GOWM Herefordshire Improvement Board

JAR Performance Improvement Action Plan

Summary Progress Report
(This report summarises progress between 21st November 2006 and 27th November 2006)

Overall Summary

- 1. The overall project plan schedule status remains as green. The status of some individual recommendations and in particular the related targets and timescales will need to be considered by the board in conjunction with other reports
- 2. A summary of completed items, and progress against each recommendation during the report period can be found in the following pages.
- 3. The risk log has been reviewed and updated to reflect progress and emerging issues. Reference to the final column headed 'Last updated' will direct you to risk log updates.

LEGEND	
	Recommendation progress on track / completed
	On track
	Not on track
	No progress

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date		On track?
		ECM OUTCOME STAY SAFE			
1. Ensure that appropriate criteria are set for the	Review & revise threshold criteria for duty social work involvement	New criteria drawn up.	Completed.	03/06	
involvement of the LA's professionally qualified social care staff in child	2) Seek advice and challenge from high performing LAs	Advice received, noted and acted upon.	Completed.	03/06	
protection cases	3) Introduce new protocols and thresholds	Revised criteria; shared and agreed across agencies. Survey all agencies in June	Completed.	03/06	
	4) Identify additional duty team staff	Additional posts filled. All cases allocated.	The increased level of referrals are being managed through the use of additional agency staff and the reallocation of some work to other teams. Referrals are being dealt with promptly with Section 47 cases being given the correct priority.	04/06	
	5) Review process management and case handling in duty and consider options for change.	Improvement on PIs for timely assessment: PI DIS 1704: CF/C64	Completed The impact of the increased referral level has resulted in a drop in performance against these indicators. (End of Oct position is DIS 1704 64.2 (target – 75%), C64 60% (target – 80%) It is unlikely that the year end target will be met. The situation is being closely monitored and revised targets will be discussed at the Board meeting.	06/06	

	6) Publish new criteria protocols and procedures	All staff using new procedures and revised thresholds.	Completed.	04/06	
JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		ECM OUTCOME STAY SAFE			
2. Ensure that these criteria are clearly understood by all concerned and consistently applied in practice	1) Review and update management and supervision system for duty social workers	PI Numbers of referrals of CIN leading to Initial Assessments on target: PI CH143 PI Number of Core Ass on target – PI CH145 Supervision log audited 6/12	Monthly reporting of key referral/assessment PIs now provided to operational management team. Performance trend is positive. A performance gap analysis for Core Assessment activity is underway and will be completed by the end of 11/06. This will underpin any recommendation to revise 06-07 target in the light of benchmarking.	04/06	
	2) Practice, file and peer audit system to be developed	Mthly file audit; Quarterly Practice audit; Annual peer audit	Monthly and quarterly audits are being undertaken with any issue arising being reported to the Head of Safeguarding and Assessment.	06/06	
	3) Establish new independent practice and performance team	Team Manager in post and system designed. Team in operation and auditing regularly	Completed	6/06	
	4) Confirm LSCB arrangements	LSCB established and reviewing use of new criteria.	Completed	06/06	

		Training post and development post recruitment. Guidance reviewed and reissued	The HSCB Development post has been advertised as a secondment opportunity. The HSCB Development post has not been recruited to and will now be offered as a secondment opportunity. The HSCB Trainer post to be readvertised 11/06.	10/06
	5) New threshold booklet widely circulated	Managers to check staff awareness in supervision and training sessions. Review appropriateness of referrals in audits.	Completed.	4/06
	6) Deliver training workshops for CCM consultants 6/52	Workshops running March 06 onwards	These have all taken place as arranged with a schedule in place to end 2006	12/06
	7) Information Sharing Protocol to be drafted to CYPP and agreed.	IS Protocol in place and agreed by CYP's Partnership.	Following 2 meetings with West Mercia Constabulary further revisions are being made to the draft protocol. It is anticipated that an agreed protocol will be approved by the CYPPB at it's meeting on 30 th November	06/06
4. Ensure that a written record is made of all contacts with the social care duty team	Redesign and implement a new system for receipt and recording of referrals	PI Numbers of referrals of CIN are on target All duty cases are allocated.	Performance at end of second quarter on referrals/0000 now exceeds 06-07 target. Arrangements are in place to	04/06
	2) Embed the new process and monitor regularly.	Weekly case tracking and monthly file audit	address any short term acute pressures Completed.	05/06

