

Children and Families Directorate Ofsted Improvement Plan

The improvement plan sets out the seven key areas for improvement as identified by Ofsted, further areas for improvement are then grouped according to the areas of the Safeguarding and Early Help Development Plan. This plan will be developed further with local authorities identified by the DfE to aid Herefordshire's improvement.

Actions contributing to the delivery of the plan will be reviewed weekly, fortnightly and monthly within the service. Updates will be provided to management board and to Cabinet as part of performance and budget reporting. Children and Young People's Scrutiny Committee will regularly review progress against the plan.

RAGB Status	Indicator / Definition	Actions
Red	"Action" is behind schedule. Performance measure not yet achieved	Director / Assistant Director will review the "Action" to identify the root causes of the red status. Action Plan owners will produce plans to prevent further deterioration and ensure action is back on track – plans will be approved by Assistant Director.
Amber	"Action" has experienced some issues. Delays forecasted. Performance measure unlikely to be achieved on time	Director / Assistant Director will maintain a watching brief over amber "Action/s". Action Plan owners will produce plans to ensure action is back on track – plans will be approved by Assistant Director.
Green	"Action" is on track. Completion date and performance measure is expected to be achieved.	Director / Assistant Director need assurance the "Action" is truly green.
Blue	"Action" completion date and performance measure achieved. "Action" complete/closed.	

Ofsted Inspection of children's social care services 04/06/18 - 22/06/18 - What needs to improve

Ofsted No. 1	Senior leadership urgency in implementing a robust and timely action plan to deliver improvements and to address deficits in social work practice						
RP 51	A leadership team with constrained capacity, lack of stability and, in some areas, poor performance.						
RP 61	Leaders and managers are aware of deficits in practice and service provision, but currently there is a lack of timely action planning to remedy this.						
No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status
1.1	Establish specific Service Area Action Plans to address continual areas for improvement, these are to be refreshed at least every 3 months to ensure they drive improvement. These feed into the overall Ofsted Improvement Plan.	31/01/19	Assistant director safeguarding and family support	Action plans agreed and actions taking place	Improvements in core quality of practice is evident through performance and audit reporting	Action plans updated in January for the period January 2019 - March 2019. Actions are being delivered. Monitoring process is established.	B
1.3	Children and Families Scrutiny Committee to review updated action plan and make recommendations to the executive.	04/03/19	Director for children and families	Updated Ofsted Improvement Plan agreed	Scrutiny have reviewed the action plan and made their recommendations to the executive.	Updated Ofsted Improvement Plan to go to Children and Families Scrutiny Committee 04/03/2019	B
1.4	Formally share updated Improvement Plan with Ofsted.	01/03/19	Director for children and families	N/A	N/A	Completed - to be shared with Ofsted Regional Director and colleagues at Annual Conversation and to continue to be refreshed every 3 months focussing on quality and embedding change.	B

No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status
1.6	Continue to monitor Ofsted Improvement Plan and Service Area Action Plans using project management approach, monthly review meetings and reports. Quarterly updates to cabinet and children and families scrutiny.	from 10/09/2018	Assistant director safeguarding and family support	N/A	Change is evidenced	Process in place and working effectively to check on the progress of actions within the service specific action plans	B
1.7	Progress update sent to Department for Education (DfE) for 6 monthly review	01/04/19	Director for children and families	N/A	N/A	Updated Ofsted Improvement plan January to March to be submitted to DFE	B

