

AGENDA

Health & Social Care Overview and Scrutiny Committee

Date: **Wednesday 4 February 2015**

Time: **2.00 pm**

Place: **The Council Chamber, Shire Hall, Hereford**

Notes: Please note the **time, date** and **venue** of the meeting.

For any further information please contact:

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If you would like help to understand this document, or would like it in another format, please call David Penrose, Governance Services on 01432 383690 or e-mail dpenrose@herefordshire.gov.uk in advance of the meeting.

Agenda for the Meeting of the Health & Social Care Overview and Scrutiny Committee

Membership

Chairman

Councillor CNH Attwood

Vice-Chairman

Councillor MD Lloyd-Hayes

Councillor PA Andrews

Councillor JM Bartlett

Councillor PL Bettington

Councillor MJK Cooper

Councillor KS Guthrie

Councillor Brig P Jones CBE

Councillor JLV Kenyon

Councillor NP Nenadich

Councillor CA North

Councillor SJ Robertson

Councillor P Sinclair-Knipe

Councillor GA Vaughan-Powell

AGENDA

	Pages
<p>1. APOLOGIES FOR ABSENCE</p> <p>To receive apologies for absence.</p>	
<p>2. NAMED SUBSTITUTES (IF ANY)</p> <p>To receive details of any Members nominated to attend the meeting in place of a Member of the Committee.</p>	
<p>3. DECLARATIONS OF INTEREST</p> <p>To receive any declarations of interest by Members in respect of items on the Agenda.</p>	
<p>4. MINUTES</p> <p>To approve and sign the Minutes of the meeting held on 19 January 2015.</p>	9 - 12
<p>5. SUGGESTIONS FROM MEMBERS OF THE PUBLIC ON ISSUES FOR FUTURE SCRUTINY</p> <p>To consider suggestions from members of the public on issues the Committee could scrutinise in the future.</p> <p><i>(There will be no discussion of the issue at the time when the matter is raised. Consideration will be given to whether it should form part of the Committee's work programme when compared with other competing priorities.)</i></p>	
<p>6. QUESTIONS FROM THE PUBLIC</p> <p>To note questions received from the public and the items to which they relate.</p> <p><i>(Questions are welcomed for consideration at a Scrutiny Committee meeting so long as the question is directly related to an item listed on the agenda. If you have a question you would like to ask then please submit it no later than two working days before the meeting to the Committee Officer. This will help to ensure that an answer can be provided at the meeting).</i></p>	
<p>7. ACCOUNTABILITY SESSION</p> <p>To hold a public accountability session for organisations within the health sector. This session shall focus on the 2gether NHS Foundation Trust.</p>	
<p>8. CHILDREN'S SAFEGUARDING UPDATE</p> <p>To receive a report on the outcomes of the Department for Education (DfE) Review, the Herefordshire Safeguarding Children's Board (HSCB) Local Government Association (LGA) Peer Diagnostic and an update on the progress to date on the Ofsted Action Plan.</p>	13 - 90
<p>9. MANDATORY TRAINING FOR ELECTED MEMBERS</p> <p>To consider a proposal for mandatory corporate parenting and safeguarding training for all Councillors.</p>	91 - 94
<p>10. CARE ACT 2014 - UPDATE</p> <p>To update the Committee on the timeline for the Care Act implementation and progress on local implementation activities.</p>	95 - 112

11. HEALTHWATCH HEREFORDSHIRE

To receive a report from Healthwatch Herefordshire

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12. WORK PLAN

To receive the Committee's Work Plan.

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PUBLIC INFORMATION

Public Involvement at Scrutiny Committee Meetings

You can contact Councillors and Officers at any time about Scrutiny Committee matters and issues which you would like the Scrutiny Committee to investigate.

There are also two other ways in which you can directly contribute at Herefordshire Council's Scrutiny Committee meetings.

1. Identifying Areas for Scrutiny

At the meeting the Chairman will ask the members of the public present if they have any issues which they would like the Scrutiny Committee to investigate, however, there will be no discussion of the issue at the time when the matter is raised. Councillors will research the issue and consider whether it should form part of the Committee's work programme when compared with other competing priorities.

2. Questions from Members of the Public for Consideration at Scrutiny Committee Meetings and Participation at Meetings

You can submit a question for consideration at a Scrutiny Committee meeting so long as the question you are asking is directly related to an item listed on the agenda. If you have a question you would like to ask then please submit it **no later than two working days before the meeting** to the Committee Officer. This will help to ensure that an answer can be provided at the meeting. Contact details for the Committee Officer can be found on the front page of this agenda.

Generally, members of the public will also be able to contribute to the discussion at the meeting. This will be at the Chairman's discretion.

(Please note that the Scrutiny Committee is not able to discuss questions relating to personal or confidential issues.)

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- Inspect agenda and public reports at least five clear days before the date of the meeting.
- Inspect minutes of the Council and all Committees and Sub-Committees and written statements of decisions taken by the Cabinet or individual Cabinet Members for up to six years following a meeting.
- Inspect background papers used in the preparation of public reports for a period of up to four years from the date of the meeting. (A list of the background papers to a report is given at the end of each report). A background paper is a document on which the officer has relied in writing the report and which otherwise is not available to the public.
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- Have a reasonable number of copies of agenda and reports (relating to items to be considered in public) made available to the public attending meetings of the Council, Cabinet, Committees and Sub-Committees.
- Have access to a list specifying those powers on which the Council have delegated decision making to their officers identifying the officers concerned by title.
- Copy any of the documents mentioned above to which you have a right of access, subject to a reasonable charge (20p per sheet subject to a maximum of £5.00 per agenda plus a nominal fee of £1.50 for postage).
- Access to this summary of your rights as members of the public to attend meetings of the Council, Cabinet, Committees and Sub-Committees and to inspect and copy documents.

HEREFORDSHIRE COUNCIL

SHIRE HALL, ST PETER'S SQUARE, HEREFORD.

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HEREFORDSHIRE COUNCIL

MINUTES of the meeting of Health & Social Care Overview and Scrutiny Committee held at The Committee Room, Shire Hall, Hereford on Monday 19 January 2015 at 10.00 am

Present: Councillor CNH Attwood (Chairman)
Councillor MD Lloyd-Hayes (Vice Chairman)

Councillors: PA Andrews, JM Bartlett, PL Bettington, KS Guthrie, Brig P Jones CBE, JLV Kenyon, CA North, SJ Robertson, GA Vaughan-Powell and DB Wilcox

In attendance: Councillor C Nicholls

Officers: P Deneen (Independent Chairman, Healthwatch Herefordshire), G Hughes (Director for Economy, Communities and Corporate), B Norman (Assistant Director, Governance), R Vickers (Assistant Director Homes and Community Services) and DJ Penrose (Governance Services)

51. APOLOGIES FOR ABSENCE

None.

52. NAMED SUBSTITUTES (IF ANY)

None.

53. DECLARATIONS OF INTEREST

None.

54. MINUTES

The Minutes of the Meeting held on the 3 December 2014 were approved and signed as a correct record.

55. SUGGESTIONS FROM MEMBERS OF THE PUBLIC ON ISSUES FOR FUTURE SCRUTINY

There were no suggestions from members of the public.

56. QUESTIONS FROM THE PUBLIC

There were no questions from members of the public.

57. ACCOUNTABILITY SESSION

The Committee received a presentation on the work of the Herefordshire Clinical Commissioning Group (HCCG) from the Director of Operations. During the ensuing discussion the following issues were raised:

- That work was underway with the NHS Local Area Team (LAT) to undertake co-commissioning work in specialist areas. The HCCG would shadow the LAT from April 2015, with a shadow transfer of a small number of specialist services.

- That the budget before the Committee included both work with the third sector and preventative healthcare within the funds spent on community medicine.
- That the system change for mental health services would allow patients to self-refer. There had been significant investment in the service during the year, and work was underway with the 2gether NHS Foundation Trust to ensure that the capacity within the service was taken up.
- That 'Virtual Wards' were a concept that had worked well in other parts of the country, and additional staff and community teams were working with parish councils in order to support the most vulnerable patients. The pilot was only running in Hereford, but additional work was being undertaken in order to decide what model worked best in different communities.
- That the Hospital at Home provided for care at home. Whilst beds could be provided at nursing homes in the County, this did not necessarily relieve the pressure on A&E or provide the best solution for patients. The Hospital at Home allowed for planned medical interventions if required, and had the support of the West Midlands Ambulance Service.
- That simplified access systems were needed, together with more education for patients as to what the appropriate service was that they should use. It was an uphill struggle to redirect people.
- Patient engagement was led by both theme and communities, and was a constant process. There was active involvement with Healthwatch in this area.
- That there had been no surprises for the HCCG in the CQC report into the Wye Valley NHS Trust, and that there was work for all of the partners in the health and social care arena to do. The Trust had provided additional access to their Oversight Boards for the HCCG and there were issues around the recruitment of permanent staff.
- There were pressures on the urgent care system, and the Multi-Agency System Resilience Group was now in place to help address these.
- That there was a regular daily phone call across the system in order to provide a condition check on the Trust. It should be borne in mind that as the Wye Valley NHS Trust was the smallest acute Trust in the country that there was a collective responsibility within the County to support its operation.

In reply to a question from a Member, the Director of Operations said that if there were to be a major incident in the County, then additional help would be sought as part of the major incident plan. It was important that long term resilience be built into the system, and a solution to this problem would need to be found as planned care suffered when operations had to be cancelled. More planned operations were currently being cancelled than in the past. Additional short term capacity had been provided by way of a portable day care unit. Non-recurring funding had been awarded in order to recruit more staff and provide more beds, but the County was heavily reliant on expensive agency staff.

The Independent Chairman of Healthwatch concurred, and added that the Trust had undertaken work which indicated that in order to future proof its operation it would require 250 beds. It was operating with 208 at the moment.

In reply to a question, the Chairman of Taurus Healthcare said that the company was well placed to be involved in the new systems of integrated health and social care and

new models of care. It had been involved in a pilot project as part of the Prime Minister's Challenge Fund to trial seven day a week GP provision.

The Director of Operations went on to report on the structural changes that were taking place within NHS England, which were designed to make it more focused on its core purpose and to build new capabilities within the organisation.

The Chairman thanked her for the presentation.

58. HEREFORDSHIRE CLINICAL COMMISSIONING GROUP: INTEGRATED URGENT CARE PATHWAY PROJECT

The Committee received a report on the Herefordshire Clinical Commissioning Group's (HCCG) Integrated Urgent Care Pathway Project. The following points were highlighted:

- An outcomes approach to commissioning and contracting had been introduced which would shift the emphasis from the services a provider offers, to the outcomes achieved for patients. Factors such as patient experience and the quality and safety of services would thereby be built into future contracts.
- The NHS 111 service would be included the HCCGs commissioned functions, but would be procured at a national level and then delivered at a regional one. It was intended that there should be a triage process by clinicians as part of the process, but it was not clear that it would be possible to deliver this aspect to the level that the HCCG would like to achieve.

In the ensuing discussion the following points were made:

The Chairman of Taurus Healthcare said that GPs had been asked to deliver additional services with no additional funding. A pilot project to deliver greater access to primary care was working to keep surgeries open until 8pm. There was an important secondary role for pharmacies to provide help to patients, and this should be encouraged.

There was a major problem with missed appointments. The aim of commissioning a group of services together was that the management of those services could be improved.

The Independent Chairman of Healthwatch said that three major contracts were up for review this year: Out of Hours, Mental Health and the Minor Injuries Unit. Taking all these together could provide for a Herefordshire wide solution.

- That the urgent care pathway model had been shown to work well for patients, but that it was important that the GPs should be fully involved.
- That the services that were being commissioned as part of the lead provider model were being developed through dialogue with the Wye Valley Trust, and efficient partnership working would be central to this. There would be a number of key performance indicators that the Trust would have to meet.
- That the Prime Minister's Challenge Fund monies would only be available until June, but additional funding had been secured for the urgent care pathway work.
- That data sharing for GPs was still an issue, but had been overcome in the city, where the practices worked in a hub.

After further discussion, the Director of Operations undertook to provide the Committee with a briefing note on the Major Incident Plan and a further note on the monitoring of the key performance indicators that would be used as part of the commissioning process.

Resolved: That the report be noted

59. HEREFORDSHIRE HEALTHWATCH

The Committee noted a report from Healthwatch Herefordshire. The Independent Chairman highlighted the following areas:

- That an 'enter and view' inspection had been undertaken of both Leominster and Ross community hospitals
- That there would be a Healthwatch question time event on the 10th of February at the Kindle Centre at which the Chief Executives of the Wye Valley NHS Trust and the 2gether NHS Foundation Trust would be present.
- That Healthwatch had met with the Community Pharmacies, and that this was an area that was important to keep under review

Resolved: That the report be noted.

60. WORK PROGRAMME

The Committee noted its work programme.

Resolved: That the report be noted.

The meeting ended at 12.00 pm

CHAIRMAN



Meeting:	Health & Social Care Overview & Scrutiny Committee
Meeting date:	4 February 2015
Title of report:	Children's Safeguarding Update
Report by:	Head of Safeguarding and Review

Classification

Open

Key Decision

This is not an executive decision.

Wards Affected

Countywide

Purpose

To inform the Committee of the outcomes of the Department for Education (DfE) Review, the Herefordshire Safeguarding Children's Board (HSCB) Local Government Association (LGA) Peer Diagnostic and to update it on the progress to date on the Ofsted Action Plan.

Recommendation(s)

THAT the following be noted:

- (a) outcome of the DfE review (as detailed at Appendix 1) conducted on 15 and 16 December 2014;**
- (b) outcome of the HSCB LGA peer diagnostic (as detailed at Appendix 2) conducted between 17-19 November 2014; and**
- (c) progress to date on the Ofsted action plan (as detailed at Appendix 3).**

Alternative options

1. There are no alternative options as the purpose of the report is to provide an update on children's safeguarding.

Reasons for recommendations

2. To update scrutiny on the outcome of the recent LGA peer diagnostic, DfE review and progress to date on the Ofsted action plan.

Key considerations

DfE Review

3. As reported to health and social care overview scrutiny on 1 October, Ofsted carried out their inspection of children's safeguarding in May 2014 and judged safeguarding to be "requires improvement".
4. As part of the process of lifting the DfE intervention notice which was issued in 2012, the DfE carried out a review on 15 and 16 December 2014.
5. The purpose of the review was to establish whether the council had maintained its improvement since the Ofsted inspection.
6. As result of the review, the DfE have been broadly reassured as to the progress the Local Authority has made against the Ofsted Action Plan, and recognised the pace of improvement by the Council and partner agencies, and in particular the cross party political support towards the prioritisation of safeguarding vulnerable children in Herefordshire.
7. The DfE were keen to ensure that clear transitional arrangements were in place to step responsibility for driving improvement forward across from the Improvement Board, and that the recommendations of the LGA peer diagnostic had been used to inform future plans. They were also keen to ensure that the process of recruiting to a new Independent Chair of the Board would not deflect from progress. As such, the DfE are positive that on receipt of such assurances that they will be recommending to the Minister to withdraw the intervention notice upon the local authority before the dissolution of parliament and the general election in May 2015.

HSCB LGA peer diagnostic

8. As part of its approach to continuous improvement, the HSCB arranged for the LGA to conduct a peer diagnostic. The diagnostic took place between 17-19 November 2014. Herefordshire was one of five pilot authorities to undertake a diagnostic.
9. The purpose of the diagnostic was to provide evidence that the HSCB were able to take over the function of the Herefordshire supporting and protecting children improvement Board (improvement board) should the DfE decide that the intervention notice could be lifted.
10. A copy of the letter outlining the recommendations from the LGA is attached at appendix 2.
11. The key areas for improvement are:

Further information on the subject of this report is available from
John Roughton, Head of Safeguarding and Review on Tel (01432) 260804

- Developing synergy of plans across the HSCB, Children and Young People's Partnership and Health and Wellbeing Board to ensure key priorities are shared and understood
- Sharpen focus on outcomes for children and ensure you know how the HSCB is making a difference
- Adopt the principles of the Children of Herefordshire's Improvement and Partnership Programme (CHIPP) in the HSCB's work develop a project management culture to support the Boards work
- Prioritise the priorities – identify key priorities to focus on and develop performance scorecards for each
- Strengthen the Business Unit to ensure capacity to deliver

12. The key areas of strengths are:

- Excellent progress since the peer review 14 months ago, in particular in the development of the Multi Agency Safeguarding Hub
- Ambitious: to be good by 2016/17
- Strong cross party political commitment to the safeguarding agenda
- Clear prioritisation of children's agenda within HCC
- There is a strong commitment to corporate parenting
- The Children's Integrated Needs Assessment provides a valuable tools to enable clear prioritisation
- Excellent progress in responding quickly to the challenge of Child Sexual Exploitation
- Regular meetings LSCB Chair and CX/DCS/Portfolio Holder and Chair and PCC

Ofsted Action Plan

13. Following the Ofsted inspection in May 2012, the council was required to produce an action plan to address the areas for improvement identified during the inspection. The first version of the action plan was presented to scrutiny on 1 October for comment prior to submission to Ofsted on 6 October. Ofsted have confirmed their satisfaction with the action plan and recognise that it provides a robust framework covering all the areas for improvement identified from their Inspection in May 2014, and the progress already made in response.
14. Work on the action plan is continuous and is delivered through the children's wellbeing transformation programme. A progress report is attached at appendix 3, together with a copy of the action plan (appendix 4).
15. Within the progress report, it is worth noting:
- Significant developments within Frameworki to support staff in undertaking their child protection work and improve performance reporting
 - Increased focus and capacity deployed to the children with a disability service
 - Development of the Child Sexual Exploitation strategy and operational response within Herefordshire and across the West Mercia Alliance

Further information on the subject of this report is available from
John Roughton, Head of Safeguarding and Review on Tel (01432) 260804

- The implementation of a robust quality assurance framework
 - The development and implementation of the new Levels of Need guidance
16. All the above have been recognised as good practice developments in response to our Ofsted recommendations by the DfE and the LGA Peer Diagnostic.

Community impact

17. The successful implementation of the action plan will bring about further improvement towards achieving the council's priorities of keeping children and young people safe and giving them a great start in life and enabling residents to live safe, healthy and independent lives; improving access to learning opportunities at all levels and improved outcomes for children and young people.

Equality duty

18. As the action plan continues to be implemented, equality impact assessments will be carried out where relevant to ensure that due regard is paid to the public sector equality duty as set out below:
- "A public authority must, in the exercise of its functions, have due regard to the need to -
 - eliminate discrimination, harassment, victimisation and any other conduct ... prohibited by or under this Act;
 - advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Financial implications

19. The actions included in the plan in appendix 3 can be contained within the current year's budget. Each of the areas for improvement is being progressed within the context of the directorate's transformation programme, the Children of Herefordshire's Improvement and Partnership Programme (CHIPP). As the transformation programme develops, detailed financial planning will be taking place with regard to the actions and where appropriate further reports will be presented to cabinet or the cabinet member.

Legal implications

20. There are no legal implications.

Risk management

21. Risks associated with the failure to implement the action plan are:
- Reputation - should the council remain under an improvement notice. In particular, this has the impact of adversely affecting the recruitment and retention strategy and associated caseload management problems, which in turn have the potential to negatively impact on performance and quality of service for children and families. The council returns to a position where there are widespread failures to protect children and young people from harm.
 - The HSCB is unable to demonstrate to the Minister its ability and capacity to

Further information on the subject of this report is available from
John Roughton, Head of Safeguarding and Review on Tel (01432) 260804

effectively govern the improvement of the multi-agency response to safeguarding children, to enable him to be sufficiently reassured to lift the improvement notice.

- These risks are being mitigated through the production of a robust transition plan to ensure that the improvement function imposed on the Local Authority by the DfE has been transferred to the HSCB, in full consultation with the DfE to their satisfaction. The independent chair of the Improvement Board will continue to act as a 'critical friend' to the Local Authority over the next six months to support and ensure continued focus on key improvement priorities.

Consultees

22. The views of the HSCB and the Herefordshire Improvement Board have been included within the report and the action plan.

Appendices

Appendix 1 DfE letter

Appendix 2 Letter from LGA in connection with the HSCB peer diagnostic

Appendix 3 Progress update on Ofsted action plan

Appendix 4 Ofsted action plan

Background papers

- None identified.

Jo Davidson
Director of People's Services
Herefordshire Council
Brockington
35 Hafod Road
Hereford
HR1 1SH

16 January 2015

Dear Jo,

Angela Windle and I would like to thank the Council's senior leadership team; Councillors; staff (in particular, Caroline and John for organising the focus groups and logistics); and partners, for contributing to the Departmental review on 15 and 16 December 2014.

Our discussions and the information you provided gave a comprehensive picture of improvement and impact since the Improvement Notice was issued in February 2013. A summary of our key findings is attached at Annex A, and I would be very grateful if you could arrange for this to be shared with all those concerned.

Our overall assessment is that the Council has made good progress since we last visited in April 2014. This improvement has also been evidenced by the outcomes of the recent Ofsted inspection and the LGA diagnostic peer review of the LSCB in November.

It was evident that pace has increased since the last DfE review and that the senior management team continues to drive change throughout the service. The workforce demonstrated confidence, strength, and passion in their commitment to effective safeguarding practice.

We heard your plans to create the conditions for success and to be a learning organisation with a stable and experienced leadership team. We heard how you plan to improve practice by further development of management oversight

and timely decision making; improved management confidence; clear evidence of the voice of the child through assessment; meaningful and valued supervision; and building resilience in the system to embed confidence, challenge, and escalation.

We heard that there is cross-party political support and commitment to improving children's services and it was good to hear that funding will be protected and that leaders show an active interest in the work of front-line social work teams. There were strong messages from leadership that safeguarding and child protection practice in Herefordshire would not be allowed to slip back as it has in the past; and that improvement is on a long term course to get to 'good'.

There were a number of key messages we wanted to share with you, these included a strong sense of delivery and drive in the MASH; a workforce that feels safe and which is clear on its role; and a culture of improvement and consultation is now evident. Staff reported that management oversight and supervision had improved and that there were now opportunities for training and development and movement between teams to augment and strengthen learning. Managers, some staff, and partners now have regular access to performance data and the various audit processes are starting to embed.

Staff continued to welcome the visibility of the Lead Member, Councillors and senior staff and the recent stability at management level. Overall staff reported morale as good, and were proud to be part of the service improvements and seem optimistic for the future.

Partners were positive about the recent pace in improvement and the MASH. They valued council investment in children's services and in Frameworki, and welcomed the increased level of challenge, improved data reports and partners feeding back information from their agencies. There is now stronger group partnership working and effective working between the IB, HSCB and other Boards.

A number of key issues were raised during the focus groups. In particular, staff, and partners especially, need to understand the future vision and within that how you plan to get to 'good'. It is important to communicate clear messages and plans to all stakeholders on roles and responsibilities and what still needs to be achieved, and how. Concerns remain in some teams about the Business Support (BS) and what your internal review will bring, it seems that some teams have closer working relationships with BS than others and therefore levels of support are not equitable.

