

RAG at a Glance and Key



In the subsequent pages attention is focused on areas where 1. There has been progress against an action (there is evidence for this recorded) 2. There is lack of progress against an action, which places it at risk of falling out of timescale, or where the position has deteriorated.

Exception Report – Leadership and Stability

Key developments Service has responded to the Partners in Practice activity / the critical review of the improvement plan and associated documents. Appointment of new executive Director of Children and Families confirmed.	Key risks Management and leadership capacity to address critical improvement areas - notably recruitment and retention and service delivery planning – and a service culture that defaults to prioritising operational activity over practice improvement.
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AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
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Leadership and Stability <i>Grainne Siggins Phil Bullingham</i> Core Ofsted recommendation <i>Social Workers to build long term uninterrupted relationships with children so that their plans are progressed</i>			<ul style="list-style-type: none"> 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 Data Teams monthly Front line Caseload summary data report Stabilise the number and % turnover of Children's Services Service Managers Stabilise the number and % turnover of Children's Services, Senior Managers 	Oct-20 Apr-20 May-20 Jun-20 Oct-20 Oct-20 Jul-20 Apr-21 Apr-21 Jul-20 Oct-20 Oct-20	Progress: Managers are appraised of staff absence (<i>evidence – absence reports</i>). HoS understand caseloads (<i>evidence – weekly caseload and ASYE reports</i>) and understand reasons for staff leaving the service (<i>evidence – exit interview analysis</i>). Risks: Staff sickness has increased to 14.14 days (target 5 days). The service continues to experience challenges to achieving progress against the recruitment and retention action plan; with management capacity impacting upon service engagement in recruitment of staff. Areas of focus are assessment and PACT. There is a general theme around service managers updating their service delivery plans. Time is set on a monthly basis for them to update these, alongside performance commentary. However, response is not consistent. The data requirements in this section of the plan are being updated after the PiP activity; with a focus on assessment, PACT and LAC. Heads of Service are receiving weekly case loads. New Executive Director is scheduled to start on 7 th September. There needs to be clarity regarding HoS and service manager recruitment. Overall RAG rating has been downgraded to red due to staffing pressures and the impact upon case work in core social work areas (assessment, PACT, LAC).
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Exception Report – Quality Assurance Framework

Key developments
 Practice guidance has been drafted. Practice week and Principal Social Worker drop in's delivered virtually. Advanced practitioners allocated to core service areas; with support from seconded Ofsted inspector.

Key risks
 Management and practitioner capacity to engage in practice development opportunities – and a service culture that defaults to prioritising operational activity over practice improvement.

AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
<p>Quality Assurance</p> <p><i>Stuart Webb</i></p> <p>Core Ofsted recommendations</p> <p><i>Management provide advice for social workers on how to undertake direct work with children and regular reflective practice on their progress</i></p> <p><i>Assessment and Plans are of a high quality to children get the right help quickly and that its impact is clearly measured.</i></p>			<ul style="list-style-type: none"> <u>Phase 1</u> Audits to show consistently good quality supervision Audits to show consistently good quality direct work Embed Reflective Practice Consistency of Independent Reviewing Officer function Service compliance against audit programme Review of service self evaluation of practice Promotion of Research in Practice Make sure that panel framework is maintained and impact is evident <u>Phase 2</u> Make sure that data integrity is flagged as a priority within Client Case Management System implementation Fully implement model of practice 	<p>Jul-20</p> <p>Jul-20</p> <p>Jun-20</p> <p>Oct-20</p> <p>Sep-20</p> <p>Oct-20</p> <p>Jul-20</p> <p>May-20</p> <p>Nov-20</p> <p>Jul-21</p>	<p>Progress:</p> <p>Engagement with virtual reflective group sessions over the social distancing period has been good – <i>evidence 39 reflective group sessions run by the seconded Ofsted inspector, with 300 attendees.</i> This level of engagement needs to continue now that the QA unit are leading the sessions and there are also capacity issues.</p> <p>CCM data quality is a priority as part of the implementation plan – <i>evidence recorded discussion with data team.</i></p> <p>Activity against Model of Practice is showing traction – <i>evidence: RP guidance, Elia report; RP training commissioned; Partners in Practice minutes. There is a caveat that staff need to engage.</i></p> <p>Panel activity is on going - <i>evidenced through minutes – permanence, legal gateway, learning and improvement.</i></p> <p>Q1 Research in Practice take up is double that of Q1 2019, albeit from a low baseline.</p> <p>Risks:</p> <p>Supervision is graded as good or outstanding in 54% of audits in July. The new framework has been launched and management training is being rolled out. New thematic audit is required.</p> <p>Direct work is graded as good or outstanding in 49% of audits in July. The service needs to undertake a further thematic audit regarding direct work. New practice guidance has been drafted and is scheduled for review as part of PiP activity in August 2020. Restorative practice training is booked for Autumn 2020</p> <p>Management compliance against the audit schedule is inconsistent . A fixed term auditor is being recruited; but management participation remains essential and is a significant risk if not addressed.</p> <p>IRO caseloads remain high. However, authority has been given to recruit into a fixed term post.</p>

