



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

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

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

**Version 1 March 2015**

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

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

	chosen workplace. Explanation contained in the pack of supervision, POD work, support etc.				campaign and we will invite social workers to 'grow your professional career at Hillingdon'.		
1.3	Recruitment process through to delivery to meet the needs of the service in line with the improvement plan	HR	May 2015	Mar 2016	The Council is in a better place from which to recruit with clear direction, managed caseloads, competitive remuneration and a commitment to continued professional development all supporting the Council's offer to social workers. Plan to use Sanctuary, who specialise in social work recruitment in the UK, and HCL who have a dedicated overseas recruitment network.	TBC by HR	On hold until Transition plan agreed by the Leader
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	Jan 2015	Ongoing	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.	100% of new workers attended induction programme	All staff inducted

					The number of delegates has increased over the last 3 months. To date all delegates that have attended have been either agency staff or student social workers.		
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	Mar 15	Ongoing	Over the next month the work will include a review of the programme and processes with a view to modifying and enhancing the offer and support to ASYE, which will include an escalation processes where gaps in that support to NQSW's are identified.	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
1.6	Social Work Pathway to be embedded to ensure career structure is supporting individual needs	L&D	TBC by L&D	TBC by L&D	TBC by L&D	TBC by L&D	TBC by L&D
1.7	Supervision structures to be embedded to ensure 100% compliance and delivery, including recording and performance management	AD Children's Safeguarding and AD CiC, Permanency &	April 2015	Sept 2015	All managers to provide supervision to staff in line with Hillingdon's Supervision Policy.  All Senior Managers to ensure that supervising managers have received	100% Compliance in the delivery of supervision	All staff receiving timely, good quality supervision in line with the Hillingdon Supervision Policy

	processes to be clear and robust in dealing with competency issues	Children's resources			supervision induction and training within the first two weeks of employment (agency or permanent).		
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	April 2015	April 2016	All managers to complete PADAs with all members of their teams.  All Senior Managers to ensure that supervising managers have received PADA induction and training within the first two weeks of employment (agency or permanent).	PADA reaches 100% completion	All staff have a PADA that clearly identifies individual, team and service priorities for that member of staff and details an individual development plan ensuring continuous professional development
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	April 2015	April 2016	All Senior Managers to complete Management development plans with their managers.	100% of managers to have a management development plan	All managers have a clear plan of support and career progression

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

Action / Process					Improvement Targets and Outcomes		
Ref	Action	Lead Asst Director Children's Social Care	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
2.1	Improved and consistent decision-making by the Triage and MASH teams	Service Manager Triage/ MASH	April 2015	April 2016	<ul style="list-style-type: none"> <li>Performance data (demand and capacity data set) is collated and reviewed regularly around level of contacts, conversion rate to referrals into Social Care</li> <li>Service undertakes regular supervision audits and PADA reviews</li> <li>Manager audits of social workers decision making and multi agency discussion and agreement of case progression.</li> </ul>	<ul style="list-style-type: none"> <li>Data around following Key Indicators as recommended by The London Chief Exec. Self-Improvement Board line is collated</li> <li>Rate of assessments per 10,000 of the CYP population</li> <li>Rate of section 47 enquiries per 110,000 of the CYP population.</li> <li>% of referrals leading to the provision of a social care service (as defined by the child becoming a child in need).</li> </ul>	<ul style="list-style-type: none"> <li>Data around Key Indicators as recommended by The London Chief Exec. Self-Improvement Board is in line with statistical neighbours</li> <li>Audits and data indicating consistent decision-making from Triage and Mash. Audit of decision- making planned for April 2015</li> <li>On going partner discussion regarding thresholds and delivery of training to partners to explore social care decision making and the MASH concept</li> </ul>

