH Officers Present: Steve Buckingham (Performance and Intelligence Manager), Vince Clark (Interim Assistant Director Children in Care, Permanency & Children's Resources), Nikki Cruickshank (Interim Assistant Director of Safeguarding and Quality Assurance), Sarah Hydrie (Assistant Internal Audit Manager), Dan Kennedy (Head of Business Performance, Policy and Standards), Nasima Patel (Interim Assistant Director - Child Protection), Jon Pitt (Democratic Services Officer) and Tony Zaman (Director Adult Social Services / Director Children & Young People Services (Interim)). |  |
| 63. | APOLOGIES FOR ABSENCE (Agenda Item 1)   |  |
|     | Apologies for absence were received from Cllr. Tony Eginton with Cllr. John Morse substituting.   |  |
| 64. | DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THE MEETING (Agenda Item 2)   |  |
|     | No Declarations of Interest were made.  |  |
| 65. | MATTERS NOTIFIED IN ADVANCE OR URGENT (Agenda Item 3)   |  |
|     | No matters had been notified in advance or as urgent.   |  |
| 66. | TO CONFIRM THAT ITEMS OF BUSINESS MARKED PART 1 WILL BE CONSIDERED IN PUBLIC AND THAT THE ITEMS MARKED PART 2 WILL BE CONSIDERED IN PRIVATE (Agenda Item 4)   |  |
|     | It was confirmed that items marked Part 1 would be heard in public and that those marked Part 2 would be heard in private.  |  |
| 67. | TO AGREE THE MINUTES OF THE MEETING HELD ON WEDNESDAY 18 FEBRUARY 2015 (Agenda Item 5)  |  |
|     | Resolved: That:   |  |
|     | The minutes of the meeting held on 18 February 2015 be agreed as a correct record.  |  |

# 68. PROGRESS REPORT ON ACTION PLAN IN RESPONSE TO OFSTED INSPECTION OF SERVICES TO CHILDREN IN NEED OF HELP AND PROTECTION, CHILDREN LOOKED AFTER AND CARE LEAVERS ("OFSTED ACTION PLAN") (Agenda Item 6)

Officers introduced a progress report on improvement activities that had occurred in the Children and Young People's Service as a result of the Ofsted inspection in December 2013.

In June 2014, Ofsted had endorsed Hillingdon's "Ofsted Action Plan". This had been developed to address 11 areas of improvement that had been identified following the previous "requires improvement" judgement given to the Service. The Action Plan contained 41 specific actions, 30 of which had been completed. It was noted that a number of residual actions had been moved into the Child Services Improvement Plan. There had been significant changes that had affected the service.

Progress had been made in relation to implementation of the Public Law Outline (PLO). The aim was to ensure that children achieved a final care order and permanency plan within 26 weeks. The current average for completed care cases was 34 weeks, down from 57 weeks in 2013/14.

Triage arrangements had been made more robust and services now had a more effective front door entry system. The number of Children in Need cases without a care plan for six weeks or longer had fallen to 250 and it was anticipated that this would soon fall to zero. From April 2015, the average care case in Hillingdon was projected to finish within 25 weeks, down from 34 weeks.

The Chairman advised that Her Honour, Judge Judith Rowe QC, the Designated Family Judge for West London had recognised the improvements made to date.

A Member of the Committee requested that it be noted that the Ofsted Action Plan had previously been presented to the Committee in October 2014, rather than in September 2014 as set out in officer's report. The Member also felt that the real test of the work undertaken would be the sign off of the Improvement Plan by Ofsted. It was questioned whether a number of the actions set out in Action Plan had been achieved. Officers confirmed that they had been.

Officers advised that meetings would be held with services to consider the Plan in detail and that the Plan aimed to take the Service forward, rather than dwelling on the situation as it had been in 2013. The Children and Young People's Service could not yet be considered to be good, but it was on a continuous improvement journey. In response to a Member question, it was confirmed that the percentage of cases consistently meeting 'good' standards currently stood at 35%.

The Committee asked what progress had been made in relation to recruitment of permanent staff and it was suggested that the number of agency staff currently employed was not sustainable. Officers acknowledged that the Service had faced a very challenging situation in summer 2014 and that it had been acknowledged that serious intervention would be required.

The Council was continuing to make use of an external company, Skylakes Social Work, to assist with social work delivery. The situation in relation to turnover of agency staff had improved, with staff now staying an average of 37 weeks. This illustrated the increasing stability of the Service. The ratio of frontline staff to managers was 1:5,

which would ensure adequate supervision. Pay within social services at Hillingdon was within the top quartile of all local authorities and a number of channels were being used to recruit staff. In response to a Member question, officers advised that the managed element of the service had given frontline staff capacity to get on with their jobs.

It was confirmed that a Sustainability Plan was being prepared and was due to be presented to the Leader of the Council in the week following the Committee meeting. A significant volume of improvement work had been undertaken since August / September 2014 and it had always been anticipated that improvements would be realised gradually. It was emphasised that the references to 'good' in the officer report referred to the progress that had been made and did not represent an overall judgement on the service.

A Committee Member stated that there was significant evidence of service improvement. They were pleased that the figure for case file audits completed by managers had reached 100% and that there had been good engagement with senior managers. This was helping to create stability in the service and an improvement in staff morale. The Member felt that the Ofsted would find a very different service if they were to visit at the current point in time and thanked officers for their work, particularly in relation to Triage arrangements, which had helped to clear the backlog of work.

Clarification was sought regarding what was meant by the term 'signs of safety' in the officer's report. It was clarified that this was a national framework designed to help practitioners with risk assessment and safety planning in child protection cases. All child protection conferences now used this model.

Committee Members suggested that although there was evidence of improvement, the information provided in the Action Plan could have been provided in a clearer and more accessible format. Officers advised that a sheet of supplementary evidence presented at the Committee meeting provided up to date statistical information covering February 2015. It was acknowledged that some milestones had not been achieved, but that these had now been added to the Service Improvement Plan to help ensure that they would be realised.

The Committee questioned what factors helped to make a good Council service. It was suggested that these included having time and space to think, robust procedures being in place and staff being properly supported. There had been a focus on reducing caseloads, which had been the biggest improvement realised. This was allowing staff to get on with the work that they had been trained to do and was enabling them to work in a more proactive way.

Independent Practice Advisors were now available to coach social workers and work was being undertaken with Human Resources on a Workforce Development Plan. Training was provided in both classroom and on-site environments. Hillingdon was on an improvement journey, but it was likely to be a couple of years before services provided to children in need, children looked after and care leavers would be very good. The Chairman summarised that social workers required support from the workplace in order to be able to share concerns. There needed to be an investment in people and there was a belief that the Council was starting to achieve this.

Another Committee Member reflected that it was great to see signs of improvement. They questioned what steps were being taken to ensure that staff who were performing well were able to mentor other staff and what performance management measures were being taken for staff performing below required standards. Officers advised that

staff performance issues would be analysed as caseloads continued to fall. New staff received a three day induction and delivery of the Action Plan would help to ensure that improvements were made. In the event that staff consistently had inadequate cases, this would be identified for managers to take appropriate action. Managers had also been encouraged to raise any issues identified with senior managers.

Members asked why no up-to-date figures had been provided in relation to measure 3C of the Action Plan, "all cases, closed management sign off.' A baseline figure of 18% for assessments that met 'good' standards had been set in May 2014. By September 2014, this figure had reached 90% and it was anticipated that it would be 100% from March 2015. However, there was no up-to-date figure available because the baseline had changed and it was noted that the quality of assessment audit was an outstanding action. It was confirmed that the Action Plan would need to be recalibrated and that Internal Audit would be scrutinising the plan and the response to Ofsted.

Some Members reiterated that there were gaps in the data provided and that this raised further questions. The progress made in relation to the improvements since Summer 2014 was recognised and the Chairman thanked officers for their work and openness in answering questions at the meeting.

Officers confirmed that a completed Children's Social Care Improvement Plan would be brought to the April 2015 meeting of the Committee.

#### Resolved: That:

- 1. A completed Children's Social Care Improvement Plan be brought to the April 2015 meeting of the Committee
- 2. Cllr. Sweeting would provide a list of follow up questions in relation to the report to Democratic Services.
- 3. The report be noted.

# 69. **STANDARDS AND QUALITY IN EDUCATION IN HILLINGDON 2013/2014** (Agenda Item 7)

Officers introduced a report on Standards and Quality in Education in Hillingdon. This annually produced report had been presented to Cabinet in January and was being presented to the Committee in order to provide an opportunity for Members to question officers and to seek clarification on the information contained therein.

The report showed that overall results and attainment had improved in Hillingdon and were continuing to rise across the five key stages. Results were particularly strong at key stages 1, 2 and 4. It was noted that there had been a number of changes in the national assessment frameworks. This had meant that reliable comparison with previous years had not always been possible. 2013/14 was the first time that results could be compared accurately with previous years. There had been a number of changes in the measures used at GCSE / Key Stage 4 level.

Within Hillingdon, 13 primary schools and five secondary schools had been identified by Ofsted as requiring improvement. One of the five had since improved and was therefore no longer included in the category. It was noted that Ofsted would challenge the leadership and governance of schools that were under performing. The Council issued warning notices and recommended intervention action for community schools where there was a need to improve standards, although warning notices were usually only issued as a last resort.

The majority of schools were supportive of Council efforts to improve standards. The Council also adopted a brokering role to enable schools that needed to improve to be supported by better performing schools. This support could be provided for a fixed period of time and could also cover a particular subject or range of subjects. A Member questioned how many of the schools that required improvement were under control of the Local Authority. Officers advised that at primary level, 10 out of the 13 that required improvement were maintained, while at secondary level, only one of the four were maintained by the Authority.

Individual tuition support had been made available to Looked After Children in year 6 and year 11. It was noted separately that daily updates on school attendance were available to the Council and that for the 2014/15, there was a focus on improving literacy.

In response to a Member question, Officers advised that although the percentage of fixed term exclusions at Special Schools within Hillingdon (49.06%) was well above local and national averages, 95% of these exclusions had related to one school. Improvements had been made and the latest available figures showed a reduction in this type of exclusion.

There were two primary schools within the Borough that had five forms of entry. There was no evidence to show that the size of a school had a significant impact on pupil performance. Instead, leadership, governance and scrutiny of a school were the key factors that determined results.

Members questioned how school performance was moderated at primary level. Officers advised that there were three levels of moderation. This took place internally within schools and externally via the Department for Education's Standards and Testing Agency. The moderation process was also subject to scrutiny.

The Committee questioned whether it was the case that schools were able to obtain credit for the results of pupils who had sat examinations at institutions other than their own school. It was confirmed that this was an issue and that the academic results obtained by pupils at a school would not always fully reflect its success, or otherwise. This was due to external factors, such as pupils receiving private tuition.

A Member questioned whether the Council was aware of issues in relation to funding payments made to schools with regard to specific pupils and whether schools were aware of their obligations. It was also questioned whether checks could be made with schools. These payments were not ring-fenced and could therefore be spent on provision that did not directly benefit the child in question. It was confirmed that the issue was due for consideration and that a thematic review could be considered. This would be shared amongst all schools and it was noted that audit testing could be used to confirm how funding was being spent by schools. It was suggested that the issue be given further consideration by the Committee later in 2015.

The Committee questioned why the Ofsted judgements against school inspections had only been compared against national averages and not with other London Boroughs. It was suggested that this could be because such a comparison would make Hillingdon's performance look less good and that Hillingdon's Ofsted performance, was in fact, the ninth worst of the thirty-two London Boroughs. Officers acknowledged that there were some weaknesses in some of the Borough's schools and the Council was challenging schools to raise their standards.

Concerns were raised by Members that while performance for the seven key subjects at Foundation Stage (age 3 to 5) showed improvement across all areas compared to 2013, performance remained below the national and outer London averages. Officers advised that investment from Council officers would help to address issues. Last year there had been a focus on maths, while the focus during the current year was on improving literacy skills.

A Member noted that the names of the schools requiring improvement had not been provided in the report and officers advised that this information could be provided to the Committee separately.

#### Resolved: That:

- 1. The spending of payments provided to schools to support specific pupils be investigated and a report brought to the Committee later in 2015.
- 2. Officers to provide Democratic Services with the names of the schools within Hillingdon that required improvement, for circulation to the Commitee.
- 3. The report be noted.

# 70. SINGLE MEETING REVIEW - HILLINGDON'S IMPLEMENTATION OF THE SPECIAL EDUCATIONAL NEEDS AND DISABILITY (SEND) REFORMS - DRAFT REPORT (Agenda Item 8)

The Chairman introduced the Draft Final Report for the single meeting review, 'Hillingdon's Implementation of the Special Educational Needs and Disability (SEND) Reforms.' Committee Members acknowledged and endorsed the work already undertaken to implement the Reforms and agreed the report and recommendations as presented.

#### Resolved: That:

- 1. That the Committee agreed the Draft Report as presented by the Chairman.
- 2. That the Chairman would present the Draft Report to Cabinet on 23 April 2015.

## 71. **FORWARD PLAN 2014 / 2015** (Agenda Item 9)

#### Resolved: That:

1. The Forward Plan be noted.

## 72. **WORK PROGRAMME 2014 / 2015** (Agenda Item 10)

The following additions to the Committee's Work Programme were noted:

- 1. A completed Children's Social Care Improvement Plan would be brought to the April 2015 meeting.
- 2. An item in relation to auditing of the performance of secondary schools be added to the work programme for the April 2015 meeting.

Resolved: That: subject to the above amendments, the Work Programme be noted.

The meeting, which commenced at 7.00 pm, closed at 8.30 pm.

These are the minutes of the above meeting. For more information on any of the resolutions please contact Jon Pitt on 01895 277655. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.

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# UPDATE ON CHILDREN AND YOUNG PEOPLE'S SERVICES IMPROVEMENT PLAN

Contact Officer: Vince Clark Telephone: 01895 277356

## **REASON FOR ITEM**

The purpose of this paper is to provide a briefing report on the development of improvement activities that have been incorporated into the Children and Young People's Services Improvement Plan (SIP). The SIP has been developed to provide a framework for ongoing improvement activity within the service with the intention of providing an 'outstanding' service to the children and young people of Hillingdon. The SIP also includes the 11 residual actions from the Ofsted improvement plan.

#### SUGGESTED COMMITTEE ACTIVITY

It is recommended that the Committee:

- 1. **Notes** the contents of this paper.
- 2. Endorses the Service Improvement plan.
- 3. **Endorses** the proposal within this paper to report back to the Children, Young People & Learning Policy Overview Committee in July 2015.

#### **INFORMATION**

#### **Background**

- 1 To achieve the service vision, this plan has been developed using seven work streams (see below). It outlines the priority areas of activity required to improve the overall level of provision for children receiving services from social care. The plan also acknowledges the urgency required to deliver better outcomes for the children within Hillingdon. This plan enhances the work already completed as part of the Ofsted Improvement Plan 2014 and ensures that recent improvements are sustained and built upon.
- 2 In order to deliver the required improvements the first work stream relates to the development of a stable workforce which is capable of undertaking good quality assessments, offer defined interventions, engage effectively with families and partners, and deliver timely decision-making for children at critical points across the Children's Pathway.
- 3 The plan has the political, corporate and senior leadership needed to deliver the improvements required. Implementation of the plan will be monitored through the Senior Management Team within Children and Young People's Services (CYPS) and overseen by the Performance Monitoring Board chaired by the Chief Executive. Accountability for delivery of the plan has primarily been devolved to the Assistant

Children, Young People and Learning Policy Overview Committee – 15 April 2015

Directors who have responsibility for improving outcomes for their respective service areas.

- 4 The improvement plan is designed to deliver a sustainable improvement programme through good social work practice. The high level work streams are:
  - 1. Workforce development
  - 2. Performance improvement work in Triage, MASH and Children Social Work Teams
  - 3. Defining new ways of working within the CSWTs
  - 4. Improving outcomes for Looked After Children (LAC) and Young People
  - 5. Improving the quality of Fostering & Adoption provision
  - 6. Embedding new ways of working and improved practice management arrangements
  - 7. Effective Quality Assurance

#### **Contextual Information**

5 In August 2014 the level of risk in the Children's Social Work Teams was deemed to be unacceptably high. This followed a high degree of disruption and changes in all levels of management and staffing within the service. A significant additional amount of resource was committed to the service which was used to implement a range of recovery actions and ensure that the service was stabilised. The recovery actions have successfully stabilised the service and the SIP will now drive forward further work to embed and sustain service improvements.

#### **Service Priorities**

- 6 The overarching priorities within the plan are:
  - That the whole service maintains a relentless focus on good outcomes for children.
  - Deliver a successful recruitment plan coupled with the implementation of a flatter management structure as part of a wider effective workforce plan to ensure good practice management, training and supervision (see work stream 1 and 6).
  - Maintain good Triage, MASH, Social Work Teams to work with children and families at an early stage to prevent the need for further intervention where possible (see work streams 2 and 3).
  - Deliver a range of good outcomes for LAC to be achieved through timely court intervention, focused care planning, and good participation from children and young people in their care planning (see work streams 4 and 5).
  - Embed the Quality Assurance Framework to deliver good practice management, oversight, and good casework practice throughout the service (see work stream 7).
  - Ensure good value for money by getting the spend over 2015-16 for CYPS in line with base budget, primarily by transitioning out of the Skylakes contract and reducing the number of agency / interim staff across the social care workforce (see work stream 1 and 6).

