



### Children, Young People and Learning Policy Overview Committee

#### Date: WEDNESDAY, 17 FEBRUARY 2016

Time: 7.00 PM

Venue: COMMITTEE ROOMS 4 & 4A - CIVIC CENTRE HIGH STREET, UXBRIDGE, UB8 1UW

### MeetingMembers of the Public andDetails:Press are welcome to attend<br/>this meeting

#### **Councillors on the Committee**

Jane Palmer (Chairman) Nick Denys (Vice-Chairman) Teji Barnes Jem Duducu Duncan Flynn Becky Haggar Tony Eginton Peter Money Jan Sweeting (Labour Lead)

#### **Other Voting Representative**

Anthony Little, Roman Catholic Diocesan.

#### Published: Tuesday, 9 February 2016

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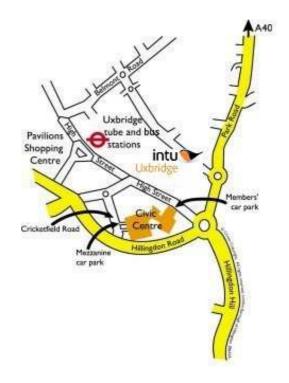
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### **Terms of Reference**

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   |         |
|---|---|---------|
| 2 | Declarations of Interest in matters coming before the meeting   |         |
| 3 | 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 |         |
| 4 | To agree the minutes of the meeting held on 13 January 2016   | 1 - 8   |
| 5 | Children and Young People's Social Care Service Improvement Plan - Progress Report  | 9 - 50  |
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| 7 | Forward Plan  | 55 - 60 |

**Minutes** 

CHILDREN, YOUNG PEOPLE AND LEARNING POLICY OVERVIEW COMMITTEE



13 January 2016

Meeting held at Committee Room 5 - Civic Centre, High Street, Uxbridge UB8 1UW

|     | Committee Members Present:<br>Councillors Jane Palmer (Chairman), Nick Denys (Vice-Chairman), Teji Barnes,<br>Jem Duducu, Duncan Flynn, Tony Eginton, Manjit Khatra, Jan Sweeting (Labour Lead)<br>and Mr Tony Little.   |
|-----|--|
|     | Laurie Baker (Interim Head of School Improvement/Education Quality & Strategy),<br>Susan Hynds (Manager - Early Years Advisory), Dan Kennedy (Head of Business<br>Performance, Policy & Standards), Peter Malewicz (Group Finance Manager),<br>Tom Murphy (Head of Early Intervention Services), Tony Zaman (Corporate Director Of<br>Social Care) and Jon Pitt (Democratic Services Officer). |
| 52. | APOLOGIES FOR ABSENCE (Agenda Item 1)  |
|     | Apologies for absence were received from Cllr. Becky Haggar, with no substitute in attendance and from Cllr Peter Money, with Cllr Manjit Khatra substituting.   |
| 53. | <b>DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THE MEETING</b><br>(Agenda Item 2)  |
|     | There were no Declarations of Interest made.   |
| 54. | TO CONFIRM THAT ITEMS OF BUSINESS MARKED PART 1 WILL BE<br>CONSIDERED IN PUBLIC AND THAT THE ITEMS MARKED PART 2 WILL BE<br>CONSIDERED IN PRIVATE (Agenda Item 3)  |
|     | It was confirmed that all items were Part I and would be discussed in public.  |
| 55. | <b>TO AGREE THE MINUTES OF THE MEETING HELD ON 25 NOVEMBER 2015</b><br>(Agenda Item 4)   |
|     | Resolved: That:  |
|     | 1. The minutes of the meeting held on 25 November 2015 be agreed as a correct record.  |
| 56. | BUDGET PROPOSALS REPORT FOR CHILDREN, YOUNG PEOPLE AND<br>LEARNING SERVICES 2016/17 (Agenda Item 5)  |
|     | Officers provided a presentation on the draft revenue budget and Capital Programme of the Children, Young People and Learning Services for 2016/17. During the presentation it was noted that:   |

 The draft budget proposals had been initially considered by Cabinet on 17 December 2015. Cabinet would next consider the proposals on 18 February 2016. The proposals would then go to Council for approval on 25 February 2016. This report would include comments made by the Policy Overview Committee. It was requested that the Committee agree a formal comment following the officer's presentation.

- The December Cabinet meeting had considered the budget prior to the Council having received notification of its Local Government Finance Settlement. The impact of the finance settlement was still being worked through as there were still a number of other funding streams where the Council had not yet received an update and the indication was that this was likely to take place in February 2016.
- The budget proposals had been compiled with the impact of the Government's deficit reduction programme in mind. This had seen a reduction of 56% (£67m) in Government funding to the Council since 2010/11, with indications being that the level of funding would continue to fall. The savings identified had taken into account the proposal to freeze Council Tax for an eighth successive year and funding the freeze for older persons into a 12<sup>th</sup> successive year. Balances and reserves had been maintained at well above the minimum recommended level.
- During 2015, the Council had agreed to provide significant additional resources for Children and Young People Services. This had included the continued use of agency staff at all levels. A structural review was undertaken to ensure that there was enough capacity to manage caseloads and that there were clear lines of management control and accountability. This resulted in a flatter management structure having being proposed.
- The structure for Children's Services had now been agreed and recruitment activity was being undertaken. Senior management posts had been filled first. Two service manager posts had been filled, leaving one that remained vacant. There were now only six vacancies remaining of 23 Team Manager posts across Children's Services.
- The recruitment of Social Workers had started in October 2015, with further recruitment activity due to be undertaken early in 2016. The recruitment activity was looking across the country and beyond in order to fill the posts.
- The total cost to the Council of Looked After Children (LAC) was increasing. This was due to some children having increasingly complex needs rather than it being due to the number of LAC increasing. The number of LAC was in line with expectations for a population the size of Hillingdon's.
- Around one third of Hillingdon LAC were unaccompanied asylum seekers, which suggested that the number of non-asylum seeker LAC was relatively low compared to other council areas. Asylum seeker LAC tended to be older teenagers in the 16-18 age bracket. The cost of looking after these children ranged from £3,400 to £6,000 per week (£176,800 per annum to £312,000 per annum). Members were informed that it is more cost effective to use in house Council provision rather than an external provider.
- The number of asylum seeker children arriving in Hillingdon was stable. In Kent and other areas with seaports, there had been significant increases in arrivals. This has not been seen in Hillingdon, despite Heathrow Airport being in the Borough.
- The Home Office had advised all councils that grant funding would be provided for eligible asylum seeker children at a rate of £114 per day for eligible under 16's, £91 per day for eligible 16 to 17 year olds and £150 per week for those eligible aged over 18. In response to a Member question, it was confirmed that Council was required to meet the funding shortfall in order to provide care to

these groups.

- Hillingdon was seeing a growing number of over 18 asylum seeking children, compared to the number of those who were under 18. This was due to a high number of younger children arriving five to six years ago who were now becoming adults.
- The number of primary schools pupils was continuing to grow, with there having been an increase of nearly 850 pupils between October 2014 and October 2015. Growth at secondary level was much smaller, but it was anticipated that this would rise in the future as the extra primary pupils moved to secondary school.
- Conversion by schools in the Borough to Academy status continued. 38 schools in Hillingdon were now Academies. Two other schools were looking to convert to Academy status.
- The Government had confirmed that a National Funding Formula would be introduced from April 2017. This would cover all funding streams, including Early Years, schools and High Needs.
- The entitlement to free child care for three and four year olds would be increased for working parents from 15 to 30 hours per week.
- The Education Services Grant would be reduced by 75% and it was anticipated that this would eventually be abolished. It was noted that one school had stated that they would lose £170,000 of their budget as a result.
- The proposed capital programme reflected population growth within the • Borough. Local authorities were obliged to fund capital programmes to enable the expansion of existing schools and the building of new ones. The successful programme of primary expansion had now largely been delivered with a residual forecast need for additional places in the north of the Borough. There was a need for additional secondary school places. Officers advised that pupil forecasts were kept under close review. The total cost of these programmes was approximately £200 million, with the Government funding approximately half the cost and Council Tax payers the other half.

#### Discussion

A Member reflected that, given the reduction in Government funding, he considered that officers had done a good job in developing a budget that addressed all relevant issues.

Another Member voiced concerns about the level of savings that the budget was proposing to make. These amounted to total savings of 12.1 million across the Council, with 3.6 million of this due to come from Children, Young People and Learning Services. The Member was concerned at the scale and depth of budget reductions to some of the most important services. Some services were still in need of further improvement and there was a danger that cuts would undermine the improvements made to date.

Reductions to the Troubled Families budget and to that of Business Performance and Intelligence were highlighted as being of concern. In the case of the latter, it was worrying that reductions were proposed in this area given that the major review on 'The Effectiveness of Early Help to Promote Positive Outcomes for Families' [due to be presented to the Committee later in the meeting] was proposing that the use of data and intelligence be further developed to enhance service delivery. The review had also suggested that Early Intervention and Prevention Services needed to improve promotion of its offer to ensure that the maximum number of families were aware of the provision and could benefit from it. The Member was not clear how this could be achieved against the backdrop of a budget reduction of £600,000 on a current service Page 3

budget of £8 million.

In response to the concerns raised, officers advised that different ways of working were delivering efficiencies to enable the savings to be made without impacting on service delivery. Efficiencies would also be made through improving value for money. Savings were also being made through the negotiation of more efficient contracts and by increasing in-house foster care provision. Each in-house fosterer used saved £20,000 compared to using an external provider.

With regard to Business Performance and Intelligence, processes had been reviewed, with teams being brought together. The teams had been re-organised to deliver greater efficiencies and focused on corporate priorities. The restructured service was able to operate more effectively with a reduced budget.

It was questioned whether possible increased future demand for primary places had been taken into account. Officers stated that forecasts showed that primary school demand had been largely met in Hillingdon, although there was some residual demand in the north of the Borough. There could also be future additional demand in the Hayes area, in part due to continued investment in residential and commercial developments. The forecasts were reviewed annually. It was not anticipated that excess demand would be a significant issue. It was, however, anticipated that there would be a significant increase in secondary demand in the next five to eight years.

Members asked what action was being undertaken to deal with schools that had been identified as being at risk of coasting. Officers responded that such schools would be contacted for the concerns to be discussed and would be given the opportunity to work collaboratively with partners in Hillingdon and beyond.

A Member asked whether additional expenditure was incurred over and beyond the provision of the Troubled Families Grant, when supporting such families. It was also questioned whether the Council paid other organisations who took on aspects of this work and how Children's Centres could continue to provide the current range of services if the budget was reduced by 50%. It was confirmed that the Grant funded Council costs and was not passed on to partner organisations. The Council's Early Intervention and Prevention Service worked with partners to identify families in need of 'Troubled Families' support. 262 families were being targeted by this work in this year. With regard to Children's Centres, service provision was not being reduced, the 50% reduction related to a realignment of resources relating to delivery programmes, where the resources are managed across the Children's Centre Programme. The required savings noted were being found by working more efficiently, such as through collective buying by the locality groups.

The Chairman felt that, based upon the evidence that she had seen, that the changes made within Children's Services would improve efficiency. Improved efficiency enabled budgetary savings to be made. Therefore, significant budget reductions did not necessarily mean a reduction in service provision.

#### Resolved: That:

- 1. That the report be noted.
- 2. The Committee noted the budget proposals submitted and acknowledges the work that has been undertaken in providing a working budget, noting constraints placed via external funding streams. Concerns were expressed by some Members about the level of saving that needed to be achieved

|     | and the effect on services. There was no consensus amongst the Committee Members as to whether reductions in funding would have an impact on the service delivered.   |  |
|-----|---|--|
| 57. | <b>STANDARDS AND QUALITY IN EDUCATION IN HILLINGDON - 2014/2015</b> (Agenda <i>Item 6</i> )   |  |
|     | Officers introduced the report to provide Members with an overview of the standard and quality of education within Hillingdon schools. The report focused on attainment and achievement for the academic year 2014/15. The information was being presented to the Committee for comment prior to it being considered by Cabinet on 18 February 2016. It was noted that The Hillingdon School Improvement Plan 2015-18, which had been approved by Cabinet in 2015, was also included in the information presented to the Committee.   |  |
|     | Within Hillingdon, the overall attainment of early years and primary age pupils had risen<br>in 2014/15. Most key measures of educational progress and attainment showed<br>significant improvement compared to 2014 data. Results remained in line with or above<br>national averages.   |  |
|     | Overall performance of Hillingdon pupils at Foundation Stage for the seven key subject areas showed significant improvement. Levels of development were good, with significant gains compared to 2013/14. For Writing, outcomes were 2.2% above the national average, while Media and Materials was 2.6% above average. However, performance for Speaking was 1.9% below the national average, while for Managing Feelings and Behaviour, it was 2.6% below average. The percentage of pupils demonstrating an overall good level of development increased from 52% in 2013/14 to 65.2% in 2014/15, although this was still below the national average of 66.5%.  |  |
|     | Also at the Foundation Stage, boys outperformed girls against most measures. For literacy, boys were 3.9% above the national average and 6% above the London average. For maths, the attainment of boys was 1.6% above the national average. The achievement of girls was slightly below the national average, by 1.2% for literacy and 1.9% for maths. Overall for the areas of Communication and Language; Personal, Social and Emotional Development and Physical Development, the attainment of pupils receiving Pupil Premium funding was 7% below that of pupils not receiving the funding. Performance of pupils receiving the premium was 15% below other pupils for Maths and 17% below for Literacy.  |  |
|     | Priorities for the Foundation Stage included continuing to support teachers to make<br>secure and consistent judgements and focusing moderation on the areas of Personal,<br>Social and Emotional Development; Communication and Language and Understanding<br>the World. Work would be undertaken to ensure that girls made appropriate progress<br>and strategies would be developed to help teachers to better support children whose<br>first language is not English. Pupils receiving Early Years Pupil Premium would also be<br>supported to help them make progress in line with their peers who are not in receipt of<br>the funding. Finally, leadership and management skills of teachers of the Early Years<br>and Foundation Stage would be supported in order to facilitate more effective<br>monitoring and self evaluation. |  |
|     | In response to a Member question, officers advised that the 'Understanding the World' topic area covered the more traditional subject areas of geography, history and Information Technology.   |  |

A Member welcomed the progress made at the Foundation Stage, while noting that performance remained below the London average in all but one subject area. It was questioned why performance remained relatively low at the Foundation Stage, compared to London overall. Officers advised that the Moderation Programme was three years into a four year programme. 75% of schools had been moderated, with 25% remaining. It would take the full four years to get a full picture of the progress made by Foundation Stage pupils in Hillingdon. It was anticipated that 12 of 17 Individual Learning goals would be achieved. The work being undertaken was making a positive impact, but it was acknowledged that there was still work to be done to improve pupil performance in this area. There appeared to be some resistance within schools to the moderation work being undertaken. Therefore, it was important to ensure effective engagement with schools to overcome barriers and to provide teachers with the support required. This was achieved, in part, through the hosting of moderation events that every Early Years Teacher was required to attend.

Members asked what role the Council could play in improving the performance of academies and free schools. Officers advised that schools would often voluntarily engage to seek advice and support and that contact would be made with schools where there were concerns about pupil attainment. Other measures could include the issue of warning letters to schools and reporting the school to the Regional Schools Commissioner.

Performance at Key Stage 4 was less strong, although the gap was closing between disadvantaged and non disadvantaged pupils. The percentage of children in Hillingdon obtaining at least 5 A\* to C grades at GCSE (including English and Maths) had fallen 3% between 2014 and 2015, from 59% to 56%. This compared to a national decline of 0.5%, from 57% to 56.5%.

In response to a Member question, officers advised that the overall performance of Hillingdon schools at Key Stage 4 ranked 24<sup>th</sup> of the 34 London Boroughs. This was an improvement of four rankings compared to the previous year. Further work was needed in order to understand performance at Key Stages 4 and 5 and why there was a relative decline amongst Hillingdon pupils when compared to performance at earlier stages. This would involve working with schools and 14-19 providers to drive improvement and hold leadership teams to account, where appropriate. Schools liaised with governor committees with a view to improving performance and a School Strategic Partnership Board had been established.