Ofsted No. 2	The sufficiency of social workers and managers with capacity to cope with the need for services and the volume of social worker caseloads						
RP10	Social workers across this service have high caseloads. In addition, and because of delays in transferring to other teams, they are also holding a mixed caseload. This means that social workers are struggling with competing demands and are prioritising their work with child protection and court cases taking precedence. ... Evidence showed that there is effective child-centred practice that improves children's circumstances, but this is not consistent for all children.						
RP 16	Some children benefit from good direct work by social workers they know and trust, but this is not a consistent feature of social work practice. Children in this service experience too many changes of managers and social workers.						
RP 36	Despite this good work, the quality and progress of care planning is compromised for some children because of too many changes in social worker. This also means that it is difficult for children to build trusting relationships with their social workers.						
RP 52	Caseloads are too large, ineffective quality assurance and performance management and continuing difficulties in recruiting good quality social work staff and managers.						
RP 54	Despite this good work, the quality and progress of care planning is compromised for some children because of too many changes in social worker. This also means that it is difficult for children to build trusting relationships with their social workers.						
RP 55	Social workers from various teams are prevented from providing the quality of service they know is required because of excessive caseloads and ineffective deployment of staff. This is further hampered by a lack of robust, clear and timely management oversight and case direction. Senior leaders acknowledge this and now have the early stages of an improvement strategy in place. However, it is too early to see any impact.						
No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status
2.2	Implement package of measures to support retention of experienced staff	01/08/18 - phase 1 (Market forces supplement, relocation, recommend a friend). 28/12/18 - phase 2 (learning accounts, retention payments). 29/03/19 - phase 3 (corporate employee benefits)	Organisational development business partner	Vacancies levels in Child Protection/Court Team	Child Protection/Court Team is fully staffed and internal movement other than for promotion is reduced to zero	Market forces supplement implemented across social worker roles. Increased relocation payment in place. Drop in sessions held to get staff views on next steps. Proposals considered by mini-board. Individual learning accounts for social workers launched week commencing 22/10/2018.	B
2.3	Develop and implement revised career pathways to support professional and personal development	31/03/19	Organisational development business partner	Number of appointments to social worker from student placements, Step Up and apprenticeships.	We have developed and implemented clear career pathways that staff tell us they understand - via health check and employee opinion survey.	Consultation on career pathway completed and implementation planning underway; report has been completed and agreed	B
No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status

2.5	Recruit a team of 10 agency social workers into the Child Protection/Court Team to provide six months cover.	22/10/19	Organisational development business partner	Social workers recruited and team in place no later than 22/10/18	Timely and high quality services are delivered to children and families (frequent change of social worker and drift/delay is avoided). Social work caseloads are reduced and case transfers across the service are enabled.	As at 15th January 2019 all positions in Assessment are filled with either permanent or agency staff. 3 vacancies in CP/CT following resignations and termination of agency worker. Orders submitted for replacements. Contracts extended for all regional people to October 2019.	B
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Ofsted No. 3	Senior manager's interaction with social workers to enable staff to feel listened to						
RP 57	Staff in some teams feel a strong disconnect from their senior managers, which is inhibiting improvement. If improvements are to be made securely, this needs immediate attention.						
No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status
3.2	Rolling programme of regular staff briefings regarding Children and Families Development Plan and underpinning philosophy regarding how to deliver services to children/families.	from 24/09/2018	Director for children and families/Assistant director safeguarding and family support	Briefings complete and briefing materials distributed to all staff.		Programme of meetings in place and staff briefings taking place on a regular basis	B
3.5	Staff views requested and received on how to improve methods of communication/ engagement.	31/03/19	Director for children and families/Heads of service	Views collated/established/ embedded.		Review of effectiveness to be completed. Any further suggestions from the review to be implemented across the directorate.	B
3.6	Implement Cascade Model of information sharing from Assistant director/ Head of service meetings to Head of service /Team manager meetings through to team meetings to embed information flow through the organisation.	31/03/19	Assistant director safeguarding and family support	Model implemented/embedded.	Staff are having information shared with them routinely	Compliance audited in October 2018. Findings to be discussed at AD / HOS meeting in January 2019; with a further audit to be undertaken in March 2019 and report to AD/ HOS meeting in April	B

