

Children's Improvement Plan 2018/19

November 2018







CHILDREN S IMPROVEMENT PLAN ON A PAGE 18/19

Our work streams

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PLATFORMS

Our priorities

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2. Identifying, assessing and responding to risk

3. Robust and effective planning

4. Building a skilled and stable work force

5. Implementing an all age Partnership Early Help Offer, strengthening partnership working and improving the LSCB

6. Creating the conditions for social work to flourish

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CHILDREN'S IMPROVEMENT PLAN 2018/19

Introduction

The Ofsted inspection of Croydon's services for children in need of help and protection, children looked after and care leavers took place between 20th June and 13th July 2017. The inspection judged services to be inadequate; with poor quality social work practice and weak managerial oversight leaving too many children at risk of harm.

This Improvement Plan for Children's Services and the Croydon Safeguarding Children Board was developed in response to the Ofsted report findings, including the 21 specific recommendations and in recognition of our ambition to improve our services for vulnerable children. It has also been informed by learning from Serious Case Reviews and engagement with staff, which will continue throughout the plan's implementation.

The plan was reviewed between June and October 2018; sharpening the focus to drive actions that are concentrated on the right priorities at increased pace, to respond to feedback from four Ofsted monitoring visits and to capture work with our intensive peer support partner, Camden Council. This plan outlines the actions that we will take over the next six months to address the weaknesses that were identified during the Ofsted inspection and subsequent monitoring visits and to ensure that children in Croydon are supported and protected. The nature of improvement means that we will need to review and refine our plan on an ongoing basis.

Our ambition is to deliver good services for our children and young people. However, we recognise that consistently 'getting to good' will be a three to five year journey and will require wider activity from the council and partners outside of this plan.

Successful implementation of this plan will depend on a significant cultural change within Children's Services, the wider council and our partners, with a focus on:

- Creating an open system where challenge is welcomed and views are respected
- Inspiring staff to feel passionate about the work that they do and the difference they make
- Understanding the lived experiences of children and young people
- Listening to staff, children and families
- A culture of performance management that drives improvements for children

Our vision

This plan supports our vision for all children and young people in Croydon, and aspirations described in the council's Corporate Plan;

'All Children and young people in Croydon will be safe, healthy and happy, and will aspire to be the best they can be. The future is theirs.'

Our priorities for 2018/19

To ensure that we continue to focus on the right priorities at the right pace we reviewed our plan between June and October 2018, reducing the number of priorities from **11** down to **7**. This review was based on feedback from our staff and managers about the things getting in the way of delivering high quality services for our children and young people and feedback from Ofsted about our persistent areas of weakness and need to significantly increase the pace of change.

For simplicity, the plan is structured under four work streams **Management & Practice**, **Workforce**, **Partnerships** and **Platforms**. These work streams each have Senior Responsible Officers (SRO's) who will be held to account on progress and delivery by both the Council and the Croydon Children's Improvement Board. These are also set out below. Each action in the plan will have a Lead Officer/s who will be held to account by the relevant SRO (see appendix 1 for a list of our lead officers).

WORK STREAM	PRIORITY	SRO
Management	1. Strengthening management grip at all levels	Director, Early Help
and Practice	2. Identifying, assessing and responding to risk	and Children's Social Care
	3. Robust and effective planning	
Workforce	4. Building a skilled and stable workforce	Director, Human Resources
Partnerships	5. Implementing an all age Partnership Early Help Offer, strengthening partnership working and improving the LSCB	Executive Director Health, Well-being and Adults and Director of Quality & Governance, NHS, CCG (jointly owned)
Platforms	6. Creating the conditions for social work to flourish	Executive Director, Resources
Cross cutting foc	us	
	7. Creating a culture of shared ownership and social work values	Not applicable

How we will deliver on our priorities

Work plans

The Children's Improvement Programme is divided into four work plans which set out the high and medium-level actions we will take in 2018/19 to deliver on our priorities under each work stream;

- Work plan 1: Management and practice (see pages 6-15)
- Work plan 2: Workforce (see pages 16-18)
- Work plan 3: Partnerships (see pages 19-22)
- Work plan 4: Platforms (see pages 23-26)

A work plan to deliver **priority 7**, 'Creating a culture of shared ownership and social work values', will be developed through the Staff Reference Group; this group will play a key role in holding the system and management to account for enabling this. Actions under this priority will include those relating to improving internal communication, staff wellbeing and how we listen to and act on the voices of children and young people.

Governance and oversight

The Croydon Children's Improvement Board will provide effective oversight of the council's Children's Improvement Plan and programme of work in order to ensure that all of the recommendations outlined in the Ofsted inspection report are responded to. This will be chaired by Edwina Grant OBE, and will bring together officers, the Lead Member for Children, Young People and Learning and other Elected Members from the council, the Director of Children's Safeguarding and Social Work from Camden Council, partners, the LGA and the Department for Education's (DfE) representative. The board will meet on a monthly basis to provide oversight and challenge.

In addition, the Board will have representation from front-line staff who will provide feedback on whether the improvement programme is having an impact on the ground. The Board will receive regular monitoring reports on the implementation of the improvement plan and its impact on front-line delivery and scrutinise performance information which will be used to track progress and hold SRO's to account for the delivery of the improvement priorities.

There will be oversight from Elected Members at Cabinet and Scrutiny and Overview Committee. The Children and Young People's Scrutiny Committee will consider and challenge progress against the improvement plan. The revised Corporate Parenting Panel will focus on improving outcomes for our looked after children and care leavers, as set out in this plan. There will also be six-monthly 'stocktake' meetings with the DfE and Chair of the Improvement Board to scrutinise and evaluate our progress and the impact of the intensive peer support partnership with Camden.

