

SHROPSHIRE CHILDREN'S SERVICES POST OFSTED ACTION PLAN

Our journey of continuous improvement



*'All children and young people to be happy, healthy, and safe and reach their full potential,
supported by their families, friends and the wider community'*



Jan 2019

V13

Introduction

“Social workers in Shropshire are working hard to keep children safe. They work with other staff in health, education and the police services to make sure that children are listened to and, where children have concerns or are not being looked after properly, they try to make children’s lives better.” (Ofsted, November 2017)

“The recent inspection of Shropshire Children’s Services has recognized that services to children and their families are overall ‘Good’. We were pleased that the inspection recognized our improvement journey. But we are not complacent. The aim of this Post-Ofsted action plan is to further improve services and outcomes for children, young people and their families. In doing so, the action plan will address the findings made by Ofsted, clearly indicating how we will implement the 12 recommendations given following the Single Inspection Framework (SIF) in September 2017.

Alongside this plan, we have a clear vision for work with children and families, which is underpinned by our 5 Practice Priorities. In our drive towards excellent services, we follow a cycle of improvement, continuously reviewing and testing our practice and oversight to ensure that we are making progress and creating actions to address our priority areas.” **Karen Bradshaw, Director of Children’s Services**

““Ofsted determined in its Report last November that services to safeguard children in Shropshire are good. That was a considerable achievement putting Shropshire in the top 30% of Local Authorities in England. But more needs to be done to address those service areas where improvements are needed so that standards continue to rise. We cannot afford to be complacent. This Action Plan shows where we want to go and how we plan to get there.” **Councillor Nick Bardsley, Lead Member for Children’s Services**

Governance and Accountability

Together with my senior management team we will take responsibility for the delivery of our plan. We will monitor improvements in performance and practice, measuring progress of our plan quarterly at our DCS Quality and Performance Meetings with Service Managers and through quarterly Performance and Quality Meetings with Team Managers. The People Scrutiny Committee will lead on the challenge of the delivery of our plan, scrutinising progress of the plan by way of a quarterly update. The strategies and plans that sit underneath this are monitored at appropriate Boards or other governance structures.
Karen Bradshaw, Director of Children’s Services

Our Vision, Priorities and Principles

Our vision: ‘All children and young people to be happy, healthy, and safe and reach their full potential, supported by their families, friends and the wider community’

Our 5 Priorities

What is important and what success will look like

- Plans and Planning
 - ✓ Every child will have an up to date plan
 - ✓ Plans will be under pinned by an assessment and will be outcome focused
 - ✓ Children, young people and families will be clear about what is expected of them
 - ✓ Clear contingency plans are in place
 - ✓ Plans will be at the heart of our work with children and their families
- Management Oversight
 - ✓ Managers will ensure evidence of regular management oversight and reflective supervision on all case files
 - ✓ Workers will be supported and have access to good quality reflective support
 - ✓ Workers will be able to access management support when needed
 - ✓ Key decisions taken outside supervision will be recorded on the case file
- Assessments
 - ✓ Social work assessments will be child focused and informed by the views of the child
 - ✓ Assessments will contain robust analysis of risks and protective factors which inform plans for each child
- Core Groups
 - ✓ Core Groups will take place regularly and will review and progress plans for children
 - ✓ Each core group will review the child's plans and will agree actions to be undertaken by parents and the core group
 - ✓ Where insufficient progress has been made, this will be recognized and appropriate action agreed and taken
 - ✓ Core Groups will use effective step down processes
 - ✓ Minutes will be sent out to all professionals and parents following each core group meeting
- Visits
 - ✓ Visits will be timely, purposeful and include work which creates change for families
 - ✓ Children will be seen alone
 - ✓ Children's wishes and feelings will be clearly recorded.

Shropshire Council Mission

To be an excellent organization working in partnership to protect the vulnerable, create economic growth and support communities to be resilient.

Senior Management Priorities:

- Reduce Caseloads
- Ensure all workers are supported and there is robust management oversight on all cases.
- Ensure that we are only working with and looking after those children that we need to.
- Provide workers with the right tools to do the job – IT system, processes and systems and training.

Safeguarding Board Priorities:

- Domestic Abuse
- CSE and Missing
- Neglect

RECOMMENDATION 1:

Ensure that a clear system is established to enhance management oversight of initial contacts, so as to avoid any delays and to monitor timeliness and effectiveness.

Summary from Ofsted Inspection:

- Thresholds are well established and applied consistently, resulting in proportionate action to protect children. An effective and mostly timely response is provided when concerns for children are raised with the Compass service, which is where all enquiries are received about concerns for the welfare or protection of children and young people.
- Consent to share information is understood well and appropriately sought in the majority of cases seen by inspectors.
- In a small number of cases, some delays occur when parental consent and/or more information is needed for lower-level concerns but has not been sought already by the referrer. The impact of this for children is that there is sometimes a delay in progressing a contact and in determining the threshold for a referral.
- Inspectors saw evidence of appropriate management oversight and decision-making within the Compass team.
- However, a clearer, more structured system would ensure tighter monitoring of any future delays for children and their families.

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
1.1	Guidance to be written and implemented for RAG/Traffic light system of initial decisions on contacts, which includes a 3 and 5 day review.	Reduction of contacts taking more than 5 days. This will result in timely decisions being made on concern forms where consent or further information is required from the family or referrer.	Audit Performance Information	Jeanette Hill 08/01/2018	Piloted in December 2017, Live on 08/01/2018	GREEN	Improved timeliness of concerns forms progressing to final decision where parental consent is not provided by the referrer. Further advice provided by Ofsted through JTAI in November 2018 which has been implemented. ACTION CONCLUDED
1.2	Weekly audit of contacts by the	Consistency of practice in relation	Audit	Jeanette Hill	Compass Service	GREEN	Weekly audits

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
	<p>service manager and review of Performance Information to monitor compliance with protocol and impact on timescales.</p> <p>Outcome of audits to feed into Quality Assurance Feedback for oversight and scrutiny.</p>	to contacts within the service and no delay found in progressing contacts and determining threshold for referral.	Performance Information	To commence from 08/01/18	Manager weekly audits are already embedded within the Quality Assurance Framework.		<p>are showing an improving picture in regard to timeliness of completion of concerns forms – aim is for all concerns form to close down within 5 working days including those where parental contact/consent is needed but not provided by the referrer. New pathways in COMPASS are supporting this action which will continue to be monitored by Service Manager.</p> <p>ACTION CONCLUDED.</p>

RECOMMENDATION 2:

Ensure that all children have information added to their electronic records regardless of the level of concern, particularly for domestic abuse level one notifications, and that records completed by the emergency duty team are immediate.

