

CHILDREN FIRST

Practice Improvement Plan

September 2019 – August 2020



Foreword - Our 'Children First' commitment

West Sussex County Council is committed to putting **Children First** and improving the services in everything we do. We are clear that the positive change we want to achieve for our children will require everyone to work together, including partner agencies and corporate colleagues who have a vital role to help create the environment where good social work can flourish.

By working together with our partners we intend to ensure consistently high standards in the care and protection we provide to children who need it, enabling the best possible outcomes.

To help achieve our intentions we have established a multi-agency Improvement Board with a remit to offer independent rigorous scrutiny of our arrangements and progress of the twelve recommendations of “what needs to improve”, outlined in Ofsted’s inspection report published in May 2019.

Our plan takes a ‘What Good Looks like’ approach to social work improvement (on the ground coaching and support to managers, training, performance, practice standards, clarity about roles, responsibilities and expectations). The actions outlined in the plan are designed to give frontline staff, the leaders and managers the tools and resources to achieve sustainably good outcomes against the Ofsted recommendations.

Paul Marshall
Cabinet Member
for Children and Young People

John Readman
Director of
Children’s Services

Practice Improvement plan :

Our Approach

This plan is our Practice Improvement plan to focus on areas of improvement identified throughout the Ofsted report. We have defined actions against each of the 12 recommendations, the outcomes and impact we want to achieve and how we will know we have achieved improved outcomes for children. The success measures are set to capture the desired impact against the recommendation but also the wider failings identified in the report. The plan has been co-produced with social workers and managers across the levels, and a distributive leadership approach underpins implementation to enable ownership. The plan is a time-specific covering year one, to take immediate effect. The timescales are for actions to be completed with impact at pace. We recognise that the 12 recommendations and Ofsted framework doesn't cover the breadth of work that we will need to consider which will be captured in our Children First strategy.

Implementation of the plan

The Implementation approach will be targeted project streams with individual project plans. This plan will then evolve and be updated at reviews. Task and finish groups with a range of representatives including front line practitioners and leaders will support the project work streams. The responsibility to implement the agreed actions in the Improvement plan sits with all staff throughout the organisation who have shared accountability for the outcomes achieved for children and families. The senior leaders recognise they are instrumental in the successful achievement of the plan and progress has started.

Voices of Children and Families

We believe the views of children and their families should be at the heart of what we do; we want to know what they have to say about the difference we are making to them. This will enhance our understanding of the impact of our improvement actions and contribute to our wider strategy supported by our children's participation.

Integration of wider service improvement

We recognise that the failings identified are the result of a bigger system issue, and to simply focus on the "fix" does not

provide a sustainable solution to prevent these failings re-occurring. We understand that the areas of improvement do not fully incorporate wider service development. We are developing a multi-agency Children First strategy in partnership with the Health and Wellbeing Board and other county partnerships. This enables us to think creatively and innovatively to achieve the best outcomes for children in West Sussex as a whole, and more importantly to embed and sustain long term improvement over the coming 3-4 years. The practice improvement plan will be part of our Children First Programme that is designed to deliver a systemic and lasting transformation of the business over the next four years and will build on our current plans for Early Help and Residential Services. The programme will be augmented by effective communication and engagement of staff, partners and key stakeholders.

Governance of the plan

We will monitor the progress of the Practice Improvement Plan through the Improvement Board, considering both the completion of actions and our impact on performance. This board will be independently chaired and will be multi-agency; it will facilitate the mobilisation of the public sector partnership to improve children's services. The Children First Programme Board will oversee the detailed implementation of delivery plans to ensure a wider organisational change that ultimately supports social work practice improvement. The programme board will be chaired by the Chief Executive of the County Council and will catalyse a wider organisational change.

Children First Sustainability

Substantial financial investment has been secured to support short, medium and long-term improvement. In the immediate, this has helped us to retain staff and expand the leadership capacity. In the longer term, the investment will secure implementation of our developing Children's First Strategy.

Ref	Objectives/what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success against objective & Ofsted Ref
1	1.1 Infrastructure and services to support good-quality social work practice, reducing the number of transfer points for children. 1.2 All staff and managers have clarity regarding the expectations of the children's social care workforce,	Pg. 6 para 17 Pg. 8 Para 27 Pg. 9 para 33 Pg. 10 para 36,39 Pg. 11 Para 40,41	1.1 Establish new operating model for Children and Family Service. 1.1.1 Develop a business case including an options appraisal for locality model and organisational model to facilitate good social work practice and increased workforce capacity. 1.1.2 Design, agree and implement a leadership structure that will facilitate the effective delivery of Children's Services. 1.1.3 Map the current hand-over/transition points on child's journey. 1.1.4 Evaluate the impact on children and consider how to enable a relationship based practice model. 1.1.5 Redesign pathway with fewer hand-offs. 1.1.6 Implement new pathway (phased). 1.1.7 Implement new operating model (phased).	Aug 2020 Nov 2019 Aug 2019 Aug 2019 Nov 2019 Nov 2019 Dec-March 2020 Dec-August 2020	Director of Children's Services (DCS) / Senior Leadership Team (SLT) DCS SLT SLT Service Leads Service Leads Service Leads	1. Reduced number of transfer points from 5 2. % of worker caseloads of 18 or less Target: 85% 3. Good practice demonstrated through % increase of cases judged to be RI or Good through audit programme. Starting with % of completed audits Target: 45% completion by end of Aug % increase will then be set from these findings 4. Increase in positive feedback from children and families Target: This is new so we will assess what this needs to be following implementation 5. % increase of staff with appraisals (review incremental progress) Target: 95% by March 2020 6. % increase of new staff with probation reviews completed Target: 95% 7. % increase in number of staff completing mandatory training and role specific training