The diagram in appendix 2 sets out the governance arrangements for the Children's Improvement Programme, which were revised in August 2018 to align to the new plan structure (4 work plans) and to drive and challenge the delivery of actions across the programme at increased pace. These governance arrangements will be reviewed and refined after three months to ensure that they are as effective as possible. As a partnership activity, the development of an all age-early help offer will be overseen by the Croydon Safeguarding Children Board (CSCB).

Work plan 1: Management & Practice

Senior Responsible Officer (SRO): Director, Early Help and Children's Social Care [Philip Segurola (PS)]

1. Strengthening management grip at all levels

- Setting the standards; for practitioners and managers to improve compliance and recording and embed Strengthening Families
- Supervision; improving the quality, frequency and impact of supervision
- Using data to drive performance; and ensure better oversight of pre-proceedings and permanence planning to reduce drift and delay
- Quality assurance; using audit activity and CPC chair and IRO challenge to assess and improve quality and compliance

No.	Issue	Actions	Lead	Partner	By when	Success measures			
	[Ofsted ref]			involve					
				ment					
Settin	Setting the standards								
1.1	Standards	Embed the social care practice standards to ensure all practitioners are	PS &	CSCB	Ongoing	Improved compliance			
	[SIF Paras	clear about what is expected of them through;	SH		from April	with expectations			
	32, 40 110]	regular communication from managers			18	evidenced through			
	Monitoring	recruitment procedures				performance data and			
	Visit 3 (MV3)	induction and probation procedures			Review of	audit findings			
	feedback	 appraisal, supervision and mid-year reviews 			impact in	adam mamge			
		appraisal, supervision and mid-year reviews			Apr 19				
1.2	Managemen	Develop and implement a plan to operationalise the social care	PS &		Dec 18	Auditing and			
	t oversight	managers' practice standards to ensure all managers are clear about	SH			performance reporting			
	[Rec 1]	what is expected of them through;				demonstrates more			
	MV3	regular communication from senior managers			Review	consistent			
	feedback	recruitment procedures			May 19	management footprint			
		induction procedures			,				
		appraisal, supervision and mid-year reviews							
1.3	Model and	Embed the new practice model 'Strengthening Families' (SF) across the	OW &	CSCB	From Oct	Impact review shows			
	tools	service monitoring and assuring its impact on outcomes for children and	SH		18	that SF is used			
	[SIF Para	families through direct observation of its use in practice (e.g. CP				consistently			
	32, 40 &	conferences, CP reviews and LAC reviews) case audits, practice week			Review of				
	110]	and case reviews.			impact Apr				
	-1				19				

	MV3 feedback					Staff feedback that they understand the model
1.4	Improve the quality of case recording	Hold managers at all levels to account for the accuracy of recording across the service by; Reviewing and refreshing the recording policy communicating expectations around accurate recording regularly reporting on compliance at team and service level to monitor improvements in recording practices	SH		Ongoing Review of impact in Dec 18	Auditing demonstrates more consistent recording practices Increased confidence in data accuracy
1.5	Managemen t oversight [SIF Rec 1]	Roll out a programme of peer support, challenge and development for managers (starting with Heads of Service and their direct reports) to improve the quality of practice by strengthening management at all levels. [See Camden-Croydon Intensive Peer Support Plan, work stream 1].	NS	Camden	Mar 19	Feedback from staff around improved culture of support and challenge
1.6	Compliance [SIF Rec 13]	Ensure that the fostering service conforms with national minimal standards through; a. delivering the fostering service action plan b. reporting progress to CSMT and Corporate Parenting Panel on a bimonthly basis	WT	Foster carers	Dec 18 Ongoing	Reports demonstrate improved compliance and performance
1.7	Children with disabilities [SIF Para 34]	Support the transition of the children with disabilities (CWD) service back under Children's Social Care and ensure that all children receive high quality social work, including those children and young people with disabilities.	PS & GV	Parents Health Educatio n Voluntar y sector	Apr 19	Audits demonstrate improvement in the quality of work in CWD
1.8	Children with disabilities [SIF Para 34]	Continue to embed a clear understanding of statutory duties for children and young people with disabilities in relation to child protection and care arrangements to identify and mitigate risks alongside the service transition arrangements.	МВ	Parents Health Educatio n Voluntar y sector	Dec 18	Improved performance for CWD around CIN and CP work
	rvision					
1.9	Managemen t oversight [SIF Rec 1]	Monitor performance around supervision and follow up on non- compliance to ensure that all practitioners are receiving sufficient support from their line managers.	PS		Ongoing	More supervision taking place in timescales