- 7 The SIP includes a set a quality assurance programme as detailed in work stream 7 and will include the effective implementation of the Quality Assurance Framework to ensure good management oversight and an evidence based approach to the improvement activity.
- 8 The specific actions related to the seven work streams are encapsulated within the Social Care Improvement Action plan which is the main appendix of the SIP.

## Benchmarking against statistical neighbours

- 9 The SIP and action plan are based on an assessed level of demand and need which has been benchmarked against statistical neighbours and national averages:
  - Referral and assessment have a maximum of 45 days to conclude their assessment. The current staffing levels have improved performance in this area with the Assessment Teams currently achieving 30 day average.
  - The volume assumptions have been tested against benchmarking with other local authorities to ensure that the whole service is comfortably within the range expected for good outcomes.
  - The service has achieved the need to maintain caseloads at an average of no more than 18 cases per qualified social worker. There will be a differential within this average figure across the different service teams to take into account the variances in work patterns. For example social workers in assessment teams will have an average of 15 whilst those in Children in Need teams will have 18.

## **Workforce strategy**

10 As reported to the Committee previously, a critical element of the SIP will be the successful recruitment of permanent staff coupled with the implementation of a flatter management structure. The SIP will deliver a social work structure built around a model of one team manager with a maximum of 6 social workers to supervise. This will strengthen accountability for good practice within the teams and will maintain the pod business support system. This SIP will also implement the advanced practitioner role to work with the QA service to improve practice quality and offer practice leadership. Work stream 1 includes details of the workforce strategy to deliver effective recruitment into the social work teams.

# Further Review and Report Back to Children, Young People & Learning (CYPL) Policy Overview Committee (POC)

11 It is proposed that the SIP be subject to quarterly reports to the CYPL POC and that the next detailed progress report will be submitted in July 2015.

Tony Zaman Interim Director of Children and Young People's Services

| BACKGROUND PAPERS  |
|--|
| <ol> <li>Children's Social Care Services Improvement Plan 2015 - 16</li> <li>Children's Social Care Service Improvement Action Plan 2015 - 16</li> </ol> |
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# London Borough of Hillingdon Children's Social Care Services Improvement Plan 2015-16

Version 1 final March 2015



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- 1. Hillingdon's vision for vulnerable children
- 2. Overarching priorities for 2015-16
- 3. Work streams

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Measurements of progress

Work stream 2: Performance improvement work in Triage, MASH and CSWT

Outcomes of the work stream

Measurement of initial progress (6 months)

Measurements of progress (12 months)

Work stream 3: Defining new ways of working within the CSWTs

Outcomes of the work stream

Measurements of initial progress (6 months)

Measurements of progress (12 months)

Work stream 4: Improving outcomes for LAC & Young People

Outcomes of the work stream

Measurement of progress (6 months)

Measurements of progress (12 months)

Work stream 5: Improving the quality of Fostering & Adoption provision

Outcomes of the work stream

Measurement of progress (6 months)

Measurements of progress (12 months)

Work stream 6: Embedding new ways of working and improved practice management arrangements

Outcomes of the work stream

Measurement of progress

Work stream 7: Effective Quality Assurance

Outcomes of the work stream

Measurement of progress (6 months)

Appendix 1 - Children's social care improvement action plan 2014-16

# 1. Hillingdon's vision for vulnerable children

To deliver an outstanding Social Care Service for Hillingdon's children and young people in line with the Children's Pathway work programme. With a greater focus on prevention and getting it right through early support, Children's Social Care Services will focus on offering accessible good quality support for those families that require specialist interventions.

## What does Hillingdon's vision mean for children and families in social care?

Our vision is to ensure that every child and family who comes to our attention has:

- Their needs and vulnerabilities assessed very quickly
- Any risks children face are quickly identified, and are reduced as a result of our involvement
- If families need medium-long term support, this is done by a capable social worker who has time to spend with them
- If we cannot achieve positive safe change for children in their family, we offer additional specialist support and are clear about our responsibilities and their rights
- If children cannot live safely in their family, we work with the wider family to ensure they remain within their community, and if this is not feasible we provide good quality alternative homes on a permanent basis
- We talk to and listen to children and families through our involvement and where possible act on their concerns.

To achieve the vision, this plan has been developed using the Transformation Children's Pathway work streams. It outlines the priority areas of activity required to improve the overall level of provision for children receiving services from social care. The plan also acknowledges the urgency required to deliver better outcomes for the children within Hillingdon. This plan enhances the work already completed as part of the Ofsted Improvement Plan 2014 and ensures that recent improvements are sustained and built upon.

In order to deliver this, Children's Social Care Services needs a stable workforce who are capable of undertaking good quality assessments, offer defined interventions, engage with families and partners, and deliver timely decision-making for children at critical points across the Children's Pathway.

This plan has the political, corporate and senior leadership needed to deliver the improvements required. This plan will be monitored through the Senior Management Team within Children and Young People's Services (CYPS) and overseen by the Performance Monitoring Board chaired by the Chief Executive.

Accountability for delivery of the plan has primarily been devolved to Assistant Directors who have responsibility for improving outcomes for their respective service areas.

**Note** - It is important to acknowledge that in August 2014 the level of risk in the Children's Social Work Team (CSWT) was deemed to be unacceptably high. A significant additional

amount of resource was committed to the service, coupled with the arrival of a new Senior Management Team within CYPS. This Leadership team is now firmly focused on driving forward service improvements.

# 2. Overarching priorities for 2015-16

- Deliver a successful recruitment plan coupled with the implementation of a flatter management structure as part of a wider effective workforce plan to ensure good practice management, training and supervision (see work stream 1 and 6).
- That the whole service maintains a relentless focus on good outcomes for children.
- Maintain good Triage, MASH, Social Work Teams to work with children and families at an early stage to prevent the need for further intervention where possible (see work streams 2 and 3).
- Deliver a range of good outcomes for LAC to be achieved through timely court intervention, focused care planning, and good participation from children and young people in their care planning (see work streams 4 and 5).
- Embed the Quality Assurance Framework to deliver good practice management, oversight, and good casework practice throughout the service (see work stream 7).
- Ensure good value for money by getting the spend over 2015-16 for CYPS in line with base budget, primarily by transitioning out of the Skylakes contract and reducing the number of agency / interim staff across the social care workforce (see work stream 1 and 6).

# 3. Work streams

There are 7 work streams that will deliver improvements to the specified services including a cross cutting work stream 'embedding new ways of working and improved practice management arrangements'. There are also interdependencies with projects led by Residents Services and these are identified and acknowledged within the work streams.

The actions identified in the plan are developed to ensure successful embedding of re-designed services through good social work practice. The plan's objective is to ensure that changes implemented are sustainable in the longer-term. The high level work streams that contain the specific actions that will deliver service improvement are:

- 1. Workforce development
- 2. Performance improvement work in Triage, MASH and CSWT
- 3. Defining new ways of working within the CSWTs
- 4. Improving outcomes for Looked After Children (LAC) and Young People
- 5. Improving the quality of Fostering & Adoption provision
- 6. Embedding new ways of working and improved practice management arrangements
- 7. Effective Quality Assurance

# Work stream 1: Workforce development

- a. HR Workforce and Organisational Development are leading on developing a Recruitment and Workforce Development plan. Improvements include the following:
- Updated website to enable prospective applicants to have a good understanding of what Hillingdon can offer and expectations of the role of a Social Worker.
- Applicant packs to contain all relevant information and guidance when applicants considering Hillingdon as their chosen workplace. Explanation contained in the pack of supervision, POD work, support etc.
- Recruitment process through to delivery to meet the needs of the service in line with the improvement plan.
- Induction process for every new worker to be embedded as standard practice, and to achieve 100% compliance with current staff receiving a refresher induction to update their knowledge.
- AYSE support to be embedded, with clear standards and requirements set out to encourage these newly qualified workers to remain in Hillingdon long-term.
- Social Work Pathway to be embedded to ensure career structure is supporting individual needs.
- b. The service is supporting this work stream. Improvements include the following:
- Supervision structures to be embedded to ensure 100% compliance and delivery, including recording and performance management processes to be clear and robust in dealing with competency issues.
- PADA reaches 100% completion on time and is robust in identifying current practices of the worker, identifying learning needs and having a SMART development plan to meet these needs.
- Management development plan to be completed for all managers to support their practice with clear measures of performance incorporated in their development plan / PADA.

# **Measurements of progress**

See HR Recruitment and Workforce Development plan to avoid duplication.

**Status of the work stream a**: In implementation via HR's Recruitment and Workforce Development plan.

**Status of the work stream b**: In implementation via action plan.

# Work stream 2: Performance improvement work in Triage, MASH and CSWT

This is the current range of activities from the Children's Social Work Teams (CSWT) with the support of the managed service Skylakes team. Which aims to stabilise the service by reducing caseloads and reviewing all the Children In Need (CIN) cases. There is a focus on closing cases where there has been little casework activity or making a clear plan for social work intervention on these cases, and ensuring timely decisions for children across the pathway. From November 2014, Skylakes will provide a referral / intake team for all new social care cases, and will ensure that they have an appropriate assessment within agreed timescales. The CSWT will work with cases post assessments and will use the additional capacity provided by Skylakes to review and reduce cases that have been in the service for a number of months.

### Outcomes of the work stream

All children accessing targeted social work services will receive a consistent and timely assessment intervention by:

- Improved and consistent decision-making by the Triage and MASH teams.
- Caseloads are to the standard level and in line with current resource capacity.
- Best Value is obtained from Skylakes team in that they deliver to contract showing consistent good performance and to an acceptable practice standard.
- No case to be open without a plan for over 6-8 weeks within the service.
- In 2015-16 a feasible benchmark of case duration for CIN and CP (Child Protection) will be able to be set, as well as step up and step down targets.

# **Measurement of initial progress (6 months)**

- Performance data showing an appropriate level of contacts and consistent conversion rate to referrals into Social Care.
- Performance data weekly target to reduce overall CIN cases by 25 (see model of impact on CIN cases), with weekly meetings with managers to review performance against target. Data-set has been designed to show CIN case trajectory across all teams including Skylakes.
- Service undertakes regular supervision audits and PADA reviews. (Residual Ofsted action).
- Contract oversight Performance Indicators are set and regular meetings are held on risks and issues. Partnership framework is established.
- Caseloads in the CSWTs to be in line with London AD standards document (average 15 for Duty and Assessment staff, 18 for CP / CIN and 14 for LAC).

This work stream's initial success will form the baseline to re-establish the Children's Pathway and will be a critical factor in staff re-engagement.

# **Measurements of progress (12 months)**

• Audits and data indicating consistent decision-making from Triage and Mash.

- There will be an increase in families stepping down at key points in social care (at contacts, post assessment and during CP / CIN work).
- All assessments to be completed within timescales. (Residual Ofsted Action).
- Audits of assessment indicate good quality, child's voice, and leading to quicker and better decision-making. (Residual Ofsted Action).
- CIN families remain in the service for an average of 5 months with the vast majority stepping down to early support.
- CP families remain in the service for 9-12 months with two thirds stepping down to early support and a third being stepped up.
- Pre-proceedings work will be delivered in an average of 12-14 weeks.

This work stream's continued success will form the baseline to deliver to Hillingdon's vision for children.

**Status of the work stream:** In implementation via action plan.

# Work stream 3: Defining new ways of working within the CSWTs

This work stream will review and improve the current operating model in order to realign the CSWT service with the Children's Pathway and strengthen the prevention model. Activities include:

- Utilising Skylakes to act as a referral and assessment team to explore if such an addition to the pathway model would maintain the improvements expected.
- Embed consistent thresholds in Triage and MASH in line with the Children's Pathway, and ensure these are tightly defined and managed.
- To understand and plan demand at key points from Triage to Permanency (service demand flow map).
- Triage to work with the Single Point of Contact project (being led by Residents Services interdependency).
- To focus on improving practice in key Ofsted priority areas: assessment, chronology, timeliness of decisions, and interventions for children.
- Define a private Fostering service with dedicated resource, and plan to increase referrals, and ensure all statutory regulations are met.
- Bring the specialist parenting assessment service into the current structure, expand its remit to include interventions, evaluation and increase work-flow, in line with new target for pre-proceedings work.
- Update transfer protocol to ensure consistent and smarter transfer process.
- Quality Assurance of process to ensure best practice and the voice of the child remains at the centre of our work with each family.
- Working with the whole service to promote a structured and sound service delivery model that is clearly understood by all and achievable in its implementation.
- Achieve stability by recruiting permanent staff in a phased manner throughout the year, implement new social work pathways and wider workforce planning (see separate recruitment plan).
- Focused work with the QA service including commissioning of training on good chronologies and assessment.
- Focused training and site bites on good quality assessments, chronologies (Residual Ofsted Action).
- Introduce Domestic Violence tools (CADA / Matrix) as part of assessment. (Residual Ofsted Action).
- Agree the future for the Parenting Assessment Service and work flow.
- Review the service model for asylum children aligned with wider transformation and funding arrangements.
- Snapshot of Emergency Duty Team to scope any issues and risks.

## Outcomes of the work stream

- Integration of the Skylakes resource into the Children's Pathway to deliver a service as well as release capacity for the CSWT to focus on performance improvement.
- Improved through-put of work from referral to social care planning to permanency, with a clear focus on legal planning and pre-proceedings work (Early Intervention, CIN, CP, LAC or Children's Pathway).
- Effective response to children and young people with clear outcomes that are achievable and timely.
- Good engagement with families in order for them to understand and take responsibility to promote change and in turn safeguard their own children.
- Implement the agreed recruitment plan and implement workforce planning.

# **Measurements of initial progress (6 months)**

- Skylakes and Hillingdon are able to embed a referral and assessment team that
  delivers early outcomes, and evidently contributes to the reduction of caseloads
  through CSWT1 and CSWT1, by creating capacity in these teams to close, step
  down and progress casework. The evaluation will feed into any further work on the
  Children's Pathway.
- A service demand flow map including demand and capacity will be established to ensure there is appropriate capacity at key points in the Children's Pathway.
- The resource is flexed and aligned with the transitional approach and dependent on recruitment.
- Private Fostering lead is identified, project group is set up, audit of current cases are completed with learning.
- The Parenting Assessment Service staff are brought into the Hillingdon structure, the remit is expanded with the placing of the specialist Mental Health Worker.
- There is an increase in Legal planning meetings, with an increase in families in pre-proceedings in line with making timely decisions for children.
- Case transfer panel is established, transfer check list (good practice) is used and cases are transferred at agreed points more consistently.
- Improvement in timeliness of assessments completed.
- A focused improvement project on assessment and chronology.
- Number of complaints will reduce and response time will improve.
- Partners feedback will be sought.
- Monthly case audits will have 100% compliance.
- We will meet our statutory obligations for the privately fostered children in the Social Work Service.
- Recruitment of first line managers is effective as we reduce 100% current agency staff in management positions to 40% or less.
- Aslyum and parenting assessment teams better defined.

# **Measurements of progress (12 months)**

- Percentage of work judged good or better 35% by the end March 2015, 50% by end September 2015, 80% by end March 2016.
- Private fostering referrals will increase.
- Audit of decision-making at front door and to ICPC (test thresholds) is planned for April 2015, which will give us up to date position re. consistency and areas for further improvement.
- Training roll out on assessments.
- All chronologies completed and of good quality.
- For families in pre-proceedings we work to a 12-14 week timescale to deliver more timely decisions for children.
- The timeliness and quality of assessments improve and this is evidenced by audits, feedback, staff feedback, supervision audits and timely step downs / step-ups.
- There will be an established mechanism to seek service user feedback, and findings will be part of the learning framework for staff.

Status of the work stream: In implementation via action plan.

# Work stream 4: Improving outcomes for Looked After Children & Young People

To ensure the Children in Care (CIC) teams are stabilised to deliver caseloads at a manageable level, which will assist in the implementation of good social work practice. A range of good outcomes for Looked After Children (LAC) to be achieved through timely court intervention, focused care planning and good participation from children and young people in their care planning. The work stream will therefore ensure that there is full and effective implementation of the Public Law Outline (PLO) that will see all children achieve a final care order and permanency plan within 26 weeks. All statutory requirements will be met and audits will provide evidence of good service user engagement within their care planning.

### Outcomes of the work stream

- All LAC cases will be allocated to ensure they receive good permanent outcomes within 12-18 months (return home, long term fostering, adoption, SGO (Special Guardianship Orders), connected persons).
- All cases will be worked as a 'whole service' with social workers coordinating
  interventions from the virtual school, designated health professionals, and other key
  agencies (SDQ, LAC reviews, LAC visits, PEPs, Health Assessments).
- Improve the LAC journey to make it more timely and embed good practice within the CIC and Young Person's Teams.
- Review the role of the Court Progression Officer to ensure all court proceedings to be concluded within the 26 week time scale (unless in exceptional circumstances the care process is extended by the Court).
- All care leavers will have a pathway plan and good EET and housing outcomes.
- Improve the level of engagement and consultation with LAC through better practice and roll out of Viewpoint to all LAC to involve them in their care planning.

This work stream's success will form the baseline to re-establish the Children's Pathway and will be a critical factor in staff re-engagement.