Sixteen schools in Hillingdon had been inspected in 2014/15. Of these, six received an improved judgement, while ten of the sixteen had received a downgrade. Most of the decreased grades were schools previously judged as being good, which were now judged as requiring improvement. In many cases, these downgrades were linked to leadership, management and governance of the schools and/or to lower outcomes for disadvantaged pupils.

Concerns were raised by Members about grade inflation and how this was been addressed. Officers advised that schools had varying approaches, noting that some schools were part of the Early Adoption Scheme for core maths qualifications. Where there were specific concerns, these could be raised directly with the school and with the Regional Schools Commissioner.

Borough wide data had been utilised previously in order to challenge school performance. This exercise was due to be repeated in March 2016.

|     | Resolved: That:  |
|-----|--|
|     | <ol> <li>That the report be noted.</li> <li>Early Years and Foundation Stage data be circulated to the Committee,<br/>broken down by educational planning area.</li> <li>The following comment be submitted on behalf of the Committee for<br/>inclusion in the forthcoming report to Cabinet:</li> <li>"The Committee is encouraged to see improvements made at the<br/>Foundation and Primary stages of education. However, it must be<br/>recognised that further work is required, particularly at Key Stages 4 and<br/>5. Members were concerned by the level of progress of young people with<br/>Special Educational Needs (SEN) and of pupils who are able, but<br/>disadvantaged."</li> </ol> |
| 58. | SINGLE MEETING REVIEW DRAFT SCOPING REPORT - SUPPORTING<br>EDUCATIONAL ASPIRATION FOR DISADVANTAGED CHILDREN (Agenda Item 7)   |
|     | Officers introduced the scoping report for the proposed single meeting review by the Committee on 'Supporting Educational Aspiration for Disadvantaged Children.' The key aim of the review was to investigate the attainment of disadvantaged pupils and to identify what steps could be taken to improve this. Attainment of disadvantaged pupils was below that of their non-disadvantaged peers at all educational stages, up to and including Key Stage 4. Locally, the gap was closing at Key Stage 1 and 2, while there was a significant gap at Key Stage 3. There was a particular problem with regard to the attainment of white British boys who were from disadvantaged backgrounds.       |
|     | The Committee's attention was drawn to the proposed Terms of Reference and also to<br>the proposed list of witnesses for the review, both of which were contained within the<br>officer's report. The Committee considered that the proposed list of six witnesses was<br>too ambitious for a single meeting review. Accordingly, it was agreed that the number<br>of witnesses would be reduced to four and that school governors would be removed<br>from the list of potential witnesses.   |
|     | Committee Members welcomed the proposed topic, noting that the review needed to consider existing examples of good practice and data to enable it to geographically identify where the most disadvantaged pupils were within the Borough. It was also requested that the review consider the impact of ethnicity, cultural diversity and gender on the performance of disadvantaged pupils.  |
|     | Resolved: That:  |
|     | 1. Subject to revision to the list of proposed witnesses, the Committee<br>agreed the scoping report presented and instructed officers to make<br>arrangements for a witness session to be held at the February 2016<br>meeting of the Committee.  |
| 59. | MAJOR REVIEW DRAFT FINAL REPORT - THE EFFECTIVENESS OF EARLY<br>HELP TO PROMOTE POSITIVE OUTCOMES FOR FAMILIES (Agenda Item 8)   |
|     | The Chairman introduced the draft final report of the Committee's review on 'The Effectiveness of Early Help to Promote Positive Outcomes for Families.' The Committee was satisfied with the recommendations proposed by what was considered to be a well written report that covered all the key concerns identified during the  |

| ,   |   |
|-----|---|
|     | witness sessions.   |
|     | The Chairman thanked Members and officers for the contribution they had made to the final report.   |
|     | It was noted that the Joint Strategic Needs Assessment, which had informed the review, would not include standalone recommendations. However, the data contained within it would enable individual services to make informed judgements about how service provision could be targeted. Reference was made to recommendation 2a of the major review, which recommended that the use and sharing of data and intelligence required for effective service delivery be developed. |
|     | Resolved: That:   |
|     | <ol> <li>The Committee agreed the draft report as presented by the Chairman.</li> <li>That the Chairman would present the draft report to Cabinet on 18<br/>February 2016.</li> </ol>   |
| 60. | WORK PROGRAMME 2015/16 (Agenda Item 9)  |
|     | Resolved: That:   |
|     | 1. The Work Programme be noted.   |
| 61. | FORWARD PLAN (Agenda Item 10)   |
|     | Resolved: That:   |
|     | 1. The Forward Plan be noted.   |
|     | The meeting, which commenced at 7:00 pm, closed at 8:50 pm.   |

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

#### Agenda Item 5 CHILDREN AND YOUNG PEOPLE'S SOCIAL CARE SERVICE IMPROVEMENT PLAN - PROGRESS REPORT

Contact Officer: Vince Clark / Sarah Hydrie Telephone: 01895 250498

#### **REASON FOR ITEM**

This report aims to provide a summary of the status of the CYPS Service Improvement Plan as at February 2016. The Plan gives an overview of all of the key areas of activity and details of the current stage of improvement work within Children and Young People Social Care. Within the context of the Department's overall plan, this paper sets out progress against each work stream and the performance measures used. In summary, the plan is substantially completed and on track to meet service objectives set in March 2015.

#### SUGGESTED COMMITTEE ACTIVITY

It is recommended that the Committee notes the development of the Service Improvement Plan and progress undertaken to date and comments as appropriate on the direction of travel and pace of improvements within the service.

#### INFORMATION

#### Background

- 1. In March 2015, the Children's Social Care Services Improvement Plan (SIP) (refer to appendices) was developed using the Transformation Children's Pathway work streams. The SIP acknowledges the urgency required to deliver better outcomes for children within Hillingdon. It enhances the work already completed as part of the Ofsted Improvement Plan 2014 and ensures that recent improvements are sustained and built upon. At that time, the service was characterised as having a high turnover of staff, high caseloads and an inconsistent level of service delivery. The main objective of the plan was, therefore, to stabilise the service by prioritising recruitment, improving the service structure and delivering key statutory services to a consistently high standard. The plan contained seven work streams with performance measures, milestones and key targets for each area of the Service:
  - 1) Workforce Development;
  - 2) Improving Triage, MASH and Referrals & Assessment;
  - 3) Improving social work practice within the Children's Social Work Teams;
  - 4) Improving outcomes for Looked After Children & Young People;
  - 5) Improving the quality of Fostering & Adoption provision;
  - 6) Embedding new ways of working and improved practice management arrangements; and
  - 7) Effective Quality Assurance.

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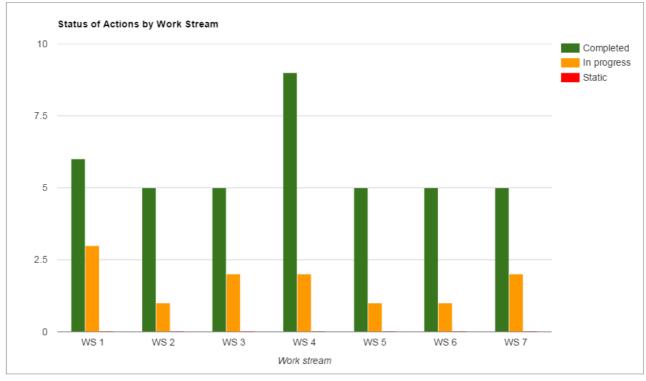
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#### **Progress Summary**

2. Since the last update to the Committee in October 2015, the service has been progressing well to complete actions across all work streams. The table and graph below summarise the progress which has been made since the Service Improvement Plan was introduced in March 2015 across each of the 7 work streams.

|             | Total No of<br>Actions | Completed                       | In Progress               | Static         | % Completed    |
|-------------|------------------------|---------------------------------|---------------------------|----------------|----------------|
| Jul<br>2015 | 52                     | Reporting med<br>against each a | chanism being d<br>action | eveloped to mo | nitor progress |
| Oct<br>2015 | 52                     | 25                              | 27                        | 0              | 48%            |
| Jan<br>2016 | 52                     | 40                              | 12                        | 0              | 77%            |

#### Summary Table



Graph depicting actions by work stream

3. The graph shows that steady progress continues to be made against all 52 actions in the Plan, with 40 actions COMPLETED, 12 actions IN PROGRESS and 0 are STATIC. This shows that 77% of actions in the Plan have been COMPLETED. The Assistant Director and Project Manager continue to meet with Service Managers on a monthly

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basis to update, challenge and track progress against the Plan. The CYPS Dashboard, produced by the Performance & Intelligence team, has also been provided to the Committee (refer to appendices) as evidence of service stability and continued improvement.

- 4. In October's update to the Committee, it was acknowledged that service improvement activity for the Early Intervention Service was also planned. This part of the Service has been undergoing major change during 2015/16, including the development of a service delivery model, which is designed to support and dovetail with that of Children's Social Care. Although the Early Intervention Service is not a formal part of the CYPS Service Improvement Plan, progress within Early Intervention is closely monitored by the DCS and his Senior Management Team to ensure there is a close synergy between the two service areas. Plans are now in place to incorporate the Early Intervention Service into the planning cycle for 2016/17, so that there will be a single CYPS Service Plan developed for the forthcoming financial year. The recommendations which were issued following the Committee's major review of the Early Intervention Service will be incorporated into next year's Service Plan.
- 5. The 2015/16 Service Improvement Plan will be concluded by the end of March 2016 and a final report submitted to the Committee in April 2016. The Children's Services Business Plan for 2016/17, which will include specific actions related to Early Intervention Service, is currently being developed and will initially be presented to the Committee as part of the next update.

#### PAPERS WITH THE REPORT

**Appendix 1** - London Borough of Hillingdon Children's Social Care Improvement Plan 2015/16.

Appendix 2 - Children's Social Care Improvement Action Plan 2015/16.

Appendix 3 - CYPS Dashboard.

Appendix 4 - Glossary.

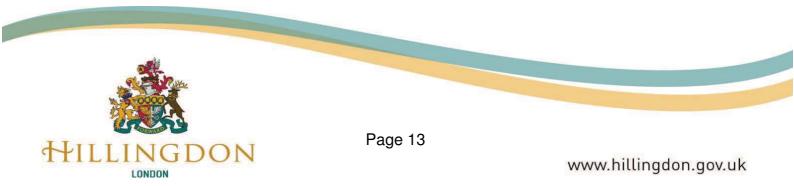
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### London Borough of Hillingdon Children's Social Care Services Improvement Plan 2015-16

Version 1 final March 2015



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  - 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:
  - o Court Tracker
  - Fostering Panel Advisor
  - o Child Sexual Exploitation (CSE) Prevention Manager
  - o MASH process
  - o 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.

## Workstream 1: Workforce Development

|   | Action / Proces | v    |            |            |  | I argets and Outcomes   | Progress at 8th Feb 2016  |  |  |
|---|-----------------|------|------------|------------|--|---|---|--|--|
| Action  | -               | Lead | Start Date | End Date   | Performance Measures and<br>Milestones   | Key Targets   | Progress - Actions  | Status Cna   | Changes post<br>Sept 2015              |
| Update website to enable prospective applicants to have a<br>good understanding of what Hillingdon can offer and<br>expectations of the role of a Social Worker   |                 | НК   | 01/04/2015 | 01/03/2016 | 01/03/2016 New website functional  | By Sept 2015 website updated and online. In   | Meetings held with Penna who specialise in recruitment marketing. Focussing on<br>developing the Councils's empoyment brand, initially we will develop with Penna a<br>strong proposition clearly articulating the Council's successes, direction, delivery<br>model and competitive remuneration. This will be communicated on a new<br>recruitment portal or 'micro-site' which will later be used for other recruitment across<br>the Council's empower. | Completed -<br>Retired                                       |  |
| Applicant packs to contain all relevant information and<br>guidance when applicants considering Hillingdon as their<br>chosen workpace. Explanation contained in the pack of<br>supervision, POD work, support etc. |                 | HR   | 01/04/2015 | 01/07/2015 | TBC by HR  | On hold until Transition plan agreed by the A<br>Leader<br>F  | A new Social Worker Job Profile has been developed clearly defining career<br>progression and professional development within the Council. This will be a key<br>message in the necruitment campaign and we will invite social workers to 'grow your<br>professional career at Hinrgoon.  | Completed -<br>Retired                                       |  |
| Recruitment process through to delivery to meet the needs of the service in line with the improvement plan  |                 | HR   | 01/05/2015 | 01/03/2016 | Transition Plan agreed by the<br>Leader  | Improve the ratio of permanent to agency -<br>social workers within the Service. Target is<br>85% to permanent within the Service | <ul> <li>Transition Plan agreed by the Leader</li> <li>Phase 1 of the recruitment campaign concluded in October; recruitment to<br/>Management vacancies is almost complete;</li> </ul>   | In progress  |  |
|   |                 |      |            |            |  |   | Team Managers   |  |  |
|   |                 |      |            |            |  |   | 17 appointments made<br>16 aren post 15 pending pre employment checks<br>2 an YPS, 5 in FAA, 4in CSW1, 4 in CIC, 1 in RAS   |  |  |
|   |                 |      |            |            |  |   | Advanced Practitioners<br>2 appointments made<br>1 is in out 2 are pending post approval prior to offer letters being sent<br>- 1 in FA, 2 in YPS   |  |  |
|   |                 |      |            |            |  |   | Senior Social Workers   |  |  |
|   |                 |      |            |            |  |   | 9 appointments made<br>- 5 in CSWT, 4 in CIC  |  |  |
|   |                 |      |            |            |  |   | Social Workers  |  |  |
|   |                 |      |            |            |  |   | <ul> <li>9 appointments made</li> <li>- 3 are in post, 1 starting in Feb, 1 starting in March, 4 are pending pre employment<br/>checks</li> <li>- 3 in ClC, 2 in FA, 2 in RAS, 1 in YPS, 1 in CSWT</li> </ul>   |  |  |
|   |                 |      |            |            |  | 1   | - The current % of perm staff has risen to 65% (excluding Skylakes)   |  |  |
|   |                 |      |            |            |  |   | Phase 2 advertisements have recently closed and 29 applications are currently<br>being reviewed   |  |  |
| Induction process for every new worker to be embedded as<br>standard practice, and to achieve 100% compliance with<br>current staff receiving a refresher induction to update their                                 |                 | L&D  | 01/01/2015 | On-going   | 100% of new workers attended induction programme   | All staff inducted  | - A day induction programme was laurothed in January 2015. The programme runs Completed<br>eveny month and invites? Expects delegates to attend through the New Staters Orgoing<br>Form process or from Managers booking skisting staff onto the programme.   | completed -<br>Ongoing                                       |  |
|   |                 |      |            |            |  |   | - The number of delegates has increased steadily since the recruitment campaign was launched, with the current attendance at $57\%$   |  |  |
| AYSE support to be embedded, with clear standards and<br>requirements set out to encourage these newly qualified  | 1               | L&D  | 15/03/2015 | On-going   | VQSW's remain in<br>rk posts, 2 years after  | High standard ASYE programme resulting in -<br>NOSWs taking up permanent social worker  |   | Completed -<br>Ongoing                                       |  |
| workers to remain in Finingdon ong-term   |                 |      |            | <u> </u>   | Burymenp   | poss in minigoon, and creating opportunity<br>to grow future managers and create a stable<br>workforce                            | posts in mimigoon, and creating opportunity<br>posts in thimigoon, and create a stable -All Newly Qualified Social Workers encol onto the ASYE programme, the Learning<br>workforce in an agers and create a stable -All Newly Qualified Social Workers encol onto the ASYE programme and<br>inducus them and their assessor/line manager to the programme and support them<br>through the programme  |  |  |
|   |                 |      |            |            |  |   | - All NQSW's are permanent staff but if they do not satisfactorily complete the ASYE programme their contract of employment can be terminated   |  |  |
|   |                 |      |            |            |  | -   | - As at Dec 2015 there were 11 NQSW's in CYPS with more due to start in Jan 2016  |  |  |
| Social Work Pathway to be embedded to ensure career<br>structure is supporting individual needs   |                 | L&D  | TBC by L&D | TBC by L&D | TBC by L&D TBC by L&D All professional social work<br>posts have a career pathway<br>established | Renewed job profile and job description for -<br>NQSW, SW and AP  | <ul> <li>The new career pathway for targeted posts have been developed and<br/>implemented as part of the recruitment programme</li> </ul>  | Completed - <mark>This a</mark><br>Retired has no<br>retired | This action<br>has now been<br>retired |
|   |                 |      |            |            |  |   | - New career pathway used to facilitate the recruitment process   |  |  |

