



HILLINGDON
LONDON

London Borough of Hillingdon - Action Plan in Response to Ofsted Inspection of Services to Children in Need of Help and Protection, Children Looked After and Care Leavers

Final update version March 2015

1. Introduction

- 1.1 The London Borough of Hillingdon is 'Putting Our Residents First'. Children, young people and their families are at the heart of communities in Hillingdon and the Council has ambitious plans to improve services to give children the best start in life and support families to be independent, responsible and successful residents.
- 1.2 This action plan has been developed in response to specific areas highlighted in the Ofsted inspection of services for children in need of help and protection, children looked after and care leavers. The inspection took place in November/December 2013. These actions are part of a wider plan being delivered to implement the transformation of children's services in Hillingdon. This plan has been created to address the following three key themes which the inspection highlighted. Actions are designed to achieve the 'good' grade of standards within the Ofsted inspection framework.
- A need for consistency in practice – assessments, care planning and review.
 - Establishing stronger management oversight and effective performance management.
 - Embedding a sustainable approach to improvement, including the recruitment and retention of a high calibre workforce.
- 1.3 The action plan set out below in this document has been structured to respond to the individual issues highlighted in the inspection. The actions reflect the need to diagnose issues, implement change and review the success of improvements to ensure that the actions are making a difference. Any residual actions from this plan that will now be incorporated into the LB Hillingdon Children's Social Care Improvement Plan.

Children, Young People & Learning Policy Overview Committee – 18 March 2015

PART 1 – MEMBERS, PUBLIC AND PRESS

Issue 1:

When families need plans to help their parenting improve, these plans need to be robustly audited and quality assured so that it is clear what families have to do to improve.

Expected outcomes/impact:

- Managers and their teams understand what is expected of them and how performance and practice quality will be assessed.
- The key priorities are understood by managers and their teams.

Diagnosis

- A review of the existing social care case file audit framework, and discussion with managers, has confirmed managers found the audit tools and audit guidance too complex and therefore were not undertaking the audits as required. The audit tools need to be outcome focused.

Action / Process				Improvement Targets and Outcomes		
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
1.1 Implement a refreshed quality assurance framework for Children and Young People’s Services to embed ‘good’ standards of practice. New quality assurance practice guidance produced with new, simpler outcome focused audit tools.	AD Safeguarding and Children’s Service Improvement	Jan 14	Mar 14	<p>COMPLETED - Quality Assurance Practice Guidance (2014) produced, signed off by the Director and launched in management and staff meetings. Guidance and ‘good’ standards published on the Council’s intranet for all staff to access.</p> <p>New outcome focused audit tool (based on Ofsted ‘good’ grade descriptors) for monthly casework audits focuses on impact and outcome rather than tasks and processes.</p>	<p>Measure # 1a - From April 2014, 100% of managers should complete case file audits (3 case file audits per month).</p> <p><u>Baseline</u> - 63% of managers completed 3 case files each in April 2014.</p> <p>Measure # 1b - From April 2014, 100% of themed audits are completed as programmed.</p>	<p>September 2014 - New audit programme for 2014/15 commenced in April 2014 as planned.</p> <p>Progress updates on the quality standards to be reported from May 2015 onwards.</p> <p>The first themed audit (Child Protection (CP) thresholds) took place in April 2014. Learning have been shared across the service.</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
					<p><u>Baseline</u> - the planned thematic audit was completed in April 2014.</p> <p><u>Outcome</u>: 100% compliance by managers across the service by Jan 2015</p>	<p>Final update March 2015: COMPLETED</p> <p>Quality Assurance Framework (2014) reviewed and refreshed. New Quality Assurance Framework implementation April 2015.</p> <p>Revised Audit programme to continue to provide robust quality assurance across CYPS measuring against updated Practice Standards (implementation April 2015) for all areas of children's social care.</p>
<p>1.2 Launch the new audit programme:</p> <ul style="list-style-type: none"> Establish a monthly programme of audits. All managers briefed of new requirements. Go live with new audit programme from April 2014. 	AD Safeguarding and Children's Service Improvement	Mar 14	Apr 14	<p>COMPLETED - Annual thematic audit programme agreed and launched in management meetings and team meetings. Requirement for managers to complete 3 case audits per month included in practice guidance and focuses on key practice improvement areas (e.g. supervision, analysis of needs, SMART plans, voice of the child, the offer of early help etc.)</p> <p>The audits will check for evidence that it is clear what families have to do to improve their parenting.</p>	<p>Measure # 1c - % of cases consistently meeting 'good' standards.</p> <p><u>Baseline</u> - In April 2014, 46% of cases audited met 'good' standards.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> Sept 2014, 55%. March 2015, 75%. Sept 2015, 90%. March 2016, 100% <p>Measure # 1d - cases</p>	<p>September 2014 - Launch of the new quality audit framework by 30th April 2014 completed as scheduled. First thematic audit took place in April 2014. Managers undertook case file audits of 3 cases during April using new, higher standard audit tools. The starting baseline position has been set for improvement measures.</p> <p>The headline results from the April 2014 audits were as follows;</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
				<p>The thematic audit programme comprises the following and complements existing management action to ensure consistency of practice:</p> <ol style="list-style-type: none"> 1. Child Protection Thresholds – April 2014 2. Closed / re-opened cases - May 2014 3. Early Help Assessments & Plans - July 2014 4. SMART Plans - Child Protection Plans, Care Plans & Pathway Plans - October 2014 5. Supervision - September 2014 6. Chronologies - January 2015 	<p>audited demonstrate that it is clear what families have to do to improve their parenting.</p> <p><u>Baseline</u> - In April 2014, 44% of cases audited demonstrate that it is clear what families have to do to improve their parenting (including evidence of parents' feedback).</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> • Sept 2014, 60% • March 2015, 75% • Sept 2015, 85% • March 2016, 100% 	<ul style="list-style-type: none"> • The general level of social work practice does not yet meet the required standard of "Good" • The level of audit compliance needs to improve so that all managers complete 3 case file audits each month • Service Managers need to comply with auditing requirements and complete moderation reports for their area • The Manager's auditing skills and confidence in making grading judgements needs to be improved • The audit cycle needs to include presentation at DMM and AMM to share audit feedback and seek agreement and sign up to next steps and learning • Regular opportunities for promoting the learning from audit processes need to be scheduled into the work calendar. <p>Improvement actions have been agreed and implemented to achieve the practice standards set.</p> <p>Final update March 2015:</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
						COMPLETED 100% Audit compliance for Jan 2015 & Feb 2015. Supervision Audit to be completed March 2015. Residual actions to be reflected in the Service Improvement Plan.

Issue 2:

When children and families need an assessment, the assessment needs to be very clear in identifying children's needs. When making decisions about what level of help is required historical information about the family should be taken into account.

Expected outcomes/impact:

- Assessments consistently meet core standards, evidence needs, are analytical and highlight risks which need to be addressed.
- Historical information is evident and used as part of the assessment on every case record.
- There is strong and consistent management oversight of assessments to ensure standards are achieved.
- All managers and staff are consistently applying 'signs of safety' and evidence this in assessments of need.

Diagnosis

- Discussion with managers and staff confirmed that not all staff clearly understood the required practice and recording standards for assessments, including the need for comprehensive chronologies.