Ofsted No. 4	The pace of progressing child protection and child in need plans and the quality of practice with children in need						
RP11	The quality of services and practice for children in need is poor in many cases. Responses to their needs are too slow and lack the focus required to make meaningful changes to their situations. Current arrangements do not provide effective oversight, and while senior managers have developed an action plan to improve this situation, they do not ensure that all children in need are receiving the services they need in a timely way or that their needs are prevented from escalating.						
RP 13	The quality of child protection plans is too variable and is poor in some cases. ... Weaker plans lack sufficient details for families to see clearly what services are going to be offered, who will provide them, their responsibilities and the timescale for them to take particular actions. This makes it difficult for families to understand what needs to change and by when.						
RP 14	Children in need and children subject to child protection plans do not always receive timely visits. Over half of children who are the subject of a child protection plan are not visited the locally defined minimum amount or visited enough times to meet their needs in line with their plans. Children are not always seen alone when social workers visit. This means that children are not always able to develop meaningful and trusting relationships with their social workers. Further social workers do not always have a sufficiently full understanding of children's current circumstances to mitigate risk and to effectively progress the child's plan.						
RP 19	Identification of risk is not routinely followed up by well-coordinated and focused intervention, with the result that there are delays in progress for children. Often, there is too much focus on single issues, rather than understanding how risks relate to each other and then formulating an overarching plan to address this. The impact on children who are living in such circumstances is not well understood by senior managers, and assertive and timely action is not always well coordinated to improve their circumstances.						

RP 56	Too many children in need of help and protection and children in care are receiving a poor service. Practice is not consistently child focused. Planning for children is not always sufficiently robust or purposeful and this is compounded by management oversight that is not effective in addressing this. As a result, some children experience unnecessary drift and delay and their circumstances do not improve in a timely way.						
No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status
4.4	A comprehensive action plan will be implemented to raise the standard and quality of child protection plans	30/11/18	Head of service safeguarding and review	All Independent Reviewing Officer's (IRO's) and Team managers understand and accept principles and practice of Specific, Measurable, Achievable, Realistic, Timebound (SMART) child protection plans	All children who require a child protection plan will have a robust child centred child protection plan	Action plan in place, to date achievements made against timescales including Head of service reviewing quality of child protection plans in every 1:1 on monthly basis.	G
4.5	Targets will be set to measure improvement in timeliness of visits to children in need and children with child protection plans. The performance information will be reviewed on a weekly basis by Team managers, Heads of service and Assistant director safeguarding and family support.	10/09/18	Assistant director safeguarding and family support / Head of service	Timescales set end of Sept 65%; end Oct 75%; end Nov 85%	Children will receive the service they require and deserve and statutory timescale visits are completed	Visits are an issue that has seen some improvements in some teams but is yet to be consistent across all areas. Work continues to ensure that there is capacity to undertake the visits and tools are being provided to enable social workers to record their visits in an effective efficient manner.	A

Ofsted No. 5	The regularity and quality of social worker supervision						
RP 17	Social workers do not receive regular supervision, and when it does take place, it does not provide the necessary support and direction to ensure that all children's cases progress without delay.						
RP 54	Leaders and managers have not been effective in overseeing and ensuring that social work practice flourishes. Their lack of grip and direction has resulted in a service where some decision-making is very poor, some staff do not receive supervision and workforce capacity is not at the level required to provide a good-quality service for children and families.						
No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status
5.2	Establish fortnightly reporting on Supervision figures/numbers.	from 01/09/2018	Performance service manager	Figures available		Frequency of supervision data is now being received at the end of December 2018 casework supervision 61% and worker supervision 75% being completed	B
5.3	Undertake an audit of the quality of Supervision provided to Social workers by Team managers	31/03/19	Heads of service	Audit completed	When the quality of supervision is consistently good.	Observation of supervision has begun in MASH / Assessment and this is now to embed across safeguarding and family support to use in all teams	G

