HILLINGDON

LONDON

A

Children, Young People and Learning Policy Overview Committee

Date:	**WEDNESDAY, 13 APRIL 2016**
Time:	**7.00 PM**
Venue:	**COMMITTEE ROOM 5 - CIVIC CENTRE, HIGH STREET, UXBRIDGE UB8 1UW**
Meeting Details:	Members of the Public and Press are welcome to attend 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.

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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

Minutes

**CHILDREN, YOUNG PEOPLE AND LEARNING
POLICY OVERVIEW COMMITTEE**

16 March 2016

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

HILLINGDON
LONDON

	Committee Members Present: Councillors Jane Palmer (Chairman), Nick Denys (Vice-Chairman), Teji Barnes, Duncan Flynn, Ray Graham, Becky Haggar, Peter Money, John Morse and Jan Sweeting (Labour Lead) and Mr Tony Little. **LBH Officers Present**: Dan Kennedy, Head of Business Performance, Policy and Standards Laurie Baker, Education Services - Manager Strategy and Quality Naveed Mohammed, Service Manager Business Performance Belinda Hearn, LBH Early Intervention and Prevention, Key Working Service Tom Murphy, Head of Early Intervention and Prevention Laura Palmer, School Placement and Admissions Team Manager Charles Francis, Democratic Services Officer **Also Present:** Elizabeth Horrigan, Headteacher, Harlington School Ann Bowen-Breslin, Head Teacher at Hilingdon Primary School. Taneesha Morris, Pastoral Care Manager at Hillingdon Primary School
	APOLOGIES FOR ABSENCE *(Agenda Item 1)* Apologies for absence were received from Councillor Duducu and Councillor Eginton Councillors Graham and Morse acted as substitutes.
	DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THE MEETING *(Agenda Item 2)* Cllr. Becky Haggar declared a non-pecuniary interest in agenda item number 5, the Major Review Witness Session. This was due to personal family circumstances. Cllr. Haggar left the room while the item was discussed.
	TO CONFIRM THAT ITEMS OF BUSINESS MARKED PART 1 WILL BE CONSIDERED IN PUBLIC AND THAT THE ITEMS MARKED PART 2 WILL BE CONSIDERED IN PRIVATE *(Agenda Item 3)* It was agreed that all items were Part I and would be discussed in public.
	TO AGREE THE MINUTES OF THE MEETING HELD ON 17 FEBRUARY 2016 *(Agenda Item 4)* **RESOLVED: That the minutes of the meeting held on 17 February 2016 be agreed as a correct record.**

SINGLE MEETING REVIEW - SUPPORTING EDUCATIONAL ASPIRATION FOR DISADVANTAGED CHILDREN *(Agenda Item 5)*

The Head of Business Performance, Policy and Standards drew the Committee's attention to the terms of reference for the review and the following points were noted:

- Government figures showed that children from disadvantaged backgrounds were far less likely to get good GCSE results.
- Attainment figures published in January 2015 showed that nationally in 2013/2014, 33.5% of disadvantaged pupils achieved at least 5 A*- C GCSEs (or equivalent) grades, including English and mathematics, compared to 60.5% of all other pupils, a difference of 27%.[1]
- Within Hillingdon, the 2015 figures show that 39% of pupils eligible for free school meals in the last six years achieved 5 A*-C GCSEs (including English and Maths), compared to 64% of other pupils which equated to a gap of 25% in terms of outcomes at age 16 between disadvantaged young people and their non-disadvantaged peers.
- Whilst the attainment gap is greater at secondary level, evidence at national and local level highlights that disadvantage is a key indicator of academic success and educational opportunity at all phases.
- Taken as a whole, Hillingdon is not a deprived Borough, as highlighted in local strategic plans, including the Hillingdon Joint Health & Well-Being Plan 2014-17 and the Children & Families Trust Plan. There are pockets of the Borough that have relatively higher levels of deprivation.
- In terms of the Department for Education's Local Authority Interactive Tool (LAIT version 5) indicates that the numbers of pupils in the Borough eligible for Free School Meals has increased each year for the past five years and now stands at 12,190 (an increase of approx 4000 children since 2010/11).
- By comparison, the number of children eligible for Free School Meals in neighbouring boroughs and across London has decreased in 2014/15. If, as current data suggests, Hillingdon has an increasing number of children considered to be disadvantaged and if 2014/15 outcomes for disadvantaged children at secondary level in Hillingdon show an overall decline in standards, it may be considered that the achievement and attainment of this particular group of children is likely to have an increasingly significant impact on overall standards of education in the Borough.

The Service Manager Business Performance took the Committee through the data pack providing information on attainment levels of local pupils from a disadvantaged background and their mainstream peers. Information provided covered the period 2013-2015.

Key items of note included:

- At Key Stage 1, and across all subjects - the gap in performance has over 2013-2015, been consistently narrowing between disadvantaged pupils and their mainstream peers.
- Performance in reading and writing has been particularly strong, although the gap between disadvantaged children and others for Maths remained static between 2014-2015.
- At Key Stage 2 - the picture across the three years 2013-2015 is generally positive with the gap in relative performance narrowing. There were some exceptions though namely Reading - where performance between 2014 and 2015 decreased.

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[1] Office for National Statistics, January 2015 - https://www.gov.uk/government/statistics/gcse-and-equivalent-attainment-by-pupil-characteristics-2014

- On a more positive note and focusing on the percentage of children making expected progress (page 27) - trend data shows performance for disadvantaged pupils as consistently strong and in many cases better than their mainstream peers.
- At Key Stage 4 - the most notable issue of concern related to the varying performance between 2013 and 2014 where whether measuring average point score or looking at percentage of pupils reaching 5A*-C the gap in performance between disadvantaged children locally and their Hillingdon peers widened.
- Although performance is improved in 2015 - in many cases this is not by a sufficient amount as to offset the drop over the previous period.
- When looking at the data on expected progress - trends show that the gap in performance between disadvantaged pupils and their mainstream peers re-emerges.
- Of particular concern is the inability of pupils from a disadvantaged background who while achieving well at Key Stage 2 (i.e. those that reached higher levels of progress) do not maintain this level of attainment into Key Stage 4. This local picture is however consistent with national patterns where higher achieving pupils (at Key Stage 2) from a disadvantaged background do not sustain this performance through to Key Stage 4.

Liz Horrigan, Headteacher, Harlington School, introduced her witness submission in relation to the major review. The key points raised included the following:
- Harlington School was a large Foundation secondary school in the southern most part of the Borough.
- The school serves an area of high deprivation.
- Despite this, a high percentage of students go on to study at the university of their choice, including the Russell Group universities.
- In January 2015 the school was inspected by Ofsted, and moved from 'Requires Improvement' to 'Good'.
- In 2014, Harlington School was in the top 10% of schools nationally for student progress (SSAT).
- Harlington has very large numbers of disadvantaged students and significant Pupil Premium funding.
- In terms of improving outcomes for disadvantaged pupils, the School:
    1. Recruit high calibre staff and CPD - the quality of teaching is the key driver.
    2. All students are given aspirational targets.
    3. University aspirations are nurtured from early on.
    4. Invest in high quality Careers and Independent Advice & Guidance (CIAG).
- The School focuses on impact, not description – we ask ourselves - 'So What?' when undertaking development planning.
- The School use nationally recognised good practice to audit the impact of its practice – e.g. Pupil Premium Toolkit, Challenge the Gap, NFER etc.
- Governor agendas are planned around quality of teaching, pupil outcomes, behaviour and attendance, safeguarding and Pupil Premium / Closing the Gap data on a termly basis.
- Attainment drives progress – but progress was key when measuring performance.
- Poor attendance was often a key factor in disadvantaged pupil outcomes.
- Student mobility was a key factor – Mid Year Admissions often required intensive support outside of the mainstream environment. The school uses Pupil Premiunm funding to secure additional support for those pupils that require it.–

But if funding reduces, these provisions may be at risk. This may place pressure on alternative provision in the authority, particularly if students are at risk of exclusion, if schools reduce their supportive provisions.

In response to questions from Members, the witness advised that:
- To tackle non-attendance, strategies included: Using the Participation and Liaison Teams, attendance initiatives such as non uniform days, developing strong relationships with parents and disallowing holiday absence.
- In relation to feeder Primary Schools, it was noted that Primary Schools provided intervention early on when it was most effective.
- In terms of staffing, Members were informed that all disadvantaged pupils were taught and no teaching was left to teaching assistants.
- In terms of Pupil Premium, the Committee heard that this was listed in the Schools Governance documentation which was overseen by the School's Governing Body which were available for inspection. If Pupil Premium Funding were stopped at the School, this would affect the equivalent of 8 posts at the school.
- The Team around the Family was used when appropriate and it was recognised this was a key form of intervention.

Laurie Cornwell, Executive Headteacher, The Skills Hub / Young People's Academy was unable to attend the meeting and the consideration of her written statement was deferred to the next meeting.

Belinda Hearn, LBH Early Intervention and Prevention Team, introduced the witness submission on behalf of Deborah Bell, in relation to the major review. The key points raised included the following:
- Early Intervention and Prevention Services assisted families by: providing a range of early learning, childcare and family development services delivered through early years centres and children's centres.
- Targeted Programmes: met the needs of families by securing and providing targeted programmes of developmental activity that enabled children, young people and families to develop the behaviours, skills and capabilities to avoid or overcome problems and risk.;
- The Team prioritised outcomes for disadvantaged pupils by:
1. The use of the Early Help Assessment (EHA) tool that Elected Members had previously considered in associated reviews.
2. The offer of training had been disseminated via the Hillingdon Association of Secondary Head-Teachers (HASH), Primary Forum and Headteachers' Briefing.
3. If a Team Around the Family (TAF) was deemed appropriate, schools lead on these processes for their own pupils. Should a school require additional support with these processes, the Key Working Service is in place to ensure that support is forthcoming to enable resident needs to be appropriately assessed and then a consented plan devised to deliver required outcomes.

In terms of the strategies in place to raise the aspiration of disadvantaged young people, these had been informed by the research from sources such as:
- National Foundation for Education Research (NFER)
- Munro recommendations
- Early Intervention Foundation
- Department for Communities and Local Government (DCLG) and the Department for Education had led the Key Working Service to focus on the following approaches in order to support families to overcome problems that

may be impacting on the aspirations and achievement of disadvantaged young people within the family unit:

At a local level, measures to improve attainment included:
- Early Help Assessments
- Team Around the Family
- A 1 worker, 1 plan, 1 family model
- Review and model of parenting domestic routines
- Signpost to local services
- House rules
- Family relationship building
- Mediation between parents
- Advocacy
- Benefits and housing
- Healthy eating/cooking;
- Safe relationships (including DV, CSE, sexual health);
- How to play, read and interact;
- Community based work to model behaviour management for parents with their children;
- Clinical psychology formulation and consultation;
- Clear objectives embedded by regular challenge and encouragement consistently over an agreed period of time;
- Brokerage and mediation between schools and families;
- School attendance panels and legal intervention when necessary; and
- Enabling access to targeted programmes to attend to adolescent support and development needs including those that may be impacting on the aspirations and progression of vulnerable young people.

In terms of the evidence to illustrate that the above services were working and had positive outcomes, the following information was noted:

For 2014-15, 2,947 pupils were referred to the Participation Key-work Team for poor school attendance. Of that number, 2,462 were successfully closed as a consequence of enabling the young people in question to improve their attendance to the required standard. This represents 83.5% positive outcomes for families, including those with disadvantaged children. For 2015/16 to date, 300 families received services from the Preventative Key Working Team. 132 are still being worked with and 117 out of 151 closed are for a 'stepped down' reason, representing 77.5% positive outcomes for residents.

In relation to the steps the Council was taking to support the attainment of children from disadvantaged backgrounds, it was noted that:
- The Participation Key Working Team introduced a process in September 2014 whereby schools report on a monthly basis their pupils who attend less than 90%, pupils removed from roll and pupils on part time programmes. These pupils form the focus of the Participation Key Workers consultations with schools and 100% of pupil characteristic need identified. Within this cohort, pupils at risk of exclusion are also identified to ensure services are in place to prevent this outcome.
- The current DfE consultation on Children Missing Education was proposing a very similar information exchange mechanism. The Committee were encouraged to learn that Hillingdon would be well placed for this development due to its earlier local identification of need in order to identify and seek to

protect pupils vulnerable to under achievement.
- In addition to its legal duties, the Participation Key Working Team was available for commissioning by academies. 96% of secondary phase schools and academies and 100% of primary phase schools and academies in Hillingdon now have a Service Level Agreement with the Participation Key Work Team.

Ann Bowen-Breslin, Head Teacher at Hilingdon Primary School and Taneesha Morris, Pastoral Care Manager at Hillingdon Primary School attended the meeting and provided a brief overview of the actions the school was taking to support aspiration for disadvantaged children. Members requested Officers to contact the School outside the meeting and for a written statement to be provided to inform the Committee's review.

The Committee thanked the witnesses for their contribution to the review.