Summary from Ofsted Inspection:

- Domestic abuse notifications are received and considered daily by the multi-agency domestic abuse triage meeting in the Compass service, consistently attended by a wide range of key partners.
- Recent changes to commissioning arrangements for health colleagues are designed to enable them to attend on a regular basis from November 2017, giving a more robust contribution to the decision-making to protect children.
- However, there is no recording on children's files of lower-level concerns, where the child is not known to the local authority. This affects the local authority's ability to provide a comprehensive chronology from the earliest concern and to inform future decision-making.
- The emergency duty team provides an effective out of office hours response, but children's records are not always immediately updated. This means that up-to-date information is not available for staff if they need to make urgent decisions.

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
2.1	All domestic abuse Level 1 incidents to be recorded as an observation on children's files and duplicated across siblings.	Strengthened decision making for individual children and incorporation of history in all children's assessments.	Audit	Jeanette Hill 01/02/2018	All domestic abuse level 1 incidents are now recorded on carefirst as an observation and coordinators will include this information within the child's chronology at the front door. This action has now been in place since February 2018. ACTION CONCLUDED	GREEN	
2.2	Workflow to be developed in Liquid Logic, which allows all notifications to be recorded.	Comprehensive chronologies on children's files identifying all incidents where children have experienced domestic abuse.	Audit	Jeanette Hill 05/11/2018	We are currently recording all Level 1's as an observation as an interim measure until we move across to Liquid Logic. Pathways for recording in place for	GREEN	

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					Liquid Logic which will come into place on 18/2/19. ACTION CONCLUDED		
2.3	All case file records to be updated by the emergency duty team on children's case files before the completion of the shift.	Case recording which is up-to-date and enables workers to make urgent decisions based on current information.	Audit	Fiona Adamson/Tracy Dufton 01/11/2017	6 weekly meetings between Children's Service Managers, EDT's new service manager Tracey Dufton & Fiona Adamson. Expectation's re completing case notes prior to end of shift remains & case file monitoring, monthly, is ongoing. Case file monitoring sent to Siobhan Hughes' PA. EDT Training on Liquid Logic scheduled in January 2019. On-going monitoring will continue through 6 weekly meetings across the service with EDT. ACTION COMPLETE	Green	

RECOMMENDATION 3:

Ensure that all brother and sister groups have a case record as a result of a contact received in the Compass service.

Summary from Ofsted Inspection:

- Thresholds are well established and applied consistently, resulting in proportionate action to protect children.
- An effective and mostly timely response is provided when concerns for children are raised with the Compass service, which is where all enquiries are received about concerns for the welfare or protection of children and young people.
- While case recording was up to date, only information for the eldest child in a sibling group is recorded on concerns forms, so information about any younger brothers and sisters is not separately recorded or available for future reference on the electronic system.

	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
3.1	New concerns forms raised on cases which are not open, to be duplicated onto each child, and completed in Compass when authorising	All concerns forms available on relevant children for future reference, enabling appropriate decision making, assessment and action.	Audit Performance Information	Jeanette Hill 01/03/2018	New arrangements commenced on 01/03/2018. New arrangements in place since 01/03/2018 and are now embedded. ACTION COMPLETE	GREEN	All recording is now available on each child's case record.
3.2	Concerns forms raised on open cases to be added by Compass who will duplicate the concerns forms and then assign to the relevant team for authorisation	All concerns forms available on relevant children for future reference, enabling appropriate decision making, assessment and action.	Audit Performance Information	Jeanette Hill/Steve Ladd/Elaine Storey 01/03/2018	New arrangements commenced on 01/03/2018. New arrangements in place since 01/03/2018 and are now embedded. ACTION COMPLETE	GREEN	All recording is now available on each child's case record.

	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
3.3	On all new or closed cases Compass Coordinator role to add all household relationships and Compass staff (SSW, EHSW, TYS, CSE lead) will complete and duplicate including EH consultations as appropriate	Connections between family members clearly visible and included in decision making for families.	Audit Performance Information	Jeanette Hill 01/03/2018	New arrangements commenced on 01/03/2018. New arrangements in place since 01/03/2018 and are now embedded. ACTION COMPLETE	GREEN	All recording is now available on each child's case record.
3.4	Ensuring all relevant Shropshire Council procedures are updated to capture changes in operational practice	All workers will have a clear understanding of the processes, with clarity on role responsibilities.	Audit	Siobhan Hughes 01/06/2018	All procedures now up to date. ACTION COMPLETE	GREEN	All practitioners have access to up to date procedures.

RECOMMENDATION 4:

Ensure that assessments for children looked after and their families are comprehensive and analytical, to effectively inform timely care plans and decision-making.

Summary from Ofsted Inspection:

- Children become looked after when they need to be, in a planned and mostly timely way, and in response to escalating risks.
- Most assessments help to inform correct decision-making.
- A small number of assessments do not always contain enough detail so that plans for children to be looked after are sufficiently purposeful and clear enough, particularly for young babies.
- Most assessments (LAC), while undertaken regularly for reviews, are not sufficiently detailed in terms of considering all relevant information, critical evaluation and analysis, although a small number of excellent children's assessments were seen by inspectors.
- Management oversight does not systematically influence and improve the quality of assessments or care plans.

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
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Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
4.1	Looked After Child Assessment workshops to be delivered, consolidating learning from Martin Calder training in the context of LAC. To be attended by all social workers.	Analytical assessments which appropriately assess the needs of the individual looked after children and identify need.	Audit	Lisa Preston 01/05/2018	Two training days have now been undertaken with a mix of IRO's, Looked After children social workers and case management social workers. Feedback has been excellent. There will be a further training days scheduled for early 2019, following on from this, the training will be offered in-house. ACTION COMPLETE	GREEN	
4.2	Action learning set to take place with team managers focusing on the Quality Assurance of assessments.	Quality Assurance activity undertaken by managers to be evident on the case file and clearly improving the quality of assessments.	Audit	Donna Chapman / Siobhan Hughes 01/05/2018	Dates are set and invites have been sent to all TM's. The first Action Learning Set took place on 5/03/18. Action Learning sets now embedded. ACTION COMPLETE	GREEN	
4.3	New assessment template for looked after children to be developed as part of Liquid Logic Implementation in consultation with social workers and team managers.	A LAC assessment template which enables robust assessment and analysis.	Audit	Siobhan Hughes 04/11/2018	Completed – Lisa Preston – to be embedded in Liquid Logic. Testing complete. Template will go live with new Liquid Logic System on 18 th	GREEN	

