



Report Title:	Progress update on the Ofsted Children's Services Improvement Plan
Contains Confidential or Exempt Information	No - Part I
Cabinet Member:	Councillor Carroll, Deputy Chairman of Cabinet, Cabinet Member for Adult Social Care, Children's Services, Health and Mental Health
Meeting and Date:	Adults, Children and Health Overview and Scrutiny Panel – 22 September 2021
Responsible Officer(s):	Lin Ferguson, Director of Social Care and Early Help (Achieving for Children)
Wards affected:	All

## **REPORT SUMMARY**

The Ofsted ILACS inspection of Achieving for Children (Royal Borough of Windsor and Maidenhead) took place between 13-24 January 2020 and the final report formally setting out the findings was published on 24 February 2020. The inspection judged services in Windsor and Maidenhead to be 'Good' overall. This judgement was consistent with our self-evaluation submitted to OFSTED as part of the new inspection framework pre-inspection activity.

An Improvement Plan was developed in response to the 5 key recommendations from the Ofsted report findings:

- The attendance of Community Health colleagues at Strategy Meetings.
- The provision of accurate health passports to Care Leavers
- Support for Care Leavers, to include ensuring that their voices are heard both in developing the service and in their Pathway Plans, as well as guidance when they are not in education, employment or training and practical advice and preparation for adulthood.
- The quality and consistency of recording.
- The stability of the workforce to reduce the number of changes of social workers for children.

The Improvement Plan has been monitored on a quarterly basis since February 2020 and this report provides panel members with a progress update in relation to these 5 key areas.

### **1. DETAILS OF RECOMMENDATION(S)**

**RECOMMENDATION: That Adults, Children and Health Overview and Scrutiny Panel notes the report and:**

- i) **Notes the progress made to implement the recommendations made by Ofsted in February 2020.**

## 2. REASON(S) FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED

### Options

**Table 1: Options arising from this report**

Option	Comments
Note the progress made to implement the recommendations following the 2020 Ofsted ILACS Inspection. <b>This is the recommended option</b>	This is the recommended option to ensure the Ofsted recommendations are being implemented.
Do nothing	This is not recommended as the Overview and Scrutiny Panel has been asked to note the progress made to ensure the Ofsted recommendations are implemented.

- 2.1 The Ofsted Improvement Plan is a high level plan that sets out the progress that Achieving for Children and partners have made against the 5 key recommendations from the 2020 Ofsted ILACS Inspection, with the ambition of achieving outstanding services for children, young people and families. The Improvement Plan is reviewed on a quarterly basis and each area of activity is 'rag' rated so that we know where professional energy needs to be focused. The updated 2021/2022 Ofsted Improvement Plan can be found in Appendix 1.
- 2.2 The Ofsted Improvement Plan forms just part of a wider programme of improvement for Children's Services that the Council and Achieving for Children is embarking upon. The strategic plan is to deliver real transformation that delivers improved outcomes for our most vulnerable children and young people, built upon the foundation of a sustainable care system.
- 2.3 Within weeks of the 2020 Ofsted Inspection, the country went into lockdown due to the Coronavirus pandemic. Energies had to be focused on ensuring the safety and welfare of vulnerable children, young people and families and a new way of working had to be implemented at pace. The challenges of the first few months of lockdown had an impact on the progress that could realistically be made on progressing the Ofsted Improvement Plan. However, despite these challenges, the Improvement Plan demonstrates the substantial progress that has been made in relation to a number of the recommendations, but also highlights the recommendations that require further attention.
- 2.4 **Recommendation 1** is focused on improving the attendance of community health colleagues at Strategy Meetings. Strategy Meetings are designed to determine the relevant child's safety and welfare and to plan rapid future action if there is reasonable cause to suspect that a child is suffering or is likely to suffer significant harm. By their very nature, Strategy Meetings have to be convened quickly so that safeguarding decisions can be made. Working Together 2018 makes it clear that as a minimum, Strategy Meetings must involve Children's Social Care, the police and health. Ofsted was of the view that health attendance at these meetings was sporadic and needed to improve.

- 2.5 A newly implemented tracking system in early 2020 evidenced that health attendance at Strategy Meetings was improving. However, during the pandemic, health colleagues were diverted to other tasks and health attendance at Strategy Meetings reduced to 26% as a result. The importance of health attendance at Strategy Meetings has been discussed with senior health colleagues and is overseen and closely monitored by the multi-agency MASH Governance Board. This challenge and scrutiny has seen health attendance increase to 45%. Whilst attendance is going in the right direction, there is still more work to do. The MASH Governance Board has set an expectation of 70% attendance by the end of Q2 2021/22. The ambition is to get to 95% by Q4 2021/22. There is a good level of assurance that this target can be achieved now that health colleagues have been released back to their substantive roles.
- 2.6 **Recommendation 2** is focused on improving the provision of accurate health passports to Care Leavers. When young people leave care and become Care Leavers, they are entitled to receive their health passports. Health passports are small, personalised booklets that contain information about a young person's birth details, immunisation history and other key information about their health and how to access help and support if/when required. Immediately after the Ofsted Inspection in early 2020, the Children in Care Nurse, in collaboration with young people, redesigned the process for young people receiving their health passports. As a result, 100% of young people leaving care now receive their health passports at the appropriate time and that these are of good quality. The Performance Board will review and monitor this going forward in order to ensure that this high performance is sustained.
- 2.7 **Recommendation 3** is focused on support for Care Leavers, including ensuring that their voices are heard both in developing the service and in their Pathway Plans, as well as guidance when they are not in education, employment or training and practical advice and preparation for adulthood. Despite the pandemic, significant demonstrable process has been made in relation to how our Care Leavers are supported:
- A dedicated Corporate Parenting Service for Children in Care and Care Leavers was implemented in June 2020. Children, young people and staff have given good feedback on the impact of the new service. Staff are able to develop expertise in this area and focus solely on Children in Care and Care Leavers without any competing demands. The staff group is long standing and affords Children in Care and Care Leavers the stability of workforce that they require. The service comprises Social Workers and Personal Advisers. When a Child in Care turns 16, he/she is introduced to a Personal Adviser (PA) and the PA works alongside the Social Worker until the young person reaches the age of 18. Once a young person turns 18, the allocated PA will become their key worker and the social worker will end their involvement. The PA will support a Care Leaver until they are 25. A PA supports young people to prepare for independent living and to offer associated advice and support on all aspects of preparing for adulthood.
  - Creation of a further Personal Adviser post, to focus on hard to reach Care Leavers and those Care Leavers between the ages of 21-25 who return for support.
  - A new Pathway Plan and process was co-produced with Care Leavers and implemented in Q2 of 2020. A Pathway Plan is a written plan, co-produced with young people, that highlights how young people are going to be

supported and prepared for adulthood. It is essential that young people 'own' their Pathway Plan and actively contribute to it. A dip sample undertaken in February 2021 concluded that 75% of Pathway Plans were judged to be good or better, with the voice of young people clearly heard and recorded, including their identity and diversity needs. The target for Q2 and 3 of 2021/22 is to reach a target of 90%.