1.3 including practice guidance and procedures and the quality of staff induction and training.	1.2 Establish practice standards and professional expectations.	Sep-Nov 2019	Principal Social Worker (PSW)	Target: 95%
	1.2.1 Work with staff to design and build an effective method for implementing practice standards, procedures and clear simplified process maps as a quick service guide for key areas.	Sep-Nov 2019		8. Feedback from the newly devised practice forums for both new and existing staff demonstrate increased staff understanding of the requirements and experience of support to put them into effect. Particularly in relation to what is different as part of the improvement changes and the impact on practice
	1.2.2 Embedded WSCC 'employee conduct standards' and expectations' in the implementation of standards.	Sep-Nov 2019	HR/All managers	9. Training feedback forms show % of staff who rated the training as successful, immediately after the training, one month later and three months later (through supervision).
	1.3 Establish a Staff Workforce Group			Target: 90%
	1.3.1 Develop and implement a specific Children's Service Staff induction programme.	Feb 2020	Learning Development /PSW	10. Compliance with practice standards is part of our audit process
	1.3.2 Design, consult on and agree a Practice Leadership programme for Advanced Practitioners, Group Managers, Service Development Managers and Service Leaders.	Feb 2020	Assistant Director's/PSW	Evidence including:
	1.3.3 Implement Practice Leadership Programme.	March 2020	Learning Development	a) % of stat visits for CP, CIN and CLA in timescale
	1.3.4 Evaluate the impact of the Practice Leadership Programme.	May 2020	Learning Development /PSW	Target: 95%
1.3.5 Establish a 'community of practice' led by practice champions/educators to embed good practice starting with neglect and Pre-birth work.	March 2020	PSW/QA	b) % of Child & Family Assessments completed in maximum 45 working days Target: 95% c) % of children seen during the Child & Family Assessment	

			1.3.6 Implement training on 'What Good Looks Like' for Social Workers, Practice Managers and other key frontline practitioners (phased).	Nov-March 2020	Improvement Team/QA	Target: 95% Seen Alone Target: 70%
			1.3.7 Update the supervision template record to ensure it captures all training, effectiveness and impact on practice.	Sep 2020	PSW/QA	
			1.3.8 Build upon current training programme available to practitioners and stipulate those courses that are mandatory for example graded care profile, neglect, radicalisation etc....	Nov - March 2020	Learning Development /QA	
Improvement Outcomes						
<p>a) The service will have increased capacity to lead and achieve improvement and good leadership with a well trained workforce, which is clear about standards and expectations. All roles will have clear defined work remits with responsibility and accountability.</p> <p>b) All new starters will have a meaningful induction to the entire Children's Services to ensure our workforce understand the structure and services available to children and their families. We will have a workforce strategy that will evolve with the needs of the service and will support staff in career development and personal aspirations. Training will be role specific with mandatory training to address key areas that are important for the workforce so they have the right skills and knowledge to deal with the range of complexities facing children. Setting out what good looks like and clear understanding and identification of risk and need.</p> <p>c) Children will experience timely, good quality and consistent intervention from a named Social worker at point of allocation and build trust without unnecessary changes of worker. Their voice will be heard and evidenced in assessments, plans and intervention with a good understanding of their lived experiences with and a detailed updated chronology.</p>						