## Workstream 1: Workforce Development

|   | Action / Process | ş  |             |            | Improvement  | mprovement Targets and Outcomes   | Progress at 8th Feb 2016  |                      |                              |
|---|------------------|--|-------------|------------|--|---|---|----------------------|------------------------------|
| Action  |                  | Lead   | Start Date  | End Date   | Performance Measures and<br>Milestones   | Key Targets   | Progress - Actions  | Status               | Changes post<br>Sept 2015    |
| Supervision structures to be embedded to ensure 100% AD C   | AD O             | Circ Barrows Safeguarding                                | 01/04/2015  | Sept 2015  | AD Children's Safeguarding 01/04/2015 Sept 2015 100% Compliance in the definence of a compliance of the definence of the defi | All staff receiving timely, good quality<br>supervision in line with the Hillingdon   | - A comprehensive supervision monitoring and audit tool has been developed and implemented across CYPS. It is supplemented by regular practice audits   | Completed - Songoing | Status<br>changed from       |
| periorinarce management processes to be creat and routed to the order of the dealing with competency issues   |                  | AD OLC, FEITIAIRIEUCY &<br>Children's resources          |             |            | -  |   | - All managers to provide supervision to staff in line with Hillingdon's Supervision Policy   |                      | 'Completed -<br>Ongoing' and |
|   |                  |  |             |            |  |   | <ul> <li>All Service Managers have ensured that supervising managers have received<br/>supervision induction and training within the first two weeks of employment (agency<br/>or permanent)</li> </ul>   | 20                   | be monitored                 |
|   |                  |  |             |            |  |   | <ul> <li>Implemented supervision tracker which demonstrates variation and clear focus for<br/>new Team Managers and supervision tracker in place for all staff and monitored on<br/>a monthy basis. At Des 2015 the Service was 99% compliant with the delivery of<br/>supervisions. This continues to be monitored on a monithy basis and any slippage is<br/>discussed between Service Managers and the Assistant Director</li> </ul> |                      |                              |
|   |                  |  |             |            |  |   | - Fortnightly POD supervisions taking place supported by the Practice Improvement Practitioners (PIP)   |                      |                              |
| PADA reaches 100% completion on time and is robust in AD C<br>identifying current practices of the worker identifying<br>comparison and manage of the worker and and and the more     | AD O             | Children's Safeguarding                                  | 01/04/2015  | 01/04/2016 | By May 2015 all social work staff<br>in Children Social Care have a  | AD Children's Safeguarding 01/04/2015 01/04/2016 By May 2015 all social work staff PADA targets to be rolled out to all staff.<br>In Children awa and checks are undertaken to ensure that and checks are undertaken to ensure that | <ul> <li>6 month PADA reviews took place over Quarter 3 and annual reviews are due to<br/>start in April 2016</li> </ul>  | In progress          |                              |
|   | 20               | Children's resources                                     |             |            |  | PADA reaches 100% completion  | <ul> <li>- All Service Managers to ensure that supervising managers have received PADA<br/>induction and<br/>permanental</li> </ul>   |                      |                              |
| Management development plan to be completed for all AD C<br>managers to support their practice with clear measures of<br>performance incorporated in their development plan / PADA AD |                  | D Children's Safeguarding<br>and<br>AD CiC, Permanency & | 01/04/2015  | 01/04/2016 | AD Children's Safeguarding 01/04/2015 01/04/2016 100% of managers to have a AD AD CLUC Permanency & AD CLUC Permanency & AD CLUC Permanency &  | All managers have a clear plan of support<br>and career progression   | <ul> <li>- Management development training has been commissioned (from Penna) for all<br/>managers and will commence in Quarter 4, following successful recruitment of the<br/>permanent cohort of Team Managers</li> </ul>   | In progress          |                              |
| 2   | נ                |  |             |            |  |   | - All Service Managers to complete management development plans with their managers   |                      |                              |
|   |                  |  |             |            |  |   |   |                      |                              |
| STATUS OF ACTIONS for 2015/16   |                  | Completed  | In progress | Static     | Total  |   |   |                      |                              |
| Number  |                  | 6  | 3           | 0          | 6  |   |   |                      |                              |
| Percentage  |                  | 67%  | 33%         | 0%         |  |   |   |                      |                              |

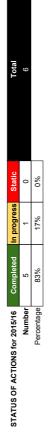
Work stream 2: Improving Triage, MASH and Referrals & Assessment

### Appendix 2

| is now part of the<br>ill be reported in o  | or cc<br>ted i<br>he - t<br>red,<br>t<br>ano<br>tim<br>s<br>s<br>s<br>tan<br>discu  | mmplian<br>heir Jc<br>secale<br>secale<br>iff (incl<br>ingh le<br>nent a<br>obser  | impliance ac<br>n Sept and a<br>which has be<br>which has be<br>are in place<br>if (incl pilots),<br>uss actions, I<br>uss actions, I<br>uss actions, I<br>uss actions, I<br>and Raviser<br>nent adviser<br>nent a | impliance acriev<br>n Sept and a De<br>which has been<br>which has been<br>are in place<br>escale<br>ff (incl pilots) hav<br>ff (incl pilots) hav<br>ff (incl pilots) hav<br>ff (incl pilots) hav<br>ff (incl pilots) hav<br>actions, has<br>us actions, has<br>actions, has<br>us actions, the<br>second second<br>baservice our MASH as the<br>ped across to ea<br>advice and infor<br>mar who will be t<br>starting in Feb 2<br>at two teams ov  | impliance achieved<br>n Sept and a Detect<br>her Jobs will be to the<br>which has been<br>at are in place<br>ascale<br>ff (incl 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|   | evidenced in supervision meet<br>- MASH protocols have been c<br>- 97% of assessments comple<br>- UK Borde Agency and Britis<br>received safeguarding training<br>- Fortnightly meetings with Sly<br>in referrals decreasing                            | <ul> <li>MASH protocols have bee<br/>- MASH protocols have bee<br/>- 97% of assessments com<br/>- UK Borde Agency and Bi<br/>received safeguarding train<br/>received safeguarding train<br/>- Forthightly meetings with<br/>in referrals decreasing<br/>- Review of decision makin<br/>and threshold managemen<br/>- The MASH to review<br/>visited the Visited the MASH to review<br/>visited the Visited the Visited the MASH to review<br/>visited the Visited the Visited the Visited the Visited the Visited<br/>visited the Visited the</li></ul> | <ul> <li>MASH protocols have bee</li> <li>MASH protocols have bee</li> <li>97% of assessments corr</li> <li>97% of assessments corr</li> <li>UK Border Agency and B<br/>received safeguarding train</li> <li>Forthightly meetings with<br/>in referrals decreasing with<br/>in referrals decreasing with<br/>and threshold management</li> <li>The Met Police have ack<br/>reficient in London. Norwar<br/>dozen requests by other lo<br/>process</li> <li>The available outcome in<br/>to Children's Social Care:</li> </ul>  | <ul> <li>MASH protocols have bee</li> <li>MASH protocols have bee</li> <li>97% of assessments corr</li> <li>UK Border Agency and B<br/>received safeguarding trait</li> <li>Fortrightly meetings with<br/>in referrals decreasing with<br/>in referrals decreasing with<br/>and threshold managemer</li> <li>Review of decision makin<br/>and threshold managemer</li> <li>The Met Police have ack<br/>visited the MASH to review<br/>visited the mASH to revisited the review<br/>visited the mASH to review<br/>visited the mASH</li></ul> | <ul> <li>MASH protocols have bee<br/>- MASH protocols have bee<br/>- 97% of assessments com</li> <li>- UK Border Agency and B<br/>received safeguarding train<br/>- Environ of decision makina<br/>and threshold management</li> <li>- The Met Police have ack<br/>reficient in London. Norwai<br/>verified the mASH to review<br/>dozen requests by other lo<br/>process</li> <li>- There are plans to recruit<br/>over from Skylakes. The fin<br/>approcess and 468 contacts</li> <li>- Recruitment for the Team<br/>aspointed to the FASI to recruit<br/>over from Skylakes. The fin<br/>approtect to the Pasina<br/>services and 468 contacts</li> <li>- Recruitment for the Team<br/>appointed to the FASI to recruit<br/>over from Skylakes. The fin<br/>and under to the Pasina to<br/>recruitment for the Team</li> </ul>   | <ul> <li>MASH protocols have bee<br/>- MASH protocols have bee<br/>- 97% of assessments com<br/>- UK Border Agency and B<br/>received safeguarding train<br/>- Endinghity meetings with<br/>- Forthighity meetings with<br/>- Review of decision markin<br/>and threehold management<br/>- The Met Police have ack<br/>reficient in London. Norwai<br/>dozen requests by other lo<br/>process</li> <li>The Met Police have ack<br/>reficient in London. Norwai<br/>dozen requests by other lo<br/>process</li> <li>There are all addition and<br/>and threehold management<br/>- There are all addition. Norwai<br/>dozen requests by other lo<br/>process and 468 contacts</li> <li>There are plans to recruit<br/>over from Skylakes. The fin<br/>appointed to the RAS tan<br/>appointed to th</li></ul> |   |  |   |  | , with the second se  | jo j   |
|   | <u>, , , , , , , , , , , , , , , , , , , </u>   |  |  |   |   |  | nd time, 15   | nd time, 15-   | nd time, 15-  | nd time. 15  | , with the second se  | o o  |
| A budits and data indicating consistent decision-making from Tinage<br>and MSH. Audit of decision-making planned, 95% straget<br>- On-going partner discussion regarding thresholds and delivery of<br>training to partners to explore social care decision making and the<br>MSH concept<br>- The MSH Manager remains the final decision maker on all cases<br>progressing for assessment. |   |  |  | All staff in post by March 2016   | I post by March 2016  | t post by March 2016   | All staff in post by March 2016<br>- Eurocioning RAS (Skylakes)<br>- Functioning RAS (Skylakes)<br>- Re-referral rate and children subject to a Plan a second time, 15-   | i post by March 2016<br>ing RAS (Skylakes)<br>ing RAS (Skylakes)   | n post by March 2016<br>ing RAS (Skylakes)<br>ing RAS (Skylakes)  | ul staff in post by March 2016<br>Ernctioning RAS (Skylakes)<br>Functioning RAS (Skylakes)<br>Re-referral rate and children subject to a Plan a se<br>0% target<br>Assessment Service is established and resourced<br>Resourced<br>Research rates and issues meetings are held.  | All staff in post by March 2016<br>All staff in post by March 2016<br>Functioning RAS (Skylakes)<br>Functioning RAS (Skylakes)<br>Re-referral rate and children subject to a Plan a second time, 15-<br>20% target<br>Assessment Service is established and resourced.<br>Assessment Service is established and resourced.<br>Freqular risks and issues meetings are held.<br>Performance data is collated and shows achievement of indicators.<br>Freqular risks and inew work being competed more feducation of backots cases will alleviate pressures the ackots on the social backots cases will alleviate pressures the social cases will alleviate pressures the social case social cases and new work being competed more feducation of backots cases and new work being competend more feducation of backots cases and new work being competend more feducation of backots cases and new work being competend more feducation of backots cases and new work being competend more feducation of backots cases and new work being competend more feducation of backots cases and new work being competend more feducation of backots cases and new work being competend more feducation of backots cases and new work being competend more feducation of backots cases and heavit cases and new work being competend more feducation of backots cases and new work being competend more feducation of backots cases and new work being competend more feducation of backots cases and new work being competend more feducation of backots cases and new work being competend more feducation of backots cases and heavit cases  | All staff in post by March 2016<br>- Eunctioning RAS (Skylakes)<br>- Functioning RAS (Skylakes)<br>- Re-referral rate and children subject to a Plan a second time, 15-<br>20% target<br>- Re-referral rate and children subject to a Plan a second time, 15-<br>- Re-referral rate and children subject to a Plan a second time, 15-<br>- Re-referral rate and children subject to a Plan a second time, 15-<br>- Re-referral rate and children subject to a Plan a second time, 15-<br>- Re-referral rate and children subject to a Plan a second time, 15-<br>- Re-referral rate and children subject to a Plan a second time, 15-<br>- Re-referral rate and children subject to a Plan a second time, 15-<br>- Re-referral rate and children subject to a Plan a second time, 15-<br>- Intervolution (Plance) |
| 10,55,0,  |   |  |  | A P   | e e   | × au   | new A   | and not  | and not   | · · / / / / / / / / / / / / / / / / / /  |  |  |
| - MASH craring identifies statutory sectial work services<br>Step across to early help services<br>Contacts assisted through advice and information<br>- Re-referral rates<br>- Effectiveness of initial RAG rating by MASH is above<br>90%   |   |  |  | trive the establishment and   | trive the establishment an<br>Dury Teams in line with th  | trive the establishment an<br>Duy Teams in line with the   |   |  |   | Trive the establishment an<br>Duty Teams in line with the<br>receive a statutory service<br>y social work for 6 month<br>elivery model is agreed ar  |  | The recruitment will drive the establishment and implementation of 4 Duty Teams in line with the new service model. 'A families no bonger receive a statutory service and n re-referred to statutory social work for 6 months. 'R families no bonger receive a statutory service that will underted uty tasks and assessments of all children in need. 'Delivering 100% of CPC within 15 days Delivering 100% of CPC within 15 days Service and not re-referred to statutory social work for 6 months.   |
| - MASH clearly identifie<br>Fierp across to early he<br>Contacts assisted throu<br>- Re-referral rates<br>- Effectiveness of initial<br>90%   |   |  |  | The recruitment will drive the establishment implementation of 4 Duty Teams in line with service model.   | The recruitment will driv<br>implementation of 4 Du<br>service model.   | The recruitment will driv<br>implementation of 4 Du<br>service model.  | The recruitment will dri-<br>implementation of 4 Du<br>service model. of 4 Du<br>service model. of 9 to 10 to 1   | The recruitment will driv<br>implementation of 4 Du<br>service model. of 4 Du<br>service model. of 6 model re-<br>referred to statutory  | The recruitment will driv<br>implementation of 4 Du<br>service model. of 4 Du<br>service model. of 4 Du   | The recruitment will drive the establishment<br>implementation of 4 Duty Teams in line with<br>service model. of 4 Duty Teams in line with<br>families no longer receive a statutory ser-<br>re-referred to statutory social work for 6 mor<br>re-referred to statutory social work for 6 mor  | The recruitment will driving<br>implementation of 4 Du<br>service model. o | The recruitment will drive the establishme implementation of 4 Duty Teams in line will service model. If the additional service model is a statutory social work for 6 model is a statutory social work for 6 model is a statutory and assessments of all childrance that an average of 30 days per assessments of any social work for with an average of 30 days occal work for and for the families no longer receive a statutory and re-referred to statutory social work for the other of a statutory and re-referred to statutory as a social work for the statutory and re-referred to statutory and re-referr                           |
|   |   |  |  | 01/03/2016  | 01/03/2016  |  |   |  |   |  |  |  |
|   |   |  |  | Service Manager 01/08/2015 01/03/2016   | unager 01/08/20   | ninger 01/08/20 <sup>-</sup>   | mager 01/08/2015  | unager 01/08/20 <sup>-</sup><br>H  | unager 01/08/20 <sup>-</sup>  | anager 01/08/20 <sup>-</sup><br>anager 01/04/20 <sup>-</sup><br>are 01/04/20 <sup>-</sup>  | nager 01/08/201<br>H<br>H<br>H<br>H<br>H<br>H<br>H<br>(1/11/20<br>iare 01/11/20  | nager 01/08/201<br>4<br>4<br>4<br>4<br>6<br>01/04/20<br>4<br>6<br>6<br>6<br>6<br>1/11/20   |
|   |   |  |  |   |   |  |   |  |   |  |  | - 0  |
|   |   |  |  | lablish an effective Referral and   | ablish an effective Referral and  | blish an effective Referral and<br>ment Service  | bish an effective Referral and<br>ment Service<br>will be an increase in families<br>for at 8 yours it with 9 mins in social<br>in GP / CIN work) - seen via  | bish an effective Referral and<br>ment Service<br>down at hicreases in families<br>a down at hicreases in families<br>contacts post assessment<br>ing CP / CN work) - seen via<br>ing CP / CN work) - seen via   | blish an effective Referral and<br>ment Service<br>will be an increase in families<br>to ontacts, posit assessment<br>d and capacity data set   | ablish an effective Referral and<br>sment Service<br>will be an increase in families<br>for down at key points in social<br>to contacts, post assessment<br>in dard capacity data set<br>and capacity data set<br>in that they deliver to contract<br>an accustent good performance<br>an accustent good performance   | thish an effective Referral and<br>smerit Services in families<br>in down at key points in social<br>down at key points in social<br>tring CP / CIN work) - seen via<br>and capacity data set<br>and capacity data set<br>of contract<br>of contract<br>an acceptable practice   | To establish an effective Referral and<br>Assessment Service<br>Assessment Service are in families<br>reperted and contracts, post areases and<br>are (at contacts, post areases and<br>demand and capacity data set<br>and uning contacter post areat<br>and to an acceptable practice<br>standard  |