- Care Leavers now have a Care Leavers Forum, supported by relevant staff, that meets on a monthly basis. Care Leavers have supported the development of a number of key service improvements related to pathway planning.
- An annual survey, to seek the views of Children In Care and Care Leavers on service design and delivery and the introduction of an electronic feedback system has been well received by young people.
- The practice of young people chairing their own meetings has not progressed in the way that was anticipated. This is because it would have been inappropriate to expect young people to start doing this on a virtual platform. However, despite the pandemic, some more confident young people have co-chaired their own meetings. This initiative will be fully implemented by Q4 of 2021/22.
- An Independent Life Skills programme, led by our Youth Workers, is now established. This includes both individual and group mentoring and coaching sessions for Care Leavers on a range of 'preparing for adulthood' topics such as budgeting and healthy relationships.
- The Virtual College, an arm of our Virtual School, was established in 2020 and is led by an enthusiastic Assistant Headteacher. The Virtual School and Virtual College have the responsibility for ensuring that the educational needs of Children in Care and Care Leavers are championed and prioritised. Termly meetings, chaired by the Headteacher of the Virtual School, track individual young people in order to ensure that they have access to appropriate education, employment and training opportunities. An Executive Board has been set up to champion opportunities for our Care Leavers, including apprenticeships. This Board is also chaired by the Headteacher of the Virtual School and comprises representatives from universities, colleges and local businesses. One of the top priorities of this Board is to increase the number of Care Leavers accessing apprenticeships. The number of Care Leavers not in education, employment or training (NEET) has significantly reduced since the inception of the Virtual College. 11% of young people aged between 16-18 are currently Neet, which is significantly below the national average of 28.5% (a reduction of 20% since September 2020). The percentage of Care Leavers 18+ who are currently Neet is 27%, which is also below the national average of 40% (a reduction of 26% since October 2021).

2.8 **Recommendation 4** is focused on improving the quality and consistency of recording. It is essential that children and young people are able to access accurate and full records of the intervention they have received from professionals within Children's Social Care. Despite the challenges of the pandemic, significant work has taken place with front line staff to improve the consistency and quality of recording. The 'recording project' was launched in September 2020; delayed slightly due to the immediate needs arising from the pandemic. A series of mandatory recording workshops written specifically by an expert in the field, Ted Daszkiewicz, was launched in September 2020, with 107 staff attending. This was followed up with further workshops, where a further 80 staff attended. There are 3 further sessions planned for October 2021. These workshops cover a range of

recording expectations including the principles of good recording, writing effective reports, evidence-based recording and 'family centred' language. Targeted individual and group sessions on recording have also been undertaken.

- 2.9 In order to understand the impact that the above focused work has had on the quality and consistency of recording, we have been regularly auditing the quality of recording and our quarterly quality assurance reports are evidencing an improvement. A scaling question specifically on the quality of recording is being added to our case auditing tools. There is further quality assurance work planned over the next 6 months in order to ensure that the training and developmental work continues to have an impact. An AfC workshop is also scheduled with the purpose of updating our recording Policy and Guidance. A practitioner event will follow in order to launch these key documents. The recording workshops have also been supplemented by training in specific areas, for example, how to write good court statements. It is important that modern ICT is in place in order to support effective recording. The current recording system, Paris, is not user friendly and is clunky to use. Work is currently underway to potentially replace Paris with a new, more modern system.
- 2.10 **Recommendation 5** is focused on the recruitment and retention of Social Workers, with the aim of improving the stability of the workforce in order to reduce the number of changes of Social Workers for children and young people. This remains a significant challenge for The Royal Borough of Windsor and Maidenhead. Senior Leaders and Elected Members have a responsibility to ensure that children's Social Workers are equipped to build and sustain meaningful and enduring relationships with children, young people and families in order to support the creation of positive change and improve outcomes.
- 2.11 The best environment in which Social Workers flourish is when they have manageable caseloads, high quality supervision and support and access to good training and developmental opportunities, all under the umbrella of a robust Recruitment and Retention Strategy. This can be a very stressful and challenging area of work and it is therefore essential that the conditions are in place so that Social Workers can undertake their job to the best of their ability whilst also wanting to remain within our organisation.
- 2.12 High caseloads affect the ability of Social Workers to provide consistently high levels of care and support to children, young people and families. Vacancy gaps mean that Social Workers often have to carry higher caseloads than they should and in turn they feel that they cannot do their job to the best of their ability and they leave; thus creating instability for families and increasing the need to bring in expensive agency Social Workers. Social Workers are clear that they would not choose to join a local authority with known high caseloads. A recent Unison survey concluded that 56% of Social Workers attributed their stress to ongoing staff shortages and associated higher caseloads.
- 2.13 A national shortage of Social Workers willing to commit to permanent social work roles means that most local authorities have to rely on agency Social Workers. Agency Social Workers are not only very expensive (on average three times more than a permanent Social Worker), but they can leave a local authority with the minimum amount of notice, thus adding to the instability. A tight labour market with a limited pool of qualified Social Workers has a knock-on effect on an

organisation's ability to attract and retain staff, leading to pay competition across the sector.