Ref	Objectives /what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success against objective & Ofsted Ref
2	The quality of social work practice, to assess, support and protect children who experience neglect.	Pg. 3 Para 2 Pg. 4 Para 8 Pg. 9 para 34	<p>2. Strong Social Work practice that will be able to identify and take appropriate action when dealing with children who experience neglect.</p> <p>2.1. With the Safeguarding Children Partnership (formally Children Safeguarding Board) update and launch of Neglect strategy, including a focus on prevention and Early Help.</p> <p>2.2. Social Care to have a dedicated Neglect action plan to address key areas including implementation of the Graded Care Profile and its impact and review process.</p> <p>2.3. Undertake a multi-agency audit of neglect cases to result in an agreed range of actions across the partnership: Audit to address: The promptness of identification, the use made of historical information, the extent to which there is an analysis of the impact of neglect on the child and the robustness of actions to improve outcomes.</p> <p>2.4. Scrutinise open Neglect cases to ensure there is good management oversight and supervision where required.</p>	<p>March 2020</p> <p>Dec 2019</p> <p>Jun-Sep 2019</p> <p>Jan 2020</p> <p>Aug 2019</p>	<p>AD QA/Deputy Director</p> <p>Head of Safeguarding , AD of EH, Lead for High Risk Adolescents</p> <p>Deputy Director CSC</p> <p>Assistant Director QA</p> <p>Assistant Director QA</p>	<p>11. % of neglect cases referred using the NIMT tool</p> <p>Target: 70% by Jan 2020</p> <p>12. Findings of the Multi-agency audits</p> <p>13. % of children with CP Plans for Neglect with a Neglect tool used by the 2nd review.</p> <p>Target: 20% by Oct 2019 40% by Jan 2020 60% by Apr 2020</p> <p>14. % of repeat Child Protection Plans with category of Neglect for a second time In the last 3 years, with a Neglect tool completed at point of 1st review:</p> <p>Target: 90% by Jan 2020</p> <p>15. % of repeat CP plans for Neglect in the last 3 years</p> <p>Target: 25%</p> <p>16. % of cases with management oversight or supervision (in a 4wk period) where the primary need code is neglect</p>

			<p>2.5. Put in place neglect learning events to improve outcomes for children using live cases examples.</p> <p>2.6. Develop and train staff to produce analytical chronologies that will identify chronic neglect and support earlier identification.</p>	<p>Oct-Dec 2019</p> <p>Feb-March 2020</p>	<p>Learning and development /PSW</p> <p>Learning and development /PSW</p>	<p>Target: 90%</p> <p>17. CP chairs will evidence the need for neglect tools where needed</p> <p>18. Supervision audit to confirm management oversight has demonstrated when graded care profiles are required and is appropriately tracked to ensure implementation</p> <p>19. % of CIN cases where neglect is a feature (open over 12 months) have considered a neglect tool – evidenced in supervision</p> <p>20. % of updated CIN assessments in a 12 month period –</p> <p>Target: 70% by Feb 2020 85% by Apr 2020</p> <p>21. % of children accessing MOMO in all planning (linked to action 4.6 –</p> <p>Target: To be set next year following implementation</p>
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Improvement Outcomes

- a) The partnership will be able to identify and respond to neglect in a timely way and appropriately and referrals of neglect will have utilised the assessment tool (NIMT). We will have an effective Early Help offer to address neglect at an early stage to help reduce children living in chronic neglect before they are escalated to Social Care.
- b) A targeted Neglect Action plan will facilitate the improvements to the service and provide agreement about how we identify, support, track and monitor Children in neglectful situations.
- c) Children identified as suffering from neglect as part of Child Protection will be reviewed at 9 months to ensure graded care profiles have been completed and audit will ensure we are not causing delay and drift along with multi-agency audits to help understand if interventions by all are successful and achieving the desired impact.
- d) Practitioners will be able to identify neglect and how to support or when to take action and recording of children's needs in assessments and records will demonstrate a good understanding of historical family information and understanding of what life is like for children in circumstances of neglect.

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success against objective & Ofsted Ref
3	The effectiveness of assessment and planning for children in private fostering arrangements and 16- and 17-year-old homeless young people.	Pg. 5 Para 13,14	<p>3. Improved social work practice and standards for children privately fostered and presenting as homeless.</p> <p>3.1. Training to staff to understand Private Fostering requirements and Homeless 16-17 year olds. Undertake an awareness raising programme across the partnership (workshops, leaflets & videos).</p> <p>3.2. Practice standards to capture requirements for those privately fostered and homeless 16-17 year olds.</p> <p>3.3. Guidance for children to understand their rights.</p> <p>3.4. Update the joint protocol with Housing to meet the needs of young people presenting as homeless.</p> <p>3.5. Revise protocols between D&B councils and WSCC to set out agreed working relationships and practice for assessment of housing and support needs for homeless 16/17 year-olds and Care Leavers, ensuring compliance with current legislation, and implement.</p>	<p>Jan 2020</p> <p>Nov 2019</p> <p>Oct- Dec 2019</p> <p>Nov 2019</p> <p>Aug 2019</p> <p>Nov 2019 & ongoing</p>	<p>AD of CSC/ Corporate parenting</p> <p>Learning and Development</p> <p>AD of EH</p> <p>AD of Corporate parenting</p> <p>AD of EH/ Housing</p> <p>AD of Corporate Parenting/ Social Care</p>	<p>22. Number of children in a Private Fostering Arrangement (trends report)</p> <p>23. % of PF visits in first 7 days</p> <p>Target: 95%</p> <p>24. % of Private Fostering Arrangements completed in timescales</p> <p>Target: 95%</p> <p>25. The effectiveness of planning for privately fostered children – identified through audits</p> <p>26. Assessments of 16/17 year olds will demonstrate options and rights to accommodation – through audit</p> <p>27. Multi-agency plan in place</p> <p>28. Protocol for 16/17 years old and Care Leavers in place</p> <p>29. Programme of briefing/training of staff in place</p>

Improvement Outcomes

- a) Partner agencies and Social Workers will be able to recognise/respond to the specific needs of those privately fostered and homeless, ensuring good quality assessment of their needs.
- b) Children presenting as homeless will be made aware of their entitlements so they can make informed decisions about whether to be accommodated under Section 20 or not.
- c) Children will be placed in appropriate accommodation with the right support and knowledge of their rights and entitlements including post 18yrs.