Ofsted No. 6	The quality and purposefulness of management oversight and decision making and the existing quality assurance and performance management system						
RP 6	The current arrangements within the MASH are not fully collaborative. Domestic abuse notifications are not triaged prior to them arriving in the MASH, which places additional burden upon the MASH manager. Police notifications classed as medium or standard risk are reviewed by police development officers appropriately and on a daily basis. However, there is no social care oversight of these cases, and, currently, there are no agreed timescales for ensuring that all notifications are reviewed. The consequences of this is that any risks to children might not be identified in a timely way, or they might be missed entirely.						
RP 17	Management oversight of frontline practice is not consistently effective. It is not evident in all cases and does not provide the robust challenge and direction needed to urgently progress plans and avoid drift and delay. Social workers do not receive regular supervision, and when it does take place, it does not provide the necessary support and direction to ensure that all children's cases progress without delay.						
RP 42	Educational outcomes for children in care are variable across the local authority. The attainment of key stage 4 children in care has been in line with, or above, national levels for the last two years. The attainment of children in care in key stages 1 and 2 has been variable for the last two years. The local authority is aware of this variability and is committed to raising standards further. The electronic system that has been introduced to record children's outcomes does not provide the virtual school with sufficiently detailed information about the children's attainment and progress. As a result, it is not yet possible to fully track outcomes and respond accordingly to any identified issues or trends.						
RP 43	The virtual school does not have sufficiently detailed information about the attainment of children in care, and schools report that children in care achieve mixed levels of progress. Targets within personal education plans are not specific or measurable enough to allow professionals to make an accurate judgement about the progress of children in care. This is particularly the case for looked after children and care leavers in secondary and 16–19 provision. Personal education plans do include the views and feelings of children in care.						
RP 54	Leaders and managers have not been effective in overseeing and ensuring that social work practice flourishes. Their lack of grip and direction has resulted in a service where some decision-making is very poor, some staff do not receive supervision and workforce capacity is not at the level required to provide a good-quality service for children and families.						
RP 55	Social workers from various teams are prevented from providing the quality of service they know is required because of excessive caseloads and ineffective deployment of staff. This is further hampered by a lack of robust, clear and timely management oversight and case direction. Senior leaders acknowledge this and now have the early stages of an improvement strategy in place. However, it is too early to see any impact.						
RP 59	Senior managers acknowledge that their current performance and management information data is underdeveloped and does not provide sufficient accurate detail to support their understanding of what is happening in their service. This requires immediate and robust attention.						
RP 60	Quality assurance processes are undertaken routinely, but they are rendered ineffective because of a lack of follow-through on issues of concern. This is a missed opportunity to improve the quality of social-work practice and a failure of managers.						
No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status
6.1	Improve the quality and detail of performance information to enable managers to have a grip on how their teams are performing and take appropriate action where required	31/03/19	Performance team lead	Accurate performance information is available and practice standards are improved	Managers are using performance information as business as usual and performance measures are improved	Data book has launched; reports on weekly visits and supervision in place. Local authority is working with Staffordshire and Doncaster to further improve the information provided	B
6.5	Ensure schools are set appropriate and rigorous attainment targets for looked after children; including English and Maths	28/09/18	Head of learning and achievement	Appropriate targets set.	Educational outcomes for children in care will be in line with national or above for looked after children at Early Years Foundation Stage (EYFS), phonics, Key Stage 1 (KS1), KS2, KS4 and KS5 for all external performance measures in 2019 and beyond;	Monthly drop sessions are being offered by the Virtual School to all schools to troubleshoot issues effecting ePEPs being rated below standard. The first session is 26th February. The vast majority now include academic targets and procedures and training is in place for those that don't. Sometimes the academic targets need to be more specific/rigorous. This is still a work in progress	B
6.13	Report on ePEP targets	31/03/19	Head of learning and achievement	Report produced and discussed.	Targets reached and attainment improved.	All ePEP meeting minutes and ePEPs demonstrate that staff from the virtual school review and challenge progress towards these targets.	B
6.14	Quality assure ePEPs and provide feedback.	31/03/19	Head of learning and achievement	ePEPs audited and feedback provided.	Improved standard of ePEP.		B