In the next phase of implementation we would expect to see, and therefore recommend, that:

- improvement work is fully embedded, sustained and becomes the standard for the Council;
- Herefordshire addresses the over-reliance of agency staff and aims for workforce stability at all levels;

- immediate plans are put in place to recruit a new HSCB chair and the necessary arrangements for a smooth handover are implemented;
- a clear plan for the transfer of Improvement Board work to the HSCB, Children's Trust, and the authority and partners is developed and agreed to ensure clarity of what responsibilities transition to where; which outlines your vision of getting to 'good', and when the intervention is stepped down will provide confidence to Ministers and stakeholders; and
- gap analysis on the performance data is undertaken which focuses on areas of non-compliance and offer explanations and solutions.

The Improvement Notice continues to remain in place until the Minister can be confident that the quality of practice and service performance is embedded and sustainable and, in particular, that transition arrangements from his Improvement Board to the HSCB are robust. We therefore look forward to speedy progress on the recommendations outlined above.

In the meantime, Angela will draw together messages from the focus group discussions, your self-assessment, the letter from Tony Johnson and the reports from Paul Curran and Dave McCallum in readiness to provide evidence of progress to the Minister.

I am copying this letter to Councillor Tony Johnson, Councillor Jeremy Millar, Councillor Attwood, Alistair Neill, Paul Meredith, Dave McCallum and Paul Curran.

Yours sincerely

OLIVER BROOKE

Annex A

Herefordshire 18 month review – summary of feedback from focus groups

Key positive messages

- The “Requires Improvement” rating from the last inspection feels right.
- SMT and Lead Members continue to be visible, approachable and supportive. This is valued by staff and partners.
- Senior management stability is welcomed but still feels new – staff would become concerned if this “unravels” as some contracts are due to end shortly.
- There are open communications and lots of dialogue. People feel listened to, consulted and included in changes and new ways of working - for example CHIPPS.
- There is increasing confidence in the figures, and the data being produced is much richer and more reliable – although some operational staff rely on management analysis rather than using the data themselves to better drive practice.
- Morale seems good and there is an evident passion within the MASH.
- Staff (including agency) have opportunities to move around the service, learn different practices and now have time to train – with some staff involved in delivering training.
- Caseloads remain at a manageable level but vary from team to team and within teams. It may be helpful to set a standard for each team as well as trigger points to identify where remedial action is required should these triggers be reached.
- Frameworki is improved, is more user friendly, and contains additional bespoke fields for capturing voice of child and CSE intelligence. Increased smarter use of performance data at many different levels internally and externally is welcomed. Partners were grateful for real, trustable data and noted that the Council’s financial investment in the system is clear.
- There is increased management oversight, supervision and audit – all fully “on the agenda” now.
- There is greater connectivity and communication between teams within the Council.
- Staff are now clear about what is required of them and case progression is much more effective as a result.
- The offer for social workers is good. The support and mentoring for NQSWs remains effective and well received. There are now opportunities for progression to senior SW roles and the Academy for growing your own is well supported.

- Partners reported more joint-working and increased challenge – both ways.
- People feel the service infrastructure is much stronger so that when processes and changes need making this can now happen quite quickly.
- Council commitment to the children’s service agenda is clear.

Less positive messages

- Some partners were unclear as to how the council would “Get to Good” in terms of what the next steps are and what that means for the future for the council and for their organisations, this will require further planning and communication of the vision.
- Changes at senior management level have been unsettling and potential for more changes is a concern to staff.
- Evidencing the child’s voice is improving but there is more work to do on embedding this across the system as the norm.
- Concerns remain over the internal Business Support function – some staff feel overwhelmed with “admin type” work, and are concerned that reduced administrative support will affect available time for reflective practice and training.
- Although caseloads are currently manageable, some staff had concerns over potential “caseload creep” and the effect on finding time to reflect, and undertake training.
- There are capacity issues with police partners, where presence is required across adult and children meetings/conferences/boards and attendance levels cannot be maintained.
- Partners are unclear about funding levels for the HSCB Business Support Unit moving forward.

Jo Davidson
Director of Children's Services
Herefordshire County Council
Plough Lane
Hereford

22nd November 2014

Dear Jo,

**Herefordshire County Council
LSCB Diagnostic Pilot**

On behalf of the team I would like to thank Herefordshire County Council, partner agencies and the HSCB for commissioning the recent LSCB diagnostic pilot. Your diagnostic was one of five pilots that will inform the January 2015 roll out of the LGA LSCB diagnostic programme.

It is important to emphasise that this was not an inspection but a critical friend diagnostic delivered by a team of peers. The aim was to provide an informed, external perspective on the quality of the LSCB, its key strengths and areas for improvement. The team interviewed key stakeholders, either individually or as part of a focus group, as well as undertaking a comprehensive review of current documentation. At your request two optional elements were added; first, an audit validation exercise focusing on initial plans; second, a review of police engagement and child sexual exploitation processes.

This letter sets out in detail our findings which were initially presented to an invited audience at the conclusion of the diagnostic.

Following an executive summary our findings are set out under the following headings

- Overarching messages
- Working Together Compliance
- Board Effectiveness
- Evidence of Challenge and Holding to Account
- Capacity, Training and Managing Resources
- Vision, Strategy & Leadership
- Audit validation – initial plans
- Child sexual exploitation
- Recommendations

Appendix one provides additional analysis of the audit validation exercise. We are grateful to Andy Churcher, Caroline Marshall, Chris Jones and Betty Lynch for the efforts they put into preparing for and supporting our visits. The people we met were very welcoming and demonstrated a willingness to use

the diagnostic as an opportunity for learning. We recognise that many of these people made themselves readily available to us at short notice and we thank them for their flexibility.

Executive Summary

You have made considerable progress in the fourteen months since the LGA safeguarding peer review of autumn 2013; there is a renewed confidence within the council and its partners. HSCB is recognising priority areas for improvement and driving learning. The Herefordshire Safeguarding Children Board is clear sighted about the extent of the improvements to reach good and the Intervention Notice still remains. Nevertheless you are now confident in your own ability to manage the future and to take over oversight of improvement from the Improvement Board and driving improvements on the effectiveness of the Herefordshire Safeguarding Children Board itself.

In our view, the key to future Board success is a clear focus on a small number of immediate priorities that drive the work in every element of the Board. At present, priorities are not particularly well co-ordinated across the various levels of activity. The employment of project management techniques will help you to work smarter and achieve demonstrable impact.

There is strong corporate support on improvement, and although needing to become more formalised, you have begun to ensure effective coordination and liaison across key strategic relationships and fora.

You have strengthened challenge, and can point to a number of successful challenges by the Board, such as ensuing the inclusion of the voice of the child within the Children's Partnership Plan and taking on the findings from multi agency audits. There is a greater degree of transparency and openness at the Board and you recognise the scale of improvements that are needed. Whilst there is clear evidence of improvements in performance reporting you know that this has to improve further so that HSCB can maximise its effectiveness.

There is clear evidence that multi agency training and learning from your SCR is having an impact at the frontline. You recognise the need to provide the Board with more effective and better resourced business support and are working with partners to secure sustainable levels of funding to achieve this.

You are aware that in making the effective transition from the Improvement Board, the current pace, depth and relevance of the Board will need to increase. Your improved sense of purpose and focus as a partnership has served you well so far and you are confident of taking Board oversight to the next level and we identified the capability for you to undertake this task effectively.

You have already begun to plan for the transition from the Improvement Board. You need to include in your transition plan risk analysis and

contingency planning. A six month programme of transition support, including coaching and mentoring for key Board members, would help to ensure that the Board maintains sufficient and effective oversight, challenge and pace in the period after the Intervention Notice.

Overarching messages

- **Clarity of role and priorities for HSCB:** We believe that there is a need to clarify and assert the oversight and challenge role of the HSCB, and to focus down on driving a small number of immediate priorities that will continue to enhance improvement of frontline safeguarding. At the moment that which distinguishes the role of the HSCB from the Improvement Board, and other fora such as the Children's Partnership and Community Safety Partnership is not clear to everyone. HSCB activity is not coordinated on a small number of key priorities that drive the strategic board, the steering group and your sub groups.
- **Take the initiative on improvement:** You have been under the spotlight in terms of improvement but we saw a renewed confidence that you can manage this process yourselves; and a willingness to take the sometimes difficult decisions that will inevitably be necessary
- **Reactive to proactive:** We feel that you need to move from reacting to external critique and inspection to a proactive approach based upon forthright self assessment, where you use your own self knowledge, constantly re-evaluated, to identify and act on areas for improvement
- **Process to outcomes:** At the moment you are too process focused, the aim of structures is to achieve measurable outcomes for children; processes will only take you so far and the Board needs to concentrate on what will achieve measurable improvement in practice against key outcomes and keep reporting this
- **Do less but focus:** You are spreading your resources across many areas, we suggest that you do less but focus your attention upon circa six key priorities that link across the work of the strategic board, the steering group and your subgroups, that way you can begin to show impact
- **Network network network:** You are open to external learning opportunities and continuing to make the most of the support and new ideas that these bring is essential, and this is having an impact; as you take over from the Improvement Board you will continue to need the support and guidance these networks give you as a sounding board and to provide coaching and mentoring
- **Beg borrow and steal:** You can save yourself time and energy by using the success of others wisely; do not be afraid to beg, borrow and steal ideas to save developing your own solutions to everything
- **It's about the big picture not just ticking the box on documents:** We have seen that sometimes completing a task is equated with achieving improvement; for example in May 2014 HSCB completed a self assessment but this does not appear to be updated or re-evaluated to reflect whether/how the Board has progressed. By consistently revisiting the findings and using the self assessment as a living document that you self evaluate against at subsequent meetings you will improve its value in supporting improvement. The value of a self assessment, or QA report findings, or challenge to an agency on lack of progress, lies solely in what you do with it on an ongoing basis to ensure something of value occurs on the back of the original action.

Working together compliance

Strengths

- You have renewed and reinvigorated your local threshold document; this has been widely disseminated and is helping to drive improvement in frontline practice. Staff value the document you have produced
- The SCR and Child Death Review arrangements are working well and we were impressed by the quality of the people we interviewed. The case review decision process referral form is effective and there are clear escalation processes. Staff could readily refer to learning from the HH SCR
- You have recognised the need to improve the functioning of the safeguarding board and have held a number of successful development events. We thought that the joint meeting with the Children's Partnership was a very productive initiative, and heard reports that the CSE event was very useful
- Your statutory core membership is compliant with regulations
- The proposed induction arrangements and training/mentoring for Board members is a very positive step forward to maximise effective participation in the work of the Board and we also welcome the training initiative to improve councillor awareness of safeguarding
- The buddy system to embed challenge in the way you undertake Section 11 audits is a very positive improvement

Areas requiring improvement

- Although there is an established protocol between the Health and Wellbeing Board and HSCB, this needs to be strengthened and brought up to date and include the Adults Safeguarding Board, the Children's Partnership and the Community Safety Partnership; terms of reference do not yet effectively delineate these key strategic relationships
- You undertook Section 11 audits in 2013 to hold partners to account and drive improvement but the impact of these has been diluted by not being able to evidence effective follow up. At that time, some agencies didn't have clear statement of responsibility towards children, and a number of agencies reported that safeguarding needs to be a standing item at senior management meetings. The discrepancy between your own section11 findings and the recent CQC inspection of Wye Valley Trust need to be investigated to ensure that all Section 11 audits are undertaken with the necessary rigour in the future and that the Board follows up progress assiduously.

- Your S175 (maintained schools) and S157 (independent and academy schools) analysis needs to be carried out and any learning fed back; this process could help to strengthen the role of schools and academies on HSCB
- You have some well established working relationships with the education sector, and board representation - 'they are part of the family' - but equally acknowledge that this is a work in progress that warrants improved engagement and communication to move beyond those 'already signed up' as well as including the early years sector
- We recognise that your learning and improvement framework is at an early stage of development. A more joined up and cohesive learning and improvement framework will help you to better understand the safeguarding system; especially if informed by service user feedback. HSCB attendance logs should be maintained and regularly reviewed to ensure reach is maximised
- You could use the Annual Report more smartly to explore vulnerable groups of children, to identify priority areas of business and to influence planning and commissioning linked to Children's Integrated Needs Assessment which will also reinforce a single plan. An improved focus in the annual report on performance reporting linked to key priorities and thematic audits is needed. At the moment audit is effective in what it sets out to do but is limited in impact on improvement because of the focus on remedial action to address individual learning from cases. Audit - and Board performance monitoring - needs to be thematic not case reactive
- You have recognised the need to update procedures and these are part of your improvement plan, but in order for the HSCB to have an effective grip and control we think you should review the three year timeframe on this. HSCB will also need to endorse the Local Authority assessment framework as per Paragraph 62 (Chapter1) of Working Together 2013
- In Working Together 2013 early help is a key feature. This was not within our remit for the diagnostic so we are unable to form a view on this.

Board effectiveness

Strengths

- Good will, ambition, willingness to work together
- Drive and ambition within the sub groups, the strategic board and the steering group

- Intent to create structure to achieve coordination across the Community Safety Partnership, Children's Partnership and Health and Wellbeing Board
- Case review learning processes involving front line practitioners provide a line of sight to the frontline
- QA process
- Delivery of training strategy based on needs analysis

Areas requiring improvement

- Pause and take time to know yourself. You have had to undertake a very considerable improvement journey. We think now is the time to take stock of where you are, identify what you do well, and where you have to be more effective, and focus on getting it right all the time. That will make you an effective forum for challenge and oversight, a function that will be all the more important if the Intervention Notice is shortly to be lifted
- Learn to trust your own judgement. You are very used to receiving external definitions of your areas for development, and have used those judgements well to drive improvement. To achieve your own ambition of 'good by 2016' you will have to become an effective learning organisation that consistently is self aware on both success and failure and continuously monitors its own working arrangements and progress on key goals. At the moment you are beginning this process and your May 2014 self assessment provides the basis for stepping up to the challenge if it is used smartly to regularly reassess how you are performing. A simple review of progress against the self assessment would be a useful way to conclude board meetings and could be incorporated as a standing final item on the agenda, focussing on a small set of easily understandable questions such as how much have we done to address deficits and improve our own working as well as frontline practice, how well have we done it, and what difference have we made today against each of our priorities?
- One plan to take you forward, focus on making a difference. You are all working hard on many fronts but need to focus all that activity upon what is most important. At present the HSCB does not have a small and consistent set of key priorities that inform its work from strategic board to sub groups, nor do other strategic plans yet align fully across with your own. Success will only come with a consistent focus for your and others' activities on those small number of factors that will make a difference now, that the HSCB monitors regularly and challenges when necessary. A golden thread needs to link across all strategic fora and within the HSCB from the strategic board down through the steering

group to each and every sub group; all need to share the same work programme with their own work stream clearly linked to the overarching priorities and feeding into to them

- Project management. The Children of Herefordshire Improvement Partnership Programme has proved that you have effective project managers within the partnership. Use this expertise to improve rigour and robustness within the Board. Using a project management approach, and a smaller but clearly delineated set of common priorities, will help to improve rigour and robustness of performance monitoring and subsequent holding to account for under performance
- Pace up. You are ambitious to take over from the Improvement Board their responsibilities. This will require increased responsibility and oversight by HSCB to ensure the pace of improvement is maintained. You are planning how you will achieve this increase in responsibility and oversight at the next HSCB meeting. This meeting provides a good opportunity to start to employ a project management approach to plan for and take through to conclusion this transition. You are aware that you may need to put in place transitional arrangements and support/mentoring and are investigating who is best placed to provide this. It is equally important that you develop a risk register, for the wider improvement journey, as well as for the transition to taking over from the improvement board and use this to move forward effectively; and contingency plan to minimise deficit and failure. Key questions to take you forward include; do you know where you are in getting to good? Are you clear what taking on the scrutiny role post the Improvement Board actually means in practice for the HSCB? What are the risks and what is needed to be put in place to secure this role for the HSCB going forward?
- Where does the real power lie and how does this impact on wider engagement? We heard the steering group described as the engine room but this group is chaired by the Assistant Director, Children's Safeguarding and Family Support and not by the HSCB Independent Chair. If this is the engine room we feel it should be chaired by the Independent Chair; and if indeed it is to continue as the engine room, what implications does this have for the strategic board, is the strategic board to become just a rubber stamp for the steering group, and, if so, how will that impact on engagement and ownership of improvement across the wider partnership on that strategic board? The messages given out by how your structure is actually perceived to work in practice will influence how well engaged all partners are with the Board
- You have good police attendance at the Board but the current arrangements put in place by the merged police forces (the strategic alliance) may not best serve the Board; we think this is an issue that needs to be raised on a pan regional basis and would advise that this is taken forward in conjunction with your neighbouring Boards through the

developing arrangements in which the Chair of the HSCB and the DCS are engaged.

- The voice of the child, and family, is not very well developed at Board level. You acknowledge this and are planning to address this in the near future. The views of young people and families can inform HSCB business priorities and provide effective challenge on improvement through user feedback

Evidence of challenge and holding to account

Strengths

- The HSCB now operates with a stronger degree of challenge. There is more honest discussion of for example the deficits revealed by the case audits and the need for the partnership as a whole to work smarter. We were told that there is now much greater transparency in partnership discussions when it is identified that things have gone wrong
- The two recently appointed lay members are reported to add significant value to the work of the Board and to have enhanced challenge within Board meetings
- HSCB can be proud of a number of 'challenge successes'. These include taking on the findings from the programme of multi agency audits, challenging the Children's Partnership to include the voice of the child within the children's partnership plan, and negotiating for the Children's Integrated Needs Analysis to supplement for the lack of a children's safeguarding focus within the JSNA
- Case specific escalation via the QA sub group has been very effective in raising case specific deficits at Board level and is a good first step to a successful QA sub group
- There is widespread recognition of the need to produce a data set that is fit for purpose and work is ongoing to achieve this linked to the ongoing transformation programme for the Frameworki computer system in social care

Areas requiring improvement

- Increase in data quality and evidence of impact. You are working to improve data quality but the focus is on producing better quality and fit for purpose quantitative data. A positive enhancement of the data set would be to include qualitative measures, including user and family feedback. This has begun with the most recent feedback from families and professionals on the effectiveness of child protection conferences.

- HSCB should prioritise establishing a set of indicators against each Board priority and have these set out in regularly updated performance scorecards. This would help to give assurance to the Board that frontline practice improvements were being embedded and sustained.
- A strengthened QA sub group is needed to drive development. The QA subgroup is very active and has raised many useful issues but at heart it is reactive to the deficits of individual cases. The sub group needs to move to looking at findings from individual cases as a pointer to wider thematic issues that hold back improvement and move from individual case review to thematic practice based audit. The group meets monthly but only four multi agency audits were undertaken last year. A more focused and productive work programme needs to be developed that will feed in to the newly revised key priorities of the Board
- Much smarter QA reporting would provide the Board with the information it needs to challenge on its priorities. HSCB is already aware of a number of potential thematic and practice focussed issues e.g. the waiting times for CAMHs and the Speech and Language Service. Currently, although well known practice issues, there has been little escalation or challenge via HSCB on either of these. There is potential here for the QA subgroup to focus on these areas as an exemplar of future working practices which will also enable the Board to drive improvement across the multi-agency partnership.

Capacity training and managing resources

Strengths

- You have recognised that you need to increase capacity of the business unit, and that synergies can be obtained by coordinating business support across other fora. A plan is in place to enhance business support and negotiate a sustainable multi agency funding stream
- We saw evidence of an effective training cycle in operation, one recent good example of which was the development and commissioning of DV training on the back of this being flagged as an issue in the staff survey
- We heard lots of positive feedback on the training and development events delivered by the Board and you looking at implementing evaluation of impact
- Learning from the HH SCR was evidenced in our discussions with frontline staff

Areas requiring improvement

- In the post Improvement Board world HSCB will have to work much smarter. One obvious example is in the regular use of performance management techniques to drive forward improvement. This can be brought in e.g. by consulting with colleagues who have employed this successfully within the Children of Herefordshire Improvement Partnership Programme.
- You are planning to look at how you put in transition arrangements to support the Board in the immediate period following the lifting of the Intervention Notice and to do this successfully you need to undertake risk analysis, contingency plan and put in place the kind of transitional leadership support that we set out below
- You need to secure the future funding across partner agencies for a strengthened business unit as without that the work of HSCB will be compromised. The business unit is not resourced effectively at the present time and struggles to provide the high standard that it sets itself in terms of support to the two safeguarding Boards
- It would be useful to set out clearly what the next year will look like in terms of the Board. What does a 3, 6, 12 month trajectory on HSCB improvement look like? What are the milestones that you need to see and the actions necessary to achieve the step change in oversight that HSCB is aiming for, and how will you report on and know you are making progress? Setting these out clearly and simply and agreeing them with the whole partnership will start to make your work more outcome focused and provide focus for the work of the various sub groups. It will help to identify skill deficits within the Board so these can be addressed in a systematic and timely way
- There is a wider capacity issue that HSCB needs to address, namely capacity and fitness for purpose of the children's workforce in the widest sense. We have mentioned above access to specialist services such as CAMHS and Speech and Language Services but there are other capacity issues where the board needs to secure improvement e.g. management oversight and decision making as well as stability of the children's workforce. These require analysis, holding to account and challenge at Board level. Again these provide a good starting point for effective project management of key issues and priorities and are examples of the work which the Safeguarding Children Board will be taking over from the Improvement Board.

Vision strategy and leadership

Strengths

- Excellent progress has been made since the peer review 14 months ago, and there is coordinated and effective working with key players to identify improvement targets and to address deficits

- You are ambitious and are committed to achieving the improvements necessary to have articulated what 'good' is in Herefordshire, and be judged 'good' by Ofsted by 2016/17
- There is strong cross party political commitment to the safeguarding agenda, and a clear prioritisation of the children's agenda within HCC
- We saw a strong commitment to corporate parenting which is to be strengthened by mandatory councillor training which will continue after the 2015 elections
- The detailed analysis of need provided by the new Children's Integrated Needs Assessment will help to focus attention on achieving improved outcomes
- You are working well to address local and regional CSE issues
- The HSCB Chair has regular meetings with the Chief Executive, the Director of Children's Services, the Portfolio Holder and the Police and Crime Commissioner

Areas requiring improvement

- You are aware you need to increase the current pace depth and relevance of the Board to secure the handover from the Improvement Board of their responsibilities – we would advise a programme of coaching and mentoring for key players to maintain progress in what could be a risky period.
- You need a simplified and coordinated shared vision of the safeguarding priorities that drives the work of the partnership and informs the challenge function of the Board. This should include continued work to achieve and maintain the culture shift that safeguarding is not just a local authority responsibility
- You need an HSCB identity, and for the HSCB to become more influential and visible
- Simple clear roles and priorities for the HSCB would help to define its true purpose – you need to avoid the current blurring of Board roles, to help you to distinguish between what is HSCB and what is Children's Services
- If you continue with this structure we are strongly of the belief that the Independent Chair should chair and drive the steering group. This will enable the Independent Chair to have increased oversight of the work being taken forward in the sub groups and to ensure that the work of the sub groups reflects and aligns with HSCB priorities

- We were not convinced that there is clarity, discussed and agreed across the partnership, on the role and remit of the steering group, nor its relationship to the strategic board. There is a fundamental question to answer here, namely where do you want your power house to be, and who do you want to lead it? At the moment this is unclear to us, and this lack of clarity may well be shared with others
- Current MASH governance via a HSCB sub group is an example of the blurred roles we discuss above. We know why you chose this arrangement initially; nevertheless this is an operational delivery function and with the MASH reinvigorated do you still need governance via HSCB?
- Capture and gather the voice of the child and feedback from families—the voice of children and families should be at the heart of everything HSCB does and a major influence on how HSCB pushes for change
- Police regularly attend the Board meetings; however, we do believe that it would be worth exploring with your police representatives firstly, how police plans interact across the Protecting Vulnerable People Plan, the local delivery plan and the CSE strategy to deliver better safeguarding outcomes and, secondly, whether current arrangements for Board representation by the Police deliver local knowledge and focus
- We feel that current arrangements for meetings between the Independent Chair and key senior managers, politicians and stakeholders should be formalised with a clear, set agenda that includes performance reporting and holding to account through the Annual Report

Audit validation - commentary on the findings of four cases

The audit validation was bespoke and focused on a safeguarding system approach to child protection planning and working together, to achieve improved outcomes.