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success against objective & Ofsted Ref
4	Improve the quality of plans, particularly in relation to the focus on critical issues for families, timescales for actions and the consideration of what will happen if improvements are not achieved or concerns increase.	Pg. 5 Para 9 Pg. 6 para 19 Pg. 9 Para 31	<p>4. Staff effectively trained on producing high quality care plans across the service.</p> <p>4.1. Review and redesign the templates used to record assessments and plans, to facilitate focus on critical issues with clear actions and timescales (SMART) (phased review-implementation).</p> <p>4.2. Training on effective care plans across the service (Early Help, CIN, CP, CLA and Pathway Plans).</p> <p>4.3. Implement an effective step up/ down process to facilitate a clear transition from Social Care to EH with a continued Early Help Plan/CIN Plan to Social Care.</p> <p>4.4. Establish and implement QA mechanism to monitor the quality and effectiveness of plans with a clear escalation process.</p> <p>4.5. Escalations to be tracked to support learning and development of services to Children Looked After and those subject to Child Protection plans.</p> <p>4.6. Audit of case supervision and management oversight to ensure they explicitly address the</p>	<p>May 2020</p> <p>Jul-March 2020</p> <p>Nov-March 2020</p> <p>Feb 2020</p> <p>Sep 2019-Ongoing</p> <p>Jul -Sep 2019</p> <p>May 2020</p>	<p>AD of QA</p> <p>Learning and Development /PSW</p> <p>AD of QA/ Deputy Director of CSC</p> <p>Deputy Director of CSC & EH</p> <p>AD of QA</p> <p>QA service</p> <p>QA service</p>	<p>30. %of CIN, CP, CLA, pathway plans in place and reviewed.</p> <p>Target: 95%</p> <p>31. % of children subject to CP plans longer than 18 months</p> <p>Target: 10%</p> <p>32. % of children subject to CIN plans longer than 2 years</p> <p>Target: TBC</p> <p>33. Audit Feedback from Families who will be clear about expectations of them and what needs to happen to make the changes required and in what timeframe</p> <p>34. Audit of quality plans and voice of child in planning</p>

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			implementation of plans and learning to then feed back into service development.			
			4.7. Expand on the use of MOMO to facilitate the views of the child in all plans including Early Help, CIN and CP.	Mar 2020	QA/Participation	
			4.8. QA service to produce Quarterly/Annual reports to accurately evaluate impact by the service and the outcomes for children.	Oct 2019 - ongoing	AD of QA	
Improvement Outcomes						
<p>a) Families will have an appropriate outcome focused plan with clear expectations that they understand, consistent with risk and need, and with clear contingency plans if progress isn't achieved. We will understand the impact of plans and support families and agencies to understand what the focus is with clear timescales.</p> <p>b) Children will not be subject to plans longer than necessary and will have the right level of support required by ensuring Step up/down is progressed in a timely and appropriate way.</p>						

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5	Improve the quality of social work recording, including the inclusion of intelligence and an analysis of the critical issues for children in return home interview records.	Pg. 10 para 36 Pg. 5 para 12	<p>5. Changes related to people, processes and technology in place in order to ensure quality recording on children's files.</p> <p>5.1. Set out in the practice standards and to disseminate to managers with clear expectations of recording requirements.</p> <p>5.2. Including how the use of tools to gain children's views and wishes is reflected on the child's case records.</p> <p>5.3. Review of IT system to ensure it is fit for purpose and how workers and the service can work more creatively.</p> <p>5.4. Training and guidance to be produced for those undertaking Return Home interviews.</p> <p>5.4. Implementation of missing protocol to ensure this will facilitate effective return home interviews.</p> <p>5.5. Produce clear recording guidance on Return Home Interviews.</p>	<p>Feb 2020</p> <p>Nov 2019</p> <p>Nov 2019</p> <p>Feb 2020</p> <p>Dec 2019</p> <p>Jan 2020</p> <p>Oct 2019</p>	<p>AD of QA</p> <p>Deputy Director of CSC/PSW</p> <p>Training and development/ Head of QA</p> <p>AD of QA</p> <p>Lead for Complex High Risk Adolescents</p> <p>"</p> <p>"</p>	<p>35. Quality monitored through dip sample and audit</p> <p>36. Percentage of children who have gone missing with a Return Home Interview offered Target: 100%</p> <p>37. Percentage of children who have been missing and eligible for a return home interview within 72 hours Target: 75%</p>
Improvement Outcomes						
<p>a) Children's records will have analytical and meaningful information recorded that clearly demonstrates risk, need and their voice. This will also be linked to assessment and planning so it is fully understood in the wider context of the case. Workers will be able to update records more regularly and easily to achieve this.</p> <p>b) Those who go missing will be interviewed by someone they know (independent of care) or a suitably trained professional to enable understanding of the circumstances in which they went missing, in order to best support them and include them in their own safety planning and to reduce further episodes.</p>						