Exception Report – Early Help

Key developments
 Data suite has been agreed and managers are working to review Ofsted position statement. Service can evidence a stable level of children in the service overall and improved performance in respect of children with assessments.

Key risks
 Managers in the service need to focus consistently on the audit activity and the ‘good’ cases need to be moderated to provide full assurance.

AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
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Early Help

Julian Watkins

Previous RAG: Green
 Current RAG: Green

- 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

Progress:
 Number of children open to service remains higher than baseline *Evidence: CHAT.*

 Target is met for % of open children with assessment. *Evidence: service data.*

 QA activity shows that quality of assessment was graded as good in 83% of cases in July 2020 *evidence: audit returns.*

 % of cases stepping up to social care (20%) has reduced, but is broadly in line with previous data – *evidence July 2020 CHAT data.*

Risks:

 % of children seen within 10 working days is 6% lower than target at 10 days at 84%.

 New data has been requested for rapid response and re-referrals.

Exception Report - MASH

<p>Key developments</p> <p>Performance regarding response to referrals and quality of decision making remains high. Partnership response during Covid is well regarded.</p>	<p>Key risks</p> <p>In order to get this area to good there needs to be time and resources put against the threshold review, partnership training and reflective discussions within the MASH.</p>
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AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
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<p>MASH</p> <p><i>Jacqui Schofield</i></p> <p>Core Ofsted Recommendation:</p> <p><i>Decision making in the MASH adheres to local guidance and children do not experience unnecessary statutory assessments</i></p>			<ul style="list-style-type: none"> • Monitor level of contacts received • Understand application of thresholds - P'ship Audits with multi agency networks • Ensure that referral thresholds are understood by partner agencies • Develop monthly learning circles between Assessment and MASH colleagues to check on decision making • Partner's MASH Navigator joint Training - Attendance at MASH Induction training for new MASH Navigators (Partners) • Ensure time from referral received / recorded to completion by MASH was 24 hours / 1 working day or less • Coordinate 6 monthly health checks of referral and decision making with partners • Monitor the number of contacts that become new referrals of Children In Need (CiN) • Monitor the rate of new referrals of Children in Need (CiN) per 10,000 (0-17 year olds) in past six months • Analyse the gradings in weekly MASH Management Audits • Produce cases studies to show impact of EDT response • Convene management audits to understand impact of LADO, • Convene independent audit of LADO function 	<p>Oct -20</p> <p>Aug -20</p> <p>Aug -20</p> <p>Sep -20</p> <p>Sep-20</p> <p>Oct-20</p> <p>May-20</p> <p>Oct-20</p> <p>Oct-20</p> <p>Jun-20</p> <p>Jun-20</p> <p>Oct-20</p> <p>Jan-21</p>	<p>Progress:</p> <p>Numbers of contacts have remained lower than baseline (although it should be noted that there has been an upward trend over the past quarter) – <i>Evidence: CHAT.</i></p> <p>Referrals are being addressed within 24 hours in 99% of cases – <i>Evidence: monthly scorecard.</i></p> <p>Because of Covid 19, rather than undertake 6 monthly health checks, the QA unit has audited regularly. Decision making has been assessed as accurate in the majority of cases – <i>Evidence: Covid audit reports.</i></p> <p>The emergency duty team have started providing monthly case studies - <i>-evidence case study record.</i></p> <p>LADO management audits continue to provide assurance of decision making. An independent audit will be scheduled for January 2021 – <i>Evidence LADO audit notes.</i></p> <p>Risks:</p> <p>The following areas have been rated as red due to a delay in rolling the work out, with Covid having an impact:</p> <ul style="list-style-type: none"> • Implementation of learning circles • Review of threshold document • Partnership audits • MASH partner training
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Exception Report - Assessment