2.2	There will be an increase in families stepping down at key points in social care (at contacts, post assessment and during CP / CIN work) - seen via demand and capacity data set	Service Manager Triage/ MASH	April 2015	On-going	Protocol between Children Social Care and Early Intervention service to be rolled out to all managers and staff within the MASH, Assessment and Social Work Team	<ul style="list-style-type: none"> <li>● % families no longer receive a statutory service and not re-referred to statutory social work for 6 months.</li> </ul>	
2.3	Average caseloads - 18 cases per qualified social worker	Service Manager Child in Need	Jan 2015	On-going	<ul style="list-style-type: none"> <li>● Benchmark for caseloads agreed in line with London Standards document:</li> <li>● 18 for CP/CIN (CSWT) service</li> <li>● Resourcing and planning will be in line with above and demand.</li> <li>● 100% allocation of all statutory cases</li> </ul>	<ul style="list-style-type: none"> <li>● Weekly data set indicate that all Social Workers have an average caseload of 18 children.</li> </ul>	<ul style="list-style-type: none"> <li>● To ensure Social Workers are supported with manageable caseload and the work undertaken on the cases is undertaken in a timely manner with good outcomes for families.</li> <li>● There is flexible use of agency staff across the service which is aligned with demand.</li> </ul>

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	Nov 2014	April 2016	<ul style="list-style-type: none"> <li>Contract oversight - Performance Indicators are set and regular meetings are held on risks and issues. Partnership framework is established.</li> </ul>	<p>Key Indicators and delivery model is agreed and delivered:</p> <ul style="list-style-type: none"> <li>Implementing a 5 week duty service that will undertake duty tasks and assessments of all children in need.</li> <li>Delivering 100% of assessments within 45 days max with an average of 30 days per assessment.</li> <li>Delivering 100% of ICPC within 15 days.</li> <li>%families no longer receive a statutory service and not re-referred to statutory social work for 6 months.</li> </ul>	<ul style="list-style-type: none"> <li>Assessment Service is established and resourced.</li> <li>Regular risks and issues meetings are held.</li> <li>Performance data is collated and shows achievement of indicators.</li> <li>The added capacity provided by Skylakes will alleviate pressures in the social work teams. Results will be seen in the reduction of 'backlog' cases and new work being completed more frequently within timescales.</li> <li>Improved throughput of work from referral to social care planning to permanency, with a clear focus on legal planning and pre-proceedings work (Early Intervention, CIN, CP, LAC or Children's Pathway).</li> </ul>
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**Work stream 3: Defining new ways of working within the CSWTs**

Action / Process					Improvement Targets and Outcomes		
Ref	Action	Lead Asst Director Children's Social Care	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
3.1	Improve the quality of social work assessments	Service Manager Child in Need	April 2015	April 2016	<ul style="list-style-type: none"> <li>• Focused improvement on assessment standards has commenced with the recruitment of two practice development coordinators who have commenced work with individual practitioners who have been identified by managers as needing guidance.</li> <li>• Managers are trained to provide effective case management and reflective supervision and provide clear decision making.</li> </ul>	<p>100% compliance in team managers undertaking audits.</p> <p>Case audits show improvement in grading:</p> <ul style="list-style-type: none"> <li>• 35% by March 2015</li> <li>• 50% by Sept 2015</li> <li>• 80% by March 2016</li> <li>• 100% supervision is delivered and recorded to staff</li> <li>• % of children becoming subject to a child protection plan per</li> </ul>	<ul style="list-style-type: none"> <li>• Social work assessments contain clear analysis and informed judgements on intervention models to be used with families</li> <li>• Assessments reflect the child's voice and social work engagement with the family and partner agencies</li> <li>• Improved throughput of work from referral to social care planning to permanency, with a clear focus on legal planning and pre-proceedings work (Early Intervention, CIN, CP, LAC or Children's Pathway).</li> <li>• All Case records to contain up to date chronologies.</li> </ul>

					<ul style="list-style-type: none"> <li>Practice improvement emphasis to be on assessments and relaunch of chronologies.</li> </ul>	<p>10.000 is in line with SN.</p> <ul style="list-style-type: none"> <li>Supervision Audit and Staff surveys indicate high quality supervision is being delivered and staff report its benefit.</li> </ul>	<ul style="list-style-type: none"> <li>An assessment training programme to be commissioned from the QA service and rolled out to all social work practitioners.</li> </ul>
3.2	Improve social care staff training and development	Service Manager Child in Need	April 2015	On-going	<ul style="list-style-type: none"> <li>All staff with have a PADA completed in line with the targets set.</li> </ul>	<ul style="list-style-type: none"> <li>By May 2015 all staff in the Children &amp; Young Peoples team have a PADA in place, which will have expected priorities by role in line with this action plan.</li> </ul>	<ul style="list-style-type: none"> <li>PADA targets to be rolled out to all staff. Checks are undertaken to ensure that PADA's have been signed off.</li> </ul>
3.3	Social care offer	Service Manager Child in Need	April 2015	On-going	<ul style="list-style-type: none"> <li>Ensure that practitioners and partner agencies are clear about the availability of services that can offer support and assistance to children &amp; families in the community.</li> </ul>	<ul style="list-style-type: none"> <li>%families no longer receive a statutory service and not re-referred to statutory social work for 6 months.</li> <li>TAF provision and community based resources being</li> </ul>	<ul style="list-style-type: none"> <li>Protocol outlining interface between Early Intervention Service and Children Social Care is rolled out and targets agreed.</li> <li>TAF provision and community based resources being utilised more frequently .</li> </ul>