# Work stream 2: Improving Triage, MASH and Referrals & Assessment

|                                | Changes post<br>Sept 2015           | Performance<br>measure has<br>measine-worded<br>for clarity  | status has<br>changed from 'In<br>Corgores' to<br>Orgong at di<br>Corgong at di<br>continue to be<br>monitored   |   |
|--------------------------------|-------------------------------------|--|--|---|
|                                | Status Cha                          | Completed Performance<br>- Retired measure has<br>been re-word<br>for clarity  | completed Status has<br>- Origoing pranget from 'in<br>progress to<br>Origoing and will<br>completed<br>monitored<br>monitored   |   |
| 9                              | ŝ                                   | - <u>- 8</u>   |  |   |
| Progress at 8th Feb 2016       | Progress - Actions                  | <ul> <li>There are no more issues from Triage</li> <li>1-2-1 training with Triage in place</li> <li>Monthly meetings help identify issues and are dealt with<br/>immediately</li> <li>ICS contains advice on performing referrals</li> <li>100% permanent staff employed in EDT</li> </ul>   | <ul> <li>MASH partnership to deliver DV specialist role to MASH to identify completed Status has an enhance service offered to families identified with DV risk.</li> <li>Implemented risk service offered to families identified with DV risk.</li> <li>Ongoing a completed the completed status has the monomend of the CADA-DASH Risk (admitted to the Assessment and SW completed To a family service for the CADA-DASH Risk (admitted to the Assessment and SW completed the arms and of Barnados DV identification matrix.</li> <li>There is now a dedicated DV worker in MASH</li> <li>DV training for all staff has been planned through SQB. First session on DV and statis has each of the Rock place on 18(09/2015 and the next is due to take place on 16(01/2016, Triage staff have completed their fraining up to level 3.</li> <li>Full time IDVA appointed within MASH and 0.5 FTE IDVA to be appointed within MA</li></ul> | -   |
| provement Targets and Outcomes | Key Targets                         | - EDT to work in line with the social work teams and remain consistent in their approach to recording.<br>- Snapshort Review to be discussed at SMM for further<br>improvement consideration<br>- Full EDT review completed in April 2015 and sent to senior<br>manager and Finance for budget monitoring purposes<br>manager and Finance for budget monitoring purposes | - Training to be rolled out by QA service on DV tools March onwards.<br>- New activities to be linked with DV strategy and plan.   | stream 4). The new reference number is 4.11.  |
| Improvement                    | Performance Measures and Milestones | On-going TRIAGE team report low number of issues weekly of incorrect recording and timeliness of reporting.  | Service Manager 01/04/2015 01/09/2015 - Improved signposting for DV families from CSC.<br>Trager<br>MASH<br>MASH<br>MASH<br>- Social Works and audits indicate an improvement in<br>assessment quality re. DV families.<br>- Full time IDVA appointed within MASH.   | The Lead for this action has been changed from Service Manager Triage/MASH to Service Manager Children's Resources (work stream 4). |
|                                | End Date                            |  | 01/09/2015   | ge/MASH to S  |
|                                | Start Date                          | 01/04/2015   | 01/04/2015   | Manager Tria  |
| Process                        | Lead                                | Service Manager 01/04/2015<br>Trage/<br>MASH   | Service Manager<br>Träger<br>MASH<br>ASH   | ged from Service N  |
| Action / Process               | Action                              | Improve EDT staff recording practice<br>following snapshot review.   | Improve service offer for DV   |   |
|                                | Ref                                 | 2.5  | 0.Q  | 2.7   |



# Work stream 3: Improving social work practice within the CSWTs

|                                  | Changes post<br>Sept 2015           | Status has<br>changed from 'In<br>progress' to<br>'Commered -  | Ongoing' and will<br>continue to be<br>monitored   |   |  | Status has<br>changed from 'In<br>Progress' to<br>Completed -<br>Ongoing' and will<br>continue to be<br>monitored  | Status has<br>changed from 'In<br>progress' to<br>Completed -<br>Orgoing' and will<br>continue to be<br>monitored   |  |  |
|----------------------------------|-------------------------------------|--|--|---|--|--|---|--|--|
| -                                | Status                              | Completed<br>- Ongoing   |  |   |  | Completed<br>- Ongoing   | Completed<br>- Ongoing  |  | s<br>s   |
| Progress at 8th Feb 2016         | Progress - Actions                  | <ul> <li>The main advertising campaign has been working successful<br/>and positive outcomes are being reported. The recruitment<br/>campaign is ongoing and interviews are still underway.</li> </ul> | <ul> <li>- 4/6 permanent Team Managers (TM) have been appointed,<br/>with 2 remaining TM posts being recruited to and interviews are<br/>underway</li> </ul> | - 100% statutory work allocated<br>- Average caseload per social worker remains good at target 18 | (reter to action 3.2)<br>- The Early Intervention and Prevention structure has been<br>agreed and implemented. Family Support provision will be<br>provided through this service | <ul> <li>Benchmark for caseloads agreed in line with London<br/>Standards document: 18 avergae across the service.</li> <li>Casaloads are reviewed on a regular basis. As of Jain 2016 the<br/>average caseload is 18. There is regular monitoring of<br/>throughput of work and caseload fluctuations are common.</li> <li>100% allocation of all statutory cases.</li> </ul> | <ul> <li>Supervision tracker has been implemented across all teams.<br/>There are monthly reports to the Assistant Director<br/>Supervision performance for CSWT:<br/>201 - 178%<br/>02 - 80%<br/>03 - 74%</li> </ul> | <ul> <li>Supervisions are being monitored and scrutinised on a<br/>monthly basis at the Service Managers meeting (SMM)</li> <li>From August 2015 Practice immovement Practionens have<br/>audited performance and PCD supervision and prepared an<br/>action plan where managers have addressed issues. Audits<br/>have been completed and are discussed at the Service<br/>Managers meeting fortinghty</li> </ul> | <ul> <li>100% compliance in TM's undertaking audits - ongoing</li> <li>Case audits showing improvement in grading:</li> <li>Case audits showing improvement in grading:</li> <li>46% judged good or better at the tar 25% program of the target 2015 - work ongoing</li> <li>55% judged good or better at Sept 2015 - work ongoing</li> <li>55% judged good or better at Sept 2015 - work ongoing</li> <li>EIP's are supporting practice improvement in assessments introugin direct work with TM's and social workers linked to audit outcomes</li> <li>Update Learning &amp; Development key messages to staff</li> <li>Practice training on assessment skills will continue to be delivered through the West London Alliance training programme</li> <li>97% throughput of assessments</li> <li>New TM training underway in March 2016 with a focus on practice issues and quality (Penna)</li> </ul>   |
| Improvement Targets and Outcomes | Key Targets                         | - Stable workforce to achieve good outcomes for families.  | - Families receive a targeted service and increase in direct work when children are subject to CP/CIN plans.   |   |  | <ul> <li>To ensure Social Workers are supported with manageable<br/>caseload and the work undertaken on the cases is undertaken in<br/>timely manner with good outcomes for families.</li> <li>There is flexible use of agency staff across the service which is<br/>aligned with demand.</li> </ul>   | Monthly report on supervision indicates that staff are receiving 1-1 supervision in line with the Hillingdon supervision policy and that where this doesn't occur, clear explanations are given.                      |  | <ul> <li>Social work assessments contain clear analysis and informed<br/>judgements on intervention models to be used with families</li> <li>Assessments reflect the child's voice and social work engagement<br/>with the family and partner agencies</li> <li>Improved throughput of work from referral to social care planning<br/>to permanency, with a clear focus on legal planning and pre-<br/>proceedings work (Early intervention, CIN, CP, LAC or Children's<br/>Patiway).</li> <li>All Case records to contain up to date chronologies.</li> <li>All Case records to contain up to date chronologies.</li> <li>New management structure was implemented on 1st June 2015.</li> <li>Programme start date to be confirmed.</li> <li>Social workers to receive training on what good looks like' in<br/>assessments.</li> <li>Assessments to reflect meaningful engagement with children and<br/>their families with required outcomes clearly identified.</li> </ul> |
| Improvement                      | Performance Measures and Milestones | - Permanent recruitment  | - Recruit support staff to assist with intensive social work intervention  |   |  | Weekly data set indicate that all Social Workers have an average caseload of 18 children.  | <ul> <li>100% compliance and delivery of supervisions</li> <li>100% POD supervision</li> </ul>  |  | <ul> <li>100% compliance in team managers undertaking audits.</li> <li>35% good by March T2015</li> <li>50% good by March 2015</li> <li>50% good by March 2016</li> <li>80% good by March 2016</li> <li>80% speck success and recorded to staff supervision is delivered and recorded to staff report its been fit.</li> <li>100% supervision is being delivered and staff report its been fit.</li> <li>New management structure implemented by June 2015</li> <li>Confissment training programme to be commissioned from the QA service and rolled out to all social work practitioners.</li> </ul>  |
|                                  | End Date                            | 01/12/2015   |  |   |  | On-going   | On-going  |  | 01/04/2016   |
|                                  | Start Date                          | 01/07/2015 01/12/2015  | Dec 2015   |   |  | 01/01/2015   | 01/04/2015  |  | 01/04/2015   |
| ocess                            | Lead                                | AD<br>Children's Social<br>Care  |  |   |  | Service Manager<br>CSWT  | Service Manager<br>CSWT   |  | Service Manager 01/04/2016 01/04/2016<br>CSWT  |
| Action / Process                 | Action                              | Successful permanent recruitment to all social work and team manager posts   | Recruit family support workers, one to<br>each social work team  |   |  | Average caseloads - 18 cases per<br>qualified social worker  | Improving the level of professional supervision and development of staff  |  | Improve the quality of social work assessments in the CSWT   |
|                                  | Ref                                 | 3.1  |  |   |  | 3.2  | ю.<br>ю   | Page 3   | <b>A</b> .   |

# Work stream 3: Improving social work practice within the CSWTs

|                                 | Changes post<br>Sept 2015           | status has<br>charged from in<br>Organess in<br>continue to be<br>monitored   | Status has<br>progreed from 'in<br>progreed from 'in<br>Orgoning'and -<br>continue to be<br>monitored   |            |
|---------------------------------|-------------------------------------|---|---|------------|
|                                 | Status                              | Completed St<br>ongoing Pt<br>of OO<br>2006<br>2006<br>2006<br>2006<br>2006<br>2006<br>2006<br>20   | - Ongoing Ast<br>Program  |            |
| Progress at 8th Feb 2016        | Progress - Actions                  | al rates have remained within target parameters at<br>atturory cases allocated and have appropriate plans<br>and Step-down data results improving 6 month<br>seedings works 13.2-14 weeks average<br>sectings works 13.2-14 weeks average<br>a reduction in complaints. Alcurater 1, 2 and 3<br>were dealt within the 10 working days<br>where dealt within the 10 working days<br>where dealt within the 10 working days<br>where dealt within the 10 working days<br>were dealt within the 10 working days<br>were dealt within the 10 working days<br>were standards and guidance - Part of the Tri-<br>hich is due in Oct 2015<br>aupport staff in delivering timely interventions -<br>on pre-proceedings and PLO process have been<br>mit implemented<br>miprovement in the outcomes of PLO work as a<br>erface with Early Intervention Service is now being<br>ed  | <ul> <li>Permanent IDVA worker appointed to MASH to provide<br/>support and guidance to CYPS</li> <li>DV training provided by Learning &amp; Development and LSCB</li> <li>Initial review undertaken that allows Service to work more<br/>effectively</li> <li>Further reviews of Parenting Workers Contract with a clear<br/>link to throughput and quality of work</li> <li>Service review is near completion. Reviews have been<br/>completed and new contracts are being issued</li> <li>Review underway of the Service with a view to bring practice<br/>inchouse to CSWT and link it with Team Managers. Plan to<br/>implement this by April 2016</li> </ul>  |            |
| mprovement Targets and Outcomes | Key Targets                         | <ul> <li>Protocol outlining interface between Early Intervention Service and<br/>Protocol outlining interface between Early Intervention Service and<br/>Protocol actial Care is rolled out and targets agreed.</li> <li>Re-referral rates have remained within target parameters<br/>statutory intervention.</li> <li>Re-referral rates are reduced and in line with statistical neighbours.</li> <li>Re-referral rates are reduced and in line with statistical neighbours.</li> <li>Re-referral rates are reduced and in line with statistical neighbours.</li> <li>Re-referral rates are reduced and in line with statistical neighbours.</li> <li>Re-referral rates are reduced and in line with statistical neighbours.</li> <li>Reverwent and time-bound.</li> <li>Training on pre-proceedings work to be rolled out by Court<br/>and agrees and statistical and partners in freedback and surveys are clear<br/>compaints were dealt with with the 10 working days.</li> <li>Training on pre-proceedings work to be rolled out by Court<br/>and time-bound.</li> <li>Pradice guidance has been updated and rolled out but by Court<br/>and agrees and staff indelivering timely interventions.</li> <li>Prackies guidance has been updated and rolled out by Court<br/>and staff.</li> <li>Social workers are familiar with Tri-x (the electronic policies and<br/>procedures web portal)</li> <li>Reviewed and implemented.</li> <li>Provershops take place every forthight and there has ta<br/>result.</li> <li>Provershops take place every forthight and there has ta<br/>aresult.</li> <li>Procedures web portal)</li> <li>Procedures web portal)</li> <li>Procedures with Early Intervention Service is now bein<br/>result.</li> <li>Practice Standards rolled out in Jan 2016 to all social work is a<br/>result.</li> </ul> | DV on children is<br>afety plans and<br>experiencing<br>experiencing<br>- Once service is fully staffed targets for assessments to be<br>being<br>service). (See separate detailed briefing on the proposal for this<br>reputed.<br>- Parenting assessments to be completed within 6 weeks unless<br>agreed with legal and SW teams.  |            |
| Improvement                     | Performance Measures and Milestones | <ul> <li>-% families no longer receive a statutory service and not re-referred to statutory social work for 6 months.</li> <li>- Step-up and Step-down data indicates: <ul> <li>- Cli Rassa sverage 6 month</li> <li>- Cli Rassa sverage 6 month</li> <li>- Pre-proceedings work is 12-14 weeks average functions.</li> </ul></li></ul>   | 01/12/2015     On-going     Assessments reflect that the impact of DV on children is<br>ignoring to programmes for children experiencing<br>signoring to programmes for children experiencing<br>signoring to programmes for children experiencing<br>DV worker to be appointed to MASH       01/04/2015     Service to refresh protocol and offer.       - An increase in parenting assessments being<br>unless a clinical assessment is required.       - An increase in parenting assessments being<br>completed in -house for all pre-proceedings families<br>unless a clinical assessment is required.       - An increase in parenting assessments being<br>completed within new timescale.       - An increase in parenting assessments being<br>completed within new timescale.       - An increase consultation and training in<br>sessessments and pre-proceedings to be offered to<br>Social Care staff.       2     0 |            |
|                                 | End Date                            | On-going  | On-going<br>01/04/2016<br>Static<br>0   | %0         |
|                                 | Start Date                          | 01/04/2015  |   | 29%        |
| rocess                          | Lead                                | Service Manager<br>CSWT   | Servic<br>Servic  | 71%        |
| Action / Process                | Action                              | All social work interventions are provided<br>in a clearly defined and timely manner  | Defined response for all cases<br>factor<br>Provide effective parenting ass<br>service<br>STATUS OF ACTIONS for   | Percentage |
|                                 | Ref                                 | ທ<br>ຕໍ   | <sup>8</sup> Page 38  |            |