Strengths

- Staff were engaged and appeared to communicate with each other
- Staff were aware that practice needs to improve in order to improve outcomes for children subject to Child Protection Plans
- Staff acknowledge a range of issues that currently impact on performance e.g. turnover of staff
- Staff welcome further training to improve practice; they were reflective in the focus groups and would welcome more time for case reflection

Areas requiring improvement

- Plans were not robust – neither SMART nor linked to outcomes
- We saw a lack of contingency planning
- Expectations on parents were not made clear
- Managers did not consistently attend conferences and core groups. Effective management oversight is key to ensuring progression of Child Protection Plans
- There was some evidence of drift in both assessment and intervention; a major cause of this was the high number of changes of social worker
- We saw numerous changes in social worker between conferences
- The parenting assessments we saw were neither robust nor timely
- There was a lack of escalation from all partner agencies when progress was not made on plans by any agency
- Decision making wasn't clearly recorded with the rationale and the risk management clearly set
- Multi agency training on conferencing needs further developing

CSE

- You have put in place a strategy and action plan, there is a reinvigorated structure, a specialist CSE unit has been established, there is currently a new specialist social worker in this unit, to be joined by a police post in the next financial year
- The new strategy complies with national recommendation and is based on national guidelines
- The action plan is a positive step forward, however, it has numerous actions but no real outcomes. It is lengthy, and there is a real need to prioritise the priorities! With so many outcomes it is unrealistic for them all to be completed. A focus on a smaller number of key priorities in the immediate term is needed, with consideration of how additional priorities can be rolled out over time. As yet the action plan has not been effectively disseminated

- The new CSE team (that was only in place during the week of our visit) have been very quick off the mark and reports from other frontline staff are positive, which is very impressive for such a new development. There is the potential that demand will swamp this new provision so there is a need for tightly controlled and managed referrals to the unit
- The police are committed to increase their involvement and resources over the coming twelve to twenty four months
- The Board structure is now clear with a CSE group and an operational group below this

Recommendations

You might wish to consider the following recommendations. These are based on what the team has read, seen and heard over the course of the LSCB diagnostic.

- Identify a small number of HSCB priorities aligned across other strategic fora - and stick with them, when refining your priorities decide which are immediate priorities to be put in place now and what are aspirations for the longer term
- Fund and implement a reinvigorated and fit for purpose business unit
- Review the Board structure in the light of your priorities and statutory requirements and streamline the steering group and make this a chair of chairs group
- Make sure all members of the strategic board are fully engaged and understand their relationship between being on the Board, improving agency practice and achieving impact on outcomes for children
- Make all agencies accountable for what they have committed to at the Board
- Locate MASH governance within Children's Services operational management structure
- Use formal challenge by HSCB to other agencies to escalate concerns revealed through audit and feedback from the staff and families
- Evidence impact of HSCB challenge and the better outcomes that HSCB has achieved
- Project manage everything especially the transition from the Improvement Board

- You are seeking tangible improvement in children's lives and need an outcome focus to ensure that what you do achieves this
- User voice will give the Board confidence and understanding of what has and has not made an impact

Throughout this letter we have sought to outline the strengths of the LSCB arrangements in Herefordshire, along with areas for consideration and improvement. You and your colleagues will no doubt now wish to reflect on the team's findings and consider how our findings might inform future plans and activities.

For further improvement support you can contact the LGA's Principal Adviser for the West Midlands region, Howard Davis, who can be contacted via howard.davis@local.gov.uk or on 07920 006 1971 . In addition, you can contact Claire Burgess, LGA Children's Improvement Adviser covering the South West Region for specialist support. Claire can be contacted via claire.burgess23@gmail.com or on 07854 407337.

Once again, thank you for participating in the LSCB pilot diagnostic and please pass on our gratitude to everyone involved.

Yours sincerely

Peter Rentell
Programme Manager (Children's Services)
Local Government Association

Appendices:

Appendix 1 - Audit validation - initial plans

Appendix 1 – Audit validation initial plans

LGA LSCB pilot diagnostic Herefordshire County Council
LGA peer: Jonathan Williams
Date: 17-19 November 2014

Audit validation – initial plans - summary

Five cases were looked at; four of these involved meeting with a focus group and two of these involved the inclusion of a parent. The fifth case was linked to the observation of a CP conference. It was unfortunate that the conference could not be observed because the parent did not consent. A telephone conversation later took place with the CP chair.

Notes about the individual cases are outlined below

Strengths

- Staff were engaged and appeared to communicate with each other
- Staff were aware that practice needs to improve in order to improve outcomes for children subject to CP Plans
- Staff acknowledge a range of issues that currently impact on performance e.g. turnover of staff
- Staff would welcome training to improve practice; they were reflective in the focus groups and would welcome more time for case reflection

Areas requiring improvement

- Plans were not robust – neither SMART nor linked to outcomes
- We saw a lack of contingency planning
- Expectations on parents were not made clear
- Managers did not consistently attend conferences and core groups. Effective management oversight is key to ensuring progression of CP plans
- There was drift in both assessment and intervention
- We saw numerous changes in social worker between ICPC and RCPC
- Parenting assessments were neither robust nor timely
- There was a lack of escalation from all partner agencies when progress was not made on plans
- Some decisions made could have made children vulnerable and left organisations at risk
- Multi agency training on conferencing needs developing

It would appear that the main focus of improving plans has been linked to the redesign of Framework I and the reformatting of the initial plan layout. Only one of the cases had this plan in place as it had only been introduced in the last two weeks; the plan did look better.

However a systems approach to approving plans may be required.in addition to the newly introduced format; this would entail for instance asking the following questions from a multi-agency perspective - how much have we done, how well have we done it and has it made a difference?

During the audit validation we saw a number of issues that impacted on effective planning

- Changes of social worker (one case had four changes of social worker in the period from assessment to first review);
- Lack of risk analysis (often there were blanket risk statements, eg mother smokes cannabis. It did not state how much, when, frequency, storage, whether the child was present etc. – there was little connection with the impact on the child);
- Poor management oversight (little evidence of managers attending CP conferences or core groups) – is this linked to capacity, managing high caseloads and frequent changes of staff? Managers from focus groups seemed engaged, intelligent, insightful and reflective with a genuine aim of improving outcomes for children. Therefore wider issues need to be explored
- Ineffective plans. It is the role of the Chair to steer, facilitate and provide guidance and leadership. However partner agencies need to own the plan and contribute to it at conference. There is a lack of training and direction in relation to the model of conference. There are snippets of strengthening families being used but this is only by Social Care. The LSCB could take a view on what model needs to be taken forward and develop it accordingly, including the commissioning of training.
- All participants need to be responsible for escalation of issues, especially when there is drift on case because of agencies' ineffectiveness to provide a service. The two parents who attended the ICPC's were not given copies of the complaint procedure in relation to agencies where progression of the case was being hindered because of agency engagement. In addition, agencies did not escalate when there were changes in social workers, when actions were not completed, when services were not being delivered; this is not solely an issue for social care and the chair.

A number of key questions arise from the audit validation in relation to oversight by the LSCB.

First is a series of questions in relation to oversight of performance and practice

- The LSCB could use the above analysis as a starting point to investigate how far what has emerged from our findings is leading to an increase in CP plans
- Are the issues raised in the audit validation exercise currently being measured by the LSCB, and, if so, in what way do you need to amend or improve oversight, and, if not, how is the LSCB to investigate further the findings of the audit validation exercise?
- Is the current method of scrutiny of the LSCB data set and associated quality assurance activity via the sub group fit for purpose so as to reassure the Board that front line practice is – and will continue to be - safe and effective?

Second how the work of the LSCB links with improving front line practice

With regards to the front line staff's view of the LSCB, staff from focus groups demonstrated the following

- Learning from the recent SCR HH – staff understood the issues. There was some query about delay of the Framework I LAC notification being put on the system.
- Good training for multi-agency staff at operational level including learning from the HH SCR e.g. CSE, Framework I and Domestic Abuse.
- Training is not as relevant for middle and senior managers
- The threshold document is understood by partner agencies
- Referral pathways have improved, especially since there have been developments in the MASH

**Children’s Wellbeing Directorate
The Journey to Good – Progress Report
September 2012 to December 2014**

1. INTRODUCTION

- 1.1. The Council and its partners have the ambition to secure good safeguarding services by 2016/17. This document sets out the journey that the council and its partners have made since the Ofsted inspection which judged the Council to be inadequate; current performance features and the future plan to get to good.
- 1.2. The Council and its partners were clear in 2012 that the Ofsted judgement was fair and that the previous ten year profile of adequate/inadequate performance was unacceptable. The improvements to date have been staged to ensure there is sustainable change which establishes the right culture and environment within which staff can give of their best.
- 1.3. At the end of the day, we all work together in order to make a positive impact on the experiences of children and families and their outcomes. Good outcomes for children within the resources we have available is at the core of our vision for safeguarding in Herefordshire, and our plan to achieve this rests on the development of:
 - o Effective child protection practice
 - o Direct work with children and families using evidence based theoretical models of intervention
- 1.4. Our strategy development focusses on the belief that families and communities bring up children best. Through effective strategies we will:

- Understand our communities and target our resources as early as possible through effective use of data and intelligence
- Use the assets in our communities to support families, including volunteers
- Give families independence, choice and control where possible, building on strengths
- Where families cannot look after their own children, we will use family based models of care
- Over time, move resources from expensive, institutionalised forms of support to community based approaches
- Establish integrated pathways of support so that children and families experience seamless approaches, wherever support and intervention comes from

2. HOW WE WERE: SEPTEMBER 2012 – SEPTEMBER 2013

- 2.1. In September 2012, Ofsted found an inadequate safeguarding system. This was typified by a system which did not know itself well, did not understand what effective child protection practice was, and which had fragmented understanding of the regulations. Children and young people were not a priority and, despite investment, some child protection services were in the bottom quartile of funding nationally despite having demand which outstripped statistical neighbours.
- 2.2. In contrast, early help services were well organised and reasonably well resourced; there were effective multi-agency groups which evidenced a strong focus on improving outcomes for children and working together as agencies.
- 2.3. Leadership was weak overall, and whilst people were working extremely hard, services had become complacent, against a backdrop of ten years of performance which had been judged as adequate or inadequate at various stages.
- 2.4. Following the Ofsted judgement, the Council and its partners focussed on four things:
 - The judgement was fair and the priority had to be on addressing the findings, not defending the indefensible

- This was a system wide responsibility, not just a social care one to put right
- Improvement needed to be rapid, but also sustainable. This meant getting underneath all the performance issues and building up from the basics again.
- The culture had to change - to be an honest, learning culture, challenging and learning from each other, focussed on children's outcomes and building on strengths

2.5. The improvement trajectory was set – adequate/requires improvement by 2014/15 and good by 2016/17.

2.6. Things we did well:

- Taking rapid steps to set up an independently chaired improvement board and an improvement plan
- Not wasting time on denial
- Securing additional council resourcing for child protection services
- Establishing children as the top priority for the Council
- Changing the political and officer structure to disaggregate the People Directorate and member role and establish dedicated Lead Member and senior officer structure
- Establishing the start of the learning culture through the auditing of over 1000 cases, drawing out the learning from that and the establishment of a small quality assurance function
- Establishing the Multi-agency safeguarding hub
- Establishing the Social Work Academy
- Unpicking the data
- Establishing the early stages of a performance culture
- Securing effective support and external challenge, with externally monitored staging points to make sure we were moving forward and not slipping back

2.7. Things which didn't go so well:

- The significant destabilisation of social work staffing – 4% agency to 40% agency staff in 9 months
- Not establishing the practice standards and expectations clearly enough with staff
- Slow progress with establishing effective leadership at every level

- Difficult start to the MASH evidencing weaknesses in project planning, implementation and oversight
 - An overambitious and under prioritised improvement plan – on reflection, people were too focussed on the future and insufficiently focussed on making the changes to the day to day practice
 - Slow progress with improving the case management system which also caused significant difficulties with the accuracy of performance data
- 2.8. The end result of this was practice improvement and impact which was too slow.
- 2.9. The Council and partners, through the Safeguarding Children Board and the Improvement Board, were clear at the outset that for improvement to be effective, we needed external monitoring and challenge at set points. As we were changing a decade of underperformance, we knew that the most difficult things to change are old habits; and that sound judgement takes practice to get right.
- 2.10. Therefore, twelve months after this inspection in October 2013 a Peer Review took place, commissioned by the Council in partnership with the HSCB via the Local Government Association in order to evaluate progress. This highlighted that progress had started on the improvement journey but that the pace had been slow. The review recognised that these were early days.
- 2.11. *“You are addressing failings in social work practice highlighted in previous inspections however, despite action on this; the review team found that social care practice and supervision across all teams is not yet achieving the required levels of quality and consistency.” – Peer review feedback letter 23rd October 2013*
- 2.12. Equally, the peer review feedback also reinforced that the fundamental issue for Herefordshire to resolve lies in the recruitment, development and retention of high quality staff, now and for the foreseeable future.
- 3. SEPTEMBER 2013 - MAY 2014**
- 3.1. The Peer Review was an important staging post for us to enable a re-focussing of the Improvement Programme and the overall approach being adopted for the next stage of improvement. Whilst building on what was beginning to work well, it was appreciated that a different approach was required if the goal of achieving our aspirations of a good safeguarding service by 2016 is to be realised.

3.2. The approach taken since October 2013 comprised::

- A reconfigured management team with new personnel leading:
 - A streamlined and refocused Improvement Plan used as a key driver for change within new Business Planning and Transformation Management Programmes
 - Enhanced emphasis on achieving good performance in key social work tasks with clear expectations developed with staff and based on effective social work practice.
 - Embedding a performance culture throughout the department, with the emphasis on self-responsibility, reliability of information and honest analysis.
 - Increasing the social care resources available within the MASH and throughout the Social Care teams to take a much stronger leadership role, reasserting the Council's responsibilities as lead agency for child protection.
- The ongoing strategic prioritisation of Children's Wellbeing by the Council. Resources have been both protected and enhanced for safeguarding services as far as possible within the austerity measures.
- Investment has been prioritised in the areas of:
 - MASH, 16+, Children with Disabilities, Fostering, Adoption and Children in Need services
 - Quality Assurance, IRO and CPC service and Performance Management
 - A completely new Transformation Programme for the computer system Frameworki
 - Child Sexual Exploitation
 - The development of a Programme Management Office (PMO) to oversee the broader transformation of the directorate through programme and project management approaches, This transformation programme has been branded as the Children of Herefordshire's Improvement and Partnership Programme (**CHIPP**).
- The development of:

- Local family based services as a direct alternative to using costly and ineffective institutional forms of care. This will achieve better outcomes for young people and also free resources to invest in preventative direct work services
- A suite of direct work services to work alongside fieldwork services using evidenced based therapeutic approaches in order to improve long term outcomes for children and families and reduce the need for statutory interventions.
- The development, over time, of 7 day per week integrated service models in MASH, Vulnerable Young People and CWD.

4. SOCIAL CARE WORKFORCE STRATEGY

4.1. Underpinning all these developments is a revamped Social Care Workforce Strategy. Staff need the right environment to perform their best. The focus has been on:

- Practice expectations and development programmes
- managing poor performance,
- enhanced incentives to join Herefordshire and to stay here,
- more NQSWs so that we grow our own high calibre staff over the longer term
- Social work academy development to support the first three years of a social workers career
- enhanced management capacity and effective supervision
- reduced caseloads – now averaging 16 from the previous 30
- improved working environment.

4.2. This approach has shown some encouraging signs as evidenced in the feedback from a Peer Review Follow-up Exercise which was commissioned in February 2014 to assess progress in the MASH and related activities. This reported “Clear effort has been made by the senior management team and whilst very early days the new systems and structures look promising. There is evidence that Herefordshire have taken positive steps to address the significant issues in the MASH; new systems have been introduced, the direction looks right although it is early days”

4.3. In March 2014, the DfE carried out a 12-month follow up review. This review confirmed that Children's Wellbeing Services were progressing their improvement journey and highlighted the following:

- Positive progress identified
- Performance in MASH highlighted
- Lower Caseloads
- Improving morale
- Stability in management
- Good recruitment strategy
- Partnership work needs more attention

5. OFSTED SINGLE ASSESSMENT FRAMEWORK INSPECTION 29 APRIL – 21 MAY 2014

5.1. The work undertaken above placed the local authority in a positive position to rise to the challenge of demonstrating to Ofsted the progress made since the previous inspection, and the difference being made specifically to vulnerable children and families. The outcome of the inspection was that Herefordshire both in terms of the Council and its partners and the HSCB were judged as 'requiring improvement' overall..

5.2. The inspection recognised the significant progress made in the preceding 18 months, in particular with respect to the improvements in MASH, the quality of direct work undertaken and the evidence of the child's voice on a case by case basis. During the course of the inspection, no children were found to be unsafe.

5.3. However, they also commented on the relative infancy of some of the changes and improvements, and that more time was needed to evidence their sustainability.

- Children clearly key priority for Council
- Becoming good is a golden thread
- Elected Members are diligent and well engaged
- Performance Management & collection and use of good reliable data needs much improvement
- Strategic use of data and evaluation to inform developments needs improving

5.4. Pleasingly, Ofsted noted that there was an early growing confidence amongst the social care workforce.

6. MAY 2014 - PRESENT

6.1. There is a new found confidence within services, which is giving added impetus to the progress being made. Whilst there is still significant work to do to reach a secure quality of good services – for example, improvements are not yet fully embedded and the staffing situation is still relatively fragile - the foundations have been laid on which we can continue to build and improve the overall effectiveness of the child protection services, and radically improve outcomes for vulnerable children and young people in Herefordshire.

6.2. The Improvement Plan has been further refreshed to build in the new Ofsted recommendations and continue to focus on the outstanding improvements required. Since May, the following developments have taken place:

- Permanent staffing has stabilised further, with only one permanent social worker leaving since April 2014
- Agency social worker profile has reduced to 31% of the staffing establishment
- Caseloads have remained at an average of 16
- The first cohort of NQSWs have completed their AYSE
- The Frameworki case management system is 75% through the reconfiguration programme, saving significant time for social workers and improving significantly the accuracy of performance information and quality of casework recorded
- The Council and partners have commissioned a new Intensive placement support service which goes live in spring 2015 and provides multi-disciplinary 7 day per week therapeutic support for children and their carers which will begin the move from institutional forms of care to family and community based provision
- The MASH has continued to develop well and has expanded to provide its first specialism in the area of child sexual exploitation
- Performance has continued to improve and stabilise across all key measures.

7. LGA PEER DIAGNOSTIC

7.1. The continuous improvement framework which is now in place, places value on specific external scrutiny. The HSCB was one of five local authorities to pilot the new Local Government Peer Diagnostic for Safeguarding Children Boards in November 2015, This was planned specifically in Herefordshire, to assist in planning for the Board to taking on from the Improvement Board the full responsibility for ensuring effective multi agency safeguarding practice.

7.2. Themes which were reinforced by the review were:

- Evidence that the authority and its partners know ourselves well
- sustained progress made since the May inspection
- the continuing strength of the MASH and our CSE arrangements.

7.3. The peer review also urged us to trust our own judgement

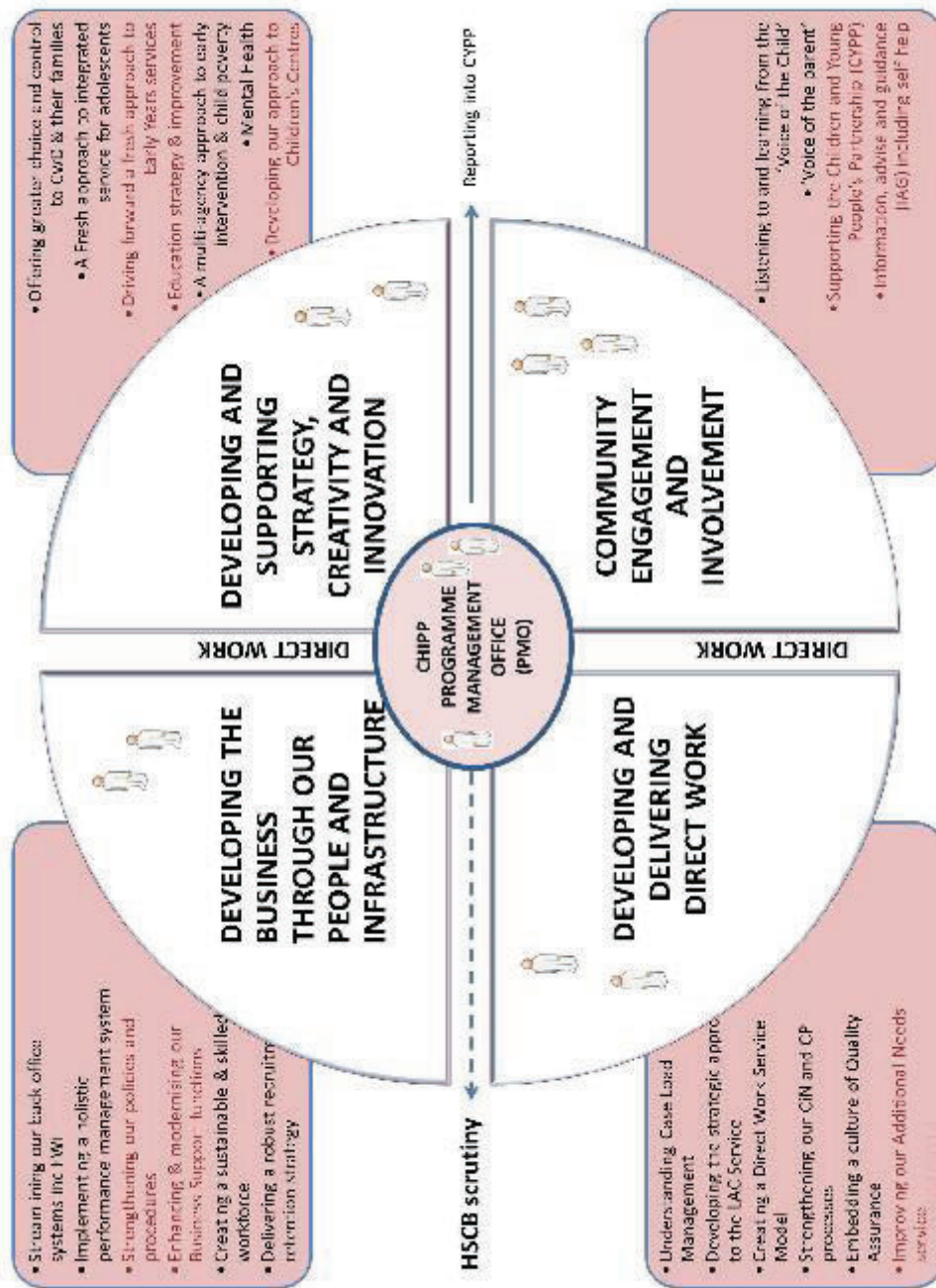
7.4. Recommendations to support the further development of the board in undertaking its full responsibilities, include;

- Identify and align priorities and stick with them throughout every element of the Board structure and functions
- Fund and implement a reinvigorated and fit for purpose business unit
- Make sure all members of the strategic board are fully engaged and understand their relationship between being on the board and improving frontline practice and impact on outcomes
- Make all agencies accountable for what they have committed to
- Use formal challenge and evidence its impact on the achievement of better outcomes
- Develop a project management approach to the business of the board

8. GETTING TO GOOD BY 2016

8.1. In 2012, the Council and its partners had no clear or confident vision about the quality and type of services it wished to secure to improve safeguarding services and improve outcomes for children.