RESOLVED - That:
1. **The evidence provided be noted.**
2. **That the witness submission from Laurie Cornwell be considered at the next meeting.**
3. **That Ann-Bowen Breslin, Head Teacher at Hilingdon Primary School be requested to provide a written submission and for this to be considered at the next meeting.**
4. **That conclusions and draft recommendations for the final report be discussed at the next meeting.**
5. **That a draft final report be prepared for consideration at 14 June 2016 meeting.**

UPDATE ON THE IMPLEMENTATION OF RECOMMENDATIONS FROM PAST REVIEWS OF THE COMMITTEE. *(Agenda Item 6)*

The Committee was provided with a paper that gave an update on the recommendations made by two previous reviews.

The review topics included:

- Elective Home Education
- Reducing the Risk of Young People Engaging in Criminal Activity and Anti-Social Behaviour

In relation to Recommendation 1 of the review, 'Elective Home Education', a Committee Member enquired what steps were in place to assist Traveller families who did not go through normal channels of communication or attend Ward surgeries. Officers advised that social media, work shops delivered through local libraries and extensive web based information was in place to assist families. Officers were also working closely with Bell Farm Christian Centre to encourage the organisation to refer Traveller families to the Local Authority, should this be required.

In relation to the numbers of children receiving Elective Home Education, it was noted this had increased from 89 in 2010/11 to 224 in 2015/16 and nationally there had been 45% increase. Officers reported further work was underway to investigate the drivers for this and to determine what more could be done locally to support this form of provision. Officers explained that the results of the investigation would be shared with the Committee upon its completion.

In relation to Recommendation 2 of the review, 'Elective Home Education', it was noted

that the Local Authority now used three main letters for parents/carers which had been designed to take into account the POC review recommendations.

In relation to Recommendation 3 of the review, 'Elective Home Education', it was noted that the Skills Hub was available as an Exam Centre for the purpose of sitting GCSE or A-Level examinations.

With regards to what steps the Local Authority could take if there was evidence a parent was not home educating their child, Officers explained the guidance encouraged families to work in partnership with the Local Authority. However, if this was not working, the Local Authority could request evidence to be provided that home educating was taking place. In those cases where this was not provided, Officers confirmed that an Attendance Order could be issued. Officers explained that the Participation Team was working closely with Schools and a joined up approach was being taken.

In relation to Recommendation 4 of the review, 'Elective Home Education', it was noted Officers had updated the Elective Home Education policy document with minor changes.

With regards to Recommendation 1 of the Reducing the Risk of Young People Engaging in Criminal Activity and Anti-Social Behaviour review, the Committee were encouraged that Officers were helping young people access the preventative services and promoting the current offer.

In relation to Recommendation 3 of the review, Officers confirmed this was currently being taken forward as described and the Youth Offending Service was working in partnership with a number of partner organisations to promote suitable activities to young offenders and their parents.

With regards to Recommendation 4, Officers confirmed that an aspect of drug prevention focused on the work being conducted by the CLASH Theatre Project and drug awareness work being progressed by Public Health. In response to a Member question about the uptake and effectiveness of CLASH, Officers confirmed that further information would be provided outside the meeting.

In relation to Recommendation 5, Officers confirmed that joint working and information sharing between partner organisations was already well established with regards to young people who may be at risk of engagement in criminal and anti-social behaviour.

Resolved: That:
1. **The information be noted.**
2. **Officers provide the Committee with further information about Elective Home Education when available later in the year.**
3. **Officers provide further information on the uptake and effectiveness of the CLASH Theatre Project.**

WORK PROGRAMME 2015/16 *(Agenda Item 7)*

It was noted that as this meeting had not considered the written statement from Laurie Cornwell, had requested a written statement from Ann Bowen Breslin, Headteacher, Hillingdon Primary School and had not discussed potential areas for recommendations, these actions would be considered at the 13 April 2016 meeting. It was agreed that the final report on *Supporting Educational Attainment for Disadvantaged Children* would be

deferred from 13 April 2016 to 14 June 2016 meeting.

With regards to the LSCB update, the Committee requested that this be integrated into the Work Programme of the new Committee and be considered at the beginning of the next municipal year.

RESOLVED - That:
1. **That further written evidence for the review be considered at 13 April 2016 meeting and for the Committee to discuss potential areas for recommendations for the Final Report.**
2. **That the draft final report on *Supporting Educational Attainment for Disadvantaged Children* be considered at 14 June 2016 meeting.**
3. **An LSCB update be incorporated into the new Work Programme of the next municipal year; and**
4. **The Work Programme be noted.**

FORWARD PLAN *(Agenda Item 8)*

Head of Business Performance, Policy and Standards provided an update on the Schools Capital Programme. Cabinet Members are currently considering options for meeting the forecast need for additional secondary school places in the Borough.

At 13 January 2016, the Committee resolved that Early Years and Foundation Stage data be circulated to the Committee, broken down by educational planning area (EPA). Although this had been circulated by Ward, Officers confirmed it was not possible to provide this data at EPA Level.

RESOLVED: That:
1. **The Forward Plan be noted.**

The meeting, which commenced at 7.00 pm, closed at 9.00 pm.

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

SINGLE MEETING REVIEW - SUPPORTING EDUCATIONAL ASPIRATION FOR   DISADVANTAGED CHILDREN

Contact Officer: Jon Pitt
Telephone: 01895 277655

REASON FOR ITEM

To enable the Committee to gather evidence as part of its Single Meeting Review 'Supporting Educational Aspiration for Disadvantaged Children.'

OPTIONS AVAILABLE TO THE COMMITTEE

1. To note the written evidence provided by Ann Bowen-Breslin, Headteacher of Hillingdon Primary School and to provide comments.
2. To note the written evidence provided by Laurie Cornwell, Executive Headteacher of The Skills Hub / Young People's Academy and to provide comments.
3. To propose draft recommendations and conclusions for the review.
4. To agree that the draft final report should be presented to the Committee at its next meeting in June.

INFORMATION

Ann Bowen-Breslin will not be attending the meeting as she attended the March meeting of the Committee. The written statement has been provided as a follow up to this.

The witness statement provided by Laurie Cornwell was included in the papers for the previous Committee meeting in March, but was not discussed as Laurie was unable to attend the meeting. Laurie has been invited to tonight's meeting, but it had not been possible to confirm whether she would be able to attend by agenda dispatch.

PAPERS WITH THE REPORT

- § Written Submission: Ann Bowen-Breslin , Headteacher, Hillingdon Primary School.
- § Written Submission: Laurie Cornwell, Executive Headteacher of The Skills Hub and Young People's Academy.

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SUPPORTING EDUCATIONAL ASPIRATION FOR DISADVANTAGED CHILDREN

WITNESS SUBMISSION

Name: Ann Bowen-Breslin
Role: Headteacher
Organisation: Hillingdon Primary School

SUMMARY OF THE ROLE OF YOUR SERVICE OR ORGANISATION

Hillingdon Primary School is a large, popular and over-subscribed school in the London Borough of Hillingdon. It is part of the Borough's expanding schools programme and started to admit three forms of entry (90 pupils) in September 2012. In July 2014, a new build was completed to accommodate additional pupils. The new build has significantly enhanced the education of our pupils through improved facilities such as a large sports hall and a new IT room.

Ofsted judged the school as 'Outstanding' in November 2012. The governing body, head teacher and staff have worked hard to maintain this high standard as evidenced by key indicators, such as key stage 1 and key stage 2 test results.

The school serves an aspirational community where the majority of pupils are from minority ethnic groups and English is an additional language. This is significantly above the national average and challenges us constantly to ensure a curriculum that is rich in modelling spoken language.

We are at the national average for eligibility for free school meals (FSM). The levels of deprivation indicator demonstrates that we are above the national average. Eligibility for FSMs is declining; in the past we have been above the national average for FSM. We are monitoring this carefully to determine the reasons and take any necessary action.

We are at the national average for stability. The mobility of pupils has reduced over the last eight years as the popularity of the school has grown. This has minimised the workload associated with high mobility and enabled us to have a more positive impact on a greater number of pupils from nursery/reception through to year 6. Pupils leaving generally move due to relocation to another area.

In July 2014 the school became a converter academy and joined the Elliot Foundation. The decision to become an academy was a pragmatic approach to the changing educational landscape. We chose the Elliot Foundation as it shares our ethos for education.

OUTCOMES ACHIEVED

Outcome at Hillingdon Primary School- Key Stage 1	
Year 1 Attainment in Phonics	• Pupil premium pupils achieve above the national average for pupil premium pupils. • Pupil premium pupils are in line with the national average for *all* pupils. • Pupil premium pupils are broadly in line with the national average for *other* pupils (all pupils minus pupils eligible for pupil premium).
Attainment / End of Key Stage 1	• Pupil premium pupils are above the national average for pupil premium pupils in reading, writing and maths and in the three subjects combined. This success is particularly marked in reading and maths. • These pupils are at or broadly in line with *all* pupils and other pupils nationally. • There is a minimal in-school gap of less than one average point score for all subjects.
Outcome at Hillingdon Primary School- Key Stage 2	
Attainment / End of Key Stage 2	• Pupil premium pupils achieve above or at the national average for pupil premium pupils in all subjects. • In maths, reading and the three subjects combined pupil premium pupils are broadly in line with *all* pupils nationally. • There is an in-school gap between pupil premium pupils and other pupils in the school. This is more marked because of the high attainment (Sig+) of other pupils in the school, particularly in maths, English grammar, punctuation and spelling and the three subjects combined.
Progress / End of Key Stage 2	• The progress of pupil premium pupils in combined maths, reading and writing is significantly higher (Sig+) than the national value added figure for this group. Data demonstrates a three year (Sig+) upward trend. • The progress of pupil premium pupils is in line with *all* pupil*s* nationally. • For reading, the progress of pupil premium pupils is significantly higher (Sig+) than the national value added figure for this group. Progress *is above* the national average and above the school value added for *other* pupils. • In maths and writing progress is *above the* national value added for this group and in line with the school average for *other* pupils.

COMMENTS ON PROVISION OF SERVICES E.G ANYTHING THAT YOU THINK COULD BE IMPROVED OR DONE DIFFERENTLY ETC.

Strategies to ensure high performance by disadvantaged pupils

1. A school culture that believes that all pupils can achieve well. High expectations exist for all pupils.
2. Recruitment and retention of high quality staff.
3. A staffing structure that supports the academic and pastoral care needs of pupils eligible for pupil premium and actively seeks to remove barriers to learning.
4. Half-termly tracking of the performance of pupil premium pupils. Rigorous tracking enables swift action to be taken to ensure pupils achieve well.
5. A wide and flexible range of intervention strategies to ensure staff are able to meet individual pupils' needs. This includes one to one booster sessions and Easter and February schools.
6. All pupil premium pupils have end of year targets, approved by the head teacher and shared with parents. Discussions with parents focus on the steps needed to achieve these targets. Pupils know and understand these targets so that they can be actively involved in their own learning and progress.
7. Regular evaluation of data by the head teacher, Elliot Foundation and local governing body to ensure pupils are on track to succeed.
8. A curriculum that seeks to engage pupils, providing extra-curricular activities and opportunities. The attendance and involvement of pupil premium pupils is monitored carefully to ensure they take part in all activities and take advantage of opportunities offered.

Areas of Improvement

1. The school benefits from a range of Council/Local Authority services to support disadvantaged pupils. It would be helpful to have a school's directory of the services offered and an indication of the trigger points for when schools could access the services or sign post to parents experiencing difficulties with family life.
2. At present, schools are not confident that they have accessed all the available pupil premium money as they are dependent on information given by parents. Is it possible for the Council to develop a system to access this information from parents and link it in with admission to primary and secondary schools?
3. Some pupils are temporarily housed near the school. During this time children become established in the school and start to make progress. It is therefore concerning when children are re-housed in another area of the Borough and have to move school and adjust to a new school. Valuable learning time is missed in this period of readjustment. It is appreciated that it is a difficult area and there are lots of factors to be considered. Could more be done to consider the needs of children experiencing several moves?
4. Recruitment of teachers is becoming increasingly difficult. Teachers are leaving the local area due to the high cost of housing. Brunel University provides well trained teachers who are keen to teach in Hillingdon schools. However, when these teachers decide to buy their own homes they often have to move out of the local area and Hillingdon schools lose experienced teachers in whom they have invested a significant amount of training in the early stages of their career.

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SUPPORTING EDUCATIONAL ASPIRATION FOR DISADVANTAGED CHILDREN

WITNESS SUBMISSION

Name: Laurie Cornwell
Role: Executive Headteacher
Organisation: The Skills Hub and Young People's Academy

SUMMARY OF THE ROLE OF YOUR SERVICE OR ORGANISATION

The Skills Hub is an alternative provision provider that caters for students that cannot attend mainstream school for a variety of reasons; predominantly this may be due to permanent exclusion, risk of permanent exclusion or medical barriers.

The Young People's Academy is a special school for secondary aged students who have Social, Emotional and Mental Health difficulties.

Both settings are holistic in their approach and wish to ensure that students leave with a set of results that demonstrate the best of their abilities, are able to sustain relationships, maintain households and hold down a job.

Both settings have unusually high numbers of FSM and LAC students.

OUTCOMES ACHIEVED

In both settings, NEET figures are extremely low or virtually none existent. Students are provided with a wide range of access to internal and external services that support them as well as their families.

COMMENTS ON PROVISION OF SERVICES E.G ANYTHING THAT YOU THINK COULD BE IMPROVED OR DONE DIFFERENTLY ETC.