					<ul style="list-style-type: none"> <li>Service Framework outlining length and type of involvement is rolled out to staff</li> </ul>	<p>utilised more frequently.</p> <p>Step -up and Step Down data indicates:</p> <ul style="list-style-type: none"> <li>CIN cases average 6 month</li> <li>CP cases average 9 -12 months in length</li> <li>Pre-proceedings work is 12-14 weeks average</li> <li>An increase in Step down post assessment and intervention.</li> <li>%families no longer receive a statutory service and not re-referred to statutory social work for 6 months.</li> <li>There is a reduction in complaints.</li> </ul>	<ul style="list-style-type: none"> <li>Referrals received into children's services are appropriate for statutory intervention.</li> <li>Re-referral rates are reduced and in line with statistical neighbours.</li> <li>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.</li> <li>Training on pre-proceedings work to be rolled out by Court Trackers and others in first quarter of 2015.</li> </ul>
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3.4	Refresh service off on DV	Service Manager Triage/ MASH & Service Manager Child in Need	April 2015	Sept 2015	<ul style="list-style-type: none"> <li>● MASH partnership to deliver DV specialist role to MASH to identify and enhance service offered to families identified with DV risk.</li> <li>● Introduction of CAADA-DASH Risk Identification tool to the Assessment and SW teams.</li> <li>● Introduction of Barnardo's DV Risk Identification Matrix.</li> </ul>	<ul style="list-style-type: none"> <li>● Improved signposting for DV families from CSC.</li> <li>● An increase in orders against perpetrators or legal remedies.</li> <li>● Social Workers and audits indicate an improvement in assessment quality.</li> </ul>	<ul style="list-style-type: none"> <li>● Training to be rolled out by QA service on DV tools March onwards</li> </ul>
3.5	Provide effective parenting assessment service	Service Manager Child in Need	April 2015	April 2016	<ul style="list-style-type: none"> <li>● Recruit to the vacant post and move the SWW (mental health) to add value to the service.</li> <li>● Improve the output of the current service by reducing the completion timescales of assessments.</li> <li>● Work with the service to introduce other assessments and</li> </ul>	<ul style="list-style-type: none"> <li>● Service to refresh protocol and offer.</li> <li>● An increase in parenting assessments being completed in -house for all pre-proceedings families unless a clinical/medical assessment is required.</li> </ul>	<ul style="list-style-type: none"> <li>● Once service is fully staffed targets for assessments to be rebased.</li> </ul>

					<p>interventions as part of service offer work.</p> <ul style="list-style-type: none"> <li>• Service to support the improvement in quality of core assessments.</li> </ul>	<ul style="list-style-type: none"> <li>• An increase in parenting assessments being completed within new timescale.</li> <li>• An ongoing case consultation and training in assessments and pre-proceedings to be offered to Social Care staff.</li> </ul>	<ul style="list-style-type: none"> <li>• Parenting assessments to be completed within 6 weeks unless agreed with legal and SW teams.</li> </ul>
3.6	Improve EDT staff recording practice following snapshot review.	Service Manager Child in Need	April 2015	On-going	<ul style="list-style-type: none"> <li>• ICS Training has been provided to all EDT staff regarding recording all information and protocols</li> <li>• EDT are now aware of the correct protocols regarding the reporting of missing children.</li> </ul>	<ul style="list-style-type: none"> <li>• TRIAGE team are reported any issues weekly of incorrect recording and timeliness of reporting.</li> </ul>	<ul style="list-style-type: none"> <li>• EDT to work in line with the social work teams and remain consistent in their approach to recording.</li> </ul>
3.7	Successful interim recruitment to all social work and team manager posts	AD Children's Social Care	July 2015	Dec 2015	<ul style="list-style-type: none"> <li>• Permanent managers and social workers to be appointed in the SW teams.</li> </ul>	<ul style="list-style-type: none"> <li>• Permanent recruitment</li> </ul>	<ul style="list-style-type: none"> <li>• Stable workforce to achieve good outcomes for families.</li> </ul>