- 8.2. One of the most significant changes is the absolute intent to be good by 2016/17. The road ahead will not all be plain sailing, and there are still issues which may knock things off course. However, the evidence is there that planning and preparation for change is improved, the knowledge and expectation about effective safeguarding practice is better and when things do not progress as planned, we know that for ourselves and can put it right.
- 8.3. Getting to good will rely on a unified, more strategic approach to service change, which tackles the underlying causes of harm, as well as a relentless focus on basic effective practice. Our approach for this is encapsulated in our transformation programme, CHIPP (Children of Herefordshire's Improvement and Partnership Programme) which is represented the following diagram:



- 8.4. A refreshed Health and Wellbeing Strategy and a new Children's Plan are under development, drawing from the JSNA and the bespoke Children's Needs Assessment commissioned by the Children's Partnership. These plans will secure the longer term system wide transformation changes necessary to ensure children grow up in caring families and communities. The Boards charged with making these changes are much clearer about their role and responsibility, and the governance requirements will continue to be the subject of our focus.
- 8.5. The risks to these plans relate predominantly to:
- Recruiting, retaining and developing the right staff – not just social workers, but key staff in other professions
 - Delay in making service change in line with national budget reductions, which create further financial challenges which require urgent and unplanned budget cuts
 - A lack of confidence or belief in the ability of Herefordshire to drive forward change.
- 8.6. For each of these risks we have plans in place:
- Our social care workforce plan is robust and we are well on course for further recruitment of new and experienced social workers during this year. We are also one of the few local authority areas nationally which is revising its children's workforce strategy to ensure we have robust workforce plans for the system as a whole.
 - We have introduced a strong programme and project management approach, initially through CHIPP, and now extending into the HSCB and Children's Partnership, which is bringing the resilience and momentum behind actual delivery of service change and delivery of resource change also.
 - Confidence is growing, and is backed up by the successful development of the Multi-Agency Safeguarding Hub, the quality assurance culture and the impact of the social work academy on newly qualified social workers. This will be further enhanced by the implementation of HIPSS and TISS. These developments have created an environment where people can be honest about what they want to see, can have difficult conversations and reach difficult decisions and can predict and mitigate problems before they occur.
9. Most importantly though, the work we are doing and continue to do, is done through a strengthening learning culture. We do not get things right all the time, but we learn by doing. We become stronger as a system as a result of that learning.

10. Finally, our role is to ensure that families and communities are able to bring up children well, and that those children have good outcomes. We know from direct feedback from children and families, that when we work with them, build on their strengths and create consistent honest relationships with them, that we create the right environment for those families and children to put right their issues, and move on. Ensuring that at every level of the system we know what things are like for those children and families is fundamental to our next step of getting to good.

OFSTED INSPECTION MAY 2014 - IMPROVEMENT PLAN

Key:

- Ofsted Para Number refers to the Area of Improvement identified in the Ofsted Inspection Outcome of 30 June 2014
- Children of Herefordshire's Improvement and Partnership Programme (CHIPP) is the transformation programme for children's wellbeing and associated partners which will be the vehicle through which all the Ofsted areas for improvement will be delivered. Each area for improvement therefore has been allocated within the programme to ensure a clear lead and consistent approach to its delivery.

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
1.	17. (57, 138)	Ensure that caseloads in children in need and looked after children's teams remain manageable	Assistant Director, Safeguarding and Family Support (PM)	Review of Medicare contract.	August 2014	Completed. All cases now transferred back to the fieldwork teams	G	Weekly caseload reports. Monthly reports to Monthly Children's performance challenge meeting with Leader, CX, Cabinet Member and Group Leaders.
2.			Head of Fieldwork (KP)	Profile caseloads to establish what a reasonable caseload would look like across the service	August 2014	Weekly reports now developed to enable trend analysis and ensure that action can be taken quickly if peaks emerge. Pilot of Caseload Management tool (weighting) undertaken during September and evidence that case loads continue to be at a manageable level - completed.	G	Safeguarding and Family Support Heads of Service
3.			Assistant Director: Safeguarding & Family Support	Forecasting of support services medium term staffing requirements based on assessment of performance data to inform direct work service development.	November 2014	Assessment of performance data in progress	G	Monitored through CHIPP. Health and Social Care Overview and Scrutiny Committee.

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
4.			Assistant Director: Safeguarding & Family Support (PM)	A review and evaluation of the whole service which will be undertaken to establish whether the infrastructure is right and to inform service staffing and management arrangements.	September 2014	The review of budgets has been completed by Heads of Service and Project Leads and are due to be presented to Directorate Leadership Team in October 2014 for discussion and decision - completed.	G	Directorate Leadership Team CHIPP Programme Board and Directorate Leadership Team
5.	17. (138)	Reduce caseloads within the Children with Disabilities service so that all social workers have sufficient time to provide children with the level of service they require.	Head of Children with Disabilities and Practice Development	Two additional social workers to be employed in the service	June 2014	Completed as at June 2014	G	
6.			Head of Children with Disabilities and Practice Development (DC)	An interim review of the CWD service to take place to ensure that there is sufficient capacity in light of the Children and Families Act 2014 and the Care Act 2014	October 2014	A further five social workers have been recruited to the CWD team as from December 2014. An experienced permanent team manager has now also been appointed who has substantial child protection experience.	G	Childcare Managers
7.			Head of Children with Disabilities and Practice Development (DC)	A comprehensive review of the CWD service to be undertaken over a 12 month period to consider to the potential for an integrated service model in the context of the Care Act 2014 and the Children's and Families Act; the innovation programme, personalization, adults wellbeing transformation programme and health organisations and the potential for a different integrated service model.	September 2015	This review is now a project within CHIPP and a project manager will be appointed.	G	Directorate Leadership Team Children and Young People Partnership Health & Wellbeing Board Cabinet

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
8.			Head of Children with Disabilities and Practice Development (DC)	To support the CWD review, external expertise and/or consultation will be needed. The lead manager for the CWD review will investigate best practice to incorporate within the review.	December 2015	The Improvement Outcomes for Young People in Herefordshire external consultant report will inform the CWD project. Visits to other local authorities to look at best practice will be ongoing and conducted by the Heads of Services and Team Manager for CWD.	G	Safeguarding and Family Support Heads of Service
9.	18. (96, 122, 130, 131, 132, 133)	Ensure that the electronic case and performance management system in children's social care provides accurate performance information.	Framework Transformation Manager (MG) in conjunction with Service Manager – ICT Strategy and Commissioning (DL)	Framework Transformation Manager is implementing the project plan, with full system revision to be completed by end 2014/15. Development of FWI and integrated data sharing across health, social care and public health. .Development and upgrades of FWI will take place	March 2015	The transformation of framework is progressing on schedule. Further upgrade to the care management system in December 2014 Work is currently in process with regard to creating an EDT contact episode which will evidence a range of actions taken by EDT including whether the child was detained in custody. This is due to be signed off in January with a go live date of 31 January 2015.	G	QA Framework and performance management reports will focus on impact of changes to practice Service Manager – ICT Strategy and Commissioning

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
						<p>Currently developing the finance model to pay children in residential placements via Frameworki. The finance model went live on 17 December 2014 for the residential placement component.</p> <p>A new reporting tool has been implemented which will enable reports to be produced more quickly and accurately.</p> <p>An authorisation for the placement of a child on an unplanned basis has now been implemented within frameworki.</p> <p>The LAC module reconfiguration continues and this will link to the personal education plans.</p>		
10.			Frameworki Transformation Manager in conjunction with Service Manager – ICT Strategy and Commissioning	As the project is reaching closure a benefits review will be undertaken to establish the skills and capabilities required to maintain and develop the system	December 2014	Not yet started and it is anticipated this will be completed by March 2015.	A	CHIPP Joint Senior Management Team Service Manager – ICT Strategy and Commissioning
11.			Head of Children with Disabilities and Practice	Children's social care QA and performance framework is being integrated within the HSCB's	December 2014	Completed	G	HSCB Steering Group HSCB QA sub group

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
12.	19. (134)	Ensure that audit and performance management is robustly and routinely undertaken by managers across children's services and is effectively used to develop services and to improve the quality of practice.	Development (DC)HSCB Business Manager Head of Children with Disabilities and Practice Development (DC)	<p>framework following the journey of the child through the partnership and its systems and services</p> <p>Children's social care QA Framework has been approved and is being implemented. Any irregularities in the performance reports will be routinely audited by the QA and Compliance Team and relevant corrective action will be taken.</p> <p>Quarterly reports will be presented to Heads of Service and DLT. An action plan with respect to deficit issues identified will be incorporated into the report.</p> <p>Learning from audit to inform training and development needs of service through integration of QA and Compliance Team with Social Work Academy</p>	September 2014 September 2014	<p>Owing to sickness and the appointment of some new team managers there has been some slippage in audit completion by team managers. Heads of Services will be discussing the situation with the relevant team managers. QA and Compliance managers are providing the support to the Heads of Service and Team Managers</p> <p>Overview Audit Issues Log has been introduced so that themes can be captured from monthly case audit activity. The log is updated on a monthly basis and reviewed.</p>	A	<p>Quarterly reports to Improvement Board</p> <p>HSCB QA Sub Group</p> <p>HSCB Steering Group</p> <p>Safeguarding & Family Support Heads of Service</p> <p>Quarterly Performance Cabinet Reports</p>
13.	20. (58, 128)	Ensure that consistent and high quality formal supervision of social care staff is provided and that all staff have regular supervision that provides reflection and challenge.	Head of Children with Disabilities and Practice Development	<p>All managers to be trained in reflective supervision and in line with the expectations of the supervision policy.</p>	September 2014 January 2015	<p>The requirement for all new managers to have a formal induction which includes supervision is in development</p> <p>Further audit which was due to be completed in December 2014 will now take place in March 2015 due to reprioritization of QA work to focus on re-</p>	A	QA Framework

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
14.			Head of Children with Disabilities and Practice Development (DC)	Supervision survey commissioned with Bristol University taking place in June 2014 and will be in September to Childcare Management and joint senior management team	September 2014	Completed. referral and CwD.	G	Childcare Managers Joint Senior Management Team
15.			Head of Children with Disabilities and Practice Development (DC)	Supervision Audit as part of annual cycle of audits is due to take place in July/August 2014, reporting in Sept 2014. As part of the outcome, there will be recommendations as to required actions and further audit activity with respect to supervision.	December 2014	Further audit which was due to be completed in in December 2014 will now take place in March 2015	A	HSCB QA Group HSCB Steering Group Safeguarding and Family Support Heads of Service Directorate Leadership Team
16.	21. (134)	Ensure that regular case file audits and re-audits within social work teams are undertaken and are used to identify areas of strength and development and to measure the effectiveness of actions taken to improve performance.	Head of Children with Disabilities and Practice Development (DC)	QA Framework has been approved and is being implemented. for Safeguarding and Family Support which will be refreshed on an annual basis. Learning from audit to inform training and development needs of service through integration of QA and Compliance Team with Social Work Academy is underway.	July 2014	Audit analysis continues to be shared at operational team meetings. However, there has been some slippage in completing audits by the team managers owing to sickness and management changes which is currently being addressed by the relevant Heads of Services. QACM's meet with the social work academy to share audit findings. For example, the social work academy is looking at improving support to social workers undertaking parenting assessment where parents have additional learning needs resulting	A	Quarterly reports to Improvement Board HSCB QA Sub Group HSCB Steering Group Safeguarding & Family Support Heads of Service

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
17.						from childhood abuse. The QA Framework will be refreshed in order to incorporate learning as it arises from audits.		
18.			Head of Safeguarding and Review (JR)	QA and Compliance service capacity increased.	September 2014	Completed	G	
19.	22. (48, 50, 52, 54)	Ensure that thresholds for access to children's services are understood and consistently applied by local authority staff and partner agencies, so that children and families get the right help at the right time.	Head of Safeguarding and Review (JR)	The creation of a new lead manager will oversee QA and the Social Work Academy integration, including its training and development function. This post holder will have lead responsibility for ensuring the review and revision of the quality assurance framework and will track progress against the QA action plan in accordance with the agreed governance arrangements.	September 2014	Completed	G	HSCB QA Group HSCB Steering Group Safeguarding and Family Support Heads of Service Directorate Leadership Team
20.			Head of Safeguarding and Review (JR)	Review and revision of Levels of Need / thresholds guidance.	September 2014	Completed	G	HSCB P&P Group HSCB Steering Group Children & Young People's Partnership Health and Wellbeing Board
			Head of Safeguarding and Review (JR)	Launch and implementation of new guidance.	October 2014 – March 2015	Multi-agency workshops are being held throughout October to March 2015 to launch the new guidance.	G	HSCB Strategic Board Children & Young People's Partnership

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
21.			Head of Children with Disabilities and Practice Development (DC)	Regular thematic audits will be undertaken to establish the embedding and effectiveness of the guidance.	January 2015	Regular thematic audits planned in line with the QA Framework.	G	HSCB MASH Governance Group HSCB QA Sub Group HSCB Steering Group
22.	23. (55, 56)	Ensure that the independent reviewing officers effectively structure and manage child protection conferences and develop specific and measurable child protection plans.	Head of Safeguarding and Review (JR)	Introduction of an ongoing parental feedback mechanism. The feedback will be analysed and used to inform service delivery. This will also enable an ongoing check back as to the success of the plans to improve CP Plans detailed below.	October 2014	Completed. Data collection from parental feedback will continue and the findings from that data will be analysed quarterly and the findings reported to childcare managers and HSCB. Any findings will then feed into any learning.	G	HSCB Steering Group
23.			Head of Safeguarding and Review (JR)	Introduction of time limited agency feedback mechanism. This will provide critical feedback on the quality and effectiveness of CP Conferences to secure a strong evidence base to establish the scale of any issues identified and pinpoint the developmental needs.	October 2014	Completed. Time limited agency feedback will be conducted for one month on an annual basis. The analysis of the findings will then be reported into childcare managers and the HSCB.	G	HSCB Steering Group
24.			Head of Safeguarding and Review (JR)	Improve the quality of the formulation of the Outline CP Plan by benchmarking what a good "Outline" CP Plan from other local authorities	January 2015	Completed. A sample review of the new outline CP plan will take place in January to ensure that they are being	G	HSCB LGA Diagnostic

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
						embedded. Work will continue to ensure that the quality SMART CP continue to improve. This will be monitored through dip sampling with ongoing development sessions with the IROs.		
25.			Framework Transformation Manager (MG)	Improve Framework to better support the formulation of a quality Outline CP Plan at Conference	December 2014	Completed	G	Performance framework
26.			Head of Safeguarding and Review (JR)	Direct observations of conference by service manager and key partner agencies (Named Nurse)	December 2014	Direct observation by service manager and named nurse has commenced and it is planned that 10 conference will be observed and a report provided for HSCB QA Sub Group. The remaining observations will take place during January and a report will be prepared for the HSCB QA Sub group for March 2015.	A	HSCB QA Sub Group
27.			Head of Safeguarding and Review (JR)	The HSCB diagnostic has been commissioned through the LGA to support the evaluation of the successful implementation of the above.	December 2014	The LGA have conducted their review and the Health and Social Care Overview and Scrutiny Committee will be receiving a report on 4	G	HSCB Steering Group QA Framework Health and Social Care Scrutiny Committee

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
28.	23. (67?, 80)	Ensure that there is effective leadership, practice, quality assurance and capacity within the Independent Reviewing Officer service.	Head of Safeguarding and Review (JR)	Review of Safeguarding and Review service (incorporating conference chairs and IROs) underway and action plan as above to be developed.	January 2015	.The review and scoping exercise has been completed and a project plan will be drawn up to support implementation as part of the CHIPP programme.	A	Safeguarding and Family Support Heads of Service HSCB Steering Group Directorate Leadership Team CHIPP Programme Board
29.			Head of Safeguarding and Review (JR)	The business plan for the service will be reviewed to ensure that all the issues are contained within the business plan.	November 2014	Completed	G	Safeguarding and Family Support Heads of Service
30.			Head of Safeguarding and Review (JR)	Immediate recruitment to current vacancy underway.	August 2014	Completed	G	
31.			Head of Safeguarding and Review (JR)	Secondment of SM into the service with specialist expertise in LAC from August.	August 2014	Completed	G	
32.			Head of Safeguarding and Review	Self-assessment against IRO Handbook and Care Planning Regulations to be undertaken to	April 2015	SEF Completed and development day taking place 29 th January 2015	G	Childcare Managers

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
			(JR)	establish where the gaps are and to prioritise the actions needed in order to ensure the service improvement.		to develop action plan and feed into CHIPP project plan		CHIPP Project Board
33.			Head of Safeguarding and Review (JR)	Improve business process so that minutes are distributed in accordance with agreed timescales	September 2014	Completed. Full implementation as from September 2014. Tracking mechanism now established to monitor compliance.	G	Joint Senior Managers
34.	24. (66)	Ensure that all children with a disability known to children's services are rigorously assessed to ensure that their needs are met and that the local authority is fulfilling its statutory functions.	Head of Children with Disabilities and Practice Development (DC)	An audit of all high cost placements is being undertaken to establish the quality of assessments and that needs have been correctly identified. The outcome of the audit will inform prioritisation as to practice issues and any relevant training and development.	August 2014 September 2015	The findings from the audit will form part of the CWD project within CHIPP.	G	Complex Needs Panel Joint Group Commissioning Directorate Leadership Team
35.			Head of Children with Disabilities and Practice Development (DC)	A comprehensive review of the CWD service to be undertaken in the context of the Care Act and the Children's and Families Act; Adults Wellbeing Transformation; Wellbeing; health organisations; the innovation programme; personalization and the potential for a different integrated service model. .	September 2015	This is now a project with the CHIPP programme and a project manager will be appointed	G	Directorate Leadership Children and Young People Partnership Health & Wellbeing Board Cabinet
36.	25. (62, 64, 65)	Ensure that information about children who go missing is effectively shared and robustly analysed between partner agencies.	Head of Safeguarding and Review (JR)	Develop HSCB mechanism for the ongoing strategic oversight of coordinated multi-agency responses for children who go missing. The CSAR sub group will ensure the analysis of missing	September 2014	Multi-agency operational group is established to share information, identify themes and trends to respond consistently – completed but further	G	HSCB Business Plan 2014/15 HSCB Strategic Board HSCB Sexual Exploitation and

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
37.				children data and identify specific themes, groups and trends which may identify risk areas within the county and regionally and develop an appropriate response. Develop a reporting mechanism within framework to ensure best identification and best practice in respect of missing children and enable performance reporting including return interview outcomes.	October 2014	work on embedding processes and the data set continues within this group Completed	G	Trafficking Strategic Group Performance framework
38.	26. (68)	Ensure that the partner agencies and the community are aware of the need to notify children's social care services of private fostering arrangements.	Head of LAC (JK)	Training of frontline staff around private fostering. Refresh of private fostering awareness raising strategy. This to include local press, schools (exchange students) and children's centres early years settings and the public at large.	December 2014	Practice standards drafted by Head of Children with Disabilities and Practice Development (DC) which need to be signed off. Meeting has taken place with Communication Unit to update current posters and publications. Training for frontline staff around private fostering is still outstanding. Practice standards giving greater clarity around the difference between a private fostering arrangement and kinship arrangement have not been drafted. Radio campaign started on the 1 st Dec 2014.	A	HSCB Steering Group Scrutiny
39.			Head of LAC (JK)	Refresh of current posters and information leaflets and consider wider strategy as to information	December 2014	completed	G	Childcare Managers

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
40.			Head of LAC (JK)	<p>sharing and awareness sharing.</p> <p>Analysis of data from comparator and good performing authorities as to what number of private fostering arrangements would be expected in Herefordshire and learn from approaches they take.</p>	April 2015	<p>Private fostering has been transferred to the kinship and SGO hub so that there is greater oversight. Comparative data will be one of their primary tasks.</p> <p>Alison Forshaw is due to meet with MASH to review the number of referrals being received as to establish capacity within the SGO and Kinship Hub to ensure 6 weekly visits can be completed.</p>	G	Corporate Parenting Panel
41.			Head of LAC (JK)	Clarification of what a private fostering arrangement is as part of the practice standards for kinship and private arrangements.	December 2014	Practice standards have been drafted. We are working with our partners in Worcester to try and bring consistency around kinship arrangement heard in court. This has also included joint training around kinship placements.	A	Internal Policy and Procedures Group
42.			Head of LAC (JK)	To provide sufficient leadership and capacity to achieve above actions, responsibility for private fostering to move into the Kinship and SGO hub	April 2015	<p>Monitoring of Private fostering has been added to the roles and responsibilities of SGO and Kinship Team Manager, who will report to Childcare Managers six monthly. . .</p> <p>Alison Forshaw is due to meet with MASH to review the number of referrals being received as to</p>	G	Childcare Managers monthly