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success against objective & Ofsted Ref
6	6.1 Improve permanence planning for children, including the availability and use of foster-to-adopt placements and the timeliness of assessments and planning for unborn babies.	Pg. 3 para 3 Pg. 6 Para 18 Pg. 7 para 22,24 Pg. 8 Para 28,29	<p>6.1. Implementation of new practices and processes to deliver effective permanence arrangements for all children.</p> <p>6.1.2. Workforce training around effective care planning.</p> <p>6.1.3. Review of the matching process and how placements are requested and identified including sibling placements.</p> <p>6.1.4. Refreshed Adoption strategy and review of how to enable foster to adopt placements.</p> <p>6.1.5. Update the process and policy in relation to reunification and define the role of the IRO in this process.</p> <p>6.1.6. Introduction of Disruption Meetings for Children Looked After.</p> <p>6.1.7. Update the unborn baby protocol to provide timely support and progression and how this links to care leavers who are becoming parents.</p> <p>6.1.8. Creation of specialist pre- birth workers so they have dedicated</p>	<p>Feb 2020</p> <p>Nov-Jan 2020</p> <p>Sep 2019</p> <p>Aug 2019</p> <p>Oct 2019</p> <p>Jan 2020</p> <p>Aug 2019</p> <p>Jul 2019</p>	<p>AD corporate parenting</p> <p>Learning and Development</p> <p>AD of Corporate Parenting</p> <p>"</p> <p>AD of QA and Corporate parenting</p> <p>AD of corporate parenting</p> <p>Deputy Director of CSC</p> <p>Deputy Director/</p>	<p>38. % of CLA reviews in timescale</p> <p>Target: 90%</p> <p>39. % of placement moves</p> <p>40. Number of children in Foster to Adopt Placements</p> <p>41. % of children who cease to be Section 20 due to reunification</p> <p>42. % of children stayed at home beyond 6 months (linked to KPI 41)</p> <p>43. Percentage of Pre-Birth Assessments completed in timescales</p> <p>Target: 95% Sep 2019</p>

			tracking and oversight at the earliest opportunity.		Head of CSC	
			6.1.9. Unborn baby action plan devised to look at implementation and assessment process for timely intervention.	Oct 2019	Deputy Director/ Head of CSC	

Improvement Outcome

- a) Children will have timely CLA reviews and will be included in the planning to ensure needs and actions progressed to meet outcomes. We want our children to be in stable and suitable homes/placements at the earliest opportunity, and where things do not go to plan this will be reviewed so we can identify issues to be addressed.
- b) To prevent delay and drift for our unborn children where risk and need is referred we will ensure Unborn assessments at the appropriate time by dedicated pre-birth workers who specialise in this work and can ensure interventions are appropriate and timely, with clear analysis of risk and need. This will be linked to our Court tracking so we have robust twin tracking and consider Legal Planning meetings when appropriate.
- c) This will support us to identify those babies who are likely to come into care and unable to return home; Foster for adoption will be considered in every case.

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success against objective & Ofsted Ref
7	Improve the quality and timeliness of life-story work.	Pg. 7 Para 23	<p>7. Workforce trained and empowered to undertake quality life story work.</p> <p>7.1. Outline in Procedures when and how life story work is to be undertaken and how this will be managed together with a toolkit to support.</p> <p>7.2. Provide specific training to social workers, managers and foster carers in relation to life story work.</p>	<p>Dec 2019</p> <p>Sep 2019</p> <p>Oct-Nov 2019</p>	<p>AD of Corporate parenting/ LD</p> <p>AD of Corporate Parenting</p> <p>"</p>	<p>44. Audit of quality of life story work - Dec 2019</p> <p>45. % of CLA audits that show children with Life Story work (including started)</p> <p>Target: 70% Nov 80% Jan 2020 90% May 2020</p>
Improvement Outcomes						
<p>a) Workers will have capacity to prioritise life story work at the right time for Children in care, helping them to understand and accept what happened to them, and why.</p> <p>b) Our Looked after Children can expect good quality life stories that are meaningful to them facilitating a secure base to explore their past, present and future. This will enable them to integrate their past into the present, in order to help them move into the future.</p>						