1.10	Supervision MV 3 feedback	Improve the quality of supervision through routine auditing under the QA framework and developing a bank of good practice examples for managers (e.g. supervision templates).	SH		Jan 19	Auditing and staff feedback demonstrate improved quality of supervision
Using	data to drive	performance				
1.11	Managemen t oversight [SIF Rec 1]	Provide assurance that the quarterly 'spotlight deep dive clinics' and monthly performance discussion at Children's Leadership team is leading to improved compliance with service standards, including quality.	PS		Review of impact in Feb 19	Reports evidence improvements in team performance
1.12	PLO and court work [SIF Rec 6, Para 47, 48, 49] MV 3 feedback	Embed a more systematic tracking/monitoring process for PLO to minimise delays for children through; • streamlining the CRS workflow • monitoring timeliness	MK & DA	Legal	Dec 18	Average duration of cases in PLO process are reduced
1.13	Planning for permanence [SIF Rec 14]	Improve the tracking and oversight of permanence planning for looked after children to reduce drift and delays in achieving permanence, including children where the plan is for adoption.	WT & SH	Camden	Feb 19	More children have a clear plan for permanence Auditing demonstrates fewer delays in achieving permanence
Qualit	ty assurance			<u> </u>		
1.14	Quality assurance [SIF Para 103] MV 3 feedback	Further develop moderation as part of the quality assurance cycle of bimonthly case audits, bi-annual practice weeks and quarterly Ofsted monitoring visits. [See Camden-Croydon Intensive Peer Support Plan, work stream 2].	SH	Camden	Dec 18	Audit activity provides an accurate picture of the quality of practice
1.15	MV 3 feedback	Monitor and challenge the completion of remedial actions from case audits.	SH		From Oct 18	More remedial actions from audits are completed
1.16	Quality assurance [SIF Para 103]	Continue to develop auditors' and moderators' shared understanding of what good looks like by leading follow-up workshops with managers.	SH	Camden	Jan 19	Shared understanding of what good looks like

1.17	Quality assurance [SIF Para 103] MV 3 feedback	Support and challenge the service to use audit findings to embed learning that impacts on quality of practice. [See Camden-Croydon Intensive Peer Support Plan, work stream 2].	SH	Camden	Jan 19	Audit findings inform targeted improvement activity
1.18	Quality assurance [SIF Para 103]	Ensure the resources for quality assurance and practice improvement are focused on improving compliance and quality. [See Camden-Croydon Intensive Peer Support Plan, work stream 2].	SH	Camden	Dec 18	Quality assurance activity improves compliance and quality
1.19	IRO & CPC Chair challenge [SIF Rec 10]	Embed the revised Croydon Escalation and Resolution Protocol (CERPs) process through communications and monitoring to ensure that Child Protection Conference (CPC) chair and Independent Reviewing Officer (IRO) challenge and scrutiny is more robust, consistently recorded on CRS and makes a difference for children and young people.	SH		Dec 18	CERPS process used more consistently Evidence that IRO/CPC chair challenge has had an impact
1.20	Complaints [SIF Rec 21]	Ensure that; a. more complaints are responded to appropriately within timescales b. learning from complaints is consolidated and informs learning and development activity for managers	SH		Mar 19	More complaints are responded to appropriately in timescales
1.21	Support for foster carers [SIF Rec 13, Para 59]	 a. Engage in house foster carers to monitor progress on the fostering service improvement action plan. b. Conduct an annual foster carer survey as part of the quality assurance framework. c. Ensure that feedback from foster carers, including complaints, is monitored, responded to appropriately and is used to drive service improvements. 	WT	Foster carers	Dec 18 Mar 19 2 nd survey May 19	Evidence of foster carer engagement Improved feedback in 2019 foster carer survey

2. Identifying, assessing and responding to risk

- Assessments; improving the timeliness and quality of assessments
- Thresholds; ensuring thresholds are applied consistently throughout the child's journey
- Protecting vulnerable adolescents; through the use of specialist tools and safety planning to reduce risks around exploitation and going missing
- Driving service transformation; providing strong leadership to drive service transformation from the front door to care planning

No.	Issue [Ofsted ref]	Actions	Lead	Partner involve ment	By when	Success measures
Asse	ssments					
2.1	Assessments [SIF Rec 12, Para 22, 31, 66] MV 1, 2 & 3 feedback	 Improve the timeliness and quality of child and family (C&F) assessments including; a. ensuring that families are not waiting for a service during an assessment b. ensuring historic information and research is used support assessments and decision making in the assessment service. c. ensure that individual voices of all children in larger family groups feature in assessments 	IL		Dec 18 Dec 18 Dec 18	More C&F assessments completed in timescales to ensure children's needs are met and risk identified. Audits demonstrate incremental improvement in quality of assessments and children's wishes influencing plans.
2.2	[SIF Rec 19, Para 84]	Ensure that all care leavers who are pregnant, or are parents have access to support to ensure their and needs and those of their children are met.	WT & CAJ	Health	Jan 19	Review of this cohort demonstrates more care leavers have access to parenting support services
2.3	sholds Thresholds	Undertake an analytical review to understand the high levels of demand	IL	Camden	Nov 18	Improved
2.3	[SIF Rec 6] MV 1 feedback	Undertake an analytical review to understand the high levels of demand at the front door and test the application of thresholds	IL.	Camuen	INOV 10	Improved understanding of demand and threshold application

