



Improvement Plan 2020 - 21 Southampton Children and Learning Service



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Introduction

Southampton has high ambitions for its children and young people, with a focus on 'Children and Young People getting a good start in life' at the centre of it's strategic priorities. We want to deliver the very best outcomes for all of our Children and Young People. To meet our goals, our Children and Learning Service continues to proactively engage with improvement activity on a regional and national level. Our Ofsted ILACS inspection in November 2019 highlighted a range of interventions that are benefitting children and families. But, Ofsted found that the service still 'requires improvement' to be good.

We know there is much to do to deliver the very best outcomes for our children, young people and families. To ensure that we improve, there is strong commitment from politicians and the Council Leadership to a 'Child Friendly Southampton', our vision for a city where we prioritise the safety, welfare, and success of every child in everything that we do.

By working effectively with all our partners, we are confident that our Children and Learning service will play its crucial part in making Southampton a genuinely child-friendly city and a place where young people can grow up safely and achieve their aspirations. Southampton is pleased to welcome a new Executive Director of Children's Services, Robert Henderson in September 2020 and our strategy for Children and Learning is being reviewed, with corporate support, in Autumn 2020.



Context

This is the second iteration of our improvement plan, initially developed in January 2020 in response to the inspection. In summer 2020, the service engaged with Hampshire Children's Services, through the Partners in Practice initiative, to assess the efficacy of the plan in addressing the inspection recommendations. Adjustments were made based on this peer review. This plan also responds to a whistle blowing investigation report and the Freddie Serious Case Review which were both published in August 2020.

This 'plan for improvement' is high level, underpinned by and referring back to a series of service improvement and development plans owned by Heads of Service and Service Managers in the Children and Learning Service and across the Council, aligned with cross cutting multi-agency plans (including responses to case reviews) overseen by senior leaders. These plans detail clear actions, owners and timescales against which progress is monitored by the Executive Director and the Improvement Board. Underneath these are more granular action and project plans.



Our Ambition for Children and Young People



Southampton Children and Young People are key stakeholders in our ambition to make Southampton *Greener, Healthier and Fairer*. We want Southampton to be a city that is recognised for its proactive approach to preventing problems and intervening early, as well being a *'Child Friendly City'* where children and young people have great opportunities and an aspiration to achieve.



Our child friendly values are to:

Be Inclusive – by becoming a **participative city** in which care experienced Children and Young People experience meaningful engagement in the design, delivery and place shaping of Southampton;

Listen – by implementing a participation framework for Children and Young People within Southampton City Council's democratic processes within which consultation with Children and Young People takes place;

Learn - by ensuring all strategy and policy is informed by the active engagement of Children and Young People, with new strategic commitments expressed in child friendly terms to support Children and Young People's inclusion and participation in civic policy creation.

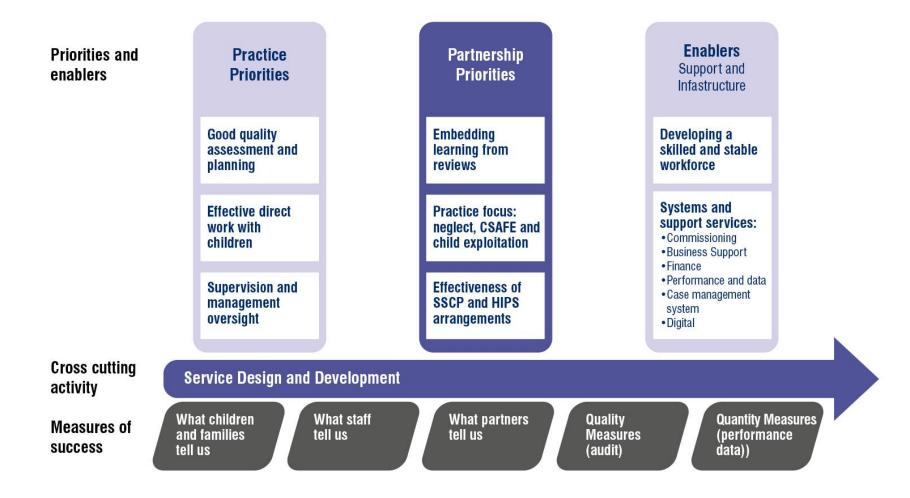
Moving forward at pace:

In Autumn 2020, led by the Executive Director for Children and Learning, we will translate our ambition into a cohesive Vision and Strategy for our staff and key stakeholders to get behind. We work hard with our partners to safeguard Children and Young People and we have welcomed senior leaders on to our Improvement Board.

Central to our approach is our responsibilities as a Corporate Parent and our commitment that our looked after children will receive best support we can give them through a reinvigorated corporate parenting strategy.

Our priorities

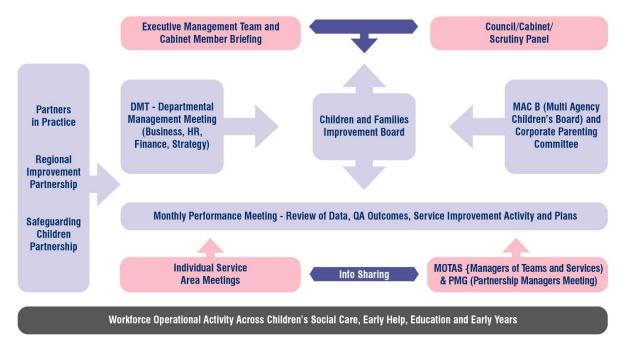
Underpinning our detailed plan are core priorities and enablers. We believe that with a relentless focus, we will achieve the best outcomes for Children and Young People in Southampton; laying the foundations for a service that provides consistently good practice.



Governance Structure

Our improvement plan is reviewed by a monthly Improvement Board, chaired by the Executive Director for Finance. The Board receives and considers performance data; progress (exception) reports and presentations from service managers. Membership has been extended to include key partners and will also include practitioners, with an interface with our practitioners reference group.

Further oversight is provided through the Children and Learning Scrutiny Panel.



Children and Families Improvement Board:

- Executive Director Finance and Commercialisation (Chair)
- Chief Executive (annually)
- Deputy Chief Executive
- Cabinet Member, Children and Learning
- Cabinet Member, Finance and Resources
- Shadow Cabinet Member, Children, Young People and Learning
- Executive Director, Children and Learning
- Executive Director Resources
- Service Director of HR
- Head of Children's Social Care Services
- Head of Integrated and Specialist Services
- Head of Education and Learning Services
- Southampton CCG Managing Director
- Chief Superintendent Southampton Police
- Safeguarding Children Partnership Chair
- LGA representative
- DFE representative
- 2 x representatives from Staff Reference Group
- Partners in Practice representative
- Secondary and Primary Head teacher
- Special School Head teacher



| | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
|-----------------------------|---|------------------------------------|---|---|---|
| | Reduce Numbers and % Staff Turnover (rolling year) to 5% or less overall | 5% social worker; 9% overall | 4% social workers; 2% overall Local Indicator | 5% | Workers will build long term uninterrupted relationships with Children and Young People so that their plans are progressed. |
| Leadership and Stability | Reduce Sickness absence days per employee to 8 days or less in rolling year | 8 days | 14.14 days Local Indicator | 8 days in a rolling year per employee | Improved staff well being will support stability and better consistency of practice across the service. |
| | Reduce the % of agency workers to 5% or less of headcount | 22% | 8.8% (in established posts, cross-service) <i>Local Indicator</i> | 5% | More staff will work for Southampton and be directly invested in our ambition and vision for Children and Young People. |
| | Reduce and maintain caseload numbers to an average of 20 children per FTE allocated social worker in PACT and 15 in LAC services | 18 (cross service) | 18 overall Caseloads are above 25 children in PACT and 20 in LAC | 20 allocated children per worker in PACT; 15 per | Social workers will have the time to complete good quality work with children and families. |
| | Measure | Baseline | Actual (July 2020) | Target | Outcome |
| Quality Assurance | Ensure 90% or more of scheduled audits completed as per annual audit programme | 50% | 72% Local Indicator | 90% | The service will 'know itself well'; understanding the quality of work through its audit programme. |
| | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
| Early Help | Ensure 80% or more of children open to the service have assessment / Plans | 75% | 80% Local Indicator | 80% | Children and Families benefit from an early help offer that is rooted in a good understanding of their needs. |
| | Increase locality teams allocations in <10 days from referral to 90% or more | N/A | 84% Local Indicator | 90% | Children and Young People will receive effective and timely support early help support. |
| | Increase rate of Early Help Assessments completed per 10,000 0 – 17 yrs | 81.1 | 101.4 Regional 42.5 | 120 | Children and Young People will have their needs met through intervention at the earliest opportunity |



| | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
|-------------------------------|--|----------|-------------------------------------|--------|--|
| | Ensure 100% of referrals are dealt with by MASH within 1 working day or less | 94% | 98% Local Indicator | 100% | The safety of Children and Young People is supported by referrals being dealt with in a timely manner |
| MASH / EDT | Reduce the % of contacts that become new referrals of Children in Need to 21% or less | 35% | 26% Regional 21% | 21% | Children and families receive the help they need at the right time and from the best possible resource |
| | Monitor the Rate of new referrals of Children in Need rate per 10,000 (0-17 year olds) | 215.6 | 175.4 Regional 124.6 | 151.7 | Children and Young People receive the right type and level of support. |
| | Increase the % of Strategy Discussions held within 1 WD of the Referral outcome being progress to CP Strategy Discussion to 100% | 94.5% | 94% Local indicator | 100% | Safeguarding investigations in respect of Children and Young People are undertaken promptly. |
| Assessment | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
| | Reduce the levels of Section 47 (S47) enquiries started per 10,000 (0-17 year olds) across service areas to 19 overall | 34 | 24 SN 19/ Reg 14 / Nat 14 | 19 | Where there are concerns about a child's safety there is a robust assessment of risk |
| | Maintain the % of Single Assessments (SA) completed within 45 days to >76% | 69% | 93% SN 76%/ Reg 81% / Nat 81% | 76% SN | Assessments completed in a timely manner to ensure Children and Young People receive the help they need without unnecessary delay |
| | Increase the % of children who's views were represented at their ICPC to 100% | 75% | 63% Local Indicator | 100% | Children and Young People who are able to provide their views are represented at their Conference |
| | Measure | Baseline | Actual (July 2020) | Target | Outcome |
| Children with Disabilities | Ensure 85% or more children have visits completed within designated timescales / frequencies | 82% | 82% Local Indicator | 85% | Children and Young People receive high support to meet their needs, reduce risk of harm and avoid potential for family breakdown. Parents of Children and Young People with SEND are supported to care for their children. |



| | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
|-------------------------|--|----------|--------------------------------------|--------|--|
| Elective Home | Ensure 100% of all EHE cases within the priority cohort (CiN, CP, YOS) are allocated to an EHE Home visitor | N/A | 100% Local Indicator | 100% | Local Authority awareness of and response to Children and Young People not placed in school is robust. |
| Education | Ensure 100% of new cases of EHE have initial engagement within the first 4 school weeks | N/A | From Sept 2020 Local Indicator | 100% | Increase our ability to recognise and resolve potential issues earlier |
| | Measure | Baseline | Actual (July 2020) | Target | Outcome |
| SEND | Ensure 90% or more of Education Health and Care Assessments are completed in 20 Week Statutory timescale. | 50.3% | 100% Local Indicator | 90% | Children and YP benefit from support when they need it with a higher satisfaction in parent carers and schools/settings, less complaints and better relationships. |
| Protection and Court | Measure | Baseline | Actual (July 2020) | Target | Outcome |
| | Reduce the numbers of Children subject to CP Planning at Month end to target of 328 or less | 464 | 426 SN 388/ Reg 527 / Nat 439 | 328 | Child Protection Plans are in place for Children and Young People where it has been assessed that multi-agency intervention is required to keep them safe. |
| | Reduce the rate of children subject to child protection planning (per 10,000 0 – 17 years) to 65 or less | 91 | 82 SN 48/ Reg 44 / Nat 41 | 65 | The number of Children and Young People who require Child Protection Plans is at a level that is moving towards a comparable position with other local authorities like Southampton. |
| | Ensure 90% or more of children subject to a Child Protection Plan are seen in the last 15 working days. | 79% | 75% Local Indicator | 90% | The service is in regular contact with Children and Young People subject to Child Protection planning to ensure that there is ongoing assessment of risk and opportunities to intervene effectively. |



| | Massaura | Donalina | A street / tube | Townsh | Outcomes |
|---------------------|--|------------------------------------|---|--|---|
| | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
| Children's | Monitor the number of Edge of Care referrals | 442 | 545 Local Indicator | 623 | The Edge of Care offer is used robustly for vulnerable families |
| Resource Service | Maintain the % of cases showing significant improvement between start and latest 'goal-based scores' to >80% | 87% | 88% Local Indicator | >80% | Families situations improve as a result of an effective Edge of Care response |
| | Maintain the % of Edge of Care children that have remained with their family to >75% | 80% | 78% Local Indicator | >75% | Children and Young People will receive effective support to prevent deterioration of home circumstances |
| | Monitor the number of open EoC cases | 116 | 108 Local Indicator | >109 | The EoC maintains a good level of engagement with families in need of support. |
| Youth Justice | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
| | Ensure the rate of custodial sentences imposed on young people aged 10-17 at time of sentence is <0.3. | 0.51 (10 custodial sentences) | 0.25 (5 custodial sentences) SN - 0.23 | <0.3 | Safe alternatives to custody are sought for Children and Young People who commit serious offences. |
| | Ensure 75% or more of young people who are in suitable ETE provision when their disposal ended | 66.7% - <16 yrs 46.1% - >16 yrs | 69% - <16 yrs 40% - >16 yrs Local Indicator | 75% - < 16 yrs 75% - > 16 yrs | Young people who offend benefit from good education, training and employment outcomes |

| | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
|-----------------------------|---|----------------------------|------------------------------------|--------|--|
| MET | Increase the % of (viable) missing episodes where RHI was offered (excluding OHA) to 90% | 96% | 100% Local indicator | 90% | The needs and safety of Children and Young People who have been missing are responded to robustly. |
| | Increase the % of LAC missing episodes where RHI was offered to 90% | 91% | 100% Local indicator | 90% | Looked after children who go missing receive effective support. |
| | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
| | Safely reduce the total number of Looked After Children | 516 | 512 SN 496, Nat 514, Reg 541 | 420 | Where it is assessed that there is no other alternative the LA will take children into its care for their welfare and protection |
| Looked after Children | Reduce the Rate of looked after children per 10,000 0 – 17 years) to 82.4 | 100 | 101 SN 86, Nat 65, Reg 53 | 82.4 | Where it is assessed that there is no other alternative the LA will take children into its care for their welfare and protection |
| | Increase and maintain % of Children with an authorised care plan to 95% or more | 95% | 95% Local Indicator | 95% | Children and Young People have good quality care plans, to which they have contributed, and which meet their needs. |
| | Maintain the % of looked after children with a Personal Education Plan (PEP) at above 95% | 97% | 95% | 95% | Looked after children will benefit from effective corporate parent overview of their educational needs. |
| | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
| Care leavers | Maintain the % of Care Leavers in contact and in suitable accommodation to 81% or more | 81% | 86% SN 81%, Nat 85%, Reg 84% | 81% | Care Leavers are in accommodation that is safe and secure. |
| | Increase the % of Looked after Children aged 16+ or open Care Leavers with an authorised Pathway Plan to 95% or more | 95% | 96% Local indicator | 95% | Care Leavers have a good quality Pathway Plans, to which they have contributed, and which meets their needs. |
| | Maintain the % of Looked after Children Placed in emergency beds / B&B at 0 (0%) | 4% care leavers; 0% LAC | 0% Local indicator | 0% | Children and YP are placed in Suitable accommodation with discontinued use of Bed and Breakfast accommodation |

| | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
|--------------------------|--|--------------------------------|--|--|---|
| | Increase the number of 'in house' foster carers | 164 | 165 Local Indicator | 200 by 2023 | Secure placements, supported by confident and empathic carers. |
| Fostering/ Placements | Increase the % of children placed in our own provision to 50% or more | 47% | 47% SN 50%; Nat 50% | >50% | Secure placements, in our own provision supported by confident and empathic carers. |
| | Increase the % of children whose permanence plan is long term fostering are matched with their carers to 80% more | NA | 42% Local Indicator | >80% | Children and Young People receive permanence in a timely manner with prevention of drift |
| | Measure | Baseline | Actual (July 2020) | Target | Outcomes |
| Adoption | Number of adoptions | 3 per month (12 month average) | 2 per month | 3 per month | Children and Young People who are being adopted will receive timely and effective support. |
| | Reduce the number of days between entering care and child moving to adoptive family | 343 days | 340 days SN 463/ Reg 406 / Nat 486 | <463 | Timely adoption matching will meet the needs of the child/ren |
| Safeguarding | Measure | Baseline | Actual (July 2020) | Target | Outcome |
| Children Partnership | Ensure that 100% of Child Safeguarding Practice Reviews and Serious Case Reviews are completed within timescales. | 7 in progress | 8 in progress 3 ongoing are part of a thematic 0 completed 0 in timescale Local Indicator | 100% of reviews completed within timescales. | required that this is completed within timescales required and learning here it is identified a Child Safeguarding Practice Review is disseminated within partner organisations including Children's Services |



- In Spring 2020, the council commissioned an independent enquiry to respond to safeguarding concerns raised via a collective grievance by Children and Learning staff. In response to the findings, senior leaders and members have worked decisively with the service management team to formulate a robust action plan which will be led by the new Executive Director.
- Subsequently, we can show rigorous and ongoing scrutiny of outcomes for Children and Young People and a robust corporate commitment to resourcing the service effectively.



 We can evidence a high level of engagement with partners, despite the impact of Covid 19; examples include our virtual MASH Strategic Group, Safeguarding Children's Partnership and Corporate Parenting Committee. The latter has been strengthened, in line with the Ofsted recommendations: a clear Corporate Parenting Strategy is being developed, supported by task and finish groups to ensure traction against critical practice areas. We have engaged with Cafcass to set up quarterly meetings; alongside continuing to engage with the family courts.