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
2.1 Ensure an up-to-date chronology is evident on each case record and monitored for compliance. Re-launch standards for case chronologies.	AD Child Protection	Jan 14	Mar 15	<p>COMPLETED - Information has been discussed / promoted in terms of key priorities for practice improvement, including the need for up-to-date chronologies. Measurement of chronology compliance introduced in monthly auditing programme Sept 2014</p> <p>The first of a series of workshops on standards for chronologies will be held in October 2014 following scrutiny in monthly auditing Sept 2014 (no auditing completed July/August 2014)</p>	<p>Measure # 2a – All cases have an up-to-date chronology.</p> <p><u>Baseline</u> – The baseline will be set for new case work starting in Oct 2014. Action has been taken to address existing cases to ensure an up-to-date chronology is in place.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> • Oct 2014, 50%. 	<p>September 2014 - Practice standards have been re-launched and communicated to all social work staff through management and team meetings. Mandatory chronology training for social work staff will be delivered in Oct 2014 and a baseline will be set for case chronologies at this point.</p> <p>Performance continues to be being monitored closely by managers.</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
				This to repeated three times a year. Exemplar chronologies will be shared with staff to raise standards.	<ul style="list-style-type: none"> From Mar 2015, 100%. 	Final update March 2015: COMPLETED Milestones for March 2015 not achieved. Revised Practice Standards for case chronologies to be launched with core training programme in April 2015. Residual actions for audits of chronology reflected in the Service Improvement Plan and QA Framework
2.2 Re-launch and implement the standards required for single assessments and audit for compliance.	AD Child Protection	Jan 14	May 14	COMPLETED - Assessment standards re-launched. Statement of 'Key Priorities' for practice improvement has been produced for all staff and managers and shared widely across the service to set clear expectations about practice and quality standards. The standards set out 9 domains of good practice and cover all aspects of service delivery, recording and management oversight. These standards are: <ul style="list-style-type: none"> analysis of needs SMART plans case recording voice of the child performance management 	Measure # 2b – All single assessments meet required case standards ('good'). <u>Baseline</u> – The baseline of 47% for assessments that met 'good' standards has been set from June 2014 onwards following staff training and coaching. <u>Milestones</u> <ul style="list-style-type: none"> Sept 2014, 60%. March 2015, 85%. From Sept 2015, 100%. Measure # 2c - single assessments are completed	September 2014 - New quality audit framework launched by 30th April 2014 as scheduled. First thematic audit took place in April 2014. Managers undertook case file audits of three cases during April. The headline results from the April 2014 audits have been collated as follows; <ul style="list-style-type: none"> The voice of the child is not evident, or is very limited, in assessments, reports and enquiries/investigations. Evidence of drift and delay is apparent and is affecting outcomes. For example, drift

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
				<ul style="list-style-type: none"> the offer of early help social work is a professional role capturing family history management oversight / supervision <p>Improvements in standards / outcomes will be assessed through case file audits and performance reports.</p>	<p>in no more than 45 days. Risk assessments are completed in 10 days.</p> <p><u>Baseline</u> - 82% of assessments completed within 45 days in 2013/14. % of risk assessments completed within 10 days to be set from June.</p> <p><u>Milestones (45 days)</u></p> <ul style="list-style-type: none"> Sept 2014, 83% March 2015, 85% From Sept 2015, 90% <p><u>Milestones (10 days)</u></p> <ul style="list-style-type: none"> From May 2014, 100% 	<p>and delay in completing assessments.</p> <ul style="list-style-type: none"> Assessments are not sufficiently analytical and do not address risk. Partnership working with families is not evident and expectations of them is not clear <p>Improvement actions have been agreed and implemented to achieve the practice standards set.</p> <p>Final update March 2015: COMPLETED</p> <p>- Audit findings have reported from May 2014 onwards to ensure that the timeliness of completing assessments is determined by the level of risk presenting.</p>
2.3 All assessments are seen and signed off by managers. Establish regular case file audits and review findings with managers and POD groups to agree improvement action. Establish practice that managers sign off all assessments.	AD Child Protection	Jan 14	Mar 15	<p>Social Work Managers are conducting monthly case file audits from April 2014 to assess practice standards. Levels of outstanding sign offs and overdue recording have been targeted for immediate improvement.</p> <p>Outcomes from the audit process are being evaluated and have been discussed with social work staff to</p>	<p>Measure # 2d - All assessments are signed off by managers.</p> <p><u>Baseline</u> – The baseline of 47% for assessments signed off by a manager will has been set using cases from June 2014.</p>	<p>September 2014 First thematic audit took place in April 2014. Managers undertook case file audits of three cases during April.</p> <p>Identification of staff to be involved coaching, mentoring and training in the new practice standards will be identified in Oct 2014 due to delay in this taking</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
				identify themes and to put practice improvement action plans in place.	<u>Milestones</u> <ul style="list-style-type: none"> Nov 2014, 80% From Mar 2015, 100% 	place due to change in senior management with the view it will commence Nov 2014. The baseline will be updated from Feb 2015 at the point that social work managers/staff training programme will have been running for three months
2.4 Ensure 'signs of safety' (SoS) is fully embedded in practice. Undertake audits of practice and test understanding to inform further action required. Create revised plans where these are required (e.g. SoS CP Plan templates).	AD Child Protection and AD Safeguarding & Children's Service Improvement	Jan 14	Mar 15	<p>COMPLETED - 'Signs of Safety' task and finish group with partnership involvement agreed by the LSCB on 28 March 2014.</p> <p>COMPLETED - First meeting of the task and finish group held on 11.04.14. New child protection conference report template in draft for consideration by the Group.</p>	<p>Measure # 2e - All cases audited from July 2014 show that 'signs of safety' standards are consistently applied.</p> <p><u>Baseline</u> - 100% of cases audited where 'signs of safety' had been applied will be audited from Sept 2014 (no auditing took place July/Aug 2014)</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> From Sept 2014, 100% 	<p>September 2014 - From 9 July 2014 all CP conferences follow the Signs of Safety model.</p> <p>Further information about the implementation of the new model is included within the LSCB Ofsted action plan.</p> <p>Review of the implementation of signs of safety scheduled in December 2014. Not completed.</p> <p>Final update March 2015: COMPLETED Review of the implementation of signs of safety scheduled in June 2015.</p>

Issue 3

Managers of social work teams need to apply a consistent understanding of thresholds for services, so that children and families get the right help at the right time and that their cases are not closed too early before circumstances have improved.

Expected outcomes/impact:

- Managers and teams understand the thresholds for services. Cases that are closed have consistent management oversight and management decision making and this can be evidenced in case recording.
- Case work has consistently strong management oversight.
- Audits of cases closed and open are undertaken to ensure consistent practice standards are being maintained. Managers and teams learn from cases closed to improve practice.
- Care plans are SMART and drive positive improvements in the lives of children and their families.

Diagnosis

- Discussion with managers and staff, and audits of case files has confirmed that in a small number of cases in the social work teams the threshold was met for child protection, and services offered as children in need. This therefore led to a delay in the appropriate service provision in some case work.