2.4	Thresholds [SIF Rec 6] MV1 feedback MV 3 feedback	 a) Review and test children's journey from identification of needs through into assessment and care planning to assess; appropriate application of thresholds (e.g. step up and step down) timely transfer across services (see action 3.2) b) Explore the role that brief intervention approaches could play in reducing the need for multiple assessments, providing swift access to the right services and enabling families to safely exit from statutory services to early help 	IL & MK	CSCB Camden	Nov 18 Mar 19	Improvement actions identified Informed management decision
Prote	ecting vulnera	ble adolescents				
2.5	Reducing risk [SIF, Rec 3] MV 2 feedback	Develop the use of contextualised risk management planning to reduce risks for vulnerable adolescents.	HD	Camden	Apr 19	Auditing and performance reports demonstrate effective risk management planning for vulnerable adolescents
2.6	CSE [Para 40] MV 2 feedback	Embed reviewed process for the council's response to child exploitation and the multi-agency child exploitation (MACE) panel so that partners share information and intelligence, engage in joint decision making and co-ordinate responses to children at risk of exploitation.	HD	CSCB Police Educatio n Health Commun ity Safety	Dec18	CE risk management meetings evidence strong multi-agency involvement and referral to MACE for strategic oversight
2.7	Missing [SIF, Rec 4] MV 2 feedback	Embed agreed procedures for responding when children and young people go missing through regular monitoring to ensure that children and young people receive a more consistent response.	HD	CSCB	Feb 19	Auditing and performance reports demonstrate more consistent responses to missing episodes
2.8	Missing [Rec 4] MV 2 feedback	Improve the timeliness of return home interviews (RHI's) to ensure that more young people who go missing receive an interview within 72 hours.	HD	Safer London	Feb 19	More RHIs completed in timescales
2.9	Missing [SIF, Rec 4]	Ensure that children and young people with repeat missing episodes are provided with a timely targeted interventions to help identify and reduce risks.	HD	Safer London, CSCB	Apr 19	Auditing and sampling evidence more interventions are taking

2.10	Quality and consistency [SIF Para 60, 61]	Ensure that the council collates and analyses information about children placed in Croydon from other boroughs and that risks are understood and communication arrangements with placing authorities are clear.	WT & HD	Other LAs	Dec 18	place for these young people Analytical information from MACE and Monthly Missing Panel
Drivii	ng service trai	nsformation				
2.11	Early Help Services [SIF para 37]	Carry out a mock inspection of the single front door, collating findings into a service improvement plan its done so focus on findings & improvement plan	IL/PS/ HD		Nov 18	Improvement actions identified
2.12	PLO and court work [SIF Rec 6, Para 47, 48, 49] MV 3 feedback	 a) Embed Family Group Conferencing (FGC) at an earlier stage as part of the PLO and pre-proceedings process b) Expand the use of family group conferencing through disseminating guidance/protocol to staff of when to use FGC and how to access it. c) Establish a whole service FGC offer ensuring earlier access to FGC as a powerful model of intervention 	MK	Provider	From Oct 18 Dec 18 March 2019	FGC used more frequently as evidenced through audit

3. Robust and effective planning

- Plans; improving the quality and impact of written plans (including Child in Need [CiN], Child Protection [CP], Care and Pathway Plans)
- Streamlining transfers; between services so let children and young people are not waiting for help and plans are progressed
- Public Law Outline (PLO); pre-proceedings and court work; reducing delays for children and improving compliance with court orders
- **Permanence planning**; ensures early permanence planning occurs for children who are unable to live with their birth parents
- Pathway planning; improving the timeliness pathway planning for looked after children aged 15 and over

No.	Issue [Ofsted ref]	Actions	Lead	Partner involve ment	By when	Success measures		
Plans 3.1								
0.1	[SIF Rec 5] Para 33, 66]	are SMART, child-focused and include contingency plans. To include: i. child in Need (CiN) plans ii. child protection plans	OVV		Dec 10	Auditing demonstrates incremental improvement in		
	MV 2 feedback	iii. care plans for looked after children iv. pathway plans				quality of plans		
Ctroo	mlining transf	b. Assure impact through bi-monthly case audits	SH					
3.2	mlining transt	Assess the impact of revised case transfer process across all services	IL		Dec 18	Average time taken		
0.2	transfers MV 3 feedback	and identify improvements to reduce delay for children and families.			200 10	from referral to care planning service has reduced		
3.3	Pathway planning [SIF Rec 17	Agree the role that personal advisors (PA's) should play for children aged 17 and a half and communicate these expectations to staff to ensure a smoother transition for young people leaving care.	WT		Dec 18	Auditing demonstrates more consistent involvement of PA's before young people reach 18		

PLO,	pre-proceedii	ngs and court work				
3.4	PLO and court work [SIF Rec 6, Para 47, 48, 49]	Improve the timeliness and quality of all assessments for court proceedings (including special guardianship and family and friend assessments).	MK & WT	Judiciary	Jan 19	Average time taken to conduct an assessment is reduced. More positive feedback from judiciary on assessment quality.
3.5	Relationship with the judiciary [SIF Para 49 & 101]	Revise the court action plan, in light of feedback from a meeting with the judiciary in October 2018 in order to, improve compliance with court orders as a matter of urgency ensure social workers are sufficiently prepared for court improve Croydon's reputation through hosting an annual conference with representation from the judiciary and Children expand the take up of 'legal workspace' functionality on CRS	PS & JHB	Cafcass Judiciary	Dec 18	Feedback from the judiciary that compliance, timeliness and quality of court work are improving
Perm	anence plann	ing				
3.6	Permanence MV 4 feedback	Conduct a short term project to recognise permanence (e.g. through matching) for children aged 14 and under that have been in our care for 1 year or more.	WT	Foster carers	Jan 19	More children are matched to their carers
3.7	Permanence MV 4 feedback	Ensure more practitioners recognise the emotional importance of achieving permanence for children, through; communications activity training on life story work and related direct work	WT	Foster carers	Mar 19	More children have a clear plan for permanence
3.8	Permanence MV 4 feedback	 a. Review and launch permanence policy to set out clear expectations for practitioners and managers around planning for permanency at every stage of the child's journey b. Test impact through reviews, audit and performance indicators 	WT SH		Dec 18 Mar 19	More children have a clear plan for permanence Auditing demonstrates fewer delays in achieving permanence
3.9	Permanence MV 4 feedback	Complete a review of looked after and adoption workflows on CRS (including permanency work) and streamline processes to support effective recording (usability) and enable accurate reporting. [See CRS action 6.6]	WT/ SH		Jan 19	More information relating to permanence and adoption can be reported from CRS.