- We are moving to virtual learning platforms; commissioning the development of e-learning for our business critical courses and launching virtual practice weeks and bulletins focused on improving the quality of assessment, direct work and supervision.
- We have progressed our Practice Model development. Signs of Safety is being carefully explored with the provider. We have revised our restorative practice project plan in light of the findings of our interim evaluation report. We have developed detailed practice guidance and worked virtually with our Partner in Practice (Hampshire Children's Service) to



- consider staff engagement strategies. We have Practice Framework workshops set up for staff in Autumn 2020, alongside extensive restorative practice refresher training with a provider experienced in supporting children's social care services on their improvement journey.
- Alongside the practice model development, we have used Partner in Practice insights to strengthen our service improvement plan, review our quality assurance framework and begin work to engage with our management team about effective performance management.

- We have launched our virtual Learning and Improvement Panel for Children's Social Care which has run
 monthly through out 'lock down'. We have also worked with our data team to finalise our Early Help
 performance scorecard which will further improve oversight of the experiences of children and families and the
 quality of service offered.
- In response to Covid-19, we worked with our seconded Ofsted inspector to facilitate >30 virtual reflective group sessions for >300 staff before handing this work over to the Practice Development team from October 2020. We have also launched our Supervision Guidance and we are implementing virtual training for managers.
- We have increased staffing capacity in the Child Protection Conference and IRO Teams to ensure that ongoing focus on improved performance and quality. We have started management audits and peer audits in these services as part of refreshed service delivery plans.
- We have stabilised the management team in the MASH and assessment service, evidencing a consistent and timely response to children's risks and needs throughout the pandemic.



- We are contributing to a corporate initiative to better understand the experiences of the BAME communities; for safeguarding children this will be focused through the Safeguarding Children's Partnership.
- We have progressed the Year of the Child audit programme virtually and used the opportunity to engage with Children and Young People in this cohort to learn about and respond to their experiences during lockdown. We have secured extra auditor support because of the additional work the pandemic has brought for our managers and we have undertaken regular audits of practice in key areas.

 We maintained direct contact with our most vulnerable Children and Young People through out the period of lock down restrictions and resumed safe contact with Children and Young People across the service, in collaboration with partners at the earliest opportunity we could.

 We have retained an ongoing focus on the Protection and Court Sverice, where we know there is the most pressure. There is weekly scrutiny of caseloads and management reports and monthly reports to our Improvement Board to ensure senior corporate oversight. Virtual recruitment is being supported by our Human Resources team as a critical element of our Recruitment Retention Plan.



- We have maintained our permanence panel arrangements, operating virtually. The looked after children's service and IROs are progressing a 'Language that Cares' approach in case recording and records of reviews.
- Timely completion and authorisation of plans has remained consistently high for looked after children and care leavers. Health passport completion for care leavers has increased notably.
- Fostering and Adoption strategies and associated reports have been signed off as part of the refreshed Corporate Parenting schedule.
- The Safeguarding Children's Partnership has maintained its focus on core practice themes: Neglect, adolescent mental health and child sexual abuse in the family environment; including staff awareness surveys, virtual partnership self evaluation and local learning review and workshops.



What Southampton children say makes a good social worker.



Our Improvement Plan

| AREA | PRIORITIES/ACTIONS | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|--|--|--|---|
| Responsible Officers: • Executive Director, Southampton Children and Learning Service • Head of Service, Children's Social Care Linked Service Delivery Plans: • Quality Assurance • Assessment • Protection and Court • Looked after Children • Recruitment and Retention • Quality Assurance | Outcome: Social Workers to build long term uninterrupted relationships with Children and Young People so that their plans are progressed. Reduce the number of sickness absence days per employee in rolling year Evidence scrutiny of monthly absence management report by Service Director and Senior Mgt Team evidenced in minutes of DMT Progress actions in R & R Action Plan Progress R and R activity in Service Delivery Plans Stabilise the number and % Turnover of SWs within Assessment, PACT and LAC Stabilise the number and % Turnover of overall staff Reduce the % of agency workers Progress Service Redesign Planning Reduce the number of allocated SW/Teams children have experienced from first point of contact Understand the social worker caseloads using monthly caseload data report Outcome: We will achieve management stability and capacity Stabilise the number and % turnover of Children's Services Service | July 21 Apr-20 May-20 Dec -20 April-21 July -20 Jan-21 Apr-21 Apr-21 Jul-20 | 8 days per employee in rolling year Monthly Review Evidence of Six-weekly review of R&R action Plan Evidence R & R progress in SDPs bi monthly 5% turnover of staff Exit interviews to be offered to all leavers 5% of employee headcount as agency staff Plans to be reviewed bi-monthly Tracking of social worker allocations to 3 per child. Reduce caseload to an average of 20 children in PACT and 15 in LAC Service | Human Resources Human Resources HR/ Hays / Communication Department / Finance QA Unit HR HR / Finance / Hays HR / Finance / Hays HR / Finance / SSCP Data team Data team HR / Finance /EMT |
| recommendation: 'Social Workers to build long term uninterrupted relationships with children so that their plans are progressed' | Managers Stabilise the number and % turnover of Children's Services, Senior Managers | Oct-20 | 5% turnover rate | HR / Finance /EMT |



| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|---|--|---|---|---|
| Responsible Officers: • Executive Director, Southampton Children and Learning Service • Head of Service, Children's Social Care • Councillor | Outcome: The Council have a compelling and ambitious vision INVESTIGATION REPORT REC 1 Develop an ambitious vision for children and young people in Southampton which mobilises all council services and partner agencies to improve outcomes for all Children and Young People in the City; Embed outcomes to improve services for children and young people into all SCC departmental business plans Outcome: Promote an inclusive culture, which connects senior management with practice and ensures that staff concerns are swiftly addressed INVESTIGATION REPORT REC 2 Co-design an effective communication strategy with managers, front line staff and partners which incorporates both internal and external communication Monthly safeguarding assurance visit to one service by Executive Director for Children & Learning Services and the Lead Councillor to review performance and listen to the experiences of front-line staff | Dec -20 21/22 Business cycle March- 21 Sep -20 | Staff engagement with vision development; evidence of staff connecting with vision, how it impacts upon their work with and for children and families Evidence of targets and outcomes defined against priorities with progress reported Monitoring of Strategy; staff and partner engagement and feedback Monitoring of Meetings; feedback from staff | Multi agency partners Multi agency partners Communications Team Corporate Services |
| | | | | |



| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|---|---|----------------|--|--|
| Responsible Officers: • Executive Director, Southampton Children and Learning Service | Outcome: Promote an inclusive culture, which connects senior management with practice and ensures that staff concerns are swiftly addressed INVESTIGATION REPORT REC 2 • Quarterly safeguarding assurance meeting between the Chief Executive, the Leader, Lead Councillor and the Executive Director for Children & Learning Services to discuss successes, challenges, pressures and | Sep-20 | Meetings are scheduled, with evidence of actions arising progressed. | Corporate Services |
| Head of Service, Children's Social Care Councillor | Establish a Staff reference Group to support the delivery of the improvement plan and provide a front-line "sense check" on its effectiveness | Sep-20 | Implementation of Practitioners Improvement Board Carry out annual staff surveys benchmarked against previous years (SN) | Principal Social Worker |
| Principal Social Worker | A representative of the Staff Reference Group to be included as a member of the Children's Services Improvement Board | Oct-20 | Practitioners in attendance at Improvement Board | Practice Development Team |
| | Review the improvement plan and ensure that actions to achieve the cultural shift needed are included | Sep-20 | Evidence of review and monthly progress updates | Corporate Services |
| | Ensure that restorative practice is championed across the service; modelled by senior leaders and managers and supported by a clear development and implementation plan | Dec-20 | Progress against Working with Families Project Plan Staff undertaking Restorative Practice training | Working with Families Project Group |
| | Quarterly meeting to be established between the Chief Executive and the Principal Social Worker to ensure a direct connection with front line practitioners | Sep-20 | Monitoring of Meetings | Principal Social Worker |
| | Executive Management Board meeting every six months to review whole council approach to embedding outcomes for children & young people in the city | Sep-20 | Monitoring of meetings/minutes | Corporate Services |
| | Relaunch regular staff conference to be co-designed and co-ordinated between managers and front-line practitioners | Dec-20 | Conference schedule (inc. virtual conferences) planned and coordinated prior to December 2020 | Communications Team |
| | Review the service offer and approach provided by all council support functions to ensure that they are responsive and supportive, minimising the administrative burden on managers and officers | Mar-21 | Review of service level agreement | SCC Support Services |



| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|---|--|------------------------------------|--|--|
| Responsible Officers: • Executive Director, Southampton Children and Learning Service • Head of Service, Children's Social Care • Councillor • Head of Service HR | Outcome: Introduce a compelling workforce strategy that ensures Southampton is the destination of choice for experienced and capable social workers and managers. INVESTIGATION REPORT REC 4 Develop a workforce strategy for Southampton's Children & Learning service that is ambitious in its offer to attract and retain good social workers Ensure that the recruitment and retention of social workers identified within the workforce strategy is built into the communication strategy for the service (relevant expertise secured) Commit to reducing the caseloads for front-line workers, being explicit about caseload numbers for each service and when this is expected to be achieved by Review the ICT equipment currently available to all officers in the service and prioritise the service in the roll out of new technology Ensure that front line officers are actively involved in the design of the new case management system Review service offer from business support to minimise administrative burdens from front line officers and managers ensuring that they have more time to support children, young people and families Review accommodation requirements for all services to ensure that all officers have appropriate accommodation to meet the needs of their service and young people | Mar-21 Mar-21 Mar-21 Mar-21 Dec-20 | Monitoring of Recruitment and Retention Plan Development of communication Strategy Caseload aspiration is met ICT Plan / SWOW Programme is implemented Improved integrity and accuracy of data / Practitioner rep on Implementation Board Review and monitoring of service level agreement Progression of Smarter Ways of Working Programme (SWOW) | HR/ Hays / Communication Team / Finance Communication Team HR/ Hays / Communication Team / Finance ICT/Care Director Provider / CC, Project Team CCM Project Team SCC support services SWOW Team |



| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|---|--------------------------------------|--|--|
| Executive Director, Southampton Children and Learning Service Head of Service, Children's Social Care Councillor Hampshire LA | Outcome: Ensure the council has a regular independent assessment of the effectiveness of its children's social care services INVESTIGATION REPORT REC 5 Advance plans to expand the membership of the Children's Services Improvement Board to include key partners Revise the improvement plan in line with feedback from the independent review of the plan and associated documents Undertake broad engagement and communication activity with officers and partners on the content and key areas of the improvement plan Commission a quarterly independent assessment of the quality of practice and associated report, which will be presented to the improvement board and cabinet members Expand the independent expert support offer in partnership with Ofsted and DfE | Sep -20 Sep-20 Oct -20 Nov-20 Sep-20 | Quorum of meeting to include Partner representatives / Review TOR of Board Revised Plan agreed with monthly updates and bi monthly commentary Engagement with officers to form part of the Communication Strategy Quarterly updates and review discussed with Services. QA Unit engaged with reviewer in embedding learning into service QA framework Service engagement in Partners in Practice | Multi agency partners Hampshire Partners in Practice Communications Team Independent Reviewer Hampshire Partners in Practice |

Quality Assurance

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|---|--|----------------------------|--|--|
| Responsible Officers: • Head of Service, Integrated and Specialist Service | Outcome: Social workers feel confident in undertaking direct work with Children and Young People and have regular reflective practice on their progress | | | |
| Quality Assurance Unit Manager | Audits to show consistently good quality supervision Audits to show consistently good quality direct | Jan-21 Jan-21 | 70% audits graded good or outstanding 70% audits graded good or outstanding | Operational Teams Operational Teams |
| Linked Service Delivery Plans: • Quality Assurance | work • Embed Reflective Practice Outcome: Children have Lasting and Trusting Relationships with their Independent Reviewing | Mar-21 | Participation in reflective activity (learning circles; reflexive supervision; reflective group sessions) | Operational Teams; ; Communications Team |
| QA activity is reflected across the service delivery plans Core Ofsted recommendations: | Consistency of Independent Reviewing Officer function Improved timescales for responding to IRO Alerts/Complaints and CP problem resolution | April -21 Mar-21 | 90% of dip samples show case tracking by the IRO. Reduction in changes of IRO Complaints /Alerts to meet corporate/local standard timescales. Reduction in number of stage 1 complaints to 68 (2018-2019) | HR; Hays, Data Team Customer Relations Team |
| 'Management provide advice for social workers on how to undertake direct work with children and regular reflective practice on their progress.' | Outcome: Assessment and Plans are of a high quality to children get the right help quickly and that its impact is clearly measured. • Service compliance against audit programme • Promotion of Research in Practice • Make sure that panel framework is maintained and impact is evident | Oct-20 Jul-20 May-20 | 90% of scheduled audits have been carried out 75% of staff registered are using RIP by usage breakdown Evidence of weekly and monthly panels | Managers if Teams and Services (MOTAS) Research in Practice Legal Services; Business Support |
| 'Assessment and Plans are of a high quality to children get the right help quickly and that its impact is clearly measured.' | Outcome: Improved integrity and accuracy of data; Compliance with regularity of Panel / meetings: Phase 2 Make sure that data integrity is flagged as a priority within Client Case Management System implementation Fully implement model of practice | May 21 Oct-21 | Data reporting is accurate after implementation of Care Director 90% of cases audited evidence use and impact of practice model | CCM project team; data team Signs of Safety / Elia |



Quality Assurance

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|---|-------------|--|---|
| Responsible Officers: Head of Service, Children's Social Care Head of Service HR | Outcome: Invest in managers and staff to deliver high quality services for Children and Young People. INVESTIGATION REPORT REC 3 Review the learning and development offer for managers and front-line officers to ensure that it meets their development needs including | Dec-20 | Offer reviewed and info cascaded to staff Uploaded to Policy Hub | Corporate Learning and Development Team; Human Resources; Communications Team. |
| | Ensure regular appraisals are undertaken and that development needs are identified and met | Mar-21 | 90% of staff have an up to date appraisal | Corporate Learning and Development Team; Human Resources. |
| | Review current supervision arrangements to ensure that they are high quality, supportive, | Mar-21 | Review of supervision guidance | Policy Team |
| | Ensure that managers and front-line staff have sufficient capacity to take part in high quality supervision and support | Mar-21 | 100% of managers attend supervision training; 90% of audits are graded 'good' for supervision | Corporate Learning and Development Team |
| | Review practice standards to ensure they follow best practice in improving outcomes for children and young people and that they are understood by managers and front-line officers | Dec-20 | Practice Standards Reviewed, cascaded to staff and uploaded to Policy Hub | Policy Team; Communications Teams |
| | Progress the revision of the quality assurance framework and systems following the recent independent review | Nov-20 | Completed revision of QA Framework, cascaded to staff and uploaded to the Policy Hub | Policy Team; Hampshire Partners in Practice |
| | Review the performance management framework and reporting to ensure that it monitors compliance, volumes and timeliness and the effectiveness of outcomes; | Dec-20 | Completed revision of PMF | Data Team; Human Resources. |



Early Help

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|--|---|--|---|
| Responsible Officers: • Head of Service, Integrated and Specialist Service • Early Help Service Manager Linked Service Delivery Plans: • Early Help and Prevention • Quality Assurance Core Ofsted Recommendation: Good quality assessments and plans to ensure that all children get the right help quickly and that its impact is clearly measured. | Outcome: A Comprehensive Integrated Early Help Service Retain focus on number of EH / Common / Targeted Assessments Increase % of children open with assessment / plans Increase % of locality team allocations in <10 days from referral to Early Help Hub Improve Gradings in Year of the Child 2020 Longitudinal Thematic Audit Increase % of rapid response new referrals seen within 5 days Audits to show consistently good quality direct work Analyse % of re-referrals into Early Help Analyse % cases stepped up | Oct-20 Jul-20 May-20 Oct-20 Jun-20 May-20 Oct-20 Oct-20 | Rate of early help assessments increase to 120 per 10,000 80% of children have assessments / plans 90% of children seen within 10 days of referral 70% audits graded good or outstanding 90% of Families seen within 5 days of referral to EH 70% audits graded good or outstanding 10% re-referrals into EH in past 12 months 20% of cases stepped up to Children's Social Care | Solent NHS / Data Team Solent NHS / Data Team Solent NHS / Data Team QA Unit MASH QA Unit Data Team EH Rapid Response Team / EH Hub |
| | | | | |

MASH / EDT

| AREA | PRIORITIES | TARGET | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|---|--|---------|--|-----------------------------------|
| | | DATE | | |
| | | DAIL | | |
| Responsible Officers: | Outcome: Decision making in the MASH adheres to local guidance and children do not experience unnecessary statutory assessments | | | |
| Head of Service, | | | | |
| Children's Social Care | Monitor level of contacts received | Oct -20 | < 7681 contacts received (in preceding six months) | Safeguarding Children Partnership |
| Cure | Understand application of thresholds - P'ship Audits with multi | Feb-21 | Evidence, through audit, of appropriateness of referrals | Safeguarding Children |
| MASH Service | agency networks | | across referral sources | Partnership |
| Manager | Ensure that referral thresholds are understood by partner agencies | Feb-21 | Review of Continuum of Need document by MASH and strategic partners | Safeguarding Children Partnership |
| Linked Service | Develop monthly learning circles between Assessment and MASH | Mar-21 | Evidence of monthly learning circles recorded where | QA Unit |
| Delivery Plans: | colleagues to check on decision making | | decision making was discussed | 4.5 |
| • MASH | Partner's MASH Navigator joint Training - Attendance at MASH Induction training for new MASH Navigators (Partners) | Mar-21 | 90% of new P'ship Navigators receive MASH Training | Safeguarding Children Partnership |
| Early Help and Prevention | Ensure time from referral received / recorded to completion by | Oct-20 | 100% of referrals completed within 24 hours | Safeguarding Children |
| Assessment | MASH was 24 hours / 1 working day or less | | | Partnership |
| Quality Assurance | Coordinate 6 monthly health checks of referral and decision making | May-20 | Completion of six monthly health checks with 70% graded | QA Unit |
| | with partners | | as good or outstanding | |
| Core Ofsted | Monitor % of Strategy Discussions held within 1 Working Day of the Referral outcome being progress to CP Strategy Discussion (MASH) | Dec-21 | 100% of strategy discussions held within 1 WD | Safeguarding Children |
| Recommendation: | | | | Partnership |
| | Outcome: All referrals to MASH are well informed and appropriate | | | |
| | Monitor the level of contacts that become new referrals of | Oct-20 | 21% of contacts that become new referrals of CIN | Data Team; SESLIP |
| 'Decision making in | Children In Need (CiN) | OCC 20 | 21% of contacts that become new referrals of city | regional improvement |
| the MASH adheres to local quidance and | Monitor the rate of new referrals of Children in Need (CiN) per | Oct-20 | A Rate of 151.7 per 10,000 0 – 17 year olds, Children in | partnership |
| children do not | 10,000 (0-17 year olds) in past six months | | Need | Data Team; SESLIP |
| experience | A colored by a conflict of the same of the | 1 20 | 700/ - 5 | regional improvement |
| unnecessary statutory | Analyse the gradings in weekly MASH Management Audits | Jun-20 | 70% of cases graded good or outstanding | partnership QA Unit |
| assessments.′ | Outcome: Concerns for children's safety OOH are dealt with swiftly | | | QA OTIIL |
| | and proportionately | | Monthly case exemplar showing good practice and | QA Unit |
| | Analyse data and cases studies to show impact of EDT response | Dec-21 | identifying any barriers to effective service delivery / | |
| | | | 100% of EDT contacts are progressed within 1 WD | |
| | Outcome: Delivery of Local Authority Designated Officer (LADO) is robust and has clear senior management oversight | | | |
| | | | | |
| | Convene management audits to understand impact of LADO, | Oct-20 | Bi-monthly senior manager audit to provide assurance of | Head of Service - |
| | Convene independent audit of LADO function | Jan-21 | robust decision making Bi-annual independent review of LADO function | Safeguarding, Integrated and |
| | - Convene independent addit of LADO function | JdII-ZI | Bi-aimuai independent review of LADO function | Specialist Services |
| | | | | opedialist services |