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

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

					March 2015 = average caseload of 14 children		
	All LAC children over the age of 16 years old will have a Personal Advisor allocated	Service Manager LAC & Manager Children & Young People Service	April 2015	Dec 2015	Personal Advisor will be allocated to all LAC YP over the age of 16 years old. All care leavers will have an effective Pathway Plan March 2015 = 85% care leavers have a Pathway Plan	Data Monitoring-  100% allocation = all 16 plus open cases  100% pathway plans = All care leavers	To ensure services to LAC improve and support children to achieve their aspirations
4.3	Evidence of child or young person participation in their care planning for LAC and care leavers	Service Manager LAC	April 2015	On-going	All LAC children should be offered an advocate to ensure they have representation independent to Social Work - see participation.  Case audits will demonstrate evidence of improved child and young person engagement through case recording.  Team training in planned to ensure services to LAC improve and support children to achieve their aspirations.	Corporate manager data:  Milestones for audited cases: <ul style="list-style-type: none"> <li>• March 15 - 35%</li> <li>• Sept 15 - 50%</li> <li>• March 16 - 80%</li> </ul>	



					All Social workers to ensure that the child's voice is reflected in the Care/Pathway plan by detailed recordings		
4.4	Effective management oversight is in place leading to better and more timely decision-making	Service Manager LAC	April 2015	July 2015	All Care plans are being audited by SM and the case progression manager. There is full compliance with the case auditing framework. The Public Law Outline (PLO) has been successfully implemented resulting in a reduction from 57 to 34 weeks duration from application to final order.	<p>Court outcomes and LAC reviews:</p> <p>The average of PLO cases to be concluded = 26 weeks</p> <p>100% of LAC reviews completed within timescale</p> <p>Milestones for audited cases:</p> <ul style="list-style-type: none"> <li>● March 15 - 35%</li> <li>● Sept 15 - 50%</li> <li>● March 16 - 80%</li> </ul>	To ensure all care plans are robust to demonstrate good outcomes for LAC children
4.5	Health and education placement outputs demonstrate good outcomes for LAC	Service Manager LAC & VHT	Jan 2015	Dec 2015	<p>Regular meetings have been established to develop strong working relationships between the CiC teams and the virtual school.</p> <p>Work underway to implement effective ePEPs and school attendance monitoring.</p>	<p>Updates from Data and weekly Performance meetings;</p> <p>100% ePEPs in place for all year 3 and above LAC.</p>	Ensure all children who are LAC and not meeting their milestones are offered 1-2-1 tuition from their pupil premium

				<p>Regular monitoring meeting in place to work with designated Health professionals to track and monitor health assessments.</p> <p><i>Residual actions from Ofsted Improvement Plan:</i> 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.</p> <p><i>Residual actions from Ofsted Improvement Plan:</i> Amendments to be made to ePEP so that Action Plans agreed can be SMART by 13<sup>th</sup> April 2015.</p> <p><i>Residual actions from Ofsted Improvement Plan:</i> 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</p>	<p>90% completion of LAC health assessments within timescale.</p>	
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					1:1 tuition, Book Trust to increase literacy and incentives to encourage LAC.		
4.6	Improve timeliness of permanent placement provision for LAC	Service Manager - LAC	April 2015	July 2015	Review of the the role of the Court Progression Officer underway to ensure all court proceedings are tracked and monitored to deliver 26 week time scale. Introduction of Permanency Tracking and Monitoring of all Child Placement reports (Permanency Plans)	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%	26 weeks achieved in court-monthly meetings