						Improved confidence in data accuracy.
3.10	Quality and consistency [SIF Para 60, 61]	Improve the timeliness of reviews for looked after children so that more looked after children receive reviews in statutory timescales.	SH		Dec 18	Higher % of LAC reviews completed in timescales
3.11	UASC work MV 4 feedback	Review work to support unaccompanied and asylum seeking children (UASC) through targeted audit activity and identify improvement actions to ensure that these children receive a high quality service.	WT& SH		Apr 19	Auditing demonstrates improvements in work to support UASC
3.12	[SIF Rec 14]	a. Increase the number of children leaving care through adoption. b. Increase the timeliness of children leaving care through adoption	WT	RAA Adopters	Mar 19	Incremental increase in the number of children being adopted each quarter
3.13	Adoption outreach MV 4 feedback	Ensure that the adoption service conducts more proactive outreach work to support social workers across the service to initiate and progress plans for adoption.	WT		Feb 19	Auditing demonstrates fewer delays in progressing adoption and higher quality work
3.14	Planning for permanence [SIF Rec 14]	Engage with RAA to develop post-adoption support offer to ensure a joined up approach across the council and partners to meet the needs of children and young people and support adoptive parents.	WT	Educatio n Health CAMHS	Sep 19	More adopters receiving post adoption support
Pathw	ay planning					
3.15	Pathway planning [SIF Rec 17]	Improve the timeliness of pathway planning to ensure that more young people have an up to date plan within timescales.	WT	N/A	Dec 18	More pathway plans completed in timescales
3.16	Staying Put [SIF Rec 18, Para 85]	Monitor the impact of the revised staying put offer to test whether this is allowing more young people who wish to do so to stay put with their foster carers.	WT	Foster carers	Jan 19	Numbers of young people 'staying put' Feedback from social workers, foster carers and care leavers
3.17	Accommoda tion for care leavers [SIF Para 89]	Work with housing colleagues to source the appropriate accommodation for care leavers to ensure they can live independently if they are ready to do so and have a place to call home.	WT & Direct or, Housi ng	Housing providers Voluntar y sector	Apr 19	More care leavers living in suitable accommodation

Work plan 2: Workforce

Senior Responsible Officer (SRO): Director of HR (Sue Moorman [SM])

4. Building a skilled and stable workforce

- Urgent capacity to reduce caseloads; filling vacancies in key areas quickly to reduce high caseloads
- Permanent recruitment and retention; delivering an action plan to recruit more permanent staff and retain talented practitioners and managers
- Learning and development; delivering a high quality, responsive L&D offer to practitioners and managers
- Workforce data; improving the accuracy of workforce information to inform reporting, recruitment activity and workforce planning

No.	Issue	Actions	Lead	Partner	By when	Success measures
	[Ofsted ref]			involve		
				ment		
Urger	nt capacity to	reduce caseloads		mone		
4.1	Manageable	a. Develop and implement a short term action plan to fill unfilled posts	NM &	Provider	Ongoing	Fewer unfilled
7.1	caseloads	via agency as a matter of urgency.	ATh	S	from Nov	vacancies in key areas
	[Rec 2, Para	b. Develop mechanisms with managers and agencies to mitigate future	AIII	3	18	vacancies in key areas
		,			Dec 18	Drangagla ground upo
	23]	unfilled vacancies (e.g. sharing information quickly when staff give			Dec 16	Proposals around use
	NAV (4 9 0	notice, conducting exit interviews with agency staff and responding to			l 40	of unqualified staff
	MV 1 & 3	feedback).			Jun 19	developed
	feedback	c. Determine what an 'optimum team' looks like, and explore the role				
		differently qualified staff can play to support social care teams.				
Perm	<u>anent recruitr</u>	ment and retention				
4.2	Stable &	Raise Croydon's employer profile to attract more job applications through	NM		May 19	More job applications
	permanent	partnerships with Community Care, Jobs go Public and BASW, targeted				received
	workforce	recruitment activities (e.g. sector events and open days), press coverage				
	[Rec 2, Para	and better use of social media platforms.				
	112]	·				
4.3	Stable &	Develop and implement an action plan to recruit permanent frontline staff	NM	Commun	Apr 19	Higher % of permanent
	permanent	and managers in hard to fill social care posts. To include;		ity care		staff
	workforce	a. activity to convert long standing agency workers		1., 525		
	[Rec 2, Para	b. streamlining and standardising recruitment processes				
	112]	c. developing the role of children and young people in recruitment				
	MV 2&3					
	IVIV ZOO					