Assessment

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|---|--|---------------------|--|--|
| Head of Service, Children's Social Care Assessment Service | Outcome: Prompt and Proportionate responses to Children and Young People at risk • Monitor the level of Section 47 (S47) enquiries started • Quarterly dip sampling of attendance at Strategy Discussions | Oct-20 Dec-21 | Reduce the Number and rate of sec.47 enquiries starting to 19 per 10,000 overall 100% attendance of those involved with the case providing information | Hampshire Constabulary; SESLIP Safeguarding Children Partnership |
| Manager Linked Service Delivery Plans: • Assessment • MASH | Analyse Gradings in Thematic Audits Outcome: Good quality assessments and plans to ensure that all Children and Young People get the right help quickly and that its impact is clearly measured. | Dec-21 | 70% of audits graded good or outstanding 76% of single assessments completed within | QA Unit Data Team |
| Protection and Court Children's Resource Service Quality Assurance | Monitor timeliness of completion of Single Assessments (SA) Monitor timeliness of case allocation after referral Outcome: Children and Young People benefit from effective Child | Dec-21 | 45 days 100% of cases allocated within 48 hours 100% of Case Conferences audited where evidence Thresholds are being applied | Data team Children's Social Care |
| Core Ofsted Recommendation: Good quality assessments and plans | Protection Planning Audit of Conference outcomes, reports and minutes (including problem resolution) Monitor levels of appropriate Children and Young People who engage with CP Champions | Dec-21 | 100% of children who benefit from referral to and engage with Child Protection Champions | Business Support ; Child Protection Champions |
| to ensure that all children get the right help quickly and that its impact is clearly measured. | Outcome: Children and Young People are protected through the consistent and appropriate use of Child Safety Agreements • Analysis of Gradings in Thematic Audits | Dec-21 | 70% audits graded good or outstanding | Independent Domestic Violence Advisory Service |
| The widespread and inappropriate use of child safety agreements with parents in circumstances when children's exposure to domestic abuse is a primary safeguarding concern. | Level of staff engagement in Domestic Abuse Training Level of staff engagement in Risk Mgt Framework Training | July -21 July-21 | 90% of staff engaging in training 90% of staff engaging in training | Independent Domestic Violence Advisory Service Independent Domestic Violence Advisory Service |



Children with Disabilities

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|---|---|----------------|---|----------------------|
| Head of Service, Integrated and Specialist Service Children with Disabilities Service Manager Linked Service Policery Manager | Outcome: Good quality assessments and plans to ensure that all Children and Young People get the right help quickly and that its impact is clearly measured. • Maintain the quality of assessments in the Jigsaw Children with disabilities team and develop evidence bank of outstanding practice (Managers audits) Outcome: Better management advice for social workers on how to undertake direct work | Jan-21 | 70% audits graded good or outstanding | QA Unit / Solent NHS |
| Children with Disabilities | Maintain the quality of assessments in the Jigsaw Children with disabilities team and develop evidence bank of outstanding practice (Team to suggest cases for audit on monthly basis) | Jan-21 | 70% audits graded good or outstanding | QA Unit / Solent NHS |
| SEND Partnership Plan Protection and Court Quality Assurance | Ensure that Children and Young People benefit from regular visits | Mar-21 | 85% or more children have visits completed within designated timescales / frequencies | QA Unit / Solent NHS |
| Core Ofsted Recommendation: 'Good quality | | | | |
| assessments and plans to ensure that all children get the right help quickly and that its impact is clearly measured' | | | | |

Elective Home Education

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|---|----------------------------|--|--|
| Responsible Officers: • Head of Service, Education and Learning Service • Elective Home education Service Manager Linked Service Delivery Plan: • EHE Action Plan • Protection and Court • Quality Assurance | Outcome: Local Authority awareness of and response to Children and Young People not placed in school Monthly reporting of children in priority groups (CP / CIN / YOS) who are EHE and have been allocated Monthly report visited Production of monthly report | Jul-20 Mar-21 Apr-20 | 100% of cases allocated to an EHE Home Visitor 100% of priority groups visited Monthly report to Service Lead to be produced | Schools; Children's Social Care; Youth Justice Schools; Children's Social Care; Youth Justice Schools; Children's Social Care; Youth Justice |

Special Educational Needs and Disabilities

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|---|---|---|---|
| Responsible Officers: Head of Service, Education and Learning Service Special Educational Needs and Disabilities Service Manager Clinical Commissioning Group Linked Service Delivery Plans: SEND Partnership Plan Children with Disabilities Quality Assurance | Planning and review of education provision (include resource units, special schools and post 16) Present proposals to Cabinet requesting permission to consult Formal Consultation Final decision on proposals Ensure systems for transition and preparation for adulthood are robust Evidence of awareness raising in respect of the transition pathway/best practice guidance Improved pathway for young people transitioning from CAMHS Improved effectiveness of Transitions Operational Group (TOG); ensuring this identifies the needs of young people in out of city placements currently in Yr 10 and planning for their future support Development and implementation of Transition Audit tool to measure effectiveness of implementation and impact of the pathway/best practice guidance. Timely completion of Education, Health and Care Plans Ensure that Education Health and Care Assessments are completed in 20 Week Statutory timescale | Jul-21 Jul-21 Jul-21 Sep-20 Sep-20 Mar-21 Apr-20 | Evidence of training, awareness raising and promotion of transitions pathway. Confirmation of service offer and pathway Parents will have options for young people with SEND beyond the age 0f 16 70% of audits graded good or outstanding 70% of audits graded good or outstanding | SEND Partnership Board Jigsaw / Adults Services / CCG CAMHS Jigsaw / Adults Services / CCG Jigsaw / Adults Services / CCG Providers, Educational Psychology, Children with Disabilities Team, Children's Social Care |



Children in Need of Help and Protection

| AREA | PRIORITIES | TARGET | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|--|------------------|--|--|
| | | DATE | | |
| Responsible Officers: | Outcome: Prompt Pre-proceedings | | | |
| Head of Service, Children's Social Care Children in Need of Help and Protection Service | Maintain PLO tracking system with Senior Mgt oversight Monitor level of children have pre proceedings starting within 15 WDs of date of decision to enter pre-proceedings | Oct-21 Apr-21 | Evidence of each weekly legal planning meeting with 4 LPM per month 90% of children have pre proceedings started within 15 WDSs | Business Support Legal services; business support |
| Manager Linked Service Delivery Plans: | Monitor level of Pre proceeding assessments completed within 16 weeks from the pre-proceeding meeting | Apr-21 | 80% of pre proceeding assessments completed within 16 weeks | Legal services; business support |
| • Assessment | Dip Sampling examples of pre-proceedings letters | Oct-21 | 100% of letters audited that evidence use of plain language | QA Unit |
| Protection and Court Looked after Children Missing Exploited Trafficked Children with Disabilities Children's Resource Service | Engage with judiciary and CAFCASS Outcome: The quality of assessments and plans ensure that looked after children get the right help quickly and impact is clearly measured | Jul-20 | Evidence of CLT approach to key stakeholders to brief on progress for court work. | CAFCASS; Family Court |
| Quality Assurance | Monitor number of children becoming Looked After children | Mar-21 | Total number of children becoming Looked after Children, reviewed on a monthly basis | Edge of Care; QA Unit |
| Core Ofsted Recommendations | Convene thematic audits for quality of work for cases stepping down | May-21 | 70% of audits graded good or outstanding | QA Unit |
| 'The quality of assessments and plans ensure that looked after children get the right help quickly and impact is clearly measured.' | Analyse gradings in Thematic Audits for Looked After Children Outcome: Effective interventions with families. | May-21 | 70% of audits graded good or outstanding | QA Unit |
| 'Management provide advice | Monitor level of staff engagement with Domestic Abuse; parental MH and / or parental substance misuse training. | Oct-20 | 90% of staff attending training | Practice Development Team |
| on how to undertake direct work with children and regular reflective discussions on their progress.' | Analyse Gradings in Thematic Audits – (DA / SM / MH) | Apr-21 | 70% of audits graded good or outstanding | QA Unit |