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		ECM OUTCOME STAY SAFE			
3. Ensure there is an effective workforce strategy to address the recruitment and retention problems within the local authority's social care service.	1) Recruit temporary staff to cover all vacant posts 2) Advertise for social work staff: Develop social work recruitment campaign with Consultants Tribal	All posts filled Good response to adverts.	Work is ongoing to recruit permanent qualified social workers and an ongoing programme of advertisements is in place. 2 new permanent qualified social workers recruited. In light of progress to date, consideration of recruiting qualified Social Workers from America and Canada is not being pursued at this stage. Position at End of OCT. is that there are 6.8WTE vacancies (14.75%) out of an existing establishment of 46.1 although the majority are covered by Agency staff. The Safeguarding and Assessment Performance update report provides more detail on budget bids to move to an establishment of 57WTE posts 15.3 per 10,000). It is to be proposed that a milestone of 12.3 per 10,000 be introduced at April 2007 with the overall target of 15.3 being retained.	3/06	

	3) Seek views of existing staff and seek views to inform strategy	Increasing rate of retention.	Completed.	04/06
	4) Collate data and analyse current and future social care workforce requirements as basis for medium to long term plan	Improved retention rates – to be monitored. Reduced vacancy rates - to be monitored quarterly.	Retention rates are at a high level. Managers receive detailed monthly workforce monitoring reports.	05/06
	5) Link with & seek consultancy from CWDC to Widen workforce strategy to interagency children's services focus	Social care workforce needs and issues are fully embedded within wider workforce strategy.	Ongoing alongside development of Corporate Workforce Strategy.	05/06

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		ECM OUTCOME STAY SAFE			
5. Ensure there is a single referral assessment and service planning framework for children in need which is consistently and effectively applied in practice	1) Build on existing Child Concern Model to develop and agree <i>Change for</i> <i>Children</i> Child Need Framework	QV Rec.1 as step to CAF CCM is updated and incorporated within CAF whole system approach.	Every Child Matters in Herefordshire framework (CAF) will replace Child Concern Model. Arrangements to be piloted January-July 2007	6/06 01/0 7	
	2) Establish interagency common processes group (CAF) to respond to national CAF guidance, to design local response and to develop an implementation plan for the County	New CAF, building on CCM, is produced and disseminated. No of CAFs completed as measure – (Local PI)	Completed. Target for 2007 agreed	7/06	

pilot		Learning from pilot is captured to inform new model. PI targets for referral. No of children identified with additional needs in pilot area.	Planning completed and training ongoing. Pilot will start January 07. Evaluation of pilot programme originally included within training development brief of independent trainer. Consideration is being given to whether this should be undertaken independently.	9/06	
existi servio	nprove and develop ing Directory of ces for children ec. 15.	Directory published	The review and compilation of updated resource directory is taking place within the EYDCP Service under the direction of Ros Hatherill. A directory has been produced and is accessible. Further work is taking place on its on-going development	12/0 6	
Inform	dentify Lead Officer for mation Sharing Index consider requirements	ISI project milestones achieved	Completed LARA (1) submitted on time	10/0 6	

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		ECM OUTCOME STAY SAFE			
6. Ensure the training, guidance and support needs of all staff contributing to the implementation of the Child Concern Model are addressed both in terms of the	1)Training for new CAF and CCM to be planned and implemented	Programme and curriculum set up. Facilitators in place.	A programme of training commenced in October 2006 and is on schedule	9/06 LR	
	2) roll out of training sessions	No of staff trained and using CAF.	The programme is being offered to 180 practitioners involved directly in both pilot areas	10/0	
time required to undertake the tasks involved and the necessary skills		No of CAFs completed.	Target for 2007 agreed.	03/0 7	

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		ECM OUTCOME BE HEALTHY			
7. Ensure effective implementation of the multi-agency health care planning procedures for Looked After children	1) Review and audit all LAC records to check for health care plan 2) Clear procedures for health assessments to be agreed 3) Develop plan for implementation of all HC Standards	Audit evidence available. PI to check target: PI C19. CC Review chairs to monitor assessments completed Procedures in place. Review chairs to monitor actions to be completed. Hold HCS event 27/6/06 & Draft implementation plan	Completed. All LAC have a health care plan. Rolling programme of reviews in place. Completed. Ongoing programme in place. Work is ongoing to implement the National Healthy Care Standards.	3/06 10/0 6	
8. Improve access to occupational therapy services	Immediate review of OT services to identify gaps and needs	Increase in number of OTs Standard is access to assessment within 13 weeks: (Local PI)	Completed. The locally set 13 week target continues to be met (this is monitored on a weekly basis). Interviews for a team leader take place on 6 th October 2006.	4/06	

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		ECM OUTOME BE HEALTHY			
9. Ensure appropriate social care support for the families of children with learning difficulties and disabilities	Family support including short term breaks to be specified and commissioned. (Link to recent Fostering Inspection)	New service available. Monitor increase in no of breaks provided. Audit all cases every 6/12 to monitor take up	Detailed report will be made to Board in November.	6/06	
	2) Improved support and care planning to be developed through mapping NSF / ECM pathways through development of CAF	Local care pathways in place and linking to CAF processes. No of CAF and AF assessment completed	The level of assessments undertaken in the last 6 months by the Disability Team has increased by 150%. The employment of 2 additional Family Support Workers is contributing to the management of the additional workload.	11/0 6	