4.4	Skilled workforce [Rec 2]	Review and standardise the induction process for all new staff (permanent and agency). To include; • a finalised induction pack given to all new starters • booking on mandatory induction programme and core training (e.g. strengthening families)	NM & NS		Dec 18	Staff feedback on improved induction experience
4.5	Stable & permanent workforce [Rec 2, Para 112]	 Develop, deliver and monitor a retention strategy including; financial incentives and other benefits career progression pathways and opportunities continuous professional development (L&D) offer ongoing staff engagement 	NM & NS		Dec 18	Reduced staff turnover rate
4.6	Stable & permanent workforce [Rec 2, Para 112]	 a. Increase the number of face to face exit interviews completed across the service b. Ensure that emerging findings from exit interviews are reported to CSMT and the Director and HR on a monthly/bimonthly basis. 	NM & ATh		Dec 18 From Nov 18	More exit interviews taking place Senior managers understand reasons why staff leave
	ing and deve					
4.7	Skilled workforce [Rec 2, Para 110]	 a. Publish a learning & development (L&D) offer for Early Help and Children's Social Care aligned to corporate L&D approach. To include: requirements of compulsory accreditation for social workers links with universities links with new registration body clear continuous professional development (CPD) and career progression pathways b. Deliver the L&D offer 	NS	Universiti es Training providers Social Work England DfE	Dec 18 From Jan 19	Staff feedback on awareness around L&D opportunities
4.8	Skilled workforce [Rec 2]	 a. Deliver the 'excellence in core skills' training programme for social workers and early help practitioners to improve the quality and consistency of practice for children and young people. b. monitor and evaluate the impact of this training 	NS	Training providers	Mar 19 Apr 19	Auditing and performance reporting demonstrates improvements in quality and timeliness
4.9	Skilled workforce [Rec 2]	 a. Develop a programme for all managers which covers; reflective Supervision performance management (including the use of data) managing poor performance and sickness 	NS	Camden	Dec 18	Auditing and performance reporting demonstrates more

		b. Deliver the programme c. Develop a wider leadership programme for managers within Children's Social Care and Early Help.			From Jan 19 Apr 19	consistent supervision and oversight
4.10	Skilled workforce [Rec 2]	Ensure social workers in their Assessed and Supported Year in Employment (ASYE) in Croydon are supported through a dedicated programme of training, mentoring and development.	NS	Training providers	From Oct 18	Positive feedback from ASYE social workers Retention of ASYE social workers
Work	force data					
4.11	Manageable caseloads [Rec 2, Para 23]	Improve workforce data accuracy to ensure figures capture all starters and leavers (including agency staff) and workforce information can be used with confidence by managers to inform caseload reporting workforce planning, and oversight of sickness and capability.	NM, ATh & CB		Jan 19	Managers' report greater confidence in data

Work plan 3: Partnerships

Senior Responsible Officers (SROs): Executive Director, Health, Well-being and Adults (Guy Van Dichele [GVD]) and Director of Quality & Governance, NHS, CCG (Elaine Clancy [EC]) (jointly owned)

5. Implementing an all age Partnership Early Help Offer, strengthening partnership working and improving the LSCB

- Early Help; collective delivery of our partnership universal and early help offer
- Strengthening partnership working; around LAC health, strategy meetings and child protection conferences
- Commissioning; of services based on need
- Improving Croydon's Local Safeguarding Board (CSCB)

No.	Issue [Ofsted ref]	Actions	Lead	Partner involve ment	By when	Success measures
Early	Help					
5.1	Early Help Services [SIF Para 27] MV 2 feedback	 Engage widely with all partners to implement the Early Help Strategy to include; a. Strategy launch and dissemination b. Developing a partnership outcomes framework performance scorecard for Early Help c. Communication on the continuum of need d. Referral pathways including single assessment framework e. Realignment of council Early Help services towards a locality based model for children and young people with 'intensive need' [see continuum of need] – aligned to council's new operating model 	CJ	CSCB CCG Police Schools C&F partners hip Volun tary sector	From Oct 18 From Oct 18 Nov 18- Apr 19 From Oct 18 Dec 18	More children and families supported through Early Help Feedback from partners that they understand their role in Early Help

Stren	gthening part	nership working around strategy meetings, child protection conf	erences	and LAC	health	
5.2	Strategy meetings [SIF rec 7]	Improve partners involvement (e.g. attendance and participation) in; a. initial strategy meetings b. child protection conferences	IL & DS	Health Schools Police	Dec 18 Jan 19	Improved partner attendance at strategy meetings and CPC's
5.3	Quality and consistency [Para 65]	a. Improve the timeliness and quality of initial health assessment notifications (within 3 working days of the child becoming looked after).b. Work with health professionals and carers to reduce the proportion of missed health assessment appointments for looked after children	WT & AT (CCG)	CCG/ CHS	Dec 18	Higher % of notifications completed in timescales Higher % of health assessment completed
5.4	Therapeutic support [SIF Para 65]	 a. Identify looked after children requiring Children and Adolescent Mental Health Service (CAMHS) b. Work with the CAMHS service to put in place resources to meet the needs of these children. 	WT & SW	CCG/ SLAM	Jan 18 Apr 19	in timescales More LAC benefit from CAMHS support
	nissioning					
5.5	Needs assessment [SIF, para 104]	 a. Complete a thorough needs assessment of Children and Young People as part of the JSNA (based on an analysis of available data) to inform service planning and commissioning across Children's Services. b. Create a briefing on outliers in Children's services to inform priority setting. 	RF	HWB Joint Commiss ioning Exec	Dec 18 Nov 18	Commissioning decisions informed by needs assessment
5.6	Early help services [FI rec 11, para 26]	Develop and implement the commissioning model for Partnership Early Help, to support the Partnership EH strategy and new locality based service model, including; Health visiting Family Nurse Partnership Health improvement of school aged children Children's Centre's Parenting support Young Carers Counselling services	SW	CCG Joint Commiss ioning Executiv e	Mar 20	Commissioned services are aligned to early help priorities
5.7	CSE [Para 40]	Increase the provision of early intervention and diversion services for vulnerable adolescents in Croydon as part of a revised Partnership Early Help Offer.	JW CJ &	CSCB Police Schools Health	Jan 19	More young people benefit from early intervention and diversion activities