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					February 2019. ACTION COMPLETE		
4.4	All workers and managers to have access to Research in Practice to link theory and research to practice.	LAC assessments will contain more evidence of relevant research and theory.	Audit	Donna Chapman 01/07/2018	RIP is now available to all staff. We are currently monitoring sign up to this, usage, and evidence of improved research in our practice. We initially had 84 users of RIP. To date we have 198 active users – which continues to show an increase in usage across the service. ACTION COMPLETE	GREEN	
4.5	Dispute Resolution process to be revised to ensure that assessments for looked after children are comprehensive, timely and inform care plans and decisions for looked after children.	The scrutiny of assessments by the IROs will be evident on case files and improvements will be seen in critical evaluation and analysis contained in future assessments.	Audit Performance Information	Siobhan Hughes/Lisa Kelly 01/05/2018	Completed and IRO's are aware this should be completed in respect of QA of each child's review/conference. There is a section on the RAG for comment re this. Dispute Resolution Process will continue to be managed as part of our on-going quality assurance framework.	GREEN	

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					ACTION COMPLETE		
4.6	Child Journey Audit Tool to be amended to ensure that it reflects expectations in relation to assessment and planning for looked after children.	The ability to review progress in this area and to ensure that we are providing social workers and Team managers with the right tools/knowledge to undertake robust assessments in respect of looked after children.	Audit Review	Siobhan Hughes 01/04/2018	Went live from the 01/04/2018 and is now embedded. ACTION COMPLETE	GREEN	
4.7	Increase in case file audits rating assessment of Looked After Children as good or outstanding to increase from 40% to 70%.	Comprehensive and analytical assessments of looked after children will drive timely and effective care plans and decision – making.	Audit Review	Steve Ladd/ Elaine Storey/Siobhan Hughes 01/12/18	Currently not meeting target (70%) Tools have been amended to ensure that it is easier to identify LAC assessments and enable better feedback for workers. LAC assessment training has also taken place which should have a positive impact on Q3. Although this action has not been achieved this will continue to be monitored and aspired to through our Quality Assurance Framework. ACTION COMPLETE for purposes of this Action Plan but will be	AMBER	

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					an action within the Quality Assurance Framework.		

RECOMMENDATION 5:

Ensure that all plans, including children in need plans, child protection plans, care plans and pathway plans, have clear overall objectives and timely specific actions.

Summary from Ofsted Inspection:

- In most cases, assessments lead to child-specific care plans. Children who are subject to child in need or child protection plans have their plans reviewed regularly. A robust and clear protocol for consideration of risks and concerns, or 'step up' or 'step down' arrangements, ensures that consideration is given at each review so that children are safe and receive the most appropriate intervention.
- A small number of plans are too long. They contain generic or unrealistic actions with unclear timescales. The use of the terms 'ongoing' and 'to be reviewed at core group' does not assist families or professionals to understand the timescales in which change must occur for the child.

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
5.1	Outcome focused planning workshop to take place with all IROs and CP Chairs, Team Managers, Social Workers, PA's and Virtual School – delivered by Research In Practice	<ul style="list-style-type: none"> Outcome focused LAC plans to be created by social workers and given additional quality assurance by IROs. Concise and SMART CP plans initiated by CP Chairs. SMART PEPS's to be in place for every school aged Looked after Child. All children to have an up to date plan which is progressing in line with their needs, with clear 	Audit	Siobhan Hughes/Donna Chapman 01/04/2018	<p>Outcome Focused Plans Workshops were delivered by Martin Calder linked to the SRAF on the 12/04/2018, 13/04/2018, 02/05/2018, 03/04/2018, 04/04/2018, 10/04/2018.</p> <p>New Liquid Logic Plan template will promote outcome focused planning.</p> <p>ACTION COMPLETE</p>	GREEN	

		timescales and which is outcome focused.																				
5.2	The virtual school will be part of induction training for all social workers with a focus on quality of PEPS's.	<ul style="list-style-type: none"> The Virtual Head will feedback data on PEP quality, to include number of social workers using PEP's, PEP's within timescales, student participation and SMART targets. <p>RAG rating of PEPS for statutory school age children, Spring 2018</p> <table> <tr> <td></td> <td>Spring 2018</td> <td>Summer 2018</td> </tr> <tr> <td>Outstanding</td> <td>3%</td> <td>4%</td> </tr> <tr> <td>Good</td> <td>61%</td> <td>36%</td> </tr> <tr> <td>Requires improvement</td> <td>29%</td> <td>53%</td> </tr> <tr> <td>Inadequate</td> <td>7%</td> <td>7%</td> </tr> </table> <p>No PEPs are held for rising 2, 3-year of age No PEPs are held for years 12 & 13 (age 16- 18)</p>		Spring 2018	Summer 2018	Outstanding	3%	4%	Good	61%	36%	Requires improvement	29%	53%	Inadequate	7%	7%	<p>Audit Social work ePEP data 27/06/18.</p> <p>7 social workers holding 10 cases have never logged onto ePEP</p> <p>3 social workers holding 17 cases have not logged on since last year 2017</p> <p>3 social workers holding 11 cases have not logged on since the spring term</p> <p>Approximately 12% of cases</p>	Rose Hooper 01/02/2018	<p>Virtual school is part of the induction programme. QA on PEPS has been in place for over a year and is done termly. Student participation to be reported termly starting in spring 18. The young person's participation is part of the QA and social worker participation to be reported termly starting in Spring 18. Number of inductees to date – 4</p> <p>ACTION COMPLETE</p>	GREEN	
	Spring 2018	Summer 2018																				
Outstanding	3%	4%																				
Good	61%	36%																				
Requires improvement	29%	53%																				
Inadequate	7%	7%																				
5.3	Develop practice guidance on how to write a SMART outcome focused plan including Do's, Don'ts, hints and tips.	Social workers will have an easily accessible guide to writing an outcome focused plan, improving the quality of outcome focused plans.	Audit	Siobhan Hughes/Pippa Murphy 01/04/2018	<p>Been sent to all team managers and discussed at end to end.</p> <p>ACTION COMPLETE</p>	GREEN																