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
43.			Head of LAC (JK)	Update private fostering workflow on framework as currently not fit for purpose to enable effective monitoring and performance reporting of such arrangements.	December 2014	This will be delivered within the framework performance project plan. Outstanding	A	Performance framework
44.	27. (70)	Ensure that the Emergency Duty Team effectively supports young people held in police custody out of hours and that appropriate alternative accommodation is available to prevent young people being held in police custody overnight.	Head of Fieldwork (KP)	Review of EDT operational protocols	October 2014	Lead Commissioner, HoS LAC and HoS Fieldwork have reviewed operational protocol. Updated draft to be discussed with EDT in August 2014. Once protocol has been agreed, then new functionality needs to be developed within framework. Meeting to be held in October 2014 to finalise the protocol.	A	Joint Senior Managers HSCB Steering Group
45.			Head of Children's Commissioning (PG)	Review with YOS and police colleagues as to expectations and practice	November 2014	YOS Commissioning, Performance and Quality Assurance Manager is currently investigating issues around overnight detention of young people work with the West Mercia EDTs.	A	HSCB Steering Group YOS Management Board
46.			Head of Children's Commissioning (PG)	Identify providers of appropriate accommodation	November 2014	Exploring Worcestershire's existing "Safe Base" contract as a potential model to follow, or as an option the EDT should already have access to.	A	Joint Senior Managers

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
47.			Head of LAC (JK) and Head of Fieldwork (KP)	Reporting arrangements to be discussed and agreed with police	October 2014	Cases where young people are held in custody overnight are now flagged by the EDT duty manager and the duty HOS is contacted where agreement/ challenge is brought around the terms for the young person being held and whether or not they should return to placement.	G	Childcare Managers
48.			Head of Looked Children	Develop clear strategy with police to trouble shoot such issues locally including definition of 'secure'.	October 2014	Remand Protocol has been shared at HOS level and will need to be progressed through governance. Peter Merry has compiled a very good report following the police inspection which will look at recognizing offenders under 18 as children and improving the current custody suit arrangements in Hereford. There is also greater clarity around the term 'secure' and how this is used. Ongoing Meeting held Jan 2015 – work required in partnership with the police	A	HSCB Steering Group
49.			Framework Transformation Manager	Develop performance report to monitor and evaluate progress in reducing frequency of use of custody inappropriately.	December 2014	Work is currently in process with regard to creating an EDT contact episode which will evidence a range of actions taken by EDT including whether the child was detained in custody. Performance	A	HSCB Steering Group YOS Management Board

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
50.	28. (73)	Fully utilise Family Group Conferences to inform care planning, particularly where care proceedings are being considered.	Head of Fieldwork (KP)	Review and resource FGC service to ensure robust response to requirements of Public Law Outline, and case law implications.	December 2014	<p>report will be produced following go live of the episode at the end of January 2015.</p> <p>EDT now have appropriate access to Frameworki in Herefordshire which is pending the build for the new episode.</p> <p>All cases that are presented to Legal Gateway (new name for the meeting) now have an action to convene a FGC.</p>	G	Childcare Managers
51.			Frameworki Transformation Manager (MG)	Performance reporting on FGC activity and outcomes developed.	December 2014	A specific module for FGC is currently under development. FGC service incorporated into review and development of direct work services in CHIPP	A	CHIPP Project Board
52.	29. (51, 147)	Ensure that diversity issues and the ethnic and cultural identity of children and their families are thoroughly assessed and addressed.	Head of Children with Disabilities and Practice Development (DC)	Council and partnership wide strategy to be developed which will include actions and monitoring and evaluation mechanisms.	January 2015	<p>A meeting has taken place with the Head of Additional Needs.</p> <p>An audit has been requested which looks at good and bad practice in connection with diversity</p> <p>Head of CWD and Practice Development will liaise with the children and young people's consultant to ensure that this matter is contained within the new children and young</p>	G	Cabinet Children and Young People's Partnership Health & Wellbeing Board

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
53.			Head of Children with Disabilities and Practice Development (DC)	Engage with Equalities Manager to ensure that children's diversity issues are fully embedded within the council's diversity strategy.	November 2014	Completed as this will be encompassed with the children and young people's plan.	G	Management Board
54.			Head of Children with Disabilities and Practice Development	Develop enhanced reporting and QA of assessments to evaluate quality of awareness of diversity issues to inform training needs.	January 2015	An audit will take place to identify good and bad practice. This will then inform training needs for safeguarding and family support.	G	QA Framework
55.			Head of Children with Disabilities and Practice Development	Identification of good practice examples where diversity issues have been thoroughly considered.	October 2014	The audit of cases will provide examples of good practice.	G	QA Framework
56.	30.	Implement and monitor a robust system for making timely decisions to ensure there are no delays in accommodating children when they need to be looked after.	Head of LAC (JK) and Head of Fieldwork (KP)	Review of processes for decision making including resource panel, legal planning and CNS.	November 2014	Legal gateway terms have been reviewed and implemented. CNS has been reviewed and signed off Nov 2014. TOR for resource panel/ placement panel has now been updated and circulated to staff and agreement to accommodate a child is now being raised at assistant director level and signed off when appropriate. The placement agreement process has been communicated out to all	G	Childcare Managers Directorate Leadership Team

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
57.			Head of LAC (JK)	As part of review, reporting arrangements to be developed to evidence timeliness of decisions and escalation process if delay is identified.	November 2014	Work on the looked after children workflow is not yet in FWI. The permanence process for LAC is being looked within CHIPP.	A	Childcare Managers
58.			Head of LAC (JK)	Continued joint working between Edge of Care and resource panel. Direct work service development to ensure dedicated edge of care response to ensure all actions have been taken to support the child remaining within the family.	December 2014	A representative from family support has now been identified and will present a report at resource panel in order to monitor young people on the edge of care.	G	Childcare Managers CHIPP Project Board
59.	31. (78)	Ensure that plans for permanency are made and clearly recorded at children's second looked after review in line with national guidance.	Head of LAC (JK)	Development and roll out of permanency policy and its implementation.	November 2014	Permanence policy is in draft but has to be agreed by a multi-agency group before being signed off. This will be looked at as part of CHIPP.	A	Policy approval: Cabinet/Cabinet Member
60.			Framework Transformation Manager	Performance measurement reports to be developed to evidence compliance	December 2014	Due to capacity issues and competing priorities, the LAC module will go live at the end of January 2015	A	Performance to be reported within the broader performance framework
61.			Head of Safeguarding and Review (JR)	Secondment of SM into the service with specialist expertise in LAC will lead on self-assessment against Care Planning regulations and LAC Review Process improvement agenda.	August 2014	Completed	G	
62.			Head of Safeguarding	Revised LACR Records drafted and due to be trialed – these give	September	Documents completed	G	QA Framework

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
63.	32. (81)	Develop specific assessment methods to inform decisions about whether siblings should be permanently placed together or apart. Record assessments and decisions in detail to reflect the significance of the decision being made.	Head of LAC (JK)	Refresh guidance documentation and share best practice examples across the service.	September 2014	Sibling assessments are being completed by the advanced practitioner service. Clear matching document already being used to match children to appropriate placements.	G	QA Framework
64.			Head of Children with Disabilities and Practice Development (DC)	Ensure QA processes incorporate analysis of impact of use of this guidance in improving outcomes	November 2014	Completed. An audit will be undertaken in October/November to establish the impact of use of the guidance. Due to capacity issues, this audit has not yet commenced.	A	Safeguarding and Family Support Heads of Service
65.	33. (79)	Ensure that regular analysis and reporting from the advocacy service provides an accurate account of emerging themes.	Head of Children's Commissioning (PG)	Review of the contract to ensure analysis of information gathered informs future commissioning, good practice and most effective means of service delivery Agree outcomes for the service that demonstrate the difference advocacy has made to the experience of the child	November 2014	Contract is formally monitored on a quarterly basis with the provider. Continuous discussions about operational aspects, and themes emerging to improve services. Outcome measures have now been developed which will evidence difference the service has made – reporting on these is still in its infancy and the fact it is only on a quarterly basis	A	Joint Senior Management Team Corporate Parenting Panel

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
66.			Head of Children's Commissioning (PG)	Specific developments of advocacy arrangements for younger children and CWD as part of contract refresh.	November 2014	The contract has been reviewed and provision for younger children and CWD is within the existing contract; this has been addressed with the provider and awareness now needs to happen with internal staff to make referrals	A	Joint Senior Management Team Corporate Parenting Panel
67.			Head of Children's Commissioning	Analysis of resource required to achieve expectations of voice of child strategy	November 2014	Tender for this service closed early January 2015 with aim to award contract in March 2015.	G	Joint Senior Management Team Corporate Parenting Panel
68.	34.	Ensure that the virtual school develops and implements a strategy to narrow the gap in attainment between looked after children and all other children in Herefordshire.	Virtual Head Teacher (SL)	Increase our understanding of the educational needs of the current LAC cohort to identify barriers to learning and to include the strengths and weaknesses in core curriculum subjects.	September 2014	Analysis session with Education Liaison for LAC service planned for 12 th September Session held and analysis sheet being completed by team members Analysis and development session planned for 27 November with Senior LAC Education Officer Interventions being developed to support development of emotional health of primary aged looked after children. Trial delivery during Spring Term 2015.	G	Joint Senior Management Team Corporate Parenting Panel
69.			Virtual Head Teacher (SL)	Develop a core data package for Education Liaison for Looked After Children Service to ensure that all information required to understand	December 2014	Will come out of session on 27 November. Data gathering sheet	G	Joint Senior Management Team Corporate Parenting Panel

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
70.				the barriers to learning of the individual child coming in to the care system is gathered and used to develop appropriate packages of support.		devised, being trialled with new cases.		
			Virtual Head Teacher (SL)	Identification of critical friend to act as challenge to ensure robust strategy.	September 2014	The School Improvement Advisor will act as a critical friend. Regular series of meetings established and started. Role of critical friend to be developed formally provide agenda for meetings. Role being developed in meeting with Critical Friend.	G	Joint Senior Management Team Corporate Parenting Panel
71.			Virtual Head Teacher (SL)	Conduct review of ELL Service working practices and workloads, including exploration of extending remit of Virtual School from 0 – 25.	October 2014	Review underway Second draft completed and with Head of Service	A	Joint Senior Management Team Corporate Parenting Panel
72.			Virtual Head Teacher (SL)	Develop ICT monitoring to allow closer tracking of progress and attendance.	September 2014	Looked After Call engaged to provide data for those placed out of county. Set up meeting arranged for week commencing 14 th September Looked After Call now collecting Out County Data held with eGov Digital to look electronic	G	Joint Senior Management Team Corporate Parenting Panel

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
73.			Virtual Head Teacher (SL)	Develop intervention strategies at county, school, group and individual level	November 2014	PEPs as a way of gathering data.. Looked After Call now collecting in county data. This now includes collection of attainment information. ePEP recommendation in review paper.	G	Joint Senior Management Team Corporate Parenting Panel
74.			Virtual Head Teacher (SL)	Use of EP time, commissioned with Pupil Premium money to help with understanding and planning for those LAC with particularly challenging needs	December 2014	No applicants and a further advert placed. Two assessments completed by current team members. Post remains vacant.	A	Joint Senior Management Team Corporate Parenting Panel
75.			Virtual Head Teacher (SL)	Develop intervention strategies at county, school, group and individual level	September 2014	Initial trawl of strategies recommended by team planned for session on 12 th September. Session held, follow up to be held with Designated Teachers during November network	G	Joint Senior Management Team Corporate Parenting Panel

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
76.			Virtual Head Teacher (SL)	Develop data on comparative effectiveness of interventions by demonstrating progress to support decision making in choice of appropriate interventions for LAC.	January 2015	meeting (planned for 12 November) Designated teachers conference planned for 27 March, will look at closing the gap. Developing using Education Endowment Fund website. Discussed at designated teacher meeting in December, will be part of the conference in March.	G	Joint Senior Management Team Corporate Parenting Panel
77.			Virtual Head Teacher (SL)	Demonstrate good progress for all and accelerated progress for the majority	September 2015	Year end data required	A	Joint Senior Management Team Corporate Parenting Panel
78.			Virtual Head Teacher (SL)	Assess immediate impact of Letterbox Club on initial cohort	December 2014	Project to be offered to Trainee Educational Psychologist when she starts. Trainee EP is developing evaluation methodology. Evaluation underway.	G	Joint Senior Management Team Corporate Parenting Panel
79.	35. (87, 88, 89)	Ensure that all looked after children and young people make consistently good or better progress at every stage of their education and close the attainment gap between looked after children and all children in Herefordshire.	Virtual Head Teacher (SL)	Analyse current LAC cohort to identify barriers to learning and to include the strengths and weaknesses in core curriculum subjects.		Analysis session with Education Liaison for LAC service planned for 12 th September. As above	G	Joint Senior Management Team Corporate Parenting Panel
80.			Virtual	Annual report to Corporate	November	Report prepared.	G	November Corporate Parenting

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
			Headteacher	Parenting Panel on LAC attainment	2014			Panel
81.			Virtual Head Teacher	Develop termly report for Looked after Children Placement Operation Group (LACPOG) to show progress again key strategic targets and identifying key cases causing concern	December 2014	Report prepared and updated on a monthly basis.	G	Joint Senior Management Team Corporate Parenting Panel
82.	36.	Ensure effective joint working with the police and youth offending services to routinely record and analyse information about looked after children engaged in offending behaviour.	Head of LAC (JK)	Audit of cohort of young people with history of offending and reoffending.	October 2014	This task has been started but is still ongoing. Outstanding task linked to work being completed within CYPP.	A	YOS Board Corporate Parenting Panel
83.			Framework Transformation Manager (PG)	Review of recording and analysis arrangements to ensure robust and regular reporting and response to issues is in place	December 2014	Performance and Framework Transformation Manager to liaise with the police and YOS to ensure there are robust reporting arrangements in place. This will be linked to the review of the LAC module within Framework which commenced in August. This will now be live as from January 2015.	A	Performance framework arrangements
84.			Head of LAC (JK)	Scoping of Prevent and deter work with LAC young people 11+	October 2014	This is being looked at as part of integrated youth approach. Joint meetings have taken place between YOS, 16+ and youth contracts.	A	YOS Board Corporate Parenting Panel

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
85.			Head of LAC (JK)	Development of Northumberland Risk Model.	October 2014	Policy and terms of reference now agreed. Need to agree panel composition and frequency of meetings. Consideration being given to the strategic CSE group hearing these cases given the need for senior officer oversight and agreement to actions. Draft plan has been compiled by Angela Robinson and shared with HSCB.	A	YOS Board Corporate Parenting Panel
86.			Head of LAC (JK)	Development of Integrated youth approach with YOS/ 16+ Youth Contract/Police/ Health.	October 2014	Outstanding task. Angela Robinson has drafted a proposal but this is subject to further discussion with partners and is linked to work being undertaken within CHIPP	A	CHIPP Project Board Children & Young People's Partnership Health & Wellbeing Board Cabinet
87.	37. (93)	Develop and implement working arrangements with local Child and Adolescent Mental Health Service providers to enable better access to treatment for looked after children.	Assistant Director: Education & Commissioning (CB)	Refresh of CAMHS Strategy which will then feed into wider recommissioning of mental health services. Strategy will contain actions for 12 months to improve emotional health and wellbeing	December 2014	Emotional health and wellbeing strategy agreed at Children and Young People's Partnership Oct 2014, implementation to be overseen through steering group. Highlighted at health and wellbeing board Nov 2014. Review meeting taking place w/c 19 Jan 2015	A	Cabinet Children and Young People's Partnership provide monitoring Health & Wellbeing Board

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
88.			Assistant Director: Education & Commissioning (CB)	Ensure CAMHS Strategy includes early years component	December 2014	NHS England Arden Herefordshire and Worcestershire has ensured that emotional wellbeing already forms part of the contractual requirements of the health visiting service specification. In this way work on the 0 – 2 years initiative forms part of tier 1 universal offering and hopes to impact on future generations development of mental health problems	G	Cabinet Children and Young People's Partnership provide monitoring Health & Wellbeing Board
89.			Head of LAC (JK)	Ensure relationship between CAMHS Strategy and services and the HIPPS and TISS developments are clearly defined.	December 2014	Meeting has taken place with CAMHS local office (Mark Hemming) and agreed that we need a relaunch of the service in the form of a partners event and clarity around criteria for referring cases. Performance data requested from CAMHS.	G	Children and Young People's Partnership provide monitoring Health & Wellbeing Board Joint Commissioning Group
90.	38. (94)	Ensure that the children in care council is effective, is representative of the range of looked after children and has membership of the council's corporate parenting group.	Head of LAC (JK)	Head of LAC (JK), chair of corporate parenting, chair of CiC council and care leavers champion to develop approach to inform corporate parenting strategy.	September 2014	Key objectives and KPI's set from January 2015 in line with children's pledge, health and education aspirations. Agreement to these KPI's is subject to agreement at corporate parenting panel this month (January 2015)	G	Corporate Parenting Panel

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
91.			Head of LAC (JK)	As from September 2014, young people will have membership of corporate parenting panels	September 2014	Completed	G	Corporate Parenting Panel
92.			Head of LAC (JK)	Head of LAC (JK) to be sent minute from CiC for information and action when required.	September 2014	Completed	G	
93.			Head of LAC (JK)	Adopt and publish the Pledge for Looked after Children, as a demonstration of the commitment of the Corporate Parent to our Looked After Children.	September 2014	Completed.	G	Corporate Parenting Panel
94.			Head of LAC (JK)	Develop CiC website to ensure it is representative of the voice of our LAC and is a useful resource for them	October 2014	HACK testing day taking place on 28 January 2015.	A	Corporate Parenting Panel
95.	39. (125, 136)	Ensure all local authority elected members understand and effectively undertake their role as a corporate parent.	Head of LAC (JK)	Members' Seminar in October/November re Corporate Parenting.	October 2014	Completed.	G	Corporate Parenting Panel Joint Senior Management Team
96.			Strategic Business Intelligence Manager	Programme of Members' Seminars in place up until February 2015. New rolling programme to be developed after 2015 local elections.	February 2015	Ongoing. Have also agreed to send bi monthly updates on how are LAC cohort are getting on and any patterns or trends which members could support to address.	G	Corporate Parenting Panel Joint Senior Management Team
97.			Head of LAC (JK)	Survey of Members' understanding of their corporate parenting role to be undertaken and repeated following programme of seminars to evaluate impact.	March 2015	Follow up questionnaire to be sent prior to March 2015 following Corporate parenting seminar. Outstanding	G	Corporate Parenting Panel Joint Senior Management Team

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
98.			Cabinet Member: Children's Services (JM)	Work being undertaken by Cabinet Member Children's Wellbeing to make proposals to the Group Leaders re mandatory training for all Councillors at the start of each administration year to attend safeguarding and corporate parenting seminars. The proposal will recommend that failure to attend will result in members allowances not being paid.	August 2014 with effective from May 2015	Note to Group Leaders had been drafted and is to be agreed.	G	Cabinet
99.			Cabinet Support Member Children's Services (JM)	Cabinet Support Member is liaising with various local business leaders about apprenticeships and work experience for looked after children.	November 2014	Being addressed within context of wider apprenticeship and barriers to work project within CHIPP	G	Cabinet Corporate Parenting Panel CHIPP Project Board
100.	40. (103?)	Refresh and re-launch the recruitment strategy to increase the number of adopters for children with complex needs and for larger sibling groups.	Head of LAC (JK)	Recruitment to a marketing and recruitment post within the adoption and fostering service with particular investment in social media.	July 2014	Marketing and recruitment post in adoption now appointed. Fostering marketing and recruitment post advertised.	G	Childcare Managers
101.			Head of LAC (JK)	The recruitment strategies across the West Mercia have been developed and are due to be signed off in September.	October 2014	Completed.	G	Childcare Managers
102.	41. (110, 111)	Ensure that all pathway plans are up to date, are of good quality, are based on a robust analysis of need, with clear and agreed goals and are regularly reviewed.	Head of LAC (JK)	Development of Pathway plan with young people and partners	July 2014.	Pathway plan is now at point of sign off through Corius. Training delivered Nov 2014	G	QA Framework
103.			Head of Children with Disabilities and Practice Development	Audit activity with respect to the impact and quality of pathway plans will be undertaken as part of the QA framework and any learning	March 2015	Completed	G	QA Framework

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
104.			(DC)	will be incorporated.				
			Mentoring and Participation Officer (DB)	In conjunction with the above process a survey of young people will take place to understand their experience of the pathway planning process.	March 2015	On track	G	QA Framework
105.	42. (112)	Ensure that all care leavers receive a copy of their health records.	Head of LAC (JK)	Development of health passport for care leavers.	January 2015	Best practice example identified and being adapted for Herefordshire. Children and young people moving from foster care are continuing to use the full health passport, care leavers will be more condensed but will include advice and medication details for life limiting illnesses.	G	Childcare Care Managers QA Framework
106.	43. (82, 117, 137)	Ensure that all looked after children and care leavers understand their rights, responsibilities and entitlements and receive the guidance, support and resources to realise them.	Head of LAC (JK)	Refresh of Corporate parenting strategy to include the rights and children and young people, incorporating monitoring and evaluation arrangements to ensure all children are enabled to understand their rights.	January 2015	Corporate parenting strategy to be updated for January 2015. A monitoring mechanism will be incorporated with the review of the LAC review of framework module and will also link to the Voice of the Child Group. Rights of the child will also feature on the young people website.	G	Corporate Parenting Panel
107.	44. (135)	Ensure that learning from complaints and representations from children and young people, parents and carers and service users is systematically collated and analysed and is used to improve service delivery and	Head of Children with Disabilities and Practice Development (DC)	Children's social care complaints procedure and guidance has been revised and incorporated within the QA and Compliance Service to strengthen accountability, knowledge, understanding, learning and dissemination of learning	March 2015	Completed. Following a recent analysis of complaints, further guidance needs to be produced in relation to documentation that independent investigating	G	Quarterly reports to Heads of Service Half yearly report to Joint SMT and members Statutory Annual Complaints Report will be produced for year end March 2015 and presented to Audit and

No.	Ofsted Para No	Ofsted Area for Improvement	Lead	Action	By When	Progress	R/A/G	Monitoring and Evaluation
108.		development.				officers have access to ensure that Data Protection legislation is not breached and what they have received. Completed		Governance Committee, HSCB Steering Group
			Head of Children with Disabilities and Practice Development (DC)	New integrated QA and SW academy service will enable learning from complaints to be built into training and development plan.	March 2015	Completed	G	Childcare Managers

HSCB OFSTED INSPECTION MAY 2014 – IMPROVEMENT PLAN

Key:

- HSCB is the Herefordshire Safeguarding Children's Board
- Ofsted Para Number refers to the Area of Improvement identified in the Ofsted Inspection Outcome of 30 June 2014

	Ofsted Para No	Business Plan Reference	Ofsted Area for Improvement	Lead	Action	By When	Progress	RAG Rating	Monitoring and Evaluation
1.	149	4.1	Ensure that governance arrangements between the LSCB and the Improvement Board are clarified.	Independent Chair of HSCB	Agree protocol which sets out the governance arrangements between HSCB and Improvement Board.	October 2014	Protocol signed at the October Strategic Board and Improvement Board. Completed	G	Chairs of HSCB Strategic Board and Improvement Board
2.	150	2.2	Ensure that LSCB policies and procedures are up to date and incorporate issues specific to Herefordshire.	Chair of Policy and Procedures	West Mercia independent chairs to agree sub regional approach to policy and procedure development.	January 2015	Review of existing procedures has been undertaken and a programme for revision developed. Meeting with West Mercia peers was postponed and due to be re-arranged for the new year.	A	HSCB Steering Group
3.		2.2		Chair of Policy and Procedures	In consultation with Tri-x, three year timetable to be agreed on a regional basis for a systematic review and update of bespoke policy and procedures in consultation. This should be informed by current, and known about future, national and local priorities.	January 2015	Meeting with West Mercia peers was postponed and due to be re-arranged for the new year.	A	HSCB Steering Group
4.		2.2		Chair of Policy and Procedures	Priority to be given to child sexual exploitation and Children Missing procedures on the basis of Ofsted recommendations.	October 2014	Operational processes effective in MASH from 5 November 2014 and performance reporting into the CSAR operational and intelligence group has now commenced.	G	HSCB Steering Group
5.	151	1.4	Ensure that the LSCB receives accurate and relevant performance information from its partners to enable it to assure itself on the quality of	Chair of the QA Sub Group	Develop a multi-agency child's journey scorecard. This will clearly define what data will be received, the format and the frequency.	January 2015	The contents of a draft scorecard has been agreed and reporting against it is still in development. This will need to be reviewed against any recommendations from the LGA peer diagnostic on the	A	HSCB Steering Group



MEETING:	HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE
MEETING DATE:	4 FEBRUARY 2015
TITLE OF REPORT:	Mandatory training for elected members
REPORT BY:	Cabinet Member (Young People and Children's Wellbeing)

Classification

Open

Key Decision

This is not an executive decision.

