

Action Plan: Management Oversight of Unregistered Placements, Placements with Parents and placements with connected carers – 12<sup>th</sup> July 2021

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Julian Watkins – Head of Service	Urgently review all existing unregistered placements to provide assurance that 1. Initial checks on the quality and safety of the placement have been undertaken 2. The child and the placement are being visited regularly, face to face, with close oversight in place of frequency and quality of visiting 3. There is a clear plan in place for the child with contingency, considering success of ongoing placement search 4. The registration status of the placement is clear and has been verified by Ofsted	By 1 <sup>st</sup> June 2021	Appropriate approvals and robust senior management oversight will be evident on the child’s file  There will be written evidence of registration status and contact with Ofsted, if required	Provider  Ofsted	Completed. This work has been undertaken by the HoS. Moving forward, the new panel arrangements will ensure rigorous oversight is BAU, alongside monthly briefings to the Deputy Director and Executive Director.
Julian Watkins – Head of Service	Urgently review all PWP and regulation 24 placements to ensure that approvals are in place for each child and properly recorded on Paris	By 28 May 2021	Performance information taken directly from Paris confirms that approvals are in place for all children	Data team	Completed. Head of Service reviewed cases in June 2021 and has ongoing oversight as nominated officer.
Martin Smith – Service Manager, Permanence	Act as named lead re unregistered placements in future – to maintain oversight and advise, update and seek guidance from Ofsted.  A check list will be developed covering the information Ofsted needs to know.	By 31 <sup>st</sup> July 2021	The service practice standard is that unregistered provision should not be used. However, in circumstances where there is no alternative: <ul style="list-style-type: none"> <li>Senior managers will have detailed oversight of quality of placement, plan for child and placement search</li> <li>Ofsted will be sighted and updated</li> <li>Non-negotiable practice standards will apply, including notification to host authority and regular face to face visiting</li> </ul>	Commissioning	Partially complete and within timeframe - The service manager has confirmed he will act as lead, with the Deputy Director being point of contact with Ofsted. The checklist will be explored by the service manager and deputy director.
Martin Smith	Confirmation of permissions / oversight process and checks with unregistered providers as Ofsted would do for registered placements	By 30 <sup>th</sup> August 2021	Quality and safety of placements will be assured (** this will be separate to social work intervention with the child)	Commissioning	Partially complete and within timeframe. This is now in our practice guidance, which will be signed off at the service managers meeting on 13 <sup>th</sup> July 2021.
Julian Watkins – Head of Service	Introduce a new panel to ensure that unregistered placements are robustly overseen and tracked	By 30 <sup>th</sup> June 2021	Unregistered placements will be approved by a senior manager, and rigorously overseen and tracked. This will be evidenced on the child’s file and reported on a monthly basis to senior managers by the Head of Service	Business Support	Completed. Initial assurance panel held 9 June. Terms of reference confirmed. Fortnightly ‘exceptional arrangements panel’ diarised from 16 July. Deputy Director is vice chair.
Julian Watkins – Head of Service	Management approvals of unregistered placement will be recorded as case notes in Paris. This will include senior management oversight at head of service level as a minimum	By 30 <sup>th</sup> June 2021	Management oversight will be consistent, clear and evident on the child’s file	Paris Team	A process has been agreed to support consistent HoS oversight, with administrative support.