- 2.14 Nationally, in addition, the pandemic has resulted in many local authorities struggling to meet increasing workload demands. A recent study by Community Care Inform concluded that 74% of Social Workers have seen their caseloads increase during the pandemic compared to the year before, with 79% reporting an increase in complexity (December 2020).
- 2.15 Benchmarking data shows that Social Workers in The Royal Borough of Windsor and Maidenhead have higher caseloads than many of their statistical neighbours. Social Workers working in our 'Support and Safeguarding Service' have average caseloads in excess of 20, which is significantly higher than the national average of 16.9.
- 2.16 In March 2021, the Royal Borough of Windsor and Maidenhead reported a vacancy rate of 36%; more than double the national average of 16.4% and as of 31 March 2021, we had 25 agency Social Workers covering permanent Social Work vacancies, with a staff turnover of 14.18%.
- 2.17 Social Workers and their managers in The Royal Borough of Windsor and Maidenhead, like many other local authorities, have reported an increase in demand and complexity since the start of the pandemic, with an increase in domestic abuse, young people presenting with emotional wellbeing challenges and families presenting in crisis. Cin Census data demonstrates the increase in demand within Windsor and Maidenhead since 2018:
- The number of children open to Children's Social Care throughout the year was 1711 (2018/19); 1883 (2019/20) and 2074 in 2020/21.
  - The number of referrals in the year was 1135 (2018/19); 1356 (2019/20) and 1481 in 2020/21.
  - The number of Child Protection Investigations (s47) instigated was 522 (2018/19); 597 (2019/20) and 643 in 2020/21.
  - The total number of children becoming subject of a Child Protection Plan in a year was 92 (2018/19); 213 (2019/20) and 228 in 2020/21.
  - The number of Children in Care in July 2021 was 133 compared with 118 in June 2020.
- 2.18 There is a risk that if the status quo remains, the current working conditions for children's Social Workers in The Royal Borough of Windsor and Maidenhead will mean that the significant recruitment and retention challenges will continue, thus we will be unable to improve the Ofsted recommendation of having a stable workforce of Social Workers. Most importantly, children, young people and families will not have the professional stability that they require. A recent scoping exercise has concluded that we would need an additional 14 Social Workers in order to get social work caseloads to nationally average levels.
- 2.19 A provisional Workforce Strategy spanning the next 3 years is currently out for consultation with staff. The principles that underpin this strategy are:
- A fundamental low caseload design
  - Sufficient management capacity for supervision and project work
  - Prioritisation of permanent recruitment ahead of agency use
  - Consistent terms and conditions

- Capacity building with newly qualified Social Workers (AYSEs) and ‘supernumerary’ roles
- Extended career pathway for professional development.

2.20 Despite the challenges of the pandemic, significant positive progress has been made against a number of the key Ofsted recommendations. Where progress is not where we would like it to be, this report has highlighted the challenges and the plans in place to address these elements.

### 3. KEY IMPLICATIONS

3.1 It is difficult to measure progress against the key Ofsted recommendations in terms of ‘met’ or ‘unmet’. Progress is ongoing and measured in relation to impact on children, young people and families over time.

### 4. FINANCIAL DETAILS / VALUE FOR MONEY

4.1 There are no financial implications arising from this report.

4.2 Decisions that the Council make in the future to support vulnerable children, young

4.2 Decisions that the Council make in the future to support vulnerable children, young people and families may have a financial impact.

### 5. LEGAL IMPLICATIONS

5.1 There are no legal implications arising from this report.

### 6. RISK MANAGEMENT

**Table 3: Impact of risk and mitigation**

<b>Risk</b>	<b>Level of uncontrolled risk</b>	<b>Controls</b>	<b>Level of controlled risk</b>
Failure to deliver progress against the recommendations from the Ofsted Improvement Plan.	MEDIUM	Robust management and monitoring through the Performance Board, Corporate Parenting Forum, Commissioning , AfC Board and Overview and Scrutiny Panel	LOW

## 7. POTENTIAL IMPACTS

- a. Equalities. The recommendation in this report does not change the existing Equality Impact Assessments that are in place within Children's Services.
- b. Climate change/sustainability. There are no climate / environmental impacts associated with this report.
- c. Data Protection/GDPR. No personal data is being processed and a Data Protection Impact Assessment is not required.

## 8. CONSULTATION

8.1 Relevant staff have been consulted in the formulation and review of the Ofsted Improvement Plan.

## 9. TIMETABLE FOR IMPLEMENTATION

**Table 4: Implementation timetable**

Date	Details
Quarterly review	Review at OSMT meetings.

## 10. APPENDICES

10.1 This report is supported by 1 appendix:

- Achieving for Children Ofsted Improvement Plan; last updated July 2021.

## 11. BACKGROUND DOCUMENTS

11.1 This report is not supported by any background documents:

## 12. CONSULTATION

Name of consultee	Post held	Date sent	Date returned
Kevin McDaniel	Executive Director of Children's Services	3/11/2021	

Cllr Carroll	Deputy Chairman of Cabinet, Cabinet Member for Adult Social	Yes	
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	Care, Children's Services, Health and Mental Health	
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### 13. REPORT HISTORY

<b>Decision type:</b>	<b>Urgency item?</b>	<b>To follow item?</b>
N/A	N/A	N/A

Report Author: Lin Ferguson, Director of Social Care and Early Help, 07799866594
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## **Achieving For Children (RBWM)**

**Report Name:** Ofsted Improvement Plan

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## 1. Introduction (2021-22)

The Ofsted ILACS inspection of Achieving for Children (Royal Borough of Windsor and Maidenhead) took place between 13-24 January 2020 and the final report formally setting out the findings was published on 24 February 2020. The inspection judged services in Windsor and Maidenhead to be 'Good' overall. This judgement was consistent with our self-evaluation submitted to OFSTED as part of the new inspection framework pre-inspection activity.

This Ofsted Improvement Plan was developed in response to the 4 specific recommendations from the Ofsted report findings in early 2020. **It has now been updated for the year 2021-22.** This high level plan sets out the key actions that Windsor and Maidenhead will be taking over the next year (**2021-22**) to address those recommendations, with a view to continuing to improve outcomes for children, young people and families, particularly in relation to Children in Care and Care Leavers. It also highlights progress made. This plan is part of our **Strategic Improvement Plan** and sits alongside our **Quality Improvement Plan (QIP)** and our **Service Improvement Plans**. This plan also includes other areas for improvement outlined in the Ofsted report, but were not specific Ofsted recommendations.