Children in Need of Help and Protection (continued)

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|---|--|----------------|---|---|
| Responsible Officers: | Outcome: Effective interventions with families. | | | |
| Head of Service, Children's Social Care | Ensure practitioners receive briefings on 'Social Work Practice Management and Standards' | Mar-21 | 90% of staff attending briefings | PACT Service Manager /QA Unit |
| Children in Need of Help | Ensure staff have signed to agree understanding of the standards | Mar-21 | 100% signing to acknowledge receipt of standards | PACT Service Manager / QA Unit |
| and Protection Service Manager | Undertake viability study for implementation of Signs of Safety | Oct-21 | Evidence of Signs of Safety viability study | Elia / CCM Project Team |
| Linked Service Delivery Plans: | Analyse gradings in Thematic Audit focussed on the Impact of Restorative Practice approaches upon casework. | Oct-21 | 70% of audits graded good or outstanding | QA Unit |
| Quality Assurance Assessment | Provide evidence of engagement with Teams re Level 2 Training with Restorative Practice examples identified | Oct-21 | Case studies / exemplars of practice from training | Workforce Development Team |
| Protection and Court Looked after Children Missing, Exploited | Monitor level of children who have a permanence placement plan by their 2nd review | Jan-21 | 80% of children who have a permanence plan by second review | Data Team / IRO Team |
| Trafficked • Children with Disabilities • Children's Resource | Outcome: Management provide advice on how to undertake direct work with Children and Young People and regular reflective discussions on their progress | | | |
| Service • Quality Assurance | Monitor the level of children subject to CP Plan seen in the last 15 WD | Jan-21 | 90% of children subject to CPP seen within 15 WD | Data Team |
| Core Ofsted Recommendations | Monitor the level of children subject to CPP seen alone | Jan-21 | 90% seen alone in the last 4 weeks | Data Team |
| 'The quality of assessments | Outcome: Children subject to CP Planning have Outcome focussed plans | | | |
| and plans ensure that looked after children get the right help quickly and impact is | Monitor the number of children subject to child protection planning | Mar-21 | Number of children subject to CPP, reviewed on a monthly basis with a target of 328 | QA Unit / Data Team |
| 'Management provide advice | Monitor the rate of children subject to child protection planning | Mar-21 | Rate of children subject to CPP is <65 per 10,000 | QA Unit / Data Team |
| on how to undertake direct work with children and regular reflective discussions on their progress.' | Monitor core group performance - % convened in timescale | Oct-21 | 90% of children subject to planning who have Core Groups held within timescale (new data request) | Safeguarding Children Partnership / Data team |
| | Analyse outcomes of CPP management audits | Jul-20 | 70% of audits where decision making was assessed to be defensible | QA Unit |



Children's Resource Service

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|---|--|-----------------------------|---|--|
| Responsible Officers: • Head of Service, Integrated and Specialist Service • Children's Resource Service Manager Linked Service Delivery Plans: • Assessment • Protection and Court • Quality Assurance Core Ofsted Recommendation 'The Quality of assessments and plans to ensure that all children get the right help quickly and that its impact is clearly measures'. | Outcome: Effective support to prevent deterioration of home circumstances Monitor number of Edge of Care referrals Monitor level of cases showing significant improvement between start and latest 'goal-based scores' Monitor number of open EoC cases Monitor level of Edge of Care children that have remained with their family - Monthly data set Outcome: Evidence of impact of specialist assessments and interventions with families Analyse Specialist Assessment Team, Behavioural Resource Service and Family Drug and Alcohol Court case exemplars. Outcome: The Quality of assessments and plans to ensure that all Children and Young People get the right help quickly and that its impact is clearly measures. Ensure that assessments and plans are of a good quality - Analysis of gradings in thematic audits Contact Centre | Dec-20 Dec-20 Dec-20 Mar-21 | >623 as Cumulative monthly total 80% of cases showing improvement >109 Monthly total 75% of cases that have remained with their family Service to provide case studies each quarter 70% of cases graded good or outstanding | Solent NHS Trust; CCG; Children's Social Care; Quality Assurance Unit Solent NHS Trust; CCG; Children's Social Care; Quality Assurance Unit Solent NHS Trust; CCG; Children's Social Care; Quality Assurance Unit Solent NHS Trust; CCG; Children's Social Care; Quality Assurance Unit Solent NHS Trust; CCG; Children's Social Care; Quality Assurance Unit Quality Assurance Unit |
| | | | | |



Youth Justice

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|--|----------------|--|--|
| Responsible Officers: | Outcome: YOS will be appropriate resourced | | | |
| Head of Service, Integrated and Specialist Service Youth Offending Service | Recruit suitably qualified workers . Outcome: Educational attainment of young people known to YOS will improve | Mar-20 | Statutory partner contributions will be confirmed for the current year and appropriate staff recruited | Youth Justice Management Board |
| Manager Linked Service Delivery Plans: | Improve ETE outcomes for children who offend. | Sep-20 | >75% of children are engaged in education, employment or training (EET) provision when disposal ended | ETE Strategic Leads at YJMB; Violent Reduction Co-ordinator; Targeted and Restorative Service Lead |
| Youth Justice Improvement Plan | Outcome: YOS premises are safe | | , | |
| Quality Assurance | Youth Justice Management Board will receive report covering health and safety at Church View. Capital resource to be identified to achieve safe operation of building and/or identify alternative location | Jan-21 | Completion of report and confirmation of action plan to respond to findings. | Building Services |
| | Outcome: YOS partnership governance will be effective The partnership will agree the Youth Justice Strategic Plan and ensure appropriate representation on the Board. | Jan-21 | Evidence of Board Members to provide agreed level of senior representation at YJMB and Board members providing direction and leadership to the YOS; ensuring compliance with statute and good governance arrangements. | Youth Justice Management Board |
| | Outcome: BAME over-representation will be understood and addressed | | | |
| | Understand and respond to level of BAME offending in relation to population | Jan-21 | -1.18% BAME in Southampton as comparison with SN and highly performing services | Violence Reduction Unit |
| | Outcome: Plans for young people will be effective | | | |
| | Improve quality of plans | Oct-20 | Evidence of service compliance with | QA Unit |
| | Reduce custody rate | Oct-20 | National Standards Reduce rate to <0.3 | Youth Justice Management Board |
| | Outcome: Out of Court assessments will be effective | | | |
| | Improve quality of FTE assessments | Jan-21 | Evidence of service compliance with National Standards FTE rate per 100,000 10 – 17 years | Hampshire Constabulary/ Early Help Services |



Missing, Exploited, Trafficked

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|---|------------------|--|---|
| Responsible Officers: Head of Service, Integrated and Specialist Service Children's Resource Service Manager | Outcome: Prompt response to missing Children and Young People Monitor the level of Return Home interviews that are held within 72 hours. Analyse the level of children who go missing being offered a RHI. | Oct-21 Oct-21 | 90% of RHI that are completed within 72 hours. 90% of children (viable) who go missing offered a RHI. | Hampshire Constabulary Hampshire Constabulary |
| Missing, Exploited, Trafficked (MET) Team Manager | Outcome: Effective direct work Evidence ways of partnership working that keeps Children and Young People safe | Jan-21 | Monthly MET Ops Panel to be convened | MET operational group |
| Missing, Exploited, Trafficked Protection and Court | Outcome: Vulnerable Children and Young People are closely monitored • Evidencing that MET actions (tracker) are completed prior to closing referral | Jul-20 | Evidence of maintenance of MET tracker | MET operational group |
| Core Ofsted Recommendation 'The quality of assessments and plans to ensure that all children get the right help quickly and that its impact is clearly measured.' | Outcome: Looked after Children and Young People accommodated outside of Southampton receive return home interviews. • Monitor number and % of missing LAC offered RHI. | Jan-21 | 100% of looked after children offered a return home interview. Where a RHI does not take place the reason will be recorded and the strategy to engage with the looked after children explored. | National Youth Advocacy Service |
| | Outcome: The quality of assessments and plans to ensure that all Children and Young People get the right help quickly and that its impact is clearly measured • Analyse quality of risk assessments in Thematic Audits | April-21 | 70% of audits graded good or outstanding | Children's Social Care / QA Unit |