Due to National bench marking statistics, the achievements of these students are often overlooked as the emphasis is on GCSE attainment figures and not necessarily on the attainment and progress figures that are pertinent to them and their achievements.

As both the schools are small, there are times where they do not meet the same criteria that mainstream school do for additional support. Of course, this can also be beneficial for other funding streams that focus specifically on smaller schools and these types of settings.

Concerns around meeting thresholds for social services and CAHMS support is on-going and has not been significantly addressed for a number of years.

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CHILDREN AND YOUNG PEOPLE'S SOCIAL CARE SERVICE IMPROVEMENT PLAN - PROGRESS REPORT

Contact Officer: Ana Popovici / Sarah Hydrie
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REASON FOR ITEM

This report aims to provide a summary of the status of the CYPS Service Improvement Plan as at April 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 our performance measures. In summary, the plan is substantially completed and any outstanding actions will form part of the 2016/17 service plan.

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 the 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 7 work streams with performance measures, milestones and key targets for each area of the Service, they are:

   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.

Children, Young People and Learning Policy Overview Committee – 13 April 2016
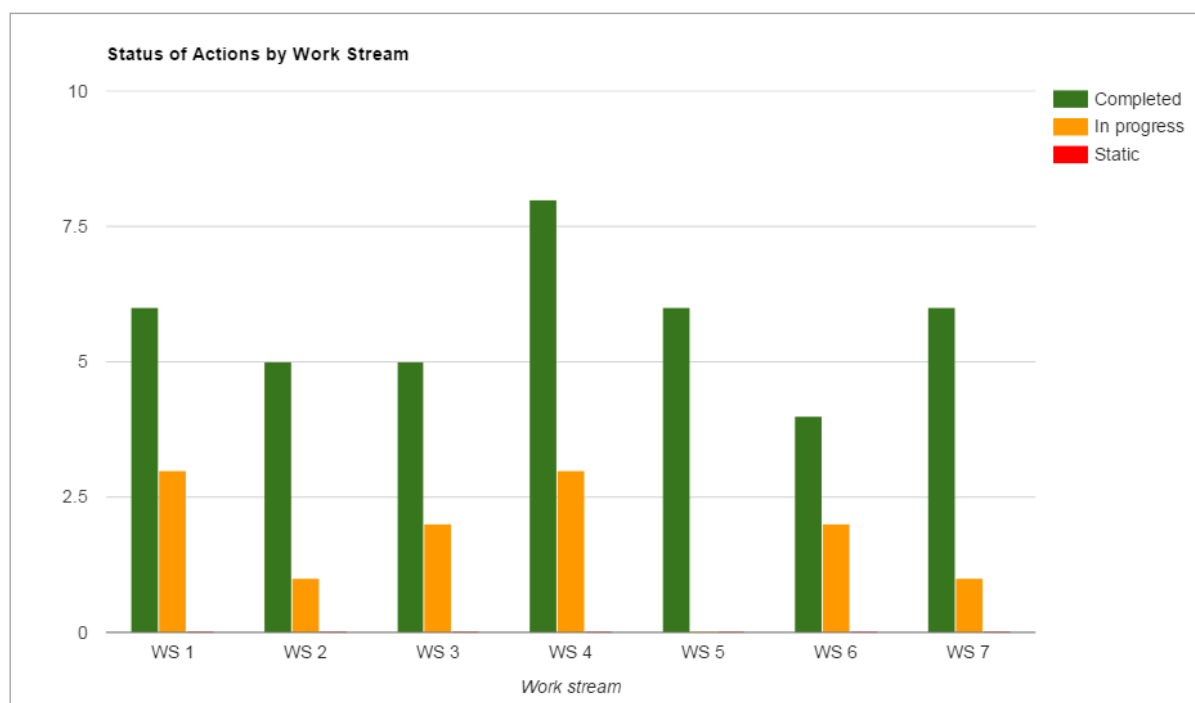
PART 1 – MEMBERS, PUBLIC AND PRESS

Quarterly 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. Detailed narrative concerning progress against each outcome can be found in **Appendix 2**.

	Total No of Actions	Completed	In Progress	Static	% Completed
July 2015	52	Reporting mechanism being developed to monitor progress against each action			
Oct 2015	52	25	27	0	48%
Jan 2016	52	40	12	0	77%
4th April 2016	52	40	12	0	77%

Summary Table

Graph depicting actions by work stream

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PART 1 – MEMBERS, PUBLIC AND PRESS

3. Out of **52** actions in the Plan, **40** actions have been **COMPLETED**, **12** actions are **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 basis to update, challenge and track progress against the Plan. All remaining actions which have not been completed will be tracked and monitored as part of the 2016/17 service plan. The graph shows that progress since January to March has remained the same. Most of the actions which are still ongoing are due to be completed by end of March / April 2016 and were still being completed at the time of this report.

SIP 12 Month Progress Update

4. To provide a more detailed overview of the progress against each of the 7 work streams, the SIP contains a measurement of progress at 6 months and at 12 months. Our progress at 6 months was reported to the Committee in October 2015. The graph overleaf contains our progress against these measures at 12 months. The graph follows the same principles as the Action Plan i.e. progress is measured against a RAG rating which highlights whether an action is **COMPLETED**, **IN PROGRESS** or **STATIC**. Detailed narrative concerning progress against each outcome can be found in **Appendix 3**.

	Total No of Actions	Completed	In Progress	Static	% Completed
4th April 2016	56	40	16	0	71%

Summary Table

SIP: 12 Month Status Update by Work Stream
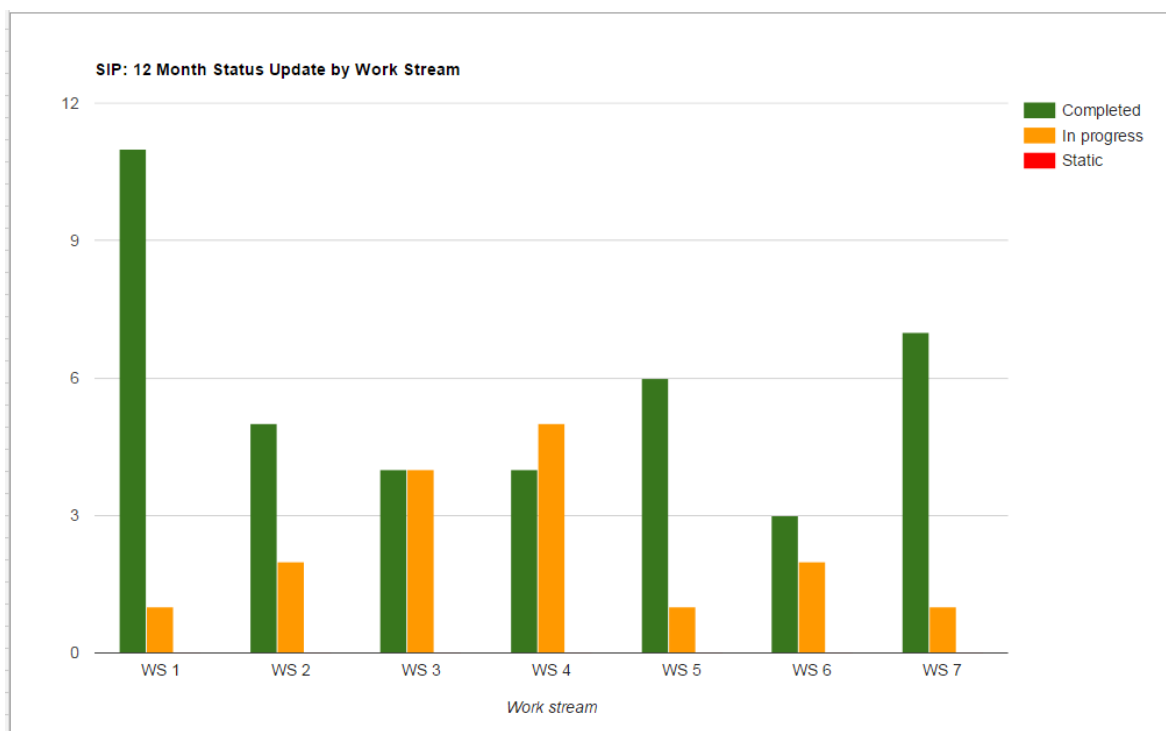
Graph depicting actions by work stream

5. From the graph we can see that out of **56** projected outcomes, **40** are **COMPLETED**, **16** are **IN PROGRESS** and **0** are **STATIC**. This shows that **71%** of actions in the Plan have been **COMPLETED**. Progress against these measures is also discussed with Service Managers and is being scrutinised and tracked on a regular basis. All remaining actions which have not been completed will be tracked and monitored as part of the 2016/17 service plan.

BACKGROUND PAPERS

1. London Borough of Hillingdon Children's Social Care Improvement Plan 2015/16 (**Appendix 1**).
2. Children's Social Care Improvement Action Plan 2015/16 (**Appendix 2**).
3. 12 month progress against Children's Social Care Improvement Plan 2015/16 performance measures (**Appendix 3**).
4. Glossary of terms used (**Appendix 4**).

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

Version 1 final

March 2015

Contents

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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.

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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).

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- 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
  - o 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.

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

See separate action plan.

APPENDIX 2

Workstream 1: Workforce Development

Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
1.1	Update website to enable prospective applicants to have a good understanding of what Hillingdon can offer and expectations of the role of a Social Worker	HR	01/04/2015	01/03/2016	New website functional	By Sept 2015 website updated and online.	Meetings held with Penna who specialise in recruitment marketing. Focussing on developing the Council's employment brand'. Initially we will develop with Penna a strong proposition clearly articulating the Council's successes, direction, delivery model and competitive remuneration. This will be communicated on a new recruitment portal or 'micro-site' which will later be used for other recruitment across the Council.	Completed - Retired	
1.2	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.	HR	01/04/2015	01/07/2015	TBC by HR	On hold until Transition plan agreed by the Leader	A new Social Worker Job Profile has been developed clearly defining career progression and professional development within the Council. This will be a key message in the recruitment campaign and we will invite social workers to 'grow your professional career at Hillingdon'.	Completed - Retired	
1.3	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 Leader	Improve the ratio of permanent to agency social workers within the Service. Target is 85% to permanent within the Service	- The current % of perm staff has risen to 76% (excluding Skylakes) - Transition Plan agreed by the Leader - Phase 1 of the recruitment campaign concluded in October; recruitment to Management vacancies is nearing completion - Phase 2 advertisements have recently closed and 29 applications are currently being reviewed	In progress	% of perm staff updated
1.4	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	L&D	01/01/2015	On-going	100% of new workers attended induction programme	All staff inducted	- A 4 day induction programme was launched in Jan 2015. The programme runs every month and invites / expects delegates to attend through the New Starters Form process or from Managers booking existing staff onto the programme - Since Jan 2015 100% new workers have been invited. However priority work commitments have impacted on attendance but the number of delegates contues to increase steadily since it was introduced	Completed - Ongoing	
1.5	AYSE support to be embedded, with clear standards and requirements set out to encourage these newly qualified workers to remain in Hillingdon long-term	L&D	15/03/2015	On-going	100% of NQSW's remain in social work posts, 2 years after qualifying	High standard ASYE programme resulting in NQSWs taking up permanent social worker posts in Hillingdon, and creating opportunity to grow future managers and create a stable workforce	- The induction programme includes a modified and enhanced offer of support to AYSE - All Newly Qualified Social Workers enrol onto the ASYE programme, the Learning and Development Officer for Social Care is also the ASYE coordinator and she inducts them and their assessor/line manager to the programme and support them through the programme	Completed - Ongoing	
1.6	Social Work Pathway to be embedded to ensure career structure is supporting individual needs	TBC by L&D	TBC by L&D		All professional social work posts have a career pathway established	Renewed job profile and job description for NQSW, SW and AP	- The new career pathway for targeted posts have been developed and implemented as part of the recruitment programme - New career pathway used to facilitate the recruitment process	Completed - Retired	
1.7	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	AD Children's Safeguarding and AD CiC, Permanency & Children's resources	01/04/2015	Sept 2015	100% Compliance in the delivery of supervision	All staff receiving timely, good quality supervision in line with the Hillingdon Supervision Policy	- A comprehensive supervision monitoring and audit tool has been developed and implemented across CYPS. It is supplemented by regular practice audits - All managers to provide supervision to staff in line with Hillingdon's Supervision Policy - All Service Managers have ensured that supervising managers have received supervision induction and training within the first two weeks of employment (agency or permanent) - Implemented supervision tracker which demonstrates variation and clear focus for new Team Managers and supervision tracker in place for all staff and monitored on a monthly basis. At Feb 2016 the Service was 74% compliant with the delivery of supervisions. This continues to be monitored on a monthly basis and any slippage is discussed between Service Managers and the Assistant Director - Fortnightly POD supervisions taking place supported by the Practice Improvement Practitioners (PIP)	Completed - Ongoing	
1.8	PADA reaches 100% completion on time and is robust in identifying current practices of the worker, identifying learning needs and having a SMART development plan to meet these needs	AD Children's Safeguarding and AD CiC, Permanency & Children's resources	01/04/2015	01/04/2016	By May 2015 all social work staff in Children Social Care have a PADA in place, which will have expected priorities by role in line with this action plan.	PADA targets to be rolled out to all staff. Checks are undertaken to ensure that PADA's have been signed off. PADA reaches 100% completion	- 6 month PADA reviews took place over Quarter 3 and annual reviews are due to start in April 2016 - All Service Managers to ensure that supervising managers have received PADA induction and training within the first two weeks of employment (agency or permanent)	In progress	
1.9	Management development plan to be completed for all managers to support their practice with clear measures of performance incorporated in their development plan / PADA	AD Children's Safeguarding and AD CiC, Permanency & Children's resources	01/04/2015	01/04/2016	100% of managers to have a management development plan	All managers have a clear plan of support and career progression	- Management development training has been commissioned (from Penna) for all managers and will commence in Quarter 4, following successful recruitment of the permanent cohort of Team Managers - All Service Managers to complete management development plans with their managers	In progress	