<p>Key developments</p> <p>The timeliness of single assessments is noteworthy and in the last assessment audit there were no inadequate audits; which is important in comparison to the service position in March / April 2020.</p>	<p>Key risks</p> <p>This service is clearly benefiting from consistent service manager oversight; but, the staff need to be in a place where workload supports their engagement in practice improvement work; to push casework into the 'consistently good' domain.</p>
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AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
<p>Assessment</p> <p><i>Jacqui Schofield</i></p> <p>Core Ofsted Recommendation:</p> <p><i>Good quality assessments and plans to ensure that all children get the right help quickly and that its impact is clearly measured.</i></p>			<ul style="list-style-type: none"> Monitor the number of Section 47 (S47) enquiries started Monitor % of Strategy Discussions held within 1 Working Day of the Referral outcome being progress to CP Strategy Discussion (MASH) Quarterly dip sampling of attendance at Strategy Discussions Analyse Gradings in Thematic Audits Monitor % of Single Assessments (SA) completed within 45 days Monitor % of children to be allocated within 48 hrs of referral Audit of Conference outcomes, reports and minutes (including problem resolution) Monitor number of appropriate children who engage with CP Champions 	<p>Oct-20</p> <p>Jun-20</p> <p>Jun-20</p> <p>Jul-20</p> <p>Apr-20</p> <p>Jun-20</p> <p>Jul-20</p> <p>Jul-20</p>	<p>Progress:</p> <p>Reducing trend for sec.47 enquiries – <i>evidence monthly performance scorecard.</i></p> <p>93% of single assessments were completed within 45 working days – <i>evidence monthly performance scorecard.</i></p> <p>Timeliness of strategy discussions is 6% off target (94%) and timeliness of allocation is 4.5% off target (95.6%). It is recommended that the service review these targets. <i>Evidence – monthly scorecard.</i></p> <p>The group involved in the monthly CP managers audit has been extended to include Heads of Service and PACT and Assessment Service Managers and provided assurance of CPP decision making in July 2020 – <i>Evidence – CPP Managers Audit report.</i></p> <p>Risks:</p> <p>Audit results are showing that we are not achieving our aspirations regarding the quality of work in respect of: children and young people’s voices being heard, the quality of assessment and planning and the use of risk assessment tools. There is a nominated QA Unit Advanced Practitioner who can work with the service manager and her management team; using reflective group supervision and team meetings to discuss practice development themes.</p> <p>Champion engagement with children has been affected by staff sickness; but is improving at 62%.</p>

Exception Report – Children with Disabilities

Key developments
 Review of Jigsaw Children with Disabilities Team Underway. Meeting arranged to discuss training for Children’s Social Care teams managing children who do not meet Jigsaw threshold.

Key risks
 Partners in Practice activity has flagged the need for the service to audit against CWD cohort to fully be assured of impact and quality of work. RAG rating amended to amber whilst this is undertaken.

AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
Children with Disabilities <i>Simon Dennison</i>			<ul style="list-style-type: none"> Maintain the quality of assessments in the Jigsaw children with disabilities team and develop evidence bank of outstanding practice (Managers audits) 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) 	Jul-20 Jul-20	<p>Progress:</p> <p>QA activity has been undertaken regarding the Jigsaw and wider CWD cohort. However, PIP activity raised that the audit analysis needed to be more specific regarding practice impact for children. The QA Unit has undertaken this type of activity before with Jigsaw, providing two audit reports to the DCS in 2017 and 2018. <i>Evidence – audit analysis</i></p> <p>Risks:</p> <p>Management audit quality is flagged as red due to audit return (50% good or outstanding). A thematic audit will be scheduled in Autumn 2020 to review CWD cohort.</p>