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

Action / Process					Improvement Targets and Outcomes		
Ref	Action	Lead Asst Director Children's Social Care	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
5.1	Allocation and completion of all outstanding and new assessments coming into the service	Service Manager Children's Resources	Jan 15	July 15	<ul style="list-style-type: none"> <li>• 29 outstanding assessments allocated to Coram</li> <li>• HCL manager and Kinship assessor in post</li> <li>• Overview and scrutiny of ongoing performance embedded in management function</li> </ul>	<ul style="list-style-type: none"> <li>• Outstanding assessments presented to Adoption and Fostering Panel for approval within 6 months Coram project</li> <li>• New assessments presented to Adoption and Fostering Panel in line with statutory guidelines</li> <li>• ICS/Performance Intelligence Team monthly data for approval of carers in line with</li> </ul>	<ul style="list-style-type: none"> <li>• Deliver top quartile adoption and fostering permanence outcomes for LAC</li> <li>• Weekly target to allocate all carer assessments within statutory and good practice guidance</li> <li>• Sufficient good quality permanent placements options (return home, long-term fostering, adoption, SGO, connected persons) for LAC children in Hillingdon.</li> <li>• Timely permanency outcomes achieved for LAC</li> </ul>

						<ul style="list-style-type: none"> <li>statutory requirements</li> <li>Scrutiny of monthly data by Performance subgroup</li> </ul>	<ul style="list-style-type: none"> <li>Time of conversion from Stage 1 to Stage 2 assessment</li> <li>Time of conversion from Stage 2 assessment to approval</li> <li>Time of approval to placement</li> <li>Time from Placement Order to Adoption Placement</li> <li>Percentage of SGO achieved</li> <li>Percentage of Connected Person's approved</li> </ul>
5.2	Adapt 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	Feb 15	6 months from start	<ul style="list-style-type: none"> <li>Team structure and throughput evaluated against other projects and operating models for future service delivery</li> <li>Analysis of past and predicted numbers entering the service area</li> <li>Proposal of new team structure, staffing ratio and</li> </ul>	<ul style="list-style-type: none"> <li>Quality Assurance framework provides evidence of good quality social work practice on all assessments</li> <li>ICS/Performance Intelligence Team monthly data for</li> </ul>	<ul style="list-style-type: none"> <li>Improved permanent placement outcomes for LAC in Hillingdon</li> <li>Improvement in the performance as measured by the national adoption score card</li> <li>Percentage of LAC achieving permanency</li> </ul>

					associated cost to meet demand	approval of carers in line with statutory requirements <ul style="list-style-type: none"> <li>• Scrutiny of monthly data by Performance subgroup</li> </ul>	outcomes in line with legislation and statutory guidance <ul style="list-style-type: none"> <li>• Increase number of good quality LB Hillingdon foster placements available</li> <li>• Increase numbers of LAC placed within 20 mile radius</li> <li>• Percentage of SGO and Connected Person approvals</li> </ul>
5.3	Implement strong management oversight and evidence of improved permanence outcomes for LAC in Hillingdon	Service Manager Children's Resources	Feb 15	July 15	<ul style="list-style-type: none"> <li>• Overview and scrutiny of on going performance embedded in management function</li> <li>• Agreed monthly PI data to be manually collated and reported</li> <li>• Progression of ICS / Performance Intelligence Team data reports</li> </ul>	<ul style="list-style-type: none"> <li>• ICS/Performance Intelligence Team monthly data for approval of carers in line with statutory requirements</li> <li>• Scrutiny of monthly data by Performance subgroup</li> </ul>	<ul style="list-style-type: none"> <li>• Improved permanent placement outcomes for LAC in Hillingdon</li> <li>• Improvement in the performance as measured by the national adoption score card</li> <li>• Percentage of LAC achieving permanency outcomes in line with legislation and statutory guidance</li> </ul>

5.4	Improve the management and coordination of the Adoption & Fostering Panel	Service Manager Children's Resources & Panel Advisor	Mar 15	Sep 15	<ul style="list-style-type: none"> <li>● Recruitment of interim Panel Advisor</li> <li>● Review of admin coordination and support of the process</li> <li>● Joint work with Adoption and Fostering Panel Chair to oversee and scrutinise quality of work presented</li> <li>● Joint work between the Panel Advisor and the Court Tracker to oversee timely case progression</li> </ul>	<ul style="list-style-type: none"> <li>● Quality Assurance of cases and paperwork presented to Adoption and Fostering Panel</li> <li>● Feedback forms completed by Adoption and Fostering Panel after each panel</li> <li>● Bi monthly Feedback from Adoption and Fostering Chair</li> </ul>	<ul style="list-style-type: none"> <li>● Number of carers/adaptors approved</li> <li>● Approval of carers in line with legislation and statutory guidance</li> <li>● Reduction of cases requiring further presentation due to omissions or quality</li> </ul>
5.5	Improve the function and process of family finding within the service	Service Manager Children's Resources	Mar 15	Sep 15	<ul style="list-style-type: none"> <li>● Recruitment of 2 interim HCL workers</li> <li>● Proposal of new team structure, staffing ratio and associated cost to meet demand</li> <li>● Review of the family finding process and permanency planning meeting</li> </ul>	<ul style="list-style-type: none"> <li>● Length of time children wait for permanent placement</li> <li>● ICS/Performance Intelligence Team monthly data</li> <li>● Scrutiny of monthly data by Performance subgroup</li> </ul>	<ul style="list-style-type: none"> <li>● Reduction of time and number and of children waiting for permanent carers</li> <li>● Timeliness of achieving permanent placement for LAC</li> <li>● Reduction in placement breakdowns</li> </ul>