Work stream 4: Improving outcomes for LAC & Young People

|                          | Changes post<br>Sept 2015           | changed from 'In<br>changed from 'In<br>Corgonses to<br>Congoing and will<br>continue to be<br>monitored be  |   | Status has<br>progress from 'In<br>progress from 'In<br>Completed -<br>Ongoing' and will<br>continue to be<br>monitored  |  |
|--------------------------|-------------------------------------|--|---|--|--|
|                          | Status                              | - Ongoing  | Completed<br>- Ongoing  | Completed<br>- Ongoing   | n progras  |
| Progress at 8th Feb 2016 | Progress - Actions                  | <ul> <li>CLC and YPS teams have the majority of their managers on permanent contracts. 7/8 managers appointed across both services</li> <li>5% permanent staff in post in LAC</li> <li>50% permanent staff in post in LAC</li> <li>100% allocation of statutory LAC cases</li> <li>100% allocation of statutory LAC cases</li> <li>caseloads are within the service average which is 14 for CIC teams and 18 for YPS</li> <li>100% allocation LAC Balanced Caseloads has been achieved and maintained</li> <li>LAC visited within statutory timescale</li> <li>LAC visited within statutory timescale</li> <li>New managements now imbedded and actions in place to quarter</li> <li>New management arrangements now impovement from the last quarter</li> <li>All children missing from care are being reviewed and risk assessed on a weekly basis by the Service Manager</li> <li>All ATI missing children have been approved through the legal planning process at end of Dec 2015.</li> </ul> | - Average caseload remains steady, at 14 in Children in Care and 16 for Leave in Care in Jan 16 | <ul> <li>Implemented and maintained supervision tracker which demonstrates variation and clear focus for new TM's</li> <li>Supervision tracker in place for all staff. Supervision performance YP team:</li> <li>0.1 - 46%</li> <li>0.2 - 57%</li> <li>0.3 - 87%</li> <li>0.4 - 40%</li> <li>100% POD supervision for reflective case discussion which is in the process of being tracked forthightly. POD supervisions to address the progressions of API, the effectiveness of pathway plans including the progressions of API, the effectiveness of pathway plans including the progressions of API.</li> </ul> | <ul> <li>Planning underway for Care Leavers Conferance to take place in June 2016 in consultation with young people</li> <li>100% LAC who required an advocate currently receive an advocate via NAS</li> <li>Milestones for audited cases:</li> <li>48% judged good or better at March 2015 - work ongoing</li> <li>55% judged good or better at Dec 2015 - work ongoing</li> <li>55% judged good or better at Dec 2015 - work ongoing</li> <li>55% judged good or better at Dec 2015 - work ongoing</li> <li>55% judged good or better at Dec 2015 - work ongoing</li> <li>48% judged good or better at Dec 2015 - work ongoing</li> <li>55% judged good or better at Dec 2015 - under cafe at the care pathway plan by detailed recording. Thematic audit found 80% of cases where the child's voice was reflected in practice</li> <li>100% attend PLO and CSE training. Training is ongoing for the forsease where the child's voice was reflected in practice</li> <li>100% attend PLO and CSE training. Training is ongoing for the being trained as part of the L&amp;D requirements</li> <li>Samma of search and way plans by trainway them staff are being trained as part of the L&amp;D requirements</li> <li>Samma of search and throughout the service. YPS May day to the prover pathway plans to the relevance being the ending to make place the being there ending the place and throughout the service. YPS May day to the lack to plans to the lack place early 2016 with some YPS input to improve pathway plans</li> </ul> |
| argets and Outcomes      | Key Targets                         | <ul> <li>Permanent recruitment successful with all Team Managers<br/>appointed.</li> <li>Permanent recruitment with all social workers.</li> <li>Agency workers to fill vacancies.</li> <li>Regular Permanence management meetings implemented<br/>to track KPIs</li> </ul>  | - Average caseload maintained between 14 to 16 children per worker                              | - Clear robust decision making on all case files through QA audits Reflective practice and encourage learning good practice and development between Social Workers through QA audits. Build skill base within the team.  | <ul> <li>60% return rate for feedback forms</li> <li>Evidence of improved LAC and Leaving Care YP engagement.</li> <li>Staff attend training delivered to ensure good outcomes for children.</li> <li>90% attend PLO/CSE Training</li> </ul>   |
| Improvement Ta           | Performance Measures and Milestones | <ul> <li>All statutory posts are filled and caseloads are within the service average (14 for CIC teams) by Sept 2015.</li> <li>Weekly data set - 100% allocation LAC Balanced caseloads</li> <li>100% of LAC visited within statutory timescales.</li> <li>Low numbers of children missing from care &lt;5</li> <li>Weekly management oversight of all LAC missing</li> <li>80% permanent staff to agency ratio</li> </ul>   | - Weekly data set:<br>Average caseload for Children in Care Teams = 14                          | <ul> <li>100% compliance and delivery of supervisions</li> <li>100% POD supervision for all teams</li> <li>Implement supervision tracker across all teams - July</li> <li>2015</li> </ul>  | <ul> <li>Feedback forms and information leaflets to young people about service</li> <li>Number of LAC who require an advocate and receive and advocate should be 100%</li> <li>Corporate manager data:</li> <li>Corporate manager data:</li> <li>March 15 - 50% good</li> <li>March 16 - 80% good</li> <li>March 16 - 80% good</li> <li>Thematic audit demonstrates 80% of cases where the child's voice is reflected in practice</li> </ul>   |
|                          | End Date                            | On -going  | On-going  | On-going   | Or -going  |
|                          | Start Date                          | 01/04/2015   | 01/04/2015  | 01/04/2015   | 01/04/2015   |
| Process                  | Lead                                | Service Manager<br>LAC & YPs Team  | Service Manager<br>LAC  | Service Manager<br>Young People  | Service Manager<br>LVC   |
| Action / F               | Action                              | All LAC cases will be allocated to<br>ensure that all statutory LAC<br>requirements are met.   | Average caseloads remain within 14 -<br>16 cases per qualified social worker<br>(AYSE 12)       | Improving the level of professional supervision and development of staff   | Evidence of child or young person<br>participation in their care planning for<br>LAC and care leavers  |
|                          | Ref                                 | 4  | 4.2   | <sup>a</sup> Page 39   | 4  |

# Work stream 4: Improving outcomes for LAC & Young People

|                          | Changes post<br>Sept 2015           | Status has<br>progreed from 'In<br>progreed from the<br>Oropoing and will<br>continue to be<br>monitored  | 1. New<br>performance<br>measure (see<br>point 2)<br>2. Status has<br>2. Status has<br>progress from 'In<br>progress from 'In<br>progress d'and will<br>continue o be<br>monitored   |   |  |
|--------------------------|-------------------------------------|---|--|---|--|
| -                        | Status                              | - Ongoing   | - Ongoing  | - Ongoing   | - Ongoing  |
| Progress at 8th Feb 2016 | Progress - Actions                  | <ul> <li>New Practice Manager structure implemented in Sept 2015</li> <li>Full compliance with the case auditing framework</li> <li>The Public Law Outline (PLO) has been successfully implemented resulting in a reduction from application to final order</li> <li>Monthly Permanency Tracking meeting implemented</li> <li>Regular PLO meetings. Average PLO cases is just above 25 weeks (current cases) as of end of Jan 2016</li> <li>Supervision tracked and underway (refer to 4.3)</li> <li>Full review of the Section 20 voluntary cohort underway</li> <li>100% audit of cases:</li> <li>48% judged good or better at March 2015 - achieved</li> <li>55% judged good or better at Dec 2015 - work ongoing</li> </ul> | <ul> <li>- 90% LAC health assessments completed within timescale. The team<br/>are working closely with Health to develop measurements around<br/>notifications of review</li> <li>- Regular 6 weekly monitoring meetings in place to work with designated<br/>Health professionals to track and monitor health assessments,<br/>attendance is mandatory</li> <li>- The number of that health assessments at:<br/>- July 2015 was 55%</li> <li>- July 2015 was 65%</li> <li>- July 2015 was 65%</li> <li>- July 2015 was 66%</li> </ul> | <ul> <li>Residual actions from Ofsted Improvement Plan:<br/>Desision made to everilop tracting and monitoring system within ePEP<br/>so that all attainment and progress data is contained within one system<br/>accessible to SWs, DTs, VSGs and FCs. Date for completion set for April<br/>2015.</li> <li>Residual actions from Ofsted Improvement Plan:<br/>Amendments to be made to ePEP so that Action Plans agreed can be<br/>swart by 13th April 2015.</li> <li>Residual actions from Ofsted Improvement Plan:<br/>Amendments to be made to ePEP so that Action Plans agreed can be<br/>accessible to Strong to PP resources not implemented. 2014-2015<br/>porting device the offer PP resources not implemented. 2014-2015<br/>prepring devicy to action in March 2015, some have been used<br/>commissioning 1: 1 tuition, Book Trust to increase literacy and incentives<br/>to encourage LAC.</li> <li>Regular meetings with the Children in Need team and Virtual School<br/>- Weekly performance data used to monitor the completion of PEPs<br/>March 2015 - 51% PEPs completed<br/>- March 2015 - 50% EPS completed<br/>- Bec 2015 - 100% PEPs completed<br/>- Bec 2015 - 00% PEPs completed</li> </ul> | <ul> <li>IRO Service has agreed to escalate cases without a Permanency Plan,<br/>this escalation is in progress. All temalis sant to SM for CIC if a case is not<br/>being progressed for permenancy. The Permenacy Plans are also<br/>monitered in Permenancy Monitoring meetings</li> <li>- All long term voluntary (Section 20) care cases reviewed and<br/>appropriate long term plans now in place. All s20 cases have been<br/>appropriate long term plans now in place. All Placement Creater save been<br/>appropriate long term plans now in place. All Placement Orter cases reviewed and being returned to Court where<br/>appropriate. All cases have been reviewed and LPM. 12 cases have been<br/>returned to curr of placement orders to be reviewed. 2 cases surful to be sured.<br/>No other cases in LBH to be recinded. This action is complete.</li> </ul> |
| rgets and Outcomes       | Key Targets                         | <ul> <li>To ensure all care plans are robust to demonstrate good outcomes for LAC children</li> <li>Recruitment of permanent team manage is</li> <li>Average PLO cases is 26 weeks</li> <li>100% LAC reviews within timescales</li> <li>100% audit of cases</li> </ul>  | - 90% completion of LAC health assessments within 24 hours.<br>timescale, escalate to SM's and respond within 24 hours.<br>- Workshops for mental and VH teams   | 100% PEPs in place for all LAC between the ages of 3 years old, up to 18 years of age.  | <ul> <li>26 weeks achieved in court-monthly meetings</li> <li>To provide timely permanent outcomes for all long term<br/>LAC</li> <li>Review undertaken of all long term cases to promote<br/>permanent outcomes. All children with an adoption plan<br/>have been matched or placed with prospective adopters</li> </ul>  |
| Improvement Ta           | Performance Measures and Milestones | <ul> <li>1-2-1 supervision tracker</li> <li>Implement fortnightly performance management clinics</li> <li>Court outcomes and LAC reviews:</li> <li>The average of PLO cases to be concluded = 26 weeks</li> <li>100% of LAC reviews completed within timescale</li> <li>100% of LAC reviews completed within timescale</li> <li>March 15 - 50% good or better</li> <li>March 16 - 80% good or better</li> <li>March 16 - 80% good or better</li> </ul>  | 01/01/2015 01/12/2015 Updates from Data and weekly Performance meetings.<br>6-weekly performance meetings with Health partners   | <ul> <li>Updates from Data and weekly Performance meetings.</li> <li>Ensure all children who are LAC and not meeting their periores na effective plan in place through the PEP, to ensure progression.</li> <li>Milestones for the completion of a Personal Education PED:</li> <li>March 15 - 50% completed</li> <li>Dec 15 - 100% completed</li> </ul>  | <ul> <li>The average of PLO cases to be concluded = 26 weeks.</li> <li>weeks.</li> <li>weeks.</li> <li>worthors dream withing for family finding 9 months of earthy inhibite a 30%.</li> <li>Percentage of children waiting for family finding 12 months of entry into care = &lt;10%.</li> <li>All Section 20 by March 2016, 100% over a year has a Permanency Plan</li> </ul>  |
| -                        | Start Date End Date                 | Service Manager 01/04/2015 31/03/2016   |  | 01/01/2015 01/12/2015   | 01/04/2015 31/03/2016  |
| rocess                   | Lead                                | Service Man:<br>LAC   | Service Manager<br>LAC   | Head of Virtual<br>School   | Service Manager<br>LAC   |
| Action / P               | Action                              | Effective management oversight is in<br>place leading to better and more timely<br>decision-making<br>eccinon-making  | Health placement outputs demonstrate<br>good outcomes for LAC  | Education placement outputs<br>demonstrate good outcomes for LAC  | Improve monitoring and timeliness of<br>permanent placement provision for<br>LAC   |
|                          | Ref                                 | 4<br>ບໍ   | ۶<br>۴   | äge 40  | 4<br>©   |