Exception Report – Elective Home Education

<p>Key developments</p> <p>Service area continues to engage fully with improvement plan requirements</p>	<p>Key risks</p> <p>Impact of Covid 19 upon return to school / elective home education in September 2020 will need to be monitored.</p>
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AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
<p>Elective Home Education</p> <p><i>Bryn Roberts</i></p>			<ul style="list-style-type: none"> Monthly reporting of children in priority groups (CP / CIN / YOS) who are EHE and have been allocated % of EHE cohort visited Production of monthly report 	<p>Jul-20 Mar-21 Apr-20</p>	<p>Progress:</p> <p>EHE manager continues to provide monthly report that shows impact of intervention.</p> <p>Allocations of appropriate cases is 100% (actual % is 88.8%, but one case is EHCP, allocated in SEND). <i>Evidence – manager’s monthly report</i></p> <p>Risks:</p> <p>No red RAG – but visits for vulnerable children is at 55%. Manager has explained that outstanding visits are for one family of three children and this is an annual visit (so within timescale).</p>

Exception Report – Special Educational Needs and Disabilities

Key developments
 Work has started with Service Manager and Executive Director of CCG to start the review of Southampton Self Evaluation. Terms of reference are available to share as required.

Key risks
 New SEND inspection framework is scheduled for implementation in 2021. Head of Service has requested presentation to senior management team

AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
Special Educational Needs and Disabilities <i>Tammy Marks</i>			Planning and review of education provision (include resource units, special schools and post 16) <ul style="list-style-type: none"> Present proposals to Cabinet requesting permission to consult Formal Consultation Final decision on proposals 	Jul-21 Jul-21 Jul-21	Progress: Review of self evaluation has been scheduled and will include analysis of progress against SEND partnership plan. <i>Evidence – partnership plan.</i>
			Ensure systems for transition and preparation for adulthood are robust <ul style="list-style-type: none"> 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. 	Sep-20 Sep-20 TBC 14/08/20 TBC 14/08/20	Risks: No red RAGS – but Covid has impacted upon progression of transition actions. However, a meeting is scheduled with CCG colleagues on 14 th August 2020. New actions have been added regarding the effectiveness of the Transitions Operational Group (TOG) and the development of an audit tool.

Exception Report – Children in Need of Help and Protection

Key developments

The meeting with Cafcass went ahead positively in July 2020. The service has a learning circle schedule and additional support has been confirmed through a nominated advanced practitioner in the QA Unit. The service is able to evidence ongoing positive feedback about Court work.

Key risks

PACT is the critical area for the service because of the implications for statutory work across CIN, CP and LAC domains. It has been particularly affected by social worker and manager turnover in the past two months and this is impacting upon case work and engagement in quality assurance and practice improvement activity.

AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
<p>Children in Need of Help and Protection</p> <p><i>Sarah Ward</i></p> <p>Core Ofsted Recommendations</p> <p><i>The quality of assessments and plans ensure that looked after children get the right help quickly and impact is clearly measured</i></p> <p><i>Management provide advice on how to undertake direct work with children and regular reflective discussions on their progress</i></p>			<ul style="list-style-type: none"> Maintain PLO tracking system with Senior Mgt oversight Monitor monthly % of children have pre proceedings starting within 15 WDS of date of decision to enter pre-proceedings Monitor % of Pre proceeding assessments completed within 16 weeks from the pre-proceeding meeting Dip Sampling examples of pre-proceedings letters Engage with judiciary and CAFCASS Monitor number of children becoming Looked After children Analyse gradings in Thematic Audits for Looked After Children Monitor % of staff attending Domestic Abuse Training (Consultation sessions with Karen Marsh; Practice Briefings Sessions held per month; MH and SM Training and Awareness) Analyse Gradings in Thematic Audits – (DA / SM / MH) Confirm number of Practitioners receiving Briefing on 'Social Work Practice Management and Standards' (% of staff attending 'Social Work Practice Mgt and Standards' Training) Confirm % of new staff entering the service have signed to agree understanding of the standards (to arrange briefings) Undertake viability study for implementation of Signs of Safety Analyse gradings in Thematic Audit focussed on the Impact of Restorative Practice approaches upon casework. Provide evidence of engagement with Teams re Level 2 Training with Restorative Practice examples identified Confirm % of Children have a permanence placement plan by their 2nd review Monitor % of children subject to CP Plan seen in the last 15 WD Monitor % of children subject to CPP seen alone Monitor the number of children subject to child protection planning Monitor core group performance - % convened in timescale Analyse gradings in CPP Audits 	<p>Apr-20</p> <p>Apr-20</p> <p>Apr-20</p> <p>Apr-20</p> <p>Jul-20</p> <p>Mar-21</p> <p>Jul-20</p> <p>Oct-20</p> <p>Oct-20</p> <p>Aug-20</p> <p>Aug-20</p> <p>Oct-21</p> <p>Oct-21</p> <p>Oct-21</p> <p>Apr-20</p> <p>Jul-20</p> <p>Apr-20</p> <p>Oct-20</p> <p>Apr-20</p> <p>Jul-20</p>	<p>Progress:</p> <p>The service has convened a further meeting to review letters to parents on 25/09/20. Evidence – review of letters to parents; MOTAS minutes. The meeting with Cafcass took place and are being arranged quarterly to continue the joint focus on Court outcomes for children. Evidence – meeting minutes.</p> <p>Risks:</p> <p>Data shows an increase in children subject to child protection plans and LAC in the past month. The service is not meeting the 90% target for children seen within 15 working days (75%) or child seen alone (26%). Evidence: scorecard / CHAT</p> <p>Audit results are showing that we are not achieving our aspirations regarding the quality of work in respect of: assessment and planning; effective interventions in respect of the trigger trio; management supervision and oversight. A thematic audit is required in respect of the impact of restorative practice; post training and release of the practice guidance. Thematic work will also focus on the 'step down' cohort.</p> <p>The QA unit have reviewed the risk assessment framework and produced guidance around the use of Child Safety Agreement. DA training has been affected by Covid 19 – but, a practice briefing has been put together and a meeting has been arranged to discuss consultation sessions with the IDVA manager. The ICU have confirmed that they will not be able to support substance misuse and parental mental health training. The service will look to commission this if a local solution cannot be identified. Practice standards need to be reviewed before re-circulation.</p>

Exception Report – Missing, Exploited, Trafficked

<p>Key developments</p> <p>Work underway to check the local MET operational / strategic arrangements that sit below the HIPS activity. SSCP manager involved and attending MET operational group, with report to SSCP.</p>	<p>Key risks</p> <p>Partners in Practice activity has flagged the need for the service to audit against MET cohort to fully be assured of impact and quality of work. RAG rating amended to amber whilst this is undertaken.</p>
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AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
<p>Missing, Exploited, Trafficked (MET)</p> <p><i>Simon Dennison</i></p> <p>Core Ofsted Recommendation</p> <p><i>The quality of assessments and plans to ensure that all children get the right help quickly and that its impact is clearly measured</i></p>	Green	Amber	<ul style="list-style-type: none"> • Monitor the % of Return Home interviews that are held within 72 hours. • Analyse the % of children who go missing being offered a RHI • Evidence ways of partnership working that keeps children safe (audit) • Evidencing that MET actions (tracker) are completed prior to closing referral • Monitor number and % of missing LAC offered RHI. • Analyse quality of risk assessments in Thematic Audits 	<p>Apr-20</p> <p>Apr-20</p> <p>Jul-20</p> <p>Jul-20</p> <p>Jul-20</p> <p>Oct-20</p>	<p>Progress:</p> <p>MET manager has confirmed maintenance of tracker.; <i>evidence - tracker</i> Operational group ongoing <i>evidence – minutes</i>.</p> <p>Risks:</p> <p>Service is not compliant with RHI within 72 hours (statutory guidance) this has been raised with HIPS and local SSCP.</p> <p>As a result of PiP activity, a thematic audit will be scheduled in Autumn 2020 to review MET cohort. Updated MET performance data requested from the service.</p> <p>Service needs to provide most recent data. Overall RAG rating amended to amber, pending data submission and thematic audit.</p>

