



Children's Services Improvement Plan 2017-18

[December 2017]

Improvement Plan Highlight Report - progress to December 2017

Complete	7	Green	11	Amber	0	Red	0
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This is the second update of Version 3 of the Improvement Plan focusing on embedding improvement actions, for example, quality of social work practice, and evidencing the voice of the child. From the original 18 Recommendations overall RAG ratings demonstrate that seven are business as usual; of those remaining active recommendations eleven are rated GREEN.

Within the individual action plans there are 41 individual actions; of these 5 are complete, 36 are GREEN.

Key Successes

Further embedding of management oversight is driving service improvements, particularly around placement stability and Public Law Outline

Partners have jointly developed a Darlington Early Help Strategy

Key challenges

Continued culture change to one that embeds and evidences high quality social work practice

Driving consistency of good quality social work practice across all teams

Children’s Services Improvement Plan – Progress Report

At the time of this update, progress on the 18 recommendations demonstrates that:

- 7 are completed and are now considered to be Business As Usual Activity
- 0 RAG rated as Red
- 0 RAG rated as AMBER
- 11 RAG rated as GREEN

	Progress	Confidence
Completed	Actions completed or PI targets achieved	Completed/target achieved/outcomes delivered
Red	Actions/Pis not on track and remedial action required	Limited confidence that progress will be delivered on time
Amber	Actions/Pis not on track but actions in hand to address slippage	Reasonable confidence that progress will be delivered on time
Green	Actions/Pis on track and will be delivered on time	Confident that progress will be delivered on time

The tables below give a summary of progress for each of the recommendations with the RAG ratings, and then further detail on the individual performance measures (with performance data used as at end of **October**, in line with the performance report) and actions are shown in the more detailed tables on the succeeding pages.

Summary of Progress

Recommendation		Progress	
1	Ensure robust management oversight of the single assessment process at both first tier and senior management level, so that children and families are seen and risks evaluated within timescales that meet the child's need.	Recommendation Lead: YVONNE COATES & JOANNE STODDART	G
		<p>Five Action Learning Sets have taken place since the last update, these have been led by a Head of Service and attended by Team Managers and the Principal Social Worker.</p> <p>As a result of the Action Learning Sets a managers checklists has been implemented for the quality assurance of single assessments and care plans. This is promoting consistency across teams and also provide clear standards to new members of staff going forward.</p> <p>There has been an increase in the prevalence and quality of direct work with children following the action learning sets.</p> <p>A policy has been developed and implemented for the updating of single assessments for children who are looked after, this is beginning to increase consistency in practice.</p> <p>The use of chronologies for all cases continues to be highlighted especially for cases where neglect is a feature.</p> <p>Further embedding of management oversight of all Contacts into the service is taking place, all Contacts on Early Help existing Early Help Assessments (EHAs) which contain new information are now being screened to ensure that the Threshold for Social Care has not been met.</p> <p>An alert system has been established for Contacts coming into the department to alert the manager to ensure that contacts continue to be managed in a timely manner.</p> <p>The findings arising from Audit Moderation continue to be considered in monthly meetings with the Principal Social Worker and Workforce Development, and are informing training and staff development.</p> <p>The RAG rating is GREEN.</p>	

Recommendation		Progress	
2	<p>Drive improvement through the quality assurance of assessments that ensures that all areas of risk to children are addressed, historical information is considered and analysis is robust, so that children's needs, including the need for protection, are fully addressed.</p>	<p>Recommendation Lead: JOANNE STODDART</p> <p>Two case supervision tools are currently being piloted with Team Managers and a decision will be made as to which tool to adopt by the end of January.</p> <p>Action Learning Sets have been delivered involving all Team Managers, covering assessments, care plans, supervision, recording and evidence of direct work. The final Action Learning set in the current programme, focussed on step down from statutory services, will be delivered by the end of January.</p> <p>There remains a focus on the quality of chronologies. Assessment tools to support the production of single assessments continue to be sourced.</p> <p>The RAG rating is GREEN.</p>	G
3	<p>Improve the quality and timeliness of social work reports prepared for child protection conferences, ensure that initial child protection conferences are held within timescales that accord with statutory guidance, and ensure core groups are recorded effectively.</p>	<p>Recommendation Lead: JOANNE STODDART</p> <p>The Core Group guidance has now been revised and strengthened which includes a refresh of the Core Group Template. This is enabling staff to take a consistent approach to Core Groups.</p> <p>Signs of Safety methodology continues to be strengthened across all aspects of the service. A harm impact matrix has been rolled out and is improving the quality of analysis in all areas of work.</p> <p>The RAG rating is GREEN.</p>	G