Work stream 4: Improving outcomes for LAC & Young People

|         | Action / Process   | rocess   |                         |                   | Improvement Ta  | vement Targets and Outcomes   | Progress at 8th Feb 2016   |                        |  |
|---------|--|--|-------------------------|-------------------|---|---|--|------------------------|--|
| Ref     | Action   | Lead   | Start Date              | End Date          | Performance Measures and Milestones   | Key Targets   | Progress - Actions   | Status                 | Changes post<br>Sept 2015  |
| 4<br>0  | Im proving outcomes for Leave in Care  | Service Manager<br>LAC   | 01/07/2015              | 31/03/2016        | Service Manager 01/07/2015 31/03/2016 Monitoring NEET, accommodation and Pathways Plans   | - Key targets are being agreed at the Care Leavers sub-<br>group of the Corporate Parenting Board<br>- 80% pathway plans in place   | Freview of shared accomomdations bi monthly by TM/Service Manager.<br>Further report completed and presented to Corp Parenting Board Jan<br>inform actions for next years SIP.<br>- Montoring of NEET performance and practice undertaken by regular<br>evelows by the Leaving Care Working group of the Corp Parenting Board<br>- There is regular fredback from the Sawree Manager of Corp Parenting Board<br>- Veekty meetings taking place between performance team and YPS.<br>Woekty meetings taking place between performance team and YPS.<br>Work is underway to mprove the quality of different of the 2016<br>of care leavers. P&I team to provide the data by end of Fe2 2016<br>and answer session to improve practice.<br>- YPS Away Day booked in April 2016. "Stepping out" young people's<br>group boxelet to undertake platway plant and mode and wetstons and answer session to improve practice.<br>- NEET remains on the Care Leavers Working group agenda. Champion<br>within the YPS to work with Corporate Parenting Manager<br>and the NEET issues. YPS are working with Corp Parenting out"<br>and the Dertification working mouth suber and which a britch and<br>which the PARioverships and work with Corporate Parenting Manager<br>and the Dertification working mouth corporated and supported<br>and the Dertification working mouth corporated parenting Manager<br>and the Dertification working mouth corporated parenting auto-<br>tranameter and corporated parenting Manager. | n progress             | There is a new<br>key target<br>concerning<br>pathway plans,<br>which has been<br>added  |
| 4.10    | All LAC children over the age of 16<br>years old to have an allocated worker.<br>Over 18 care leavers will have a<br>Personal Advisor allocated  | Service Manager<br>LAC & Manager<br>Children & Young<br>People Service |                         | 31/03/2016        | 01/04/2015 31/03/2016 Weekly Data Monitoring:<br>- 100% allocation = all 16 plus open cases<br>- 100% pathway plans = All eligible care leavers   | To improve the outcomes for young people leaving care.  | ated to all LAC YP over the age of 16<br>have an effective Pathway Plan<br>is plus open cases<br>ave a Pathway Plan<br>ne process of being cleansed due to<br>col. The Service Manager has had<br>the March 2016   | Completed<br>- Ongoing | <ol> <li>Action updated.<br/>Will have a<br/>Personal Advisor<br/>allocated' has<br/>been amended</li> <li>End date has<br/>changed to<br/>31/03/2016</li> </ol>         |
| Fage 41 | 11 Establish effective working relationship Service Manager 01/03/2015 On-going With the Asylum Intake Team (AIT) Young People 01/03/2015 On-going People 15 People 16 | Young People   | 01/03/2015              |                   | <ul> <li>Delivering 100% of assessments within 45 days max<br/>with an average of 30 days per assessment</li> <li>Performance Indicator meetings held weekly to ensure<br/>ongoing case management</li> </ul> | <ul> <li>UKBF and AIT to work in partnership with operations to safeguard children/YP vulnerable to FGW CSE/ trafficking/<br/>terrorism</li> <li>100% LAC asylum allocated</li> <li>Develop a clear process for allocation</li> </ul> |  | - Ongoing<br>- Ongoing | 1. New action<br>inhich has been<br>inhich fas been<br>inhich from 2.<br>Lead officer has<br>been changed<br>been changed<br>accordingly.<br>2. 3rd Key Target<br>is new |
|         | STATUS OF ACTIONS for 2015/16<br>Number<br>Percentage  | Completed<br>9<br>82%  | In progress<br>2<br>18% | Static<br>0<br>0% | Total<br>11   |   |  |                        |  |

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

|                          | Changes post<br>Sept 2015           |  | now been retired   | now been retired   | Status has<br>progress from 'In<br>Completed -<br>Ongoing   |  |  |  |
|--------------------------|-------------------------------------|--|--|--|---|--|--|--|
|                          | Status (                            | - Retired  | . Reitred Tt   | - Retired Th<br>- Retired no   | Completed St<br>oniopino<br>2 주 전<br>2 주 주 주 주 전<br>2 주 주 주 주 주 주 주 주 주 주 주 주 주 주 주 주 주 주 주   |  |  |  |
| Progress at 8th Feb 2016 | Progress - Actions                  | <ul> <li>Implement a managed service with Coram and HCL</li> <li>All 29 outstanding assessments allocated and completed by Oct 2015</li> <li>Implement HCL staffing cohort to prototype service model</li> <li>Implement regular performance management systems for adoption and fostering</li> </ul>  | ice<br>be<br>0015.<br>016<br>00<br>00<br>00<br>00<br>00<br>00<br>00<br>00<br>00<br>00<br>00<br>00<br>00  | <ul> <li>Data set has been agreed to provide regular management info<br/>against adoption scorecard</li> <li>ICS/Performance intellighter Fam continue to meet monthly to<br/>cliscuss data provided to track timescales for approval of carers</li> <li>Continued scrutiny of data by the Performance subgroup on a<br/>weekly basis. Implementation of weekly permanence tracker meeting<br/>permanent placements</li> <li>Key Performance sub-group on<br/>a weekly basis.</li> </ul> | <ul> <li>Training sessions delivered to panel members in 2015 as follows:<br/>FOSTERNG &amp; ADOPTION PANEL TRAINING<br/>GOSTERNO &amp; ADOPTION PANEL TRAINING<br/>GOSTERNO &amp; ADOPTION PANEL TRAINING<br/>GOSTOFIS - Beat protection, chronoebok (CT<br/>16)032015 - Neukejstation on long term fostering<br/>20/10/2015 - Fostering and Adoption NMS and Regulation<br/>20/10/2015 - Fostering and Adoption NMS and Regulation<br/>20/10/2015 - Fostering and Adoption NMS and Regulation<br/>20/10/2015 - Protection and Adoption NMS and Regulation<br/>20/10/2015 - Protection and Adoption NMS and Regulation<br/>Q anel Advisor post covered by an experienced interim. Process for<br/>Q anel Advisor post covered by an experienced interim. Process for<br/>this provision.</li> <li>Provision of decicated admin support in place. Ongoing review<br/>undertaken by new Service Manager to ensure the effectiveness of<br/>this provision.</li> <li>ADM function is being discharged effectively<br/>- ADM function is being discharged effectively</li> <li>ADM function is being discharged effectively</li> <li>Children's Service training and feedback.</li> <li>Service swill be delivered via training and feedback.</li> <li>Feedback received from the Panel become embedded in the cycle<br/>members will be delivered from thrues and decisions are agreed,<br/>tracked and evidence is collected.</li> </ul> |  |  |  |
| rgets and Outcomes       | Key Targets                         | <ul> <li>Coram managed service successfully implemented 100% of<br/>cases allocated</li> <li>HCL prototype implemented and service model being<br/>incorporated into the Children's Pathway</li> <li>Monthly data performance meetings are embedded in<br/>anager's role</li> <li>Adoption ICS module is live and will be able to provide data<br/>and analysis or service provision</li> </ul>  | <ul> <li>Business case completed and presented to SMT and<br/>Leader</li> <li>Recuriment of team managers - three successful<br/>appointments</li> <li>Agency staff used to cover vacant post</li> <li>Agency staff used to cover vacant post</li> <li>Link in with plan for social work recruitment across</li> <li>Link in with plan for social work recruitment across</li> <li>Chritightly Permanency Montoring Meeting embedded in<br/>practice and provides robust challenge and oversight of<br/>permanency outcomes</li> </ul> | <ul> <li>Data set agreed</li> <li>ICS adoption module implemented</li> <li>Monthly performance data meetings embedded in practices</li> <li>Reduction in average days from the child being LAC to long term permanency decision being made</li> </ul>  | <ul> <li>Panel training successfully delivered</li> <li>Panel process and functioning coordinated and streamlined<br/>timprove communication with panel members</li> <li>Electronic system implemented to circulate paperwork and<br/>improve communication with panel members</li> <li>Panel minutes are completed and signed by ADM within 2</li> <li>Tracking of panel cases to inform panel quarterly reports<br/>developed</li> <li>Successful Improvements in partnership working with panel<br/>members and the service</li> <li>Successful Improvements in partnership working with panel<br/>members and the service</li> <li>Children's Service training programme developed</li> <li>Children's Service training programme developed</li> <li>ADM decision making process streamlined timely</li> </ul>  |  |  |  |
| Improvement Ta           | Performance Measures and Milestones | <ul> <li>100% of outstanding assessments presented to<br/>months Coram project</li> <li>New assessments are for approval within 6<br/>months Coram project</li> <li>New assessments are presented to Adoption and<br/>Fostering Panel in line with statutory guidelines</li> <li>ICS/Performance intelligence Team monthly data for<br/>approval of carers in line with statutory requirements</li> <li>Scrutiny of monthly data by Perf subgroup</li> </ul> | - Service pathway and staffing structure communicated<br>to key stakeholders and staff<br>B- sufficiency strategy signed for a 10 for<br>and mplemented by July 2015<br>- Recruitment of permanent staff underway by Oct 2015<br>- Recruitment of permanent staff underway by Oct 2015<br>- Quality Assurance framework provides evidence of<br>good quality social work practice on all assessments   | - Dataset agreed by June 2015 (refer to action 5.5)<br>- Scrutiny of monthly data by Performance subgroup by<br>July 2015  | - Quality Assurance in place for all cases and<br>paperwork presented to Adoption and Fostering<br>Paredack forms completed by Adoption and Fostering<br>- Implement timely decisions from the Panel<br>- Implement timely decisions from the Panel   |  |  |  |
|                          | End Date                            | 15/07/2015 -   | 01/03/2016   | 16/03/2016 -   |   |  |  |  |
|                          | Start Date                          | 15/01/2015   | 15/02/2015   | 15/02/2015   | 15/03/2015  |  |  |  |
| Process                  | Lead                                |  | chidren's<br>Chidren's<br>Resources<br>Resources   |  | Service Manager<br>Resolutions<br>& Panel Advisor   |  |  |  |
| Action /                 | Action                              | Pilot new service model to ensure<br>autocation and completion of all<br>outstanding and new assessments<br>coming into the service  | Implement new service structure to<br>deliver and maintain the<br>improvements expected from the<br>mitial project, to bein of redemand at<br>tex points within the Fostering and<br>Adoption service and implement a<br>best value placement service for the<br>LAC model<br>LAC model  | Improve performance management<br>by implementing strong management<br>oversight and evidence of improved<br>permanency outcomes for LAC in<br>Hillingdon  | Improve the management and coordination of the Fostering & Adoption Panel Adoption Panel  |  |  |  |
|                          | Ref                                 | 5.1  |  | je 42  | κ<br>4  |  |  |  |

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

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|                                | Status Changes post<br>Sept 2015    | now Completed 1. End date<br>s. Ongoing 15/12/015 to<br>15/12/015 to<br>2. Status has a<br>from in<br>from Completed - in<br>the monitored and will<br>the monitored and and and and and and and and and an   | ad other added arens) arens) added arens) added arens) added arens) added arens) added arens) added arens) a |   |
|--------------------------------|-------------------------------------|---|--|---|
| Progress at 8th Feb 2016       | Progress - Actions                  | <ul> <li>All backlog cases have now been dealt with and children have now been either placed or selected for matches with adoptive lamilies.</li> <li>All children subject to Pleacement Orders prior to Jauary 2015 have been either matched or selected for adoptive placements.</li> <li>The family finding team are working proactively at selecting potential adoptive families for children prior to the final hearing therefore gradity reducing the orthogeneous presented to the Permanency Monitoring Meeting from the 2rd LAC review therefore providing senior manager oversight.</li> <li>All LAC review therefore providing senior manager oversight.</li> <li>Increase in the number of children being placed with an adoptive family within one year of the placement order being granted.</li> <li>The permanency meeting is now focusing on improving the time in months of the care orders being man date. Historic cases have all been months of the zera order being man date. Bristoric cases have all been months of the area order being made. Historic cases have all been months of the care order being made. Historic cases have all been months of the care order being made. Historic cases have all been months of the care order being made. Historic cases have all been months of the care order being made. Historic cases have all been months of the care order being made. Historic cases have all been months of the care order being made. Historic cases have all been months of the care order being made. Historic cases have all been months of the care order being made.</li> </ul> | <ul> <li>The "Famastic 30" LBH foster carers recruitment campaign has<br/>corressfully concluded the first transh and there is currently 24<br/>prospective foster carers now being assessed.</li> <li>A further information evening uok place in January 16 people<br/>attended 10 are already booked in for initial home visit and the other<br/>attended 10 are already booked in for initial home visit and the other<br/>fare being followed up.</li> <li>The second transh of advertising will start in February and will<br/>consist of advertising in shopsfill receipt, posters on bus stops,<br/>further leaftel chors to very household in the borough and a road<br/>show in the shopping centre.</li> <li>All placements meet the child's needs</li> </ul>  |   |
| provement Targets and Outcomes | Key Targets                         | Improved permanent placement outcomes for LAC in Hilingdon - Improvement in the performance as measured by the automational adoption scorecard with long term foster placement within 1 year of the placement order being made  | <ul> <li>Sufficiency Strategy presented to Corporate Parenting<br/>Board</li> <li>Permanency Monitoring Meeting embedded in practice</li> <li>Permanency Monitoring Meeting embedded in practice</li> <li>Re-tiering exercise for WLA completed<br/>and presented</li> <li>Business case for new structure completed and presented<br/>to SMT and Leader</li> <li>Recruitment of team managers - three successful<br/>appointments</li> <li>Agency staff used to cover vacant posts</li> <li>Recruitment of March 2016, Stage 2 end of Sept 2016</li> </ul>  |   |
| Improvement Ta                 | Performance Measures and Milestones | <ul> <li>31/03/2016 - Prototype service completed and evaluated by July 2015, see Coram and HCL Service Plan</li> <li>Team fully recruited by October 2015</li> <li>Regular performance review of key service indicators:</li> <li>% of thicter who cease to be LAC after who were adopted failtner who were shown or in the adoptive family with its adoptive family so of children who were shown of a moving in with adoptive family or of children who cased to be LAC because Special Guardiansip.</li> <li>Average time between receiving a court to place and deciding on a match to an adoptive family a court to place mend deciding on a match to an long term fostering placement.</li> <li>Scrutiny of monthy data by Performance subgroup</li> </ul>   | 01/09/2015 31/03/2016 - Recruitment and retention of foster carers for older<br>LAC and those with complex needs<br>- 110 in-house foster placements<br>- Reduce ratio of IFA's (45%) to in-house (55%)<br>- Improve placement stability for children placed in long<br>term fostering placements in line with the new structure<br>- Reduction in the number of placement breakdowns for<br>- Reduction in the number of children placed in<br>- Reduction in the number of children and young people<br>placed outside of 20 miles of LBH<br>- Increase number of good quality LB Hillingdon foster<br>placements available   | Total<br>6                              |
|                                | End Date                            | 31/03/2016  | 31/03/2016   | Static                                  |
|                                | Start Date                          | 15/03/2015  | 01/09/2015   | In progress                             |
| Action / Process               | Lead                                | Service Manager<br>Children's<br>Resources  | Service Manager<br>Children's<br>Resources   | Completed<br>5                          |
| Action /                       | Action                              | Improve the function and process of family finding within the service   | Development of LBH foster carers to meet the diverse needs and challenges of LAC   | STATUS OF ACTIONS for 2015/16<br>Number |
|                                | Ref                                 | <br>ທ<br>ທ  | Bage 43  |   |