STATUS OF ACTIONS for 2015/16

	Completed	In progress	Static	Total
Number	6	3	0	9
Percentage	67%	33%	0%	

APPENDIX 2

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

	Action / Process				Improvement Targets and Outcomes		Progress at 4th April 2016		
Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
2.1	Improved and consistent decision-making by the Triage and MASH teams	Service Manager Triage/ MASH	01/04/2015	01/04/2016	- Data and following Key Indicators as recommended by The London Chief Exec. Self-Improvement Board line is collated - MASH clearly identifies statutory social work service Step across to early help services Contacts assisted through advice and information - Re-referral rates - Effectiveness of initial RAG rating by MASH is above 90%	- Data around Key Indicators as recommended by The London Chief Exec. Self-Improvement Board is in line with statistical neighbours - Audits and data indicating consistent decision-making from Triage and MASH. Audit of decision-making planned, 95% target - On-going partner discussion regarding thresholds and delivery of training to partners to explore social care decision making and the MASH concept - The MASH Manager remains the final decision maker on all cases progressing for assessment. - Threshold training given to all MASH and Triage staff	- Regular MASH operation meetings and strategic partnership meetings which are well attended and in which our key partners attend are in place and are chaired by the Assistant Director - Audit of decision-making is now part of the monthly electronic audit tool, the results of which will be reported in our monthly audit trend document going forward. 100% target for compliance achieved - There is a CSE Police officer who started in Sept and a Detective Sergent will be working in MASH full time - their jobs will be to focus on CSE and FGM operations - Thresholds agreed and training delivered, which has been evidenced in supervision meetings - MASH protocols have been completed and are in place - 97% of assessments completed within timescale - UK Border Agency and British Airways staff (incl pilots) have received safeguarding training - Fortnightly meetings with Skylakes to discuss actions, has resulted in referrals decreasing - Review of decision making demonstrates high levels of consistency and threshold management - The Met Police have ackowledged Hillingdon MASH as the most efficient in London. Norway and UK government advisers have also visited the MASH to review best practice. There has also been half a dozen requests by other local authorities to observe our MASH process - The available outcome information shows 273 contacts stepped up to Children's Social Care; 317 contacts stepped across to early help services and 468 contacts assisted through advice and information	**Completed - Ongoing**	Contacts data has been updated
2.2	To establish an effective Referral and Assessment Service	Service Manager Triage/ MASH	01/08/2015	01/03/2016	The recruitment will drive the establishment and implementation of 4 Duty Teams in line with the new service model.	All staff in post by March 2016	- Plans are underway to recruit 4 social work teams who will be taking over from Skylakes. The first 2 teams started in Feb 2016. Ongoing recruitment to take place for the final 2 teams over the next few months - Recruitment for the Team Manager role and Social worker posts are underway. 1 permanent Team Manager (TM) has been appointed to the RAS team and further recruitment is underway to appoint another TM to bring the 2 RAS teams together - Transfer plan in place to move away from Skylakes in the next few months. By which time we plan to bring all 4 teams in-house and end our contract with Skylakes	**In progress**	Plans to end Skylakes contract by end of March 2016 has been extended
2.3	There will be an increase in families stepping down at key points in social care (at contacts, post assessment and during CP / CIN work) - seen via demand and capacity data set	Service Manager Triage/ MASH	01/04/2015	On-going	% families no longer receive a statutory service and not re-referred to statutory social work for 6 months.	- Functioning RAS (Skylakes) - Re-referral rate and children subject to a Plan a second time, 15-20% target	- Transfer plan in place to move away from Skylakes in the next few months. By which time we plan to bring all 4 teams in-house and end our contract with Skylakes - Assessments are carried out within timescale and % of step-downs: Sept 2014 - assessments carried out within timescale was 64% Sept 2015 - assessments carried out within timescale was 97% Dec 2015 - assessments carried out within timescale was 98% Mar 2016 - assessments carried out within timescale was 97% - At the end of Q3 the re-referral rate is at 18% At end of Feb 2016 the re-referral rate is at 19% - 10% of children on a CP Plan second or subsequent time	**Completed - Ongoing**	
2.4	Best Value is obtained from Skylakes team in that they deliver to contract showing consistent good performance and to an acceptable practice standard	AD Children's Social Care	01/11/2014	01/04/2016	Key Indicators and delivery model delivered: - Implementing a 5 week duty service that will undertake duty tasks and assessments of all children in need. - Delivering 100% of assessments within 45 days max with an average of 30 days per assessment. - Delivering 100% of ICPC within 15 days. - % families no longer receive a statutory service and not re-referred to statutory social work for 6 months.	- Assessment Service is established and resourced. - Regular risks and issues meetings are held. - Performance data is collated and shows achievement of indicators. - The added capacity provided by Skylakes will alleviate pressures in the social work teams. Results will be seen in the reduction of backlog cases and new work being completed more frequently within timescales. - Improved throughput of work from referral to social care planning to permanency, with a clear focus on legal planning and pre-proceedings work (Early Intervention, CIN, CP, LAC or Children's Pathway).	- Contract oversight: Performance Indicators are set and regular meetings are held on risks and issues. Partnership framework is established - Skylakes embedded. Full review of project by Director of Children's Services (DCS). Run down of contract expected over the next few months - There is a tapered transition into LBH RAS (refer to 2.2) - The Skylakes model is fully embedded with transition underway. 97% of assessments completed to timescale. 100% work allocated for CP and LAC	**Completed - Ongoing**	

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

	Action / Process				Improvement Targets and Outcomes		Progress at 4th April 2016		
Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
2.5	Improve EDT staff recording practice following snapshot review.	Service Manager Triage/MASH	01/04/2015	On-going	TRIAGE team report low number of issues weekly of incorrect recording and timeliness of reporting.	- EDT to work in line with the social work teams and remain consistent in their approach to recording. - Snapshort Review to be discussed at SMM for further improvement consideration - Full EDT review completed in April 2015 and sent to senior management. Monthly meetings take place between senior manager and Finance for budget monitoring purposes	- There are no more issues from Triage - 1-2-1 training with Triage in place - Monthly meetings help identify issues and are dealt with immediately - ICS contains advice on performing referrals - 100% permanent staff employed in EDT	Completed - Retired	
2.6	Improve service offer for DV	Service Manager Triage/MASH	01/04/2015	01/09/2015	- Improved signposting for DV families from CSC. - An increase in orders against perpetrators or legal remedies. - Social Workers and audits indicate an improvement in assessment quality re. DV families. - Full time IDVA appointed within MASH.	- Training to be rolled out by QA service on DV tools March onwards. - New activities to be linked with DV strategy and plan.	- MASH partnership to deliver DV specialist role to MASH to identify and enhance service offered to families identified with DV risk - Implemented risk assessment tool which includes the principles of the CAADA-DASH Risk Identification tool to the Assessment and SW teams and of Barnados DV identification matrix - There is now a dedicated DV worker in MASH - DV training for all staff has been planned through LSCB. First session on DV and impact on children took place on 18/09/2015 and the next is due to take place on 15/01/2016. Triage staff have completed their training up to level 3 - Full time and 0.5 FTE IDVA's are now appointed within MASH	Completed - Ongoing	1.5 IDVA appointed within MASH

STATUS OF ACTIONS for 2015/16

	Completed	In progress	Static	Total
Number	5	1	0	6
Percentage	83%	17%	0%	

Work stream 3: Improving social work practice within the CSWTs

	Action / Process				Improvement Targets and Outcomes		Progress at 4th April 2016		
Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
3.1	Successful permanent recruitment to all social work and team manager posts Recruit family support workers, one to each social work team	AD Children's Social Care	01/07/2015 Dec 2015	01/12/2015	- Permanent recruitment - Recruit support staff to assist with intensive social work intervention	- 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.	- The main advertising campaign has been working successful and positive outcomes are being reported. The recruitment campaign is ongoing and interviews are still underway. - 5/6 permanent Team Managers (TM) have been appointed, with 1 remaining TM posts being recruited to and interviews are underway - 100% statutory work allocated - Average caseload per social worker is currently at 19 (target 18) and is tracked weekly - The Early Intervention and Prevention structure has been agreed and implemented. Family Support provision will be provided through this service	**Completed - Ongoing**	
3.2	Average caseloads - 18 cases per qualified social worker	Service Manager CSWT	01/01/2015	On-going	Weekly data set indicate that all Social Workers have an average caseload of 18 children.	- To ensure Social Workers are supported with manageable caseload and the work undertaken on the cases is undertaken in a timely manner with good outcomes for families. - There is flexible use of agency staff across the service which is aligned with demand.	- Benchmark for caseloads agreed in line with London Standards document: 18 average across the service. Caseloads are reviewed on a regular basis. Current average caseload is 19 (target 18). There is regular monitoring of throughput of work and caseload fluctuations are common. - 100% allocation of all statutory cases.	**Completed - Ongoing**	
3.3	Improving the level of professional supervision and development of staff	Service Manager CSWT	01/04/2015	On-going	- 100% compliance and delivery of supervisions - 100% POD supervision	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.	- Supervision tracker has been implemented across all teams. There are monthly reports to the Assistant Director Supervision performance for CSWT: Q1 - 76% Q2 - 80% Q3 - 74% Feb 16 - 78% (March results being collated at the time of this report) - Supervisions are being monitored and scrutinised on a monthly basis at the Service Managers meeting (SMM) - From August 2015 Practice Improvement Practitioners have audited performance and POD supervision and prepared an action plan where managers have addressed issues. Audits have been completed and are discussed at Service Managers meetings - Any inadequate audits are cascaded to TM's and action plans developed to address practice issues	**Completed - Ongoing**	
3.4	Improve the quality of social work assessments in the CSWT	Service Manager CSWT	01/04/2015	01/04/2016	- 100% compliance in team managers undertaking audits. - Case audits show improvement in grading: • 35% good by March 2015 • 50% good by Sept 2015 • 80% good by March 2016 - 100% supervision is delivered and recorded to staff - Supervision Audit and Staff surveys indicate high quality supervision is being delivered and staff report its benefit. - New management structure implemented by June 2015 - An assessment training programme to be commissioned from the QA service and rolled out to all social work practitioners.	- Social work assessments contain clear analysis and informed judgements on intervention models to be used with families - Assessments reflect the child's voice and social work engagement with the family and partner agencies - Improved throughput of work from referral to social care planning to permanency, with a clear focus on legal planning and pre-proceedings work (Early Intervention, CIN, CP, LAC or Children's Pathway). - All Case records to contain up to date chronologies. - New management structure was implemented on 1st June 2015. - Programme start date to be confirmed. - Social workers to receive training on 'what good looks like' in assessments. - Assessments to reflect meaningful engagement with children and their families with required outcomes clearly identified.	- 100% compliance in TM's undertaking audits - ongoing - Case audits showing improvement in grading: • March 2015 - 46% judged good or better • Sept 2015 - 48% judged good or better • March 2016 - figures being collated at the time of this report - PIP's are supporting practice improvement in assessments through direct work with TM's and social workers linked to audit outcomes - Update Learning & Development key messages to staff - Practice training on assessment skills will continue to be delivered through the West London Alliance training programme - 97% throughput of assessments - New TM training programme start date to be confirmed and will focus on practice issues, leadership and quality (Penna)	**In progress**	