# **Measurement of progress (6 months)**

- Performance data weekly target to allocate all LAC cases, meet statutory reviewing and visiting targets, with weekly meetings with managers to review performance against target.
- Health, education and placement outputs demonstrate good outcomes for LAC.
- Monthly PLO reporting against 26 week target continue to reduce number of 'legacy cases' to final hearing and conclude proceedings. Ensure all current work started since October 2014 is concluded within 26 weeks.
- Successful interim recruitment to all social work and team manager posts and caseloads to be within the range of 14-16 cases per qualified social worker.

# **Measurements of progress (12 months)**

- Average caseloads remain within 14-16 cases per qualified social worker.
- All LAC cases allocated and children and young people have their statutory requirements met.
- 80% of audits and data indicating good with evidence of consistent decision-making in care planning and timely outcomes within the CIC teams.
- All Public Law Outline cases will be completed within 26 weeks (unless specified by the Court).
- 100% of care leavers will have a pathway plan with clear objectives
- Performance will be top quartile for EET and housing outcomes.
- 80% of audits of care plans indicate good quality, child's voice and leading to quicker and better decision-making.
- Looked After Children receive good outcomes within 12-18 months (return home, long-term fostering, adoption, SGO, Connected Persons).
- All pre-proceedings work will be delivered in an average of 14 weeks.

This work stream's continued success will form the baseline to deliver to Hillingdon's vision for children.

**Status of the work stream:** In implementation via action plan.

# Work stream 5: Improving the quality of Fostering & Adoption provision

To change the current operating model in order to realign the Fostering & Adoption services with the Children's Pathway, to deliver good and stable placement provision and permanency outcomes for LAC. The work stream will ensure that the service has sufficient numbers of placements to provide stable, secure and safe placements for children and young people who are looked after. The service will also deliver extra support to post permanence to ensure successful outcomes for those children in adoption, placed under SGOs (Special Guardianship Orders) and long-term foster placements. Activities include:

- Prototype the 'managed service project' (provided by Coram & HCL) to allocate all backlog and new carer assessments until the end of May 2015, and to ensure no drift or further backlogs within the service.
- Evaluate the 'managed service' project to consider if such a model can be adapted or expanded to deliver and maintain the improvements expected from the initial project, which will include measuring the difference in performance (quality of assessments and improved throughput) between managed service prototypes and Hillingdon's service.
- Use the evaluation to plan for demand at key points within the Fostering and Adoption service and implement a 'best value' placement service for the LAC model.
- Implement strong management oversight and evidence of improved permanence outcomes for LAC in Hillingdon.
- Arrange staff and carer workshops to ensure full consultation and explore staff experience and views of current operating model, possible changes and proposals.
- Improved QA assurance and independent review of carers in line with national standards and good practice.
- Improve the management and coordination of the Adoption & Fostering Panel.

#### Outcomes of the work stream

- Allocation and completion of all outstanding assessments and new assessments coming into the service between the start of December 2014 and end of May 2015, through the implementation of the prototype managed service.
- Deliver top quartile adoption and permanence outcomes for LAC in Hillingdon.
- Increase in the number of good quality Hillingdon foster placements available to LAC.
- Reduce the number of Independent Foster Agency (IFA) placements used by LAC in Hillingdon.
- Sufficient good quality permanent placements options (return home, long-term fostering, adoption, SGO, connected persons) for LAC children in Hillingdon.
- Improve the number of LAC placed within their own community (inside 20 mile radius).

Timely administration and management of the Panel process.

## **Measurement of progress (6 months)**

- Implementation of the 'managed service project' (provided by Coram & HCL) to allocate all assessment activity as outlined in the project above.
- Performance data weekly target to allocate all carer assessments within statutory and good practice guidance.
- Re-design the service structure to meet the new service model requirements.
- Improved permanent placement outcomes for LAC in Hillingdon improvement in the performance as measured by the national adoption score card.
- Reduction in the number of children moved further than 20 miles from their home address to minimum - less than 10% of LAC (36).
- QA framework provides evidence of good quality social work practice on all assessments undertaken by Coram (80% judged good or better and no inadequate).

## **Measurements of progress (12 months)**

- Fully implement the new service model and ensure fully staffed.
- Maintain allocation of all assessments to meet national standards of quality and timeliness - 100% within timescale.
- Audits and data indicating consistently good quality analysis of assessments and timely presentation to Panel (80% good or better and no inadequate judgements).
- Number of in-house foster placements to increase to 110 by April 20116.
- The proportion of IFA placements to be less than 40%.
- Reduction in the number of children moved further than 20 miles from their home address to minimum - less than 10% of LAC (36).
- Looked After Children receive good outcomes within 12-18 months (return home, long-term fostering, adoption, SGO, Connected Persons).

This work stream's continued success will form the baseline to deliver to Hillingdon's vision for children.

Status of the work stream: In implementation via action plan.

# Work stream 6: Embedding new ways of working and improved practice management arrangements

To improve the overall standard of practice and social work intervention across Children's Social Care Services. The aim is to deliver effective, timely and safe service interventions for the most vulnerable children in our community. This will include the strengthening of practice management arrangements and the level of professional supervision, training and guidance offered to all social work staff. The service will improve the level of practice through consistent management oversight, and practice recording on Protocol electronic recording system. Activities will include:

- To support better outcomes the staffing model and any changes to be aligned with delivery demand (service demand flow map).
- To support best practice the staffing and casework model will provide stable and balanced (represented by the London ADs work on Standards as well as Hillingdon's view of average caseloads minus one).
- To ensure good management oversight and support of good practice, achieve a flatter structure to deliver clearer accountability by expanding the number of team managers with small (maximum 6) teams of social workers.
- Invest in expert advanced practitioner roles in line with the Munro principle to build practice capability at the point of delivery.
- Invest in staff professional development and clearer alignment with service requirements.
- All changes to be made with transparency, consultation and care.

#### Outcomes of the work stream

This will deliver a social work structure built around a model of one team manager with a maximum of 6 social workers to supervise. This will strengthen accountability for good practice within the teams and will maintain the POD structure. This model will also invest in the advanced practitioner role to work with the QA service to improve practice quality, and offer practice leadership in line with the POD model. It will be aligned with workforce planning and have clear social work pathways with an embedded training needs analysis.

Effective accountability and management oversight of practice improvement activity.

# Measurement of progress

- Simplified practice management structure in place April 2015.
- The average case load across the service remains at or below 18 per qualified social worker (in accordance with the service requirement's).
- All social workers receive regular monthly supervision.

- Monthly QA audit report percentage of work judged good or better 35 % by end March 2015, 50% by end September 2015, 80% end March 2016.
- Performance data weekly target to allocate all CIN, CP and LAC cases, meet statutory reviewing and visiting targets, with weekly meetings with managers to review performance against target. In 2015-16 a feasible benchmark of case duration for CIN and CP will be able to be set, as well as step up and step down targets, and we should achieve the 26 week proceedings target to ensure more timely decisions for children.

**Status of the work stream:** In implementation via action plan.

# **Work stream 7: Effective Quality Assurance**

The work stream will ensure the full and effective implementation of the QA Framework, embedding a consistent approach to improving the quality of practice to 'good' as a norm and better outcomes for children. To ensure demonstrable measurable outcomes for children and their families with all performance information linked into effective mechanisms for achieving change. The QA framework will support managers to have a strong oversight of the practice and outcomes within their teams. Activities include:

- Implementation of the new QA Framework by 1st April 2015.
- Collation and analysis of Quality Assurance systems across the service, incorporating improvements achieved through good practice and learning to inform future planning and promote improvement. This will include:
  - Court Tracker
  - o Fostering Panel Advisor
  - o Child Sexual Exploitation (CSE) Prevention Manager
  - MASH process
  - Transfer and allocation process
  - o Practice Development Mentor role
  - o Dispute resolution process
- Embedding and improving the Signs of Safety CP Conference process to ensure consistent multi agency involvement with SMART plans being achieved.
- Implementation of effective Independent Reviewing Service developing a robust constructive challenge, mid-point reviewing and dispute resolution process.
- Implementation of tracking and improving completion of all CP Conferences and LAC reviews to be completed within statutory timescales.
- Voice of the child being evident throughout CP and LAC processes through relaunch of Viewpoint by April 2015.
- Review and implementation of new ways of working within the Local Safeguarding Children's Board (LSCB) ensuring consistent and robust multi agency responsibility and ownership.
- Implementation of Practice Standards in each area of the service to support workers in defining their role and expectations that are clearly promoted.
- Development of the Independent Domestic Violence Advocacy (IDVA) Service across Hillingdon supported by the MOPAC initiative, following review by the end of July 2015. To include areas of support being increased in MASH, Housing and Health.
- Development of the YIDVA (Young People's IDVA service) to ensure peer on peer abuse is tackled consistently.
- FGC (Family Group Conference) Service will be developed to offer FGCs at any point along the CYPS Social Care continuum to prevent case escalation and further statutory intervention.

 Development of a CSE Strategy, Missing Person & Runaway Protocol to be implemented by the end of March 2015. Using learning from a recent joint operation with the Metropolitan Police which led to a successful conviction, and developing the new role of Child Sexual Exploitation Prevention. A local CSE strategy addressing CSE in Hillingdon which consists of key strategic objectives in line with 'Pan London Operating Protocol' to include multi agency partners.

### Outcomes of the work stream

- An approach orientated around outcomes rather than processes will support
  practice managers to embed scrutiny and practice learning from audit into daily
  supervision and management in a rigorous way.
- Improved QA Framework that drives improvement and learning across the service promoting Individual, Team and Service Development Plans.
- Evidence of good practice models identified and implemented across the service as appropriate.
- A robust Reviewing Service that quality assures consistently promoting good practice and challenging practice areas that require improvements.
- The child's journey is evident that their views are considered in all aspects of decision making.
- Structure and professional membership of the LSCB will be appropriate and will drive improvements in multi agency working across Hillingdon.
- A robust and effective IDVA / YIDVA service that works with all services providing support in areas of domestic abuse, thus responding and sharing skills to address a wider cross section of Hillingdon in a more collaborative way.
- FGC will reach prevent step up or escalations of concerns by targeting lower level case work.
- A 'CSE strategy' to be progressed to enable all professionals to develop confidence and practice when identifying and responding to CSE concerns.

# **Measurement of progress (6 months)**

- Launch the new QA Framework in April 2015.
- Percentage of work judged good or better 35% by the end March 2015, 50% by end September 2015.
- Monthly Quality Assurance findings will drive improvement across the service developing clear action plans that are SMART.
- CP Conferences and LAC reviews are completed within statutory timescales (95%)
- LSCB responsibility in relation to safeguarding will be evidenced through audit and findings each quarter.
- Implement Dispute Resolution Process with appropriate outcomes achieved in relevant timescales that improve outcomes for children and young people.
- Implementation of Mid-point Reviews for care plans and child protection plans.
- Viewpoint will see increased response to completing and evidencing child's views at specific meetings and assessments and providing feedback on the quality of practice.

- IDVA service performance measures will indicate an improved and more targeted service.
- Higher rate of FGC referrals and good outcomes to prevent escalation to tier 3 services or becoming looked after.
- Development of CSE data in order to measure the level of concerns in line with national and local trends, with clear targets to be measured with the 'action plan' being reviewed quarterly and timescales measured against effectiveness. An annual review with new targets set as required. An action plan progress update to be reported to the LSCB board twice annually.

# **Measurement of progress (12 months)**

- Fully embedded QA Framework.
- Percentage of audit compliance 100%.
- 80% of audits indicate good quality practice and evidence of the child's voice in all assessments and plans by end of March 2016.
- 80% of all social work judged good or better by end of March 2016.
- Structured Review of Performance and Monthly Quality Assurance findings will continue to drive improvement across the service developing clear action plans that are SMART.
- Fully embedded Mid-point Review and Dispute Resolution Process
- 100% of all CP Conferences and LAC reviews are completed within statutory timescales.
- 100% of CSE cases tracked and all have effective risk assessments and plans recorded.

Status of the work stream: In implementation via action plan.

# Appendix 1 - Children's social care improvement action plan 2014-16

See separate action plan.



# Children's Social Care Service Improvement Action Plan 2015-16

This action plan is part of the Children's Social Care Service Improvement Plan, and is designed to progress the seven priority work stream targets. This plan will be monitored at regular intervals by the following management and corporate bodies:

- CYPS service manager meeting (Fortnightly)
- CYPS SMT (Monthly)
- Children's Services Performance Monitoring Board (Monthly)
- Deputy Leader of the Council and Cabinet Member for Education and Children's Services meeting (Monthly)
- Children, Young People and Learning Policy Overview Committee (Quarterly)
- Corporate Parenting Board (work streams 4 & 5 2 monthly)
- Local Safeguarding Children's Board (work streams 2 & 3 2 monthly)

# Version 1 March 2015

Work stream 1: Workforce development - Please note that Human Resources and Learning & Development will complete this work stream when the Transition plan is agreed by the Leader. See HR Recruitment roadmap for information.

|   |   | ;      | 1                |              |  |                         |   |
|---|---|--------|------------------|--------------|--|-------------------------|---|
|   |   | Action | Action / Process | SS           |  | Improvement Ta          | Improvement Targets and Outcomes                      |
| Ref   | Action  | Lead   | Start            | End          | Progress - Actions   | Performance             | Progress - Outcomes                                   |
|   |   |        | Date             | Date         |  | Measures and Milestones | and Key Targets                                       |
| <del>1.</del> <del>1.</del> <del>1.</del> <del>1.</del> <del>1.</del> <del>1.</del> <del>1.</del> <del>1.</del> | Update website to enable prospective applicants to have a good understanding of what Hillingdon can offer and expectations of the role of a Social Worker | 光      | April 2015       | Mar<br>2016  | Meetings held with Penna who specialise in recruitment marketing. Focussing on developing the Council's 'employment brand'. Initially we will develop with Penna a strong proposition clearly articulating the Council's successes, direction, delivery model and competitive remuneration. This will be communicated on a new recruitment portal or 'micro-site' which will later be used for other recruitment across the Council. | TBC by HR               | On hold until Transition<br>plan agreed by the Leader |
| 2.  | Applicant packs to contain all relevant information and guidance when applicants considering Hillingdon as their  | 光      | April 2015       | July<br>2015 | A new Social Worker Job Profile has been developed clearly defining career progression and professional development within the Council. This will be a key message in the recruitment  | TBC by HR               | On hold until Transition<br>plan agreed by the Leader |

|  | On hold until Transition plan agreed by the Leader   | All staff inducted   |
|--|--|--|
|  | TBC by HR  | 100% of new workers attended induction programme   |
| campaign and we will invite social workers to 'grow your professional career at Hillingdon'. | The Council is in a better place from which to recruit with clear direction, managed caseloads, competitive remuneration and a commitment to continued professional development all supporting the Council's offer to social workers. Plan to use Sanctuary, who specialise in social work recruitment in the UK, and HCL who have a dedicated overseas recruitment network. | A 4 day induction programme was launched in January 2015. The programme runs every month and invites / expects delegates to attend through the New Starters Form process or from Managers booking existing staff onto the programme. |
|  | Mar 2016   | goin<br>g  |
|  | May 2015   | Jan 2015   |
|  | <b></b>  | L&D  |
| chosen workplace. Explanation contained in the pack of supervision, POD work, support etc.   | Recruitment process through to delivery to meet the needs of the service in line with the improvement plan   | Induction process for every new worker to be embedded as standard practice, and to achieve 100% compliance with current staff receiving a refresher induction to update their knowledge  |
|  | 1.3  | 4.   |

|   | 100% of NQSW's remain in social work posts, 2 years after permanent social worker qualifying posts in Hillingdon, and creating opportunity to grow future managers and create a stable workforce  | TBC by L&D  TBC by L&D   | 100% Compliance in All staff receiving timely, the delivery of good quality supervision in line with the Hillingdon Supervision Policy                            |
|---|---|--|---|
|   |   | TBC by   |   |
|   | 100% of NQSW's remain in social work posts, 2 years after qualifying  | TBC by L&D   | 100% Compliance in<br>the delivery of<br>supervision  |
| The number of delegates has increased over the last 3 months. To date all delegates that have attended have been either agency staff or student social workers. | Over the next month the work will include a review of the programme and processes with a view to modifying and enhancing the offer and support to ASYE, which will include an escalation processes where gaps in that support to NQSW's are identified. | TBC by L&D   | All managers to provide supervision to staff in line with Hillingdon's Supervision Policy.  All Senior Managers to ensure that supervising managers have received |
|   | On-<br>goin   | TBC<br>by<br>L&D   | Sept 2015   |
|   | Mar<br>15   | TBC<br>by<br>L&D   | April 2015  |
|   | L&D   | L&D  | AD Children's Safeguardin g and AD CiC, Permanenc y &   |
|   | AYSE support to be embedded, with clear standards and requirements set out to encourage these newly qualified workers to remain in Hillingdon long-term   | Social Work Pathway to be embedded to ensure career structure is supporting individual needs | Supervision structures to be embedded to ensure 100% compliance and delivery, including recording and performance management                                      |
|   | 1.5   | 1.6  | 1.7   |

|   | processes to be clear and robust in dealing with  | Children's resources   |               |            | supervision induction and training within the first two weeks of employment  |  |  |
|---|---|--|---------------|------------|--|--|--|
| <del>6</del> <del>6</del> <del>8</del> | PADA reaches 100% completion on time and is robust in identifying current practices of the worker, identifying learning needs and having a SMART development plan to meet these needs | AD Children's Safeguardin g and AD CiC, Permanenc y & Children's resources | April 2015    | April 2016 | All managers to complete PADAs with all members of their teams.  All Senior Managers to ensure that supervising managers have received PADA induction and training within the first two weeks of employment (agency or permanent). | PADA reaches 100% completion                           | All staff have a PADA that clearly identifies individual, team and service priorities for that member of staff and details an individual development plan ensuring continuous professional development |
| 6.1   | Management development plan to be completed for all managers to support their practice with clear measures of performance incorporated in their development plan / PADA               | AD Children's Safeguardin g and AD CiC, Permanenc y & Children's resources | April<br>2015 | April 2016 | All Senior Managers to complete Management development plans with their managers.  | 100% of managers to have a management development plan | All managers have a clear plan of support and career progression   |