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	mproving Croydon Local Safeguarding Board (LSCB)							
5.8	Discharging statutory functions [para 118]	Ensure that the improvement priorities for the CSCB and the Improvement Board continue to be closely aligned, providing robust challenge to the Improvement Board to ensure a strong focus on monitoring and evaluating the effectiveness of frontline practice	DS	All partners	Ongoing from Sep 18	Minutes and plans from the Children's Improvement Board and CSCB and sub groups evidence alignment of priorities and a focus on frontline practice		
5.9	Discharging statutory functions [Para 118]	 Embed clear expectations for all CSCB partners, supporting and encouraging board members to robustly monitor, scrutinise and evaluate the work of all partners, establishing a climate of constructive challenge. To include: Continue to apply 'constructive challenge' at Board and Executive meetings Identify and agree with partners the data to be routinely provided as part of CSCB multi-agency data set Secure partnership commitment to multi-agency audits 	DS	All partners	Ongoing from Sep 18	Minutes from the CSCB and sub groups evidence consistent attendance, scrutiny and constructive challenge Feedback from CSCB partners that they understand their role		
5.10	Learning from SCRs [Para 128]	Ensure that learning from learning reviews and SCR's informs improvements in frontline practice and establish arrangements for evaluating the impact.	MF	All partners	March 19	CSC and multi-agency training address SCR learnings Feedback from CSC staff and partners that they are more aware of learnings from SCR's		
5.11	Monitoring practice/imp act [Rec 113 & Para 120]	Monitor and challenge the multi-agency dataset so that board members can actively quality assure, evaluate and challenge the effectiveness of services.	MF	Council Police CCG	December 18	Multi-agency dataset is fit for purpose Minutes from the CSCB and sub groups evidence scrutiny of dataset		

5.12	Monitoring practice/imp act [Rec 113 & Para 120]	Ensure that the multi-agency audit programme is sufficiently targeted on priority areas and enables the board to monitor, evaluate and challenge frontline practice and its impact on children and families. • Agree multi-agency audit programme for 2019 • Audit programme linked to priorities and learning from SCRs • Re-audit in place to measure effectiveness and improvement • Align with single-agency audit programmes	MF	All partners	March 19	Agreed 2019 audit programme aligned to priority improvements areas and SCR learning
5.13	Early Help Strategy [Rec 116]	Secure partnership support and commitment to the joint ownership and collective delivery of an all age Partnership Early Help Strategy.	DS	All partners	March 19	Partners jointly own and collectively deliver the Partnership Early Help Strategy
5.14	Thresholds [Rec 116]	Continue to promote the shared understanding across all partners represented on the board around the application of thresholds and pathways across the partnership. • Analysis of no further action (NFA) decisions by agency • Increase awareness of pathways to support children and families, EH or CSC • Continued delivery of threshold awareness training • Use feedback information and contact analysis to develop further training proposals • Delivery and awareness raising at safeguarding lead meetings	DS	All partners	Nov 18 – Apr 19	Feedback from partners that they understand thresholds and pathways Reduction of contacts and referrals leading to NFA
5.15	CSE and missing [Rec 114. Para 123]	Develop systems to assure the impact of the CSE and missing sub- group, focused on improved outcomes for children and young people and evidence of influencing commissioning decisions across partners.	DS	All partners	Dec 18	Records (e.g. minutes and reports) from the subgroup evidence impact on practice

Work plan 4: Platforms

Senior Responsible Officer (SRO): Executive Director, Resources (Richard Simpson [RS])

6. Creating the conditions for social work to flourish

- Finance; ensuring that Children's Services and the Children's Improvement Programme is adequately resourced
- Performance data, business intelligence and recording systems; improving the accuracy, analysis and usability of operational data reports and developing fit for purpose electronic recording systems that support social work practice and management oversight
- Commissioning; of services based on need
- Administrative support and Improved Ways of Working; improve the business support offer and technology enablers

No.	Issue [Ofsted ref]	Actions	Lead	Partner involve ment	By when	Success measures
6.1	SIF para 110	Ensure that the children's improvement programme and children's services is adequately resourced in order to invest in the necessary improvements, and deliver these at the required pace. To include; a. initial investment in 2018/19 in key areas b. ongoing resource allocation through future budgets	RS		Feb 19	Sufficient Social Care, Early Help and support resource is in place to support improvements
6.2	SIF para 110	 Ensure improved forecasting of future demand for children's services to inform resourcing decision-making: a. Establish a short-term working group to establish the "single version of the truth" on expenditure utilising performance data, service data and financial data b. Develop a forward view of potential demand so that pressures can be tackled proactively 	LT		Oct 18 Mar 19	Seniors Managers have a clear understanding of expenditure, pressures and demand to inform service planning
Perfo	rmance data,	business intelligence and recording systems				
6.3	Operational data [Para 98, 102]	 Improve the accuracy of operational data by working closely with; practitioners and managers to improve recording practices managers in the service to sense check data and address recording issues 	PS ST & SW	Camden	Ongoing from Oct 18	Managers have increased confidence in performance reports Improved Data quality