Recommendation		Progress	
4	Review the current configuration of social work teams to ensure equity in workload distribution and that the working environment is conducive to good social work practice across the whole of the service.	Recommendation Lead: JANE KOCHANOWSKI	G
		<p>Regular monitoring by senior staff of social work caseloads continues and caseloads remain at 18 or below.</p> <p>There has been an increase in applicants for vacant safeguarding social work posts which is enabling more effective recruitment of highly skilled social workers. The vacancy rate as at the end of December 2017 was 13% and related to 11 posts.</p> <p>Agency workers have continued to convert to permanent posts, including Team Managers, IRO's and Social Workers.</p> <p>Attendance at dedicated social work job fairs continues. Director continues to lead NE ADASS/ADCS Workforce.</p> <p>The RAG rating is GREEN.</p>	
5	Review processes and resources available for performance monitoring at all levels of the organisation and ensure that robust arrangements are put in place as a matter of urgency.	BUSINESS AS USUAL ACTIVITY All actions within this recommendation are completed.	
6	Ensure that elected members are rigorous in their understanding of children's services performance and are enabled to robustly challenge senior managers to improve.	BUSINESS AS USUAL ACTIVITY All actions within this recommendation are completed.	

Recommendation		Progress	
7	Complete a thorough review of all children subject to section 20 accommodation to ensure that its use is legitimate and appropriate in all cases.	Recommendation Lead: JOANNE STODDART	G
		<p>The tracker has been well embedded for all children who have a section 20 legal status, which is managed by the Head of Service. In practice this enables the Head of Service to have oversight of the use of section 20 arrangements and challenge where appropriate.</p> <p>Guidance has now been prepared by an Advanced Practitioner who is also an AMHP to ensure Social Workers new to the Council have a clear understanding of how to assure themselves of the ability of a parent to consent. This also includes when to re-examine consent when a parent's capacity may have diminished due to a deterioration of their mental health or if there has been a significant change in circumstances.</p> <p>Independent Reviewing Officers continue to consider the appropriateness of the legal status of any children who are voluntarily accommodated under section 20 (CA 1989). If concerns are identified these are shared with both the relevant Social Work Team Manager and Service Manager.</p> <p>The RAG rating is GREEN.</p>	
8	Ensure that independent reviewing officers (IRO) demonstrate rigour when overseeing both the quality and progress of plans, and the frequency of social work visits to children who are the subject of child protection plans.	Recommendation Lead: MARTIN GRAHAM	G
		<p>Independent Reviewing Officers through their quality assurance responsibilities comment on the quality of child protection reports and care plans, this will be included in quarterly Audit and Quality Assurance activity reported to the Senior Management Team from Quarter 3 (October – December 2017) onwards.</p> <p>The themes arising from Independent Reviewing Officer challenge are now discussed at the monthly meeting between the Head of Quality Assurance and Practice Improvement, the Principal Social Worker and Workforce Development Manager that considers training and staff development implications. This will be used to revise existing programme, or develop / commission new training courses.</p>	