Our ambition is to deliver outstanding services to our children, young people and families.

This high-level plan sets out the key actions we will take over the next 12 months to address those recommendations and areas for improvement and to ensure that outcomes improve for vulnerable children, young people and families in the Royal Borough of Windsor and Maidenhead (AFC). Ultimately we aim to deliver consistently good services for children, young people and their families and our ambition is to be outstanding by the time of our next inspection. This plan forms just part of a wider programme of improvement for Children's Services that the Council and (AFC) is embarking upon. The Children's Improvement Programme, described in this document, sets out our intentions for improvement beyond simply responding to inspection recommendations. Our plan is to deliver real transformation that delivers improved outcomes for our most vulnerable children and young people built upon the foundation of a sustainable care system.

## 2. Feedback from Ofsted inspection

### What Ofsted said is working well

- The large majority of children now benefit from interventions that improve their quality of life.
- Learning from audits.
- Management oversight is now implemented well.
- Early help services are a real strength.
- A prompt and proportionate response to contacts and referrals, both during and out of office hours.
- Children, including those with disabilities, benefit from timely and appropriate child protection enquiries that are based on coherent risk assessment.
- Agencies share information effectively.
- When an assessment is needed, it is allocated promptly and children are seen quickly.
- Persistent efforts are made to engage fathers.
- There are strong interventions available to all family members where domestic abuse is a concern.
- The quality of pre-proceedings and care proceedings has improved.
- All missing children are offered RHIs and they are timely in the large majority of cases.
- The relationship with Adopt Thames Valley is working well.
- Most social workers convey a strong understanding and knowledge of the children they work with.
- Inspectors were impressed by the esteem group.
- Work with families who choose to educate their children at home has been strengthened.
- The majority of children enter care appropriately.
- Permanency options are considered at an early age.
- The large majority of CiC live in safe, secure and stable homes that meet their needs.
- Many children benefit from effective care plans.
- Children in RBWM have a strong voice.
- The Virtual School has strengthened provision for CiC.
- Increase in the number of Care Leavers engaged in good employment and education options.

### What Ofsted said need to improve

- In strategy meetings community health partners are not always present.
- Formal records of meetings do not always accurately show who participated in the strategy meetings or Child Protection Conferences.
- The preferred social work model is used well in most, but not all cases.
- The use of the assessment template to record the update does not help families to measure their progress against the objectives of the plan.
- In some cases, CIN plans lack clarity and the actions and the measurement of progress are more variable.
- Significant staff turnover impacts the building of meaningful relationships.
- The recording of RHIs is variable.
- For some children, records of formally matching them to long term foster families and the rationale for the choice of residential home is not always available.
- Life Story work is inconsistent and Child Permanence Reports are variable.
- CiC Reviews are timely, but not always of consistent quality.
- Issues of diversity are not always met in plans for CiC.
- The participation of Care Leavers is not yet established, or life skills workshops.
- CiC at a distance do not always have timely RHIs.
- Health passports are not consistently given to Care Leavers.
- SDQs are applied inconsistently.
- Pathway Plans vary in quality and Care Leavers are not always involved in the completion of them.
- Inconsistent approach to maintaining contact with vulnerable, disengaged Care Leavers.
- Resources across AfC to support Care Leavers in EET not yet being used.
- Work to do to strengthen commissioning arrangements.

- Leaders and managers are committed to improving outcomes for children.
- Leaders and managers know their service very well.
- Staff are positive about working in RBWM.

### 3. Recommendations from the Ofsted inspection

1 The attendance of community health colleagues at strategy meetings and the provision of accurate health passports to Care Leavers
2 Support for Care Leavers, to include ensuring that their voices are heard, both in developing the service and in their pathway plans, as well as guidance when they are not in education, employment or training and practical advice and preparation for adulthood.
3 The quality and consistency of recording
4 The stability of the workforce to reduce the number of changes of social worker for children

## 4. Ofsted Improvement Plan

### 2. Progress tracker

All actions in this Learning and Improvement Plan are RAG-rated. A key to the RAG-rating system is below. The actions are monitored at OSMT and the plan will be updated quarterly. This plan was made in June 2020 following our Ofsted Inspection. The plan is updated at the end of every reporting quarter. The next full review is due in October 2020.

RAG RATING KEY							
<b>RED</b>	The action has not yet started or there is significant delay in implementation. The action must be prioritised to bring it back on track to deliver improvement.	<b>AMBER</b>	The action has started but there is some delay in implementation. The action must be monitored to ensure the required improvement is delivered.	<b>LIGHT GREEN</b>	The action is on track to be completed by the agreed date. Evidence is required to show that the improvement has been embedded and sustained.	<b>GREEN</b>	The action has been completed and there is evidence that the improvement has been embedded and sustained.

### 3. Ofsted Recommendation 1.

The attendance of community health colleagues at strategy meetings and the provision of accurate health passports to Care Leavers

No	Description	Lead	By when	Outcomes/Success	Progress and RAG Rating Q1 2021/22	Progress and RAG Rating Q2 2021/22	Progress and RAG Rating Q3 2021/22	Progress and RAG Rating Q4 2021/22
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				measures (how do we know we are making progress)				
1.1	Community health colleagues to attend Strategy Meetings as a matter of course and to send relevant information in exceptional situations, if attendance is not possible.	<i>Marie Peters AD</i>	<i>-Dec 2021</i>	<p>To ensure that key health information is shared at this critical initial stage and that full multi-agency planning can take place.</p> <p><b>Target health attendance - 70% Q2 and 95% by Q4</b></p>	<p>Attendance at Strategy Meetings by health has improved in Q1 2021/22. This currently sits at around 45%; a 20% improvement. However this is still not good enough. It was identified that some invites were being sent to the wrong in-box and this has now been rectified. Health staff who were redirected during the pandemic are now back in their substantive posts This is on every SPA/MASH Governance Board agenda and scrutinised at the monthly Performance Board. A tracker is in place.</p>			<b>The update for Q2 will be completed in September 2021.</b>
1.2	The provision of accurate health passports to Care Leavers. Regular audit activity takes place to ensure that	<i>Jenny Gordon CiC Nurse</i>	<i>-Dec 2021</i>	<p>To enable and promote care leavers to enjoy a good state of both emotional and physical health.</p>	<p>There is high assurance that 100% of CiC turning 18 are now sent their health passports. However the CiC Nurse has just started to collect their views this quarter, due to being redirected during the pandemic.</p>			<b>The update for Q2 will be completed in September 2021.</b>

	<p>the improvements in health histories and health passports are embedded and sustained and that young people give their feedback as part of this.</p>			<p>To identify an effective care plan that meets their holistic needs.</p> <p><b>100% of young people receiving their health passports prior to their 18th birthday and young people providing positive feedback on the usefulness of their health passports</b></p>	<p>This should be available by Q3 2021.</p>			
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#### 4. Ofsted Recommendation 2

Support for care leavers, to include ensuring that their voices are heard, both in developing the service and in their pathway plans, as well as guidance when they are not in education, employment and training, and practical advice and preparation for adulthood.