	MV 3 feedback	 the CRS team to identify and resolve systems/workflow issues, including reducing manual trackers colleagues across the council in HR and finance to triangulate data from multiple sources 	SW & ST SW, LT and NM		Review Apr 19	Reduction of manual trackers
6.4	Operational data [Para 98, 102]	Ensure the continued provision of; a. regular operational data reports for team and service managers, which enable and support day to day decision making and risk management b. strategic performance and business intelligence reports for senior managers which; • provide a line of sight into performance • support strategic decisions, including commissioning • allow partners and members to scrutinise performance	sw	Camden	Ongoing from Oct 18 Review Apr 19 Ongoing from Nov 18 Review Apr 18	Managers feedback that reports are fit for purpose and timely Feedback from Managers Spotlight sessions
6.5	Operational data [Para 98, 102]	Support first line managers and service leaders to proactively use data to drive performance and reduce drift and delay for children, developing a strong improvement culture.	SW & PS	Camden	Ongoing from Sep 18 Review Apr 18	Evidence of managers using data to improve performance Assessment at Manager Spotlight sessions Usage of data and performance improvement
6.6	Fit for purpose systems [Rec 2, para 27]	Develop fit for purpose electronic recording systems, processes and workflows that are aligned to the new practice model and support good practice: a. Delivery of Case Recording System and Early Help Module Development plan b. Delivery of Controcc project to streamline and improve financial processing	SH	N/A	Mar 19	Case Recording system is easy to use, staff are trained, and the quality of case recording improves Financial processing is easier and takes less time

Comm	nissioning	 c. Ensure procurement and development of People's System meets the needs of children's services d. Increase user support and confidence e. Reduce manual tracking of data outside the system 				
6.7	Needs assessment [SIF, para 104]	 a. Finalise sufficiency strategy b. Deliver the sufficiency strategy to ensure that more looked after children benefit from local placements that are suited to their needs. 	SW	Provider s	Jan 19 Oct 19	More looked after children in local placements
6.8	Fostering Compliance [SIF, Rec 13] Support for foster carers [SIF, rec 13, Para 59]	Mobilisation of new in-house foster carer recruitment contract in order to recruit foster carers to meet local need	SW	Provider Foster carers	Ongoing from Nov 18	More in house foster carers More children placed in in-house foster care
6.9	Commissioni ng advocacy [SIF, Rec 15, para 38 and 56]	Recommission advocacy services to ensure they meet the needs of children and young people.	SW	Provider s	Ongoing from Oct 18	More children accessing advocacy services
6.10	Sufficiency [SIF para 89]	 a) Deliver improvements to the children's placements function including; System improvement [see action 11.4b – Controcc & CRS integration] Development of an effective end to end process Development of accurate placement information and reporting b) Improve utilisation of in house foster carers 	SW	Provider s Foster carers	Mar 19 Dec 19 Dec 19 Mar 19	More accurate information and reporting
6.11	Children and Young People Commission ers [SIF, para 104]	Provide training to children and young to be involved in the commissioning services.	SW	CCG Joint Commiss ioning Executiv e	Mar 19	Young people involved in commissioning

Admi	nistrative sup	port and Improved Ways of Working				
6.12	SIF para 110	Implement Improved Ways of Working for children's services to support frontline practice, further enable mobile working and provide the right tools to work effectively, through:	RS	N/A		Business support effectively supports social work practice
		 defining vision for Improved Ways of Working in children's services to support new People's Operating Model implementation of improved ways of working, including technology enabler piloting and implementation, and supporting behaviour change 			Nov 18 Apr 19	Staff are provided with and supported to use existing and new technology
		 business Support Review Phase 2 to review business support offer and resourcing requirements for 2019-20 onwards improve access to information about services available and maximise online resources/information to support staff and families 			Jan 19 Mar 19	Service users can easily access information about support and services

Appendix 1: Our lead officers

Lead Officers

Each action within the plan will have a lead officer who will be held to account on progress and successful delivery by the relevant SRO. These are outlined in the table below.

LEAD O	FFICERS
PS, Philip Segurola, Interim Director, Early Help and Children's Social	JHB, Jacqueline Harris-Baker, Director of Law and Monitoring Officer
Care NS, Nicki Shaw, Children's Learning and Development Professional Standards Manager	SW, Sarah Warman, Interim Director of Commissioning and Procurement
OW, Oretha Wofford, Principal Social Worker	SM, Sue Moorman, Director of Human Resources
SH, Shaun Hanks, Head of Quality Assurance	NM, Nadine Maloney, HR lead for Children's
WT, Wendy Tomlinson, Head of Service, Corporate Parenting	ATh, Adrian Thomson, Agency Operations Manager
GV, Guy Van Dichele, Executive Director, Health, Well-being and Adults	CB, Caroline Bruce, Head of Performance and Business Intelligence
MB, Michael Brown, Interim Head of Service Children with Disabilities, Transitions Service and Calleydown Short Breaks Home	DS, Di Smith, Interim CSCB Chair
HD, Hannah Doughty, Head of Adolescent Services	AT, Amanda Tuke, Head of Children and Maternity Integrated Commissioning
MK, Moira Keen, Head of Care Planning Service	RF, Rachel Flowers, Director of Public Health
DA, Doutimi Aseh, Head of Social Care and Education Law	JW, Jenny Wade, Head of Service, Commissioning and Procurement (People)
IL, Iain Low, Head of Single Point of Contact (SPOC) and Assessment	MF, Maureen Floyd, CSCB Board Manager
CJ, Carolann James, Interim Head of Early Help	RS, Richard Simpson, Executive Director of Resources
ST, Simon Townend, Systems Strategic Manager	LT, Lisa Taylor, Director of Finance, Investment and Risk (Deputy S151 Officer)

Appendix 2: Our governance arrangements