Work stream 2: Performance improvement work in Triage, MASH and CSWT

| Improvement Targets and Outcomes | Progress – Outcomes and<br>Key Targets    | <ul> <li>Data around Key Indicators as recommended by The London Chief Exec. Self-Improvement Board is in line with statistical neighbours</li> <li>Audits and data indicating consistent decision-making from Triage and Mash. Audit of decision- making planned for April 2015</li> <li>On going partner discussion regarding thresholds and delivery of training to partners to explore social care decision making and the MASH concept</li> </ul> |
|----------------------------------|---|--|
| Improvement T                    | Performance<br>Measures and<br>Milestones | <ul> <li>Data around following Key Indicators as recommended by The London Chief Exec. Self-Improvement Board line is collated</li> <li>Rate of assessments per 10,0010,000 of the CYP population</li> <li>Rate of section 47 enquiries per 110,000 of the CYP population.</li> <li>% of referrals leading to the provision of a social care service (as defined by the child becoming a child in need).</li> </ul>                                    |
|                                  | Progress - Actions                        | <ul> <li>Performance data         <ul> <li>(demand and capacity data set) is collated and reviewed regularly around level of contacts, conversion rate to referrals into Social Care</li> <li>Service undertakes regular supervision audits and PADA reviews</li> </ul> </li> <li>Manager audits of social workers decision making and multi agency discussion and agreement of case progression.</li> </ul>   |
| SS                               | End<br>Date                               | April 2016   |
| Action / Process                 | Start<br>Date                             | April 2015   |
| Actio                            | Lead Asst Director Children's Social Care | Service<br>Manage<br>r Triage/<br>MASH   |
|                                  | Action                                    | Improved and consistent decision-making by the Triage and MASH teams   |
|                                  | Ref                                       | 2.1  |

|  | <ul> <li>To ensure Social Workers are supported with manageable caseload and the work undertaken on the cases is undertaken in a timely manner with good outcomes for families.</li> <li>There is flexible use of agency staff across the service which is aligned with demand.</li> </ul> |
|--|--|
| % families no longer<br>receive a statutory<br>service and not<br>re-referred to<br>statutory social work<br>for 6 months.   | Weekly data set indicate that all Social Workers have an average caseload of 18 children.  |
| Protocol between Children<br>Social Care and Early<br>Intervention service to be<br>rolled out to all managers<br>and staff within the MASH,<br>Assessment and Social<br>Work Team | <ul> <li>Benchmark for caseloads agree agreed in line with London Standards document:         <ul> <li>18 for CP/CIN (CSWT) service</li> <li>Resourcing and planning will be in line with above and demand.</li> <li>100% allocation of all statutory cases</li> </ul> </li> </ul>         |
| On-<br>going   | On-<br>going   |
| April<br>2015  | Jan<br>2015  |
| Service<br>Manage<br>r Triage/<br>MASH   | Service<br>Manage<br>r<br>Child in<br>Need   |
| There will be an increase in families stepping down at key points in social care (at contacts, post assessment and during CP / CIN work) - seen via demand and capacity data set   | Average caseloads - 18 cases per qualified social worker   |
| 2.2  | 2.3  |

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| <ul> <li>Assessment Service is established and resourced.</li> <li>Regular risks and issues meetings are held.</li> <li>Performance data is collated and shows achievement of indicators.</li> <li>The added capacity provided by Skylakes will alleviate pressures in the social work teams. Results will be seen in the reduction of 'backlog' cases and new work being completed more frequently within timescales.</li> <li>Improved throughput of work from referral to social care planning to permanency, with a clear focus on legal planning and pre-proceedings work (Early Intervention, CIN, CP, LAC or Children's Pathway).</li> </ul> |
|---|
| Key Indicators and delivery model is agreed and delivered:  • Implementing a 5 week duty service that will undertake duty tasks and assessments of all children in need. • Delivering 100% of assessments within 45 days max with an average of 30 days per assessment. • Delivering 100% of ICPC within 15 days. • %families no longer receive a statutory service and not re-referred to statutory social work for 6 months.  |
| Performance Indicators are set and regular meetings are held on risks and issues. Partnership framework is established.   |
| April •   |
| Nov<br>2014   |
| AD Children's Social Care   |
| Best Value is obtained from Skylakes team in that they deliver to contract showing consistent good performance and to an acceptable practice standard   |
| 4.2   |

Work stream 3: Defining new ways of working within the CSWTs

|  |                     | Actio                  | Action / Process | ess   |   | Improvement T                        | Improvement Targets and Outcomes                |
|--|---------------------|------------------------|------------------|-------|---|--------------------------------------|---|
|  | Action              | Lead                   | Star             | End   | Progress - Actions                          | Performance                          | Progress - Outcomes and                         |
|  |                     | Asst                   | +                | Dat   |   | Measures and                         | Key Targets                                     |
|  |                     | Director<br>Children's | Date             | Ф     |   | Milestones                           |   |
|  |                     | Social<br>Care         |                  |       |   |                                      |   |
| <del>                                     </del> | Improve the quality | Service                | April            | April | Focused improvement on                      | 100% compliance in                   | <ul> <li>Social work assessments</li> </ul>     |
|  | of social work      | Manage                 | 2015             | 201   | assessment standards has                    | team managers                        | contain clear analysis and                      |
|  | assessments         | _                      |                  | 9     | commenced with the                          | undertaking audits.                  | informed judgements on                          |
|  |                     | Child in               |                  |       | recruitment of two practice                 |                                      | intervention models to be                       |
|  |                     | Need                   |                  |       | development coordinators                    | Case audits show                     | used with families                              |
|  |                     |                        |                  |       | who have commenced                          | improvement in                       | <ul> <li>Assessments reflect the</li> </ul>     |
|  |                     |                        |                  |       | work with individual                        | grading:                             | child's voice and social                        |
|  |                     |                        |                  |       | practitioners who have                      | <ul><li>35% by March</li></ul>       | work engagement with the                        |
|  |                     |                        |                  |       | been identified by                          | 2015                                 | family and partner                              |
|  |                     |                        |                  |       | managers as needing                         | <ul> <li>50% by Sept 2015</li> </ul> | agencies  |
|  |                     |                        |                  |       | guidance.                                   | <ul> <li>80% by March</li> </ul>     | <ul> <li>Improved throughput of</li> </ul>      |
|  |                     |                        |                  |       |   | 2016                                 | work from referral to social                    |
|  |                     |                        |                  |       |   |                                      | care planning to                                |
|  |                     |                        |                  |       |   | <ul> <li>100% supervision</li> </ul> | permanency, with a clear                        |
|  |                     |                        |                  |       |   | is delivered and                     | focus on legal planning                         |
|  |                     |                        |                  |       | <ul> <li>Managers are trained to</li> </ul> | recorded to staff                    | and pre-proceedings work                        |
|  |                     |                        |                  |       | provide effective case                      | <ul><li>% of children</li></ul>      | (Early Intervention, CIN,                       |
|  |                     |                        |                  |       | management and reflective                   | becoming subject                     | CP, LAC or Children's                           |
|  |                     |                        |                  |       | supervision and provide                     | to a child                           | Pathway).                                       |
|  |                     |                        |                  |       | clear decision making.                      | protection plan per                  | <ul> <li>All Case records to contain</li> </ul> |
|  |                     |                        |                  |       |   |                                      | up to date chronologies.                        |

| An assessment training programme to be commissioned from the QA service and rolled out to all social work practitioners.   | PADA targets to be rolled<br>out to all staff. Checks are<br>undertaken to ensure that<br>PADA's have been signed<br>off.                                   | <ul> <li>Protocol outlining interface between Early Intervention Service and Children Social Care is rolled out and targets agreed.</li> <li>TAF provision and community based resources being utilised more frequently.</li> </ul> |
|--|---|---|
| <ul> <li>10.000 is in line with SN.</li> <li>Supervision Audit and Staff surveys indicate high quality supervision is being delivered and staff report its benefit.</li> </ul> | By May 2015 all staff in the Children & Young Peoples team have a PADA in place, which will have expected priorities by role in line with this action plan. | <ul> <li>%families no longer receive a statutory service and not re-referred to statutory social work for 6 months.</li> <li>TAF provision and community based resources being</li> </ul>   |
| Practice improvement<br>emphasis to be on<br>assessments and relaunch<br>of chronologies.  | All staff with have a PADA completed in line with the targets set.  | Ensure that practitioners     and partner agencies are     clear about the availability     of services that can offer     support and assistance to     children & families in the     community.                                  |
|  | on-goin   | Goin  |
|  | April 2015  | April 2015  |
|  | Service<br>Manage<br>r<br>Child in<br>Need  | Service<br>Manage<br>r<br>Child in<br>Need  |
|  | Improve social care staff training and development  | Social care offer   |
|  | 3.2   | 3.3   |

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| <ul> <li>Referrals received into</li> </ul> | children's services are | appropriate for statutory | intervention.     | <ul> <li>Re-referral rates are</li> </ul> | reduced and in line with              | statistical neighbours. | <ul> <li>Staff, families and</li> </ul> | partners in feedback and | surveys are clear about | our involvement and there           | is an agreed plan which is            | outcome focussed and      | time-bound.                        | <ul> <li>Training on</li> </ul> | pre-proceedings work to | be rolled out by Court | Trackers and others in first   | quarter of 2015. |                   |                     |                     |                    |                              |              |             |  |
|---|-------------------------|---------------------------|-------------------|---|---------------------------------------|-------------------------|---|--------------------------|-------------------------|-------------------------------------|---------------------------------------|---------------------------|------------------------------------|---------------------------------|-------------------------|------------------------|--------------------------------|------------------|-------------------|---------------------|---------------------|--------------------|------------------------------|--------------|-------------|--|
| utilised more                               | frequently.             |                           | Step -up and Step | Down data indicates:                      | <ul> <li>CIN cases average</li> </ul> | 6 month                 | <ul> <li>CP cases average</li> </ul>    | 9 -12 months in          | length                  | <ul> <li>Pre-proceedings</li> </ul> | work is 12-14                         | weeks average             | <ul> <li>An increase in</li> </ul> | Step down post                  | assessment and          | intervention.          | <ul><li>%families no</li></ul> | longer receive a | statutory service | and not re-referred | to statutory social | work for 6 months. | <ul><li>There is a</li></ul> | reduction in | complaints. |  |
|   |                         |                           |                   |   |                                       |                         |   |                          |                         |                                     | <ul> <li>Service Framework</li> </ul> | outlining length and type | of involvement is rolled out       | to staff                        |                         |                        |                                |                  |                   |                     |                     |                    |                              |              |             |  |
|   |                         |                           |                   |   |                                       |                         |   |                          |                         |                                     |                                       |                           |                                    |                                 |                         |                        |                                |                  |                   |                     |                     |                    |                              |              |             |  |
|   |                         |                           |                   |   |                                       |                         |   |                          |                         |                                     |                                       |                           |                                    |                                 |                         |                        |                                |                  |                   |                     |                     |                    |                              |              |             |  |

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| Training to be rolled out by QA service on DV tools March onwards   | Once service is fully staffed targets for assessments to be rebased.  |
|---|---|
| <ul> <li>Improved signposting for DV families from CSC.</li> <li>An increase in orders against perpetrators or legal remedies.</li> <li>Social Workers and audits indicate an improvement in assessment quality.</li> </ul>   | Service to refresh protocol and offer.     An increase in parenting assessments being completed in -house for all pre-proceedings families unless a clinical/medical assessment is required.  |
| <ul> <li>MASH partnership to deliver DV specialist role to MASH to identify and enhance service offered to families identified with DV risk.</li> <li>Introduction of CAADA-DASH Risk Identification tool to the Assessment and SW teams.</li> <li>Introduction of Barnardo's DV Risk Identification Matrix.</li> </ul> | <ul> <li>Recruit to the vacant post and move the SWW         (mental health) to add value to the service.</li> <li>Improve the output of the current service by reducing the completion timescales of assessments.</li> <li>Work with the service to introduce other assessments and</li> </ul> |
| Sept 201  | April<br>2016   |
| April 2015  | April 2015  |
| Service Manage r Triage/ MASH & Service Manage r Child in   | Service<br>Manage<br>r<br>Child in<br>Need  |
| Refresh service off on DV   | Provide effective parenting assessment service  |
| 1   |   |

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Work stream 4: Improving outcomes for LAC & Young People

|     |                        | V:40 V                 | 7                |       |                                | F 199                 |                                  |
|-----|------------------------|------------------------|------------------|-------|--------------------------------|-----------------------|----------------------------------|
|     |                        | ACIIC                  | Action / Process | ess   |                                | Improvement           | Improvement Targets and Outcomes |
|     | Action                 | Lead                   | Start            | End   | Progress - Actions             | Performance           | Progress – Outcomes and          |
|     |                        | Asst                   | Date             | Date  |                                | Measures and          | Key Targets                      |
|     |                        | Director<br>Children's |                  |       |                                | Milestones            |                                  |
|     |                        | Social<br>Care         |                  |       |                                |                       |                                  |
| 4.1 | All LAC cases will be  | Service                | April            | On-   | Interim recruitment to social  | Weekly data set -     | Weekly data monitoring on        |
|     | allocated to ensure    | Manage                 | 2015             | going | work and team management       | 100% allocation LAC   | allocated cases.                 |
|     | that all statutory LAC | rLAC                   |                  |       | grades in the autumn 2014      |                       | Monthly meeting                  |
|     | requirements are       |                        |                  |       | has been successful. All       | 100% of LAC visited   | with the Case Progression        |
|     | met.                   |                        |                  |       | statutory posts are filled and | within statutory      | Manage                           |
|     | receive good           |                        |                  |       | caseloads are within the       | timescales.           |                                  |
|     | permanent outcomes     |                        |                  |       | service average (14 for CiC    |                       |                                  |
|     | within 12-18 months    |                        |                  |       | teams).                        | Low numbers of        |                                  |
|     | (return home, long     |                        |                  |       |                                | children missing from |                                  |
|     | term fostering,        |                        |                  |       | Statutory indicator set        | care <5               |                                  |
|     | adoption, SGO          |                        |                  |       | demonstrates improvement in    |                       |                                  |
|     | (Special               |                        |                  |       | statutory visiting and PLO     |                       |                                  |
|     | Guardianship           |                        |                  |       | time scales.                   |                       |                                  |
|     | Orders), connected     |                        |                  |       |                                |                       |                                  |
|     | persons).              |                        |                  |       |                                |                       |                                  |
| 4.2 | Average caseloads      | Service                | April            | On-   | To ensure Social Workers are   | Weekly data set:      |                                  |
|     | remain within 14 -16   | Manage                 | 2015             | going | supported with manageable      |                       |                                  |
|     | cases per qualified    | rLAC                   |                  |       | caseload and the work          | Average caseload for  |                                  |
|     | social worker          |                        |                  |       | undertaken on the cases is     | Children in Care      |                                  |
|     |                        |                        |                  |       | undertaken in a timely         | Teams = 14            |                                  |
|     |                        |                        |                  |       | manner.                        |                       |                                  |
|     | -                      |                        |                  |       |                                |                       |                                  |

|  | To ensure services to LAC improve and support children to achieve their aspirations   |   |
|--|---|---|
|  | Data Monitoring- 100% allocation = all 16 plus open cases 100% pathway plans = All care leavers   | Corporate manager data:  Milestones for audited cases:  March 15 - 35%  Sept 15 - 50%  March 16 - 80%   |
| March 2015 = average caseload of 14 children | Personal Advisor will be allocated to all LAC YP over the age of 16 years old. All care leavers will have an effective Pathway Plan March 2015 = 85% care leavers have a Pathway Plan | All LAC children should be offered an advocate to ensure they have representation independent to Social Work - see participation.  Case audits will demonstrate evidence of improved child and young person engagement through case recording.  Team training in planned to ensure services to LAC improve and support children to achieve their aspirations. |
|  | Dec 2015  | going   |
|  | April 2015  | April 2015  |
|  | Service Manage r LAC & Manage r Children & Young People   | Service<br>Manage<br>r LAC  |
|  | All LAC children over the age of 16 years old will have a Personal Advisor allocated  | Evidence of child or young person participation in their care planning for LAC and care leavers   |
|  |   | £.  |

|  | To ensure all care plans are robust to demonstrate good outcomes for LAC children   | Ensure all children who are LAC and not meeting their milestones are offered 1-2-1 tuition from their pupil premium  |
|--|---|--|
|  | Court outcomes and LAC reviews:  The average of PLO cases to be concluded = 26 weeks  100% of LAC reviews completed within timescale  Milestones for audited cases:  March 15 - 35%  Sept 15 - 50%  March 16 - 80%  | Updates from Data and weekly Performance meetings; 100% ePEPs in place for all year 3 and above LAC.   |
| All Social workers to ensure that the child's voice is reflected in the Care/Pathway plan by detailed recordings | All Care plans are being audited by SM and the case progression manager.  There is full compliance with the case auditing framework.  The Public Law Outline (PLO) has been successfully implemented resulting in a reduction from 57 to 34 weeks duration from application to final order. | Regular meetings have been established to develop strong working relationships between the CiC teams and the virtual school.  Work underway to implement effective ePEPs and school attendance monitoring. |
|  | 2015<br>2015  | Dec 2015   |
|  | April 2015  | Jan 2015   |
|  | Service<br>Manage<br>r LAC  | Service<br>Manage<br>r LAC &<br>VHT  |
|  | Effective management oversight is in place leading to better and more timely decision-making  | Health and education placement outputs demonstrate good outcomes for LAC   |
|  | 4.  | 5.4  |