Work stream 3: Improving social work practice within the CSWTs

	Action / Process				Improvement Targets and Outcomes		Progress at 4th April 2016		
Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
3.5	All social work interventions are provided in a clearly defined and timely manner	Service Manager CSWT	01/04/2015	On-going	- % families no longer receive a statutory service and not re-referred to statutory social work for 6 months. • Step-up and Step-down data indicates: • CIN cases average 6 month • CP cases average 9 -12 months in length • Pre-proceedings work is 12-14 weeks average • An increase in Step down post assessment and intervention. • % families no longer receive a statutory service and not re-referred to statutory social work for 6 months. • There is a reduction in complaints. • Review all practice standards and guidance • Practice mentors to support staff in delivering timely interventions	- Protocol outlining interface between Early Intervention Service and Children's Social Care is rolled out and targets agreed. - Referrals received into children's services are appropriate for statutory intervention. - Re-referral rates are reduced and in line with statistical neighbours. - Staff, families and partners in feedback and surveys are clear about our involvement and there is an agreed plan which is outcome focussed and time-bound. - Training on pre-proceedings work to be rolled out by Court Trackers and others in first quarter of 2015. - Practice guidance has been updated and rolled out to all managers and staff including 'Working Together 2013' - Social workers are familiar with Tri-x (the electronic policies and procedures web portal)	- Re-referral rates have remained within target parameters at 18%. All statutory cases allocated and have appropriate plans - Step-up and Step-down data results: • CIN and CP average case time is improving to average of 6 months • Pre-proceedings work is 12-14 weeks average • There is a reduction in complaints - Achieved. Improved performance in responding to complaints. All Quarter 1, 2 and 3 complaints were dealt with within the 10 working days timeframe • All practice standards and guidance reviewed - Part of the Tri-x update which took place in Oct 2015 • PIPs to support staff in delivering timely interventions - Achieved - Training on pre-proceedings and PLO process have been reviewed and implemented - PLO workshops take place every fortnight and there has been a marked improvement in the outcomes of PLO work as a result - Better interface with Early Intervention Service is now being implemented - Practice Standards to be rolled out in April 2016 to all social workers	**Completed - Ongoing**	
3.6	Defined response for all cases where Domestic Violence is the presenting risk factor	Service Manager CSWT	01/12/2015	On-going	Assessments reflect that the impact of DV on children is identified and responded to with clear safety plans and signposting to programmes for children experiencing DV IDVA worker to be appointed to MASH	Permanent IDVA within MASH	- Permanent IDVA worker appointed to MASH to provide support and guidance to CYPS - DV training to be provided by Learning & Development and LSCB	**Completed - Ongoing**	
3.7	Provide effective parenting assessment service	Service Manager CSWT	01/04/2015	01/04/2016	- Service to refresh protocol and offer. - An increase in parenting assessments being completed in -house for all pre-proceedings families unless a clinical/medical assessment is required. - An increase in parenting assessments being completed within new timescale. - An ongoing case consultation and training in assessments and pre-proceedings to be offered to Social Care staff.	- Once service is fully staffed targets for assessments to be rebased. (See separate detailed briefing on the proposal for this service) - Parenting assessments to be completed within 6 weeks unless agreed with legal and SW teams.	- Initial review undertaken that allows Service to work more effectively - Further reviews of Parenting Workers Contract with a clear link to throughput and quality of work - Service review is near completion. Reviews have been completed and new contracts are being issued - Review underway of the Service with a view to bring practice in-house to CSWT and link it with Team Managers. Plan to implement this by end of April 2016	**In progress**	

STATUS OF ACTIONS for 2015/16

	Completed	In progress	Static	Total
Number	5	2	0	7
Percentage	71%	29%	0%	

Work stream 4: Improving outcomes for LAC & Young People

	Action / Process				Improvement Targets and Outcomes		Progress at 4th April 2016		
Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
4.1	All LAC cases will be allocated to ensure that all statutory LAC requirements are met.	Service Manager LAC & YP's Team	01/04/2015	On-going	- All statutory posts are filled and caseloads are within the service average (14 for CIC teams) by Sept 2015. - Weekly data set - 100% allocation LAC Balanced caseloads - 100% of LAC visited within statutory timescales. - Low numbers of children missing from care <5 - Weekly management oversight of all LAC missing - 80% permanent staff to agency ratio	- Permanent recruitment successful with all Team Managers appointed. - Permanent recruitment with all social workers. - Agency workers to fill vacancies. - Regular Permanence management meetings implemented to track KPIs	- CIC and YPS teams have the majority of their managers on permanent contracts. 7/8 managers appointed across both services - 95% permanent staff in post in YPS - 70% permanent staff in post in LAC - 100% allocation of statutory LAC cases - Caseloads are within the service average which is 14 for CIC teams and 18 for YPS - 100% allocation LAC Balanced Caseloads has been achieved and maintained - 90% LAC visited within statutory timescale - All children missing from care are being reviewed and risk assessed on a weekly basis by the Service Manager - All AIT missing children have been approved through the legal planning process - Task and Finish Group for all missing children across LAC/CP/CIN is being lead by Safeguarding and Quality team	**Completed - Ongoing**	
4.2	Average caseloads remain within 14 - 16 cases per qualified social worker (AYSE 12)	Service Manager LAC	01/04/2015	On-going	- Weekly data set: Average caseload for Children in Care Teams = 14	- Average caseload maintained between 14 to 16 children per worker	- Average caseload remains steady, at 14 in Children in Care and 17 for Leave in Care in March 2016	**Completed - Ongoing**	
4.3	Improving the level of professional supervision and development of staff	Service Manager Young People	01/04/2015	On-going	- 100% compliance and delivery of supervisions - 100% POD supervision for all teams - Implement supervision tracker across all teams - July 2015	- 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.	- Implemented and maintained supervision tracker which demonstrates variation and clear focus for new TM's - Supervision tracker in place for all staff. Supervision performance YP team: Q1 - 46% Q2 - 57% Q3 - 82% Feb 16 - 44% (March results being collated at the time of this report) - 100% POD supervision for reflective case discussion which is in the process of being tracked fortnightly. POD supervisions to address the progressions of KPI, the effectiveness of pathway plans including the YP's contribution	**Completed - Ongoing**	
4.4	Evidence of child or young person participation in their care planning for LAC and care leavers	Service Manager LAC	01/04/2015	On-going	- Feedback forms and information leaflets to young people about service - Number of LAC who require an advocate and receive an advocate should be 100% - Corporate manager data: - Milestones for audited cases: ● March 15 - 35% good ● Sept 15 - 50% good ● March 16 - 80% good - Thematic audit demonstrates 80% of cases where the child's voice is reflected in practice	- 60% return rate for feedback forms - Evidence of improved LAC and Leaving Care YP engagement. - Staff attend training delivered to ensure good outcomes for children. - 90% attend PLO/CSE Training	- Planning underway for Care Leavers Conference to take place in June 2016 in consultation with young people - 100% LAC who required an advocate currently receive an advocate via NYAS - Milestones for audited cases: ● March 2015 - 46% judged good or better ● Sept 2015 - 48% judged good or better ● March 2016 - figures being collated at the time of this report - All Social workers to ensure that the child's voice is reflected in the Care/Pathway plan by detailed recordings. Thematic audit found 80% of cases where the child's voice was reflected in practice - 100% attend PLO and CSE training. Training is ongoing for the forseeable future (and takes place monthly) so that new starters receive training as soon as they join the organisation and any former staff are being trained as part of the L&D requirements - Sample of good pathway plans to be reviewed by management for the learning to be disseminated throughout the service. YPS Away day to take place in 2016/17 with some YP's input to improve pathway plans - Pathways plans data is cleansed and completion of pathway plans are in progress	**Completed - Ongoing**	

Work stream 4: Improving outcomes for LAC & Young People

	Action / Process				Improvement Targets and Outcomes		Progress at 4th April 2016		
Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
4.5	Effective management oversight is in place leading to better and more timely decision-making	Service Manager LAC	01/04/2015	31/03/2016	- 1-2-1 supervision tracker - Implement fortnightly performance management clinics - Court outcomes and LAC reviews: - The average of PLO cases to be concluded = 26 weeks - 100% of LAC reviews completed within timescale - Milestones for audited cases: • March 15 - 35% good or better • Sept 15 - 50% good or better • March 16 - 80% good or better	- To ensure all care plans are robust to demonstrate good outcomes for LAC children - Recruitment of permanent team managers - Average PLO cases is 26 weeks - 100% LAC reviews within timescales - 100% audit of cases	- New Practice Manager structure implemented in Sept 2015 - Full compliance with the case auditing framework - The Public Law Outline (PLO) has been successfully implemented resulting in a reduction from application to final order - Monthly Permanency Tracking meeting implemented - Regular PLO meetings. Average PLO cases is just above 25 weeks (current cases) as of end of Feb 2016 - Supervision tracked and underway (refer to 4.3) - Full review of the Section 20 voluntary cohort underway, ensuring each s20 case has current consent from parents - 100% audit of cases: • March 2015 - 46% judged good or better • Sept 2015 - 48% judged good or better • March 2016 - figures being collated at the time of this report	Completed - Ongoing	
4.6	Health placement outputs demonstrate good outcomes for LAC	Service Manager LAC	01/01/2015	01/12/2015	Updates from Data and weekly Performance meetings. 6-weekly performance meetings with Health partners	- 90% completion of LAC health assessments within timescale, escalate to SM's and respond within 24 hours. - Workshops for mental and VH teams	- On average 90% LAC health assessments were completed within timescale. The team are working closely with Health to develop measurements around notifications of review - Regular 6 weekly monitoring meetings in place to work with designated Health professionals to track and monitor health assessments, attendance is mandatory	Completed - Ongoing	
4.7	Education placement outputs demonstrate good outcomes for LAC	Head of Virtual School	01/01/2015	01/12/2015	- Updates from Data and weekly Performance meetings. - Ensure all children who are LAC and not meeting their milestones have an effective plan in place through the PEP, to ensure progression. - Milestones for the completion of a Personal Education Plan (PEP): • March 15 - 50% completed • Sept 15 - 75% completed • Dec 15 - 100% completed	100% PEPs in place for all LAC between the ages of 3 years old, up to 18 years of age.	- Residual actions from Ofsted Improvement Plan: Decision made to develop tracking and monitoring system within ePEP so that all attainment and progress data is contained within one system accessible to SWs, DTs, VSCs and FCs. Date for completion set for April 2015. - Residual actions from Ofsted Improvement Plan: Amendments to be made to ePEP so that Action Plans agreed can be SMART by 13th April 2015. - Residual actions from Ofsted Improvement Plan: Model of operation to target PPP resources not implemented. 2014-2015 PPP being devolved to school in March 2015, some have been used on commissioning 1:1 tuition, Book Trust to increase literacy and incentives to encourage LAC. ================= - Regular meetings with the Children In Need team and Virtual School - Weekly performance data used to monitor the completion of PEPs which are at: • March 2015 - 51% PEPs completed • Sept 2015 - 80% PEPs completed • Dec 2015 - 100% PEPs completed	Completed - Retired	Status has changed from 'Completed - Ongoing' to 'Retired'
4.8	Improve monitoring and timeliness of permanent placement provision for LAC	Service Manager LAC	01/04/2015	31/03/2016	- The average of PLO cases to be concluded = 26 weeks. - Percentage of children waiting for family finding 9 months of entry into care = <30% - Percentage of children waiting for family finding 12 months of entry into care = <10% -All Section 20 by March 2016, 100% over a year has a Permanency Plan	- 26 weeks achieved in court-monthly meetings - To provide timely permanent outcomes for all long term LAC - Review undertaken of all long term cases to promote permanent outcomes. All children with an adoption plan have been matched or placed with prospective adopters	- All long term voluntary (Section 20) care cases reviewed and appropriate long term plans now in place. All s20 cases (under the age of 16) have been subject to LPMs and reviewed with clear actions. SM regularly reviews cases. This exercise has increased the number of care proceedings under new management. - All Placement Order cases (where adoption was not achieved within 12 months) is reviewed and being returned to Court where appropriate in view of discharging placement applications. All cases have been reviewed at LPM. 12 cases have been returned to court for placement orders to be revoked. 8 cases have been concluded. 2 cases currently in proceedings. 2 cases still to be issued. 2 cases where the location of placement orders is being confirmed. No other placement order cases in LBH to be rescinded.	In progress	Status has changed from 'Complete' to 'In progress'

APPENDIX 2

Work stream 4: Improving outcomes for LAC & Young People

Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
4.9	Improving outcomes for Leave in Care	Service Manager LAC	01/07/2015	31/03/2016	Monitoring NEET, accommodation and Pathways Plans for Leave in Care	- Key targets are being agreed at the Care Leavers sub-group of the Corporate Parenting Board - 80% pathway plans in place	- All care leavers have an allocated Personal Advisor. Current data indicates that 58% of care leavers have a Pathway Plan - Review of shared accommodations bi-monthly by TM/Service Manager. Further report completed and presented to Corp Parenting Board in Jan 2016. Corp Parenting Board approved recommendations which will inform actions for next years Service Plan. - Monitoring of NEET performance and practice undertaken by regular reviews by the Leaving Care Working group of the Corp Parenting Board - There is regular feedback from the Service Manager to Corp Parenting Board to check the sustainability of accommodation - Weekly meetings taking place between performance team and YPS. Work is underway to improve the quality of data regarding pathway plans for care leavers. Business Performance team to provide the data by end of March 2016 - YPS Away Day booked in April 2016. "Stepping out" young people's group booked to undertake pathway plan training and to provide a questions and answer session to improve practice. - NEET remains on the Care Leavers Working group agenda. Champion within the YPS to work with Corporate Parenting Manager/ "stepping out" on the NEET issues. YPS are working with Corp Parenting Manager around apprenticeships and work experiences, which is being supported by the Participation working group.	In progress	
4.10	All LAC children over the age of 16 years old to have an allocated worker. Over 18 care leavers will have a Personal Advisor allocated	Service Manager LAC & Manager Children & Young People Service	01/04/2015	30/04/2016	Weekly Data Monitoring: - 100% allocation = all 16 plus open cases - 100% pathway plans = All eligible care leavers	To improve the outcomes for young people leaving care.	- Personal Advisor have been allocated to all LAC YP over the age of 16 years old. All eligible care leavers have an effective Pathway Plan - There is 100% allocation on all 16 plus open cases - 58% care leavers have a Pathway Plan The data for pathways plans is in the process of being cleansed due to data collection difficulties on Protocol. The Service Manager has had meetings with the Business Performance team to find solutions going forward. The matter will be resolved by end of April 2016	In progress	- End date has changed to end of April 2016 - Status has changed from 'Completed' to 'In progress'
4.11	Establish effective working relationship with the Asylum Intake Team (AIT)	Service Manager Young People	01/03/2015	On-going	- Delivering 100% of assessments within 45 days max with an average of 30 days per assessment - Performance Indicator meetings held weekly to ensure ongoing case management	- UKBF and AIT to work in partnership with operations to safeguard children/YP vulnerable to FGM/ CSE/ trafficking/ Terrorism - 100% LAC asylum allocated - Develop a clear process for allocation	- The implementation of the YPS is now complete. The AIT is fully embedded in the YPS - AIT asylum children have 100% allocation - LAC asylum, assessments delivered within 45 days max with an average of 30 days per assessment: ● Sept 15 - 95% completed within timescale ● Jan 16 - 97% completed within timescale ● Feb 16 - 96% completed within timescale - Fully permanent workforce with manageable caseloads. 2 Advanced Practitioner in post interviews took place and two were appoint-able. - Staff development / training on age assessments and human rights assessments to take place in April 2016 - Permanent Team Manager in post from Sept 2015 - Permanent YPS Service Manager appointed from Oct 2015	Completed - Ongoing	