Recommendation	Progress	
	<p>The frequency of social work visits to children subject to child protection plans continues to be included in (a) weekly exception reports and (b) monthly Children's Social Care Performance and Quality Assurance Reports. This reporting of Social Work visits is now embedded practice.</p>	
<p>9 When IROs challenge poor practice, make sure this is clearly recorded and monitored to ensure improvements are made and where necessary, a lack of progress can be formally escalated to senior leaders.</p>	<p>Recommendation Lead: MARTIN GRAHAM</p>	<p>G</p>
<p>Following the Independent Reviewing Officers development session on in October 2017 the IRO Challenge working group has drafted revised guidance and a flow chart for consideration by colleagues. The final proposals will be considered by the children's Senior Management Team in January 2018.</p> <p>Independent Reviewing Officer challenge continues to be recorded on Liquid Logic. IROs contact the Social Work Team Manager and relevant Service Manager to ensure that they are aware of the dispute and can monitor progress with the Social Worker involved.</p> <p>Compliance is monitored through regular monthly reports to the Head of Service which includes formal challenges under the Dispute Resolution Process. If the IRO is of the view that the challenge is not progressing they discuss this in supervision with their Head of Service and follow up on agreed actions.</p> <p>A report is being developed so that the number of challenges, disputes and themes arising can be included as part of the Quality and Performance Framework.</p> <p>The themes arising from Independent Reviewing Officer challenge are now discussed at the monthly meeting between the Head of Quality Assurance and Practice Improvement, the Principal Social Worker and Workforce Development Manager that considers training and staff development implications. This will be used to revise existing programme, or develop / commission new training courses.</p> <p>The RAG rating is GREEN.</p>		

Recommendation		Progress	
10	Ensure when children are looked after that decisions about their need for permanence are timely with robust oversight, including by IROs.	Recommendation Lead: JOANNE STODDART	G
		<p>The permanence plan tracker is now well embedded for all children who have been looked after for a minimum of four months up to ten months. Permanence plans are in place for all children in this cohort.</p> <p>The PLO and legal trackers have been further embedded. All children who are involved in the PLO process, or where proceedings are to be initiated, are on-going or have closed are included within this tracker.</p> <p>The permanence plan and PLO/legal trackers continue to be shared monthly with managers.</p> <p>Interim Court Care Plans and Final Court Care Plans continue to be approved by a Service Manager prior to being lodged at Court. Practice is now embedded to include the Head of Service in all final care planning meetings and Final Court Care Plans are now quality assured and approved by the Head of Service prior to being lodged at Court.</p> <p>The RAG rating is GREEN.</p>	
11	Ensure that return interviews are offered for all children who go missing and that the take-up of these interviews is monitored and information is used to inform plans to keep children safe.	Recommendation Lead: YVONNE COATES	G
		<p>The provision of return home interviews is now fully embedded and therefore business as usual. The focus is now on the quality of return to home interviews, auditing of interviews is underway and findings are informing any training needs. The Manager with responsibility is escalating any concerns regarding plans to the Service Manager of the relevant division thus ensuring robust management oversight.</p> <p>The RAG rating is GREEN.</p>	

Recommendation		Progress	
12	Make sure that early help is effectively targeted, coordinated and evaluated so that families receive appropriate support when need is first identified, and the quality of early help assessments is improved by robust quality assurance arrangements.	Recommendation Lead: YVONNE COATES	G
		<p>Work continues with partners to finalise the Early Help Strategy, this is scheduled to have final consideration by the DSCB in February 2018. Further work continues, to strengthen the Early Help Strategy Group to ensure commissioning intentions include Early Help as a consideration.</p> <p>There has been further improvement in schools' commitment to Early Help and they are developing their own Early Help offer according to individual school need.</p> <p>A full update report is scheduled for this Board agenda.</p> <p>The RAG rating is GREEN.</p>	
13	Extend the range of housing provision available to homeless 16- and 17-year-olds and for care leavers so that no young person is placed in bed and breakfast accommodation.	BUSINESS AS USUAL All actions within this recommendation are completed.	
14	Ensure that all children looked after can access an independent visitor when necessary, and that the impact of advocacy is subject to evaluation and review.	BUSINESS AS USUAL Commissioned services monitored and subject to evaluation and review.	

Recommendation		Progress	
15	Ensure that all children looked after have timely initial health assessments.	Recommendation Lead: JANE KOCHANOWSKI	G
		<p>The weekly tracker is now well embedded and performance is improving month on month. Any issues with completion of consent forms is now addressed immediately.</p> <p>Telephone liaison with health colleagues continues to take place at the point of the child becoming looked ensures a provisional date for the assessment can take place within 20 working days.</p> <p>The RAG rating is GREEN.</p>	
16	Improve the monitoring of educational progress of children looked after so that action is taken to narrow the gap in attainment compared with all children in Darlington.	BUSINESS AS USUAL ACTIVITY All actions within this recommendation are completed.	
17	Improve the consistency and quality of personal education plans and ensure that the pupil premium is effectively utilised to improve the educational attainment and achievement of looked after children.	BUSINESS AS USUAL ACTIVITY All actions within this recommendation are completed.	