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Jo Feeney – Performance Manager	Review performance and data reporting in respect of unregistered, PWP and reg.24 placements. Provide reports to relevant panel and to senior leadership team via learning and improvement panel and Improvement Board	By 30 <sup>th</sup> June 2021	Data will be accurate, up to date and shared in the right forums to allow proper scrutiny. The service will be better held to account in respect of timeliness of approvals through more detailed data reporting.	Data Team	Complete – the performance manager now provides regular reports to inform senior management oversight. Moving forward, this will support the panel activity.
Martin Smith – Service Manager, Permanence	Identify a lead member of staff to monitor placement information; updating changes where necessary	By 30 <sup>th</sup> June 2021	Placement information will be consistently accurate	Core social work teams / Children with Disabilities team	This is complete – the role of the Looked after Children placement officer has been strengthened. Going forward, we will ensure that every social worker is aware of post.
Jo Feeney – Performance Manager	Ensure that learning from inspection informs case management system development.	By 30 <sup>th</sup> June 2021	Unregistered and Unregulated placements recording in Care Director will be clear and support good practice.	Care Director Project Team	Complete - The performance manager is also the link person for Care Director implementation and is ensuring that the new system meets the service data requirements in these areas.
Martin Smith – Service Manager, Permanence	Practice briefing to staff regarding respect of unregistered, PWP and reg.24 placements  <i>(Draft appended)</i>   Draft Briefing for Staff.docx	By 16 <sup>th</sup> June 2021	Staff will begin to receive clear, up to date guidance regarding their responsibilities.	Communications team	Complete – Practice Development Team bulletin has been circulated.
Stuart Webb – Quality Assurance Unit Manager / Karen Biddle – Principal Social Worker	Mandatory briefings for relevant staff on minimum expectations and good practice in relation to reg 24, PWP and unregistered placements.	By 30 <sup>th</sup> August 2021	All relevant staff will attend or watch recording, and this will be part of induction for new staff including agency.	Communications team	Discussion / planning arranged with Principal Social Worker for 12 <sup>th</sup> July 2021.
Sarah Ward – Service Manager, PACT / Mary Hardy – Service Manager, Looked after Children & Care Leavers / Jacqui Schofield, Service Manager, MASH, EDT and Assessment / Stephanie Simpson – Team Manager, Children with Disabilities Team	Implement learning circles- so awareness regarding key themes and responsibilities continues and timeliness of risk assessment completion improves.	By 30 <sup>th</sup> August 2021	Staff will be able to confidently articulate their responsibilities. Individual and team practice will improve as a result of live case discussions in learning circles.	Operational teams	Partly complete – In, PACT, this work has begun and will continue to be discussed in team meetings on an ongoing basis to ensure all workers are clear and that any emerging patterns or concerns continue to be addressed. Clarification will be sort regarding the development in the other service areas.

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Sarah Ward – Service Manager, PACT	Engage with core stakeholders, specialist assessment teams and legal services to review cases where approvals have been delayed and to agree a response so that the risk of further delays is eliminated	By 31 <sup>st</sup> August 2021	Stakeholders will support core service decision making; with escalation to Deputy Director if appropriate.	Legal Services / SAT	This will be completed by 31 <sup>st</sup> August 2021.
Julian Watkins, Head of Service / Jacqui Schofield, Service Manager, MASH, EDT and Assessment	Create Emergency Duty Team (EDT) policy / guidance.	By 31 <sup>st</sup> July 2021	Formal Emergency Duty processes and guidance.	Policy Framework Provider	Meeting arranged with HoS and Service Manager on 16 <sup>th</sup> July 2021. Intention is to update existing EDT guidance and circulate / brief the team.
Stuart Webb – Quality Assurance Unit Manager	All activity is covered off in the procurement of the new e-policy resource.	By 30 <sup>th</sup> August 2021	Requirements will be clearly outlined in revised Policy Framework	Procurement Team	Progress evident - Approval to procure Tri.x has now been granted. We are moving to signing the contract.
Elizabeth Robertson – Lead Independent Reviewing Officer	IRO challenge and scrutiny of placements  An IRO Case Discussions will be evident at the onset of any unregulated, unregistered and PWP placement. IRO Case Discussions will take place at agreed frequencies depending on the type of placement. Additionally, a Care Plan Review will be arranged to review the Care/Pathway Plan.	From 10 <sup>th</sup> May 2021	There will be evidence of IRO scrutiny and challenge. Concerns will be escalated appropriately. Impact of any IRO activity will be made clear.	IRO Service	IRO escalation analysis is being circulated to senior management team. In addition, the IROs are participating in the focused audit around levels of contact with looked after children in July 2021.
Stuart Webb – Quality Assurance Unit Manager	Case audit of VB; to understand use of unregistered placement; placement decision making and quality of practice	22 <sup>nd</sup> July 2021.	QA Unit review results to be shared with DD and HOS and discussed with placement and social work teams.	Practice Development Team	In train – audit has been allocated to an advanced practitioner in the Practice Development Team.
Julian Watkins – Head of Service; Mary Hardy - Service Manager, Looked after Children and Care Leavers; Stuart Webb, Quality Assurance Unit Manager	Monitoring of direct visits to children and young people in care in their placements.	By 10 <sup>th</sup> June 2021 (Review position in Learning and Improvement Panel)	The service will be reassured that children have been seen face to face, continue to be seen and are safe and stable in placement.	Data Team	Complete – the service now has a good understanding of the levels of face to face contact through weekly reports. A clear management expectation has been given to staff regarding contact, which we said will be in line with DfE six weekly requirements. In addition, we have focused audit activity running for four weeks in July 2021 involving the team managers and IROs so that we can understand the quality of practice and contact with children.