STATUS OF ACTIONS for 2015/16

	Completed	In progress	Static	Total
Number	8	3	0	11
Percentage	73%	27%	0%	

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

	Action / Process				Improvement Targets and Outcomes		Progress at 4th April 2016		
Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
5.1	Pilot new service model to ensure allocation and completion of all outstanding and new assessments coming into the service	Service Manager Children's Resources	15/01/2015	15/07/2015	- 100% of outstanding assessments presented to Adoption and Fostering Panel for approval within 6 months Coram project - New assessments are presented to Adoption and Fostering Panel in line with statutory guidelines - ICS/Performance Intelligence Team monthly data for approval of carers in line with statutory requirements - Scrutiny of monthly data by Perf subgroup	- Coram managed service successfully implemented 100% of cases allocated - HCL prototype implemented and service model being incorporated into the Children's Pathway - Monthly data performance meetings are embedded in manager's role - Adoption ICS module is live and will be able to provide data and analysis of service provision	- Implement a managed service with Coram and HCL - All 29 outstanding assessments allocated and completed by Oct 2015 - Implement HCL staffing cohort to prototype service model - Implement regular performance management systems for adoption and fostering	Completed - Retired	
5.2	Implement new service structure to deliver and maintain the improvements expected from the initial project, to plan for demand at key points within the Fostering and Adoption service and implement a 'best value' placement service for the LAC model	Service Manager Children's Resources	15/02/2015	01/03/2016	- Service pathway and staffing structure communicated to key stakeholders and staff - Sufficiency Strategy signed off at Corporate Parenting Board and implemented by July 2015 - Recruitment of permanent staff underway by Oct 2015 - Quality Assurance framework provides evidence of good quality social work practice on all assessments	- Business case completed and presented to SMT and Leader - Recruitment of team managers - three successful appointments - Agency staff used to cover vacant post - Link in with plan for social work recruitment across Children's Services - Fortnightly Permanency Monitoring Meeting embedded in practice and provides robust challenge and oversight of permanency outcomes	- Full service structure implemented by February 2016. The service pathway was presented at Assistant Managers Meeting in July 2015. It will be shared with Team Managers within the Service and will be discussed at regular staff briefings. Once the pathway has been finalised we will brief the Foster Carer Association, the West London Alliance and the Independent Fostering Agency (in Sept 2015). Every team to be covered by a Team Manager - Recruiting permanent Social Workers throughout November 2015. Staff in post by January 2016 - Permanent Service Manager appointed and in post from Jan 2016 - Vacancies are either covered or being recruited to. There are no substantive casework backlogs in the Service - The Sufficiency Strategy has been shared with the Service, has been approved and is now live. The Sufficiency Strategy was signed off by Senior Management Team and the Corp Parenting Board in July 2015. The Strategy will go live on Horizon and follow up actions will be monitored via this Action Plan - All placements outside of LBH are reviewed by the Access to Resources Panel and meet the child's specific needs - A review of all placement orders over 20 miles is being undertaken and regular reviews are taking place	Completed - Retired	
5.3	Improve performance management by implementing strong management oversight and evidence of improved permanency outcomes for LAC in Hillingdon	Service Manager Children's Resources	15/02/2015	16/03/2016	- Dataset agreed by June 2015 (refer to action 5.5) - Scrutiny of monthly data by Performance subgroup by July 2015	- Data set agreed - ICS adoption module implemented - Monthly performance data meetings embedded in practice - Reduction in average days from the child being LAC to long term permanency decision being made	- Data set has been agreed to provide regular management info against adoption scorecard - ICS/Performance Intelligence Team continue to meet monthly to discuss data provided to track timescales for approval of carers - Continued scrutiny of data by the Performance subgroup on a weekly basis. Implementation of weekly permanence tracker meeting to provide improved performance management and oversight of permanent placements - Key Performance Indicators are tracked by Performance sub-group on a weekly basis	Completed - Retired	
5.4	Improve the management and coordination of the Fostering & Adoption Panel	Service Manager Children's Resources & Panel Advisor	15/03/2015	Dec15	- Quality Assurance in place for all cases and paperwork presented to Adoption and Fostering Panel - Feedback forms completed by Adoption and Fostering Panel after each panel - Implement timely decisions from the Panel	- Panel training successfully delivered - Panel process and functioning coordinated and streamlined - Electronic system implemented to circulate paperwork and improve communication with panel members - Panel minutes are completed and signed by ADM within 2 weeks of panel - Tracking of panel cases to inform panel quarterly reports developed - Successful improvements in partnership working with panel members and the service - Panel requirements and expectations delivered to team meetings - Children's Service training programme developed - QA feedback sheet for SW reports prior to going to panel implemented - ADM decision making process streamlined timely	- Training sessions delivered to panel members in 2015 as follows: FOSTERING & ADOPTION PANEL TRAINING 09/03/2015 - Data protection, Chromebook ICT 16/03/2015 - New legislation on long term fostering 20/10/2015 - Fostering and Adoption NMS and Regulation - Bi-annual panel business meetings to be held with the service and/or panel members - Panel Advisor post covered by an experienced interim. Process for QA checks now in place - Dedicated panel coordination role in place - ADM function is being discharged effectively - Feedback is routinely collated at each panel and reviewed at business meetings. Bi-annual review of svc user feedback	Completed - Ongoing	

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

	Action / Process				Improvement Targets and Outcomes		Progress at 4th April 2016		
Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
5.5	Improve the function and process of family finding within the service	Service Manager Children's Resources	15/03/2015	31/03/2016	- Prototype service completed and evaluated by July 2015, see Coram and HCL Service Plan - Team fully recruited by October 2015 - Regular performance review of key service indicators: ● % of children who cease to be LAC after who were adopted ● Average between child entering care and moving in with its adoptive family ● % of children who wait less than 18 months between entering into care and moving in with adoptive family ● % of children who ceased to be LAC because Special Guardianship ● Average time between receiving a court to place and deciding on a match to an adoptive family ● Average time between receiving a court to place and deciding on a match to an long term fostering placement - Scrutiny of monthly data by Performance subgroup	- Improved permanent placement outcomes for LAC in Hillingdon - Improvement in the performance as measured by the national adoption scorecard - LAC are placed with long term foster placement within 1 year of the care order being made	- All backlog cases have now been dealt with and children have now been either placed or selected for matches with adoptive families. - All children subject to Placement Orders prior to Jan 2015 have been either matched or selected for adoptive placements. - The family finding team are working proactivley at selecting potential adoptive families for children prior to the final hearing therefore greatly reducing the drift. There are 8 children who we are adoption family finding for. - Increase in the number of children being placed with an adoptive family within one year of the placement order being granted. 2014/15 15 children placed - 5 placed within one year of placement order - The permanency meeting is now focusing on improving the time in which children are placed in long term fostering placements within 12 months of the care order being made. Historic cases have all been considered by Hillingdon Access to Resources Panel (HARP) and have a clear plan of achieving permanency and cases from June 2015 are continuing to be monitored to ensure they are matched within the 12 month deadline. - There are no children with an adoptive plan awaiting a placement.	Completed - Ongoing	Permanency Monitoring Meeting replaced by HARP
5.6	Development of LBH foster carers to meet the diverse needs and challenges of LAC	Service Manager Children's Resources	01/09/2015	31/03/2016	- Recruitment and retention of foster carers for older LAC and those with complex needs - 110 in-house foster placements - Reduce ratio of IFA's (45%) to in-house (55%) - Improve placement stability for children placed in long term fostering placements in line with the new structure - Reduce the number of placement breakdowns for children placed in long term fostering placements: ● Reduction in the number of children placed in residential placements ● Reduction in the number of children and young people placed outside of 20 miles of LBH - Increase number of good quality LB Hillingdon foster placements available	- Sufficiency Strategy presented to Corporate Parenting Board - Permanency Monitoring Meeting embedded in practice - Re-tiering exercise for WLA completed - Business case for new structure completed and presented to SMT and Leader - Recruitment of team managers - 4 successful appointments - Agency staff used to cover vacant posts - Recruitment of 30 foster carers during 2016/17. Stage 1 to be completed end of March 2016, Stage 2 end of Sept 2016	- The "Fantastic 30" is drawing to aclose and will be replaced by an ongoing recruitment strategy for LBH. The target is to approve 25 new househoulds in 2016/17 - Further information evening takes place monthly - All placements outside of 20 miles are routinely reviewed	Completed - Ongoing	

STATUS OF ACTIONS for 2015/16	Completed	In progress	Static	Total
Number	6	0	0	6
Percentage	100%	0%	0%	

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

		Action / Process			**Improvement Targets and Outcomes**		**Progress at 4th April 2016**		
Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
6.1	Support better outcomes by aligning the staffing model with expected demand	AD Children's Social Care	01/04/2015	01/09/2015	- Implement Children's Pathway model - Monitor effectiveness of the 'managed service' model	- Complete a demand exercise within LBH - Benchmark LBH demand rates with national rates - 100% allocation of all statutory cases	- Implemented the Children's Social Care Pathway in June 2015 - Work completed on the expected demand across the children's pathway - Extra demand is being met by the implementation of a 'managed service' for the provision of assessment teams - Regular management monitoring arrangements are in place and are resulting in service improvements - No unallocated work - HARP unique panel to manage compliance, demand and financial commitments and scrutinise plans for children	Completed - Ongoing	
6.2	Support best practice by ensuring caseloads are stable and balanced	AD Children's Social Care	01/04/2015	On-going	- Average caseload for qualified social workers = 18 - Newly qualified social workers = 12	- Case Loads for qualified social workers are monitored weekly at Performance Board - The average caseload across children's services has remained stable at 16/17 and is within target set - Caseloads in Referral & Assessement, Children in Care, Young People's Service and Adoption & Fostering are stable and within target set. Caseloads with Children in Need/Child Protection teams higher than target and actions in place to reduce within target range	- Caseloads are currently averaging at 19 (target 18). All caseloads are monitored during supervision and SMM's with input from the Buisness Performance team. - HARP is monitoring all long-running cases to improve throughput and productivity whilst keeping children safe	Completed - Ongoing	
6.3	Ensure good management oversight and support of practice by implementing a flatter team management structure	AD Children's Social Care	01/05/2015	01/06/2015	- Measurement of management oversight through supervision and audit activity.	- 100% of qualified social workers to receive supervisions on a monthly basis. - Percentage of work judged good or better: • 35% by the end of March 2015 • 50% by the end of September 2015	- To deliver clearer accountability by expanding the number of team managers with small (maximum 7) teams of social workers. - Business case completed and submitted to the Leader end of March 2015. Fully implemented in June 2015	Completed - Retired	
6.4	Invest in expert advanced practitioner roles in line with the Munro principle to build practice capability at the point of delivery	AD Children's Social Care	01/05/2015	01/03/2016	- Improved social work practice.	- Percentage of work judged good or better: • 35% by the end of March 2015 • 50% by the end of September 2015 • 80% by the end of March 2016	- All AP posts have been recruited to as part of the main recruitment activity in Autumn 2015. The role of the AP is being embedded in service areas and the impact on practice improvement is in progress. - Work judged good or better: • March 2015 - 46% • Sept 2015 - 43% • March 2016 - figures being collated at the time of this report	In progress	
6.5	Invest in staff professional development and clearer alignment with service requirements	AD Children's Safeguarding	01/04/2015	01/04/2016	- 100% compliance and delivery of supervisions - 100% POD supervision	- 100% of qualified social workers to receive supervisions on a monthly basis - 100% qualified social workers have IDPs appropriate to the requirements of their job. - 100% of qualified social workers have completed their PADA	- Supervision performance: Q1 - 100% Q2 - 80% Q3 - 100% Feb 16 - 74% (March results being collated at the time of this report) - Implement Service Training and Development Plan. Actions underway to ensure all staff have individual training plans (IDP) appropriate for the requirements of their roles and responsibilities within the Service - End of year PADA reviews to be completed in April 2016	In progress Status has changed from 'Completed - Ongoing' to 'In progress'	
6.6	All changes to be made with transparency, consultation and care through regular communication with staff and managers	AD Children's Social Care & AD Children's Safeguarding	01/04/2015	On-going	- Quarterly whole service events held - Regular attendance of staff at Service Management meetings	- 50% response rate to all staff survey from Children's Services	- There are regular whole service communication events held to outline key changes and planning within the service - All Service Managers hold regular meetings with all staff in their service to explain in detail changes and improvement action - Following participation from all staff, CYPS staff outturns demonstrated a positive change in staff morale - We have introduced HARP, where all staff have been consulted in defining the terms of reference. Also LBH have consulted on national guidance involving s20 cases, showing wider engagement and national influence.	Completed - Ongoing	