Recommendation		Progress
18	Ensure that reports are completed on fostering and adoption services every six months so that elected members, senior leaders and other stakeholders receive information about performance, standards, achievements and service developments in line with national minimum standards.	BUSINESS AS USUAL ACTIVITY Now included within the workplan and scope of the Corporate Parenting Panel.

Recommendation 1: Ensure robust management oversight of the single assessment process at both first tier and senior management level, so that children and families are seen and risks evaluated within timescales that meet the child's need. **(YVONNE COATES)**

Related Performance Indicators (reported on through the accompanying performance report)		Lead Officer	Year End Target	Progress RAG
PI Number	Description			
CSC 022	% of referrals completed within 24 hours	Yvonne Coates	90%	98%
CSC 026	% of referrals completed in over 72 hours	Yvonne Coates	5%	1%
CSC 038	% of children & families assessments completed within 45 working days	Yvonne Coates	90%	94%
CSC 060	% of children & families assessments completed within 25 working days	Yvonne Coates	60%	63%
CSC 080	% of children & families assessments completed within 15 working days	Yvonne Coates	40%	42%
CSC 100	% of children & families assessments completed within 10 working days	Yvonne Coates	25%	30%
CSC 176	% of cases where ICPC is held within 15 days of the initial strategy discussion	Martin Graham	100%	96%

Action	Task Lead	Start Date	Completion Date	RAG
a. Maintain support to agencies in providing quality information that aids decision making including seeking consent to share the information via bite-size training sessions. Evidence will be a decrease in the number of no further action contacts into the department.	Yvonne Coates	Sept 2017	Mar 2018	G
b. Sustained management oversight on all contacts to ensure there is clear management rationale for progression or no further action to be monitored via audit.	Yvonne Coates	Aug 2017	Sept 2017	C
c. Continue with quarterly audit into re-referrals, no further action and strategies that do not progress to ICPC to ensure risk is appropriately managed.	Yvonne Coates	Aug 2017	Mar 2018	G

Action	Task Lead	Start Date	Completion Date	RAG
Improve the quality of practice in the priority areas of assessment, care planning and neglect enabling consistent practice and the production of better quality reports				
d. Enhance the quality of practice and ensure consistency in <i>assessments</i> to ensure that: <ul style="list-style-type: none"> • the right information is gathered • the right people are included • voice of the child is evidenced • risks are identified • analysis is robust • decision making is clear • they are completed within the child’s timescales 	Joanne Stoddart	Sept 2017	Mar 2018	G
e. Embed effective <i>care planning</i> to ensure that: <ul style="list-style-type: none"> • strengths and concerns are identified, maximising the strength of the family • all resources from the wider family and professionals are involved in the planning and intervention • voice of the child is evidenced • actions are SMART • it is regularly reviewed against the outcomes required • analysis is robust; decision making is clear • they are completed within the child’s timescales 	Joanne Stoddart	Sept 2017	Mar 2018	G
f. Increase the focus on <i>neglect</i> to ensure that children suffering from long term neglect are identified and where appropriate services / interventions are provided.	Joanne Stoddart	Sept 2017	Mar 2018	G
Enhance audit programme ensuring that it informs workforce development				
g. Strengthen workforce development programme ensuring it is linked directly with the outcomes of the audit programme.	Martin Graham	Sept 2017	Mar 2018	G

Recommendation 2: Drive improvement through the quality assurance of assessments that ensures that all areas of risk to children are addressed, historical information is considered and analysis is robust, so that children’s needs, including the need for protection, are fully addressed. **(JOANNE STODDART)**

Related Performance Indicators (reported on through the accompanying performance report)		Lead Officer	Year End Target	Progress RAG Qtr2
PI Number	Description			
CSC 340a	% of assessments rated as good or outstanding	Joanne Stoddart	30%	41%
CSC 340b	% of assessments rated as requires improvement	Joanne Stoddart	60%	52%
CSC 340c	% of assessments rated as inadequate	Joanne Stoddart	10%	7%