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Work stream 5: Improving the quality of Fostering & Adoption Provision

| Improvement Targets and Outcomes | Progress - Outcomes | and Key Targets |                        |             | <ul> <li>Deliver top quartile</li> </ul>       | adoption and               | fostering                                   | permanence       | outcomes for LAC                             | <ul> <li>Weekly target to</li> </ul> | allocate all carer     | assessments within | statutory and good | practice guidance | <ul> <li>Sufficient good</li> </ul> | quality permanent | placements options | (return home, | long-term fostering, | adoption, SGO, | connected persons)                  | for LAC children in | Hillingdon.      | <ul> <li>Timely permanency</li> </ul> | outcomes achieved   | for LAC |
|----------------------------------|---------------------|-----------------|------------------------|-------------|--|----------------------------|---|------------------|--|--------------------------------------|------------------------|--------------------|--------------------|-------------------|-------------------------------------|-------------------|--------------------|---------------|----------------------|----------------|-------------------------------------|---------------------|------------------|---------------------------------------|---------------------|---------|
| Improvement Tai                  | Performance         | Measures and    | Milestones             |             | <ul> <li>Outstanding</li> </ul>                | assessments                | presented to                                | Adoption and     | Fostering Panel                              | for approval                         | within 6 months        | Coram project      | • New              | assessments       | presented to                        | Adoption and      | Fostering Panel    | in line with  | statutory            | guidelines     | <ul> <li>ICS/Performance</li> </ul> | Intelligence Team   | monthly data for | approval of                           | carers in line with |         |
|                                  | Progress - Actions  |                 |                        |             | <ul> <li>29 outstanding assessments</li> </ul> | allocated to Coram         | <ul> <li>HCL manager and Kinship</li> </ul> | assessor in post | <ul> <li>Overview and scrutiny of</li> </ul> | ongoing performance                  | embedded in management | function           |                    |                   |                                     |                   |                    |               |                      |                |                                     |                     |                  |                                       |                     |         |
|                                  | End                 | Dat             | ø                      |             | July   | 15                         |   |                  |  |                                      |                        |                    |                    |                   |                                     |                   |                    |               |                      |                |                                     |                     |                  |                                       |                     |         |
| Action / Process                 | Start               | Date            |                        |             | Jan  | 15                         |   |                  |  |                                      |                        |                    |                    |                   |                                     |                   |                    |               |                      |                |                                     |                     |                  |                                       |                     |         |
| Action /                         | Lead                | Asst            | Ulrector<br>Children's | Social Care | Service  | Manager                    | Children's                                  | Kesonices        |  |                                      |                        |                    |                    |                   |                                     |                   |                    |               |                      |                |                                     |                     |                  |                                       |                     |         |
|                                  | Action              |                 |                        |             | Allocation and completion                      | of all outstanding and new | assessments coming into                     | the service      |  |                                      |                        |                    |                    |                   |                                     |                   |                    |               |                      |                |                                     |                     |                  |                                       |                     |         |
|                                  | Ref                 |                 |                        |             | 5.1  |                            |   |                  |  |                                      |                        |                    |                    |                   |                                     |                   |                    |               |                      |                |                                     |                     |                  |                                       |                     |         |

| approval of carers in line with statutory requirements  Scrutiny of monthly data by Performance subgroup | Intelligence Team Intelligence |
|--|--|
| associated cost to meet demand   | <ul> <li>Overview and scrutiny of on going performance embedded in management function</li> <li>Agreed monthly PI data to be manually collated and reported</li> <li>Progression of ICS / Performance Intelligence</li> <li>Team data reports</li> </ul>   |
|  | July<br>15   |
|  | Feb<br>15  |
|  | Service<br>Manager<br>Children's<br>Resources  |
|  | 5.3 Implement strong management oversight and evidence of improved permanence outcomes for LAC in Hillingdon   |

| <ul> <li>Number of carers/adaptors</li> </ul>  | approved                   | Approval of carers in     Head of the second of the s | line with legislation | and statutory                | guidance                 | <ul> <li>Reduction of cases</li> </ul> | requiring further         | presentation due to    | omissions or quality        |                           |                  |               |              |                 | <ul> <li>Reduction of time</li> </ul> | and number and of         | children waiting for | permanent carers              | <ul> <li>Timeliness of</li> </ul> | achieving permanent | placement for LAC            | <ul> <li>Reduction in</li> </ul> | placement        | breakdowns  |          |
|--|----------------------------|---|-----------------------|------------------------------|--------------------------|--|---------------------------|------------------------|-----------------------------|---------------------------|------------------|---------------|--------------|-----------------|---------------------------------------|---------------------------|----------------------|-------------------------------|-----------------------------------|---------------------|------------------------------|----------------------------------|------------------|-------------|----------|
| <b>-</b>                                       |                            |   | _                     | 0                            | anel                     | rms                                    | >                         | О                      | anel                        | anel                      |                  | mc            | О            | nair            | ne                                    | it for                    |                      |                               | ance                              | Team                | æ                            |                                  | a by             | <b>4</b> )  |          |
| Quality<br>Assurance of                        | cases and                  | paperwork   | presented to          | Adoption and                 | Fostering Panel          | Feedback forms                         | completed by              | Adoption and           | Fostering Panel             | after each panel          | Bi monthly       | Feedback from | Adoption and | Fostering Chair | Length of time                        | children wait for         | permanent            | placement                     | ICS/Performance                   | Intelligence Team   | monthly data                 | Scrutiny of                      | monthly data by  | Performance | subgroup |
| •  |                            |   |                       |                              |                          | •                                      |                           |                        |                             |                           | •                |               |              |                 | •                                     |                           |                      |                               | •                                 |                     |                              | •                                |                  |             |          |
| Recruitment of interim Panel Advisor           | Review of admin            | coordination and support of   | the process           | Joint work with Adoption and | Fostering Panel Chair to | oversee and scrutinise                 | quality of work presented | Joint work between the | Panel Advisor and the Court | Tracker to oversee timely | case progression |               |              |                 | Recruitment of 2 interim HCL          | workers                   | Proposal of new team | structure, staffing ratio and | associated cost to meet           | demand              | Review of the family finding | process and permanency           | planning meeting |             |          |
| •  | •                          |   |                       | •                            |                          |  |                           | •                      |                             |                           |                  |               |              |                 | •                                     |                           | •                    |                               |                                   |                     | •                            |                                  |                  |             |          |
| Sep<br>15                                      |                            |   |                       |                              |                          |  |                           |                        |                             |                           |                  |               |              |                 | Sep                                   | 15                        |                      |                               |                                   |                     |                              |                                  |                  |             |          |
| Mar<br>15                                      |                            |   |                       |                              |                          |  |                           |                        |                             |                           |                  |               |              |                 | Mar                                   | 15                        |                      |                               |                                   |                     |                              |                                  |                  |             |          |
| Service<br>Manager                             | Children's<br>Resources    | & Panel   | Advisor               |                              |                          |  |                           |                        |                             |                           |                  |               |              |                 | Service                               | Manager                   | Children's           | Kesonices                     |                                   |                     |                              |                                  |                  |             |          |
| Improve the management and coordination of the | Adoption & Fostering Panel |   |                       |                              |                          |  |                           |                        |                             |                           |                  |               |              |                 | Improve the function and              | process of family finding | within the service   |                               |                                   |                     |                              |                                  |                  |             |          |
| Impro<br>and o                                 | Adop                       |   |                       |                              |                          |  |                           |                        |                             |                           |                  |               |              |                 | lm<br>I                               | pro                       | wit                  |                               |                                   |                     |                              |                                  |                  |             |          |

| <ul> <li>Percent of LAC with complex needs placed with LBH-carers 20 mile radius</li> <li>Percentage of unplanned placement moves for LAC</li> </ul>   |
|--|
| Recruitment and retention of foster carers for older LAC/LAC with complex needs  |
| <ul> <li>Team structure and throughput evaluated against other projects and operating models for future service delivery</li> <li>Analysis of past and predicted numbers entering the service area</li> <li>Proposal of new team structure, staffing ratio and associated cost to meet demand</li> </ul> |
| 6<br>mon<br>ths<br>from<br>start   |
| Star<br>of<br>new<br>team<br>struc<br>ture   |
| Service<br>Manager<br>Children's<br>Resources  |
| Development of LBH foster carers to meet the diverse needs and challenges of LAC   |
| 5.6  |

Work stream 6: Embedding new ways of working and improved practice management arrangements

|   | Improvement Targets and Outcomes | Progress – Outcomes and | Key Targets  |                        |                |                           |                            |                     |                              |                         |                             |                         |                    |                |  |                                |                                |                |                                  |                |                |                     |                    |                  |                |
|---|----------------------------------|-------------------------|--------------|------------------------|----------------|---------------------------|----------------------------|---------------------|------------------------------|-------------------------|-----------------------------|-------------------------|--------------------|----------------|--|--------------------------------|--------------------------------|----------------|----------------------------------|----------------|----------------|---------------------|--------------------|------------------|----------------|
| , | Improvement 1                    | Performance             | Measures and | Milestones             |                | Monitor effectiveness     | of the 'managed            | service' model.     |                              | Baseline                | <ul> <li>Rate of</li> </ul> | assessments per         | 10,0010,000 of the | CYP population | <ul> <li>Rate of section 47</li> </ul> | enquiries per                  | 110,000 of the                 | CYP population | <ul><li>% of referrals</li></ul> | leading to the | provision of a | social care service | (as defined by the | child becoming a | child in need) |
|   |                                  | Progress - Actions      |              |                        |                | Work completed on the the | expected demand across the | children's pathway. | Extra demand is being met by | the implementation of a | 'managed service' for the   | provision of assessment | teams.             |                | Regular weekly management              | monitoring arrangements are in | place and resulting in service | improvements.  |                                  |                |                |                     |                    |                  |                |
| , | ess                              | End                     | Dat          | Φ                      |                | Sept                      | 2015                       |                     |                              |                         |                             |                         |                    |                |  |                                |                                |                |                                  |                |                |                     |                    |                  |                |
|   | Action / Process                 | Start                   | Date         |                        |                | April                     | 2015                       |                     |                              |                         |                             |                         |                    |                |  |                                |                                |                |                                  |                |                |                     |                    |                  |                |
|   | Action                           | Lead                    | Asst         | Director<br>Children's | Social<br>Care | AD                        | Children's                 | Social              | 5                            |                         |                             |                         |                    |                |  |                                |                                |                |                                  |                |                |                     |                    |                  |                |
|   |                                  | Action                  |              |                        |                | Support better            | outcomes by                | aligning the        | staffing model               | with expected           | Will expedied               | מתוומות                 |                    |                |  |                                |                                |                |                                  |                |                |                     |                    |                  |                |
|   |                                  | Ref                     |              |                        |                | 6.1                       |                            |                     |                              |                         |                             |                         |                    |                |  |                                |                                |                |                                  |                |                |                     |                    |                  |                |

| <ul> <li>100% allocation of all statutory cases</li> <li>100% meet all statutory performance measures for LAC, CP and CiN cases</li> </ul> | Average caseload for qualified social workers = 18  Newly qualified social workers = 12   | Measurement of management oversight through supervision and audit activity.  |
|--|---|--|
|  | Increased capacity added through 'managed service' models and sustained interim staffing.  Practice improvements have led to closure of all backlog work and cases ope without a plan for more than 6 weeks.  Caseloads are currently within the target average range (17) and monitored as part of weekly performance management of the service. | To deliver clearer accountability by expanding the number of team managers with small (maximum 6) teams of social workers. |
|  | g g   | June 2015  |
|  | April<br>2015   | May<br>2015  |
|  | AD<br>Children's<br>Social<br>Care  | AD<br>Children's<br>Social<br>Care   |
|  | Support best practice by ensuring caseloads are stable and balanced   | Ensure good management oversight and support of practice by implementing a flatter team                                    |
|  | 6.2   | 6.3  |

26

| requirements of their job. 100% of qualified social workers have completed their PADA   | Quarterly whole service events held Regular attendance of staff at Service Management meetings 50% response rate to all staff survey from Children's Services  |
|---|--|
| have individual training plans (IDP) appropriate for the requirements of their roles and responsibilities within the service. | There are regular whole service communication events held to outline key changes and planning within the service.  All Service Managers hold regular meetings with all staff in their service to explain in detail changes and improvement action.  All staff encouraged to participate in staff survey. |
|   | goin<br>g  |
|   | April 2015   |
|   | AD Children's Social Care & AD Children's Safeguard ing  |
| clearer alignment<br>with service<br>requirements   | All changes to be made with transparency, consultation and care through regular communication with staff and managers  |
|   | 9.9  |

Work stream 7: Effective Quality Assurance

|     |  | Actio                                | Action / Process | SS          |   | Improvement   | Improvement Targets and Outcomes  |
|-----|--|--------------------------------------|------------------|-------------|---|---|---|
| Ref | Action   | Lead                                 | Start            | End         | Progress - Actions  | Performance Measures  | Progress – Outcomes and Key   |
|     |  | AD<br>Children's<br>Social Care      | Date             | Date        |   | and Milestones  | Targets   |
| 7.1 | Implementation of new<br>Quality Assurance<br>Framework and Audit<br>Programme to embed<br>'good' standards of<br>practice | AD<br>Children's<br>Safeguard<br>ing | Apr<br>2015      | Sep<br>2015 | Quality Assurance Framework signed off and launched 1 April 2015 Audit Programme for 2015/2016 launched 1 April 2015. | Percentage of work judged good or better - 35% by the end of March 2015 - 50% by the end of September 2015 - 80% March 2016 Monthly Quality Assurance findings will drive improvement across the service developing clear action plans. | 'Good' standard of practice evidenced and sustained across the service.       |
| 7.2 | Launch new Practice<br>Standards   | AD<br>Children's<br>Safeguard<br>ing | Apr<br>2015      | June 2015   | New Practice Standards for:   | Percentage of work judged good or better - 35% by the end of March 2015 - 50% by the end of September 2015 - 80% March 2016   | 'Good' standard of practice<br>evidenced and sustained<br>across the service. |

|   | An approach that will support practice managers to embed scrutiny and practice learning from audit into daily supervision and management in a rigorous way.  |
|---|--|
|   | From April 2015 100% compliance for completion of case file audits From May 2015 100% case file audits completed using electronic audit tool   |
| signed off and launched by 15 April 2015.  Ongoing programme of Bite size training and workshops on new Practice Standards commencing mid April 2015 delivered by Learning and Development and Practice Mentor  Audit programme to review implementation of new practice standards through performance in casework. | All managers to complete single agency audits using the electronic case file audit tool.  Electronic audit tool will provide data on specific areas on a monthly basis to track performance including assessments, chronologies, management oversight/decision making, |
|   | Oct<br>2015  |
|   | Apr 2015   |
|   | AD<br>Children's<br>Safeguard<br>ing   |
|   | Launch new Audit<br>Programme  |
|   | 7.3  |

| By April 2016 100%           | of themes audits are | completed as | programmed                 |                               |                            | Monitored at monthly | Quality Assurance | meetings                     |                   |  |                       |                         |                        |                        |                           |                                  |                 |                 |                      |                    |                          |                     |                            |                       |                     |                    |
|------------------------------|----------------------|--------------|----------------------------|-------------------------------|----------------------------|----------------------|-------------------|------------------------------|-------------------|--|-----------------------|-------------------------|------------------------|------------------------|---------------------------|----------------------------------|-----------------|-----------------|----------------------|--------------------|--------------------------|---------------------|----------------------------|-----------------------|---------------------|--------------------|
| supervision and the voice of | the child.           |              | Bi-monthly thematic audits | completed using bespoke audit | methodology and electronic | audit tool.          |                   | Residual actions from Ofsted | Improvement Plan: | <ul> <li>Milestones for audited</li> </ul> | assessments achieving | 'good' standards set at | 90% Sept 2014 and 100% | March 2015. Milestones | revised as of April 2015: | <ul><li>March 15 - 35%</li></ul> | o Sept 15 - 50% | o March 16 - 80 | Milestones for plans | audited which were | SMART and evidenced risk | management ('graded | 'good') set at 60% Oct 14, | 75% March 15 and 100% | Sept 15. Milestones | revised March 2015 |
|                              |                      |              |                            |                               |                            |                      |                   |                              |                   |  |                       |                         |                        |                        |                           |                                  |                 |                 |                      |                    |                          |                     |                            |                       |                     |                    |
|                              |                      |              |                            |                               |                            |                      |                   |                              |                   |  |                       |                         |                        |                        |                           |                                  |                 |                 |                      |                    |                          |                     |                            |                       |                     |                    |