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

Appendix 2

|                   | Action / Pro   | CPSS  |                         |                       | Improv  | ement Tarriets and Outcomes   | Progress at 8th Eeb 2016  |                        |                                     |
|-------------------|--|---|-------------------------|-----------------------|---|---|---|------------------------|-------------------------------------|
|                   |  | -   |                         |                       |   |   |   |                        | ·                                   |
| Ref               | sf Action  | Lead St   | Start Date              | End Date              | Performance Measures and Milestones   | Key Targets   | Progress - Actions  | Status                 | Changes post<br>Sept 2015           |
|                   | Support better outcomes by aligning the staffing model with expected demand the staffing the sta | AD<br>Children's Social<br>Care                                       | 1/04/2015               | 01/09/2015            | 01/04/2015 01/09/2015 - Implement Children's Pathway model<br>- Monitor effectiveness of the 'managed<br>service' model | <ul> <li>- Complete a demand exercise within LBH</li> <li>- Benchmark LBH demand rates with national rates</li> <li>- 100% allocation of all statutory cases</li> </ul>   | <ul> <li>Implemented the Children's Social Care Pathway in June 2015</li> <li>Work completed on the expected demand across the children's pathway</li> <li>Extra demand is being met by the implementation of a 'managed asvice' for the provision of assessment teams</li> <li>Regular weekly management monitoring arrangements are in place and are resulting in service improvements</li> <li>All statutory cases are allocated across the Service within agreed casedoad limits</li> </ul>   | - Ongoing              |                                     |
| 6.2               | Support best practice by ensuring caseloads are stable and balanced  | Children's Social 01<br>Care  | 01/04/2015              | On-going              | <ul> <li>Average caseload for qualified social workers = 18</li> <li>Newly qualified social workers = 12</li> </ul>     | <ul> <li>Case Loads for qualified social workers are monitored weekly at<br/>Performance Board</li> <li>The average caseload across children's services has remained<br/>stable at 16/17 and is within target set</li> <li>Caseloads in Referral &amp; Assessment, Children in Care, Young<br/>People S Service and Adoption &amp; Fostering are stable and within<br/>peoples Service and Adoption &amp; Fostering are stable and within<br/>progrest. Caseloads with Children in Dace to reduce within target range<br/>higher than target and actions in place to reduce within target range.</li> </ul> | <ul> <li>Caseloads are currently within the target average range (18) and<br/>monitored as part of weekly performance management of the Service.</li> <li>The average caseload newly qualified social workers has remianed at 10<br/>for the same period</li> <li>Increased capacity added through 'managed service' models and<br/>sustained interim staffing</li> <li>Practice improvements have led to closure of all backlog work and<br/>cases open without a plan for more than 6 weeks</li> </ul>  | Completed<br>- Ongoing |                                     |
| 6.3               | Ensure good management oversight and<br>support of practice by implementing a<br>flatter team management structure   | Children's Social 01<br>Care  | 1/05/2015               | 01/05/2015 01/06/2015 | - Measurement of management oversight through supervision and audit activity.   | <ul> <li>100% of qualified social workers to receive supervisions on a monthly basis.</li> <li>Percentage a work judged good or better:</li> <li>35% by the end of March 2015</li> <li>60% by the end of September 2015</li> </ul>  | <ul> <li>To deliver clearer accountability by expanding the number of team<br/>managers with small (maximum 7) teams of social workers.</li> <li>Business case completed and submitted to the Leader end of March<br/>2015. Fully implemented in June 2015</li> </ul>   | Completed<br>- Retired | This action has<br>now been retired |
| <sup>3</sup> Page | Invest in expert advanced practitioner<br>offices in line with the Murro principle to<br>build practice capability at the point of<br>delivery   | Ohildren's Social<br>Care   | 1/05/2015               | 01/03/2016            | 01/05/2015 01/03/2016 - Improved social work practice.  | <ul> <li>Percentage of work judged good or better:</li> <li>50% by the end of March 2015</li> <li>80% by the end of Kaptenber 2016</li> <li>80% by the end of March 2016</li> </ul>   | <ul> <li>The new Advanced Practitioner (AP) role has been added to the<br/>structure, there is a minimum one AP post per social work team</li> <li>All AP posts have been recruited to as part of the main recruitment<br/>activity in Autumn 500 and the assert of the main recruitment<br/>work judged good or better:</li> <li>45% judged good or better at March 2015 - achieved</li> <li>55% judged good or better at Bar 2015 - work ongoing</li> </ul>   | In progress            |                                     |
| 44                | 5 Invest in staff professional development<br>and clearer alignment with service<br>requirements   | AD<br>Children's<br>Safeguarding                                      | 1/04/2015               | 01/04/2015 01/04/2016 | - 100% compliance and delivery of<br>supervisions<br>- 100% POD supervision   | <ul> <li>100% of qualified social workers to receive supervisions on a monthly basis</li> <li>100% qualified social workers have IDPs appropriate to the requirements of their job.</li> <li>100% of qualified social workers have completed their PADA</li> </ul>  | <ul> <li>Supervision performance:</li> <li>- Supervision performance:</li> <li>- 00%</li> <li>- 00%</li> <li>- 00%</li> <li>- 100%</li> <l< td=""><td>- Ongoing</td><td></td></l<></ul> | - Ongoing              |                                     |
| 6.6               | All changes to be made with<br>the strapsteriory, consultation and care<br>through regular communication with staff<br>and managers  | AD<br>Children's Social<br>Care<br>& AD<br>Children's<br>Safeguarding | 01/04/2015              | On-going              | - Quarterly whole service events held<br>- Regular attendance of staff at Service<br>Management meetings                | - 50% response rate to all staff survey from Children's Services  | <ul> <li>There are regular whole service communication events held to outline         <ul> <li>key changes and planning within the service</li> <li>All Service Managers hold regular meetings with all staff in their service             <ul></ul></li></ul></li></ul>  | Completed<br>- Ongoing |                                     |
|                   | STATUS OF ACTIONS for 2015/16<br>Number  | Completed In 83%  | In progress<br>1<br>17% | Static<br>0<br>0%     | Total<br>6  |   |   |                        |                                     |

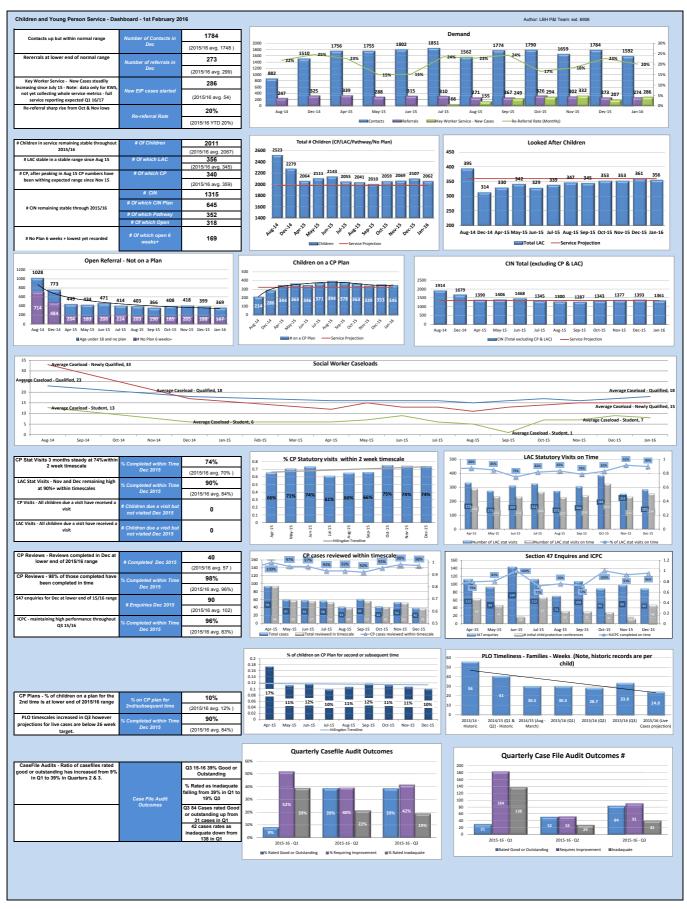
## Work stream 7: Effective Quality Assurance

|                          | Changes post<br>Sept 2015           | 1. Lead has<br>changed from 'AD<br>changed from 'AD<br>Safeguarding' to<br>'OA Service<br>Manager'<br>2. Status has<br>changed from<br>progress<br>to 'n<br>progress'  | Lead has changed<br>from 'Ans changed<br>Safeguar Children's<br>CaA Service<br>Manager'   | Lead has changed<br>Safeguarding to<br>QA Service<br>Manager  | 1. Lead has<br>Changed from 'AD<br>Safeguarding' to<br>Safeguarding 'to<br>Safeguarding and<br>Reviewing Service<br>Manager'<br>2. Status has<br>2. Status has<br>progress' to<br>progress' to<br>Progress' to<br>Retired  | This action has<br>now been retired  |
|--------------------------|-------------------------------------|--|---|---|--|--|
|                          | Status C                            | - Completed 1.<br>- Ongoing Chi<br>Sa<br>Sa<br>Ma<br>Ma<br>Ma<br>City<br>City<br>City<br>City<br>City<br>City  | - Completed Let<br>500<br>00<br>00<br>00<br>00<br>00<br>00  | Completed Let<br>- Ongoing Sra<br>O<br>O<br>Ma  | Completed 1.<br>- Retired Character<br>Sar<br>Sar<br>Sar<br>Ma<br>Ma<br>Ma<br>Character<br>Proc<br>Character<br>Proc<br>Character<br>Proc<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Character<br>Charact | Completed Thi<br>- Retired no  |
| Progress at 8th Feb 2016 | Progress - Actions                  | <ul> <li>- Quality Assurance Framework signed off and launched 1 April 2015 and Audit Programme for 2015/2016 launched on 1 April 2015.</li> <li>- 100% audit compliance since Jan 2015.</li> <li>- 100% audit compliance since Jan 2015.</li> <li>- ad% judged good or better it a 40% judged good or better at 2015.</li> <li>- 46% judged good or better at Bez 2015.</li> <li>- work ongoing 55% judged good or better at Dez 2015.</li> <li>- work ongoing 55% judged good or better at Bez 2015.</li> <li>- With predicted demand and capacity going forward are in line with our statistical neighbours. This was confirmed through audit of statistical neighbours. This was confirmed through audit of contrateness of the decision-making</li> <li>- De audits completed in Dez 2015.</li> <li>- Children taken of plans.</li> <li>- Children subject to CP and LAC</li> </ul> | <ul> <li>New tractice Standards for:</li> <li>Referral and Assessment</li> <li>Child Protection Plans</li> <li>Visits to Childran</li> <li>Visits to Childran</li> <li>Visits to Childran</li> <li>Signed of and launched on 15 April 2015 and are now available to all<br/>signed of and launched on 15 April 2015 and are now available to all<br/>solered of and launched on 15 April 2015 and are now available to all<br/>solered of and launched on 15 April 2015 and are now available to all<br/>solered of and launched on 15 April 2015 and are now available to all<br/>solered of and launched on 15 April 2015 and are now available to all<br/>solered programme of Bite size training and workshops on new<br/>Practos Brandrads commenced in mid April<br/>Practos Brandrads commenced in mid April<br/>Practos Brandrads of or better at Bach 2015 - such ved<br/>48% judged good or better at Bach 2015 - work ongoing<br/>55% judged good or better at Bach 2015 - work ongoing<br/>55% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or better at Bach 2015 - work ongoing<br/>56% judged good or</li></ul> | - All managers to complete single agency audis using the electronic case of the audit tool. Electronic audits on specific areas on a monthly basis to track performance including assessments, chronologies, management oversigh/decision making, supervision and the voice of the methodology and electronic audit tool is prepervision tracker used as an audit tool to monitor and check implementation of supervision meetings Monthly uppervision tracker used as an audit tool to monitor and check implementation of supervision meetings From May 2015, 100% canpilance for completion of case file audits completed using elec audit tool supervision tracker used as an audit tool to monitor and check implementation of supervision tracker used as an audit tool to monitor and check implementation of supervision the top and tool to monitor and the voice of the supervision tracker used as an audit tool to monitor and check implementation of supervision the top and tool to monitor and the voice of the supervision and the voice of the supervis | <ul> <li>Reviewed by IRO's during monthly team meetings</li> <li>At Sept 2015 we were reviewing the process for monitoring mid-point reviews. At Dec 2015 this process was 100% completed</li> </ul>   | <ul> <li>- CSE strategy and Missing Person and Runaway Protocol launched in April 2015</li> <li>- Monthly MASE and MAP meetings are used to track CSE cases</li> <li>- 100% cases tracked and risk assessments and plans in place</li> </ul>   |
| rgets and Outcomes       | Key Targets                         | 'Good' standard of practice evidenced and sustained across<br>the service.   | S S S S S S S S S S S S S S S S S S S   | An approach that will support practice managers to embed security and practice learning from audit into daily supervision and management in a rigorous way.   | Improved outcomes for Looked After Children.   | A CSE strategy that will enable all professionals to develop confidence and practice when identifying and responding to CSE concerns.  |
| Improvement Targets and  | Performance Measures and Milestones | r.<br>Irive<br>g clear action  | a Seven lage of work, ludged good or better<br>= 35% by the end of March 2015<br>= 50% by the end of September 2015<br>= 80% March 2016   | From April 2015 100% compliance for completion of case file audits<br>From May 2015 100% case file audits completed using detectionic audit tool<br>By April 2016 100% of themed audits are completed as programmed<br>as programmed<br>- Monitored at monthly Quality Assurance meetings   | Dispute Resolution Tracker reviews at monthly quality assurance meetings - 100% Looked After Children will have a mid-point review by Sep 2015.  | <ul> <li>Development of CSE data in order to measure the<br/>level of concerns in line with national and local trends</li> <li>100% of CSE cases tracked and all have effective risk<br/>assessment and plans recorded by Sep 2015.</li> </ul> |
|                          | e End Date                          | 01/04/2015 31/03/2016  | 31/03/2016  | 5 31/03/2016  | 01/09/2015   | 01/09/2015   |
|                          | Start Date                          |  | 01/04/2015  | 01/04/2015  | ice 01/04/20'  | 01/01/2015   |
| Process                  | Lead                                | QA Service<br>Manager  | QA Service<br>Manager   | QA Service<br>Manager   | Safeguarding and 01/04/2015 01/09/2015<br>Reviewing Service<br>Manager   | AD<br>Children's<br>Safeguarding   |
| Action / I               | Action                              | Implementation of new Quality<br>Assuration of new Quality<br>Programme to embeed good<br>standards of practice<br>standards of practice   | Launch new Practice Standards   | Launch new Audit Programme  | Ensure a robust Reviewing Service that quality assures consistently promoting good practice and challenging practice areas that require improvements   | Launch CSE strategy and Missing<br>Person and Runaway Protocol   |
|                          | Ref                                 | 7.1  |   | <sup>2</sup> 45   | 7.4  | 7.5  |

## Work stream 7: Effective Quality Assurance

|                          | Action / Process                                 |  |            | Improvement Ta   | ovement Targets and Outcomes  | Progress at 8th Feb 2016   |             |   |
|--------------------------|--|--|------------|--|---|--|-------------|---|
| -                        | Lead   | Start Date End Date  | End Date   | Performance Measures and Milestones  | Key Targets   | Progress - Actions   | Status      | Changes post<br>Sept 2015   |
| QA S<br>Mar              | QA Service<br>Manager                            | 01/09/2015   | 30/04/2016 | 01/09/2015 30/04/2016 All teams with the support of the Quality Assurance<br>Team will run a structured review of quality assurance<br>feedback and data every six months. | A robust process in place for turning strategic quality<br>assurance activity into reflection, planned action, better<br>practice and improved outcomes for children. | Service need and team structures have required frequent and ongoing input from CA Practitioners on a monthly basis through the Practice Improvement Practitioners. A full CA review will be completed by April 2016  | In progress | progress 1. Lead has<br>changed from 'AD<br>Children's<br>Safeguarding' to<br>'QA Service<br>Manager' |
|                          |  |  |            |  |   |  |             | 2. End date has<br>changed from<br>01/10/2015 to end<br>of April 2016                                 |
| afegual<br>viewin<br>Man | Safeguarding and<br>Reviewing Service<br>Manager | 01/01/2015   | 01/03/2016 | - My Review will see increased response to completing<br>and evidencing child's views  | To ensure all plans and social work interventions consider<br>the child's voice and include their views in decision making.   | Through child's journey it is evident Safeguarding and 01/01/2015 01/03/2016 - MyReview will see increased response to completing that child's journey it is evident is evident and low of the child's voice and include their views in decision making. Model (replacing ViewPoint) which was introduced for LAC in Aug 2015 and evidencing child's views are considered in all Reviewing Service and model (replacing ViewPoint) which was introduced for LAC in Aug 2015 and and evidencing child's views are considered in all Reviewing Service and include their views in decision making. Manager | In progress | progress Lead has changed<br>from 'AD Children's<br>Safeguarding' to                                  |
|                          |  |  |            | <ul> <li>Audit of date plans and crine rolection rais<br/>evidence the child's voice in decision making (Sep<br/>2015).</li> </ul>   |   | <ul> <li>Track children and young people's participation in LAC Reviews and<br/>Child Protection Conferences by end of March 2016</li> </ul>   |             | Beviewing Service<br>Manager'   |
|                          |  |  |            | MIRSOLIES. 100% DY MAICH 2010  |   | - A thematic audit on the voice of the child is due to take place in Feb<br>2016   |             |   |
| omo<br>O                 | eted   | STATUS OF ACTIONS for 2015/16 Completed In progress Static | Static     | Tota   |   |  |             |   |

| STATUS OF ACTIONS for 2015/16 Compl | Number 5 | Percentage 71% |
|-------------------------------------|----------|----------------|
| eted <mark>In progress</mark>       | 2        | 6 29%          |
| Static                              | 0        | %0             |
| Total                               | 7        |                |