Looked after Children

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|---|---|------------------|--|--|
| Responsible Officers: | Outcome: Children and Young People achieve permanence in a timely | | | |
| Head of Service, Children's Social Care | Monitor number of Looked After children | Mar-21 | Total number of Looked after Children, reviewed on a monthly basis to 420 | EoC; Data Team |
| | Monitor rate of looked after children | Mar-21 | Reduce rate to <82.4 per 10,000 | EoC, Data Team |
| Looked After Children Service Manager | Monitor level of LAC children with a recorded permanence plan by their 2nd LAC Review | Apr-21 | 80% of children with permanence plan recorded on case management system | Business Support, IRO team |
| Service Manager, Protection and Court | Monitor level of LAC who have been matched and had permanence plan (LT Fostering) matched with their carers | Apr-21 | >80% of looked after children matched and with permanence plan | Business Support; IRO team |
| Linked Service Delivery Plans: | Outcome: The quality of assessments and plans ensure that all Children and Young People get the right help quickly and that it's impact is clearly measured | | | |
| Looked after ChildrenCare Leavers | Monitor level of LAC with an authorised care plan Ensure effective and Child centred CIC review process - Analysis of | Oct-20 Nov-20 | 95% of LAC with authorised care plan 100% of IRO alerts addressed within 10 WD timescale | IRO Team; Business Support Operational Teams |
| Protection and Court | IRO Alerts • Monitor level of LAC Reviews scheduled in the month held within | Oct-20 | 90% of reviews held within timescale | Data Team, IRO team |
| Quality Assurance | timescale Check quality of work for children ceasing to become looked after | Nov-20 | 70% of audits graded good or outstanding | LAC and PACT Service Managers / QA Unit |
| Core Ofsted Recommendations 'The quality of | Ensure SMART and detailed individual Planning for each child / and siblings - | Apr-21 | 70% of audits graded good or outstanding | QA unit |
| assessments and plans ensure that all children get the right help | Outcome: Children and YP are placed in Suitable with discontinued use of Bed and Breakfast accommodation | | | |
| quickly and that it's impact is clearly measured.' | Ensure that placement sufficiency strategy is reviewed and approved - | May-20 | Approval of sufficiency strategy. 50% of children in own provision | Integrated Commissioning Unit; Fostering Service; Communications Team; HR; Finance |
| 'Children and YP are placed in suitable | Monitor level of Looked After Children placed >20 miles from LA | Jan-21 | 17.7% of children placed > 20 miles from Southampton | Placements Team |
| accommodation with discontinued use of Bed and Breakfast accommodation'. | Cease placement of Looked after Children Placed in emergency beds / B&B | Jul-20 | 0 children to be placed in Bed and Breakfast | Corporate Parenting Committee Integrated Commissioning Unit; Housing |
| 'Better Management Advice for social workers on how to | | | | |
| undertake effective | | | | 38 |

Looked after Children (continued)

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|---|---|---|--|
| Responsible Officers: • Head of Service, Children's Social Care • Looked After Children Service Manager • Service Manager, Protection and Court Linked Service Delivery Plans: | Outcome: Children and YP are Involved and Participate in in decisions that affect them Increase the level of children aware of why they are in care Appoint Life story lead and measure impact of their engagement with Children and Young People Monitor the number of social workers attending Finding the Right Words training Provide evidence that the service listens and responds to the views of Children and YP through our work with them. Promote attendance of LAC and Careleavers at Children in Care Council and Corporate Parenting Board / Forums Monitor number of Children Using Mind of My Own Outcome: Effective Partnership and collaborative working to meet the | Oct-20 Apr-21 Oct-20 Oct-20 April-21 Jan-21 | >80% (4-7 Years) of children aware of why they are in care Recruitment into post. Agree and monitor process for life story work completion 100% social workers in PACT and LAC attending training 70% of audits graded good or outstanding Ensure attendance is recorded, monitored and promoted. Numbers of children using Mind of My Own on a monthly basis | Bright Spots HR Practice Development Team Operational Teams / QA Unit Operational Teams / Corporate Parenting Committee QA Unit; Participation Officer |
| Looked after Children Care Leavers Protection and Court Quality Assurance | mental health needs of Children and YP Embed a mental/emotional health worker within the Looked After Children and Care Leaver's Service Ensure Strengths and Difficulties Questionnaire Completion by key Stakeholders | Mar-21 Mar-21 | Worker identified and embedded SDQ completion referenced in assessments and plans. | Behavioural Resource Service Data Team; LAC Health Leads |
| Core Ofsted Recommendations 'The quality of assessments and plans ensure that all children get the right help quickly and that it's impact is clearly measured.' | Monitor level of LAC's Health Assessments completed to include Dental health, vaccinations Outcome; Better Management Advice for social workers on how to undertake effective work with Children and Young People Ensure regular reflective discussion on Children and Young People's progress - Analysis of quality of Supervision | Apr-21 Jan-21 | 90% of health assessments completed 70% of audits referenced good or outstanding | LAC Health Leads QA Unit |
| 'Children and YP are placed in suitable accommodation with discontinued use of Bed and Breakfast accommodation'. 'Better Management Advice for social workers on how to undertake effective work with children.' | Outcome: Senior Leaders are appraised of looked after children's' educational progress: Maintain the % of looked after children with a Personal Education Plan (PEP) at above 95% Report to Improvement Board by Virtual Head | Oct-20 Nov-20 | Maintain the % of looked after children with a Personal Education Plan (PEP) at above 95% Attainment and attendance measures for children's progress include early years; phonics; reading, writing and maths (KS1 &2); english and maths KS4; attendance, persistent absence; exclusions | Virtual School Virtual School Virtual School |

Care Leavers

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|--|------------------------------|--|--|
| Responsible Officers: • Head of Service, Children's Social Care • Care Leavers Service Manager Linked Service Delivery Plans: • Looked after Children • Quality Assurance Core Ofsted Recommendation | Outcome: Children and YP are placed in Suitable accommodation with discontinued use of Bed and Breakfast accommodation • Monitor level of Care Leavers in contact and in suitable accommodation • Cease placement of Looked after Children and Young People Placed in emergency beds / B&B Outcome: Care Leavers will benefit from Comprehensive and Effective risk management and pathway planning • Monitor level of Looked after Children and Young People aged 16+ or open Care Leavers with an authorised Pathway Plan • Analyse gradings in Thematic Audits | Oct-20 Jul-20 Jul-20 Jan-21 | 81% of care leavers in suitable accommodation O Children and Young People placed in Bed and Breakfast on a monthly basis 95% of care leavers with an authorised Pathway Plan. 70% audits graded good or outstanding | Integrated Commissioning Unit; Housing Integrated Commissioning Unit; Housing Business Support QA Unit |
| 'Children and YP are placed in Suitable with discontinued use of Bed and Breakfast accommodation' | Outcome: Better Education Training and Employment outcomes • Monitor level of Care leavers not in contact or NEET (either not in contact, or in contact and NEET) • Monitor number of hits on LAC/Care Leavers website Outcome: Better Health outcomes • Report on the number of care leavers with health passports | Oct-20 April-21 Jul-20 | <40% care leavers not in contact or NEET Apprenticeships advertised on website and hit rate 90% of care leavers with health passports at their 18 th birthday | Education Service; Careers Service Education Service; Careers Service LAC Health Leads. |



Fostering

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|--|----------------------------|--|--|
| Responsible Officers: Head of Service, Children's Social Care Fostering and Adoption Service Manager Linked Service Delivery Plans: | Outcome: Children and Young People benefit from enhanced recruitment, provision and retention of Foster Carers Monitor the level of placement stability meetings held. Monitor the number of placement breakdowns / disruptions / ceased. Provide evidence of social workers attending Fostering Panel Undertake Foster Carer Training Evaluation. Review of training programme quarterly to support the approval and continued registration of in house foster carer | Apr-21 Jan-21 Jul-20 | Number of placement stability meetings on a monthly basis. 100% of social workers attending on a monthly basis. Number of carers attending training on a quarterly basis Evidence of: foster carer training evaluation | Data Team Children's Social Care Foster Carer Network; Learning and Development |
| Fostering Adoption Looked after Children Care Leavers Quality Assurance | Increase the % of Children and Young People whose permanence plan is long term fostering are matched with their carers Confirm number of foster carers who have attended Restorative Practice training | Mar-21 Mar-21 | completed; Reviewed and updated training programme Increase the % to 80% or more 100% of foster carers attending | Social Work Teams Foster Carer Network; Learning and Development; QA Unit Corporate Parenting Committee |
| | Provide evidence of recruitment campaign having an impact on number of in-house carers | Jul-20 | 200 in-house foster carers by 2023 | Integrated Commissioning Unit; Fostering Service; Communications Team; HR; Finance |
| | Increase the % of Children and Young People placed in our own provision | Dec-21 | Increase to >50% own provision | Integrated Commissioning Unit; Fostering Service; Communications Team; HR; Finance |
| | Completion of Fostering Standards Audit | Oct-20 | Annual audit report to provide assurance on compliance | QA Unit |
| | Outcome: Appropriate Private Fostering Arrangements are in place Creation and ratification of Private Fostering Policy. Provide partnership numbers for attending Safeguarding / Private Fostering Training Provide evidence of effective recognition and progression of Safeguarding concerns | Oct-20 Oct-20 Apr-21 | Policy document agreed and 'go live' Evidence of training attendance at in house and partnership events. 70% of cases graded good or outstanding | Safeguarding Partnership Safeguarding Partnership QA Unit |
| | Outcome: Enough Sufficient Placements to meet diverse needs of Children and Young People Review foster carer recruitment strategy Provide Tier 4 fostering resource for older adolescents and report on number of placements offered for older adolescents and 'step down' | Jul-20 Feb-21 | Strategy reviewed and 'go live' Number of placements active | Corporate Parenting Committee Finance; HR; Recruitment 41 |