Action / Process				Improvement Targets and Outcomes		
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
3.1 Implement PAN London Continuum of Need, Domestic Violence Matrix and MASH protocol to underpin a consistent approach to the assessment of thresholds. Audit for compliance.	AD Child Protection	Jan 14	Mar 15	<p>COMPLETED - The Pan London Continuum of need is embedded within MASH and Triage. The DV Matrix and Protocol features as part of the ongoing MASH development plan.</p> <p>LSCB Threshold Guidance in draft in light of refreshed London Safeguarding Children Board Continuum of Need. LSCB consultation underway following</p>	<p>Measure # 3a – All cases audited meet required thresholds.</p> <p><u>Baseline</u> – The baseline of 60% of assessments that meet the required thresholds will be set with cases from June 2014</p> <p><u>Milestones</u></p>	<p>September 2014 - The first thematic audit within the 2014/15 audit programme focused on child protection thresholds. Identification of staff to be involved coaching, mentoring and training in the new practice standards will be identified in Oct 2014 with the view it will commence Nov 2014. The</p>

Action / Process				Improvement Targets and Outcomes		
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
				<p>Board meeting on 28.03.14. Scheduled for sign-off by LSCB in June 2014. Although the LSCB did provide sign-off the document was subsequently reviewed with further work being required to finalise the document. A dissemination plan is also required to ensure that all front-line workers are aware of the thresholds and their individual responsibilities. To be presented to the LSCB Dec 2104 for review for proposed final sign off.</p> <p>The DCS and service managers will 'go back to the floor' to observe decision making within social work teams.</p>	<ul style="list-style-type: none"> • Sept 2014, 80% • From Mar 2015, 100% 	<p>baseline will be set from Feb 2015 at the point that social work managers/staff training programme has been running for three months 'Back to the floor' findings to be reported in Mar 2015 and will inform training.</p> <p>Final update March 2015: COMPLETED</p> <p>With the improvement in Triage and MASH arrangements thresholds are now applied consistently at the 'front door'. This has led to a reduction in conversion rates from contact to referral and increased activity at the assessment stage and in child protection investigations.</p> <p>Coaching and mentoring to be lead by the Practice Mentor in the Quality Assurance Service working with Learning and Development and Advanced Practitioners.</p> <p>There will be an audit of thresholds in April 2015 which will inform further changes</p>

Action / Process					Improvement Targets and Outcomes		
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets	
3.2	Review and produce assessment protocol in line with PAN London development and agree with partners. Implement agreed protocol.	AD Child Protection	Jan 14	Mar 15	<p>Assessment protocol drafted following consultation with relevant operational teams and services and aligned with thresholds guidance.</p> <p>Draft assessment protocol has been circulated to Service Managers for consultation. Aim for final sign off to coincide with LSCB in June 2014. Further work is required to align this with the threshold document. See 3.1</p>	<p>Measure # 3b - All cases audited evidence management decision making.</p> <p><u>Baseline</u> – The baseline for the 47% of cases audited demonstrating management decision making will be set from June 2014.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> • Sept 2014, 85% • From Mar 2015, 100% 	<p>September 2014 Identification of staff to be involved coaching, mentoring and training in the new practice standards will be identified in Oct 2014 due to delay in this taking place due to change in senior management with the view it will commence Nov 2014. The baseline will be updated from Feb 2015 at the point that social work managers/staff training programme will have been running for three months</p> <p>Case file audits are informing discussions with staff.</p> <p>Final update March 2015: COMPLETED</p> <p>Case file audits now at 100% compliance and are informing discussions with staff.</p> <p>Coaching and mentoring to be lead by the Practice Mentor in the Quality Assurance Service working with Learning and Development and Advanced Practitioners.</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
3.3 Evidence on the case record that all cases files are reviewed by team managers and meet required standards as part of the decision making process to close a case.	AD Child Protection	Jan 14	Mar 15	<p>Social work managers and teams have been briefed on the required practice standards. Audit tools have been prepared and rolled out as part of the agreed audit programme.</p> <p>Themes identified will be actioned and re-audited to follow up and measure for improvements after 6 weeks (see also 2.2 above for the action taken to re-launch practice standards).</p> <p>The findings of audits will be reviewed and follow up actions, including briefings held with social work staff to ensure practice standards are embedded.</p>	<p>Measure # 3c - All cases closed evidence management sign-off.</p> <p><u>Baseline</u> – <u>Baseline</u> – The baseline of 18% for assessments that met 'good' standards has been set from in May 2014 following the scheduled thematic audit of closed/re-opened cases.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> • Sept 2014, 90% • From Mar 2015, 100% 	<p>September 2014 - The second thematic audit of case files completed in May 2014 focused on closed cases.</p> <p>The findings have been reported in June 2014 and have informed follow up actions to ensure practice standards are met.</p> <p>Consistent decision-making will continue to be monitored through the audit programme.</p> <p>Update March 2015: Residual Action for Service Improvement Plan Monthly Quality Assurance Meetings with Service Managers and Team Managers to review audit findings and agree key learning objectives. Review each month. (QA Framework 2015) Revised Milestones:</p> <ul style="list-style-type: none"> • March 15 - 35% deemed good • Sept 15 - 50% deemed good

Issue 4

When children and young people need written plans in place to help improve their lives, the plans must be of a good quality so that they effectively drive the provision of high quality services to children.

Expected outcomes/impact:

- Managers and their teams understand and implement the standards required for care plans and pathway plans.
- Strong management oversight and evidence of management review of care plans exists.
- There is strong independent oversight and governance of the quality of care plans and the SMART objectives set. The independent review process drives up standards.

Diagnosis

- Discussion with managers and staff, and audits of case files has identified that some staff are not clear about the practice and recording standards required for care plans and pathway plans.

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
4.1 Re-launch standards required for care plans and pathway plans. This to include the use of signs of safety in developing the plan, expected outcomes, how this will be measured and within stated timescales and SMART outcomes.	AD Child Protection and AD CIC, Permanency & Children's Resources	Apr 14	Sep 15	Practice standards have been re-launched and all social work managers and staff have been briefed about expectations. Individual managers are reviewing practice in supervision and group discussion is taking place in POD meetings to review practice issues and agree the changes required. A case file audit of practice standards was completed in April 2014. SMART practice guidance produced. Exemplars of SMART plans will be shared with staff.	<p>Measure # 4a - All audited care plans are SMART and evidence management of risks and improving outcomes.</p> <p><u>Baseline</u> – The baseline of 53% of plans audited which were SMART and evidenced risk management has been set from June 2014.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> • Oct 2014, 60% 	<p>September 2014 All social work staff are receiving coaching, mentoring and training in the new practice standards.</p> <p>The scheduled thematic audit of SMART plans in October 2014 will review progress.</p> <p>Final update March 2015: Residual Action for Service Improvement Plan Revised Audit programme to continue to provide robust quality</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
					<ul style="list-style-type: none"> March 2015, 75% From Sept 2015, 100% 	assurance across CYPS measuring against updated Practice Standards (implementation April 2015) for all areas of children's social care.
4.2 Evidence of reflective supervision recorded on every case file.	AD Child Protection and AD CIC, Permanency & Children's Resources	Jan 14	Mar 15	<p>Effective supervision is a priority for development. A new 'Supervision and Personal Development' file has been designed and recently implemented that brings together consistently across every team all key supervision policies and documents and personal development plans for all workers. Case recording of supervision on children's records has been reviewed for quality as part of the case file audits.</p> <p>Observation of supervision practice will take place to assess quality of reflective supervision.</p>	<p>Measure # 4b - All cases audited evidence reflective supervision discussions.</p> <p><u>Baseline</u> – The baseline of 27% for supervision that met 'good' standards has been set from June onwards.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> Sept 2014, 60% March 2015, 70% From Sept 2015, 100% 	<p>September 2014 - Case file audits taking place each month to measure progress. A small number of responses were received from a survey of social work staff about the frequency and quality of supervision. The vast majority of respondents identified that they have formal supervision every 4-6 weeks. All respondents strongly agreed or agreed that supervision enabled them to be proactive rather than reactive, and the significant majority identified that supervision helps develop practice with clients and provides clear direction on case management.</p> <p>A programme of observation of supervision is being developed and will be used to inform training will commence Oct 2015</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
						<p>All social work staff are receiving coaching, mentoring and training in the new practice standards. The baseline will be set from Feb 2015 at the point that social work managers/staff training programme has been running for three months</p> <p>Thematic supervision audit scheduled for September 2014.</p> <p>Update March 2015: Residual Action for Service Improvement Plan A programme of observation of supervision to be lead by the Practice Mentor in the Quality Assurance Service working with Learning and Development and Advanced Practitioners. Deep dive audit on supervision to be completed in August 2015 following supervision staff survey in July 2015.</p>
4.3 Implement an escalation procedure for Independent Reviewing Officers.	AD Safeguarding and Children's Service Improvement	Mar 14	May 14	<p>COMPLETED - Existing procedure for escalating concerns has been reviewed and updated.</p> <p>Re-launched at the end of May 2014.</p>	<p>Measure # 4c - The number of times the escalation procedures have been used (monitoring indicator – target not applicable).</p>	<p>September 2014 - Revised procedure was launched in May 2014. All Independent Reviewing Officers have been briefed on expectations and requirements.</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
						<p>In the period 01 May to 31 August there have been:</p> <ul style="list-style-type: none"> • Three (3) Stage 1 disputes - these have been responded to in the necessary timeframe • One (1) Stage 2 dispute • No Stage 3 disputes • One (1) Stage 4 dispute - issue satisfactorily resolved. <p>The escalation policy is now embedded as "business as usual"</p> <p>Update March 2015: COMPLETED Dispute Resolution to be re-launched April 2015 with training for staff provided by IROs</p>

Issue 5

The independent reviewing service needs to be reviewed to ensure that it can meet its requirements to rigorously scrutinise and challenge the quality of child protection and care plans.