No	Description	Lead	By when	Outcomes/Success measures (how do we know we are making progress)	Progress Q1 2021/22	Progress Q2 2021/22	Progress Q3 2021/22	Progress Q4 2021/22
2.1	All care leavers to be fully involved in the completion and review of their Pathway Plan, so that they 'own it'. We need to see consistently good quality Pathway Plans.	<i>Marie Bell Associate Director and Shungu Chigocha AD QA</i>	<i>Quality Audit to take place in Sept 2021 and quarterly thereafter with updates to the Perf Board</i>	Evidence that care leavers are fully involved in the completion and review of their Pathway Plans (their 'voice' should be clearly articulated in their own words) and that the Plans are SMART and of consistently good quality. <b>Target for Q3 - 90%</b>	Dip Sample undertaken in February 2021 concluded that 75% of Pathway Plans were judged to be good or better, with the voice of the young person clearly evidenced. However this will remain light green until we reach 90%.  Care Leavers co-designed the new Pathway Planning document.	<b>The update for Q2 will be completed in September 2021.</b>		
2.2	Pathway Plans should consistently include details about identity and diversity.	<i>Marie Bell Associate Director. Shungu Chigocha AD QA</i>	<i>Quality Audit to take place in Sep 2021 and quarterly thereafter</i>	The young person's voice to be evident within the Pathway Plans, with clear evidence of issues of identity and	76% of Pathway Plans audited this quarter included details about identity and diversity. There is now a specific	<b>The update for Q2 will be completed in September 2021.</b>		

			<i>with updates to the Perf Board.</i>	diversity included.  <b>Target for Q3 - 90%</b>	question about this in our Impact Audit Proformas. This will remain light green until we get to 90%			
<b>2.3</b>	It is the ambition of AfC (RBWM) that care leavers chair their own Pathway Reviews when this is appropriate and in their best interests.	<i>Marie Bell AD and Elaine Keating PO</i>	<i>Aiming for improved numbers by Dec 2021 review.</i>	<b>We would like to see 20% of care leavers chairing their own Pathway Reviews/other meetings.</b> Our target will then aim to be increased. Care leavers will be confident to lead their Pathway Reviews, with support from involved professionals.	The IRS and the Youth Engagement Officer have drafted a plan to take this forward in Q2 and 3 of 2021. It would not be appropriate to have started this initiative with young people on a virtual platform. However in 2020/21, a small number of more confident young people have co-chaired their meetings. However, light green as a plan is in place.	<b>The update for Q2 will be completed in September 2021.</b>		
<b>2.4</b>	Care Leavers have a place to share their views and be part of service design and development and this to be sustained.	<i>Elaine Keating PO</i>	<i>Review Q3 2021/22</i>	<b>Evidence of Care Leavers Forum being actively involved in service design and delivery initiatives. Forum to take place every month</b>	<b>Good progress has been made. Care Leavers Forum is in place and it has been actively involved in new practice initiatives eg design of new Pathway Plan and process.</b>	<b>The update for Q2 will be completed in September 2021.</b>		
<b>2.5</b>	Development of an Independent,	<i>Danny Gomm</i>	<i>Review Q3 2021/22</i>	<b>Project is able to evidence young people with</b>	Good progress being made. In place and various cohorts of young	<b>The update for Q2 will be completed in September 2021.</b>		

	preparing for adulthood project			<b>improved independence skills.</b>	people have benefitted. Review needed in Q3 2021/22			
<b>2.6</b>	New multi-agency 'NEET' tracking meeting, chaired by the Headteacher of the Virtual School to meet on a half-termly basis, with dedicated work in between meetings, to reduce the number of NEETs	<i>Suzanne Parrott, HT, Virtual School</i>	<i>Termly tracking and updating the monthly P Board.</i>	Increase in the proportion of care leavers in education, employment or training.	In the Spring Term 2021 we have established Executive Boards to champion Care Leavers within the Community. This involves decision makers from Colleges; University and Business. Tracking meetings are demonstrating impact. NEETS (16-18) are at 11% (significantly below the national average of 28.5%) and NEETS (18+) 28% (well below the national average of 40%). Improvements noted in the last 10 months and demonstrates excellent co-working between Social Care and the Virtual School.	<b>The update for Q2 will be completed in September 2021.</b>		
<b>2.7</b>	The AfC Virtual College to be embedded, with improved support provided for Post 16 and deeper connections made with	<i>Suzanne Parrott Virtual School HT and new Assistant Head Teacher for Post 16.</i>	<i>January 2021</i>	There are pathways in place from KS4 onwards to supporting students robustly into EET. A Virtual College approach is introduced and led by an	Spring Term: Embedding initiatives set out in the Virtual College Action Plan. NEET figures are improving. Recruited a Post 16 Outreach worker. Secured the assistant	<b>The update for Q2 will be completed in September 2021.</b>		

	College and University provision, apprenticeship providers and the workplace.			Assistant Headteacher. An increase in the use of AfC resources to improve the number of young people entering traineeships and apprenticeships. <b>3 more apprenticeships to be secured for CL by Q3 2021/22</b>	headteacher of the Virtual College on a perm basis. Plan for continuing with a Careers worker next year in place.			
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**5. Ofsted Recommendation 3**  
The quality and consistency of recording.