Exception Report – Children’s Resource Service

Key developments There has been no significant change in performance since the last report.	Key risks Partners in Practice activity has flagged the need for the service to audit against CRS cohort to fully be assured of impact and quality of work. RAG rating amended to amber whilst this is undertaken.
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AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
Children’s Resource Service <i>Simon Dennison</i> Core Ofsted Recommendation <i>The Quality of assessments and plans to ensure that all children get the right help quickly and that its impact is clearly measures</i>	Green	Amber	<ul style="list-style-type: none"> • Monitor number of Edge of Care referrals (cumulative from go-live date 08/01/2018) - Monthly data set • Monitor percentage of cases showing significant improvement between start and latest 'goal-based scores' - Monthly data set • Monitor number of open EoC cases (including cases awaiting allocation) as at period end (moved from below) - Monthly data set • Monitor percentage of Edge of Care children that have remained with their family - Monthly data set • Provide SAT / BRS / FDAC practice exemplars - Case studies • Ensure that assessments and plans are of a good quality - Analysis of gradings in thematic audits 	Dec-20 Dec-20 Dec-20 Dec-20 Apr-20 Oct-20	Progress: No significant change to EoC referral numbers; improvement in goal-based scores (EoC). Small reduction in open EoC cases and children remaining with their family. But performance remains within target. <i>Evidence – monthly scorecard</i> Risks: No red RAGs – however, a thematic audit will be scheduled in Autumn 2020 to review CRS cohort; alongside the development of service exemplars..

Exception Report – Youth Justice

Key developments
Progress achieved against YOS governance and BAME review

Key risks
YOS premises have been deemed as unusable as part of Covid 19 review. In addition, experienced YOS manager is due to start secondment to HMIP in November.

AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
YOS <i>Jon Gardner</i>			<ul style="list-style-type: none"> Recruit suitably qualified workers . Improve ETE outcomes for children who offend. 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 Ensure effective YOS governance Understand and respond to level of BAME offending in relation to population Improve quality of plans Improve quality of FTE assessments 	Mar-20 Sep-20 Jul-20 Jul-20 Jul-20 Oct-20 Jul-20	<p>Progress:</p> <p>The YOS Manager has updated that the Youth Justice Management Board have progressed governance arrangements and that plans are in place to engage with the Education Service. <i>Evidence – YOS manager’s report.</i></p> <p>The Violence Reduction Unit have started work to review BAME over-representation in the local youth justice system. <i>Evidence – YOS manager’s report.</i></p> <p>Risks:</p> <p>The YOS manager has articulated that Education Service support is required to drive forward the improvement plan in that area.</p> <p>Church View has been assessed as unusable, which is impacting upon where staff can see high risk children.</p> <p>Covid-19 has also delayed the YOS improvement activity. However, an audit is now scheduled in October 2020.</p> <p>The City does not currently have a diversion strategy and is not compliant with National Standards.</p>