Expected outcomes/impact:

- The independent reviewing service rigorously scrutinises and challenges plans to ensure children and young people are safe and achieve their desired outcomes.

Diagnosis

A review of the Independent Reviewing Officer Service has found that staff who chair child protection meetings have a wide remit and therefore not always able to challenge practice where this is required.

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
5.1 Prepare and agree terms of reference for a review of the scope and remit of the independent reviewing officer (IRO) service.	AD Safeguarding and Children's Service Improvement	Jan 14	Mar 14	COMPLETED - The terms of reference for the review were agreed and included the following three phases: <ul style="list-style-type: none"> • IRO survey • Best practice standards • Stakeholder survey 	Measure # 5a - The terms of reference for the review is agreed.	COMPLETED - The terms of reference for the review were agreed.
5.2 Complete the review of the service and make recommendations for implementation. To include observations of the child protection chairmen chairing conferences and auditing of minutes, decisions and child protection plans.	AD Safeguarding and Children's Service Improvement	Mar 14	Apr 14	COMPLETED - The review of the Independent Reviewing Officer Service including the survey has been completed. Report with recommendations completed. The review recommended the 'immediate' appointment of two additional IROs and splitting of the IRO	Measure # 5b - The review is completed and recommendations are agreed.	COMPLETED - The review has been completed and recommendations made for changes to enhance the Independent Reviewing Officer service.

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
				<p>/ CP chairman role. New ways of working now subject to prototype testing with the Corporate Transformation Team. Appointment of two additional agency IROs agreed to enhance capacity.</p> <p>Programme for observing chairmen picked up by new Independent Reviewing Service Manager and new Quality Assurance Manager in the week commencing 07.04.14.</p> <p>Signs of Safety (SoS) implementation Task & Finish Group established.</p>		
5.3 Implement recommendations from the review of the independent reviewing service.	AD Safeguarding and Children's Service Improvement	May 14	Dec 14	New ways of working are being developed and subject to the BID transformation programme.	<p>Measure # 5c - All child protection reviews completed on time.</p> <p><u>Baseline</u> – 95.9% of child protection reviews were completed in time in 2013/14.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> From April 2014, 100% 	<p>September 2014 The recommendations from the review are in the process of being implemented.</p> <p>Compliance and standards of Personal Education Plans (PEPs) for Looked After Children and impact and outcomes will be considered in all LAC reviews chaired by IROs.</p> <p>Update March 2015: COMPLETED 97.2% CP conferences within times scale</p>

Issue 6

Children and young people who need social work visits should always receive their statutory entitlement to these visits and they should be seen alone so that their views are always recorded, enabling them to influence plans for their protection and care.

Expected outcomes/impact:

- All statutory visits are undertaken for children subject to a child protection plan or looked after. All visits are recorded correctly on the IT system. Managers have direct access to management information to ensure all visits are scheduled and undertaken.
- There is strong independent oversight of care plans and feedback to improve practice and recording.
- The views of children and young people are captured routinely and used to inform individual assessments, care planning and service developments. Children and young people feel confident and comfortable in providing their views.

Diagnosis

- Discussion with managers and staff, and audits of case files has found that although in the majority of cases visits are undertaken and children are seen alone, this needs to be consistent and the views of the child needs to be considered fully and recorded in all cases. All staff need to understand the practice standards, how to record visits accurately on the IT system and consistently evidence the views of the child.

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
6.1 Chairperson reviewing child protection plans, care plans and pathway plans routinely monitor the evidence of the child's views recorded and use these to inform decision making. (Links to the review of the Independent Reviewing Service at issue 5 above).	AD Safeguarding and Children's Service Improvement	Jan 14	Mar 15	COMPLETED - Manual child protection conference monitoring reports have been reviewed by Independent Reviewing Service Manager, and implementation coincided with Signs of Safety launch on 09.07.14 and IRO new ways of working.	<p>Measure # 6a – All plans reviewed evidence the views of the child (as appropriate) and how these have been used to inform decision making.</p> <p><u>Baseline</u> – The baseline of 40% for plans reviewed evidence the views of the child (as appropriate) and how these have been used</p>	September 2014 - Identification of staff to be involved coaching, mentoring and training in the new practice standards will be identified in Oct 2014 due to delay in this taking place due to change in senior management with the view it will commence Nov 2014. The baseline will be updated from Feb 2015 at the point that social work

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
					<p>to inform decision making. that met 'good' standards has been set from June 2014.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> • Sept 2014, 80% • From Mar 2015, 100% 	<p>managers/staff training programme will have been running for three months</p> <p>Update March 2015: COMPLETED</p> <p>All LAC and CP cases are now reviewed within timescale. Robust weekly management monitoring meetings take place to track performance and follow up where appropriate.</p> <p>Processes are now in place for IROs to undertake mid-point reviews of actions from LAC Reviews and progression of the care plan from April 2015. CP Chairs will undertake mid-point reviews of CP Plans from April 2015.</p>
6.2 Implement the standards required for visits and capturing the views of children and young people. Confirm how to record a visit on the IT system and monitor for compliance.	AD Child Protection and AD CIC, Permanency & Children's Resources	Jan 14	Mar 15	Targets for improvement in visiting patterns have been agreed with all managers and held accountable by the Director at monthly performance challenge meetings. Significant improvement in statutory visiting is expected from September 2014 following implementation of the managed service initiative. IT reports for managers to track visits are in	<p>Measure # 6b – 100% of statutory visits for children subject to a child protection plan or looked after are completed on time.</p> <p><u>Baseline</u> – The % of statutory visits that took place as planned as at 19 May 2014.</p>	<p>September 2014 - Social work staff and managers have been briefed on the requirements for practice standards, including visits (e.g. seeing a child alone), views of the child, and how to ensure this is recorded correctly.</p> <p>The quality of recording of CP and LAC visits on the ICS</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
				place.	<ul style="list-style-type: none"> LAC – 91.3% CP – 96% <p><u>Milestones</u></p> <ul style="list-style-type: none"> Sept 2014, 95% Dec 2014, 97% From Mar 2015, 100% <p>Measure # 6c – 100% of children are seen alone, (where age appropriate / required).</p> <p><u>Baseline</u> – The baseline of 68% was confirmed by case file audits from June.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> Sept 2014, 95% Dec 2014, 97% From Mar 2015, 100% 	<p>Protocol system is a focus area to ensure that performance outcomes are accurately reflected in milestone metrics.</p> <p>Statutory visit performance data is monitored fortnightly at the CYPS Performance Monitoring Board that is chaired by the Chief Executive.</p> <p>Update March 2015: COMPLETED</p> <p>All LAC and CP cases are now reviewed within timescale and recorded on ICS Protocol. Robust weekly management monitoring meetings take place to track performance and follow up where appropriate.</p> <p>Feedback collated from staff and will be incorporated in refreshed Practice Standards April 2015 Visits guidance is produced on seeing children alone and a programme of observations and visits are implanted by the end of April 2015.</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
6.3 Review the use of 'Viewpoint' as a tool to capture the views of children and young people. Discuss the tool with children and young people and use feedback from staff also. Make recommendations for changes with an implementation timetable.	AD Safeguarding and Children's Service Improvement	Jan 14	Mar 15	<p>Terms of reference for a "Viewpoint" review agreed in May 2014 with review taking place in June 2014 has not happened due to Senior Management changes.</p> <p>This is planned to begin Oct 2014 and be led by the Corporate Parenting manager in consultation with the Participation Officer, 'Step-Up', the IRS manager, IROs, the Children in Care Team Manager and Service Manager, the Resources Team, Foster Carers and residential staff. Draft proposals to be presented at the Corporate Parenting Board Nov 2014.</p>	<p>Measure # 6d – All cases audited evidence the views of the child are recorded and evidence their views have been considered (dependent on appropriate age and understanding of the child).</p> <p><u>Baseline</u> – The baseline of 40% for plans reviewed evidence the views of the child (as appropriate) and how these have been used to inform decision making. that met 'good' standards has been set from June 2014.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> • Sept 2014, 80% • Dec 2014, 90% • From Mar 2015, 100% 	<p>September 2014 Identification of staff to be involved coaching, mentoring and training in the new practice standards will be identified in Oct 2014 due to delay in this taking place due to change in senior management with the view it will commence Nov 2014. The baseline will be updated from Feb 2015 at the point that social work managers/staff training programme will have been running for three months</p> <p>Findings from case file audits have been reported from June 2014 onwards.</p> <p>Update March 2015: Residual Action for Service Improvement Plan 'Viewpoint' to be re-launched 2015. Report to Corporate Parenting Board March 2015 (Appendix X - 'Viewpoint' Report to Corporate Parenting Board). Residual actions reflected in Service Improvement Plan.</p>

