

Ofsted Preparation Peer Review Action Plan v5 10.06.2016

Ensure that all participants of the Ofsted inspection are prepared and that we demonstrate knowledge of our services and its impact on the outcomes for the safety and welfare of our children and young people

Lead – Adrian Loades

Actions	By Whom	Timescales	Outcomes	Current position – June 16
<ul style="list-style-type: none"> • Audit <ul style="list-style-type: none"> - children's plans - statutory intervention - frequency of visits - assessments - step up / step down - case closures - thematic • Repeat audits over time to demonstrate service development and progress • Introduce SW peer case audit • Review Carefirst fitness for purpose – take action to improve where required • Review additional IT availability 	<p>HOS SC / QA</p> <p>Carefirst team / HOS SC</p> <p>HOS SC / IT lead</p>	<p>November 2015</p> <p>March 2016</p> <p>December 2015</p> <p>January 2016</p> <p>November 2015</p>	<ul style="list-style-type: none"> • Child journey clear in recording • Case chronologies present or robust • Case summaries found on file • Written records evidence the child's voice • Recording meaningful and well structured • Case closure records contain sufficient level of detail • Staff are clear on what they should be recording and why • Focus on practice development • Carefirst maintained to improve responsiveness • IT equipment fit for purpose 	<p>Quality Assurance Framework in place. Audit activity continues and Quarter 4 report and annual report completed and shared with managers. Independent audit of cases undertaken in May. Finding mirrored findings from internal audit. Action plan in place and practice priorities identified. There is a continued focus on practice development.</p> <p>Monthly child journey audits should continue to show service development and improvement.</p> <p>Monthly Care First IT</p>

				<p>meetings in place to make improvements as identified and where possible.</p> <p>IT review has taken place and new laptops have been allocated to workers where needed.</p>
<ul style="list-style-type: none"> • Introduce theoretical framework for assessment • Review quality of performance at entrance to service through collation of audit information. • Review children come into care to be safeguarded but are reunited with their families whenever possible in a timely way 	HOS SC / SMs	<p>November 2015</p> <p>November 2015</p> <p>March 2016</p>	<ul style="list-style-type: none"> • Skilled workforce fit for purpose • Consistent assessment systems common understanding across whole service • Analysis and recommendations included within assessments to produce good quality plans • Children are assessed sufficiently • Transition plans are implemented • Good evidence of contingency planning • Ongoing up to date C&F assessments inform every review 	<p>Relationship based Social Work introduced to all staff. This needs to be embedded further due to new people joining the authority. Plan for this is in place.</p> <p>Quality of performance is improving. Evidenced by regular audit. Main focus now to get consistency across all cases.</p> <p>Review of S20 cases is currently being undertaken by Anthony McGregor – IRU Manager. There are currently 90 children subject to S20</p>

<ul style="list-style-type: none"> • Audit supervision, appraisals and current training opportunities • Collate appraisal intelligence • Refresh training and awareness including diversity issues <ul style="list-style-type: none"> - training - supervision - team development 	<p>HOS SC SMs</p> <p>T&D</p>	<p>December 2015</p> <p>December 2015</p>	<ul style="list-style-type: none"> • A good holistic approach • Appraisals/development plans discussed and used to inform personal development and workforce capacity • Managers feel supervision policy can be achieved • Supervision is reflective • Supervision is recorded • Supervision is regular • Focus on practice development • All front line staff in receipt to raise awareness and knowledge 	<p>accommodation.</p> <p>Supervision Framework updated and is embedded. This was recognised by social workers within the health check.</p> <p>Further Supervision audit will take place this year which will include Principle Social Worker meeting a focus group of social workers to understand their experience of supervision.</p> <p>Development session taking place in June with all senior social workers to start to implement reflective supervision sessions across all teams.</p> <p>Issue of diversity was identified in independent audit. Good practice guide to be made available to staff and a Lantern Development</p>
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				<p>Session to take place. With workers to ensure that they are clear about expectations. Child Journey Case file audit tool to be updated to ensure it gives specific attention to this area.</p> <p>Appraisal form for social Care staff is under development with all staff expected to have an appraisal in place by October 2016 as set out within the health check action plan.</p>
<ul style="list-style-type: none"> • Review performance management capacity • Review all team managers capability and development needs • Review provision for AYSE support • Review recruitment strategy • Review retention strategy • Review adequacy of admin provision 	<p>DCS/ HOS SC</p> <p>HR / HOS SC</p> <p>HR / HOS SC</p>	<p>November 2015</p> <p>November 2015</p>	<ul style="list-style-type: none"> • Staff feel supported and not overwhelmed • Induction process is consistent, all staff receive an induction • Low turnover of staff at all levels • Low dependency on agency staff • Accountability and current structure is clear • Good provision for all staff to maximise work output • Common understanding 	<p>Independent audit has taken place. We are looking to increase the number of themed audits undertaken during course of year so that we can undertake deep dive audits into specific areas of practice.</p> <p>New Induction Programme is in place.</p> <p>High number of managers have undertaken the West</p>