Adoption

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|---|--|-------------------------------------|---|---|
| Responsible Officers: • Head of Service, Children's Social Care • Fostering and Adoption Service Manager Linked Service Delivery Plans: • Fostering • Adoption • Looked after Children • Care Leavers • Quality Assurance | Outcome: Adoption Arrangements managed by 'Adopt South' Monitor level of adoptions Monitor time between entering care and placement for adoption Undertake Effective high quality Assessments Outcome: Professional support is provided to adopters and adoptive families Monitor level of adopters receiving Outline of support offer Collate monthly case studies from service and RAA. Outcome: Help Children and Young People to understand their birth families history, care experience and journey to adoption Monitor number of outstanding life story books | Mar-21 Mar-21 Oct-21 Apr-20 Oct-20 | 3 adoptions per month (12 month average) Number of days between entering care and adoption is <463 Service to provide case examples on a monthly basis. 70% of audits graded good or outstanding Numbers and % of adopters engaged Service to provide case examples on a monthly basis. 70% of audits graded good or outstanding <13 outstanding life story books | Adopt South; Family Court Adopt South; Family Court Adopt South; QA Unit Adopt South Adopt South; QA Unit Adopt South; Adopt South; Adopt South; Adopt South; Adopt South; Adopt South; Adoption Service Manager |

Local Safeguarding Children Partnership

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|--|----------------|---|---|
| Responsible Officers: • Head of Service, Integrated and | Outcome: Workforce Awareness of key practice themes and effective practice response. • Analyse Practitioner survey feedback regarding Neglect Toolkit; | Nov- 20 | 100% of practitioners completing | Safeguarding Children Partnership |
| Specialist Service • QA Unit Manager | | | online surveys indicating that they are aware of toolkit. | · |
| Safeguarding Children's | Monitor number of practitioners attending Neglect Training Monitor the number of practitioners from Agencies attending Our | Jan-21 | Numbers attending training on a quarterly basis | Practice Development Team |
| Partnership Team Manager | Practice our Learning and LSCP training. | Oct-20 | Six monthly training report showing courses attended; practitioner feedback; examples of impact on | Safeguarding Children Partnership; Practice Development Team |
| Linked Service Delivery Plans: | | | practice; number of agencies / practitioners attending | |
| Quality Assurance SSCP Business Plan | Ensure regular focus on service response to case reviews | Sep-20 | Quarterly submission of report to Learning and Improvement Panel and key stakeholders (Cabinet Member) | Meeting support |
| | Provide assurance against core practice themes (neglect; CSAFE) | Dec-20 | 70% of audits graded good or outstanding | Children's Social Care |
| | Outcome: The Children and Learning Service can evidence traction against actions arising from serious case and child safeguarding practice review recommendations. | | | |
| | Quarterly report to Children's Improvement Board by Quality Assurance Unit Manager and Safeguarding Partnership Team Manager. | Nov-20 | 100% of reviews are completed in timescales | Safeguarding Children Partnership |
| | | | Quarterly report shows progress against recommendations and highlights barriers for the Board's attention, so as to support resolution. Progress will be tracked through Board minutes. | |



Local Safeguarding Children Partnership (continued)

| Responsible Officers: Need of Service, | | | | | |
|---|--|---|------------------------|---|--|
| and Young People experiencing sexual abuse in the family environment, by responding to the recommendations of the Freddie SCR: Integrated and Specialist Service OA Link Manager Sofeguarding Children's Portnership Team Manager - Sofeguarding Children's Portnership Team Manager - Cludity Assurance SSCP Business Plan For Southampton Children's Services of intra-familial child sexual abuse, and to examine blocks and barriers to gining langer were there may be threshold disagreements For Southampton Children's Services on a case where there may be threshold disagreements To increase the knowledge and confidence of front line practitioners, in particular social workers, school nurses and police in assessing and working with cases where child sexual abuse and exploitation may feature For the SCP to seek assurance from Southampton Children's Services about the quality of management supervision and employee welfare, plus management struttiny and oversight in Children's Services about the quality of management supervision and employee welfare, plus management struttiny and oversight in Children's Services about the quality of management supervision and employee welfare, plus management struttiny and oversight in Children's Services about the quality of management supervision and employee welfare, plus management struttiny and oversight in Children's Services where where management supervision and employee welfare, plus management struttiny and oversight in Children's Services where | AREA | PRIORITIES | | | KEY PARTNERS |
| | Head of Service, Integrated and Specialist Service QA Unit Manager Safeguarding Children's Partnership Team Manager Linked Service Delivery Plans: Quality Assurance | and Young People experiencing sexual abuse in the family environment, by responding to the recommendations of the Freddie SCR: SCP to request information about the consistency of Chairs for Child Protection Conferences over the last 12 months and, where there has been inconsistency i.e. more than one Chair, seek assurance that the Plans for Children and Young People subject to Child Protection Plans are fit for purpose and have pace. the SCP to seek assurance about the quality, effectiveness and compliance with Core Groups when Children and Young People are subject Child Protection Plans and an update on actions taken to remedy the points raised in the March 2018 audit conducted by Children's Services. The SCP to seek an update about progress on actions arising from the April 2018 audit conducted by Children's Services which looked at cases of intra- familial child sexual abuse, and to examine blocks and barriers to effective multi agency work around the issue of child sexual abuse For Southampton Children's Services to assure the Safeguarding Partnership that there is a robust system for seeking legal advice, sharing information, recording legal planning meetings and tracking outputs - all in a timely manner. This should include a process for monitoring any gatekeeping which may act as a barrier to gaining a legal perspective on a case where there may be threshold disagreements To increase the knowledge and confidence of front line practitioners, in particular social workers, school nurses and police in assessing and working with cases where child sexual abuse and exploitation may feature For the SCP to seek assurance from Southampton Children's Services about the quality of management supervision and employee welfare, plus management scrutiny and oversight in Children's Services for cases where | Dec-20 Oct-20 Dec-20 | Learning (SILG) subgroup of the Safeguarding Children Partnership. Report to the Serious Incident and Learning (SILG) subgroup of the Safeguarding Children Partnership Update by Child Protection Advisor and QA Unit Manager. Safeguarding update to Safeguarding Children Partnership by Head of Service (CSC) and Senior Solicitor. Embedding of CSAFE training programme; evidenced by training completion figures and staff surveys. Supervision guidance launched; supervision training completion; 70% | Child Protection Advisor. Safeguarding Children Partnership / Child Protection Advisor. Child Protection Advisor. Child Protection Advisor. Head of Service (CSC)/ Senior Solicitor Safeguarding Children Partnership / Learning and Development / Communications Team. |



Local Safeguarding Children Partnership (continued)

| AREA | PRIORITIES | TARGET DATE | PERFORMANCE MEASUREMENT | KEY PARTNERS |
|--|---|----------------|---|--|
| Personsible Officers: Head of Service, Integrated and Specialist Service QA Unit Manager | Outcome: Children and Learning Service to improve outcomes for Children and Young People experiencing sexual abuse in the family environment, by responding to the recommendations of the Freddie SCR: • For the SCP to seek assurance from Southampton Children's Services that the decision making process and practice around viability assessments is robust and that decisions and assessments are completed in a timely manner | Mar-21 | Thematic audit; 70% of cases graded good or outstanding | Practice Development Team; Fostering Service |
| Safeguarding Children's Partnership Team Manager | Robust assessment of children and their families who present with sexualised behaviour, make disclosures, or where IFCSA is suspected | Oct-20 | Expert consultancy support for social workers undertaking assessments. | Child Protection Advisor /CSAFE Consultant / Lucy Faithful Foundation /Centre for Expertise (Child Sexual Abuse) |
| Linked Service Delivery Plans: • Quality Assurance | Quality Assurance framework to regularly audit and analyse assessment, supervision, decision making and recording for children at risk of sexual abuse | Dec-20 | 70% audits graded good and outstanding; evidence of learning informing development of new case management system. | Practice Development Team / Client Case Management (CCM) Project Team |
| SSCP Business Plan | Specialist assessments should be analysed within management oversight and inform assessments | Mar-21 | Thematic audit; 70 % audits graded good and outstanding. | Practice Development Team |
| | External escalation processes should be clear and followed | Nov-20 | Inclusion of links to HIPS escalation process in all CPC and core group minutes. | Business Support / Team Standards Co-ordinators |
| | All Children and Young People being presented at an ICPC should have an allocated social worker within the PACT service prior to initial conference | Nov-20 | Allocation / participation of social workers in conferences to be highlighted in weekly CP Advisor reports | Child Protection Advisor |
| | Family members to be considered within contingency plans | Mar-21 | Thematic audit; 70% of cases graded good or outstanding | Head of Service (CSC) / Practice Development Team |
| | The decision for the use or not of child sexual abuse medicals should be reflected in the decision making within the strategy discussion | Dec-20 | Thematic case audit with Designated Doctor; 70% of cases graded good or outstanding | MASH, Assessment and EDT Service Manager, Designated Doctor - Safeguarding |
| | Confirm access to therapeutic resources for children who have experienced sexual abuse | Jan-21 | Local offer outlined in CSAFE strategic framework | HoS / Children's Resource Service / Child protection Advisor |



Improvement Plan 2020 - 21
Southampton Children and Learning Service
September 2020

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