Issue 7

Looked after children's educational outcomes need to improve, and the virtual school needs to systematically track progress and take action that closes the gap in attainment as rapidly as possible.

Expected outcomes/impact:

- All looked after children have a Personal Education Plan and the plan is outcome focused.
- Up to date plans are in place for every child looked after and action is agreed and being achieved to raise attainment rapidly for children.
- An electronic PEP document is in place and accessed by all professionals including the foster carer; and by the young person. This will enable schools to take a lead role in PEP completion.
- Educational tracking systems for children looked after provide information about which children are / are not achieving their educational targets and those which may require further support.

Diagnosis

The use of tracking systems and the data from these systems to monitor the educational attainment of looked after children needs to be developed further. New monitoring systems have been implemented since the inspection (Welfare Call). Roles and responsibilities for monitoring and completing PEPs required clarification.

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
7.1 Review and improve tracking systems for educational progress and implement recommendations – including launch of new Welfare Call service to track attendance etc. to raise educational attainment.	Head of Virtual School	Jan 14	Mar 14	COMPLETED - New 'Welfare Call' service (called 'Track') went live in Hillingdon from January 2014. The service gathers information from teacher assessments on a termly basis and any formal assessments to track the attainment of each looked after child.	Measure # 7a - From April 2014 termly reports are updated showing the attainment of each child looked after.	September 2014 - New termly reports are being received from Welfare Call and used to inform management decisions. All attainment data will be added to the ePEP in real time. Curriculum and assessment procedures are changing from September and the impact of

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
						<p>these have yet to be determined.</p> <p>Update March 2015: Residual Action for Service Improvement Plan</p> <p>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 13th April, 2015.</p>
7.2 Review Personal Education Plans (PEPs) to ensure that SMART targets are in place and agreed actions are completed to raise attainment.	Head of Virtual School	Jan 14	Mar 15	<p>Agreed that with effect from April 2014, all PEPs will be led by the Virtual School. All priority plans reviewed to date, including:</p> <ul style="list-style-type: none"> Schools where the Virtual School had concerns about the quality of plans. Individual concerns brought to the attention of the Virtual School. All children in transition, statemented pupils and those pupils in independent schools Pupils attending alternative provision and part-time programmes. 	<p>Measure # 7b - All school age children looked after have an up-to-date SMART PEP.</p> <p><u>Baseline</u> – 94% of children looked after with an up-to-date PEP at the end of March 2014 (school age children).</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> Sept 2014, 98% From Mar 2015, 100% 	<p>September 2014 - New ePEP system is being implemented from 03 November 2014.</p> <p>The milestone of 98% is not yet being achieved due to the transition between the interim system and the new ePEP system.</p> <p>Update March 2015: Residual Action for Service Improvement Plan</p> <p>Amendments to be made to ePEP so that Action Plans</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
				<ul style="list-style-type: none"> Transfer years (pupils in year 6 and year 11). 		<p>agreed can be SMART by 13th April 2015.</p> <p>LA policy that all PEPs led by VS, together with changes to statutory guidance July 2014 increased number of PEPs to be completed by approximately 60% which VS does not have the capacity to deliver. Interim solution of 2 extra VS Officers for 12 weeks whilst longer term solution sought.</p>
7.3 Deliver training and briefings to carers, social workers and designated teachers to raise understanding of the PEP process and their roles and responsibilities in raising educational attainment	Head of Virtual School	Jan 14	Mar 15	<p>Rolling programme of training being delivered to foster carers to improve their understanding of target setting and use of Pupil Premium Plus. This includes new carers and established carers.</p> <p>Pod Coordinators and IROs have been trained in the use of the ePEP system and they will be able to support the delivery of training to social workers.</p> <p>Training for designated teachers is scheduled for 15 and 16 October.</p>	<p>Measure # 7c – all designated teachers and social workers attend PEP training.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> By the end of September 2014 all (100%) designated teachers and social workers attend PEP training. 	<p>September 2014 - Training has been delivered to foster carers. On track to deliver four training sessions (2 x induction and 2 x follow-up) to foster carers by March 2015.</p> <p>Update March 2015: COMPLETED</p> <p>Foster Carers have had training on raising the attainment of LAC by LFA in addition to training on EHC Plans and management of behaviour for education.</p> <p>DTs and social workers have had training on the ePEP system and further training planned for summer in relation</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
						to what constitutes an effective PEP, new Statutory Guidance, the use of the PPP, admissions, exclusions, education placement change, responsibilities and accountability etc.
7.4 Review and implement changes to the Personal Education Plan (PEP) process and make use of the ICS IT system to record / store PEPs.	Head of Virtual School	Jan 14	May 14	<p>COMPLETED - New processes created with supporting guidance for social workers and the Virtual School to clarify roles, responsibilities and expected standards. The new processes have been piloted during April 2014 and have gone live.</p> <p>The changes will allow the Virtual School to monitor interventions and progress more effectively.</p>	<p>Measure # 7d - By May 2014, new processes agreed and fully implemented to support effective monitoring of interventions and progress.</p>	<p>September 2014 - New processes agreed and implemented. ePEP goes live on 03 November.</p> <p>Update March 2015: COMPLETED From January 2015, decision taken that VS Officers store all new PEPs on ePEP system. Training is on-going for SWs who are being asked to store any PEPs undertaken by them on ePEP system but this is not yet consistent ; 5 separate training sessions offered, 23 SWs trained so far.</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
7.5 Review and make recommendations to establish a fully electronic Personal Education Plan (PEP). Subject to approval, prepare an implementation plan.	Head of Virtual School	Jan 14	Sep 14	COMPLETED - Funding approved for new ePEP system and contract agreed. Implementation commenced September.	Measure # 7e - By Sept 2014, recommendations for a new IT system to underpin effective working arrangements are made.	September 2014 - New ePEP system goes live on 03 November 2014. Training has commenced to ensure that all users understand their responsibilities for ensuring school aged LAC have a SMART PEP. Update March 2015: COMPLETED System developed and implemented and ePEP "live" date deferred to 13 th April to allow time for amendments to make PEP compliant with PEP statutory guidance, outcome focused and to provide a tracking and monitoring system. ePEP accessibility by Foster Carers will be after the "live" date.
7.6 Implement the new arrangements for distribution of Pupil Premium Plus (PPP) to maximise the use of the funding to raise educational attainment. Agree with Schools Forum on 8 th May 2014 and Strategic Schools Partnership Board (SSPB) on 9 th May the guiding	Head of Virtual School	Feb 14	May 14	COMPLETED - Paper was prepared and considered by the Schools Forum on 8 th May and SSPB on 9 th May. Allocation of Pupil Premium Plus will be based on pupil need and could include pooling of resources to meet needs where required. The report being presented to the	Measure # 7f - By March 2015, the percentage of looked after children in care for 12 months who achieved 5+ A*-C grades at GCSE and equivalent including English and Maths will meet at least the average for Hillingdon's statistical neighbours.	September 2014 - Paper presented to Schools Forum and Schools Strategic Partnership Board (SSPB) in May. Distribution of PPP agreed at Schools Forum on 18 September and Hillingdon Secondary Head Teachers (HASH) on 22 September. The