STATUS OF ACTIONS for 2015/16

	Completed	In progress	Static	Total
Number	4	2	0	6
Percentage	67%	33%	0%	

Work stream 7: Effective Quality Assurance

	Action / Process				Improvement Targets and Outcomes		Progress at 4th April 2016		
Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
7.1	Implementation of new Quality Assurance Framework and Audit Programme to embed 'good' standards of practice	QA Service Manager	01/04/2015	31/03/2016	- Percentage of work judged good or better: ● 35% by the end of March 2015 ● 50% by the end of September 2015 ● 80% March 2016 - Monthly Quality Assurance findings will drive improvement across the service developing clear action plans.	'Good' standard of practice evidenced and sustained across the service.	- Quality Assurance Framework signed off and launched 1 April 2015 and Audit Programme for 2015/2016 launched on 1 April 2015 - 100% audit compliance since Jan 2015 - Percentage of work judged good or better: ● March 2015 - 46% ● Sept 2015 - 48% ● March 2016 - figures being collated at the time of this report - There has been an appropriate reduction in CP figures that now shows the predicted demand and capacity going forward are in line with our statistical neighbours. This was confirmed through audit of appropriateness of the decision-making - CP audits completed in Dec 2015: ● Children taken off plans ● Children who have been on plans for over 18 months ● Children subject to CP and LAC ● Voice of the child	Completed - Ongoing	
7.2	Launch new Practice Standards	QA Service Manager	01/04/2015	31/03/2016	Percentage of work judged good or better ● 35% by the end of March 2015 ● 50% by the end of September 2015 ● 80% March 2016	'Good' standard of practice evidenced and sustained across the service.	- New Practice Standards for: ● Referral and Assessment ● Child Protection Plans ● Visits to Children ● Care Planning signed off and launched on 15 April 2015 and are now available to all social workers via Tri-X - Ongoing programme of Bite size training and workshops on new Practice Standards commenced in mid April 2015 and being delivered by the Practice Improvement Practitioner. Further, this is part of the induction process for new starters - Percentage of work judged good or better: ● March 2015 - 46% judged good or better ● Sept 2015 - 48% judged good or better ● March 2016 - figures being collated at the time of this report - Monthly audit programme underway. 100% compliance with monthly audits since Jan 2015	Completed - Ongoing	
7.3	Launch new Audit Programme	QA Service Manager	01/04/2015	31/03/2016	- From April 2015 100% compliance for completion of case file audits - From May 2015 100% case file audits completed using the electronic audit tool - By April 2016 100% of themed audits are completed as programmed - Monitored at monthly Quality Assurance meetings	An approach that will support practice managers to embed scrutiny and practice learning from audit into daily supervision and management in a rigorous way.	- All managers to complete single agency audits using the electronic case file audit tool. Electronic audit tool provides data on specific areas on a monthly basis to track performance including assessments, chronologies, management oversight/decision making, supervision and the voice of the child. Bi-monthly thematic audits completed using bespoke audit methodology and electronic audit tool - Monthly supervision tracker used as an audit tool to monitor and check implementation of supervision meetings - From April 2015, 100% compliance for completion of case file audits - From May 2015, 100% case file audits completed using elec audit tool - Audit trend report is distributed to the Chief Executive and Cllr Simmonds for monitoring and scrutiny purposes, Practice Managers and SMM's agree and implement actions via the action plan	Completed - Retired	This action has now retired
7.4	Ensure a robust Reviewing Service that quality assures consistently promoting good practice and challenging practice areas that require improvements	Safeguarding and Reviewing Service Manager	01/04/2015	01/09/2015	- Dispute Resolution Tracker reviews at monthly quality assurance meetings - 100% Looked After Children will have a mid-point review by Sep 2015.	Improved outcomes for Looked After Children.	- Reviewed by IRO's during monthly team meetings - At Sept 2015 we were reviewing the process for monitoring mid-point reviews. At Dec 2015 this process was 100% completed	Completed - Retired	
7.5	Launch CSE strategy and Missing Person and Runaway Protocol	AD Children's Safeguarding	01/01/2015	01/09/2015	- Development of CSE data in order to measure the level of concerns in line with national and local trends - 100% of CSE cases tracked and all have effective risk assessment and plans recorded by Sep 2015.	A CSE strategy that will enable all professionals to develop confidence and practice when identifying and responding to CSE concerns.	- CSE strategy and Missing Person and Runaway Protocol launched in April 2015 - Monthly MASE and MAP meeetings are used to track CSE cases - 100% cases tracked and risk assessments and plans in place - CSE Strategy Implementation Update report went to the Committee in October 2015	Completed - Retired	
7.6	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	QA Service Manager	01/09/2015	30/04/2016	All teams with the support of the Quality Assurance Team will run a structured review of quality assurance feedback and data every six months.	A robust process in place for turning strategic quality assurance activity into reflection, planned action, better practice and improved outcomes for children.	Service need and team structures have required frequent and ongoing input from QA Practitioners on a monthly basis through the Practice Improvement Practitioners. A full QA review will be completed by April 2016	Completed - Ongoing	

Work stream 7: Effective Quality Assurance

					Improvement Targets and Outcomes		Progress at 4th April 2016		
Action / Process									
Ref	Action	Lead	Start Date	End Date	Performance Measures and Milestones	Key Targets	Progress - Actions	Status	Changes post Feb 2016
7.7	Through child's journey it is evident that their views are considered in all aspects of decision making	Safeguarding and Reviewing Service Manager	01/01/2015	01/03/2016	- MyReview will see increased response to completing and evidencing child's views - Audit of care plans and Child Protection Plans evidence the child's voice in decision making (Sep 2015). Milestones: 100% by March 2016	To ensure all plans and social work interventions consider the child's voice and include their views in decision making.	- Consultation for CP and LAC are taking place, MyReview is the new model (replacing ViewPoint) which was introduced for LAC in Aug 2015 and for CP in March 2016 - Track children and young people's participation in LAC Reviews and Child Protection Conferences has been completed - A thematic audit on the voice of the child took place in Feb 2016. At the time of this update the audit report was being finalised	In progress	

STATUS OF ACTIONS for 2015/16

	Completed	In progress	Static	Total
Number	6	1	0	7
Percentage	86%	14%	0%	

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12 month progress report against SIP

Work stream 1a: Workforce development

STATUS OF ACTIONS

	Completed	In progress	Static	Total
Number	11	1	0	12
Percentage	92%	8%	0%	

No	Action	Progress at 4th April 2016	Status
1	Implementation of flatter management structure to offer enhanced support and supervision and provide clearer professional accountability	Completed in July 2015 and has been embedded into the Service	Completed
2	National recruitment campaign for permanent staff	Recruitment has been underway since August 2015, with a national campaign to employ qualified and newly qualified social workers in Sept 2015	Completed
3	Revised social work pathway and offer to ensure Hillingdon is in the top quartile	The new career pathway for targeted posts have been developed and implemented as part of the recruitment programme	Completed
4	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.	CYPS and HR have been working with Penna to develop our website and implement a refined 'front door' approach so that potential applicants feel that they are joining a professional, polished service	Completed
5	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.	Completed and in place	Completed
6	Recruitment process through to delivery to meet the needs of the service in line with the improvement plan.	Completed and in place	Completed
7	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.	Since Jan 2015 100% new workers have been invited. However priority work commitments have impacted on attendance but the number of delegates contues to increase steadily since it was introduced	Completed
8	Assessed and Supported Year in Employment (AYSE) support for all newly qualified staff to be embedded, with clear standards and requirements set out to encourage these newly qualified workers to remain in Hillingdon long-term.	The induction programme includes a modified and enhanced offer of support to AYSE	Completed
9	Social Work Pathway to be embedded to ensure career structure is supporting individual needs.	Completed in July 2015 and has been embedded into the Service	Completed

Work stream 1b: Workforce development

PаNo	Action	Progress at 4th April 2016	Status
10	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.	- Supervision tracker in place which is being used to monitor whether supervisions are taking place on a regular basis. A report is presented to the Service Managers Meeting monthly and any slippage must be explained and remedial action taken to ensure performance does not decline any further - At Feb 2016 the Service was 100% compliant with the delivery of supervisions.	Completed
11	- A 4 day induction programme was launched in January 2015. The programme runs every month and invites / expects delegates to attend through the New Starters Form process or from Managers booking existing staff onto the programme - The number of delegates has increased steadily since the recruitment campaign was launched, with the current attendance at 57%	Refer to point 7	Completed
12	Management development plan to be completed for all managers to support their practice with clear measures of performance incorporated in their development plan / PADA.	- Management development training has been commissioned (from Penna) for all managers and will commence in Quarter 4, following successful recruitment of the permanent cohort of Team Managers - All Service Managers to complete management development plans with their managers	In progress

12 month progress report against SIP

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

STATUS OF ACTIONS

	Completed	In progress	Static	Total
Number	5	2	0	7
Percentage	71%	29%	0%	

No	Action	Progress at 4th April 2016	Status
1	Audits and data indicating consistent decision-making from Triage and Mash.	Audit of decision-making is now part of the monthly electronic audit tool, the results of which will be reported in our monthly audit trend document going forward. 100% target for compliance achieved.	Completed
2	There will be an increase in families stepping down at key points in social care (at contacts, post assessment and during CP / CIN work).	Numbers continue to be consistent and have risen with regard to families referred to Early Intervention support. Ongoing auditing by TM's in social work teams ensure families are stepping down at the earliest and safest point. Data is available which gives clear numbers of families stepping down to the Early Intervention team and this is monitored on a regular basis.	Completed
3	All assessments to be completed within timescales. (Residual Ofsted Action).	97% of assessments completed within timescale. This work is ongoing.	Completed - Ongoing
4	Audits of assessment indicate good quality, childs voice, and leading to quicker and better decision-making. (Residual Ofsted Action).	Review of decision making demonstrates high levels of consistency and threshold management.	Completed
5	CIN families remain in the service for an average of 5 months with the vast majority stepping down to early support.	Within the Referrals and Assessment team, Early Intervention Service are the first option for many families (refer to number 2).	Completed
6	CP families remain in the service for 9-12 months with two thirds stepping down to early support and a third being stepped up.	Ongoing	In progress
7	Pre-proceedings work will be delivered in an average of 12-14 weeks.	Target not achieved. The process for delivering, tracking and monitoring pre-proceedings work is being reviewed by the new Service Manager for LAC. This work will form part of the 2016/17 Service Plan.	In progress

12 month progress report against SIP

Work stream 3: Improving social work practice within the Children's Social Work Teams

No	Action	Progress at 4th April 2016	Status
1	Percentage of work judged good or better : • 35% by the end March 2015 • 50% by end September 2015 • 80% by end March 2016	- Case audits showing improvement in grading: • March 2015 - 46% judged good or better • Sept 2015 - 48% judged good or better • March 2016 - figures being collated at the time of this report	In progress
2	Private fostering referrals will increase.	Private fostering cases are all allocated to the dedicated private fostering social worker. The location of the post in CYPS is under review. Focus on increased referrals will be carried through to the 2016/17 Service Plan.	In progress
3	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.	Audit of decision-making undertaken and communicated to teams.	Completed
4	Training roll out on assessments.	Completed	Completed
5	All chronologies completed and of good quality.	Chronologies completed and reviewed as part of audit compliance testing.	Completed
6	For families in pre-proceedings we work to a 12-14 week timescale to deliver more timely decisions for children.	Target not achieved. The process for delivering, tracking and monitoring pre-proceedings work is being reviewed by the new Service Manager for LAC. This work will form part of the 2016/17 Service Plan.	In progress
7	The timeliness and quality of assessments improve and this is evidenced by audits, feedback, staff feedback, supervision audits and timely step downs / step-ups.	100% audits completed.	Completed
8	There will be an established mechanism to seek service user feedback, and findings will be part of the learning framework for staff.	Ongoing	In progress