No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status
6.15	Heads of service required to audit 2 cases a month and provide feedback and learning to close the learning loop with individual social workers.	From September 2018	Heads of service	2 cases audited per month. 100% compliance required for all adults completed.	Evidence of cases being audited per month and feedback being provided to individual social workers	New QA approach providing monthly QA activity	B
6.17	Quality assurance responsibilities of team managers made explicit with a quality assurance forward plan, requiring them to audit 2 cases per month.	From October 2018	Head of service safeguarding and review / Assistant director safeguarding and family support	Quality assurance forward plan in place. 100% completion rate required.	Evidence of cases being audited per month	Performance: audits returned Sept – Dec 2018 74%. A small number of team managers continue not to return audits. Audit actions completed Sept 81%, Oct 83%, Nov 55%, overall Sept-Nov 18 70% completed. Jan 2019 targets have been set and agreed (AD/HOS) for improvement.	B
6.19	Quarterly workshops held to improve quality and consistency to audit approach across all Team managers and Heads of service.	From 11/10/2018	Assistant director/ safeguarding and family support	Workshops being held on a regular basis	Workshops have taken place and the quality and consistency of practice improves across the children and families directorate	First workshops held through October; and the workshop timing has evolved and is now being held on a bi-monthly basis	B
6.20	Assistant director to lead quarterly learning event with relevant service area to close the learning loop from the Quality Assurance Team Manager audit activity in service area.	from 10/10/2018	Assistant director/ safeguarding and family support	Learning events are in place	We are able to evidence that the learning loop is being closed and that the learning is embedded	Learning events taking place on a quarterly basis focussing on specific areas of social work	B
6.21	Establish a clear action plan to improve frequency and quality of quality assurance activity and establish a mechanism to evidence closure of the learning loop	From July 2018	Head of service safeguarding and review	Action plan in place with appropriate mechanism to close the loop	The frequency and quality of the audits improve and there is an appropriate mechanism in place to ensure closure of the learning loop	Quality assurance manager completed 3 month period of performance improvement activity in the assessment service, including auditing cases, providing feedback, following up on actions, provided workshops and best practice checklist.	B

DP No.3	Delivering our Permanency Plan for looked after children						
RP 20	Work with families is not always consistently child-centred. Following an initial public law outline (PLO) meeting, in some cases the significance of what happens to a child is lost as the focus shifts on to the adults. Some letters before proceedings are too long and do not assist parents to understand what they need to prioritise and how they are going to be supported to change. Some children experience drift and delay at this stage, and review PLO meetings are not taking place in a timely way.						
RP 27	The arrangements for children in private foster care are not well managed. Children do not receive a timely and responsive assessment of their needs or of their carers' abilities to meet their needs. Not all required checks are carried out and not all children have been seen in a timely way.						
RP 30	The planning that follows is not always sufficiently robust or purposeful, and, as a result, several children have remained subject to these arrangements for too long. This has resulted in prolonged drift in progressing their care						
RP 32	Children's care plans are of variable quality. Some are specific and clear, while others are overly long. In these plans, outcomes are not measurable and actions and timescales are recorded as 'ongoing'. In some cases, this has contributed to drift and delay for children						
RP 37	IRO visits to children are not always recorded on their case files, and so the IRO footprint is not consistently evident. IRO scrutiny and challenge to progressing plans and addressing drift is not always sufficiently robust.						
RP 38	Case records do not demonstrate that matching takes place at the point of children coming into care, and for some children permanence is not achieved within their timescales.						
RP 39	The authority's arrangements for delegating authority to carers is not sufficiently clear and has not been for some time, despite the issue being raised by young people previously. This is an important issue for young people and means that some foster carers are still unable to make appropriate day-to-day decisions on their behalf.						
RP 40	The local authority is struggling to provide a sufficient number of foster families, and in particular those that meet the needs of sibling groups and teenagers.						
RP 47	Not all young people have access to their health information. Inspectors identified this as an important issue for young people and the local community has agreed to take this forward as an area for immediate improvement.						
RP 50	Care leavers are aware of the advocacy service, although they feel that their voices are not always heard or taken account of. Access to mental health services for care leavers is difficult, and to date there is no strategy to improve this situation.						
RP 58	Sufficiency planning lacks effective strategic direction and future needs are not articulated clearly. This is compounded by the current commissioning strategy not being underpinned by a comprehensive assessment of future needs.						
No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status
DP 3.10	Draft placement Sufficiency strategy informed by LAC population estimates	28/02/18	Childrens Joint Commissioning Manager	Draft strategy approved through council governance	There are clear expectations on the number and type of bed nights required to meet expected demand, and action plans in place to secure sufficient provision.	14/11/18 - Strategy reviewed. Presented at SMT on 14/01/19 and will go to Cabinet In Feb 19.	B
DP 3.11	In-house fostering recruitment targets and action plan in place as part of Sufficiency Strategy.	28/02/18	Childrens Joint Commissioning Manager	Recruitment targets and action plan approved by DLT	Carer recruitment and retention rates increase to meet demand. Recruitment targets and performance is reported through CWB scorecard.		B