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8	Improve the quality and regularity of supervision, management oversight, direction and challenge, at all levels.	Pg. 11 Para 44	<p>8. Supervision and performance management best practice established and operational across the service.</p> <p>8.1. Guidance to be produced on "Good Management Oversight" and when this is to be recorded and how.</p> <p>8.2. Develop a mechanism for group supervision and how Advanced Practitioners can contribute to reflective and systemic practice.</p> <p>8.3. Provide dedicated supervision training with clear policy around expectations for supervisors and supervisees with effective recording documents.</p> <p>8.4. Training to managers in performance coaching and how to utilise business intelligence to support them in managing staff and teams.</p> <p>8.5. Implement observation of supervision to facilitate learning for both the supervisor and supervisee and set out how outcomes for children are monitored.</p> <p>8.6. Redesign the performance dashboard to make it team specific</p>	<p>Feb 2020</p> <p>Sep 2019</p> <p>Oct 2019</p> <p>Nov – Feb 2020</p> <p>Nov-Feb 2020</p> <p>Dec-Feb 2020</p> <p>Oct 2019</p>	<p>Deputy Director of CSC</p> <p>QA service</p> <p>QA/PSW</p> <p>L&D/PSW</p> <p>Deputy Director of CSC</p> <p>AD of QA</p> <p>Deputy director of</p>	<p>46. % Percentage of open cases with an up to date supervision recorded within 6 weeks</p> <p>Interim target: 70%by Oct 2019 Target by Mar 2020: 95%</p> <p>47. % of staff who have supervision recorded in the last three consecutive months:</p> <p>Interim target: 80% by Jan 2020 Target by Mar 2020: 95%</p> <p>48. Key decisions will have management oversight demonstrated through audit</p> <p>49. Percentage of open cases with management oversight recorded in the last 6 weeks</p> <p>Interim target: 70% by Oct 2019 Target by Feb 2020: 90%</p> <p>50. Increased compliance will be evidenced (linked to action 8.6) and where actions not taken management oversight will demonstrate how this is being achieved – through tracking of KPI's and KPI 46,47</p>

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			<p>and a specific dashboard for leaders to see business critical KPI's.</p> <p>8.7. Set up an operational process for performance oversight across the service to support "horizon scanning" – enabling a proactive approach to managing demand.</p>	Nov 2019	CSC AD of QA	
Improvement Outcome						
<ul style="list-style-type: none"> a) Supervision of staff is a high priority in supporting our workforce. Supervisees will have regular supervision as set in policy, and will be provided with a record that also addresses personal wellbeing and development. b) Social workers will feel able to build effective professional relationships, develop good practice and have the space to reflect and use professional judgement while being supported in key decision making. c) Managers will have confidence in providing the right support and challenge and this will be evidenced on children's files so they can understand how decisions were made about them. d) Children's circumstances and lived experiences will be robustly reviewed to prevent delay and drift and they will be able to see this clearly on their file. 						

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9	Improve the effectiveness of quality assurance arrangements.	Pg. 3 para 4 Pg. 5 para 9,10 Pg. 10 para 35,36 Pg. 11 Para 42,43	<p>9. Implement a structure that will provide confidence that quality is achieved and will support the delivery of Children's Services.</p> <p>9.1. Update and implement the quality Assurance framework, and agree how outcomes and success will be monitored to facilitate service improvement and good practice.</p> <p>9.2. Create a system to enable robust tracking of audit, compliance, actions and learning, to influence service improvement.</p> <p>9.3. Audit Schedule to be devised and implemented with an updated Audit tool.</p> <p>9.4. Work with business intelligence to enable implementation of audit tracking direct from children's recording system.</p> <p>9.5. Utilise the monthly performance reporting to identify any additional areas that require scrutiny through the auditing process.</p> <p>9.6. Identify the key audit responsibilities as part of everyday practice for all line managers and equivalent.</p>	<p>Aug 2020</p> <p>Nov 2019</p> <p>Nov 2019</p> <p>Nov 2019</p> <p>Sep-Nov 2019</p> <p>Nov 2019</p> <p>Nov 2019</p>	<p>DCS/ AD of QA</p> <p>AD of QA</p> <p>AD of QA</p> <p>AD of QA and Business Intelligence</p> <p>AD of QA</p> <p>All SLT</p>	<p>51. Audit progress reports</p> <p>52. % of audit's undertaken with practitioner</p> <p>Target: 75%</p> <p>53. % of audits completed against the audit framework</p> <p>Target: 75% by March 2020</p> <p>54. Audit actions completed within maximum of 20 working days of audit completion</p> <p>Interim Target: 60% Jan 2020 (remaining 40% within max 3 months)</p> <p>55. Quality of work identified through audit</p> <p>56. % of Proceedings that concludes within 26 weeks</p> <p>Target: 80%</p> <p>57. Audit of PLO letters and work to evidence improved quality</p> <p>58. % of escalations raised and those actioned in line with the</p>

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success against objective & Ofsted Ref
			9.7. Create a learning authority which includes audits to be undertaken with the practitioner to facilitate learning and reflection. Include seeking user feedback as part of the audit process.	Jul 2019	AD of QA	policy Target: this is a new process so will review % increase following implementation
			9.8. Embedding Quality Assurance into daily practice across the entirety of Children's Services	Jan 2020	Heads of service and SLT	
			9.9. Align Early Help and Social care QA functions.	April 2020	AD of QA and EH	
			9.10. Agree and implement a process for all children to have an allocated social worker (or PA) within 24 hours of being allocated to a team.	Nov 2019	Deputy Director of CSC	
			9.11. QA service to support one front door approach to improve access to Early Help.	Aug 2020	AD of QA and EH	
			9.12. Toolkit to be produced with good examples of practice for staff to access.	Jan 2020	PSW	
			9.13. IRO and CPA roles and responsibilities to be reviewed and aligned to best practice with an emphasis on robust timely tracking of Children's needs with a clear escalation and action process.	Dec 2019	AD of QA	