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
principles and the model of operation to target resources (PPP). Recommend to the Forum the plan to agree the commissioning priorities to raise educational attainment.				<p>Forum / Partnership Board recommends commissioning priorities (e.g. one to one tuition).</p> <p>Alternative providers for 1:1 tuition and on-line learning support have been interviewed and will be trialled to provide further support to those pupils who are not meeting their targets.</p> <p>Referrals continue to be made for additional tuition/ on-line tuition.</p>	<p>Measure # 7g - By March 2015 the percentage of school-age looked after children who were attending a school that were assessed as being below the floor targets at Key stage 2 or Key Stage 4 will be better than the average for Hillingdon's statistical neighbours.</p> <p>The percentage of LAC in care for 12 months who achieved 5+ A*-C grades at GCSE and equivalent including English and Maths did not meet the average for Hillingdon's statistical neighbours in 2014.</p>	<p>PPP will be embedded in the new ePEP system.</p> <p>Preliminary 2014 GCSE results were discussed at the Corporate Parenting Board (CPB) education sub-group. These preliminary results will be tabled at the full CPB on 17 November.</p> <p>Update March 2015: Residual Action for Service Improvement Plan</p> <p>Model of operation to target PPP resources not implemented. 2014-2015 PPP being devolved to school in March 2015, some having been used on commissioning 1:1 tuition, Book Trust to increase literacy and incentives to encourage LAC.</p>

Issue 8

Care leavers who wish to seek education, employment and training should be better supported to access these services, so that young people can choose the best option for them. This is particularly necessary for employment, through the provision of schemes such as work placements or vocational training.

Expected outcomes/impact:

- Managers and their teams understand and implement the standards required for care plans and pathway plans. All carer leavers have an up-to-date PEP and SMART pathway plan.

Diagnosis

Pathway plans need to be developed to be clear about the tasks and who is responsible for each task. Services leading to suitable work experience or vocational training are not well developed. Some social workers were unclear about the practice standards for pathway plans.

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress – Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
8.1 Implement standards required for care plans and pathway plans and monitor for compliance.	AD CIC, Permanency & Children's Resources	Jan 14	Mar 15	<p>The standards for creating and maintaining pathway plans have been re-launched to social work teams and managers as part of the refresh of the 9 social work practice standards.</p> <p>Audit of PEPs underway (with an expected reduction of overdue PEPs following the implementation of an improvement plan)</p>	<p>Measure # 8a - 100% of care leavers have an up-to-date pathway plan.</p> <p><u>Baseline</u> – The baseline will be confirmed by case file audits from June.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> Sept 2014, 80% Dec 2014, 90% From Mar 2015, 100% 	<p>September 2014 - All social work staff are receiving coaching, mentoring and training in the new practice standards. The baseline for pathway plans will be set from June 2014 at the point that the social work managers/ staff training programme has been running for three months.</p> <p>Audit findings to be reported from May 2014 onwards as a measure of progress.</p> <p>Update March 2015:</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress – Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
						<p>COMPLETED</p> <p>Staff have undertaken training in national standards through West London Alliance training.</p> <p>Percentage of care leavers with a plan is now 98 %.</p>
8.2 Review the services and support available to care leavers to access and maintain education, employment and training to best meet their needs and make recommendations for further changes.	Head of Early Intervention Services	Jan 14	Mar 14	COMPLETED - A Member-led Policy Overview Committee review of support for Care Leavers was completed and reported to Committee in March 2014. The recommendations included: developing work placement opportunities, information sharing between agencies / Council departments to promote opportunities to care leavers.	Measure # 8b - Complete the review of 'Improving Outcomes for Care Leavers Not in Employment, Education or Training' and recommend changes.	COMPLETED - Review completed and recommendations agreed March 2014.
8.3 Implement dedicated, targeted support for care leavers to ensure they secure and sustain their placement in employment, education or training.	Head of Early Intervention Services	Mar 14	Jun 14	Approval for agency worker provision Key Worker resource to work with NEET care leavers has been agreed (post 4134).	<p>Measure # 8c – % of care leavers Not in Employment, Education or Training (NEET) is in the top quartile.</p> <p><u>Baseline</u> – Baseline for care leavers which were NEET as at 31 March 2014 will be available in June 2014.</p> <p><u>Milestone</u></p> <ul style="list-style-type: none"> By March 2015, the % of care leavers Not in 	<p>September 2014 - Work is underway to enhance the existing service.</p> <p>The percentage of NEET for quarter one 2014/15 to be reported later in the year.</p> <p>Update March 2015: Residual Action for Service Improvement Plan Extra member of staff employed within LAC virtual school for</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress – Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
					Employment, Education or Training (NEET) achieves at least the top quartile for Hillingdon’s statistical neighbours	NEETS Virtual school action plan focus on NEET improvement.

Issue 9

Improve the quality of audit and of performance reporting so that it drives an embedded culture of rigorous performance management which transforms the standards of social work practice.

Expected outcomes/impact:

- A SMART Group plan for CYPS is in place which sets a clear direction of travel to share with managers and their staff.
- All managers and their teams have SMART targets and can see how their team is contributing to the plan for CYPS.
- Managers and their teams understand what is expected of them, key risks and how performance and practice quality will be assessed.
- All managers have a good understanding and strong management oversight of the performance and quality of practice and take action to address actual and anticipated risks.
- Managers understand and use management information from the IT system to ensure practice standards are met.

Diagnosis

A review of the existing performance and quality frameworks found that the existing quality assurance framework and case audits were not being applied consistently by some managers. Not all managers were using the IT management information reports available. Some managers said the reports needed to be simplified. There needs to be more analysis to explain performance.