No	Description	Lead	By when	Outcomes/Success measures (how do we know we are making progress)	Progress Q1 2021/22	Progress Q2 2021/22	Progress Q3 2021/22	Progress Q4 2021/22
3.1	Launch of a mandatory 12 month recording project for all staff.	<i>Shungu Chigocha PSW and Clare Meadow WFD</i>	<i>Sept-Nov 2021</i>	<b>By the end of the launch session, delegates will know how to:</b> Record accurate, current, comprehensive and concise information about	We launched the process in September 2020-the delay was due to the immediate needs arising from the Covid pandemic.	<b>The update for Q2 will be completed in September 2021.</b>		

				children/young people, their carers and any services provided. This will include the rationale for decisions made.			
<b>3.2</b>	As part of the recording project, mandatory <b>recording workshops</b> will take place for <b>ALL</b> staff, to address consistency of case recording, including timeliness of information that needs to be uploaded.	<i><b>Shungu Chigocha PSW and Clare Meadow WFD</b></i>	<i><b>Nov 2021.</b></i>	<p>Record keeping and case records will demonstrate an improvement through audits and dip sampling.</p> <p>Children and young people will be better able to understand their files and reasons decisions were made (journey through care)</p> <p>By the end of the course delegates will be able to:</p> <ul style="list-style-type: none"> <li>• Understand the purpose of social work and early help recording</li> <li>• Demonstrate how to plan and write effective reports for a range of required</li> </ul>	<p>107 people attended the initial recording workshops. We have followed up with a series of recording workshops which were written specifically for us by Ted Daszkiewicz - 80 colleagues have attended these to date . We have another 3 sessions coming up in October 2021</p> <p>In addition these workshops have been complemented with a series of events delivered by our legal services</p> <p>All services have been working with their staff on a 1:1 and group basis to ensure that staff are clear about the expectations of recording. The 'quality tracker' that</p>	<b>The update for Q2 will be completed in September 2021.</b>	

			<p>situations and audiences.</p> <ul style="list-style-type: none"><li>• Explore how to structure reports in a way that ensures they are logical, professional, easy to read and follow.</li><li>• Describe the principles of good recording including possible consequences of poor recording.</li><li>• Identify styles of recording including the use of family-centred language</li><li>• Ensure recording is evidence-based and free from bias and subjectivity</li><li>• Describe the common concerns identified by Ofsted in the last 3 years</li><li>• Understand how to carry out a readability assessment to ensure recording meets the target</li></ul>	<p>practitioners have to fill in prior to an Impact Audit is demonstrating that recording is improving. This information is contained in the quarterly QA reports.</p>			
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				audience/situation.				
3.3	Chair a working group to update our recording guidance/policy and hold a practitioner event to launch. This will be re launched at the next Whole service event in December 2021.	<i>Julie H</i>	<i>Dec 2021 - All Staff Event</i>	Staff will have written clarity in the policy and practice guidance on recording expectations	This is on course for Dec 2021	The update for Q2 will be completed in September 2021.		
3.4	An audit programme will test the impact of the recording workshops. Managers will have recording and learning around recording as standing items on every service or team meeting.	<i>Shungu Chigocha PSW and AD QA</i>	<i>Nov-Dec 2021</i>	Quality Assurance activity demonstrates an improvement in recording, based on the objectives from the recording workshops and work within services and teams.	Planned audit activity in place for after the project workshops to demonstrate impact. On course for completion.  To undertake and audit activity by November 2021. A brief commentary on the quality of audits to be shared at the Performance Board.	The update for Q2 will be completed in September 2021.		
3.5	Work to strengthen meeting proformas so	<i>Shungu Chigocha PSW and QIAPM.</i>	<i>Dec 2021</i>	All minutes accurately show who participated in Strategy	Proformas have now been amended so that they clearly record meeting attendees.	The update for Q2 will be completed in September 2021.		

	that minutes clearly identify who participated in Strategy Meetings or Child Protection Conferences and any other key meetings.			Meetings or Child Protection Conferences and any other key meetings.	This will be reviewed in Q3			
3.6	Formulate Practice Guidance (Spotlight Comms) for <b>chronologies</b> . This will develop the quality and effective use of chronologies. Practice Guidance and a 'lunch and learn' on completing <b>ecomaps</b> and <b>genograms</b> has already been completed. Strengthen evidence based decision making active use of chronologies.	<i>Shungu Chigocha PSW and AD QA</i>	<i>Jan 2022</i>	Evidence in QA activity of the use of chronologies and strengthened decision making in using historical information, identifying risks and making timely decisions to reduce delay in planning.	This has been partially completed and the spotlight comms has been rolled out to staff. However there is more work to do. A task and finish group is reviewing the Paris chronology to make chronologies succinct, qualitative and purposeful. There will be further audit activity in Q3/4 to measure the effectiveness and quality of chronologies, as well as having a robust system for measuring the number of up to date chronologies.  On course for delivery	<b>The update for Q2 will be completed in September 2021.</b>		

3.7	A system is now in place for closely monitoring what life story work has been completed and what is required. A process is now in place for monitoring the quality of this work, so it is consistently good. Training will be undertaken in the CiC and Care Leavers Service, along with ongoing QA work.	<i>Marie Bell AD</i>	<i>Training by the end of Sep 2021 and quarterly dip samples. Also monitored in PPs</i>	All children and young people have timely and good quality life story work that shows their life journeys.	The AD has a tracker that is used to inform her of Permanency Planning Meetings and this clearly highlights which children/young people have had this work completed, which are in progress and which need to happen and by when. We are much more confident in our knowledge around Life Story Work. A dedicated FSW is now in post. QA activity required in Q2 and 3.	The update for Q2 will be completed in September 2021.		
3.8	We are working towards ensuring that Child Permanence Reports are consistently of good quality. This will be supported by now having a dedicated CiC and Care Leavers Service,	<i>Marie Bell AD, working with ATV Gill Black</i>	<i>October 2021</i>	All Child Permanence Reports are of good quality, with positive feedback from ATV, legal reps and the Court.	This was delayed due to the Covid pandemic. ATV will be undertaking a QA exercise on CPR quality over the next quarter.	The update for Q2 will be completed in September 2021.		