Wards Affected

Countywide

Purpose

To consider a proposal for mandatory corporate parenting and safeguarding training for all Councillors.

Recommendation

THAT:

- (a) the Committee endorse the principle of mandatory training for elected members in respect of safeguarding and corporate parenting, and comment on the proposals set out at paragraph 7.

Alternative options

- 1 The current system is retained ie, training is available but is not mandatory and/or no sanction is applied if training is not completed. This is not recommended because experience has shown that not all elected members complete training. The risks associated with a lack of awareness of key issues, roles and responsibilities were highlighted during the Ofsted inspection of children's safeguarding; introducing a mandatory requirement for training mitigates that risk.

Reasons for recommendations

- 2 To gain the support of the Committee on the principle of making training mandatory

Further information on the subject of this report is available from
Annie Brookes, Governance Manager on Tel (01432) 260605

and seek the Committee's views on the proposals for doing so.

Key considerations

- 3 In 2012 Ofsted graded Herefordshire's children's safeguarding services "inadequate". Amongst the areas needing improvement, the lack of councillor interest and responsibility in these safeguarding were key indicators of inadequate management, leadership and governance of these services All elected members are expected to take an appropriate interest in children's and adult's safeguarding issues and understand that safeguarding forms a fundamental part of councillor's duties, in the same way that the economy, roads and planning are.
- 4 In 2014, Ofsted reinspected the Council and re-graded the service as "requires improvement". This grading demonstrated the improvements made. One of the elements of that improvement was the significant engagement by all members in safeguarding and corporate parenting, since 2012. Ofsted also reinforce the point that to get to "good", the authority has to further sharpen and embed many aspects of the improvement it had started to deliver within its services. Amongst these was further strengthening and embedding of the involvement of all councillors, as well as the involvement of specific councillor post holders, in key aspects of children's services. Although regular member seminars are held throughout the year, there is currently no requirement for members to complete training and development or any sanction applied if they do not do so.
- 5 Following the 2014 Ofsted report, recommendations made by the Safeguarding Task Group for the HOSC, and questions asked by members at Council, the leader of the council asked the cabinet member young people and children's wellbeing to draft a proposal for improving this situation on a permanent basis to ensure our looked after children obtain the full support and involvement as required from every elected member as a corporate parent and to ensure that all members have a full awareness of safeguarding issues, roles and responsibilities.
- 6 At present all members have access to induction training when first elected and subsequent regular invitations to children's wellbeing seminars held every two to three months. All such training and development opportunities are optional (although recommended) and no sanction is applied to members if they do not take up this training and development offer.
- 7 As part of a wider review of member induction, training and development, it is proposed to make the following changes with effect from May 2015:
 - Councillors must complete mandatory training in a number of key areas to include safeguarding (children and adults) and corporate parenting. Training will where possible be accessible online, and where it is necessary or desirable to have additional face to face sessions these will be run on more than one occasion to enable attendance.
 - Deadlines will be set over a reasonable timescale during the induction period within which members will be required to complete all mandatory training elements. Any member who fails to complete a mandatory training element by its due deadline could affect their entitlement to allowances. (This is a concept used in other authorities with some success.)
 - The mandatory training programme will be available online throughout the year

Further information on the subject of this report is available from
Annie Brookes, Governance Manager on Tel (01432) 260605

to enable any member to review the training at any time and for members joining the council mid term to complete the mandatory training. Where annual refresher sessions are mandatory (as with children's safeguarding and corporate parenting) the deadlines for completion will be made clear to all members and the same sanction for non-completion may be applied.

- The governance team will monitor completion rates of training and report any instances of con-compliance to the relevant group leader and the assistant director governance. The decision to apply a sanction if mandatory training has not been completed within agreed deadlines will rest with the assistant director governance having consulted with the relevant group leader.
- Individual member's training completion rates will also be available in the 'my councillor' section of the website (alongside register of interests etc).

Community impact

- 8 By enabling members to have the necessary information and skills to carry out their roles and responsibilities effectively the council will be better able to meet its corporate plan priorities, and its statutory duties.

Equality duty

- 9 Training for members will include gaining an understanding of how the council can ensure it is meeting its public sector equality duty. Training and development opportunities will be made available to members in such a way as to be fully accessible.

Financial implications

- 10 Budgetary provision is made for member induction and training; there are no additional financial implications arising from introducing a mandatory requirement in respect of that training.

Legal implications

- 11 The Local Authorities (Members' Allowances) (England) Regulations 2003 require the council to provide for the payment of a basic allowance which must be the same for each member and also the opportunity for members to elect, giving notice in writing, to forgo their entitlement or any part of their entitlement to allowances.
- 12 The Independent Remuneration Panel would have to make a recommendation to Council to amend the scheme. Options for ensuring that mandatory training is attended could involve setting the basic allowance at a certain rate and increasing it once mandatory courses are completed and or members electing to forgo a percentage of the allowance
- 13 The allowance however could not be suspended or withheld as this is only permitted under the Regulations where the member is suspended or partially suspended from his responsibilities or duties as a member of the council.

Risk management

14 As identified in the alternative options above.

Consultees

15 Group leaders have been consulted and are supportive of the principle of introducing mandatory training elements and applying a sanction if those mandatory training elements are not completed in a timely manner.

Appendices

None.

Background papers

- None identified.



MEETING:	HEALTH AND SOCIAL CARE OVERVIEW & SCRUTINY COMMITTEE
MEETING DATE:	4 FEBRUARY 2015
TITLE OF REPORT:	CARE ACT 2014 UPDATE
REPORT BY:	Director of Adults and Wellbeing

Classification

Open

Key Decision

This is not a key decision.

Wards Affected

County-wide

Purpose

To update the Committee on the timeline for the Care Act implementation and progress on local implementation activities.

Recommendation

THAT: the Care Act update at Appendix A is noted.

Alternative Options

- 1 There are no alternative options. The Care Act places new legal requirements on the Council from 1 April 2015. The purpose of the briefing is to provide an update on implementation activity and timescales.

Reasons for Recommendations

- 2 The Care Act represents the most significant change to adult social care in over 60 years. It is therefore essential that the Committee is informed of progress with the Act and its impacts locally.

Key Considerations

- 3 There are two parts to Care Act implementation – those aspects which take effect from April 2015 (most of the Care Act) and those which take effect from April 2016 (which are mostly the funding reform aspects).

Further information on the subject of this report is available from
Helen Coombes, Director for Adults and Wellbeing on Tel (01432) 260339

- 4 Locally, implementation activities for the 2015 aspects of the Act are well under-way, although progress in certain areas has been limited as local authorities wait for clarifications from the Department of Health on areas where the regulations and guidance are unclear. Herefordshire, like most local authorities, has adopted a risk analysis approach to prioritise certain aspects of the Act for implementation.
- 5 Regular engagement with regional and national networks indicates that implementation progress in Herefordshire is very much on a par with other local authorities.
- 6 The draft regulations and guidance for the 2016 aspects of the Care Act (e.g. the care cap and care account) are due to be released by the Department of Health for national consultation at the beginning of February. Once we have sight of these draft documents we will be in a position to start planning for implementation of these other aspects of the Care Act.
- 7 A significant amount of communications activity has taken place during 2014 to raise awareness about the Care Act both within the council and the wider care and support sector in Herefordshire. Local communications and engagement will continue throughout 2015.
- 8 A national communications campaign will run in Feb-March 2015 and will focus on the introduction of a national eligibility threshold, carer's rights to assessments and the introduction of deferred payment agreements. This campaign will use various media, including online, local radio adverts and leaflet door-drops to target postcode areas. The local communications plan is in the process of being updated to ensure all stakeholders are briefed and informed on what communications activities are happening when.

Community Impact

- 9 The Care Act is intended to have a range of positive implications for Herefordshire residents, including service users and their families and carers.

Equality and Human Rights

- 10 By simplifying the care and support system, the Care Act intends to ensure that all those in need of care and support are treated equally and with respect.

Financial Implications

- 11 The Care Act will have significant financial implications for Herefordshire Council both in terms of implementation costs and on-going costs going forward.

Legal Implications

- 12 When the Care Act comes into effect in April 2015 (April 2016 for certain funding reforms), a number of new statutory duties and requirements will be placed on the local authority.

Risk Management

- 13 As the Care Act introduces a number of new statutory duties and requirements for local authorities, there will be significant risks for the council in failing to meet these new statutory requirements.

Consultees

14 Not applicable – briefing note only.

Appendices

Appendix 1 –Care Act 2014 Update by Work Area

Appendix 2 – Care Act 2014 National Communications Campaign

Background Papers

None identified.

Work area: COMMISSIONING	Legal compliance for 01.04.15?	Y	Confidence in delivery of local actions for 01.04.15	A
Care Act areas covered				
Preventative services, info & advice service, advocacy service, carers support, sight register & market shaping.				
Progress Update				
<ul style="list-style-type: none"> Carers contracts (HCS & short breaks) in negotiations. Advocacy contract extended for 1 year whilst we gauge level & type of demand IAS hub out to tender & in discussion with provider regarding online provision Sight-register requirements included in current contract Range of preventative services in place & on-going work 				
Milestones				Date
Online info & advice scoping				26.01.2015
Information, advice & signposting (IAS) hub tender evaluations start				09.02.2015
IAS hub contract in place by				31.03.2015
Confirmation of regional bid for advocacy proposal by				31.01.2015
Development of carers service specification				February 2015
New carers service contract in place by				31.03.2015
Risks		Mitigation		
Insufficient advocacy provision during 15/16 to meet Care Act driven increases in demand		Regional bid to fund research to inform commissioning of service. Monitor closely.		
How to meet the eligible needs of carers equitably, particularly when demand is likely to increase		Decision needed – do we wish to explore option of a Carers RAS?		

Work area: FINANCE & CHARGING	Legal compliance for 01.04.15?	Y	Confidence in delivery of local actions for 01.04.15	A
Care Act areas covered				
Direct Payments, charging, financial assessment, choice of accommodation, deferred payment agreements (DPA), debt recovery & transfer of assets				
Progress Update				
No significant changes to process– more focus on calculations, staff awareness and ensuring policies are legally compliant. WFAT team trained on DPA changes & looking to purchase e-learning				
Milestones				Date
DPA policy and process to DLT				26.01.2015
DPA policy elected-member sign off by				31.01.2015
WFAT officer (DPA) recruitment				February 2015
Revised charging policy to DLT				February 2015*
Debt recovery policy review (pending DH toolkit)				Tbc
Risks		Mitigation		
*Charging policy pending DH clarifications – significant changes may result in –ve impact on service users = need for consultation (time impact)		Proceed with drafting policy & pursue DH via NAFAO. Seek legal advice on how to proceed if no response from DH.		
Lack of clarity between work of WFAT lead and personalisation lead regarding direct payments		SG & Transformation lead to advise.		

Work area: SAFEGUARDING	Legal compliance for 01.04.15?	Y	Confidence in delivery of local actions for 01.04.15	G
<u>Care Act areas covered</u> Establishment of SAB and its duties (including safeguarding adult reviews. Duty of the LA to enquire.				
Progress Update				
<ul style="list-style-type: none"> SAB in place – structure, governance & work programme in development. Regional work to revise W. Midlands safeguarding policy MSP process changes, staff training & support and communications in place 				
Milestones			Date	
MSP go live			26.01.2015	
SAB annual report & strategic plan			31.03.2015	
W. Mids regional safeguarding policy finalised			tbc	
Peer review			March 2015	
Risks		Mitigation		
Insufficient capacity to deliver new approach		ART team review		
Staff not sufficiently trained in new approach		On-going training – use of e-learning. Embedding culture change.		

Work area: ASSESSMENTS	Legal compliance for 01.04.15?	?	Confidence in delivery of local actions for 01.04.15	R/A
<u>Care Act areas covered</u> Wellbeing, needs assessments, carers assessments, eligibility criteria, care and support planning, review				
Progress Update				
Close interdependencies with other changing areas of work has hindered progress (e.g. I&A, carers). Pragmatic approach taken to identify essential deliverables for 31.03.2015 = focus on developing assessment forms useable for supported self-assessment, ensuring decision-making is evidenced within FWi, written notification to SUs is built into the assessment process, policies are legally compliant & staff receive appropriate training (currently in discussions with selected training provider).				
Milestones			Date	
FACE release of amended V7 forms by			31.01.2015	
Upgrade to V7 forms by			28.02.2015	
Operational staff training (face-to-face)			End Feb – Mid-March 15	
Legal review of changes required to Community Care Policy by			13.02.2015	
Community Care Policy updated			Tbc (<i>pending above</i>)	
Risks		Mitigation		
Not yet able to see V7 forms from FACE,		Maintain contact with FACE to seek assurance for CA compliance		
Systems changes for FWi (e.g. evidencing decision-making) not fully scoped – risk of not being able to implement in time		Business Analyst in process of scoping requirements with FWi lead.		

Work area: TRANSITIONS	Legal compliance for 01.04.15?	Y	Confidence in delivery of local actions for 01.04.15	A
Care Act areas covered				
Provision of assessments for young adults and young carers approaching the age of 18 and for parent-carers with children approach the age of 18. Duty to meet needs of assessed parent-carers and young carers.				
Progress Update				
<ul style="list-style-type: none"> Project to deliver transitions pathway in development - improve coordination between AWB & CWB, develop offer for young adults & ensure sufficient capacity/skills for timely assessments, Transitions episode now running in FWi to improve data sharing between CWB & AWB 				
Milestones				Date
JDs for senior practitioner & AEO posts to Programme Manager by				30.01.2015
Recruitment to new posts				February 2015
New transitions team in place by				31.03.2015
Revised charging policy to DLT				February 2015*
Risks		Mitigation		
Failure / delay to recruiting will result in risk of LA not being able to meet new duties in providing timely transitions assessments		Prioritise progressing recruitment		

Work area: POLICIES	Legal compliance for 01.04.15?	N	Confidence in delivery of local actions for 01.04.15	A/R
Care Act areas covered				
Ordinary residence, moving between areas, provider failure. (Also cross-links with other work areas – direct payments, charging, DPA, third-party contribution, safeguarding, community care & other operational policies)				
Progress Update				
Purchase of practice guidance from Policy Partners (<i>Tri.x</i>) paused as Care Act Board agreed a policy framework must be in place to underpin any guidance. Policy stock-check complete –significant amount of work already underway with few policy gaps. Coventry LA has made regional fund bid to purchase Practice Guidance from Policy Partners, and make this available to all W.Mids LAs – is advisable we delay purchasing practice guidance in-case Coventry purchase is sufficient.				
Milestones				Date
Ordinary resident policy drafted by legal, by				13.02.2015
Development of protocols with neighbouring LAs				Pending OR policy
Care Home Insolvency Plan review by legal (<i>recent policy – low priority</i>)				Tbc
Practice guidance developed/purchased				See “progress update”
Debt recovery policy review (pending DH toolkit)				Tbc
Risks		Mitigation		
Legal capacity to review / write required policies		Prioritise & maintain contact with legal.		
Unlikely to have developed protocols with neighbouring LAs by 01.04.2015		Liaise with legal on the level of risk		
No standardised approach in AWB to policy development, storage, access & version control.		Care Act PM to maintain track of policy work & discuss with IG lead on best sustainable solution		

Related Work Areas

Work area: COMMUNICATIONS	Legal compliance for 01.04.15?	N/A	Confidence in delivery of local actions for 01.04.15	G
Care Act areas covered – N/A				
Progress Update				
<ul style="list-style-type: none"> Staff briefings on national communications campaign underway (ART, WFAT). On-going engagement programme with all key stakeholders regarding wider Care Act communications 				
Milestones				Date
Face-to-face briefing sessions on national comms campaign complete by				30.01.2015
Updated web-content, including FAQ in place by				30.01.2015
Briefing note on campaign circulated to all operational staff & providers, by				30.01.2015
AWB Forum				11. 02.2015
Briefings for Health via at GP Parliament and Practice Managers				Awaiting dates
On-going engagement (e.g. HCS, Herefordshire Disability United)				Jan-April 2015
Risks		Mitigation		
National communications campaign raises expectations and increases demand		Plan to manage the national messages are in place in under-way.		

Work area: WORKFORCE	Legal compliance for 01.04.15?	N/A	Confidence in delivery of local actions for 01.04.15	A
Care Act areas covered – N/A				
Progress Update				
<ul style="list-style-type: none"> Assessment training tender awarded - Most other training will be delivered internally by relevant leads (train the trainer training booked in). Regional discussions re: purchase of me-learning in progress. Care Act awareness training completed (or scheduled) for almost all AWB staff (incl. housing, public health). See specific work areas for specific training updates Additional capacity in place to support coordination of L&D requirements for Care Act 				
Milestones				Date
Care Act Awareness training sessions for MH teams				Pending dates
Care Act awareness training session for LD team				Awaiting reply
Train the trainer training for all work areas				12-13 Feb 2015
Legal literacy training for ASC legal (regional event)				13 Feb (provisional)
Purchase e-learning (<i>may be done at a regional level using regional fund</i>)				Tbc
<i>Refer to specific work areas for more details</i>				
Risks		Mitigation		
Staff are insufficiently trained / supported in the new requirements		Training Plan prioritises what is required for 01.04.2015 – focus on assessments & operational staff. Will need on-going programme throughout 2015 for further training & to embed culture change.		

The Care Act: National care and support campaign Briefing Note

Background

Public Health England (PHE), on behalf of the Department of Health (DoH), will be running a public awareness campaign on “care and support”, instigated by the imminent arrival of the Care Act in April 2015. There will be 2 broad phases to this national campaign:

Table 1: national communication campaign phases

	Focus	Timescale	Key messages on:
Phase 1	April 2015 Care Act reforms	January 2015 - March 2015	New eligibility criteria, deferred payment agreements, support for carers
Phase 2	April 2016 Care Act reforms	Later in 2015	Care cap and means test. Behaviour change campaign around care and support

→ **This briefing solely focusses on Phase 1 and outlines how the national campaign will run, the key messages and how communications locally will be shaped around this.**

National Awareness Campaign Phase 1

National key messages

The three priorities for the 2015 Care Act reforms that the national campaign will focus on are:

- New national eligibility criteria
- New support for carers
- Deferred payment agreements (*which we already offer in Herefordshire*)

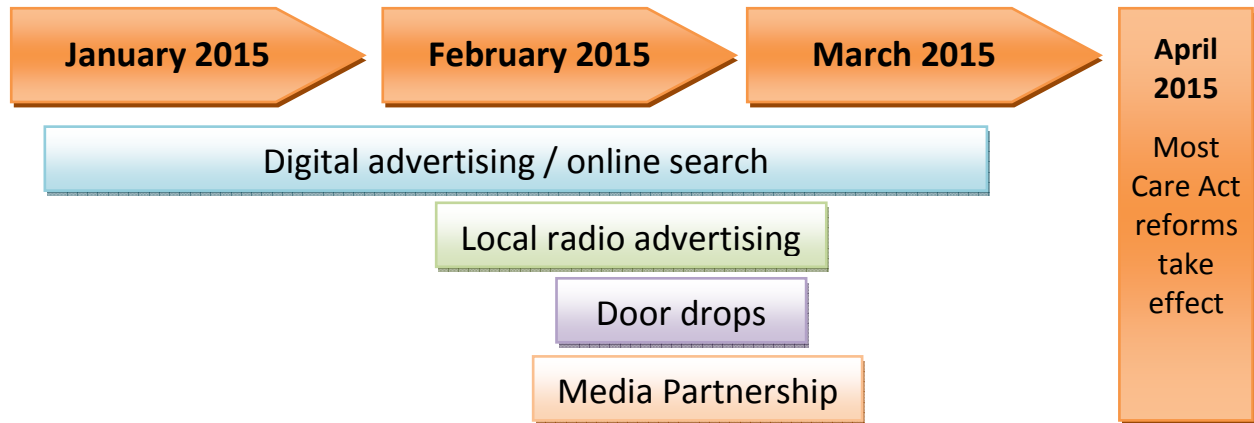
The national key messages for each priority are outlined in Appendix A.

National “care and support” branding

For the purposes of the national communications campaign, the changes introduced by the Care Act will be badged under the heading of “care and support”. All national communications will have a care and support logo plus DoH branding. Any communications developed by Herefordshire Council will utilise the care and support logo and DoH branding alongside local authority branding. Examples of the branding of national materials can be seen in Appendix A.

National channels of communication & timescales

Diagram 1: national timescales and channels of communication for phase 1



A. Digital advertising / online search (9 January – 16 March)

A national webpage for care and support has been created (www.gov.uk/careandsupport); to which people will be directed to if they enter certain terms into online search engines and also from digital advertising. From this page people will be able to find out more about the changes and can also use a postcode locator that will direct them to their relevant council website. For Herefordshire this will be www.herefordshire.gov.uk/careact.

In Herefordshire we have had a Care Act webpage up and running since mid-2014. We are in the process of updating the content of this page using web-content provided by PHE. In addition to the 3 key national messages (outlined in Appendix A), the Herefordshire Care Act page will be localised to include additional information on:

- High level information about the care cap and care account (as we have already received queries from the public on these)
- The introduction of making safeguarding personal
- Improvements to information, advice and advocacy
- *Further sections can be added as required*

The Herefordshire Care Act webpage will be updated by the end of January, with ongoing updates anticipated throughout 2015.