		Virtual school shared SMART target model with Pippa.					
5.4	Revise plan templates as part of the Liquid Logic and consult children, young people and their families in this.	All children's plans will be written in an outcome focused style, which families are able to understand.	Review	Siobhan Hughes/Lisa Kelly 01/11/2018	Plans templates revised in Liquid Logic. Guidance provided to staff on how to complete plans that are SMART, outcome focused with clearly determined timescales. We are in the process of strengthening forums to consult with parents and young people through Service User Impact Group. On-going work to be undertaken as part of Quality Assurance Framework. ACTION COMPLETE	GREEN	
5.5	Importance of data recording workshops to be held with practitioners by legal services.	All workers will understand the importance of recording on children's files and recording will improve.	Audit	Donna Chapman 01/07/2018	Workshop has taken place – September 2018. Staff aware of expectations around way we share information in court. ACTION COMPLETE	GREEN	
5.6	Principal Social Worker to undertake Pathway Plans with ASYEs, creating good examples of Pathway Plans.	Workers will understand expectations for good quality Pathway Plans and ASYEs will develop skills to consistently create	Audit	Siobhan Hughes 01/10/2018	Pathway Plans have been identified for the Principal Social Worker to work	GREEN	

		good pathway plans.			<p>alongside ASYE's. Mick McCarthy is also delivering Pathway plan training in Oct/Nov/Feb. Improvements in timeliness and quality of Pathway Plan's evidenced through Quality Assurance Framework.</p> <p>ACTION COMPLETE</p>		
5.7	Pathway Planning workshop to take place with all relevant teams	Workers will have the skills to create high quality pathway plans and improvement shown in auditing.	Audit	Siobhan Hughes/Elaine Storey 01/05/2018	<p>Pathway Plan workshops have taken place. One last mop up workshop to take place in February 2019. Improvements in Pathway Planning evident through Quality Assurance Framework</p> <p>ACTION COMPLETE</p>	GREEN	
5.8	Bi-annual themed audit of 25 plans to take place across children's services as part of the Quality Assurance Framework to ensure that they are SMART and outcome focused.	Understanding of the quality of children's plans across children's services and individual feedback and support created for workers.	Audit	Siobhan Hughes 30/07/2018	Audit was completed in July 2018. Further audit took place in December 2018. The finding of this audit will be shared with Managers in January 2019. This activity will form part of	GREEN	

					normal Quality Assurance Framework activity. ACTION COMPLETE		
5.9	Increase in case file audits rating quality of plans as good or outstanding to increase from 44% to 70%.	Outcome focused plans with timely, specific actions.	Audit Review	Steve Ladd/ Elaine Storey/Siobhan Hughes 01/12/18	This is currently at 57% . Whilst we have not yet achieved 70%, we are confident that recent training and guidance and the introduction of a new plan template in Liquid Logic will improve the quality of plans. Monitoring of this will continue through our Quality Assurance Framework. ACTION COMPLETE	GREEN	

RECOMMENDATION 6:

Ensure that effective management oversight and case supervision influence and ensure the achievement of children's plans.

Summary from Ofsted Inspection:

- Management oversight is clearly evident through regular and effective formal supervision.
- Most supervision records contain reflection on practice, with clear actions for social workers to progress.
- However, the quality of these records in some of the case management teams is not as clear in terms of monitoring children's plans and progressing to achieve outcomes effectively.
- Management oversight does not systematically influence and improve the quality of assessments or care plans. This results in delays to achieve actions that would improve outcomes for children.

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
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Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
6.1	Monthly supervision folder audits to take place as part of the Quality Assurance Framework	Quality of supervision recorded to improve, shown by quarterly QAF reporting.	Audit	Siobhan Hughes 01/02/2018	This action forms part of current Quality Assurance activity. ACTION COMPLETE	GREEN	
6.2	Implement the revised supervision policy, including observations of supervision.	Quality of supervision recorded and observed to improve, shown by quarterly QAF reporting.	Audit	Siobhan Hughes 01/04/2018	This action now forms part of our Quality Assurance Framework. ACTION COMPLETE	GREEN	
6.3	LAC planning checklist to be utilised as a tool for workers and managers in supervision.	Thorough LAC planning and completion of actions to take place for every LAC child and young person in a timely way.	Audit	Lisa Kelly/Pippa Murphy 30/03/2018	All social workers are aware of the tool; this has been circulated individually to SW and within the weekly brief to all SW in Children services. There is evidence from reducing number of red rags that this checklist is being utilised and will continue to be reinforced through Dispute Resolution Process ACTION COMPLETE	GREEN	
6.4	Managers to undertake regular practice observations as part of the Quality Assurance Framework.	Manager have an accurate picture of practice and supporting the development of this is evident in supervision.	Audit	Siobhan Hughes 01/03/2018	Now agreed that there will be one practice observation in line with Appraisal and the Service User IMPACT observations. These are taking place and being	GREEN	

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					collated on a quarterly basis. This action now forms part of Quality Assurance Framework. ACTION COMPLETE		
6.5	Decision making and supervision action learning sets to take place for team managers.	A consistent approach to decision-making and supervision across teams shown by the QAF auditing schedule.	Audit	Siobhan Hughes 01/04/2018	Action learning sets have taken place and are continuing on a monthly basis at the request of Team Managers. ACTION COMPLETE	GREEN	
6.6	Team Managers to ensure that copies of children's plans are discussed in supervision.	Plans for children clearly monitored and progressed by managers, shown by supervision recordings.	Audit	Siobhan Hughes/Steve Ladd/Elaine Storey 01/04/2018	Team Managers have been made aware of the importance of this action again in performance meeting on 30/04/18. Children's Plan are the starting point of supervision discussion, recording is now showing an increase in this taking place. This action will continue to reinforced through Quality Assurance Framework. ACTION COMPLETE	GREEN	
6.7	Core Group guidance and frequency to be revised, to reduce number of core groups taking place and increase quality.	Managers having more opportunity for oversight of core groups and review of plans with reduced numbers.	Audit Performance Information	Siobhan Hughes/Colleen Male 26/02/2018	Implemented on the 26/02/2018 and a briefing has been shared with workers, managers and partner	GREEN	

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					agencies. This is now embedded in practice. ACTION COMPLETE		
6.8	Reflective practice cards to be utilised through supervision to support workers to carry out planned and purposeful work.	Clear reflection recorded in supervision.	Audit	Siobhan Hughes 30/03/2018	Reflective practice cards have been given to all practitioners. A workshop has taken place with managers. Staff report positively that they receive reflective supervision, however this is not always clearly recorded/evident on case files. This continues to be a practice priority and will be continued to be monitored and addressed through Quality Assurance Framework. ACTION COMPLETE	GREEN	
6.9	All team managers without a management qualification to be offered this through the apprenticeship levy.	Team managers enrolled on a management training course which enables them to become skilled and effective managers, who have a clear impact on practice.	Review	Donna Chapman 01/12/2017	Cohort of managers commenced training in September 2018. Training is on-going. ACTION COMPLETE	GREEN	

RECOMMENDATION 7:

Ensure that arrangements for permanence planning are robust and that permanence plans progress within the child's timescale, to avoid children experiencing delays.