5.6	Development of LBH foster carers to meet the diverse needs and challenges of LAC	Service Manager Children's Resources	Start of new team structure	6 months from start	<ul style="list-style-type: none"> <li>● Team structure and throughput evaluated against other projects and operating models for future service delivery</li> <li>● Analysis of past and predicted numbers entering the service area</li> <li>● Proposal of new team structure, staffing ratio and associated cost to meet demand</li> </ul>	<ul style="list-style-type: none"> <li>● Recruitment and retention of foster carers for older LAC/LAC with complex needs</li> </ul>	<ul style="list-style-type: none"> <li>● Percent of LAC with complex needs placed with LBH-carers 20 mile radius</li> <li>● Percentage of unplanned placement moves for LAC</li> </ul>
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## Work stream 6: Embedding new ways of working and improved practice management arrangements

Action / Process						Improvement Targets and Outcomes	
Ref	Action	Lead Asst Director Children's Social Care	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
6.1	Support better outcomes by aligning the staffing model with expected demand	AD Children's Social Care	April 2015	Sept 2015	<p>Work completed on the the expected demand across the children's pathway. Extra demand is being met by the implementation of a 'managed service' for the provision of assessment teams.</p> <p>Regular weekly management monitoring arrangements are in place and resulting in service improvements.</p>	<p>Monitor effectiveness of the 'managed service' model.</p> <p>Baseline</p> <ul style="list-style-type: none"> <li>• Rate of assessments per 10,000 of the CYP population</li> <li>• Rate of section 47 enquiries per 110,000 of the CYP population</li> <li>• % of referrals leading to the provision of a social care service (as defined by the child becoming a child in need)</li> </ul>	

						<ul style="list-style-type: none"> <li>• 100% allocation of all statutory cases</li> <li>• 100% meet all statutory performance measures for LAC, CP and CiN cases</li> </ul>	
6.2	Support best practice by ensuring caseloads are stable and balanced	AD Children's Social Care	April 2015	Ongoing	<p>Increased capacity added through 'managed service' models and sustained interim staffing.</p> <p>Practice improvements have led to closure of all backlog work and cases open without a plan for more than 6 weeks.</p> <p>Caseloads are currently within the target average range (17) and monitored as part of weekly performance management of the service.</p>	<p>Average caseload for qualified social workers = 18</p> <p>Newly qualified social workers = 12</p>	
6.3	Ensure good management oversight and support of practice by implementing a flatter team	AD Children's Social Care	May 2015	June 2015	To deliver clearer accountability by expanding the number of team managers with small (maximum 6) teams of social workers.	Measurement of management oversight through supervision and audit activity.	

	management structure				Business case completed and submitted to the Leader end March 2015.	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	
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	May 2015	Mar 2016	Introduce new advanced practitioner role to children's social work teams structure.  This forms part of the overall business case submitted to the leader end March 2015	Improved social work practice. 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	
6.5	Invest in staff professional development and	AD Children's Safeguarding	April 2015	April 2016	Implement Service Training and Development Plan. Actions underway to ensure all staff	100% qualified social workers have IDPs appropriate to the	

	clearer alignment with service requirements				have individual training plans (IDP) appropriate for the requirements of their roles and responsibilities within the service.	requirements of their job. 100% of qualified social workers have completed their PADA	
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	April 2015	On-going	There are regular whole service communication events held to outline key changes and planning within the service.  All Service Managers hold regular meetings with all staff in their service to explain in detail changes and improvement action.  All staff encouraged to participate in staff survey.	Quarterly whole service events held  Regular attendance of staff at Service Management meetings  50% response rate to all staff survey from Children's Services	