B. Local radio advertising (2 February –15 March)

There will be nationally developed adverts, aired via local radio stations, throughout the country during February and the beginning of March. These adverts will raise broad level awareness of the reforms – there is likely to be one advert focused on care users and one advert focused on carers.

For Herefordshire, these adverts will be on Free Radio. The radio adverts will direct people to the national webpage (www.gov.uk/careandsupport), from where they can they be signposted onto local webpages (see digital advertising section above).

C. Door Drops (*dates not confirmed, but likely to be end of February*)

Leaflets about care and support will be sent to 2.5 million households nationally from the DoH. These households have been selected by PHE using Acorn group analysis to select postcodes that have a high index of the target audience of service users, self-funders, carers and families. An example leaflet is attached at Appendix A.

In Herefordshire 10,000 households will receive the door drop leaflets.

Table 2: door drop leaflet numbers in Herefordshire by postcode

Postcode	Area	No. door drop leaflets
HR5 3	Kington	2,264
HR2 0	Golden Valley	1,937
HR3 6	S of Kington (Eardisley and surrounds)	1,518
HR6 0	Leominster	2,074
HR6 9	Leominster	2,292

D. Media Partnership (*16 February – 15 March*)

To help communicate the care and support reforms to a number of consumer groups including carers and self-funders, PHE has established a media partnership with publishers Trinity Mirror and Hearst – this covers digital and print titles such as The Mirror, Sunday Mirror, Notebook, Love Sunday Real People and Best Magazine. Communications will include adverts and editorial commentary.

E GP waiting room leaflets (*leaflets distributed to selected surgeries by 15 March*)

***NB. This is not included on Diagram 1 as only 6 surgeries in Herefordshire are involved.*

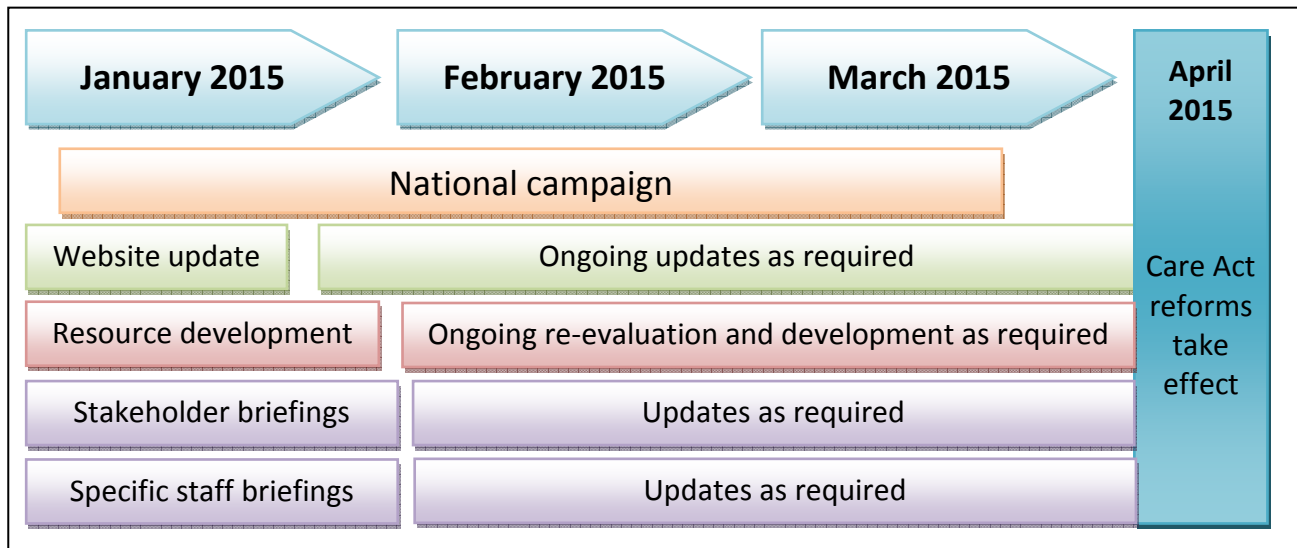
GP surgeries signed up to the GP waiting room information service will be targeted with care and support campaign leaflets. A full list of surgeries has not yet been established, with 80% of surgeries identified so far. In Herefordshire there will be 6 surgeries that will receive these leaflets – Wargrave House (Hereford), Sarum House (Hereford), Bobblestock Surgery (Hereford), The Surgery at Ewyas Harold, Gold Valley Practice (Peterchurch) and Ledbury Market Surgery.

Local communications activity to support Phase 1

This briefing is focused on the national communications campaign and what local communications will need to be built around this campaign. The Herefordshire Council Care Act communications strategy captures all communications components that need to be addressed in light of the reforms (not just those triggered by the national communications campaign). This strategy is currently being revised and updated.

Local channels of communication & timescales

Diagram 2: local timescales and channels of communication for phase 1



Local stakeholders

In relation to local support for the national communications campaign, the key stakeholders locally will predominantly be those people, professionals and organisations that services users, carers and the general public may turn to if they have queries resulting from the national communications.

Key stakeholders will include:

Table 3: local stakeholders

Internal	External
Contact Centre	Providers and their staff
ART team	Community and voluntary sector
Welfare and Financial Assessment Team	Healthwatch
Locality teams	Health – CCG, GPs
Elected members	Service user groups

In addition, there will also be a need for communications with **service users, carers and the general public** to provide greater clarity and local specificity to aspects of the national communications campaign.

Local messages and channels

Almost all identified stakeholders have already received some form of Care Act awareness raising activity; be this face to face presentation, briefing note, training session or Q&A. Additional briefings will be required throughout January to make stakeholders aware of the national campaign, the national key messages, what it means at a local level and resources to support responses to any queries received.

The briefings and support will be in the following format and channels

Table 4: local communication resources and channels

Resource/channel	Comment
Communications briefing paper	This briefing paper will be shared with all key stakeholders (<i>the paper may be amended to suit the audience</i>)
Local care act website	Already exists. To be further updated by end of January. Available at www.herefordshire.gov.uk/careact
Public facing FAQ	To be developed from PHE resource. To be available online at the council Care Act webpage by the end of January
Staff FAQ	Already developed and available to council staff on the council intranet at http://intranet/intranet/content/64398.asp
Staff briefing paper	A new briefing paper, specifically on the 2015 reforms, will be issued to frontline staff by the end of January
Provider briefing paper	A new briefing paper for providers will be issued by the end of January
Face-to-face briefings	Briefings specifically for the ART team, WFAT and Contact Centre, who may receive queries by phone, will be delivered in January.
AWB Bulletin items	Items will appear regularly in the AWB bulletin to alert staff to the communications campaign
Posters	To display in public council buildings (e.g. libraries) to direct the public to the council careact webpage
Leaflets/letters	For example new service user leaflet on deferred payment agreements

Due to the high level nature of the national communications material, and that each council is likely to operate differently, there will be a need to supplement the three national key messages with further detail about what this means locally. This will both provide more accurate information to the public and also better equip key contact points (e.g. care workers, social workers, ART team) to respond to any queries about the national key messages. The local messages that will be built around the national key messages are outlined in Appendix B.

Appendix A: Example care and support leaflet produced by PHE on behalf of DoH (see attached pdf).

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To find out more about care and support in England and how you might benefit from the changes, visit gov.uk/careandsupport or contact your council.

This leaflet is available in accessible formats. Contact your council for details.

Getting the right care and support for you





From April 2015, care and support in England is changing for the better. The new Care Act will help to make care and support more consistent across the country.

'Care and support' is the term used to describe the help some adults need to live as well as possible with any illness or disability they may have. It can include help with things like washing, dressing, eating, getting out and about and keeping in touch with friends or family.

Whether you are receiving support at home or living in a care home, the new national changes are designed to put you in control. It will be easier for you to make plans for your care and support now, and in the future.

Consistent across England

For the first time, all councils in England will consider the same national level of care and support needs when they assess what help they can give to you.

And if you receive care and support and want to move to another area in England, both councils will work together to make sure that there is no gap in your care when you move.

Getting the right care and support for you

In control of decisions

If you receive care and support, you will be more in control of decisions that affect you, and in putting together a care plan, tailored to your needs.

Your plan will work out how you can do the things that are important to you and your family, with the right level of care and support.

You will also know how much it will cost to meet your needs and how much the council will contribute towards the cost. You will have more control over how that money is spent.

Emotional, mental and physical needs

Everyone's needs are different. They may be physical, mental or emotional.

You may find that the support you need could be met by something going on in your local community, for example services organised by local charities or other support networks.

Whatever your level of need, the council will be able to put you in touch with the right organisation to support your wellbeing and help you remain independent for longer.



Appendix B: Care and Support public awareness campaign – national & local messages

	Key Messages (national)	Local messages
National eligibility criteria	<ul style="list-style-type: none"> • The way care & support needs are assessed is changing for the better • Decisions about the help you receive will consider your wellbeing & what is important to your family • There will be a national level of care & support needs that all councils will consider when they assess you – this may result in you being eligible for care & support, and will make it easier for you to make plans • If you decide to move to another area councils will have to work together to make sure there is no gap • If you receive care & support, you will be more in control of decisions that affect you, and of putting together a care plan tailored to your needs • You will know how much it will cost to meet your needs & how much the council will contribute towards the cost. You will have more control over how that money is spent • You may find that the support you need could be met by something going on in your local community • Whatever your level of need, your council will be able to put you in touch with the right organisations to support your & help you remain independent for longer. 	<ul style="list-style-type: none"> • Whilst the eligibility criteria will change from 1 April, it has been set at a level which is broadly similar to that which we already use in Herefordshire. Therefore we do not anticipate significant changes in who is and who isn't eligible for council support • The new eligibility criteria applies only to assessments and reviews that take place from 1 April 2015 onwards. Existing service users will only be affected in that when their needs are next reviewed, this will be in accordance with the new criteria. • Social care staff will receive training and support on the new criteria and approach to assessments. The new approach to assessments is more about embedding the best practice we continue to work towards (e.g. person-centered, outcomes focused) • To find out more people should be encouraged in the first instance to visit the council Care Act webpages (www.herefordshire.gov.uk/careact) alternatively they may call the council Contact Centre on 01432 260555
	Key Messages (national)	Local messages

Support for carers

- | | |
|--|--|
| <ul style="list-style-type: none"> • Changes to the way care & support is provided mean you may be able to get more help so that you can carry on caring and look after your own wellbeing • You may be eligible for support, taken as a personal budget to spend on things that make caring easier, or practical support. Or you may prefer to be put in touch with local support groups • The council covering the area where the person you care for lives can help you find the right support and may suggest you have a carers assessment • A carers assessment will look at the different ways caring affects your life and work out how you can carry on doing the things that are important to you and your family • Your physical and emotional wellbeing will be at the heart of the assessment • As a result of the assessment, you may be eligible for support from the council, who will also offer you advice and guidance to help you with your caring responsibilities • You can have a carers assessment even if the person you care for does not get any help from the council, and they will not need to be assessed | <ul style="list-style-type: none"> • The council already offers support to carers through Herefordshire Carers Support, short break services and direct payments • To receive carers support services from the council, a carers assessment must be completed to identify whether the impact of caring upon the carer is such that they are eligible for support. • The council is reviewing the support it provides carers to make sure that this best meets the needs and outcomes that carers want to achieve • To find out more people should be encouraged in the first instance to visit the council Care Act webpages for carers (www.herefordshire.gov.uk/careact), alternatively they may call the council Contact Centre on 01432 260555 |
|--|--|

Key Messages (national)

Local messages

Deferred payment agreements

- From April 2015 deferred payment agreements will be available across the county
 - People should not have to sell their homes in their lifetime to pay for their care as they have sometimes had to do in the past
 - A deferred payment is an arrangement with the council that will enable some people to use the value of their homes to fund residential care home costs
 - If you are eligible, your council will pay your residential care home bills on your behalf. You can delay repaying the council until you choose to sell your home, or until after your death
 - Deferred payment agreements will suit some people's circumstances better than others'
 - Councils may charge interest on what is owed and there may also be a set-up fee
 - Deferred payment agreements are only one way to pay for care. To find out more options available, you can speak to a financial advisor or an independent organisation (e.g. the Money Advice Service)
- The council already operates a deferred payment scheme
 - The council may charge an admin fee to set an agreement up and may charge up to 2.65% interest
 - To apply, you must have:
 - ✓ capital(excluding your property) of less than £23,250
 - ✓ Own or part own a property which is registered with the Land Registry
 - ✓ Be professionally assessed as requiring and be entering permanent residential/nursing care
 - ✓ Have mental capacity to agree or have a legally appointed agent willing to agree to this
 - The council may offer deferred payments to people in supported living accommodation independent living schemes, such as extra care
 - For more information, people should in the first instance be encouraged to visit the council care act webpages (www.herefordshire.gov.uk/careact) alternatively they may contact the council's Welfare and Financial Assessment Team on 01432 363756



MEETING:	HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE
MEETING DATE:	4 FEBRUARY 2015
TITLE OF REPORT:	HEALTHWATCH HEREFORDSHIRE
REPORT BY:	Independent Chairman, Healthwatch Herefordshire

1. Classification

Open

2. Key Decision

This is not an executive decision

3. Wards Affected

County-wide

4. Purpose

4.1 To receive a report on the activities of Healthwatch Herefordshire

5. Recommendations

THAT: The report be noted

6. Appendices

Appendix 1 – Healthwatch Herefordshire Report.

7. Background Papers

None identified.

Healthwatch Monthly Partner Briefing: 1 Dec 2014 – 20 Jan 2015

Healthwatch in the Media

In Response to unprecedented demand in A&E - Hereford Times & BBC Hereford & Worcester Radio

Paul Deneen called for a “fundamental review” of bed use at Hereford County Hospital. Funding should be found for at least another 40 beds.

“It is now clear that to deal with the unprecedented and ever increasing demands at the hospital, and to ensure that the problem is future proofed, additional funding and infrastructure will be required to support another 40 beds being added.

In the short term, he said, it was “vitaly important” that anyone with a non-urgent condition sought alternatives to A&E such as community pharmacies, NHS 111, GPs, the walk in centre at Hereford ASDA or the extended hours GP surgeries at Ross-on-Wye, Leominster and Hereford, City.

Healthwatch Praise Dignity Initiatives at Leominster Community Hospital warm and friendly care – Hereford Times.

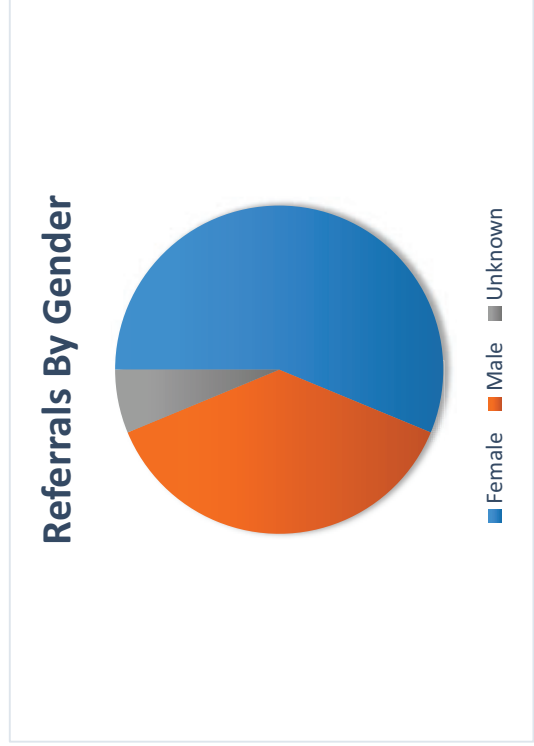
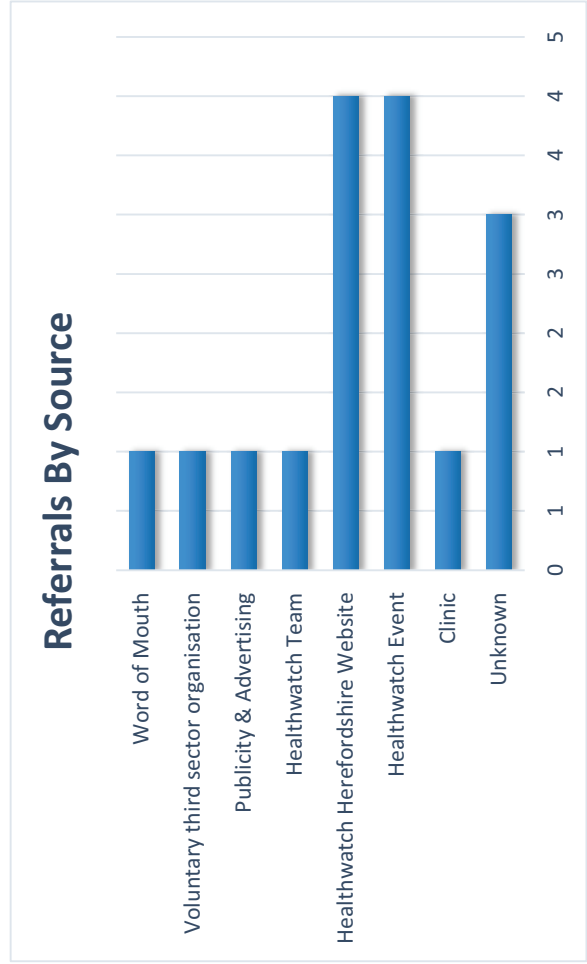
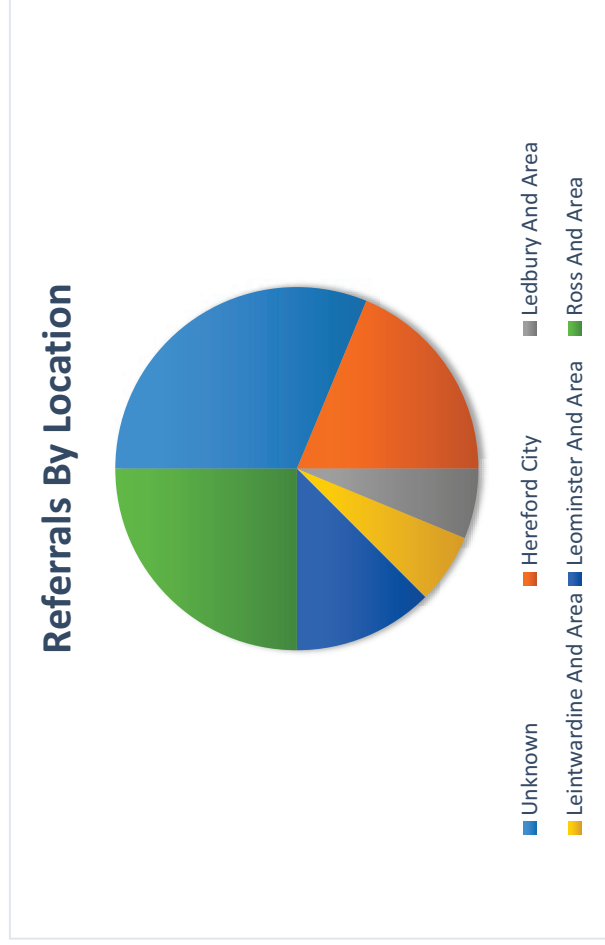
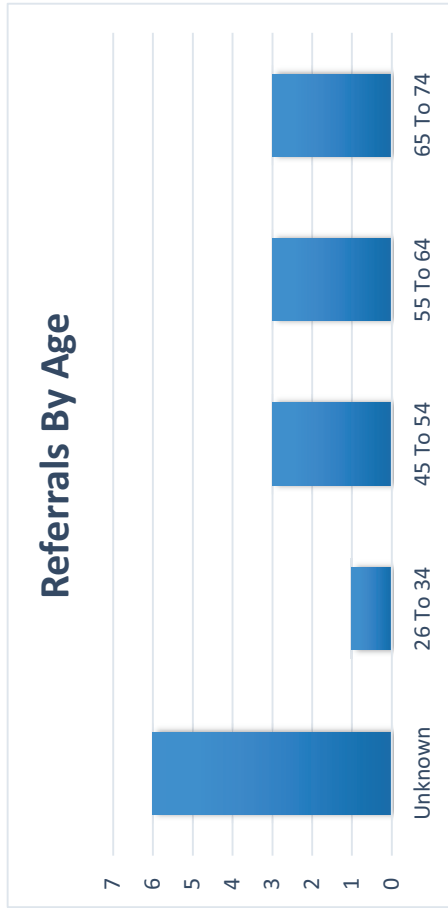
Healthwatch used the Enter & View visit to engage with patients living with a memory impairment asking them about their care in Leominster Community hospital, patients told Healthwatch it was the “little things” that mattered most. Healthwatch have also been to visit Ross Community Hospital this year and will visit The County Hospital on January 21st. **All reports are published on the website www.healthwatchherefordshire.co.uk**