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Stephanie Murray – Deputy Director; Julian Watkins – Head of Service; Stuart Webb, Quality Assurance Unit Manager	Ensure that there is a clear service understanding of quality of practice with and the experiences of looked after children.	30 <sup>th</sup> September 2021	The quality assurance unit will work with the service area to scope and deliver a thematic audit of practice against the Ofsted ILACS framework and local practice standards.	Data Team	This is scheduled to take place in August 2021, after the audits. Plan embedded below.   Looked after Children and Care Leaver audit
Stuart Webb – Quality Assurance Unit Manager	Ensure senior-level line of sight of improvement activity; progress against improvement plans and any ongoing practice issues	From 10 <sup>th</sup> June 2021  Lead IRO report November 2021.	There will be regular reports to Learning and Improvement Panel, Improvement Board and Corporate Parenting Committee. These will include progress reports against the priority improvement plans, alongside the annual Lead Independent Reviewing Officer's report.	Data Team IRO service	Quality assurance report will be presented to Improvement Board in September 2021. IRO annual report scheduled for Corporate Parenting Committee in November 2021. Scrutiny Panel focus on Quality Assurance in January 2022 (recommendation that there is a further QA report to Improvement Board in December 2021, to inform scrutiny panel presentation and report to DfE)

**Action Plan: Management oversight of services to care leavers**

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Julian Watkins – Head of Service; Service, CSC; Mary Hardy - Service Manager, Looked after Children and Care Leavers Stuart Webb, Quality Assurance Unit Manager.	HOS and Service manager will routinely and rigorously review the frequency of face to face visits to care leavers	Initial position by 4 <sup>th</sup> June. Summary position 10 June 2021 (Review in Learning and Improvement Panel).	The service will be reassured that care leavers have been seen face to face, continue to be seen and are safe and stable in their accommodation.  Where care leavers are not in regular contact with the service, assertive attempts are made to establish their welfare and circumstances.	Data Team	Data is reported routinely to senior managers. Current position is that 21% of visits are not in time. However, this is expected to improve with the new staff becoming operational as part of D22 programme.
Julian Watkins – Head of Service; Service, CSC; Mary Hardy – Service Manager, Looked after Children and Care Leavers	Ensuring the right level of staffing in the care leavers service.	By 30 <sup>th</sup> September 2021	Three new personal advisors have recently joined the service. Additional PA support is included within the Destination 22 project plan	HR Recruitment	This is being factored into Destination 22 structural proposals that will be costed week commencing 12 <sup>th</sup> July 2021, ahead of formal consultation proposed to begin at the end of the month.