Action	Task Lead	Start Date	Completion Date	RAG
a. Management oversight on all case closures evidences the impact of interventions on improving outcomes for the child and gives consideration to next steps actions that continue to support the outcomes for the child.	Joanne Stoddart	Sept 2017	Mar 2018	G
b. Strengthen the evidence of impact on the child and ensure consistency is maintained throughout the assessment and is considered at the closure point. This will be evidenced by an increase in the percentage of assessments rated as good or outstanding.	Joanne Stoddart	Sept 2017	Mar 2018	G
c. Further embed a range of good quality assessment tools to drive up the quality of comprehensive single assessments. This will be evidenced by an increase in the percentage of assessments rated as good or outstanding.	Joanne Stoddart	Sept 2017	Mar 2018	G
d. Embed the Signs of Safety model to ensure assessments are focused and analytical. This will be evidenced by an increase in the percentage of assessments rated as good or outstanding.	Joanne Stoddart	Sept 2017	Mar 2018	G
e. Embed the use of reflective practice processes throughout Social Work teams to further challenge and enhance quality of practice.	Joanne Stoddart	Sept 2017	Mar 2018	G

Recommendation 3: Improve the quality and timeliness of social work reports prepared for child protection conferences, ensure that initial child protection conferences are held within timescales that accord with statutory guidance, and ensure core groups are recorded effectively.
(JOANNE STODDART)

Related Performance Indicators (reported on through the accompanying performance report)		Lead Officer	Year End Target	Progress RAG
PI Number	Description			
CSC 176	% of cases where ICPC took place within 15 days of the initial strategy discussion	Joanne Stoddart	100%	96%

Action	Task Lead	Start Date	Completion Date	RAG
a. To strengthen the effectiveness and consistency of the recording of Core Groups.	Joanne Stoddart	Sept 2017	Mar 2018	G
b. Reflect Signs of Safety methodology throughout key documentation used by Social Workers.	Joanne Stoddart	Sept 2017	Mar 2018	G
c. Further develop LiquidLogic reporting to provide additional management information across the child protection conference workflow.	Sharon Raine	Sept 2017	Dec 2017	G

Recommendation 4: Review the current configuration of social work teams to ensure equity in workload distribution and that the working environment is conducive to good social work practice across the whole of the service. **(JANE KOCHANOWSKI)**

Related Performance Indicators (reported on through the accompanying performance report)		Lead Officer	Year End Target	Progress RAG
PI Number	Description			
CSC 352	% of substantive posts that are filled by agency social workers	Jane Kochanowski	15%	13%
CSC 393	Average caseload of qualified social workers (excluding ASYE)	Jane Kochanowski	19	18
CSC 394	Average caseload of ASYE social workers	Jane Kochanowski	10	10
NEW	Number of agency staff continuously in post for 18 months or more	Jane Kochanowski	-	-

Action	Task Lead	Start Date	Completion Date	RAG
a. Sustain levels of permanent staff in the Social Work teams.	Jane Kochanowski	Aug 2017	Mar 2018	G
b. Continue to ensure the mix of skills and experience is distributed across teams to maximise efficiencies and develop high quality practice.	Jane Kochanowski	Aug 2017	Mar 2018	G
c. Continue to monitor the length of service of agency staff teams to ensure stability with teams.	Jane Kochanowski	Aug 2017	Mar 2018	G

Recommendation 7: Complete a thorough review of all children subject to section 20 accommodation to ensure that its use is legitimate and appropriate in all cases. **(JOANNE STODDART)**

Related Performance Indicators (reported on through the accompanying performance report)		Lead Officer	Year End Target	Progress RAG
PI Number	Description			
There are no performance indicators associated with this recommendation				

Action	Task Lead	Start Date	Completion Date	RAG
All LAC voluntarily accommodated via Section 20 will be appropriate and consent from parent/person with parental responsibility clearly evident				
a. Embed and strengthen processes that are currently in place to ensure Section 20 status remains appropriate throughout its duration.	Joanne Stoddart	Sept 2017	Mar 2018	G
b. Undertake six-monthly audits on all LAC with Section 20 status until satisfied that systems to monitor this legal status are robust.	Joanne Stoddart	Sept 2017	Mar 2018	G
c. IROs to assure themselves that the status of a looked after child following review, if voluntarily accommodated, remains appropriate.	Martin Graham	Sept 2017	Mar 2018	G