Action / Process				Improvement Targets and Outcomes		
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
9.1 Review and refresh the Children and Young People’s Service (CYPS) Group Plan with a clear ‘mission’ and SMART targets.	DCS	Jan 14	Apr 14	COMPLETED - The Group Plan has been produced and cascaded to service areas to prepare their own plans.	Measure # 9a - By April 2014, a Group plan and targets are in place for CYPS.	COMPLETED - The Group Plan for Children and Young People’s Services is in place and was presented to CMT in June 2014.
9.2 All CYPS teams have a SMART plan and targets in place, including PADAs.	DCS	Jan 14	Apr 14	COMPLETED - Service areas and teams have plans in place. A sample of social work staff PADAs will be audited to check for compliance and target setting. Six monthly reviews	Measure # 9b - By April 2014, service areas have a plan with clear targets. By April 100% of staff in CYPS have a PADA in	COMPLETED - All service areas have a service plan in place. These are being reviewed / checked. PADA targets have been rolled out to social work staff. PADA checks

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
				of PADA targets will take place to ensure targets are being progressed.	place.	underway to ensure all PADAs have been signed off.
9.3 Develop and re-launch integrated performance and quality framework.	AD Safeguarding and Children's Service Improvement and Head of Performance & Improvement	Jan 14	Sep 14	<p>COMPLETED - Launched new monthly performance challenge sessions in February 2014 led by the Director to review with service and team managers performance against key targets and practice standards. The new performance challenge meetings are focusing on each service area to review their key performance priorities for dissemination into individual PADAs.</p> <p>New quality assurance practice guide completed in March 2014 (see 1.1 above).</p> <p>From July 2014, the findings from audits will be incorporated into Challenge Sessions to drive qualitative and quantitative improvements in performance.</p>	<p>Measure # 9c – Launch the new performance challenge meetings.</p> <p>100% of service managers and team managers attend the new monthly performance challenge sessions.</p>	<p>September 2014 - 100% of service managers have attended the new performance challenge meetings to date.</p> <p>Update March 2015: COMPLETED New QA Framework to be implemented April 2015. Monthly Quality Assurance Meetings with Service Managers and Team Managers to review audit findings and agree key learning objectives. Review each month. (QA Framework 2015)</p>
9.4 Introduce a weekly review of key targets / indicators at CYPS SMT.	Head of Performance & Improvement	Jan 14	Feb 14	<p>COMPLETED - New weekly key performance indicator report in place for agreed areas of practice providing managers with worker and case specific information to query performance and follow up on any actions required. The new report is</p>	<p>Measure # 9d - Weekly key performance targets tracking report established and available to CYPS SMT and all service and team managers.</p>	<p>COMPLETED - New weekly report launched and progress reviewed at monthly performance challenge meetings chaired by the Director with senior managers. This is distributed to all Service and Team Managers and provides data at an individual</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
				supporting a change in culture.		<p>team and allocated case worker level.</p> <p>A high-level weekly dashboard and data reconciliation tracker is produced and promulgated to senior managers. This is reviewed fortnightly at the CYPS Performance Monitoring Board chaired by the Chief Executive.</p>
9.5 Use existing management forum to agenda regular audit learning seminars to continually review audit processes, including; findings; learning action(s); evidence of impact and outcomes. Produce a quarterly audit learning briefing for the service.	Assistant Directors and Heads of Service	Apr 14	Mar 15	A standing item is included on the agenda of Divisional Management Meetings and All Managers Meetings about the audit programme to report audit activity, findings and learning. First scheduled session will feedback the findings of the thresholds thematic audit. A new quarterly quality assurance briefing will be prepared from quarter 1 onwards to summarise audit activity, findings and learning. The social work practice improvement officer will disseminate learning through team meetings, bitesize sessions etc.. and standards will be re-tested.	Measure # 9e - The quarterly audits report demonstrates clear and continuous improvements in practice standards.	<p>September 2014 - The findings from case file audits will be reviewed during quarter 1 & 2 and the key practice changes / learning implemented.</p> <p>Update March 2015: COMPLETED New QA Framework implemented and finding reported to Service Managers Meeting.</p>
9.6 Establish new SMT performance and quality report which underpins effective governance– to include performance, quality, analysis	AD Safeguarding and Children's Service Improvement	Feb 14	Jul 14	A new safeguarding report was presented at the Member-led Safeguarding Review Board meeting on 12th March 2014. A copy of the Kent, Harrow and Essex performance	Measure # 9f – launch a new performance / quality framework for social work managers and teams.	September 2014 - Work continues to define the SMT performance and quality report. Specific performance reporting for the managed service model was implemented in

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
and explanations, and action taken / being taken. The quality report for the Policy Overview Committee to include audit findings and performance results (links to action 9.5).	and Head of Performance & Improvement			scorecard is being reviewed to develop performance and quality reporting. Work is underway to develop a new children's pathway scorecard incorporating the findings from audits of practice standards.	<u>Milestones</u> <ul style="list-style-type: none"> By April 2014, all Heads of Service have SMART targets. By July 2014, performance and quality reports for the children's pathway include the findings / analysis of case file audits. 	September. Core practice targets have been agreed for Assistant Directors (detailed in the CYPS Group and Service Plans). The findings of case file audits will be introduced into performance reports from July onwards. No audits completed July/August 2014, therefore this will begin Oct 2104 following Sept audit Update March 2015: COMPLETED Implementation of quality assurance framework and reporting to SMT in place
9.7 Training is delivered to all managers to access management information reports directly.	Service Manager ICT	Feb 14	Jul 14	COMPLETED - Discussions have been held with ICT about the support to be provided by the POD co-ordinators and training will be rolled out from May 2014 when POD co-ordinators are appointed.	Measure # 9g - % of managers trained to access IT reports. <u>Milestone</u> <ul style="list-style-type: none"> By the end of July 2014, 100% of managers have received training to access IT reports. 	COMPLETED - Managers have received individual training as required to access the available IT reports. A number of reports have been re-written following feedback from managers. Pod Coordinator "Investigation and Problem Solving" training was delivered in the period 18 August to 01 September. This included a section on ICS Performance

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
						<p>Reporting that would enable the Pod Coordinators to provide support to managers to run reports.</p> <p>The Performance & Intelligence Team have attended team meetings to explain how to interpret the reports that are distributed, and what actions will be required.</p>

Issue 10

Improve corporate parenting responsibilities across the partnership to ensure services to looked after children improve and support children to achieve their aspirations.

Expected outcomes/impact:

- Priorities for supporting looked after children are agreed by the Board and understood by all leads from services.
- The Corporate Parenting work plan is agreed setting clear priorities, targets and SMART actions to achieve these.
- Changes to governance and the terms of reference support the delivery of improved outcomes for looked after children in Hillingdon.
- Member-led work-groups established to deliver defined priorities and targets from the work plan.
- Information presented to the Board underpins strong governance and supports discussion about the effectiveness of services to improve the life chances of looked after children, progress towards targets and improvement action required.

Diagnosis

The priorities for the Board and the arrangements to achieve the priorities required review and updating.

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
10.1 Refresh Corporate Parenting Strategy and priorities and agree with Corporate Parenting Board.	AD Safeguarding & Children's Service Improvement	Jan 14	Apr 14	COMPLETED - Updated Corporate Parenting Strategy was signed off at the Corporate Parenting Board on 24 th March 2014. Board membership reviewed and now includes senior partner representatives.	Measure # 10a - Priorities are agreed with the Corporate Parenting Board by end of April 2014.	September 2014 - Priorities were agreed with the Corporate Parenting Board by end of April 2014. Update March 2015: COMPLETED Work Programme 2014/2015 to be agreed at Corporate Parenting Board March 2015.
10.2 Review the Corporate Parenting Work Plan and subgroup arrangements and recommend	AD Safeguarding & Children's Service	Jan 14	Feb 14	COMPLETED - Recommendations agreed at the Corporate Parenting Board on 24 th March 2014.	Measure # 10b – The Corporate Parenting Board work plan is	September 2014 - Corporate Parenting work plan was reviewed and recommendations were agreed