<ul style="list-style-type: none"> Review EDT capacity Review OLA CIC impact on Shropshire services 	<p>HOS SC SSCB</p>	<p>March 2016</p>	<p>of issues faced and progress to date</p>	<p>Midlands Social Care Team Leader Development Programme.</p> <p>Appraisals for all social care staff will be in place by October 2016 to review capability and development needs.</p> <p>Workforce strategy and action plan is now in place.</p> <p>AYSE programme has been reviewed.</p> <p>New admin arrangement's in place with most teams now having a dedicated admin worker to help support staff and reduce bureaucracy. This has been very positively received by social workers as evidenced within the health check.</p>
<ul style="list-style-type: none"> Review capacity and quality of management resource CSC 	<p>HOS SC</p>		<ul style="list-style-type: none"> Managers have adequate time to appropriately 	<p>New structure is now in place.</p>

<ul style="list-style-type: none"> Identify independent audit capacity and fund to enhance pace of progress and provide external validation 	DCS	November 2015	<p>scrutinise before signing off requests</p> <ul style="list-style-type: none"> Team Manager caseload is moderate Clear sign-off routes Case transfers timely and thorough Pace of improvement enhanced Independent validation of performance 	<p>Additional Capacity Team is working to clear assessments that require finalising and shutting down following workers leaving the Local Authority.</p> <p>Vacant social work posts have been successfully recruited to.</p> <p>All new Team Managers will be in post from 4th July 2016.</p> <p>Independent audit has taken place. We are looking to increase the number of themed audits undertaken during course of year so that we can undertake deep dive audits into specific areas of practice.</p>
<ul style="list-style-type: none"> Review all CSC caseloads 	HOS SC SMs	November 2015	<ul style="list-style-type: none"> Minimal level of unallocated work - no CP or LAC cases Caseloads moderate with 15-18 cases Team Manager and case 	<p>Caseload sizes across all teams are under constant review.</p> <p>The new structure and the additional capacity</p>

			supervisors workload is adequate	team are assisting in the reduction of caseload sizes.
<ul style="list-style-type: none"> • Appoint a Project Manager • Annex A – trial run • Communication strategy – SC & SSCB • Improvement Board Scrutiny of progress • Briefing sessions – all staff • Ensure complaints impact on organisational learning • Illustrate how voice of child impacts on service provision • Appropriate care planning <ul style="list-style-type: none"> - Review entrance to care - Review reunifications - PLO - Family Court - Family Group Conferencing - Advocacy & Independent Visitors - Life Story Work - Children in Care Council - Placement Sufficiency - Panel functioning/performance information - Concurrent and parallel planning – adoption - Adoption support services 	AD QA HOS SC	December 2015	<ul style="list-style-type: none"> • Project management techniques will enable transparency and report direction of travel • Continuous practice improvement • Appropriate care planning • All statutory requirements met • Continuous improvement for assessment of services to Children in Care • Timely intervention • Appropriate scrutiny and challenge • Adequacy of provision 	<p>Ofsted Preparation ongoing</p> <p>Monthly Ofsted Meetings take place between HOS QA and Service Managers</p> <p>Annex A run on a monthly basis</p> <p>Preparation for Joint Targeted Inspection underway. One multi agency meeting has taken place and another scheduled for 22nd June 16.</p> <p>All staff briefed on Inspection and health check findings and priority areas going forward.</p> <p>Complaints quarterly reporting now clearly identify learning for practice.</p>

<p>sufficiency</p> <ul style="list-style-type: none"> - Care leavers - IRO escalation - Contact arrangements - Connected carer arrangements - Written delegated authority to foster carers - Foster carer recruitment <ul style="list-style-type: none"> • Develop communication strategy – bulletins /workshops / you said we did / email updates / feedback / celebrate success 	<p>AD QA HOS SC</p>		<ul style="list-style-type: none"> • Voice of child impacts on service provision 	<p>Bi monthly Performance and Quality meetings with service Managers and Team Managers chaired by HoS QA consider learning from complaints and how they fit in with learning from audits, service user feedback and rag rating process.</p> <p>Rag rating process in place and will be reviewed now has been in place for 7 months by IRU Manager Anthony McGregor.</p> <p>Changes in structure will allow for more focus on robustness of care planning. Rag ratings ongoing audit activity will be indicator of progress in respect of care planning</p> <p>Communication identified as a key area of focus in Health Check.</p>
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				Plans in place to ensure that communication takes place down to staff and back up to senior managers.
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