Themes and Trends

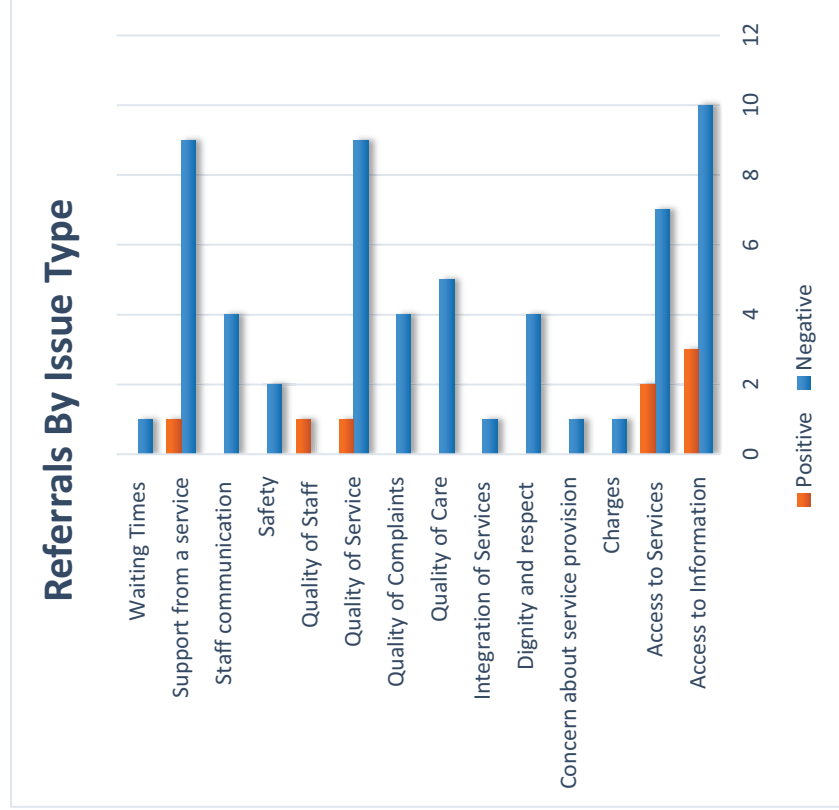
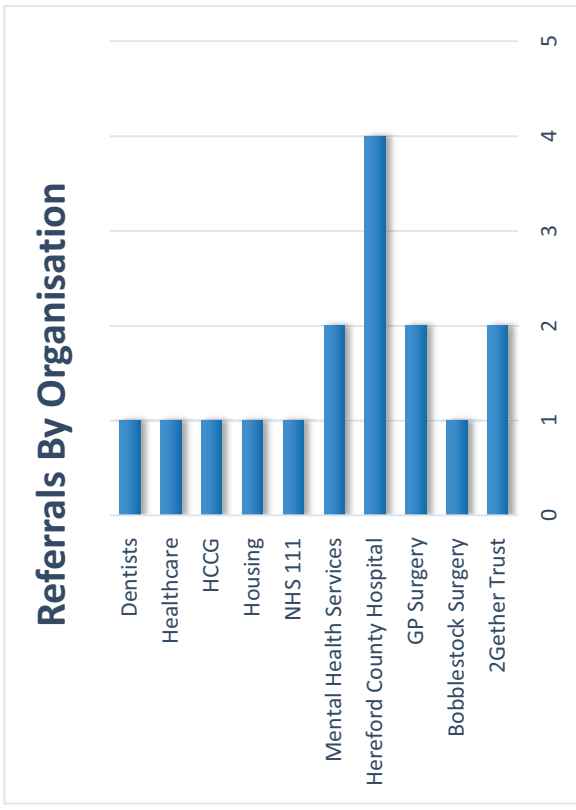
- Access to GP services for vulnerable, hard to reach groups and rural access
- **Homecare Quality and the capacity of available homecare to respond to the needs in the community, and coordination with healthcare services**
- Discharge from hospital, coordination & communication between services
- **Referrals between services within Herefordshire and out of county – poor communication tracking and coordination**
- Communication and expectation management to patients and carers about delays and waiting times for diagnostic services at the Hospital
- **Complaints systems & handling could be more standardised and patient centred**
- The impact to accessing health & social care services in rural areas; provision, marketplace, transport
- **Considering patient and carers Mental Health across services, in particular at the hospital**
- Improvements needed to get the message to the health & social care staff, and the wider public, about choosing the right service for urgent or non-urgent care

Enquiries 1 Dec-2014 – 20th Jan-2015

Number of information & advice referrals: 16



Service Type	Summary of Issue
CCG	Required Information About Herefordshire Clinical Commissioning Group.
Housing	Assistance required with housing
Hospital	Raise Awareness Of Lack Of Proper Input And Support Associated With Husband's Death
Hospital	Adult With ASD & LD Told Not To Come Back To ENT If He Puts Things In His Ears Unless They Become Infected.
Hospital	Poor Experience From Admission To Discharge In Hospital In Dementia Care.
Hospital	Hospital: Long Wait For Referral To Operation (1 Year) Poor Organisation And No Communication.
Primary Care	Lack Of Information Via NHS 111 OR Alton Street Surgery About Taurus Hubs
Primary Care	Do Over 65'S Receive Free NHS Dental Treatment
Primary Care	Bobblestock Surgery, Dr Roper Excellent Supportive And Access To GP Fantastic.
Primary Care	Concern Prostate Blood Tests Do Not Account For Drugs And Record A False Normal Result.
Healthcare	COPD Classes Required In Ledbury Not At The County Hospital Due To Cost And Access,
Mental Health	Needs Information And Advice About Mental Health Services
Mental Health	Poor Access To Dementia Diagnosis And Treatment
Mental Health	SU Poor Complaint Handling And Concerned About Lack Of Support As A Result Of The 2G Complaint
Mental Health	Wishes To Discuss MH Services With HWH



Children & Young People

- Healthwatch is active in representing C & YP on the Children's Partnership Board and the Children's Safeguarding Board.
- Healthwatch have allocated some funding towards the Voice of the Child Project, to find out the views of C & YP on Health and Care services.
- We also are involved in monitoring the Taurus plans involving C & YP
- We have visited and spoke with students on the Sixth Form Colleges site, and that we are planning to visit a primary school in the near future
- Engagement with 22 police cadets 16-18 year olds feedback about Health & Social care

Volunteering

Volunteers are a key part of the work Healthwatch undertake. We currently have 10 trained volunteers and a further 5 potential volunteers going through our recruitment and subsequent DBS process.

We are recruiting for a volunteer Leader.

Since the 1st December 2014 we have used approximately 35 Volunteer hours.

Enter & View

Healthwatch is using the 10 point dignity principles as a framework to speak to patients and carers about their experience of health & social care services. We have focussed on the voice of people living with dementia and their carers, making their voice heard and looking for good practice.

We have published reports on our website for visits to: Oaklands Nursing home, Waverley House and Highwell House Nursing Homes and Leominster Community Hospital.

We have completed a visit to Ross Community Hospital on 7th January 2015 and will be visiting The County Hospital on 21st January 2015.

Engagement & Events

- **Carers Hub** – presented to third sector organisations our Enter and View findings & plans and an overview of Healthwatch Engagement Memory Café findings
- **Clinical Commissioning Group** Public Engagement Event.
- Engagement planning with **2gether** to plan joint engagement with migrant worker communities, increase awareness of Mental Health first Aid and of Mental Health services; Recovery College and Let's Talk.
- **Engagement Gateway.** Healthwatch are leading in the **set up terms of reference and governance of this group to provide a hub for coordinating engagement across Health & Social Care in Herefordshire.**
- Feasibility meeting of Healthwatch evaluating patient experience of **Taurus Link Nurse project**
- Published the findings of Healthwatch patient & carer feedback of **Alzheimer's Society Memory Café** engagement events
- Engaged with Carers at **3 Carers Groups** across Herefordshire.
- Input to **Brandon Trust Consultation** – Commissioned Services for people with a Learning Disability in Herefordshire
- **Macmillan** & Healthwatch planning session to aid & assist the set up of cancer support groups in Kington & Ross
- Developing ways of working locally between **Healthwatch/CQC** sharing information
- **PLACE** – in preparatory stages for 2015-16 inspections with 2Gether. Healthwatch will also subsequently take part in **WVT PLACE**.



MEETING:	HEALTH AND SOCIAL CARE OVERVIEW & SCRUTINY COMMITTEE
MEETING DATE:	4 FEBRUARY 2015

TITLE OF REPORT:	COMMITTEE WORK PROGRAMME
REPORT BY:	GOVERNANCE SERVICES MANAGER

1. Classification

Open

2. Key Decision

This is not an executive decision

3. Wards Affected

County-wide

4. Purpose

4.1 To consider the Committee's work programme.

5. Recommendation

THAT: The work programme as appended be noted, subject to any comments the Committee wished to make.

6. Alternative Options

It is for the Committee to determine its work programme as it sees fit to reflect the priorities facing Herefordshire. Any number of subjects could be included in the work programme. However, the Committee does need to be selective and ensure that the work programme is focused on the key issues, realistic and deliverable within the existing resources available.

7. Reasons for Recommendations

7.1 The Committee needs to develop a manageable work programme to ensure that scrutiny is focused, effective and produces clear outcomes.

8. Key Considerations

8.1 The Committee is asked to note its work programme and to note progress on current work.

9. Community Impact

9.1 The topics selected for scrutiny should have regard to what matters to the County's residents.

Further information on the subject of this Report is available from David Penrose, Democratic Services Officers, on Tel (01432) 383690

10. Equality and Human Rights

10.1 The topics selected need to have regard for equality and Human rights issues.

11. Financial Implications

11.1 The cost of the work of the Scrutiny Committee will have to be met within existing resources. It should be noted the costs of running scrutiny will be subject to an assessment to support appropriate processes.

12. Legal Implications

12.1 The Council is required to deliver an Overview and Scrutiny function.

13. Risk Management

13.1 There is a reputational risk to the Council if the Overview & Scrutiny function does not operate effectively. The arrangements for the development of the work programme should help mitigate this risk.

14. Consultees

14.1 Following initial consultations on topics for scrutiny with Directors and Members of the Cabinet, all members of the Council were invited to suggest items for scrutiny.

15. Appendices

15.1 Appendix 1 - An outline work programme for the Committee.

Appendix 2 – Executive Rolling Programme

16. Background Papers

16.1 None identified.

**HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE
ITEMS IDENTIFIED FOR INCLUSION IN THE WORK PROGRAMME**

Draft Work Programme

Tuesday 24 March 2015 at 10.00am	
Accountability Session	To hold a public accountability session for organisations within the health sector. This session shall focus on Public Health, Health and Wellbeing Board and Healthwatch Herefordshire.
Stroke Pathway	To receive a progress report on the Stroke Pathway
Wye Valley NHS Trust	To receive an update on the performance of the Wye Valley NHS Trust following the CQC report
Children's Safeguarding Performance Data	To examine and challenge the performance data on children's safeguarding.
Healthwatch update	To receive a verbal report on any issues of concern

The following issues are suggestions from the public for inclusion

The impact of housing developments in Herefordshire on Hereford hospital and other social services
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The following matters shall be dealt with via briefing notes

- Changes to the scrutiny arrangements of Herefordshire Council including risks, mitigation and proposed changes
- An update on the use of mobile devices by social workers
- 2gether NHS Foundation Trust headlines for Key Performance Indicators

Executive Decisions to be taken – January 2015

DECISION MAKER CABINET MEMBER HEALTH & WELLBEING COUNCILLOR GJ POWELL			
Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
26 January 2015	KEY	<p>Recommissioning of the current Healthy Child Programme 5-19 (school nursing) contract and extension of current contract prior to commencement of formal tendering process.</p> <p>The purpose of the report is to secure approval to ensure a contract is in place for the 5-19 Healthy Child programme contract including National Child Measurement Programme (NCMP) post 31st March 2015. This will require the current contract to be extended by 12 months to allow integration with other key services.</p>	Adults & Wellbeing, Public Health Alison Merry, Consultant

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DECISION MAKER CABINET MEMBER CORPORATE STRATEGY & FINANCE: COUNCILLOR AW JOHNSON, LEADER OF THE COUNCIL			
Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
January 2015	Non Key	Social Value Statement To secure member approval for a council 'Social Value Statement'	Wayne Walsby? Chased 12.01.15

DECISION MAKER CABINET MEMBER CORPORATE SERVICES COUNCILLOR PM MORGAN			
Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
	Non Key	Fee Policy Mobile Home caravan sites <i>New legislation allows the Local Authority to charge a fee for administering and enforcing its duty in relation to licensing mobile home</i>	Economy, communities and corporate directorate. Claire Corfield

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		<i>parks</i>				
	Non Key	Review of Gypsy and Traveller Policy			Economy, Communities & Corporate	
		To consider implementing new policy			Claire Corfield	

Executive Decisions to be taken – February 2015

DECISION MAKER COUNCIL						
Meeting / Decision Date (on or after)	Issue Type	Purpose & Report Title	Portfolio Holder	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker		
6 Feb 2015	B&BF	2015/16 Budget Setting	Corporate Strategy & Finance			
6 February 2015	B&PF	Pay Policy Statement	To approve the annual pay policy statement for publication; and to approve individual salary packages in excess of £100,000 before commencing recruitment.	ECC Bill Norman		
DECISION MAKER CABINET						
Meeting / Decision Date (on or after)	Issue Type	Purpose & Report Title	Portfolio Holder	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker		
26 February 2015	Non Key	Budget Monitoring Report <i>To report the financial position of the Council for both Revenue and Capital</i>	Corporate Strategy & Finance – Councillor AW Johnson, Leader of the Council	Economy, Communities & Corporate / Peter Robinson		
26 February 2015	Non Key	Quarterly Performance Report <i>To review performance</i>	Economy, Communities and Corporate - Richard Ball			
26 Feb 2015	KEY	Delivering the Strategic Approach for Children & Young People with disabilities and / or special educational needs <i>To approve the Strategic Approach for Children & Young People with disabilities and / or special educational needs</i>		Children's Wellbeing – Richard Watson		
26 Feb	Non	Staying Put Project		Children's		

2015	key	To approve the Staying Put Policy and Procedures	Jo King, Head of LAC
26 February 2015	Non Key	Children's Safeguarding Update	Children's Wellbeing – John Roughton
26 Feb 2015	Key	Future of Colwall Primary School Building	Children's Andy Hough
26 February 2015	Non Key	Public Health Annual Report	Public Health / Susan Lloyd
Now a Cabinet Member decision H & WB - Date TBC	KEY	Herefordshire Better Care Fund To agree the requirements arising from the Herefordshire Better Care Fund (BCF) Plan (January 2015 Submission) and to approve the Joint Commissioning Plan, Spending Plans and BCF Section 75 Agreement for 2015/16	Adults & Wellbeing Robert Vickers
26 February 2015	KEY	Approval to undertake a procurement exercise in respect of pupil referral services for Herefordshire To obtain Cabinet approval to undertake a procurement exercise utilising a tender procedure in line with section 4.6.13.3 of the council's contract procedure rules in order to identify a preferred provider of pupil referral services (includes Herefordshire's pupil referral function, behaviour outreach function and home and hospital education function)	Les Knight

DECISION MAKER CABINET MEMBER TRANSPORT & ROADS COUNCILLOR P RONE		
Decision Date	Issue Type	Purpose & Report Title
(on or after)		Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
5 February 2015	KEY	Local Highways Maintenance Challenge Fund Subject to a successful bid to the Department for Transport's Local Highway Maintenance Challenge Fund – approve investment in the
Reg 10 Gen		Economy, Communities & Corporate – Place Based Commissioning

Exception Ref: 2015.012		highway asset in accordance with the business case that supports Herefordshire's bid	Clive Hall – Head of Highways & Community Services
5 February	Non Key	Local Highways Maintenance Challenge Fund Authorise the Assistant Director Place Based Commissioning to submit a bid to the Transport Pilot Fund to secure funding to test new models for joined-up commissioning of transport across public sector boundaries.	Economy, Communities & Corporate – Place Based Commissioning Steve Burgess – Head of Transportation and Access
5 February	Non Key	Flood Gates & Signs – Haywood Lane, Marden To consider the executive response to the motion approved by council in relation to the provision of gates on Haywood Lane, Marden for use during periods of flooding of the highway	Economy, Communities & Corporate – Place Based Commissioning Alasdair MacDonald – Design & Build and Locality Manager
5 February	Key	Total Transport Pilot Fund Authorise the Assistant Director Place Based Commissioning to submit a bid to the Transport Pilot Fund to secure funding to test new models for joined-up commissioning of transport across public sector boundaries.	Economy, Communities & Corporate – Place Based Commissioning Steve Burgess – Head of Transportation and Access
5 February	Key	Go Ultra Low Cities Fund Authorise the Assistant Director Place Based Commissioning to submit a bid to the Office for Low Emission Vehicles to secure significant capital funding to develop Herefordshire into an international exemplar for electric vehicles	Economy, Communities & Corporate – Place Based Commissioning Ben Boswell – Energy & Environmental Management Team Leader
Date TBC	Non Key	Adoption of a protocol for dealing with applications for amendments to Herefordshire Council's Highways Records To approve the adoption of the draft protocol for adding to or amending Herefordshire Council's Highways records	Economy, Communities & Corporate – Spencer Grogan
DECISION MAKER			
CABINET MEMBER HEALTH & WELLBEING			
COUNCILLOR GJ POWELL			
Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
12 February	Key	Public Health Contract Arrangements To secure approval for the proposed contract letting and extension arrangements for Public Health Contracts.	Adults & Wellbeing, Public Health Susan Lloyd, Interim Director of Public Health
4 February	Non Key	Homelessness Prevention Strategy To set out the Local Authority's plans for the prevention of homelessness	Adults Wellbeing / Jane Thomas // Laura Lloyd

DECISION MAKER MARCHES LOCAL ENTERPRISE PARTNERSHIP JOINT EXECUTIVE COMMITTEE			
Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
TBC	Non key	Marches LEP Accountability Framework To agree a draft accountability framework for submission to government.	Marches LEP; Jacquie Casey

DECISION MAKER CABINET MEMBER INFRASTRUCTURE COUNCILLOR PD PRICE			
Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
6 February 2015	Key	West Mercia Energy gas supplier contract To complete the gas supplier contract to Total Gas & Power on the recommendation of the joint committee.	Economy, Communities & Corporate – Richard Wood

DECISION MAKER CABINET MEMBER CORPORATE SERVICES COUNCILLOR PM MORGAN			
Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
CM – Corporate Services 6 Feb 2015	KEY	Back office support services <i>Approve the business case and agree the implementation plan for the re-commissioning of services currently provided by Hoople.</i>	Richard Ball, ECC Rob Ewing

DECISION MAKER CABINET MEMBER CORPORATE STRATEGY & FINANCE: COUNCILLOR AW JOHNSON, LEADER OF THE COUNCIL			
Decision Date	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker

(on or after)				
25 February 2015	Key	Business unit scheme on plot S5 of the enterprise zone To approve construction of business units on the enterprise zone and agree the procurement mechanism for delivery		ECC, Mark Pearce
25 February 2015	Key	Hereford Enterprise Zone: Capital Interventions 2015/16 (Phase 1) To approve capital interventions to make Zone ready for investment 2015/16		ECC, Mark Pearce

**DECISION MAKER
CABINET MEMBER YOUNG PEOPLE & CHILDREN'S WELLBEING:
COUNCILLOR JW MILLAR**

Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
TBC February	Non Key	New Horizons - Post 19 Learners with Learning Difficulties and or Disabilities Pilot Project Report To give an update on the small pilot for further education, independent living and therapeutic services for young people aged 19-25 who have learning difficulties and disabilities of a profound, multiple or severely complex nature, which commenced on 1 October 2013. As resolved by cabinet on 19th September 2013. For the Cabinet Member for Children's Wellbeing to review and agree to the recommendations in the report including that the pilot project continues. As resolved by cabinet on 19th September 2013.	Children's Wellbeing / Alexia Heath
19 Feb TBC	Non key	Final School Budgets 2015/16 – National School Funding Formula To approve final school budgets for 2015/16 as recommended by Schools Forum and as required by the local implementation of the National Schools Funding Formula	CWB: Malcolm Green
27 February latest			

**DECISION MAKER
CABINET MEMBER CONTRACTS & ASSETS:
COUNCILLOR H BRAMER**

Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
End of Feb 2015	Non Key	Adoption of Leisure Facilities Strategy Formal adoption of Leisure Facilities Strategy	Economy, Communities & Corporate – Mick Ligema

Executive Decisions to be taken – March 2015

DECISION MAKER COUNCIL			
Meeting / Decision Date (on or after)	Issue Type	Purpose & Report Title	Portfolio Holder
6 March 2015		Setting of Council Tax	
			Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker

DECISION MAKER CABINET			
Meeting / Decision Date (on or after)	Issue Type	Purpose & Report Title	Portfolio Holder
26 March	KEY	Herefordshire Older People's Housing Strategy and Pathway To approve the Herefordshire Older People's Housing Strategy and Pathway Action Plan	Adults and Wellbeing Richard Gabb
			Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker

DECISION MAKER CABINET MEMBER HEALTH & WELLBEING COUNCILLOR GJ POWELL			
Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
2 March 2015	KEY	Contract Award for the delivery of Health Checks and Stop Smoking service The purpose of the report is to secure approval of the contract award for the delivery of the Health Checks and Stop Smoking service	Adults and Wellbeing Directorate, Public Health, Gwen Ellison, Health Improvement Programme Manager
31 March 2015	Non Key	Herefordshire Tenancy Strategy 2012 -2015. <i>To review and update current Strategy in accordance with the</i>	Adults Wellbeing / Jane Thomas

		<i>Localism Act 2011 (s.150). The Strategy sets out matters to which the registered providers of social housing for its district are to have regard in formulating policies.</i>	
TBC (March 2015)	KEY	Strategic Review of Extra Care Provision To determine the scope and future provision at all extra care schemes in the county including the Rose Gardens	Health & Wellbeing / Adults Wellbeing Richard Gabb
TBC (March 2015)	KEY	Rose Garden- Extra Care Support Provision Contract Approve an extension to the current contract with the provide Extra Care Charitable Trust (ECCT) – extending arrangements until March 2016.	Laura Lloyd Commissioning Officer Adult and Wellbeing Directorate
4 March 2015	KEY	Re-commissioning of Carers Short- Break Service To confirm future arrangements for the provision of the Carer's Short - Break Service	Adults Wellbeing/ Amy Pitt

**DECISION MAKER
CABINET MEMBER YOUNG PEOPLE & CHILDREN'S WELLBEING:
COUNCILLOR JW MILLAR**

Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
26 March 2015	Key	Commissioning and re-provisioning of children's services – Children's centres <i>To secure approval to commission and/or as appropriate re-provide children's centres and associated services</i>	Childrens Wellbeing – Philippa Granthier

**DECISION MAKER
CABINET MEMBER CORPORATE STRATEGY & FINANCE:
COUNCILLOR AW JOHNSON, LEADER OF THE COUNCIL**

Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
9 March	KEY	Herefordshire LEADER programme 2015-2020 To confirm delivery arrangements of LEADER programme through Herefordshire Council	Economy, Communities and Corporate Dawn Turner

DECISION MAKER CABINET MEMBER TRANSPORT & ROADS COUNCILLOR PRONE			
Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
26 March 2015	KEY	Public Realm Annual Plan 2015/16 To confirm the Annual Plan for the Public Realm Services Contract with Balfour Beatty Living Places	Economy, Communities & Corporate – Place Based Commissioning Clive Hall – Head of Highways & Community Services

Executive Decisions to be taken – June 2015

DECISION MAKER CABINET			
Issue Type	Purpose & Report Title	Portfolio Holder	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
June 2015	Review of Smallholdings <i>To apprise Members of the outcome of the Smallholdings Review undertaken by Fischer German and to seek approval for the recommendations contained therein</i>		Economy, Communities and Corporate – Tony Featherstone
June 2015	Non Key <i>Quarterly Performance Report</i> <i>To review performance</i>		Economy, Communities and Corporate - Richard Ball

DECISION MAKER CABINET			
Meeting / Decision Date (on or after)	Issue Type	Purpose & Report Title	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
September 2015		Herefordshire Safeguarding Boards Business Plan and Annual Report. <i>To inform Cabinet of progress made towards the implementation of the Safeguarding Board Business Plan and annual report</i>	Children's Wellbeing, John Roughton? Young People and Children's Wellbeing / Councillor J Millar

DATE TO BE CONFIRMED

DECISION MAKER CABINET			
Issue Type	Purpose & Report Title	Portfolio Holder	Directorate, Lead Officer & Contact information for documents/report to be submitted to Decision Maker
TBC December 2015	Rose Garden- Extra Care Support Provision Contract Award of the extra care contract at Rose Gardens, following the procurement exercise in December 2015.	Health & Wellbeing	Adults Wellbeing / Laura Lloyd