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
changes to support the delivery of the new Corporate Parenting Strategy.	Improvement			Democratic Services has supported the set-up of new sub groups to reflect CPB priorities. These are thematic groups chaired by an Elected Member and a lead officer to implement 1 or 2 specific initiatives or projects for/with children and young people. Board to sign-off workplan.	reviewed and recommendations agreed by the end of February 2014.	at the end of February 2014. Update March 2015: COMPLETED Work Programme 2014/2015 to be agreed at Corporate Parenting Board March 2015.
10.3 Review the governance arrangements and terms of reference with the Board chairman and sub-group chairmen. Revise the terms of reference and governance arrangements if required.	AD Safeguarding & Children's Service Improvement	Jan 14	Mar 14	COMPLETED - All sub-groups have terms of reference and an agreed chairman. Update reports from each sub-group will be scheduled.	Measure # 10c - Changes to the governance and delivery of corporate parenting priorities are agreed by the end of March 2014.	COMPLETED - Changes to the governance and delivery of corporate parenting priorities were agreed by the Board by the end of March 2014.
10.4 Launch new member-led Corporate Parenting work-groups to target and progress agreed priorities.	AD Safeguarding & Children's Service Improvement	Feb 14	Mar 14	COMPLETED - Ground work for Corporate Parenting Board sub-groups completed in February 2014 and agreed at the March meeting of the Board.	Measure # 10d - New Corporate Parenting work-groups agreed by the end of March 2014.	COMPLETED - New Corporate Parenting work-groups were agreed by the end of March 2014. Sub-groups agreed as: <ul style="list-style-type: none"> • Education • Social Development and Participation • Health and Wellbeing • Care Leaving/Transition • Safeguarding/Staying Safe
10.5 Review the information presented to the Board to support the Board in their governance role. Recommend and implement agreed changes. Provide the findings of thematic	AD Safeguarding and Children's Service Improvement	Jan 14	Jul 14	Thematic audit programme and performance information was to be agreed through the Performance Audit and QA subcommittee Sept 2014.	Measure # 10d - A new performance and quality report is designed to underpin the Corporate Parenting Board.	September 2014 - Work is underway to review the information the Board and each sub-group requires to monitor progress against the priorities for the Board and the

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audits to the Board with action plans and improvements.	and Head of Performance & Improvement					<p>outcomes for children and young people. Consideration is being given to national monitoring / comparisons as well as local requirements.</p> <p>Update March 2015: Residual Action for Service Improvement Plan Residual actions to be reflected in Service Improvement Plan and QA Framework.</p>

Issue 11

Maintain sustained efforts to recruit experienced staff and ensure that all staff receive regular supervision in line with the council's supervision policy.

Expected outcomes/impact:

- A stable workforce with a lower turnover of permanent staff by reducing reliance on agency staff. The focused six month target is to recruit at least 40 Social Workers by July 2014.
- Managers and staff understand what is expected of them and supervision takes place in accordance with the supervision policy.
- Improved recruitment process that benefits the authority and the applicant.
- Improved investment in new starters in order to improve retention.

Diagnosis

- From discussion with social work staff (agency and permanent staff) who have left Hillingdon, reasons for leaving have been identified as the travel / long-distance to work from home, remuneration and benefits, and also opportunities elsewhere for further development and learning.
- From workshops, surveys, and discussions with new starters who have worked in Hillingdon for 3-6 months, staff feel valued by their immediate managers but would welcome a greater focus on induction.
- Feedback on the application process highlights requirements for re-design of the end-to-end 'whole recruitment system' to include defining of roles and responsibilities.

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
11.1 Review, refresh, and implement a workforce plan and targets, including a benefits package, which recruits and retains social work staff.	Assistant Directors and Head of HR	Jan 14	Mar 16	<p>Recruitment and retention strategy drafted and agreed with the Director. Key elements of the strategy include:</p> <ul style="list-style-type: none"> • Review of the social worker benefits package, led by the Corporate Transformation Team. • Valuing staff through training, development of a social work academy, and career progression 	<p>Measure # 11a – recruitment of social work staff.</p> <p><u>Milestone</u> Focused six month activity to recruit 30 permanent social workers by July 2014, and make offers for a further 10 permanent social work posts.</p>	<p>September 2014 - The immediate focus on recruitment in frontline services has been to stabilise the workforce through quality frontline agency workers and interim senior managers.</p> <p>Permanent recruitment is currently on hold pending the</p>

Action / Process					Improvement Targets and Outcomes	
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				<p>for all social workers and managers.</p> <ul style="list-style-type: none"> • Development of a Marketing Plan that presents the London Borough of Hillingdon as an excellent employer of social workers (to be supported by messages from children and young people, parents and staff). • Development and implementation of a revised and refreshed application process and applicant pack to provide applicants with the best opportunity to demonstrate ability to meet the person specification and enable recruiting managers to shortlist effectively. • Targeted recruitment with specific agencies, including recruitment of six (6) permanent social workers from overseas. • ‘Grow your own’ - current NQSW cohort remaining with LBH and progressing to SO2 posts (x2 May 2014 and x11 December 2014). • Social Work students to be offered interviews to take up NQSW posts (x1 May 2014 and x3 November 2014). 	<p>Measure # 11b - % HCPC permanent social work staff to % agency staff.</p> <p><u>Baseline</u> – as at April 2014, 63% of HCPC social work staff are permanent and 37% are agency staff.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> • Sept 2014 – 70% permanent, 30% agency • March 2015 – 77% permanent, 23% agency • Sept 2015 – 80% permanent, 20% agency • March 2016 – 90% permanent, 10% agency <p>Recruitment Marketing and Advertising Plan to be completed by 31 July 2014.</p> <p>Refreshed end-to-end CYPS “whole recruitment system” to be implemented by 30 September 2014.</p>	<p>development of a wider recruitment campaign which is planned to commence in January 2015. The Recruitment Marketing and Advertising Plan will therefore be developed and agreed by 28 November 2014. The additional capacity delivered through the managed service model will assist with stabilising the workforce (best practice average case workloads will be a positive story for a recruitment campaign).</p> <p>The September milestone for the permanent to agency split (70% and 30% respectively) will not be achieved due to the change in focus of using agency staff to stabilise the workforce.</p> <p>Update March 2015: Residual Action for Service Improvement Plan See Recruitment strategy within the Service Improvement plan</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
11.2 Ensure staff receive regular supervision.	Assistant Directors, Heads of Service, and Learning & Development Officer	Jan 14	Mar 15	<p>In progress. Re-launch of existing supervision policy providing guidance for Managers and staff on supervision practice.</p> <p>Clarity has been given to managers about the role of the POD (group work) and communication to teams re: difference between POD Supervision and 1-1.</p> <p>New supervision /personal development folder launched to provide a common standard for all social work managers.</p> <p>Leadership and management programme under development for all social work managers in 2014 to help embed core practice standards and underpin stability in the workforce.</p>	<p>Measure # 11c – % of social work staff which receive supervision.</p> <p><u>Baseline</u> – The baseline of 27% for supervision that met 'good' standards has been set from June onwards.</p> <p><u>Milestones</u></p> <ul style="list-style-type: none"> • Sept 2014, 85% • March 2015, 100%. 	<p>September 2014</p> <p>Supervision policy re-launched for social work staff. Identification of staff to be involved coaching, mentoring and training in the new practice standards will be identified in Oct 2014 due to delay in this taking place due to change in senior management with the view it will commence Nov 2014. The baseline will be updated from Feb 2015 at the point that social work managers/staff training programme will have been running for three months</p> <p>Update March 2015: Residual Action for Service Improvement Plan</p> <p>A programme of observation of supervision to be lead by the Practice Mentor in the Quality Assurance Service working with Learning and Development and Advanced Practitioners. Deep dive audit on supervision</p>

Action / Process					Improvement Targets and Outcomes	
Action	Lead	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
						to be completed in August 2015 following supervision staff survey in July 2015.

[UPDATED - March 2015]