DP 4 (i) Application and understanding of Herefordshire Safeguarding Children Board (HSCB) thresholds							
RP 2	A significant number of contacts are signposted away from children's social care, which means that too many children are being referred who do not need this level of support. A number of children who would benefit from early help services experience delay because thresholds are not appropriately applied or understood. This is an area that needs to be strengthened so that children and families who might benefit from early help are quickly identified and do not experience any delays in receiving the help they need.						
No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status
DP 4(i).7	Develop Early Help Strategy 2018 - 2023 and delivery with partners and have in place from April 2019	01/04/19	Early Help Manager	Strategy in place and owned across Herefordshire services	The Early Help offer is embedded and understood by all partners.	Initial proposals set out. Contact made with other local authority via the DfE to bring in learning from outside Herefordshire and Early Help Plan is evolving and will be taken through the governance process	B
DP4 (ii) Improving quality and consistency of practice							
RP 5	Poor recording in some cases means there is not always evidence in children's records that they have been seen or the extent of the direct work that has been undertaken with children.						
RP 9	In poorer assessments, and particularly where neglect is a long standing issue, social workers do not routinely consider historic concerns and their analysis can be over optimistic. Children are not routinely spoken to alone by social workers as part of their own assessments, and so subsequent plans are not informed by a child's view of their lived experience. In some cases, assessments are overly focused on the needs of adults.						
RP 12	The local authority has invested in graded care profile training to support social workers in dealing with cases of neglect. Despite staff speaking positively about this, no evidence of this training was seen being used with individual children.						
RP 24	The recordings of discussions with children lack analysis, with the result that it is not always clear how the information gathered informs safety planning for children.						
RP 29	Decisions for children to become looked after are not always based on up-to-date assessments. Assessments are not routinely updated to reflect changes in a child's circumstances and needs. Historical concerns are not always fully considered, and this means that some children whose circumstances had not changed should have come into care sooner.						
No.	Actions	By when	Delivery lead	Performance Measure	We will know it's working when	Progress	RAGB Status
DP 4(ii).1	All operational Heads of Service will establish, implement and progress improvement action plans to drive the quality and consistency of practice in their service areas.	From 21/09/2018	Heads of service	Actions are signed off by Assistant Director Safeguarding and Family Support	Monthly review of action plans evidences progress against targets	Action plans updated in January for the period January 2019 - March 2019. Actions are being delivered. Monitoring process is established.	B
DP 4(ii).2	Decision to be made on the most appropriate social work model to be implemented across Herefordshire Children and Families Directorate and appropriate implementation plan established	31/08/18	Principal Social Worker/Assistant Director Safeguarding and Family Support	Social Work Practice Model implemented and training undertaken.	We can evidence consistency and quality of practice.	Social work model identified. Director establishing support from local authority that has experience of implementing Signs of Safety via DfE improvement lead and is being taken through the internal governance process.	B
DP 4(ii).4	Design/develop and implement 2 year Quality assurance and learning framework (QALF).	31/03/19	Head of Service Safeguarding and Review	Implementation plan agreed and signed off by 31/03/2019.	The authority will have a strong learning culture underpinned by focused, collaborative, quality assurance work. This will provide meaningful learning to enable the organisation to continuously improve.	Revised audit approach including training now in place	B