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success against objective & Ofsted Ref
			9.14. Implement escalation process.	Dec 2019	AD of QA	
			9.15. Implement a mechanism to track quantity and themes coming from escalations to develop learning.	Feb 2020	AD of QA	
			9.16. Development of the court specialist role to QA the work in pre-proceedings and those in proceedings.	Oct 2019	AD of QA	
			9.17. To update the tracking system of all cases in pre-proceedings and proceedings ensuring timely identification and completion of required assessments.	Oct 2019	AD of QA	
Improvement Outcome						
<p>a) A QA service that will support, guide and identify areas of improvement at an earlier stage.</p> <p>b) The service will take a more proactive and preventative approach to ensure plans for children at risk, in need, and in care are effective and timely at reducing risk/need, or securing permanence.</p> <p>c) Audits alongside practitioners will support the service through greater awareness of its performance and, actions required, and, will be monitored, tracked and progressed. Findings will enable identification of themes and learning for the service to build on what works well and areas for development. We will also have direct feedback from our Children and families about how they view our interventions, and any learning and recognition of good work.</p> <p>d) Where families are not able to make the changes for children to keep them safe and meet their needs, alternative arrangements will be considered under a formal PLO process that is tracked and monitored to ensure timeliness. Support will be in place for the workforce to produce good quality care plans and court documents and the correct process is followed. A robust legal tracking system will also enable the local authority to be compliant with the court timetable preventing delay and drift for children.</p>						

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success against objective & Ofsted Ref
10	Recruitment and retention more staff so that children experience fewer social workers.	Pg. 5 Para 10 Pg. 11 Para 40,41, 42 Pg. 8 Para 27	<p>10. Establish a stable workforce with the right capacity and capability to deliver.</p> <p>10.1. Develop a new recruitment campaign to attract motivated, enthusiastic Social Workers to join West Sussex with a clear package of what they can expect.</p> <p>10.2. Retention offer to be made to all qualified Social Workers.</p> <p>10.3. Where NQSW's are in post additional agency support will remain in place to enable reduced and appropriate caseloads during the first year in practice.</p> <p>10.4. Staff to have access to appropriate training, supervision and employee counselling.</p> <p>10.5. Reduce caseloads to support staff to deliver best practice (<i>linked to action point 1</i>) with business support resource, where needed, and changes to business processes to facilitate more direct work with children.</p> <p>10.6. Update the new starter process so staff have I.T equipment on day one.</p>	<p>Feb 2020</p> <p>Jun 2019</p> <p>Jun 2019</p> <p>Sep 2019</p> <p>Feb 2020</p> <p>Feb 2020</p> <p>Sep 2019</p>	<p>Head of Resourcing</p> <p>Head of Resourcing</p> <p>Head of Resourcing</p> <p>Head of Resourcing</p> <p>All</p> <p>Deputy Director of CSC</p> <p>HR/Chief Information Officer</p>	<p>59. Vacancy gap to be less than 10%</p> <p>60. Reduction of agency staff in the service by March 2020 to 5%</p> <p>61. Over establishment rates in line with NQSW's</p> <p>62. HR/Training attendance logs</p> <p>63. Average Case load report – KPI 2</p>

Improvement Outcomes

- a) Staff to feel valued and supported through a period of improvement and those who are newly qualified will have the best opportunity to start their SW career with appropriate caseloads, with additional resource to achieve this so the service isn't impacted upon.
- b) Our children can expect compassionate, caring and highly skilled Social Workers who will listen and work with them direct to understand their lived experiences and ensure they have a voice in everything we do for them.

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success against objective & Ofsted Ref
11	Increase the rigour and impact of corporate parenting arrangements.	Pg. 6 Para 18 Pg. 7 Para 20 Pg. 9 Para 31 Pg. 10 Para 38	11. Effective corporate parenting arrangements across the partnership. 11.1. Dedicated training to all corporate parenting members and a refreshed ToR. 11.2. Build on the Children in care Council and co-opt young people to Corporate Parenting Board. 11.3. Incorporate Children Looked After Participation Service and Children in Care Council feedback into Corporate Parenting board. 11.4. Identify representation for foster carers to regularly attend Corporate Parenting Board. 11.5. Refresh the data by developing a dedicated performance dashboard for corporate parenting. 11.6. Implement a QA function within the virtual school to address quality and timeliness of PEP's. (social care requirements will be included in the practice standards).	Jan 2020 Nov 2019 Dec 2019 Nov 2019 Aug 2019 Oct 2019 Dec 2019	AD of Corporate Parenting AD of Corporate Parenting Participation service AD of Corporate Parenting AD of Corporate Parenting AD of Corporate Parenting & HoS BI Deputy Director of CSC /HOS Virtual School for CLA	64. Feedback form Children in Care Council 65. Attendance by Young Person 66. Representation of Foster Carer on Panel 67. % of children with in-date PEPs (2 years -18 years with education entitlement) Target: 90% by Aug 2020 68. % of CLA children in education (Reception to Year 11) Target: 95% 69. A range of multi-agency target that will facilitate improvement to be made, including: 70. % of IHAs' and HA reviews within timescales Interim target by Feb 2020: 75% 71. % of CLA missing strats in timescale Interim target: 80% by Nov 2019