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Mary Hardy – Service Manager, Looked after Children and Care Leavers	Assertive attempts will be made to engage with care leavers not in contact with the service to review their circumstances	By 10 <sup>th</sup> June 2021 (Review position in Learning and Improvement Panel).	The service will be reassured that any care leavers not in contact have been encouraged to engage, to identify if the service can help them.	Data Team	We are currently in touch with 86% of 17 to 18-year olds and 96% of 19 – 21 year olds.  The service manager has updated that she will use our data to review down into individual PA levels of contact. Clear standards have been outlined with the team. Again, the recruitment of new personal advisors will assist in improving levels of contact.
Mary Hardy – Service Manager, Looked after Children and Care Leavers	Ensure that the emotional and mental health needs of care leavers are explored with their PAs.	By 30 <sup>th</sup> June 2021	All pathways plans will include consideration of emotional wellbeing and how this will be supported, if there is a need.	Designated Looked after Children Nurse	Regarding practice, clear expectations have been set with the team. Strategically, emotional and wellbeing support is included in the Destination 22 programme. A discussion has started with health regarding a single point of contact for Strengths and Difficulties Questionnaire referrals and the intention is to take this to the Multi Agency Children’s Board (MACB). In Care Director, emotional and wellbeing support will be explicitly recorded in Pathways Plans.
Mary Hardy – Service Manager, Looked after Children and Care Leavers  Care experienced apprentices	Care leavers will be consulted to identify any barriers to accessing emotional and mental health support	By 29 <sup>th</sup> June 2021	Where any problems regarding service access are identified, these will be flagged with health colleagues to request support.	Corporate Parenting Committee	Complete - Levels of contact are identified as the biggest barrier to identifying emotional and mental health needs. The service manager updates that the clear practice standards and increased staff will assist. Personal advisors are being encouraged to increase telephone, text and social media contact; alongside face to face contact, which is eight-weekly as a minimum.
Clodagh Freeston – Service Manager, Education Strategy, Planning and Improvement  Sajid Butt – Strategic Skills Manager	A young people progression and NEET prevention update will be presented to corporate parenting committee by the Service Manager, Education Strategy, Planning and Improvement  This forms part of the wider strategic education and skills plans held by the Service Manager, Education Strategy, Planning and Improvement and Strategic Skills Manager	By 30 <sup>th</sup> September 2021	Committee will be assured of education, training and employment activity as part of the service recovery planning from the pandemic.	Corporate Parenting Committee	There are NEET updates provided to the CPC as part of the standing agenda. This area would benefit from more detailed data analysis and the performance manager will support this.
Julian Watkins – Head of Service; Service, CSC	Accommodation elements of the Destination 22 programme (homeless protocol; input into supported living re-procurement) will progress.	By 30 <sup>th</sup> September 2021	Evidence of progress against Destination 22 core workstreams	Integrated Commissioning Unit	Critical area for D22 accommodation workstream is the residential children’s home element. This has been challenging due to the local property market. But there are now plans in place to progress this.

Responsible Officer	Action	Target date	Performance measurement	Key Partners	Review
Donna Chapman – Associate Director, ICU / Stuart Webb – Quality Assurance Unit Manager / Karen Biddle – Principal Social Worker	Transitions task and finish group to brief senior leaders in adults and children’s services on improvement recommendations.	By 30 <sup>th</sup> August 2021	There will be senior management line of sight of activity to improve transitions arrangements and resource identified to address any barriers to effective transition	Adults Services	Meeting with DCS, DAS and Associate Director CCG took place in July 2021. Actions agreed include data analysis and a deep dive into outcomes for children who have transitioned and financial scoping. This will then inform the business case for the Transitional Lead post who will drive the work forward. Initial discussions between the EDs that this would be jointly funded.
Stephanie Murray – Deputy Director; Julian Watkins – Head of Service; Stuart Webb, Quality Assurance Unit Manager	Ensure that there is a clear service understanding of quality of practice with and the experiences of care leavers.	30 <sup>th</sup> September 2021	The quality assurance unit will work with the service area to scope and deliver a thematic audit of practice against the Ofsted ILACS framework and local practice standards.	Data Team	Benchmarking exercise against ILACS framework scheduled for August 2021.
Stuart Webb – Quality Assurance Unit Manager	Ensure senior-level line of sight of improvement activity; progress against improvement plans and any ongoing practice issues.	From 10 <sup>th</sup> June 2021	There will be regular reports to Learning and Improvement Panel, Improvement Board and Corporate Parenting Committee.	Data Team IRO service	Quality assurance report will be presented to Improvement Board in September 2021. Scrutiny Panel focus on Quality Assurance in January 2022 (recommendation that there is a further QA report to Improvement Board in December 2021, to inform scrutiny panel presentation and report to DfE)