	where staff can develop expertise in this area.							
<b>3.9</b>	The CiC Care Plan document to be updated so that it is more user friendly, particular for our children and young people. This will be co-produced with our CiC Council, Kickback.	<b>Marie Bell AD</b>	<b>October 2021</b>	CiC have robust care plans that they understand and own, with positive progress noted through QA activity as part of our QA planner and feedback from CiC themselves.	The new draft Care Plan has gone to be printed. Will be finalised and rolled out in Q3 2021/22.	<b>The update for Q2 will be completed in September 2021.</b>		
<b>3.10</b>	The project to redevelop the council's database system will be reviewed in light of both the recording practice and experience of the Co-vid19 pandemic to establish a system which simplifies recording and supports flexible working	<b>Kevin McD DCS</b>	<b>Review Q3 2021/22</b>	Electronic files are easy to navigate and clearly show key points in the case history.  System efficiency is increased so that any appropriately authorised staff member can update records without duplicating data recording	A Steering Group has been set up and it is anticipated that a new system will be in place by 2022/23	<b>The update for Q2 will be completed in September 2021.</b>		

	locations for all staff							
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**6. Ofsted Recommendation 4**  
 The stability of the workforce to reduce the number of changes of social workers for children.

No	Description	Lead	By when	Outcomes/Success measures (how do we know we are making)	Progress Q1 2021/22	Progress Q2 2021/22	Progress Q3 2021/22	Progress Q4 2021/22
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				progress)				
4.1	To work diligently to increase the number of new permanent social workers and staff, using a variety of methods; retain our current permanent staff group and reduce our reliance on agency social workers and other staff.	<i>Lin Ferguson Director of Social Care and Early Help</i>	<i>Review at each Workforce Board and MI Meeting  Mar 2022</i>	<p>Permanent and stable social work workforce.</p> <p>Demonstrable increase in the number of permanent social workers and other staff, reduction in agency staff and reduction in staff turnover.</p> <p>No. of permanent social workers. % of all posts vacant % filled posts agency</p> <p>Children and young people will benefit from improvements in the standard and consistency of practice by practitioners</p>	<p>Although improvements have been made, this is still our greatest priority and will remain amber until sustained progress has been made. The pandemic has significantly impacted on this work. Demand is increasing, caseloads are above the national average of 16.9, vacancy rate of 36% (more than double the national average); staff turnover 14.18%. A scoping exercise has concluded that we would need an additional 14 social workers to get to manageable caseload levels. A provisional workforce strategy is out for consultation with staff and staff are providing feedback. The principles that underpin this strategy are:</p> <ul style="list-style-type: none"> <li>● A fundamental low caseload design</li> <li>● Sufficient management capacity for supervision and project work</li> <li>● Prioritisation of permanent recruitment</li> </ul>	<b>The update for Q2 will be completed in September 2021.</b>		

				<p>in Children's Services.</p> <p>Children and their families have an opportunity to build meaningful relationships with their social worker.</p>	<p>ahead of agency use</p> <ul style="list-style-type: none"> <li>• Consistent terms and conditions</li> <li>• Capacity building with newly qualified Social Workers (AYSEs) and 'supernumerary' roles</li> <li>• Extended career pathway for professional development</li> </ul>			
4.2	<p>To have the retention of talented permanent social workers as the key priority for 2020/21 through the development of the AfC Recruitment and Retention Strategy</p>	<p><i>Gill Goouch L&amp;D Mar 2022</i></p>	<p><i>Review at the Workforce Board and MI Meeting</i></p>	<p>Children and young people will benefit from improvements in the standard and consistency of practice by practitioners in Children's Social Care.</p> <p>Children, young people and their families have the opportunity to build meaningful</p>	<p><b>Update Q1</b> The Business Case to enable more social workers to progress to SSW posts, based on merit, has been agreed and an application process has been developed.</p> <p>A local workforce plan for the next three years has been developed and this links in with the Workforce Strategy and the drive to recruit high quality social workers.</p> <p><b>Priorities Q2</b> A draft career framework to be shared</p>	<p><b>The update for Q2 will be completed in September 2021.</b></p>		

				relationships with their social worker. Reduction in the number of children/young people who have multiple social workers in a period of twelve months.	with CLT - outlining the transferrable skills we need our workforce to have  A review of the AfC benefits package			
4.3	Ensure procedures are put in place to improve the quality of new recruits, with an emphasis on recruiting people with excellent personal and communication skills. To have a robust career progressing process for existing staff.	<i>Gill Goouch L&amp;D</i>	<i>Review at each R&amp;R Group and MI Meeting  Mar 2022</i>	A pathway designed and developed for social work progression which links to the organisation's approach to managing the pipeline of professionals into AfC and maintaining talented staff.	<b>Update Q1</b> A revised induction programme is in place for new managers, ensuring that they have the skills to support staff effectively as a new manager in AfC  The move to a new recruitment system is in place. The transition for colleagues in RBWM will be in December. This will offer a more streamlined process for hiring managers and provide a stronger welcome to our new starters.  A review of the website content is in place, ensuring we are able to	<b>The update for Q2 will be completed in September 2021.</b>		

					<p>attract candidates to work with us - this will also include a new marketing campaign for AfC</p> <p><b>Priorities Q2 -</b> To appoint the new recruitment chamotion</p> <p>Attendance at relevant recruitment fairs</p> <p>Development of supporting recruitment material in time for the launch of the new recruitment solution</p>			
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### 5. Additional AfC recommendation based on Ofsted feedback (Child in Care)

Reviews are timely but need to be of consistently good quality.