			11.7. Review of Virtual school and effectiveness in key areas.	Oct 2019	HoS Virtual School	72. % of Care leavers in suitable accommodation Target: 90%
			11.8. Create a multi-agency operational group to work collaboratively on issues impacting on CLA. (linked to action 12.1).	Nov 2019		
			11.9. Consider alternative approach to achieving Initial Health Assessments within timescales.	Nov 2019	AD of Corporate parenting/Multi agency group	73. CLA Audit's will evidence health information recorded and available (from Feb 2020 ongoing)
			11.10. Design and implement a mechanism for recording children's health histories to enable them to access in the future (consider new and existing CLA).	Dec 2019		
Improvement Outcome						
<p>a) Those with corporate parenting responsibilities will have the skills and information to offer robust challenge to ensure positive outcomes for our children in care.</p> <p>b) The service will have representation of the voice of those in care and this voice will have direct impact and influence to the Service and key partners.</p> <p>c) The holistic needs of CLA will be addressed fully, including, education, health (such as IHA's), social, emotional and overall wellbeing.</p> <p>d) Children who come into care will feel that the LA and all key partners champion their needs and will listen, respect, and care to enable them to have the best outcomes; this includes those who leave our care.</p>						

Ref	Objectives/ what needs to improve	Ofsted Ref	Action Required	Due	Leads	Key Performance indicators/measure of success against objective & Ofsted Ref
12	Mobilise the active engagement of all relevant partners to tackle weaknesses in services and improve outcomes for children.	Pg. 4 Para 6,7 Pg. 6 Para 15,16 Pg. 8 Para 26,27 Pg. 9 Para 30,31	12. Joint successful delivery of Children First Strategy and Improvement plan by WSCC and multi-agency partners.	Aug 2020	DCS	<i>More to be confirmed with partners/the Board will oversee KPI progress</i>
			12.1. Development of an independent multi-agency Improvement Board to facilitate the mobilisation of the partnership to improve children's services, including the development of the Children First Strategy that will set out our commitment.	Jun 2019	DCS	<i>Multi-agency data reports/analysis of performance</i>
			12.2. Set up multi-agency operational groups to deliver the partnership actions against the Practice Improvement Plan, with a clear escalation and resolution process.	Sep 2019	Head of Safeguarding	74. Lower number of contacts with an outcome of No Further Action Interim target: 51% to 30 % by Dec 2019 Target by Mar 2020: 20%
			12.3. Work with partners and LSCP to agree an action plan to improve the Multi-agency work including Strategy Discussions (open cases), CP medicals, threshold document, education provision for children with complex needs, and support around accommodation for Care Leavers.	Dec 2019	Head of Safeguarding	75. % decrease of re-referrals within the last 12 months Target: 25%
			12.4. Ensure learning from SCRs improves and embeds partnership and Children's Social Care practice effectively.	Dec 2019	Head of Safeguarding	76. % decrease of re-referrals within the last 12 months Target: 25%

			12.5. LSCP to raise awareness of the Managing Allegations process with all individuals who have a responsibility to promote the welfare of children. Including training to Social Workers and partners in recognising when the designated officer is to be informed.	Dec 2019	Head of Safeguarding	77. Clear evidence of timeliness in referring and case duration from the tracker 78. Increase % of completed CE risk assessment tool by partners Target: 80%
			12.6. Improve and develop how allegations are managed by the designated officer and tracked in a timely manner.	Oct 2019	Head of Safeguarding	79. Evidence through disruption work via exploitation group
			12.7. Implement a contextual safeguarding approach across the county focusing on extra familiar risk.	March 2020	Head of Safeguarding / Lead for Complex High Risk Adolescents	
Improvement Outcome						
<p>a) Effective partnership working that can not only meet the statutory requirements but will actively work in collaboration to improve ways of working to enable the best outcomes for children, where Safeguarding is everybody's business. This will include features such as: Timely IHAs, CLA to remain in education, Care leavers support, effective partnership strategy discussions and more.</p> <p>b) Children's workforce, community groups and partners are fully aware of the Designated Officer role and reporting requirements. Utilising the LADO as a point of consultation where appropriate.</p> <p>c) Effective progress tracking of allegations, which will improve timeliness and conclusion.</p> <p>d) Effective partnership working to understand roles and responsibilities. Creating safer places for children and partners recognising and responding to exploitation more effectively.</p>						