Exception Report – Looked after Children

Key developments Social workers and their managers have reviewed all the cases to identify where they believe there are potential permanence opportunities that with further intervention and/or resources, may result in children being able to safely exit from care – reducing the numbers of children in our care in so doing	Key risks Capacity issues impact upon staff engaging in improvement activity. Service Manager and Service Lead met on 14th July to agree service needs and write the business case to seek the necessary funding that will enable us to progress to recruitment.
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AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
Looked after Children <i>Mary Hardy</i> Core Ofsted Recommendations <i>The quality of assessments and plans ensure that all children get the right help quickly and that it's impact is clearly measured</i> <i>Children and YP are placed in suitable accommodation with discontinued use of Bed and Breakfast accommodation</i> <i>Better Management Advice for social workers on how to undertake effective work with children</i>			<ul style="list-style-type: none"> • Monitor number of Looked After children • Monitor % of LAC children with a permanence plan recorded on PARIS (Updated by MS as preferred measure) • Monitor % of LAC (numbers)who have been matched and had permanence plan (LT Fostering) ratified at permanence panel • Monitor percentage of LAC with an authorised care plan • Ensure effective and Child centred CIC review process - Analysis of IRO Alerts • Monitor % of CIC Reviews scheduled in the month held within timescale • Ensure SMART and detailed individual Planning for each child / and siblings - Analysis of quality of Plans in Thematic Audits • Ensure that placement sufficiency strategy is reviewed and approved - Child Led resource matching • Monitor % of Looked After Children placed >20 miles from LA • Monitor % of Looked after Children Placed in emergency beds / B&B • Increase the % of children aware of my they are in care • Appoint Life story lead (when in post) to develop process for measuring – • Monitor the number of social workers attending Finding the Right Words training - % of SWs in PACT and LAC received Life Story Work Training • Listen and respond to the views of Children and YP through our work with them - Analysis of Gradings in Thematic Audits (to schedule thematic audits) • Record attendance of LAC and Careleavers at Children in Care Council and Corporate Parenting Board / Forums • Monitor number of Children Using Mind of My Own • 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 • Monitor % of LAC's Health Assessments completed to include Dental health, vaccinations • Ensure regular reflective discussion on children's progress - Analysis of quality of Supervision (Gradings in Thematic Audits) 	Mar-21 Jul-20 Apr-20 Oct-20 May-20 Oct-20 Jul-20 Jul-20 May-20 Jul-20 Oct-20 Oct-20 Apr-20 Oct-20 Oct-20 Oct-20 Jul-20 Jul-20 Jul-20 Oct-20 Jul-20	Progress: 95% of children have an authorised care plan – evidence monthly scorecard. Bed and breakfast accommodation has not been used in the past month – <i>Evidence – monthly scorecard.</i> Language that cares is becoming more evident in file recording – <i>evidence audit returns.</i> Risks: Numbers of looked after children have increased. It is recommended that the target of 420 is reviewed and incremental targets are considered. Permanence outcomes for children remain lower than target. In house foster carers has increased by 1 (165). 48% of children in own provision. It is recommended that the timeframe for this element of the plan is reviewed. There is not currently an identified lead for life story work and virtual training needs to be arranged for staff. Mind of My Own use by staff across the service is low. Audit results show that the quality of supervision and oversight still needs to improve. A nominated QA Advanced Practitioner is beginning to work with the service around practice themes.

Exception Report – Care Leavers

Key developments The service can evidence consistent support to care leavers by PA's. Accommodation provision is under 2% from target and health passport roll out is progressing. Emergency accommodation policy is being reviewed.	Key risks Education, Training and Employment is the critical area for care leavers that would prevent a good outcome in a further inspection. A lead needs to be identified to ensure traction against the Corporate Parenting Committee task and finish activity.
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AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
Care Leavers <i>Mary Hardy</i> Core Ofsted Recommendation <i>Children and YP are placed in Suitable with discontinued use of Bed and Breakfast accommodation</i>	G	Y	<ul style="list-style-type: none"> Monitor percentage of Care Leavers in contact and in suitable accommodation Monitor use of Bed and Breakfast Monitor percentage of Looked after Children aged 16+ or open Care Leavers with an authorised Pathway Plan Analyse gradings in Thematic Audits Monitor % 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 Report on the number of care leavers with health passports 	Oct-20 Jul-20 Jul-20 Jul-20 Apr-20 Jul-20 Jul-20	Progress: Bed and Breakfast has not been used in the last month – <i>evidence: monthly scorecard.</i> Authorised care plans is 96%, a small % (2%) lower than target – <i>evidence: monthly scorecard.</i> Care Leavers receiving their health passports is an improving picture (91% in July) – <i>evidence: health data.</i> Risks: Care leavers accommodation suitability is 8% lower than target. There is not a senior leader identified for the ETE task and finish group and the apprenticeship offer is not adequate. There is a real risk that EET progression will impact upon the overall rating for care leavers when we are inspected. 55% of returned audits are rated good or outstanding (year to date). The service needs to identify good practice examples that can be included in the audit activity for verification.

Exception Report - Fostering

Key developments

Core service documents (annual report, strategy) have been presented to Corporate Parenting Committee and agreed. Statutory return has been submitted.