No	Description	Lead	By when	Outcomes/Success measures (how do we know we are making progress)	Progress Q1 2021/22	Progress Q2 2021/22	Progress Q3 2021/22	Progress Q4 2021/22
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5.1	<p>Embed a consistent Signs of Safety approach to all CiC Statutory Reviews.</p> <p>To ensure that consistently good and outstanding practice is embedded and that the Signs of Safety methodology is understood across AfC (RBWM) to support children, young people and families.</p>	<p><i>Shungu Chigocha PSW and AD QA and SoS Transformation Lead</i></p>	<p><b>Dec 2021</b></p>	<p>Signs of Safety approach fully embedded</p> <p>Improvements evidenced through QA activity.</p> <p>Link IRO in the Signs of Safety Steering Group and Practice Leads sessions.</p> <p>Need to evidence the impact of SoS. Need evidence to demonstrate how this model is making a difference in child/families life.</p>	<p>A narrative report to be presented at Performance board evidencing distance travelled and the positive impact of using the practice model December 2021.</p>	<p><b>The update for Q2 will be completed in September 2021.</b></p>		
5.2	<p>To ensure that consistently good and outstanding practice is being</p>	<p><i>Shungu Chigocha PSW and QIAPM and her IRO Team</i></p>	<p><b>Reg monitoring in P Board and</b></p>	<p>Up to date, well written and SMART assessments and Care Plans are presented to CiC Statutory Reviews.</p>	<p>This is on track, with a new Lead IRO appointed. Reviews will be video recorded from next quarter.</p>	<p><b>The update for Q2 will be completed in September 2021.</b></p>		

	<p>demonstrated at CiC Statutory Reviews and that IROs are appropriately scrutinising and challenging practice and using the Problem Resolution Policy where necessary.</p>		<p><i>service meetings- Dec 21</i></p>	<p>Evidence that children, young people and families are fully involved in assessment and planning.</p> <p>Evidence of robust permanency planning for CiC, including life story work.</p> <p>Evidence of stability of education and home and safeguarding processes being used when appropriate and that CiC are having their needs met, are involved in suitable activities and are achieving improved outcomes.</p> <p>Evidence of good social work/other intervention as needed, including multi-agency engagement.</p>	<p>Need to undertake an observation audit of IRO/CP when they are chairing meetings in Q3</p>			
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				<p>Evidence that the Problem Resolution Policy is being used when necessary and that this makes a demonstrable difference to children and young people.</p> <p>Improvements evidenced through QA activity.</p>				
5.3	<p>Evidence that IROs know their children and young people well, meet with them between and/or before CiC Statutory Reviews and communicate with them verbally and in writing in age appropriate ways.</p>	<p><i>Shungu Chigocha PSW and QIAPM and Lead IRO</i></p>	<p><b>QA process for this service to be in place by September 2021.</b></p> <p><b>Quarterly review and feedback and update to P Board.</b></p>	<p>Evidence through observation and dip sampling that IRO's know their children and young people well and are spending time with them between and/or before CiC Statutory Reviews.</p> <p>Evidence of child friendly outcome letters being sent to children and young people.</p>	<p>Need to complete a further audit by Dec 2021 to audit the quality of outcome letters since the new revised CiC template</p>	<p><b>The update for Q2 will be completed in September 2021.</b></p>		

## 6. Additional AfC recommendation based on Ofsted feedback (Return Home Interviews)

Improve the timeliness of RHIs for out of borough CiC and improve the consistent quality of RHIs.

No	Description	Lead	By when	Outcomes/Success measures (how do we know we are making progress)	Progress Q1 2021/22	Progress Q2 2021/22	Progress Q3 2021/2022	Progress Q4 2021/2022
6.1	<p>To improve the consistent quality of <b>recording</b> of 'Return home interviews' RHI so that they support the wider analysis of push and pull factors. Training to be provided to those who undertake RHIs.</p> <p>To improve the <b>timeliness</b> of out of borough CiC.</p>	<p><i>Marie Bell AD</i></p> <p><i>Danny Gomm Family Hub Manager</i></p>	<p><i>Continue our quarterly audit of the quality and time of RHIs and report to the P Board on a 6 monthly basis.</i></p> <p><i>Training for RHIs in Sept 2021.</i></p>	<p>Return home interviews to show an analysis of the push and pull factor, with evidence that this intelligence is gathered into an effective wider analysis of these factors, to identify patterns and trends, in order to effect change. Learning is delivered through QA reports and learning events.</p> <p>For CiC placed out of the borough, we will have identified a named RHI provider as part of the Placement Plan.</p>	<p>Since the ILACS Inspection in January 2020, a decision was taken that only trained staff complete RHIs and record them. Only trained Youth Workers who are sufficiently trained undertake these important interviews. The Family Hub Manager, Danny Gomm, sees and signs off all RHI reports and agrees to the actions, based on the content, the young person and the episode. This is now always completed before being sent to TVP and placed on the child/young person's electronic record. A wellbeing scaling</p>	<p>The update for Q2 will be completed in September 2021.</p>		

			<p>CiC placed out of the borough and who go missing will have the same timely, good quality RHI service as those within the borough.</p> <p>Information on the possible risk of going missing and other vulnerabilities of the CiC is shared with the host authority and police force.</p> <p><i>"Notification of out of borough placements." form to be used as standard good practice.</i></p> <p>Dip sampling and auditing will evidence improved consistency in the quality of RHIs.</p> <p>The key performance indicator will show an improvement in the number of RHI's completed</p>	question has been added. In January 2021, 6 RHIs were sent back for further work. QA activity on RHIs will be presented to the Performance Board on a 6 monthly basis.		
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				within 72 hours				
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## 7. Additional AfC recommendation based on Ofsted feedback (Commissioning)

Commissioning arrangements to be strengthened.

No	Description	Lead	By when	Outcomes/Success measures (how do we know we are making progress)	Progress Q1 2020/21	Progress Q2 2020/21	Progress Q3 2020/21	Progress Q4 2020/21
7.1	To strengthen commissioning arrangement within AfC (RBWM)	<i>Kevin McDaniel DCS</i>	<i>Nov 21</i>	<p>Robust commissioning arrangements are in place for all placement types that are good quality and represent best value.</p> <p>Enhanced commissioning arrangements with health are in place and there is evidence that they are working well.</p>	<p>Sufficiency Strategy approved by AFC board and going through governance for final sign-off. Action plans for each priority are underway.</p> <p>New Commissioning Manager in place. However there is still much work to do.</p>	<b>The update for Q2 will be completed in September 2021.</b>		
7.2	To develop the strategic options to enhance the sufficiency of places of all	<i>Kevin McDaniel, Director of Children's Services</i>	<i>March 2022</i>	AfC will have established viability of additional provider services to	Strategy going through RBWM governance processes, including Commissioning Board and Cabinet as required. <b>see self assessment</b>	<b>The update for Q2 will be completed in September 2021.</b>		

	types			augment the local foster care places (via AfC IFA) and purchasing via the open market				
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