Recommendation 8: Ensure that independent reviewing officers (IRO) demonstrate rigour when overseeing both the quality and progress of plans, and the frequency of social work visits to children who are the subject of child protection plans. **(MARTIN GRAHAM)**

Related Performance Indicators (reported on through the accompanying performance report)		Lead Officer	Year End Target	Progress RAG
PI Number	Description			
CSC 252a	% of CP statutory visits completed within timescales (monthly)	Joanne Stoddart	-	97%
CSC 252b	% of CP statutory visits completed within timescales (cumulative)	Joanne Stoddart	-	90%
CSC 338	% of case file audits rated as good or outstanding	Martin Graham	30%	Qtr 2 41%
CSC 339	% of case file audits rated as requires improvement	Martin Graham	60%	Qtr2 52%

Action	Task Lead	Start Date	Completion Date	RAG
a. Embed the regular collation of Independent Reviewing Officer’s views on the quality and progress of Care Plans to provide feedback to Senior Management that strengthens the identification of themes that informs workforce development and staff training.	Martin Graham	Aug 2017	Mar 2018	G
b. Embed the practice where Independent Reviewing Officers monitor at Child Protection Conferences, the frequency of social work visits undertaken to children and young people subject to Child Protection Plans and ensure that concerns are escalated to senior managers. Themes will be reported and actioned as part of the Performance and Quality Framework.	Martin Graham	Aug 2017	Mar 2018	C

Recommendation 9: When IROs challenge poor practice, make sure this is clearly recorded and monitored to ensure improvements are made and where necessary, a lack of progress can be formally escalated to senior leaders. **(MARTIN GRAHAM)**

Related Performance Indicators (reported on through the accompanying performance report)		Lead Officer	Year End Target	Progress RAG Qtr 2
PI Number	Description			
CSC 340	% of case file audits rated as inadequate	Martin Graham	10%	7%

Action	Task Lead	Start Date	Completion Date	RAG
a. Embed the practice where Independent Reviewing Officer challenge under the formal Dispute Resolution Process is recorded and that contact is made with the line manager responsible for the case to ensure that they are aware of the dispute and can monitor progress with the Social Worker involved.	Martin Graham	Mar 2017	Mar 2018	G
b. Ensure that Independent Reviewing Officer challenge is recorded and information collated monthly including outcomes of formal challenges under the Dispute Resolution Process. The number of challenges, disputes and themes arising will be reported as part of the Performance and Quality Framework and will inform workforce development and staff training.	Martin Graham	Aug 2017	Mar 2018	G
c. Ensure that challenges made and the outcome is recorded within the Social care Record on Liquid Logic.	Martin Graham	Aug 2017	Mar 2018	G

Recommendation 10: Ensure when children are looked after that decisions about their need for permanence are timely with robust oversight, including by IROs. **(JOANNE STODDART)**

Related Performance Indicators (reported on through the accompanying performance report)		Lead Officer	Year End Target	Progress RAG
PI Number	Description			
CSC 268a	% of children with a permanency plan in place by 4 months	Martin Graham	90%	-
CSC 279	Average time between coming into care and being placed for adoption and adopted	Joanne Stoddart	590 days	303 days

Action	Task Lead	Start Date	Completion Date	RAG
Ensure timely permanence planning for all children to ensure they have the opportunity of a stable, permanent home and long-term relationships in a placement appropriate to their needs				
a. Further strengthen management oversight of Court processes: <ul style="list-style-type: none"> • Further embed both the current permanence and legal trackers to ensure management oversight of all children who have become looked after but who have yet to be placed in a permanent home. • Further embed a change of practice to ensure interim Court Care Plans are quality assured and approved by a Service Manager prior to being lodged at Court. • Further embed a change of practice to ensure a Head of Service is involved in any final Court Care Plan meetings that are deemed complex or contentious to aid in decision-making. • Further embed a change of practice to ensure final Court Care Plans are quality assured and approved by a Head of Service prior to being lodged at Court. • Further embed a change of practice to ensure IROs are forwarded the final Court Care Plan prior to lodging at Court. 	Joanne Stoddart	Sept 2017	Mar 2018	G