STATUS OF ACTIONS

	Completed	In progress	Static	Total
Number	4	4	0	8
Percentage	50%	50%	0%	

APPENDIX 3

12 month progress report against SIP

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

STATUS OF ACTIONS

	Completed	In progress	Static	Total
Number	4	5	0	9
Percentage	44%	56%	0%	

No	Action	Progress at 4th April 2016	Status
1	Average caseloads remain within 14-16 cases per qualified social worker.	Caseloads are within the service average which is 14 for CIC teams and 18 for YPS	Completed
2	All LAC cases allocated and children and young people have their statutory requirements met.	All LAC cases are allocated to qualified SW's 100%. 16 & 17 year olds have allocated SW's, but do not have allocated PA's, which is a statutory duty under the Leaving Care Act, nevertheless, this cohort of YP have consultations where required from PA's.	Completed
3	80% of audits and data indicating good with evidence of consistent decision-making in care planning and timely outcomes within the CIC teams.	Achieved	Completed
4	All Public Law Outline cases will be completed within 26 weeks (unless specified by the Court).	Regular PLO meetings. Average PLO cases is just above 25 weeks (current cases) as of end of Feb 2016	Completed
5	100% of care leavers will have a pathway plan with clear objectives.	58% Care leavers have a Pathway Plan	In progress
6	Performance will be top quartile for EET and housing outcomes.	Shared housing meetings are undertaken addressing suitability of accomodations and YP's challenging behaviours. Work with YOS and Early intervention to address NEET issues. Corporate Parenting manager looking at work schemes for YP. Meetings with the Housing department has concluded that every YP regardless that they have not been living in Hillingdon for 10 years will be eligible to apply for social housing. The Care Leavers Housing Panel is more structured, housing ties are stronger.	In progress
7	80% of audits of care plans indicate good quality, childs voice and leading to quicker and better decision-making.	A thematic audit on the voice of the child took place in Feb 2016. At the time of this update the audit report was being finalised, results to be tabled.	In progress
8	Looked After Children receive good outcomes within 12-18 months (return home, longterm fostering, adoption, SGO, Connected Persons).	Ongoing	In progress
9	All pre-proceedings work will be delivered in an average of 14 weeks.	Target not achieved. The process for delivering, tracking and monitoring pre-proceedings work is being reviewed by the new Service Manager for LAC. This work will form part of the 2016/17 Service Plan.	In progress

12 month progress report against SIP

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

STATUS OF ACTIONS

	Completed	In progress	Static	Total
Number	6	1	0	7
Percentage	86%	14%	0%	

No	Action	Progress at 4th April 2016	Status
1	Fully implement the new service model and ensure fully staffed.	Completed	Completed
2	Maintain allocation of all assessments to meet national standards of quality and timeliness - 100% within timescale.	Completed	Completed
3	Audits and data indicating consistently good quality analysis of assessments and timely presentation to Panel (80% good or better and no inadequate judgements).	100% assessments presented to Panel are quality assured by managers. A themed audit of assessments to Panel is scheduled to take place in 2016/17.	Completed
4	Number of in-house foster placements to increase to 110 by April 2016.	Completed	Completed
5	The proportion of IFA placements to be less than 40%.	Currently at 30%	Completed
6	Reduction in the number of children moved further than 20 miles from their home address to minimum - less than 10% of LAC (36).	All placements outside of 20 miles are routinely reviewed and being managed by the HARP.	In progress
7	Looked After Children receive good outcomes within 12-18 months (return home, longterm fostering, adoption, SGO, Connected Persons).	Permanency planning proesses are embedded to ensure children placed in shortest timescale possible	Completed

12 month progress report against SIP

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

STATUS OF ACTIONS

	Completed	In progress	Static	Total
Number	3	2	0	5
Percentage	60%	40%	0%	

No	Action	Progress at 4th April 2016	Status
1	Simplified practice management structure in place - April 2015.	The new simplified management structure has now been implemented across all teams within Children's Social Care. All team mangement posts are filled with a combination of interim and permanent post holders. Within the last six months 12 permanent team manager posts have been recruited to. Recruitment is underway to fill the remaining 10 posts.	Completed
2	The average case load across the service remains at or below 18 per qualified social worker (in accordance with service requirement(s).	The average case load within the Service is currently at 19 for qualified social workers. This is being reviewed on a regular basis.	In progress
3	All social workers receive regular monthly supervision.	With the introduction of the simplified Team Manager structure we are now able to track and monitor 1:1 supervision of social workers. A supervision tracking system was developed and implemented in June 2015.	Completed
4	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	The QA process in now fully embedded with 100% compliance by all team mangers and approximately 90 cases audited each month. The percentage of 'good' cases is rising but slower than we expected this Quarter. - Case audits showing improvement in grading: • March 2015 - 46% judged good or better • Sept 2015 - 48% judged good or better • March 2016 - figures being collated at the time of this report	In progress
5	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.	All statutory cases are allocated and most statutory targets are being met. Further work was completed in Quarter 3 to deliver the target outputs across all work. Work in the Public Law Outline is now fully embedded and we are meeting our target outcomes for these cases.	Completed

12 month progress report against SIP

Work stream 7: Effective Quality Assurance

No	Action	Progress at 4th April 2016	Status
1	Fully embedded QA Framework.	Quality Assurance Framework signed off and launched 1 April 2015 and Audit Programme for 2015/2016 launched on 1 April 2015	Completed
2	Percentage of audit compliance 100%.	100% audit compliance since Jan 2015	Completed
3	80% of audits indicate good quality practice and evidence of the childs voice in all assessments and plans by end of March 2016.	Voice of the child audit has been completed, results to be tabled	Completed - Ongoing
4	80% of all social work judged good or better by end of March 2016.	March 2016 - figures being collated at the time of this report	In progress
5	Structured Review of Performance and Monthly Quality Assurance findings will continue to drive improvement across the service developing clear action plans that are SMART.	- The QA Framework and Audit Programme for 2015/16 has been completed - 100% compliance with monthly audits - PIP activity continues to drive improvement across the Service	Completed - Ongoing
6	Fully embedded Mid-point Review and Dispute Resolution Process.	- Reviewed by IRO's during monthly team meetings - At Sept 2015 we were reviewing the process for monitoring mid-point reviews. At Dec 2015 this process was 100% completed	Completed
7	100% of all CP Conferences and LAC reviews are completed within statutory timescales.	100% of all review CP conferences held within timescale 100% LAC reviews within timescale	Completed
8	100% of CSE cases tracked and all have effective risk assessments and plans recorded.	Completed	Completed

STATUS OF ACTIONS

	Completed	In progress	Static	Total
Number	7	1	0	8
Percentage	88%	13%	0%	

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Glossary of Terms Used

AD	Assistant Director
ADCS	Association of Directors of Children's Services Ltd
ADM	Agency Decision Maker
AIT	Asylum Intake Team
AP	Advanced Practitioner
AYSE	Assessed and Supported Year in Employment
CADA	Police description for the purpose of crime logging
CIC	Children in Care
CIN	Children in Need
CP	Child Protection
CSC	Children's Social Care
CSE	Child Sexual Exploitation
CSWT	Children's Social Work Team
CYPS	Children and Young People's Services
DV	Domestic Violence
EDT	Emergency Duty Team
EET	Education, Employment or Training
FGC	Family Group Conference
HARP	Hillingdon Access to Resources Panel
HCL	HCL Workforce Solutions
HR	Human Resources
ICPC	International Child Protection Certificate
ICS	Integrated Children's System (aka Protocol)
IDP	Individual Development Plan
IDVA	Independent Domestic Violence Advocacy service
IFA	Independent Foster Agency
KPI	Key Performance Indicator

LAC	Looked After Children
LPM	Legal Planning Meeting
LSCB	Local Safeguarding Children's Board
L&D	Learning & Development
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
NQSW	Newly Qualified Social Worker
NYAS	National Youth Advocacy Service
PADA	Performance & Development Appraisal
PEP	Personal Education Plan
PIP	Practice Improvement Practitioner
PLO	Public Law Outline
PMM	Permanency Monitoring Meeting
P&I	Performance & Intelligence team
QA	Quality Assurance
RAS	Referral and Assessment Service
SDQ	Strengths and Difficulties Questionnaire
SGO	Special Guardianship Orders
SM	Service Manager
SMART	Specific, Measurable, Achievable, Realistic and Time-limited
SMM	Service Managers Meeting
SW	Social Worker
S20	Section 20
TM	Team Manager
YP	Young People
YPIDVA	Young People's Independent Domestic Violence Advocacy service
YPS	Young People's Service

QUARTERLY SCHOOL PLACES PLANNING UPDATE

Contact Officer: Dan Kennedy
Telephone: 01895 250495

REASON FOR ITEM

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

SUGGESTED COMMITTEE ACTIVITY

It is recommended that the Committee:

1. Notes the update about the demand for school places.
2. Questions officers about the update.

INFORMATION

Introduction

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

Background to School Places Forecasting

Demand for school places has been driven by rising birth rates, new residential developments and families moving into the Borough. Forecasts are updated annually. However, monitoring of demand for places and related analytical work is ongoing throughout the year.

Work on the next update of the pupil forecasts will commence in early May, with updated forecasts prepared by June/July 2016, as the required data (such as birth rates and projected population figures) become available.

Future Demand for School Places

The 2015 forecast confirmed that the future need for places had largely been met through the large and successful primary school expansion programme and the provision of three new schools. The forecast showed some residual demand, mainly in the north of the Borough (Northwood and Ruislip areas), with a total of three to four additional forms of entry required. However, some additional demand is also forecast in the south of the Borough (Hayes area). As previously reported, the Reception intake to Nanaksar Primary School has been suspended by the school in the absence of sufficient classroom accommodation for Reception year groups. The loss of 120 places each year is inevitably increasing place pressures in the area.

Allocation of Reception Places for 2016 Admission

The offer date for Reception places for 2016 entry is 18 April 2016. Work is underway to finalise offers and a verbal update on progress will be given at the meeting.

Action Being Taken

Feasibility studies for the permanent expansion of three primary school sites in the north of the Borough are progressing in order to meet the forecast need for additional school places.

Since the previous update to the Committee, changes to admission criteria for community schools were approved by Cabinet in February 2017. These changes will come into effect for admissions from September 2017 and will enhance local residents' access to places at their local school.

Future Demand for Secondary School Places

The larger primary pupil cohorts are now beginning to move into the secondary phase. As previously reported, over the next five years, 24.5 additional forms of entry in the secondary phase will be needed, mainly in the north of the Borough. This reflects the position across London. 5.5 additional forms of secondary school entry are in the pipeline, leaving 19 additional forms of entry to be provided (14 in the north of the Borough and 5 in the south of the Borough).

Secondary Places Offers for 2016 Admissions

Offer day for admission to Year 7 in September 2016 was 1 March 2016, with the closing date for acceptance 15 March. All on-time applicants were offered a secondary school place, with 91 per cent of Hillingdon applicants receiving one of their top three schools. This is despite an eight percent rise in applications (compared with the London-wide increase of 3.3 per cent). A record high of 3,323 applications for secondary school places were received. Seventy-one per cent of children applying for school places in Hillingdon have been offered their first choice of school (higher than in Hounslow, Ealing and Harrow).

Action Being Taken

The rebuild and expansion of Northwood School by one form of entry in 2016 is on track to open during the Autumn 2016. Two further projects, at Abbotsfield and Swakeleys schools, which are being delivered by the Education Funding Agency, are expected to be completed in 2017.

Officers are continuing to work with five further schools to explore options for expansions and a decision is expected shortly on these options. In addition, the Council has been informed by the Department for Education (DfE) of five expressions of interest submitted to them for new free schools in the Borough. These proposals are at a very early stage and are subject to formal evaluation by the DfE and identification of sites.

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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.

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Ref	Upcoming Decisions	Further details	Ward(s)	Final decision by Full Council	Cabinet Member(s) Responsible	Officer Contact for further information	Consultation on the decision	NEW ITEM	Public / Private Decision & reasons
						Council Departments: RS = Residents Services SC = Social Care AD = Administration FD= Finance			
		SI = Standard Item each month							
Cabinet – 21 April 2016									
SI	**School Capital Programme Update**	This report will update Cabinet and request any necessary decisions in order to progress the School Capital Programme in order to upgrade facilities and keep on track to deliver sufficient places for children educated in the Borough.	Various		Cllr David Simmonds CBE & Cllr Jonathan Bianco	RS - Jean Palmer OBE / Bobby Finch	Corporate consultees		Public / Private (3)
SI	**Academy 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 Patterson			Public
Cabinet – 19 May 2016									
SI	**School Capital Programme Update**	This report will update Cabinet and request any necessary decisions in order to progress the School Capital Programme in order to upgrade facilities and keep on track to deliver sufficient places for children educated in the Borough.	Various		Cllr David Simmonds CBE & Cllr Jonathan Bianco	RS - Jean Palmer OBE / Bobby Finch	Corporate consultees		Public / Private (3)
SI	**Academy 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 Patterson			Public

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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 CR5	Major Review - Consideration of Scoping Report
	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 CR5	Children and Young People's Service Improvement Plan - progress report
	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 CR5	Major Review – Witness Session 1
	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

7 Oct 2015 CR5	Major Review – Witness Session 2
	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 CR5	Major Review – Witness Session 3
	Consideration of topics for minor review
	Update Report - Progress on Implementation of previous review 'Hillingdon's Implementation of the Special Educational Needs and Disability (SEND) Reforms
	Cabinet Forward Plan - Review forthcoming decisions
	Work Programme – Review the work programme for the coming year

13 Jan 2016 CR5	Major Review - presentation of draft final report
	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

17 Feb 2016 CR4 and CR4A	Children and Young People's Service Improvement Plan - Quarterly Update
	Cabinet Forward Plan - Review forthcoming decisions
	Work Programme – Review the work programme for the coming year

16 Mar 2016 CR5	Minor Review - Witness Session
	Update on previous Major Review of the Committee - Reducing the Risk of Young People Engaging in Criminal Activity and Anti-Social 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 CR5	Minor Review - Update
	Children and Young People's Service Improvement Plan - 2015/16 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.

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