Summary from Ofsted Inspection:

- The local authority recognises that more needs to be done so that children who are long-term fostered have their care confirmed by formal decision making about permanence, and so that any uncertainty that they may experience while waiting for a decision is minimised.
- In a small number of cases, there was some drift and delay for children waiting to be found long term carers, and a greater focus on purposeful and targeted family finding is required.
- Services for children who need permanence, but for whom adoption is not appropriate, are not yet consistent enough.
- The service is developing a permanence tracker. This includes all children who have a permanence plan, with the aim of strengthening senior and team management oversight and the grip on permanence activity other than adoption
- Independent reviewing officers (IROs) regularly review care plans, and more robust and recent scrutiny is beginning to improve practice, particularly for permanence.
- The independent reviewing service has recently established a red, amber and green (RAG) rating escalation process to introduce more robust scrutiny and to address less effective care planning. In most cases where concerns are escalated, this results in a positive impact for children. This escalation process is beginning to improve practice, particularly in relation to permanence planning for children who do not have an adoption care plan.

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
7.1	Permanence policy to be refreshed	Permanency Policy will enable social workers and managers to understand the principles of permanency planning and how these apply to individual cases and all permanency planning will be timely.	Audit	Lisa Preston 01/03/2018	Permanency Policy has been updated and has been shared across the service. It is available on the intranet. Permanency Audit in October 2018 confirmed adherence to policy. ACTION COMPLETE	GREEN	
7.2	All Looked After Children to have a Permanency Plan following their 2 nd Statutory Review	All Looked After Children to have a Permanency Plan following their 2 nd Statutory Review	Audit	Lisa Kelly/ Siobhan Hughes 02/03/2018	All children are recorded as having a permanency plan at their 2 nd review. However these will be	GREEN	

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					<p>dip-sampled on a quarterly basis to ensure that they robust and good quality. This will also help us to measure improvements in permanency planning.</p> <p>The last dip Sample took place in September 2018 and only a small minority of cases did not have a clear permanency plan. This action will form part of our Quality Assurance Framework.</p> <p>ACTION COMPLETE</p>		
7.3	All children moving into long term fostering to be formally matched with their long term foster carer.	All children moving into long term fostering will be in a placement suitable to their needs	Audit	Lisa Preston 01/02/2018	Children and young people are being presented to fostering panel to formally approve their long-term match with their carers. Cases are being tracked by the permanency co-ordinator through the	GREEN	

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					<p>permanency tracker and social workers are being progress chased where a long-term fostering match has been agreed to take place.</p> <p>New Permanency Co-ordinator continues to monitor and oversight of this activity.</p> <p>ACTION COMPLETE</p>		
7.4	Permanence Strategy to be embedded.	A clear vision and strategic approach across children's services to improve approach to permanency.	Review	Lisa Preston 01/03/2018	<p>Permanency Strategy has been finalised and has been launched across the service.</p> <p>Permanency Audit undertaken in October 2018 highlighted that permanency strategy is becoming embedded.</p> <p>This will continue to be driven by Permanency Coordinator going forward.</p> <p>ACTION COMPLETE</p>	GREEN	
7.5	Implementation of the permanency tracker.	Ensure that there is management oversight of all cases where	Audit	Lisa Preston 01/02/2018	Completed and is use. Permanency Tracker	GREEN	

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
		permanency outside the birth family is required and to track and monitor the progression of the permanence plans, preventing delay.			meetings established. ACTION COMPLETE		
7.6	Permanence Forum to go live	Clear evidence that plans for permanency are expedited post LAC review.	Audit	Lisa Preston 15/01/2018	Permanence Forum is now in operation, social workers are able to book onto the forum for consideration of a permanency plan. The permanency coordinator is also using the tracker to progress chase social workers where there is a need to consider permanency options. ACTION COMPLETE	GREEN	
7.7	Lunchtime briefings 'matching to long term fostering' on CPR's and embedding the permanence agenda in the implementation of children's care plans.	All relevant staff to have an understanding of the fundamentals of Permanency and able to create good quality CPRs.	Audit	Lisa Preston 01/04/2018	Briefings have taken place, the permanence coordinator is now the lead for embedding this on a continuous basis. Permanency Action Plan is in place to address learning from	GREEN	

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					permanency audit. ACTION COMPLETE		
7.8	Review of the structure of CPS.	A clear focus on the permanency agenda and transference of good practice from adoption to long term fostering.	Audit	Lisa Preston 01/04/2018	New structure commenced on the 1 st September 2018. Vacant posts have now all been filled bar one which is out to advert again. ACTION COMPLETE	GREEN	
7.9	Plans for permanence to be included in the Quality Assurance Framework auditing schedule.	Understanding of the quality of children's plans for permanence and actions developed to continuously improve these. .	Audit	Siobhan Hughes / Lisa Preston 01/04/2018	A separate child journey auditing tool has been created for LAC, with clearer evaluation questions for permanence. This is now embedded in Quality Assurance Framework. ACTION COMPLETE	GREEN	

RECOMMENDATION 8:

Ensure that children who are looked after have assessed contact agreements with their families that are sufficiently detailed and ensure that contact supervisors are specifically trained in supervision.

Summary from Ofsted Inspection:

- While family contact for children is promoted and most children see their families, assessments do not evidence careful enough consideration of children's contact needs.

- Most contact agreements seen by inspectors did not sufficiently set out the details of practical arrangements, the focus for the contact or its outcomes.
- Contact supervisors are not specifically trained in supervision.
- The local authority already had plans to review this service, but this had not happened by the time of the inspection.