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|   | on Improved outcomes for Looked at After Children.  ngs ter e a by   |
|---|--|
|   | Dispute Resolution Tracker reviews at monthly quality assurance meetings 100% Looked After Children will have a mid-point review by July 2015.       |
| <ul> <li>Thematic audit of SMART plans scheduled for October 2014 was not completed and will be picked up in the electronic audit form every month</li> <li>Thematic supervision audit scheduled for September 2014 will be completed in March 2015 with ongoing audit of supervision every month (electronic audit form) and through supervision survey (July 2015)</li> </ul> | Implement Dispute Resolution Process with appropriate outcomes achieved in relevant timescales Implement midpoint reviews for care plans.            |
|   | Sep<br>2015  |
|   | Apr 2015   |
|   | AD<br>Children's<br>Safeguard<br>ing   |
|   | Ensure a robust Reviewing Service that quality assures consistently promoting good practice and challenging practice areas that require improvements |
|   | 7.4  |

| A CSE strategy that will enable all professionals to develop confidence and practice when identifying and responding to CSE concerns.  | A robust process in place for turning strategic quality assurance activity into reflection, planned action, better practice and improved outcomes for children.                                  | To ensure all plans and social work interventions consider the child's voice and include their views in decision making. |
|--|--|--|
| Development of CSE data in order to measure the level of concerns in line with national and local trends  100% of CSE cases tracked and all have effective risk assessment and plans recorded by September 2015. | All teams with the support of the Quality Assurance Team will run a structured review of quality assurance feedback and data every six months.   | Viewpoint will see increased response to completing and evidencing child's views   |
| Launch CSE strategy and Missing Person and Runaway Protocol April 2015.  | Structured Review of performance (six monthly) - making the link with Team Practice and Service Improvement.   | Re-launch Viewpoint<br>Track children and young<br>people's participation in LAC   |
| Sep<br>2015  | Oct 2015   | Sep<br>2015  |
| Jan 2015   | Sep<br>2015  | Jan<br>2015  |
| AD<br>Children's<br>Safeguard<br>ing   | AD<br>Children's<br>Safeguard<br>ing   | AD<br>Children's<br>Safeguard<br>ing   |
| Launch CSE strategy<br>and Missing Person<br>and Runaway Protocol  | Collation and analysis of Quality Assurance systems across the service, incorporating improvements achieved through good practice and learning to inform future planning and promote improvement | Through child's journey it is evident that their views are considered in all   |
| 7.5  | 7.6  | 7.7  |

|                              | Audits of care plans | and Child Protection         | Plans evidence the | child's voice in                         | decision making.        | Milestones:                | 60% May 15           | 80% July 15           | 100% Sept 15       |
|------------------------------|----------------------|------------------------------|--------------------|--|-------------------------|----------------------------|----------------------|-----------------------|--------------------|
| Reviews and Child Protection | Conferences.         | Residual actions from Ofsted | Improvement Plan:  | <ul> <li>Milestones for plans</li> </ul> | evidencing the voice of | the child as 'good' set at | 80% Sept 14, 90% Dec | 14 and 100% March 15. | Milestones revised |
|                              |                      |                              |                    |  |                         |                            |                      |                       |                    |
|                              |                      |                              |                    |  |                         |                            |                      |                       |                    |
| aspects of decision          | making               |                              |                    |  |                         |                            |                      |                       |                    |
|                              |                      |                              |                    |  |                         |                            |                      |                       |                    |

# Agenda Item 7

## **QUARTERLY CHILD SOCIAL CARE AUDIT UPDATE 2014/15**

Contact Officer: Nikki Cruikshank Telephone: 01895 556708

## **REASON FOR ITEM**

The purpose of this paper is to provide a brief update on audit activity over the last quarter and includes the audit programme for 2015/16 (Work stream 7 Service Improvement Plan 2015/16).

## SUGGESTED COMMITTEE ACTIVITY

It is recommended that the Committee:

1. Notes the update provided.

## INFORMATION

## **Background**

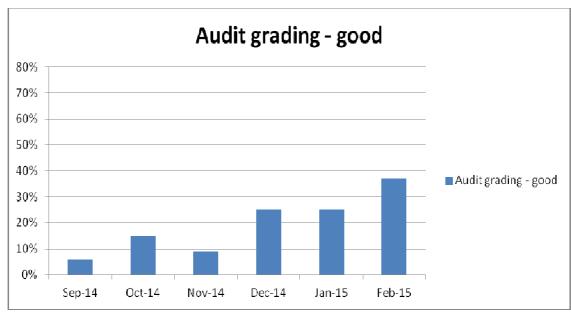
1 The 'Quality Assurance Practice Guide' was developed in March 2014 in order to ensure that CYPS was well placed to address the areas identified by Ofsted as requiring improvement and to pursue a journey of continuous improvement with a more outcome focused approach to audit activity. The previous audit tool was more focussed on tasks and processes, whilst the new audit tool focussed on evidence of impact and outcomes.

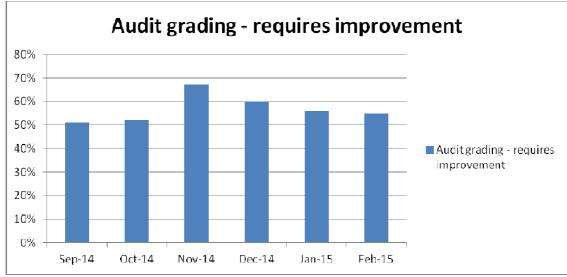
## **Monthly Case File Audit Activity**

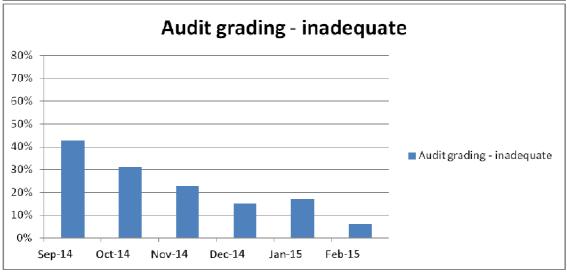
- 2 As at September 2014 monthly audit compliance across the service was 72%, with 63 cases out of 88 having been audited. 6% Rated as 'good', 51% 'requires improvement' and 43% graded 'inadequate'.
- 3 Since September 2014 with support from a lead QA Auditor and Senior Managers there has been a steady improvement in monthly audit compliance and an increase in the number of case rated as 'good' and 'requires improvement' and a decrease in those rated 'inadequate'.
- 4 In December 2014 audit compliance was 96% and for January and February 2015 audit compliance was 100%.
- 5 The revised milestone for cases rated as 'good' in the Service Improvement Plan 2015/2016 is 35%. Case files graded as 'good' in February 2015 was 37%.

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PART 1 – MEMBERS, PUBLIC AND PRESS

# Audit Programme 2015/2016

- 6 The Audit Programme for 2015/16 has been finalised and includes monthly single agency audits (Children's Social Care), Thematic Audits and Multi-Agency Audits (Appendix A).
- 7 From April 2015 an electronic audit tool will be introduced for all monthly, thematic and multi-agency audits.
- 8 The electronic audit tool is operated in Google Docs which allows for reporting on specific areas of practice, supervision and management oversight on a monthly basis. The electronic tool will allow data collection and analysis on thematic audit areas identified in the 2014/15 Ofsted Improvement Plan that were not completed.
- 9 Monthly and thematic audit findings and trends will be collated by the Lead Quality Assurance Auditor. Quality Assurance Practice Mentors will support Team Managers to use audit findings to improve individual, team and service performance through action plans.
- 10 Multi-Agency Audits will be completed in partnership with Hillingdon Safeguarding Children's Board (HSCB). Findings will be reported back to the HSCB and action plans agreed across all agencies. HSCB Business Manager and QA Auditor will lead and coordinate multi-agency audits.

Appendix A - Quality Assurance Audit Programme 2015/2016

| 2015<br>Month       | Single Agency Audit                  | Thematic<br>Audits  | Multi-Agency<br>Audit  | Quality<br>Assurance<br>monitoring  |
|---------------------|--------------------------------------|---|--|---|
| April               | Monthly single agency audits         | Decision making in the MASH   | -  | -   |
| May                 | Monthly single agency audits         | -   | Multi-Agency Child Sexual Exploitation Audit (to include multi- agency casework audit) | -   |
| June                | Monthly single agency audits         | Implementation<br>of Practice<br>Standards -<br>Visits to<br>Children | -  | -   |
| July                | Monthly single agency audits         | -   | Multi-Agency Domestic Abuse Audit (to include multi-agency casework audit)             | -   |
| August<br>September | -<br>Monthly single agency<br>audits | -<br>Supervision  | Multi-agency casework audit  | Service Manager and TM six  |
|                     |                                      |   | (CSE)  | monthly performance review. (audits, consultations, complaints, IMRs etc) |
| October             | Monthly single agency audits         | Implementation of Practice Standards - CP Plans                       | -  | -   |
| November            | Monthly single agency audits         | -   | Multi-Agency<br>Youth Violence<br>Audit  | -   |
| December            | Monthly single agency audits         | Implementation of Practice Standards - Care Planning                  | -  | -   |

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| January  | Monthly single agency audits | -  | Multi-agency<br>casework audit<br>(Domestic<br>Abuse) | -   |
|----------|------------------------------|--|---|---|
| February | Monthly single agency audits | Implementation of Practice Standards - Referral and Assessment | -   | -   |
| March    | Monthly single agency audits | -  | Multi-Agency<br>Casework<br>audit (Youth<br>Violence) | Service Manager<br>and TM six<br>monthly<br>performance<br>review. (audits,<br>consultations,<br>complaints, IMRs<br>etc) |

# REVIEW OF LEAVING CARE GRANT

Contact officer: Jon Pitt Telephone: 01895 277655

#### **REASON FOR ITEM**

The Corporate Parenting Board and the Cabinet Member for Education and Children's Services have requested that the Committee gives consideration to the value of the grant that is payable to care leavers.

#### **OPTIONS OPEN TO THE COMMITTEE**

- § To note the officer update to be provided at the meeting.
- § To ask questions and request further information about the Leaving Care Grant.
- S To give consideration to whether a recommendation to increase the Leaving Care Grant should be made to Cabinet.

# **INFORMATION**

- 1. The Education and Children's Services Policy Overview Committee (the predecessor of the Children, Young People and Learning POC) undertook a Review of the Leaving Care Grant Procedure and Grant in 2012 / 13. One of the recommendations made by the Review and subsequently approved by Cabinet on 20 December 2012, was that the Care Leaver's Grant be increased from £1,000 to £1,500 (or £1,800 for those in exceptional circumstances).
- 2. Department for Education guidance now recommends that local authorities pay a minimum Care Leaver Grant of £2,000.
- 3. The level of Care Leaver Grant in Hillingdon was discussed at the Corporate Parenting Board Meeting in March 2015. The Board and the Cabinet Member for Education and Children's Services have requested that the level of the grant payable in Hillingdon is considered by the Committee.

# QUARTERLY SCHOOL PLACES PLANNING UPDATE

Contact Officer: Dan Kennedy Telephone: 01895 250495

#### **REASON FOR ITEM**

To update the Committee about the demand for school places in Hillingdon.

#### **OPTIONS OPEN TO THE COMMITTEE**

- 1. To note the update about demand for school places.
- 2. To question officers about the update and the future demand for school places.

#### **INFORMATION**

# Introduction

This paper presents to the Children, Young People and Learning Policy Overview Committee an update on school places planning for primary and secondary schools in Hillingdon. For ease of reference this update also re-states background information previously presented to the Committee.

# **Background to School Places Forecasting**

The forecast for future school places predicts that the demand for additional school places will be sustained. In Hillingdon, the demand for additional school places is driven by rising birth rates, new residential developments, and families moving into the Borough who stay. This is because Hillingdon is a prosperous Borough of choice for many families.

# **Primary School Places**

Overall, the 2014 school places forecast shows that the future need for primary school places over the next 5 years is largely met through the delivery of the successful schools expansion programme. This includes three new primary schools (two of which opened in September 2014 and one further school is on track to open by September 2015). Two new free schools (Hewens and Nanaksar) have also contributed to the supply of new primary school places in high demand areas of the Borough. Officers are currently reviewing options to meet this need.

<u>Primary Planning Area 2 – Northwood</u> – there is a forecast need for up to an additional one form of entry in the Northwood area of the Borough – which is a direct consequence of children living in south Hertfordshire applying to attend a primary school in the very north of the Borough (Frithwood and Hillside schools in particular). This pressure was experienced in the September 2014 admissions round where the net position was 24 children from Hertfordshire securing and being offered a school place at Hillingdon primary schools in Northwood. This demand from families living just outside Hillingdon is expected to continue into future years.

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<u>Primary Planning Area 3 – Coteford Area</u> – there is a forecast need for an additional one form of entry in primary places in this area, which seems to be mainly driven by rising birth rates and families moving into this area.

<u>Primary Planning Area 5 – Ruislip / South Ruislip Area</u> - there is a forecast need for an additional one form of entry in this area, which seems to be mainly driven by rising birth rates and also children from neighbouring Boroughs travelling to Hillingdon schools (this demand equates to a net two forms of entry from other Boroughs). Most Hillingdon schools in this area are full or close to being full.

# Action Being Taken

Since the previous update to the Committee, and as reported to Cabinet, officers have visited selected primary schools in the north of the Borough to identify those with the potential for expansion for further discussion with Head Teachers and Chair of Governors. Three school sites are being explored further and the findings will be reported back to members for consideration.

# **Future Demand for Secondary School Places**

The updated forecast for secondary school places in Hillingdon shows that the profiled demand for additional school places from September 2016/17 onwards is high and largely consistent with the previous 2013 forecast.

Overall, the forecast indicates a need for up to an additional 27 forms of entry in secondary school places to September 2021 with a higher demand for school places in the central and north of the Borough secondary schools.

From discussion with neighbouring London Boroughs, many are experiencing a very similar picture in demand for additional secondary school places and are at the same stage as Hillingdon preparing plans to meet the rising need. As a general point, forecasting for school places beyond 5 years does carry a higher risk of volatility in trends and so for the purposes of secondary school places planning, proposals will be developed initially which focus on the need for school places in the period to the academic school year September 2019 (i.e. over the next five years, representing 21 additional forms of entry forecast to be required in this period).

#### Action Being Taken

To meet the future need for additional secondary schools places, it is proposed that three existing secondary schools will be expanded (subject to Planning Approval). The schools are: Northwood Secondary School, Swakeley's School and Abbotsfield School.

In addition, officers have been reviewing the suitability of expanding five further secondary schools in the Borough. Options have been prepared which are currently being considered by Members.

| September 2015 Update – Starting Primary School / Starting Secondary School   |
|---|
| All children who applied on time for a secondary school place have been offered a place. A higher than average percentage of secondary school age pupils in Hillingdon are offered their preference schools (in Hillingdon 93% offered one of their top three choices of schools compared to 87% across London). At the time of writing officers are in the process of finalising offers for primary school places on 16 <sup>th</sup> April 2015. All children who applied for a primary school place on time will be offered a place. |
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# UPDATE ON THE IMPLEMENTATION OF RECOMMENDATIONS FROM PAST REVIEWS OF THE COMMITTEE

Contact officer: Jon Pitt Telephone: 01895 277655

#### **REASON FOR ITEM**

The attached paper provides a brief summary of progress with regard to the recommendations made by previous reviews on the following topics:

- § Elective Home Education.
- § Improving Outcomes for Care Leavers Not in Education, Employment or Training.
- § Strengthening the Council's Role as a Corporate Parent.