## Work stream 7: Effective Quality Assurance

Action / Process					Improvement Targets and Outcomes		
Ref	Action	Lead AD Children's Social Care	Start Date	End Date	Progress - Actions	Performance Measures and Milestones	Progress – Outcomes and Key Targets
7.1	Implementation of new Quality Assurance Framework and Audit Programme to embed 'good' standards of practice	AD Children's Safeguarding	Apr 2015	Sep 2015	Quality Assurance Framework signed off and launched 1 April 2015  Audit Programme for 2015/2016 launched 1 April 2015.	Percentage of work judged good or better - 35% by the end of March 2015 - 50% by the end of September 2015 - 80% March 2016  Monthly Quality Assurance findings will drive improvement across the service developing clear action plans.	'Good' standard of practice evidenced and sustained across the service.
7.2	Launch new Practice Standards	AD Children's Safeguarding	Apr 2015	June 2015	New Practice Standards for: <ul style="list-style-type: none"> <li>• Referral and Assessment</li> <li>• Child Protection Plans</li> <li>• Visits to Children</li> <li>• Care Planning</li> </ul>	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.

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

				<p>supervision and the voice of the child.</p> <p>Bi-monthly thematic audits completed using bespoke audit methodology and electronic audit tool.</p> <p><i>Residual actions from Ofsted Improvement Plan:</i></p> <ul style="list-style-type: none"> <li>● Milestones for audited assessments achieving 'good' standards set at 90% Sept 2014 and 100% March 2015. Milestones revised as of April 2015: <ul style="list-style-type: none"> <li>○ March 15 - 35%</li> <li>○ Sept 15 - 50%</li> <li>○ March 16 - 80</li> </ul> </li> <li>● Milestones for plans audited which were SMART and evidenced risk management ('graded 'good') set at 60% Oct 14, 75% March 15 and 100% Sept 15. Milestones revised March 2015</li> </ul>	<p>By April 2016 100% of themes audits are completed as programmed</p> <p>Monitored at monthly Quality Assurance meetings</p>	
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					<ul style="list-style-type: none"> <li>• Thematic audit of SMART plans scheduled for October 2014 was not completed and will be picked up in the electronic audit form every month</li> <li>• Thematic supervision audit scheduled for September 2014 will be completed in March 2015 with ongoing audit of supervision every month (electronic audit form) and through supervision survey (July 2015)</li> </ul>		
7.4	Ensure a robust Reviewing Service that quality assures consistently promoting good practice and challenging practice areas that require improvements	AD Children's Safeguarding	Apr 2015	Sep 2015	<p>Implement Dispute Resolution Process with appropriate outcomes achieved in relevant timescales</p> <p>Implement midpoint reviews for care plans.</p>	<p>Dispute Resolution Tracker reviews at monthly quality assurance meetings</p> <p>100% Looked After Children will have a mid-point review by July 2015.</p>	Improved outcomes for Looked After Children.



7.5	Launch CSE strategy and Missing Person and Runaway Protocol	AD Children's Safeguarding	Jan 2015	Sep 2015	Launch CSE strategy and Missing Person and Runaway Protocol April 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 September 2015.	A CSE strategy that will enable all professionals to develop confidence and practice when identifying and responding to CSE concerns.
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	AD Children's Safeguarding	Sep 2015	Oct 2015	Structured Review of performance (six monthly) - making the link with Team Practice and Service Improvement.	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.
7.7	Through child's journey it is evident that their views are considered in all	AD Children's Safeguarding	Jan 2015	Sep 2015	Re-launch Viewpoint  Track children and young people's participation in LAC	Viewpoint will see increased response to completing and evidencing child's views	To ensure all plans and social work interventions consider the child's voice and include their views in decision making.

	aspects of decision making				<p>Reviews and Child Protection Conferences.</p> <p><i>Residual actions from Ofsted Improvement Plan:</i></p> <ul style="list-style-type: none"> <li>• Milestones for plans evidencing the voice of the child as 'good' set at 80% Sept 14, 90% Dec 14 and 100% March 15. Milestones revised</li> </ul>	<p>Audits of care plans and Child Protection Plans evidence the child's voice in decision making.</p> <p>Milestones: 60% May 15 80% July 15 100% Sept 15</p>	
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