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
8.1	Contact policy and procedures to be revised and embedded across children's services.	Clear expectations and guidelines, which creates good practice in looked after children's contact.	Audit	Elaine Storey 01/04/2018	Contact policy and procedures have been updated and shared within the management group and have been added to Trix. Workshops with staff have taken place. ACTION COMPLETE	GREEN	
8.2	Templates for contact including assessment contact agreement to be revised and embedded.	Contact agreements that are sufficiently detailed to enable good practice in supervised contact.	Audit	Elaine Storey 01/04/2018	Contact agreement has been completed in line with policy and procedures, shared within the management group and social workers are using as contact is agreed. ACTION COMPLETE	GREEN	
8.3	Contact agreement to be reviewed at second LAC review as part of permanence planning.	The levels of contact provided to each individual child will reflect the child's needs and care plan at that time.	Audit	Elaine Storey/Steve Ladd 01/03/2018	Review of contact has taken place in long term placement arrangements. Review of contact arrangements are starting to be considered prior to the second review and the review before the final	GREEN	

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					care plan is lodged with the court. Thus enabling long term care planning. This action is now part of usual care planning arrangements. ACTION COMPLETE		
8.4	Children, young people and their families to be included in contact agreements and invited to initial and review meetings.	Contact agreements, which include families and set out details of contact and expectations on all parties.	Audit	Elaine Storey 01/04/2018	Parents and children are being invited to attend the reviews of their contact, where appropriate. ACTION COMPLETE	GREEN	
8.5	Contact workers and all workers who regularly undertake contact to be trained in supervising and assessing contact.	All workers undertaking contact to be able to carry out high quality contact and assessment and analysis of contact.	Audit	Siobhan Hughes/Elaine Storey 01/06/2018	Training has taken place. Audit of Contact scheduled for March 2019 to ensure all actions relating to contact are consolidated. ACTION COMPLETE	GREEN	

RECOMMENDATION 9:

Improve children's engagement and participation and ensure that information shared and numbers of children participating in their child protection conferences are collated for future learning and service delivery.

Summary from Ofsted Inspection:

- Child protection conferences are timely. They are sensitively and effectively chaired and well attended, and they facilitate effective information sharing and engagement by partner agencies. Conference chairs use a red, amber and green (RAG) rating of practice following case conferences. This provides additional management oversight and feedback to social workers, and leads to improvements in practice.
- Arrangements for children to participate in their child protection case conferences are weak.
- Some children are supported to contribute to their plans, or to attend their meetings, and a commissioned advocacy service is available. However,

the local authority does not capture specific data or information around children's participation in case conferences to inform future service delivery or learning.

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
9.1	Children and young people's participation in case conferences to be monitored on a monthly basis and broken down by team and worker to identify any barriers.	More children and young people to participate in their Child Protection Conferences and their views to be collated and incorporated in Service User Feedback Reports.	Performance Information Audit	Lisa Kelly 01/03/2018	Systems in place to monitor and monthly reporting have commenced. Principal IRO reports on this monthly. Principal IRO has commenced individual meetings with TM's to provide individual feedback. The service user impact group, along with the IT dept. are developing an app to support young people to provide their views for their conference. This will be piloted by CMT North and Conference Chairs. Significant progress made in this area as noted within JTAI letter. To form part of on-	GREEN	

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					going Quality Assurance Activity. ACTION COMPLETE		
9.2	The Service User impact project to ensure the prioritisation of young people's participation and consultation.	Greater focus by all services on service user participation, ensuring that children's voices are collated and heard and utilised to improve service delivery and practice improvement.	Performance Information Review	Fran Doyle 01/07/2018	Two Service User Impact weeks undertaken across Children's Services. These now form part of usual Quality Assurance Framework activity. ACTION COMPLETE	GREEN	
9.3	Child Protection Conference style to be reviewed and revised to embed relationship based practice.	A conference style which will encourage children and parent's engagement in child protection conferences.	Performance Information Review Service User Feedback	Lisa Kelly/Siobhan Hughes 01/06/2018	Visits have taken place to Brighton and Hove, which involved IC and minute takers, to discuss and observe relationship based practice in action, with a view to embedding this within the conference model within Shropshire. Timeline in respect of plans to implement the model in place. Plans are being piloted and approved at SSCB with a view	GREEN	

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					to go live in April 2019. ACTION COMPLETE		
9.4	Hold conferences in schools (more community based venues that are child friendly)	Increased participation in case conferences by young people.	Performance Information Service User Feedback	Lisa Kelly 01/04/2018	Systems in place to monitor this and record reasons not held in school venue. However, a conference not being held in a school venue does not exclude the child from attending their conference and arrangements are made to support them to do so. We are able to evidence more children participating in their meetings. ACTION COMPLETE	GREEN	
9.5	Review all tools for gathering the views of service users prior to child protection conferences and utilisation of these to be reported at a team level.	Increased understanding of service users views for conferences.	Performance Information Review Service User Feedback	Lisa Kelly 01/04/2018	All tools have been reviewed and their use and finding are being reported on a quarterly basis, to senior managers and sscb QA subgroup. This feedback is completed with parents at the end of a CP plan, and work is taking place to	GREEN	

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					collate and ensure Children's views are collated and reported to conference-reporting on this takes place monthly and is shared with all levels of Children's services. This all forms part of our Quality Assurance Framework. ACTION COMPLETE		
9.6	Discussions between chair and social worker ahead of the meeting to determine the level of the child or young person's participation in the conference to be recorded on the case files.	Increased participation in case conferences of young people and demonstrable consideration of their needs in being heard on case files.	Performance Information Audit Service User Feedback	Lisa Kelly/ Siobhan Hughes 01/03/2018	This has commenced, and is being embedded in practice. Chairs make contact with SW prior to each conference to establish the nature of and how best to support the participation of children and young people in their conference. Chairs will also now raise with TM's if there are any obstacles to this being achieved. This has been included in	GREEN	

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					<p>recommendations on the monthly reporting on Children's participation in their conference. Minutes of conference have been amended to comment on child's participation in their meeting and we are seeing the evidence of this within each child / young person's minutes.</p> <p>ACTION COMPLETE</p>		
9.7	Explore potential for use of different multi-media to capture children's feelings in this process (discuss feedback of use on CDT)	Increased capturing of children and young people's views.	Performance Information Service User Feedback	Fran Doyle 01/04/2018	<p>Use of an App – has been explored with internal IT manager – Andy Boxall, purpose to collect the views and feelings of children and young people, where this is there preferred method of communication. Demo being produced to understand capabilities and reporting.</p>	GREEN	

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					<p>Use of multi media through film/video engaging 5 young people and Care Leavers - expressed their views and feelings and participation in their participation in child protection conferences. And to improve care leavers' experience of the pathway planning process.</p> <p>Added bonus of building confidence and skills.</p> <p>Filming weekend took place 24th February 2018. This work continues to be a strength for Shropshire.</p> <p>ACTION COMPLETE</p>		
9.8	Increased drive on advocacy services/inclusion to support children (send advocacy, leaflets out with minutes) (have conversations with child on advocacy).	Increased numbers of young people utilising advocacy.	Performance Information	Lisa Kelly 01/04/2018	IRU Admin services send this information out with invites to conference (depending on age of child).	GREEN	