Action	Task Lead	Start Date	Completion Date	RAG
b. Introduce multi-agency Care Team Meetings for all looked after children. These to be held between scheduled LAC reviews to maintain robust and evident oversight of planning.	Joanne Stoddart	Sept 2017	Mar 2018	G
c. Multi-agency Care Team meeting policy and procedure to be developed; rolled out and embedded.	Joanne Stoddart	Aug 2017	Mar 2018	G
Ensure that permanency planning is supported by clear, well communicated guidance that is understood by all relevant staff				
d. Ensure that Social Workers, managers and IROs develop a shared understanding and ownership of the permanence and legal tracker, and also the newly introduced Care Team meetings.	Joanne Stoddart	Oct 2016	Mar 2018	G

Recommendation 11: Ensure that return interviews are offered for all children who go missing and that the take-up of these interviews is monitored and information is used to inform plans to keep children safe. **(YVONNE COATES)**

Related Performance Indicators (reported on through the accompanying performance report)		Lead Officer	Year End Target	Progress RAG
PI Number	Description			
CSC 216	% of return interviews completed within 72 hours (included within operational level scorecard)	Yvonne Coates	96%	84%

Action	Task Lead	Start Date	Completion Date	RAG
Ensure that all LAC return home interviews are completed on Liquidlogic with timescales				
a. Ensure return home interviews are consistently recorded on Liquidlogic	Yvonne Coates	Sept 2017	Dec 2017	C
b. Ensure the quality of return home interviews and subsequent actions minimise the risks to vulnerable young people.	Yvonne Coates	Sept 2017	Mar 2018	G
e. Undertake a quarterly audit to assess the quality and consistency of the return home interviews and actions recorded to address identified risks and how they inform safety plans.	Yvonne Coates	Sept 2017	Mar 2018	G

Recommendation 12: Make sure that early help is effectively targeted, coordinated and evaluated so that families receive appropriate support when need is first identified, and the quality of early help assessments is improved by robust quality assurance arrangements.
(YVONNE COATES)

Related Performance Indicators (reported on through the accompanying performance report)		Lead Officer	Year End Target	Progress RAG
PI Number	Description			
CSC 001	Number of Early Help Assessments	Yvonne Coates	-	981
CSC 011	% of contacts leading to a referral	Yvonne Coates	35%	24%
CSC 022	% of referrals completed within 24 hours	Yvonne Coates	90%	98%
CSC 026	% of referrals completed in over 72 hours	Yvonne Coates	5%	1%

Action	Task Lead	Start Date	Completion Date	RAG
a. Embed the use of the revised audit tool for Early Help with a focus on outcomes and impact for children.	Yvonne Coates	Sept 2017	Nov 2017	C
b. Ensure any emerging themes from audits are addressed through training via the Workforce Development Programme.	Yvonne Coates	Sept 2017	Mar 2018	G
c. Sustain and evidence management oversight during the completion of the assessment and at final sign off.	Yvonne Coates	Sept 2017	Dec 2018	C
d. Undertake a Service Review of the effectiveness of the re-modelled Early Help Service 12 months after implementation.	Yvonne Coates	Mar 2018	Mar 2018	G
e. Continue to develop the Multi-agency Strategy Group to have a focus on sustaining an effective Early Help Offer which addresses gaps and identified needs	Yvonne Coates	Sept 2017	Mar 2018	G

Recommendation 15: Ensure that all children looked after have timely initial health assessments. **(JANE KOCHANOWSKI)**

Related Performance Indicators (reported on through the accompanying performance report)		Lead Officer	Year End Target	Progress RAG
PI Number	Description			
CSC 247	% of new LAC with Initial Health Assessments completed within 20 working days	J Kochanowski	100%	88%

Action	Task Lead	Start Date	Completion Date	RAG
a. Maintain management oversight of the quality of the documentation submitted to Health to prevent unnecessary delays.	Joanne Stoddart	Aug 2017	Nov 2017	G
b. Drive existing practice to ensure that teams complete the required paperwork on time and to the required standard	Joanne Stoddart	Aug 2017	Mar 2018	G
c. Sustain relationships between County Durham and Darlington Foundation Trust (CDDFT) and Children’s Social Care to ensure compliance with standards is maintained.	Jane Kochanowski	Aug 2017	Mar 2018	G