# **OPTIONS OPEN TO THE COMMITTEE**

- § To note the progress provided in the report.
- § To consider the progress to date and developments.
- § To Consider whether there are comments the Committee wishes to make.

| Elective Home Education   |  |  |
|---|--|--|
| Recommendations   | Updates  |  |
| RECOMMENDATION 1 – That an annual Borough network meeting take place between LBH EHE Parents and the local authority to enable networking to take place between different EHE groups.     | An initial network opportunity was provided and facilitated at the Civic Centre for EHE Hillingdon resident parents and children. This was held in January 2013. This was well attended and appreciated. EHE residents took the initiative from that point to continue with the network meetings without the involvement of the Council. |  |
| RECOMMENDATION 2 — That Officers review the EHE correspondence which is sent to EHE parents to ensure that their tone is empathetic and their contents are not open to misinterpretation. | All correspondence was reviewed and agreed. Several complimentary comments were received from EHE residents subsequent to this.  |  |
| RECOMMENDATION 3 – That EHE parents be provided with information on London Borough Exam Centres that will accept EHE children.  | All EHE parents can access Exam Centre facilities through Hillingdon Tuition Centre. This is communicated to the Hillingdon EHE community.   |  |
| RECOMMENDATION 4 – That Cabinet be recommended to approve the updated policy on Elective Home Education and that the policy be reviewed on an annual basis.                               | Cabinet agreed the revised policy following POC. It is reviewed by officers annually, most recently to update terminology following implementation of the SEND reforms   |  |

| Recommendations   |   |
|---|---|
| Necommendations   | Updates   |
| RECOMMENDATION 1 – That Council welcomes the Government's commitment to   | leavers NEET in the Borough and collected when a young person who was in  |
| collecting data on care leavers at ages 18, 20 and 21, in addition to age 19 and commits to assessing this data as a means through which to monitor and improve the   | care on his/her 16 <sup>th</sup> birthday is contacted and asked about their status after turning 19. Consequently, it is clear that this data does not provide up-to-date or complete figures for care leavers NEET across the full age range of 18-21.  |
| impact of the Council's support of care leavers.  | In recognition of this gap, the Government's Care Leaver Strategy states that, as of 2014, the Department for Education, Ministry of Justice and Department for Work & Pensions would be collecting data on care leavers at 18, 19, 20 and 21.  |
|   | Therefore- the officers will be committing to collecting data by:   |
|   | <ul> <li>Manual consultation and collection of information regarding 18 – 25 year olds (currently on-going for 2014/15 figures).</li> <li>Consultation with ICS to ensure management information can be collected on NEET, education and employment status of our care leavers up to 25 years.</li> </ul>                   |
|   | This recommendation will also be addressed in the Service Improvement Plan.   |
| RECOMMENDATION 2 — That the Cabinet Member for Education & Children Services requests that officers explore the viability of the Hillingdon Virtual School identifying the LAC most 'at risk' of becoming NEET and passing this information on to the relevant social workers, personal advisors and officers in Children's Services. | <ul> <li>Strategies to maintain in EET discussed during VS supervision</li> <li>Monthly meeting between Social Care, Early Intervention, Virtual School and Corporate Parenting being put in place to a) prevent LAC becoming NEET and b) to put in place strategies to support those who are NEET back into EET</li> </ul> |

| Improving Outcomes for Car   | re Leavers Not in Education, Employment or Training  |
|--|--|
| Recommendations  | Updates  |
| RECOMMENDATION 3 – To ensure that LAC and care leavers benefit from the full range of services and support provided by the Council, that the Cabinet Member for Education & Children's Services requests that officers explore new ways of sharing information between frontline staff and other Council departments and report findings back to the Cabinet Member in due course. | <ul> <li>Messages are cascaded to staff and professionals by:</li> <li>Wednesday and Monday Briefings' across the service (Invites to other services).</li> <li>Quarterly Health meetings.</li> <li>A mentor to assist and support staff to implement practice and statutory updates.</li> <li>Regular Briefings by the DCS Service wide.</li> <li>Horizon (Council Website)</li> <li>Trix has been updated</li> <li>Practice Manuals</li> </ul> |
| RECOMMENDATION 4 – To ensure that LAC benefit from the full range of support offered by external organisations within the Borough, that the Cabinet Member for Education & Children's Services requests that officers undertake research on the full range of externally provided services / opportunities that are aimed at, or could be used by, LAC and care leavers.           | This is outstanding.   |

| Improving Outcomes for Care  |  | re Leavers Not in Education, Employment or Training   |
|--|--|---|
|  | Recommendations  | Updates   |
| recommer Member Services improvem communic the Borou business              | ENDATION 5 – Subject to ndation 4, that the Cabinet for Education & Children's requests that officers explore tents to methods of cation between frontline staff and ugh's charitable, educational and organisations and report findings the Cabinet Member in due course.                     | On-going regular communication between VS frontline staff and educational organisations takes place through:  • Face to face meetings during PEPs at least once per term  • Regular electronic communication in monitoring PEP Action Plans, including through newly introduced ePEP  • The training of designated teachers and other school staff by the VS  • VSH membership of the Hillingdon Association of Head Teachers |
| the opp<br>vulnerable<br>Cabinet M<br>Services of<br>department<br>be able | ENDATION 6 – To expand upon cortunities available to this e group of young people, that the lember for Education & Children's encourages Members and Council nts to consider where they might to provide work experience ties specifically to LAC and care                                     | Both the Participation and the Care Leavers Corporate Parenting Sub groups, in consultation with Children's Rights and Participation Services and the Young People's Team, are looking at different aspects of promoting work experience, apprenticeships and training and work opportunities for Care Leavers.   |
| leavers of courses to withdraw, Education that office Welfare R necessary  | ENDATION 7 – To ensure that care who are undertaking part-time o develop skills are not obliged to that the Cabinet Member for a & Children's Services requests ers monitor the implications of the deform on care leavers and, where y, put measures in place to ensure erisks are mitigated; | Regular meetings between the Uxbridge Job Centre and Social Care to look at bridging the gaps for Care leavers before October 2015. This recommendation is a working progress and it is envisioned that there will be a policy between the Job Centre and Social Care prior to October 2015.  |

| Improving Outcomes for Care Leavers Not in Education, Employment or Training  |  |
|---|--|
| Recommendations   | Updates  |
| RECOMMENDATION 8 – In order to provide opportunities for education providers in the Borough to share best practice, that the Cabinet Member for Education & Children's Services considers whether officers should facilitate meetings between schools and Higher and Further Education providers; and | <ul> <li>VSH aware that provision is provided through Brunel Widening Participation Officer, who is working with all primary and secondary schools and offering a programme of learning, motivational and aspiration-raising activities to schools across the borough from primary to sixth form. In addition, ACCESS HE is available for schools wishing to work with HE other than Brunel</li> <li>Specific activities set up by Brunel for Hillingdon LAC, including 2-day residential during summer term.</li> </ul> |
| RECOMMENDATION 9 – That the Cabinet Member for Education & Children's Services considers whether the issue of engaging with the Borough's schools to offer support to LAC from as early an age as possible, be referred to the Corporate Parenting Board for further consideration and progression.   | <ul> <li>VS engages with Borough's school as soon as a child becomes LAC and initial face to face PEP meeting held within 10 working days</li> <li>Support and intervention plans integral part of every PEP from EYFS to age 18</li> <li>Pupil Premium Plus specifically used for each individual LAC to support progress according to need</li> <li>Designated Teachers attend LAC Reviews with LA officers</li> <li>DTs and other school staff trained in matters relating to LAC</li> </ul>                          |

| Strengthening the   | e Council's Role as a Corporate Parent   |
|---|--|
| Recommendations   | Updates  |
| RECOMMENDATION 1 – Welcome the work currently being undertaken to review and revise the remit of the Corporate Parenting Board, its increased overview of the Council's wide ranging role as a corporate parent and endorse its administration by Democratic Services.  | Not Applicable   |
| RECOMMENDATION 2 – Ask the Health & Wellbeing Board to request that the Hillingdon Clinical Commissioning Group (CCG) and Hillingdon Child and Adolescent Mental Health Services (CAMHS) acquire, maintain and share data on the following areas:  a. Proportion of total budgets spent on LAC; b. Proportion of LAC registered with a GP; c. Proportion of the CAMHS | This recommendation is partly complete. The data is to be updated from the our designated LAC Nurse and Dr.  However, enquires have been made with CAMHs:  Of the current cases open in CAMHS - (694) 56 are LAC i.e. 8%. This includes cases open to the LAC Clinical Psychologists as well as to core CAMHS. None of these cases are Tier 2. The thresholds are very high due to limited resources in core CAMHS, that is they are all complex Tier 3 CAMHS cases. |
| caseload that is made up of LAC; d. Information on what intervention / therapy is being provided by CAMHS and what health issues are being dealt with via wider case consultation; and e. The number of Tier 2, 3 and 4 assessments that CAMHS undertake for LAC.   | The remainder of the information will be documented in the Service Improvement Plan.   |

| Strengthening the Council's Role as a Corporate Parent |   | e Council's Role as a Corporate Parent  |
|--|---|---|
|  | Recommendations   | Updates   |
|  | RECOMMENDATION 3 – Instruct officers to continue to work alongside colleagues from Hillingdon CAMHS to provide a designated point of contact to provide advice and  | There is a CAMHs lead who provides clinical supervision to all in house psychologists. There are regular meetings with the CAMHs lead and LAC Service Manager.  |
|  | assistance for all mental health issues relating to LAC, reporting to the Health & Wellbeing Board if required.   | The Mobilisation Projects - to develop a 'single point of access'. This needs further clarification from CAMHs.   |
|  | •   | However, the four in house psychologists are providing instant services to the most vulnerable LAC children.  |
|  | RECOMMENDATION 4 – Instruct officers to work alongside the Council's partner agencies to develop a comprehensive understanding of where responsibilities lie between NHS England and CCGs for all aspects of the health needs of LAC and report findings back to the Cabinet Member for Education & Children's Services, the Children, Young People & Learning Policy Overview Committee and the Health & Wellbeing Board as appropriate. | There are regular quarterly meetings between the Designated LAC Dr and Nurse. This enables any issues to be resolved and a plan of action to ensure smooth running between services.  Further work needs to be undertaken with the CCG to develop and strengthen partnership working.   |
|  | RECOMMENDATION 5 - In order to ensure that the mental health needs of LAC are met when placements are out of Borough, instruct officers to produce a protocol on the process of how services are brokered between CCGs and NHS England for agreement by the Cabinet Member for Education & Children's Services and the Health & Wellbeing Board.  | There have been a few cases whereby the CCG has jointly funded provisions for the LAC child. However, further work needs to be undertaken to ensure a protocol is delivered between the CCG and Social Care to ensure a consistent and smooth running service. This recommendation will be addressed in the service improvement plan. |

| Strengthening the Council's Role as a Corporate Parent   |  |
|--|--|
| Recommendations  | Updates  |
| Recommendation 6: Instruct officers to monitor data on the number of relevant young people up to the age of 25 approaching the Council for support in education, training and employment and report findings back to the Cabinet Member for Education & Children's Services in due course. | Given that such educational support has only recently been extended to those up to the age of 25, officers do not have the data for this number. However, processes have been set in place to monitor the NEETS.  Recent legislative changes now mean that local authorities have a duty to provide Personal Advisers to care leavers up to the age of 25 who inform the Council that they have returned, or wish to return, to education or training. The Children (Leaving Care) (England) Regulations 2001 state that the role of Personal Advisers is to:  • provide advice (including practical advice) and support; • where applicable, to participate in the care leaver's assessment and the preparation of their pathway plan; • participate in reviews of the pathway plan; • liaise with the responsible authority regarding the implementation of the pathway plan; • co-ordinate the provision of services, and to take reasonable steps to ensure that they make use of such services; • keep informed about their progress and wellbeing; and |
|  | <ul> <li>keep a written record of contact with the care leaver.</li> <li>This recommendation will be monitored through the Service Development plan.</li> </ul>  |
|  |  |

| Strengthening the Council's Role as a Corporate Parent  |   |
|---|---|
| Recommendations   | Updates   |
| Recommendation 7: In accordance with the budget planning process and to ensure compliance with changes set out in the Care Leavers (England) Regulations 2010, ask officers, in consultation with the Cabinet Member for Education & Children's Services, to explore the viability of providing additional general and pastoral support through the Hillingdon Virtual School to relevant young people up to the age of 25 going on to education or training and report findings back to the Cabinet. | <ul> <li>Plan is being devised to resource the Virtual School so that they have the capacity to make this provision for relevant YP up to the age of 25</li> <li>Findings will be reported back via the CPB</li> </ul>  |
| Recommendation 8: Instruct officers to investigate the viability of building Education Residential and Respite Accommodation alongside the future development of schools in the Borough and report findings back to Cabinet in due course.  | This recommendation has not yet been completed as it needs further clarification  |
| Recommendation 9: Instruct officers to monitor and report back to the Cabinet Member for Education & Children's Services on the success of the peer-mentoring scheme currently being trialed as a means through which to provide additional support to care leavers with a view to expanding the scheme if it leads to improved outcomes.   | A Peer mentoring Scheme was piloted by the Children's Rights and Participation Service at the end of 2013. A total of seven care leavers, aged 20 +, completed a three day training programme to prepare them to mentor/support a younger person in care who was about to leave care or was in the process of transition.  From the initial 7 mentors who completed the training, 4 stable matches were made from in early 2014. The feedback from three of these matches |

| Strengthening the   | e Council's Role as a Corporate Parent   |
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| Recommendations   | Updates  |
|   | was successful, and mentors kept regular contact with their mentees either in person or by phone. One match however lost regular contact with their mentee.  |
|   | Unfortunately the previous workers in the Children's Rights and Participation Team left the service in May 2014. A new team were recruited from September 2014 and are currently working to re-establish the peer mentoring Scheme. Three of the previous four mentors are in contact with the new Children's Rights worker and are keen to continue their role as a peer mentor and also to assist in the recruiting and training of new mentors. |
| Recommendation 10: Ask officers to collect comprehensive data on LAC's use of the Borough's health, sport and leisure facilities, including their use of and engagement with taster events. | It has not been possible to implement this recommendation. Information on the use of leisure centres could only be collected if LACYP included their status on their LeisureLink scheme application. Unfortunately, as this information was not included on applications it was not possible to monitor LAC usage of facilities.   |
|   | Nonetheless, the Committee requested that as comprehensive data as possible be collected to provide an evidence base for how this group could be engaged better in sporting and leisure activities.  |
| Recommendation 11: Subject to the outcome of Recommendation 10 above, ask officers to undertake feasibility work on whether further   | This is an area that requires further exploration. Future use of sporting, youth service and leisure facilities are being explored for LAC events.   |
| discounted rates or incentives could be put in place to increase access to sporting and leisure facilities for LAC and report findings back to the Cabinet for consideration.               | Kids in Care Awards (KICA) were already in place and offered an opportunity for some LACYP to celebrate their success. However, this event was not seen to meet these needs as the event is designed for and attended by only those who have won awards and therefore does not extend to the Borough's full LACYP population. – KICA is currently being reviewed to address this issue and make 2015 more inclusive of all LAC children.           |

| Strengthening the  | e Council's Role as a Corporate Parent   |
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| Recommendations  | Updates  |
| Recommendation 12:Subject to the budget planning process, ask officers to investigate the viability of providing regular consultation and social events for LAC to offer them further opportunities to socialise and share | There is an extensive range of participation events organised for LAC e.g. fun outings at Christmas, ice skating and meal out; Express Yourself Participation Day for 7-11 years in the Easter Holidays, residential in the summer; Care leavers Conference in May; Review of Viewpoint. |
| experiences.   | <ul> <li>3 separate Children in Care Groups held each month:</li> <li>Talkers for 7-11 years</li> <li>Step up 12-15 years</li> <li>Stepping Out 16 plus</li> </ul>   |

# POTENTIAL REVIEW TOPICS OR IDEAS FOR FIRST MAJOR REVIEW OF 2015/16

Contact Officer: Jon Pitt Telephone: 01895 277655

#### **REASON FOR ITEM**

To enable the Committee to consider which topics it wishes to review for its first major review during 2015/16. This will enable a full scoping report to be considered at the next meeting on 24 June 2015.

#### **OPTIONS OPEN TO THE COMMITTEE**

The Committee is asked to select a single area within its remit, bearing in mind the topics suggested below, to be developed into a scoping report. This will require Members to agree as specific a topic for investigation as possible so that officers can produce a targeted and effective plan for the review.

#### **INFORMATION**

- 1. In order to ensure that there is sufficient capacity for the Committee to undertake two major reviews in 2015/16, it is proposed that the first topic for review is selected at the April 2015 meeting. A full scoping report, setting out the terms of reference of the first review, would then be presented to the Committee on 24 June 2015. Subject to approval of the Committee, the first witness session would be held place at the July 2015 meeting.
- **2.** As per its Terms of Reference, the Committee is responsible for undertaking the 'policy overview' role in relation to the following areas:
  - §Education Services and statutory education authority functions
  - §School performance and attainment
  - School Transport
  - §Relationships with Local Academies / Free Schools
  - §Pre-School & Early Years Services
  - §Youth Services & Careers Services
  - §Juvenile justice & probation services
  - §Adult Learning
  - §Education and learning partnerships
  - §Music & The Arts
  - §Social care services for children, young persons and children with special needs
  - §Adoption and Fostering
  - §Family Services

3. In selecting topics for further investigation, Members are reminded of previous reviews that have been undertaken by this Committee and by the Education & Children's Services Committee which preceded it. Details are set out below:

#### **EDUCATION & CHILDREN'S SERVICES POC**

#### 2006/07

- § Transition from Primary to Secondary School
- § Widening the Scope of the Education Service

#### 2007/08

- § Extended Schools and Children's Centres
- § Meeting the Needs of Troubled Teenagers

#### 2008/09

- § Development of Inclusion in Hillingdon Schools
- § 14 to 19 Strategy
- S Develop a Short Breaks Provision

# 2009/10

- S Reviewing whether current arrangements and future plans to support inclusive practice in Hillingdon schools are effective
- S Reviewing current arrangements and future plans for safeguarding children at Heathrow Airport as a port of entry

# 2010/11

§ 14/19 Education & Training

#### 2011/12

- § Elective Home Education Policy
- § Adoption & Permanency for Looked After Children

#### 2012/13

- Safeguarding of Children that go Missing
- § Access to Education for Hillingdon's Vulnerable Children and Young People

# CHILDREN, YOUNG PEOPLE & LEARNING POC

# 2013/14

- § Strengthening the Council's Role as a Corporate Parent
- § Improving Outcomes for Care Leavers Not in Education, Employment or Training

# 2014/15

- S Reducing the Risk of Young People Engaging in Criminal Activity and Anti-Social Behaviour
- § Hillingdon's Implementation of the Special Educational Needs Disability (SEND) Reforms
- **4.** It is at the Committee's discretion as to the areas it wishes to review. Bearing this in mind, the Committee Chairman and officers have proposed that the Committee gives consideration to the following potential review topics:
  - Inspiring schools to be more proactive in working with LAC to improve outcomes - it is suggested that this could be expanded to all children with one session on LAC.