Key risks

Covid 19 has impacted upon foster carer recruitment strategy, which was already a priority area of focus. The service needs to be able to articulate that it understands placement stability and unplanned ending trends and issues for its children.

AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
Fostering Martin Smith			<ul style="list-style-type: none"> Monitor the number of placement stability meetings held. Monitor the number of placement breakdowns / disruptions / ceased Provide evidence of SWs attending Fostering Panel Undertake Foster Carer Training Evaluation. Review of training programme quarterly - how many courses offered and Take up. Confirm number of foster carers who have attended Restorative Practice training Provide evidence of recruitment campaign having an impact on number of in-house carers 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 - Managers audit; number of PF cases Review foster carer recruitment strategy Provide Tier 4 fostering resource for older adolescents and report on number of placements offered 	<p>Apr-20 Apr-20 Apr-20 Jul-20</p> <p>Mar-21 Jul-20 Jan-20 Oct-20 Oct-20</p> <p>Jul-20 May-20</p>	<p>Progress:</p> <p>Fostering Recruitment Strategy has been approved by Corporate Parenting Committee. <i>Evidence: Strategy Document; Committee Minutes.</i> Private Fostering Policy has been approved <i>evidence: policy document.</i> The QA unit will undertake a thematic audit on the PF cohort once the new auditor is in place.</p> <p>Risks:</p> <p>The service is still not able to analyse its stability and unplanned endings performance. This presents a risk as Ofsted will ask us for this information; but, more immediately, it means that we may not fully understand the experiences of those children or what we may need to do differently in our work with internal carers and IFAs.</p> <p>50% of social workers attended fostering panel in July 2020.</p> <p>There has been a delay in recruiting specialist foster carers due to Covid.</p>

Exception Report - Adoption

Key developments Life story work continues to progress. Service continues to provide examples of positive impact.	Key risks Covid 19 has impacted upon number of adoptions. RAG rating of this PI amended to amber as a result. Overall rating retained as green but situation will require close monitoring
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AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
Adoption <i>Martin Smith</i>			<ul style="list-style-type: none"> • Monitor number of adoptions • Monitor time between entering care and placement for adoption • Undertake Effective high quality Assessments - % of examples audited have good quality assessment • Monitor % and number of adopters receiving Outline of support offer • Collate monthly case studies from service and RAA. • Confirm No of outstanding life story books 	Mar-21 Mar-21 Apr-20 Apr-20 Apr-20 Apr-20	Progress: Life story completion performance continues to be positive. <i>Evidence: service data.</i> Timeliness of adoption processes has reduced so that we are sitting on the target (402 days) – this is likely to be due to Covid impact. <i>Evidence: CHAT.</i> Risks: No red RAGs – however, number of adoptions regraded to amber due to Covid impact. This has an impact upon the individual children and also service costs due to extended periods in care. Audit of assessment quality will be discussed with Adopt South, with feedback to Improvement Board.

Exception Report - LSCP

Key developments Annual report scheduled for presentation to the Partnership in September 2020	Key risks Partners in Practice activity has flagged the need for the service to audit against key practice themes to fully be assured of impact and quality of work. RAG rating amended to amber whilst this is undertaken.
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AREA	Previous RAG	Current RAG	PRIORITIES	Target Date	ANALYSIS (Progress/Risks)
Local Safeguarding Children's Partnership <i>Julian Watkins</i>			<ul style="list-style-type: none"> Analyse Practitioner feedback regarding Neglect Toolkit; Confirm number of practitioners attending Neglect Training Produce 6 monthly training report on Number of practitioners from Agencies attending Our Practice our Learning and LSCP training Produce quarterly report on service response to SCRs Undertake audit / learning activity against core practice themes (neglect; CSAFE) 	July 20 July-20 Sep-20 Sep-20 Dec-20	Progress: HIPS are undertaking a review of all neglect tools and resources and then there will be promotion to staff. Serious case review briefing has been updated and is with HoS for review. CSAFE strategic framework is with HoS for review and approval. Risks: Neglect practitioners survey has been relaunched after Covid-19 delay. CSAFE learning event has been arranged for end-August 2020. Thematic audits will be arranged when the new auditor starts in the QA audit.