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					<p>Chairs will discuss with young people who attend conference meet with the chair advocacy services. IRO's will also discuss advocacy services with YP</p> <p>This will be recorded either in minutes or obs. There has been an increase in advocacy being used by the children and YP in or Care. Coram voice has completed attendance at CMT and LAC Teams meetings to discuss advocacy and the use. Use of advocacy continues to be high for LAC.</p> <p>ACTION COMPLETE</p>		
9.9	Track the use of advocacy and ensure that reasons why young people do not want an advocate are recorded on the young person's case file.	Increased numbers of young people utilising advocacy and reasons why young people do not want advocacy clearly understood.	Performance Information Audit	Lisa Kelly/Siobhan Hughes 01/03/2018	<p>IRO's and IC's will record discussions with YP.</p> <p>The use of advocacy is reported on within Coram voice data.</p>	GREEN	

Ref	Action	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
					Reports from Corum Voice shared with managers. We continue to promote Corum Voice and advocacy in CP Planning. ACTION COMPLETE		

RECOMMENDATION 10:

Ensure that care leavers have the opportunity to access apprenticeships to increase their opportunities for education, employment and training.

Summary from Ofsted Inspection:

- More care leavers are staying in education, employment or training immediately after they reach 18, but the proportion declines for older care leavers.
- The local authority has been slow to roll out an apprenticeship offer for care leavers, despite being a participant in the 'New Beginnings' initiative. At the time of the inspection, only one care leaver (now a graduate) was registered for an apprenticeship. The leaving care team has identified 14 care leavers who have the potential to be candidates for an apprenticeship. This is now being progressed at corporate parenting board level to ensure that the offer of apprenticeships is not subject to further drift.

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
10.1	Establish a corporate commitment to providing Care Leavers with the opportunity to access apprenticeships across Shropshire Council.	Suitable opportunities for Care Leavers across Shropshire Council.	Review	Clive Wright 01/02/2018	Corporate commitment and support given to create 10 apprentices across the Council. Apprenticeships now in place. ACTION COMPLETE	GREEN	
10.2	Establish a cross Directorate apprenticeship group, chaired by	Increased numbers of LAC apprenticeships being offered	Review	Karen Bradshaw/Michelle	This Task and Finish Group was	GREEN	

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
	the DCS to agree a clear process for the identification across the council of LAC apprenticeships.	to young people		Leith 01/02/2018	established and is now concluded as apprenticeships were developed and recruited to. ACTION COMPLETE		
10.3	Representative of children's services to attend the monthly apprenticeship levy board meetings.	Increased opportunities for LAC young people to access apprenticeships.	Review	Donna Chapman 01/02/2018	Complete – Donna Chapman Workforce Lead now attends this meeting. Tracie Watson Team manager, Leaving Care is part of this work, ACTION COMPLETE	GREEN	Ensure Children's Services are utilising the Apprenticeship Levy.
10.4	Apprentice Care Leaver Ambassador to be established within the Leaving Care Team.	To ensure that the views of Care Leavers are represented and to increase participation in all areas of strategic work.	Position established.	01/05/2018	Appointment made in August 2018 and Ambassador is developing role. ACTION COMPLETE	GREEN	
10.5	To explore opportunities for a pre-employment course to be made available to care leavers before they commence on an apprenticeship and to explore support to be made available to care leavers during course of the apprenticeship	To ensure that care leavers are fully prepared and supported for and during their apprenticeship.	Support in place. Feedback from care Leavers.	Tracie Watson 01/05/2017	An internal pre-employment course has been delivered to all identified Care Leaver Apprenticeships. We will be looking to develop this further in respect of next cohort of Care Leavers. ACTION COMPLETE	GREEN	

RECOMMENDATION 11:

Improve the arrangements for preparing care leavers for independent living, ensuring that they have appropriate opportunities for participation and that they know what support they can expect under the Shropshire pledge.

Summary from Ofsted Inspection:

- The support provided to care leavers when they consider that they are ready to move into independent accommodation is not always effective enough to ensure that these moves are successful. The local authority has recognised the need to provide more advice and guidance to its care leavers, and recently opened a drop-in facility in early September 2017 in Shrewsbury. As this is so new, it is too early to see any impact or its effectiveness. Supported accommodation providers offer training whenever a young person is ready or expresses a wish to move on. In order to offer more support, a training flat to help to ensure that young people are as ready as they can be for full independence is being developed by the local authority, although it is not yet in place.
- Care leavers do not have an active forum in which to celebrate their achievements or share their experiences with one another. They are aware of such opportunities for younger children in care, but do not consider these to be appropriate for them.
- Despite the efforts by the local authority to circulate relevant information to them, care leavers met by inspectors had little awareness of their entitlements. The Shropshire local offer, or the 'Pledge', was approved by the corporate parenting panel in September 2017. However, the information provided to young people does not make clear the level of financial support that they can expect, for example to set up home, contribute to transport costs, use gym or sports facilities, or for related expenses if they are accepted for a place at university.

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
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11.1	Develop Independence and life skills programme with all care providers that will deliver a consistent programme of independence for our care leavers.	Young people who are prepared for independence and are tenant ready.	Audit SU Feedback	Elaine Storey 01/06/2018	Meetings taken place on 23/1/18 and 28/2/18 with private providers, semi independent providers to ensure Shropshire young people are tenancy ready when moving into independent accommodation. Meetings have taken place with fostering training providers to ensure the independence programme for young people in foster care echoes that of the schemes used in children's homes and with semi independent providers. Training programme to be identified.	AMBER	
11.2	Training Flat to be available to all young people transitioning into Independence.	Young people to be prepared for independence and to have the experience of living on their own within a supported environment.	Audit SU Feedback	Elaine Storey 01/06/2018	Protocol for use of the Training Flat developed. Young people social workers coordinating plans to utilise as part of independence skills development.	GREEN	