- Careers guidance and support services / Review the career guidance given to young people whilst at school/ college.
- Are early help systems in Hillingdon effective at preventing neglect?
- Review the fostering and adoption process to include selection, together with pre and post support.
- Review health education given to our school children to include obesity, STD and substance abuse - it is suggested that a single area of focus is identified e.g. substance abuse.

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| ием ітем   | NEW   |   |   |   |  |
| Consultation<br>on the<br>decision   | CYPS / AD - Various Tony Zaman stakeholders / Nikki and witness Cruickshank testimony / Nikki O'Halloran            | Corporate   |   |   |  |
| Officer<br>Contact for<br>further<br>information   | CYPS / AD - Various<br>Tony Zaman stakehold<br>/ Nikki and witne:<br>Cruickshank testimony<br>/ Nikki<br>O'Halloran | RS - Jean<br>Palmer OBE<br>/ Bobby<br>Finch   | FD - Paul<br>Whaymand   | AD -<br>Democratic<br>Services  | RS -<br>Michael<br>Patterson   |
| Cabinet Member(s) Responsible  | ₩ <u>2</u>  | Cllr<br>Jonathan<br>Bianco and<br>Cllr David<br>Simmonds  | Cllr<br>Jonathan<br>Bianco  | as<br>appropriate   | Cllr David<br>Simmonds /<br>Cllr<br>Jonathan<br>Bianco   |
| Final decision  by Full  Council  Admin  Cabinet  Member(s)  |   |   |   |   |  |
| Ward(s)  | All   | Various   | All   | TBC   | Various  |
| Further information Services CYPS =Children and Young People's Services ASCS= Adult Social Care Services |   | This report will update Cabinet and request any necessary decisions in order to progress the School Capital Programme in order to upgrade facilities and keep on track to deliver sufficient places for children educated in the Borough. | The Cabinet receives a monthly report setting out in detail the Council's revenue and capital position. | Major Policy Review recommendations for consideration by the Cabinet as and when completed. | A standard report to Cabinet to seek approval for the Council granting long leases to schools who wish to convert to Academy Status. |
| Ref Decision Furth   | Cabinet meeting -  Hillingdon Child Sexual Exploitation (CSE) Strategy  | School Capital<br>Programme Update  | SI & Monthly Council<br>Budget - monitoring<br>report   | Reports from Policy<br>Overview & Scrutiny<br>Committees                                    | Academy<br>Conversions   |
| Ref  | <b>Cab</b> 39   | Page<br>ਯ   | 97<br>ග   | S   | S  |

| Ref    | Decision                            | Further information  | Ward(s)           | Final decision<br>by Full<br>Council | Cabinet<br>Member(s)<br>Responsible | Officer<br>Contact for<br>further<br>information | Consultation<br>on the<br>decision | MEW ITEM | Private<br>decision? |
|--------|-------------------------------------|--|-------------------|--------------------------------------|-------------------------------------|--|------------------------------------|----------|----------------------|
| ouncil | Departments: RS = Residents S       | Council Departments: RS = Residents Services CYPS =Children and Young People's Services ASCS= Adult Social Care Services | ial Care Services | ¥                                    | stration FD= Finance                | nce  |                                    |          |                      |
| Cab    | vinet Member D                      | Cabinet Member Decisions - April 2015  |                   |                                      |                                     |  |                                    |          |                      |
| SI     | Standard Items taken                | Standard Items taken Cabinet Members make a number of decisions each   | Various           |                                      | All                                 | AD -   | Various                            |          |                      |
|        | each month by the<br>Cabinet Member | month on standard items - details of these standard items are listed at the end of the Forward Plan.                     |                   |                                      |                                     | Democratic<br>Services                           |                                    |          |                      |
|        |                                     |  |                   |                                      |                                     |  |                                    |          |                      |
| Cab    | Cabinet meeting - 21 May 2015       | 21 May 2015  |                   |                                      |                                     |  |                                    |          |                      |
| SI     | School Capital                      |  | Various           |                                      | CIIr                                | RS - Jean  | Corporate                          |          | Public /             |
|        | Programme Update                    | necessary decisions in order to progress the School  |                   |                                      | Jonathan                            | Palmer OBE consultees                            | consultees                         |          | Private              |
|        |                                     | Capital Programme in order to upgrade facilities and   |                   |                                      | Bianco and                          | / Bobby  |                                    |          | (3)                  |
|        |                                     | Keep on track to deliver sufficient places for children  |                   |                                      | Clir David                          | Finch  |                                    |          |                      |
|        |                                     | educated III tile Bolougii.  |                   |                                      | Similarida                          | 0  |                                    |          |                      |
| Pag    | SI Academy                          | A standard report to Cabinet to seek approval for the  | Various           |                                      | Cllr David                          | RS -   |                                    |          | Private              |
| ge 9   |                                     | convert to Academy Status.   |                   |                                      |                                     | Patterson  |                                    |          | (2)                  |
| 98     |                                     |  |                   |                                      | Jonathan                            |  |                                    |          |                      |
|        |                                     |  |                   |                                      | Bianco                              |  |                                    |          |                      |
| Cab    | inet Member D                       | Cabinet Member Decisions - May 2015  |                   |                                      |                                     |  |                                    |          |                      |
| SI     | Standard Items taken                | Standard Items taken Cabinet Members make a number of decisions each   | Various           |                                      | All                                 | AD -   | Various                            |          |                      |
|        | each month by the                   | month on standard items - details of these standard  |                   |                                      |                                     | Democratic                                       |                                    |          |                      |
|        | Cabinet Member                      | Items are listed at the end of the Forward Plan.   |                   |                                      |                                     | Services   |                                    |          |                      |
|        |                                     |  |                   |                                      |                                     |  |                                    |          |                      |
|        |                                     |  |                   |                                      |                                     |  |                                    |          |                      |

| Ref      | Decision                                     | Further information  | Ward(s)            | Final decision<br>by Full<br>Council | Cabinet<br>Member(s)<br>Responsible | Officer<br>Contact for<br>further<br>information | Consultation<br>on the<br>decision | NEW ITEM    | Private<br>decision? |
|----------|--|--|--------------------|--------------------------------------|-------------------------------------|--|------------------------------------|-------------|----------------------|
| ij       | Council Departments: RS = Residents Services | services CYPS =Children and Young People's Services ASCS= Adult Social Care Services | cial Care Services | AD = Administration                  | tration FD= Finance                 | псе  |                                    |             |                      |
| <b>D</b> | Cabinet meeting -                            | 18 June 2015   |                    |                                      |                                     |  |                                    |             |                      |
|          | Budget 2014/15                               | The Cabinet will receive the details of the budget                                   | ΙΥ                 |                                      | Cllr Ray                            | FD -   |                                    | NEW         |                      |
|          | Outturn                                      | outturn for 2014/15.   |                    |                                      | Puddifoot                           | Paul   |                                    |             |                      |
|          |  |  |                    |                                      | MBE & CIIr                          | Whaymand   |                                    |             |                      |
|          |  |  |                    |                                      | Jonathan                            |  |                                    |             |                      |
|          |  |  |                    |                                      | bianco                              |  |                                    |             |                      |
|          | School Capital                               | This report will update Cabinet and request any                                      | Varions            |                                      | Ollr                                | RS - Jean  | Corporate                          | M<br>W<br>N | Public /             |
|          | Programme Update                             | necessary decisions in order to progress the School                                  |                    |                                      | Jonathan                            | Palmer OBE                                       | consultees                         |             | Private              |
|          |  | Capital Programme in order to upgrade facilities and                                 |                    |                                      | Bianco and                          | / Bobby  |                                    |             | (3)                  |
|          |  | keep on track to deliver sufficient places for children                              |                    |                                      | Cllr David                          | Finch  |                                    |             |                      |
|          |  | educated in the Borough.   |                    |                                      | Simmonds                            |  |                                    |             |                      |
| 1        | Academy                                      | A standard report to Cabinet to seek approval for the                                | Varions            |                                      | Cllr David                          | RS -   |                                    | NEW         | Private              |
| П        | Conversions                                  | Council granting long leases to schools who wish to                                  |                    |                                      | / 8                                 | Michael  |                                    |             | (3)                  |
|          |  | convert to Academy Status.   |                    |                                      | CII                                 | Patterson  |                                    |             |                      |
|          |  |  |                    |                                      | Jonathan                            |  |                                    |             |                      |
| aa       | 99   |  |                    |                                      | Bianco                              |  |                                    |             |                      |
| 12       | inet Member D                                | Cabinet Member Decisions - June 2015   | _                  |                                      |                                     |  |                                    |             |                      |
|          |  |  |                    |                                      |                                     | 4  | 1,000                              | 787.114     |                      |
|          | Standard Items taken<br>each month by the    | ons each<br>tandard  | various            |                                      | Ā                                   | AU -<br>Democratic                               | various                            | A II        |                      |
|          | Cabinet Member                               | items are listed at the end of the Forward Plan.                                     |                    |                                      |                                     | Services   |                                    |             |                      |
|          |  |  |                    |                                      |                                     |  |                                    |             |                      |

| Ref     | Ref Decision  | Further information   | Ward(s)          | Final decision<br>by Full<br>Council | Gabinet<br>Member(s)<br>Responsible | Officer<br>Contact for<br>further<br>information | Consultation<br>on the<br>decision | NEW ITEM | Private<br>decision? |
|---------|---|---|------------------|--------------------------------------|-------------------------------------|--|------------------------------------|----------|----------------------|
| Council | Council Departments: RS = Residents Services CYPS = Children and Cabinot mooting - 73 Inly 2015 | Council Departments: RS = Residents Services  | al Care Services | ΑD                                   | tration FD= Finance                 | nce  |                                    |          |                      |
| למו     | חובר ווובברוווא -   | 23 July 2013  |                  |                                      |                                     |  |                                    |          |                      |
| S       | Monthly Council<br>Budget - monitoring  | The Cabinet receives a monthly report setting out in detail the Council's revenue and capital position. | T A              |                                      | CIIr<br>Jonathan                    | FD - Paul<br>Whaymand                            |                                    | NEW      |                      |
|         | report  |   |                  |                                      | Bianco                              |  |                                    |          |                      |
| S       | School Capital  | This report will update Cabinet and request any   | Various          |                                      | CIIr                                | RS - Jean  | Corporate                          | NEW      | Public /             |
|         | Programme Update  | necessary decisions in order to progress the School   |                  |                                      | Jonathan                            | Palmer OBE consultees                            | consultees                         |          | Private              |
|         |   | Capital Programme in order to upgrade facilities and  |                  |                                      | Bianco and                          | / Bobby  |                                    |          | (3)                  |
|         |   | keep on track to deliver sufficient places for children   |                  |                                      | Cllr David                          | Finch  |                                    |          |                      |
|         |   | educated in the Borough.  |                  |                                      | Simmonds                            |  |                                    |          |                      |
| Cab     | oinet Member D  | Cabinet Member Decisions - July 2015  |                  |                                      |                                     |  |                                    |          |                      |
| Pa<br>ਨ | Standard Items taken  |   | Various          |                                      | All                                 | AD -   | Various                            |          |                      |
| age     | each month by the   | each month by the month on standard items - details of these standard                                   |                  |                                      |                                     | Democratic                                       |                                    |          |                      |
| 1       | Cabinet Member  | items are listed at the end of the Forward Plan.  |                  |                                      |                                     | Services   |                                    |          |                      |
| 00      |   |   |                  |                                      |                                     |  |                                    |          |                      |

| NEW ITEM Private decision?                        |  | NEW Public and possibly private (1,2,3)  |  |
|---|--|--|--|
| Consultation<br>on the<br>decision                |  | Various  |  |
| Offlicer<br>Contact for<br>further<br>information | ance   | AD -<br>Democratic<br>Services   | AD - Democratic Services   |
| tapinet<br>Member(s)<br>Responsible               | nistration FD= Finance                                   | Clir Ray<br>Puddifoot<br>MBE   | D EACH N Cllr David Simmonds   |
| Final decision<br>by Full<br>Council              | s AD = Administration                                    |  | SIDERE   |
| Ward(s)   | ial Care Service   | Various  | WS CON   |
| Further information                               | Council Departments: RS = Residents Services             | er period where there is ed, the Leader of the gated authority to make a key financial, policy, would otherwise be ne Cabinet. This will utive decision-making, if a decisions will be nd reported to a for ratification. A fuller isions to be taken will be sible. | School Governing To approve appointments, nominate appointments and make reappointments of local authority governors and to approve any changes to school governing body constitutions. To also authorise any Officer or Member to be a Governor or Director of an Academy |
| Ref Decision                                      | council Departments: RS=Residents Services > August 2015 | decisions  | School Governing Bodies and Governors  |
| Ref   | Counc  | Page   | A <sup>™</sup>   |

# Work Programme 2014/2015

Contact Officer: Jon Pitt Telephone: 01895 277655

# **REASON FOR REPORT**

This report is to enable the Committee to review meeting dates and forward plans. This is a standard item at the end of each agenda.

# **OPTIONS OPEN TO THE COMMITTEE**

- 1. To confirm dates for meetings; and
- 2. To make suggestions for future working practices and reviews.

# **WORK PROGRAMME 2014/15**

| 25 Jun 2014 | Consideration of topics for the first major review of the year |
|-------------|--|
| VENUE: CR6  | School Admissions Update                                       |
|             | Cabinet Forward Plan - Review forthcoming decisions            |
|             | Work Programme – Review the work programme for the coming year |

| 29 Jul 2014 | 1 <sup>st</sup> Major Review – Consideration of Scoping Report     |
|-------------|--|
| VENUE: CR6  | Presentation on the SEND Reforms                                   |
|             | Budget Planning Report for Education & Children's Services 2015/16 |
|             | Cabinet Forward Plan - Review forthcoming decisions                |
|             | Work Programme – Review the work programme for the coming year     |

| 10 Sep 2014 | 1 <sup>st</sup> Major Review – Consideration of revised Scoping Report   |
|-------------|--|
| VENUE: CR6  | Report on the Ofsted report on Merrifield House Resource Centre  |
|             | Report on the thematic audit into the number of children on Children Protection Plans and the number of Child Protection Enquiries |
|             | Quarterly school place planning report   |
|             | Annual Complaints Report 2013/14 for Children and Young People's Services  |
|             | Cabinet Forward Plan - Review forthcoming decisions  |
|             | Work Programme – Review the work programme for the coming year   |

Children, Young People & Learning Policy Overview Committee – 15 April 2015

| 08 Oct 2014 | 1 <sup>st</sup> Major Review – 1st witness session             |
|-------------|--|
| VENUE: CR6  | Report on progress against the Ofsted Report Action Plans      |
|             | Cabinet Forward Plan - Review forthcoming decisions            |
|             | Work Programme – Review the work programme for the coming year |

| 26 Nov 2014 | 1 <sup>st</sup> Major Review – 2 <sup>nd</sup> witness session |
|-------------|--|
| VENUE: CR6  | Consideration of topics for single meeting review              |
|             | Cabinet Forward Plan - Review forthcoming decisions            |
|             | Work Programme – Review the work programme for the coming year |

| 14 Jan 2015 | 1 <sup>st</sup> Major Review – 3 <sup>rd</sup> witness session  |
|-------------|---|
| VENUE: CR6  | Consideration of scoping report for single meeting              |
|             | Local Safeguarding Children's Board Annual Report               |
|             | Brief update on progress against the Ofsted Report Action Plans |
|             | Budget Proposals Report   |
|             | Cabinet Forward Plan - Review forthcoming decisions             |
|             | Work Programme – Review the work programme for the coming year  |

| 18 Feb 2015 | Consideration of draft final report from first major review                 |
|-------------|---|
| VENUE: CR6  | Report on the Additional Needs Strategy                                     |
|             | Quality Assurance and Audit Framework – Children's Services - verbal update |
|             | Single meeting review - witness session                                     |
|             | Cabinet Forward Plan - Review forthcoming decisions                         |
|             | Work Programme – Review the work programme for the coming year              |

| 18 Mar 2015 | Progress Report on Action Plan in Response to Ofsted Inspection of Services to Children in Need of Help and Protection, Children Looked |
|-------------|---|
| VENUE: CR6  | After and Care Leavers ("Ofsted Action Plan")   |
|             | Standards and Quality in Education in Hillingdon 2013/2014  |
|             | Single Meeting Review - Hillingdon's Implementation of the Special Educational Needs and Disability (SEND) Reforms - Draft Report       |
|             | Cabinet Forward Plan - Review forthcoming decisions   |
|             | Work Programme – Review the work programme for the coming year  |

| 15 Apr 2015            | Quarterly Child Social Care Audit Update 2014/2015  |
|------------------------|---|
| VENUE: CR3<br>and CR3a | Children's Social Care Improvement Plan   |
|                        | Review of Care Leaver's Grant   |
|                        | Quarterly school place planning   |
|                        | Update on the Implementation of Recommendations from past reviews of the Committee:   |
|                        | i) Elective Home Education ii) Strengthening the Council's Role as a Corporate Parent iii) Improving Outcomes for Care Leavers Not in Education, Employment or Training |
|                        | Cabinet Forward Plan - Review forthcoming decisions   |
|                        | Work Programme – Review the work programme for the coming year  |

<sup>\*</sup>all meetings begin at 7pm unless otherwise stated