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### Glossary of terms used

| AD    | Assistant Director                                      |
|-------|---|
| ADCS  | The Association of Directors of Children's Services Ltd |
| AYSE  | Assessed and Supported Year in Employment               |
| CADA  | Police description for the purpose of crime logging     |
| CIC   | Children In Care  |
| CIN   | Children In Need  |
| СР    | Child Protection  |
| CSE   | Child Sexual Exploitation                               |
| CSWT  | Children's Social Work Team                             |
| CYPS  | Children and Young People's Services                    |
| DV    | Domestic Violence                                       |
| EET   | Education, Employment, or Training                      |
| FGC   | Family Group Conference                                 |
| HCL   | HCL Workforce Solutions                                 |
| HR    | Human Resources   |
| ICPC  | International Child Protection Certificate              |
| IDVA  | Independent Domestic Violence Advocacy service          |
| IFA   | Independent Foster Agency                               |
| LAC   | Looked After Children                                   |
| LSCB  | Local Safeguarding Children's Board                     |
| MASH  | Multi Agency Safeguarding Hub                           |
| MOPAC | Mayor's Office for Policing And Crime                   |
| NEET  | Not in Education, Employment, or Training               |
| NRPF  | No Recourse to Public Funds                             |
| PADA  | Performance & Development Appraisal                     |
| PEP   | Personal Education Plan                                 |

Children, Young People and Learning Policy Overview Committee – 17 February 2016

PART 1 – MEMBERS, PUBLIC AND PRESS

- PIP Practice Improvement Practitioner
- PLO Public Law Outline
- QA Quality Assurance
- SDQ Strengths and Difficulties Questionnaire
- SGO Special Guardianship Orders
- SMART Specific, Measurable, Achievable, Realistic and Time-limited
- YP Young People
- YPIDVA Young People's Independent Domestic Violence Advocacy service

Children, Young People and Learning Policy Overview Committee – 17 February 2016

PART 1 – MEMBERS, PUBLIC AND PRESS

### Agenda Item 6

### WORK PROGRAMME 2015/2016

### 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 2015/16

| 24 Jun 2015 | Major Review - Consideration of Scoping Report  |
|-------------|---|
| CR5         | School Admissions Update  |
|             | Update on previous Major Review of the Committee - Strengthening the Council's Role as a Corporate Parent |
|             | Cabinet Forward Plan - Review forthcoming decisions   |
|             | Work Programme – Review the work programme for the coming year  |

| 15 July 2015<br>CR5 | Children and Young People's Service Improvement Plan - progress report |
|---------------------|--|
| CRS                 | Budget Planning Report for Education & Children's Services 2016/17     |
|                     | Cabinet Forward Plan - Review forthcoming decisions                    |
|                     | Work Programme – Review the work programme for the coming year         |

| 9 Sep 2015 | Major Review – Witness Session 1  |
|------------|---|
| CR5        | Quarterly School Place Planning Report                                    |
|            | Annual Complaints Report 2014/15 for Children and Young People's Services |
|            | Local Safeguarding Children's Board Annual Report                         |
|            | Cabinet Forward Plan - Review forthcoming decisions                       |
|            | Work Programme – Review the work programme for the coming year            |

Children, Young People & Learning Policy Overview Committee – 17 February 2016

| 7 Oct 2015 | Major Review – Witness Session 2  |
|------------|---|
| CR5        | Consideration of topics for minor review                                |
|            | Children and Young People's Service Improvement Plan - Quarterly Update |
|            | Child Sexual Exploitation Strategy - Implementation Update              |
|            | Cabinet Forward Plan - Review forthcoming decisions                     |
|            | Work Programme – Review the work programme for the coming year          |

| 25 Nov 2015 | Major Review – Witness Session 3  |
|-------------|---|
| CR5         | Consideration of topics for minor review  |
|             | Update Report - Progress on Implementation of previous review<br>'Hillingdon's Implementation of the Special Educational Needs and<br>Disability (SEND) Reforms |
|             | Cabinet Forward Plan - Review forthcoming decisions   |
|             | Work Programme – Review the work programme for the coming year  |

| 13 Jan 2016 | Major Review - presentation of draft final report              |
|-------------|--|
| CR5         | Minor Review - Consideration of Scoping Report                 |
|             | Standards and Quality in Education in Hillingdon 2014/2015     |
|             | Budget Proposals Report  |
|             | Cabinet Forward Plan - Review forthcoming decisions            |
|             | Work Programme – Review the work programme for the coming year |

|                 | Children and Young People's Service Improvement Plan - Quarterly Update |
|-----------------|---|
| CR4 and<br>CR4A | Cabinet Forward Plan - Review forthcoming decisions                     |
|                 | Work Programme – Review the work programme for the coming year          |

Children, Young People & Learning Policy Overview Committee – 17 February 2016

| 16 Mar 2016 | Minor Review - Witness Session   |
|-------------|--|
| CR5         | Update on previous Major Review of the Committee - Reducing the<br>Risk of Young People Engaging in Criminal Activity and Anti-Social<br>Behaviour |
|             | Update on previous review - Elective Home Education  |
|             | Cabinet Forward Plan - Review forthcoming decisions  |
|             | Work Programme – Review the work programme for the coming year   |

| 13 Apr 2016 | Minor Review - Presentation of Draft Report   |
|-------------|---|
| CR5         | Children and Young People's Service Improvement Plan - 2015/16<br>Overview              |
|             | Quarterly school place planning   |
|             | Child Sexual Exploitation Strategy - update on issue of Female Genital Mutilation (FGM) |
|             | Cabinet Forward Plan - Review forthcoming decisions                                     |
|             | Work Programme – Review the work programme for the coming year                          |

\*all meetings begin at 7pm.

Children, Young People & Learning Policy Overview Committee – 17 February 2016

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### Agenda Item 7

### FORWARD PLAN 2015/2016

### Contact officer: Jon Pitt Telephone: 01895 277655

### **REASON FOR ITEM**

The Committee is required by its Terms of Reference to consider the Forward Plan and comment as appropriate to the decision-maker on key decisions which relate to services within its remit (before they are taken by the Cabinet or by the Cabinet Member).

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

- To comment on items going to the Cabinet or to the Cabinet Member for decision.
- Or to note the items and decide not to comment.

### INFORMATION

The latest published Forward Plan is attached. The Committee may wish to consider the non standard items that fall within its remit.

### SUGGESTED COMMITTEE ACTIVITY

To consider whether there are comments or suggestions that the Committee wishes to make.

Children, Young People & Learning Policy Overview Committee - 17 February 2016

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| Public /<br>Private<br>Decision &<br>reasons  | Public   | Public  | Public /<br>Private (3)   | Public   | Public   |
|---|--|---|---|--|--|
| NEW<br>ITEM<br>dministratio   |  |   |   |  |  |
| Officer Contact       Public /         net Member(s)       for further       Consultation on Internation & NEW       Decision & 00000000000000000000000000000000000 | Public<br>consultation<br>through the<br>Policy Overview<br>Committee<br>process and<br>statutory<br>consultation with<br>businesses &<br>ratepayers   | Schools Forum   | Corporate<br>consultees   | Local schools<br>and wider public<br>consultation  | Children's,<br>Young People &<br>Learning Policy<br>Overview<br>Committee /<br>Department for<br>Education |
| Officer Contact<br>for further<br>information<br>RS = Residents Services  | FD - Paul<br>Whaymand  | RS - Peter<br>Malewicz  | RS - Jean<br>Palmer OBE /<br>Bobby Finch  | RS - Dan<br>Kennedy /<br>Jenny<br>Chalmers   | RS - Daniel<br>Kennedy /<br>Steve<br>Buckingham  |
| Cabinet Member(s)<br>Responsible<br><sup>Council Departments:</sup>   | 25-Feb-16 Cllr Ray Puddifoot<br>MBE & Cllr<br>Jonathan Bianco  | Cllr David RS - Pete<br>Simmonds CBE, Cllr Malewicz<br>Jonathan Bianco &<br>Cllr Ray Puddifoot<br>MBE                                   | Cllr David<br>Simmonds CBE &<br>Cllr Jonathan Bianco  | Cllr David<br>Simmonds CBE   | Cllr David<br>Simmonds CBE   |
| Final<br>decision<br>by Full<br>Council   | 25-Feb-16  |   |   |  |  |
| Ward(s)   | AII  | All   | Various   | All  | All  |
| Further details<br>sl = Standard Item each month  | <b>Jary 2016</b><br>Following consultation, this report will set out the Cabinet's proposals for the Medium Term Financial Forecast (MTFF), which includes the draft General Fund reserve budget and capital programme for 2016/17 for consultation, along with indicative projections for the following four years. This will also include the HRA rents for consideration. Subject to Cabinet's decision, the budget will then be referred to full Council for approval. | Cabinet will be asked to agree the Schools Budget following consultation with the Schools Forum and their recommendation on the budget. | This report will update Cabinet and request any<br>necessary decisions in order to progress the School<br>Capital Programme in order to upgrade facilities and<br>keep on track to deliver sufficient places for children<br>educated in the Borough. | Following full consultation, Cabinet will consider the responses and consider whether or not to determine a set of new admissions criteria for community schools in Hillingdon to take effect from 1 September 2017. | The Annual Report to Cabinet containing information<br>on educational performance across the Borough.      |
| Upcoming<br>Decisions   | Cabinet - 18 February 2016         61b       The Council's         61b       The Council's         Budget - Medium       Following col         Term Financial       Forecast (M1         Forecast 2016/17 - Fund reserve       2020/21         BUDGET &       projections ff         POLICY       Cabinet's det         FRAMEWORK       full Council fr  | Schools Budget<br>2016/17   | School Capital<br>Programme<br>Update   | Proposed changes<br>to the Admissions<br>criteria for<br>Community<br>Schools  | Standards and<br>Quality in<br>Education 2014/15   |
| Ref   | 61b<br>61b   | 75<br>D   | <u>あ</u><br>57  | 68b  | 69   |

| S   | Monthly Council<br>Budget -                      | The Cabinet receives a monthly report setting out in detail the Council's revenue and capital position.   | AI      | Cllr Jonathan Bianco FD - Paul Whaymar               | o FD - Paul<br>Whaymand                    |                         | Public                  |
|-----|--|---|---------|--|--|-------------------------|-------------------------|
|     | monitoring report                                |   |         |  |  |                         |                         |
| SI  | Reports from<br>Policy Overview &                | Major Policy Review recommendations for consideration by the Cabinet as and when completed.   | TBC     | TBC  | AD -<br>Democratic                         |                         | Public                  |
|     | Scrutiny   |   |         |  | Services                                   |                         |                         |
| S   | Academy  | A standard report to Cabinet to seek approval for the   | Various | Cllr Jonathan Bianco RS - Michael                    | o RS - Michael                             |                         | Public                  |
|     | Conversions                                      | Council granting of long leases to schools who wish to convert to Academy Status.   |         |  | Patterson                                  |                         |                         |
| Ca  | Cabinet - 17 March 2016                          | h 2016  |         |  |  |                         |                         |
| SI  | School Capital                                   | This report will update Cabinet and request any   | Various | Cllr David   | RS - Jean                                  | Corporate               | Public /                |
|     | Programme<br>Update                              | necessary decisions in order to progress the School<br>Capital Programme in order to upgrade facilities and<br>keep on track to deliver sufficient places for children<br>educated in the Borough.  |         | Simmonds CBE &<br>Clir Jonathan Bianco               | Palmer OBE /<br>Bobby Finch                | consultees              | Private (3)             |
| ខ   | Monthly Council<br>Budget -<br>monitoring report | The Cabinet receives a monthly report setting out in detail the Council's revenue and capital position.   | All     | Cllr Jonathan Bianco FD - Paul<br>Whaymar            | o FD - Paul<br>Whaymand                    |                         | Public                  |
| SI  | Academy<br>Conversions                           | A standard report to Cabinet to seek approval for the<br>Council granting of long leases to schools who wish to<br>convert to Academy Status.   | Various | Cllr Jonathan Bianco RS - Michael<br>Patterson       | o RS - Michael<br>Patterson                |                         | Public                  |
| Ca  | Cabinet - 21 April 2016                          | 2016  |         | -  |  |                         |                         |
| S   | School Capital<br>Programme<br>Update            | This report will update Cabinet and request any<br>necessary decisions in order to progress the School<br>Capital Programme in order to upgrade facilities and<br>keep on track to deliver sufficient places for children<br>educated in the Borough. | Various | Cllr David<br>Simmonds CBE &<br>Cllr Jonathan Bianco | RS - Jean<br>Palmer OBE /<br>0 Bobby Finch | Corporate<br>consultees | Public /<br>Private (3) |
| ิเง | Monthly Council<br>Budget -<br>monitoring report | The Cabinet receives a monthly report setting out in detail the Council's revenue and capital position.   | All     | Cllr Jonathan Bianco FD - Paul<br>Whaymar            | o FD - Paul<br>Whaymand                    |                         | Public                  |
| ิเง | Academy<br>Conversions                           | A standard report to Cabinet to seek approval for the Council granting of long leases to schools who wish to convert to Academy Status.   | Various | Cllr Jonathan Bianco RS - Michael<br>Patterson       | o RS - Michael<br>Patterson                |                         | Public                  |

| School Capital       This report will update Cabinet and reque         Programme       necessary decisions in order to progress         Update       capital Programme in order to upgrade fa         Reep on track to deliver sufficient places 1       educated in the Borough.         SI       Monthly Council       The Cabinet receives a monthly report se         Budget -       detail the Council's revenue and capital p       monitoring report         SI       Academy       A standard report to Cabinet to seek appr         SI       Academy       Conversions       Council granting of long leases to schools | Cat | Cabinet - 19 May 2016  | 2016   |         |                                   |              |            |             |        |
|--|-----|------------------------|--|---------|-----------------------------------|--------------|------------|-------------|--------|
|  |     | School Capital         | This report will update Cabinet and request any  | Various | Cllr David                        | RS - Jean    | Corporate  | Public /    | 1      |
| <u>ч</u>   |     | Programme              | necessary decisions in order to progress the School  |         | Simmonds CBE & Palmer OBE /       | Palmer OBE / | consultees | Private (3) | te (3) |
|  |     | Update                 | Capital Programme in order to upgrade facilities and keep on track to deliver sufficient places for children |         | Cllr Jonathan Bianco Bobby Finch  | Bobby Finch  |            |             |        |
| Ļ  |     |                        | educated in the Borough.   |         |                                   |              |            |             |        |
| g report<br>ons  |     | <b>Monthly Council</b> | The Cabinet receives a monthly report setting out in All   | AII     | Cllr Jonathan Bianco FD - Paul    | FD - Paul    |            | Public      | 0      |
| g report<br>ons  |     | Budget -               | detail the Council's revenue and capital position.   |         |                                   | Whaymand     |            |             |        |
| suc  |     | monitoring report      |  |         |                                   |              |            |             |        |
|  | _   | Academy                | A standard report to Cabinet to seek approval for the Various  | Various | Cllr Jonathan Bianco RS - Michael | RS - Michael |            | Public      | 0      |
|  |     | Conversions            | Council granting of long leases to schools who wish to   |         |                                   | Patterson    |            |             |        |
|  |     |                        | CONVENTIO ACAUCINY SIGUS.  |         |                                   |              |            |             |        |

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