11.3	Create a marketplace for providers of temporary accommodation to buy into the independence programme to ensure that they tenancy ready.	Young people who are prepared for independence and able to access accommodation.	Audit	Elaine Storey 01/06/2018	Housing meetings are planned with social care for this event to be developed and rolled out in February 2019.	AMBER	
11.4	Recruit and induct new Care Leaving Ambassadors	Two Care Leaving Ambassadors to work alongside LA staff in improving services to Looked After Children and Care Leavers.	Audit Service User Feedback	Fran Doyle/ Elaine Storey 01/06/2018	Care Leavers have been consulted and 4 have been identified as potential candidates to become Ambassadors. Training has been identified through links with Staffordshire Care Leavers Forum to assist with training of the Ambassadors. Care Ambassador apprentice role has been recruited too and CL in in post undertaking work with CiCC and Leaving Care Team	GREEN	

11.5	Care Leavers pledge to be revised to ensure that it is compliant with guidance and sets out clearly what Care Leavers can expect when they leave local authority care.	Care Leavers are aware of their entitlements and what support is available to them.	Review Service User Feedback	Karen Bradshaw/ Colleen Male/ Mick McCarthy/ Elaine Storey 01/11/2018	Ongoing meeting with partners in benefits and revenues, Benefits agency, travel/leisure and VS have taken place to establish their offer to care leavers. Further meetings with Emotional Health and Well Being Service and LAC Health are required to ensure specific offer details are clear before committing to Local Offer communication with young people. Engagement with young people is being established to ensure they are aware and continue to communicate with the wider care leaver population, following the visit with the Implementation Advisor for Care Leavers. Local Offer to be agreed by Cabinet and Directors	AMBER	
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11.6	Develop Independence and life skills programme to commence from age of 12 with all care providers that will deliver a consistent programme of independence for our care leavers.	Young people who are prepared for independence and are tenant ready.	Audit Feedback from young people/housing providers/PA's.	Elaine Storey 01/01/2019	Independence Programme agreed. All providers are on board with agreed model. Further work is required to model embedded across all providers but this work will form part of the Looked After Children and Care Leavers Service Manager work plan. Report to Corporate Parenting Panel in May 2019. ACTION COMPLETE	GREEN	
11.7	Create a marketplace for providers of temporary accommodation to buy into the independence programme to ensure that they tenancy ready.	Young people who are prepared for independence and able to access accommodation.	Audit	Elaine Storey 01/06/2018	As above. ACTION COMPLETE	GREEN	
11.8	Training Flat to be made available to all young people transitioning into independence.	Young people to be prepared for independence and are tenant ready.	Audit Feedback from young people/housing providers/PA's	Elaine Storey 01/06/2018	Training flat is now been used to support young people with developing independence skills. ACTION COMPLETE	GREEN	

RECOMMENDATION 12:

Ensure that all homeless young people aged 16 and 17 years are offered appropriate accommodation.

Summary from Ofsted Inspection:

- Social workers undertake appropriate assessments for homeless 16- and 17year-olds.
- However, they are not always timely enough, meaning that, when suitable alternative accommodation is necessary, any decision that a young person should become looked after is not always considered as quickly as possible.
- A small number of young people in the last year have been placed inappropriately in bed and breakfast accommodation until more permanent arrangements could be made.

Ref	Actions	Expected Impact/Outcome	Impact Measure	Lead and Timescale	Progress to date	Progress RAG	Impact RAG
12.1	Continue to work closely with Housing Options to ensure that joint assessments are immediate and appropriate efforts are made to gain suitable accommodation	16 and 17 year old homeless young people are assessed in a timely way and are consistently placed in suitable accommodation.	Audit Performance Information	Jeanette Hill 01/11/2017	This work is on-going and regular meetings take place across Children's Services and Housing to ensure that our responses are joined up, timely and result in good outcomes for the young person.	GREEN	
12.2	Housing to employ a Children and Young Person's Coordinator post on a two years fixed term contract.	To work alongside Children's Services and offer immediate support to homeless 16 & 17 year olds to enable them to return home, or to support young people who refuse Local Authority accommodation under S20 or who do not meet the threshold under the Southwark judgement with an overall aim of ensuring that all homeless 16/17 years either return to their family or are offered suitable accommodation. No young person being placed with	Data and audit information	Laura Fisher 01/06/2018	Interviews have been completed and post offered to Julie Wilde – currently going through HR checks before start date to be agreed.	AMBER	

		B&B accommodation.					
12.3	CPS to include available supported board and lodgings placements in placement information given to EDT.	16 and 17 year old homeless young people are assessed in a timely way and are consistently placed in suitable accommodation.	Audit Performance Information	Lisa Preston 01/03/2018	Action plan for SBL in place since beginning February 18. One action is to develop and keep up to date database with information on SBL placements to be included in EDT placement update. This information is now being included in daily emails to EDT and senior manager on call.	GREEN	
12.4	Permission for any young person to be placed in B&B to be sought from the Director of Children's Services or the on call manager out of hours.	Only in extreme situations should we be considering B&B accommodation for young people. Reduced use of B&B provision.	Performance Information	Lisa Preston/Fiona Adamson 15/01/2018	This process/system is embedded in practice	GREEN	
12.5	All options of accommodation offered to be clearly evidenced in observations, including if the young person has declined section 20 accommodation and the reasons for this.	Clearer evidence on case files that options have been considered for housing 16&17 year olds.	Audit	Lisa Preston/Jeanette Hill 01/04/2018	Guidance to staff has been provided and this will be monitored through audit.	AMBER	
12.6	Development of a leaflet with options available for homeless 16/17 year old, produced jointly with housing services. This will include a form for young for young people to sign, showing that they have understood	Evidence that young people have been given options and understand these clear on case files.		Jeanette Hill/Laura Fisher 01/04/2018	Leaflet completed	GREEN	

	options given to them.						
12.7	Strategic Working Group to be established to look at the availability of crash pads in the event of a crisis whilst assessments are undertaken.	The right accommodation available to young people at point of crisis which will prevent them going into B&B accommodation.	Audit	Laura Fisher 01/04/2018	Working group in place – first meeting held 26.02.2018 with diarised meetings every quarter – meetings ongoing	GREEN	

Closing the Loop on Improvement Actions

Shropshire Children's services are committed to the continuous improvement of practice within the service and utilise the Quality Assurance Framework to review practice on a regular basis, creating actions for improvement. As part of this we have an auditing framework which includes monthly child journey audits, regular thematic audits and an IRO/ICC dispute resolution process, looking at the whole picture of practice, the learning from which is shared with workers and managers, including learning from the service users whom we contact as part of the audit.

In addition to the Quality Assurance Framework, the IMPACT service user feedback project aims to change the culture and approach to gathering service user's views within children's services. One of the activities of this project is a service user feedback and practice observation week twice a year, the findings of which we will utilise alongside that from child journey audits, to measure the impact of our action plan.