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		ECM OUTCOME BE HEALTHY			
10. Ensure better co-ordinated transition planning for all children with learning difficulties and disabilities	1) Transitions steering group with adults' service to be set up to develop strategy.	Needs analysis / commissioning plan in place and joint transitions strategy with adult services Joint protocol in place between adults and children's services	A second draft plan is being developed. Operational managers transition group held first meeting in October and has agreed actions and key priorities for the year ahead. The group will further develop the action plan. Need to consider revision of due date.	3/06	
	2) Appoint new transitions workers & Implement new processes	Appointment of staff June 06 Improved planning for CYP. Monitor through PI SC5026	Completed. Transition lead (Sue Miller) started 09.10.06 The pilot multi-agency single meeting for all referrals to the Kite Centre and CDC is continuing.	7/06 12/0 6	
		Survey CYP and carers to QA.			

11. Improve communication with parents and young people with learning difficulties and disabilities in terms of both the assessment of need and planning of provision	1) To develop and implement clear standards for effective communication with cyp and families – in person, in writing and also through website	Standards drafted and consulted on. Continuing system for parental contact in place Survey parents to check progress.	Working with Philippa Russell on questionnaire to go out to parents and carers in October to explore views of services and how we can involve users in service design and delivery Workshop dates with Philippa Russell set for October/November to be rescheduled in order to improve attendance.	9/06
	2) Disability workshops to be arranged with support of Council for Disabled Children	Parents & Carers views recorded & checked out regularly – 6/12 audits Dates of meetings – Sept / Oct	October/November meetings have been re-scheduled to January in order to improve attendance. 100 questionnaires sent out to parents and carers in October. Initial analysis is scheduled for production in January	10/0 6

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		ECM OUTCOME BE HEALTHY			
14. Improve access to hospital inpatient provision to meet children and young people's mental health needs (tier 4 CAMHS)	1) Regional review of needs for Tier 4 service, recent patterns.	Needs analysis completed for the region. Clear criteria for nature and scale of commissioning	Further developments are dependent on the outcome of the regional strategy development of which is awaited.	6/06	
	2) Regional PFI bid	Plan in place. Bid submitted	Completed.	2/06	
	3) Local review of all tiers of provision	Commissioning criteria in place. Link with Joint Agency meeting process.	Workshop has taken place as part of review process	9/06	
	4) Consult with cyp and families, plan and provide	Survey views and respond to these.		12/0	

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
	A	CHIEVE ECONOMIC WELL-BEING			
16. Improve Housing provision for both single young people and families	1) Identify £500,000 capital for single-person accommodation for vulnerable young people and care leavers	6-10 units of additional accommodation for care leavers off the open market. An additional 2 self-contained flats are being provided in partnership with a local housing association. Monitor PI SC5026.	To date 3 additional units acquired and occupied. The purchase of 3 additional properties are scheduled for completion by December 06. This will complete the total of 6 properties. Nomination rights are also being secured to 4 additional units of single person accommodation offered by a local supported Housing provider (SHYP). They will be used to meet the needs of care leavers and other vulnerable young people. Intensive support is being provided to tenants. On target for all vulnerable C&YP to be in satisfactory accommodation by Apr. 07.	6/06	
	Safeguarding and Assessment Service represented on	Attendance and influence on agenda. PI % of Care Leavers at age 19	Safeguarding and Assessment Service is represented on groups. Safeguarding and Assessment		
	commissioning and operational groups for Supporting People	years living in suitable accommodation	Service are represented on Homelessness Service Steering Group.		

3) Protocol between housing providers and Safeguarding and Assessment Service re handling of CYP and families and homelessness where tenancy / housing is at risk	Protocol in place and working & reviewed quarterly Affordable housing targets	Quarterly review of protocol taking place in October.	6/06	
4) The Council to bring homelessness and Housing Advice Services back in-house with focus on prevention including family mediation and a Safe Moves Project.	Improved further preventive information and advice service. Reduced numbers of homeless. Corporate reporting of strategic PIs – Use of B&B	The number of families housed in bed and breakfast (B&B) accommodation has reduced from 40 on 1 st April 2006 to 7(12) at the end of October 2006. The figures for those housed in B&B for more than 6 weeks has fallen from 28 to 5 (5) over the same period. (Figures in brackets relate to the end of September position)	4/06	

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		SERVICE MANAGEMENT			
12. Improve action planning to deliver strategic aims and objectives and, in particular, ensure that associated resourcing needs are met	1) Produce CYP Plan linked to LAA	CYP Plan published	Completed	4/06	
	2) Partnership to have workshop on governance and adopt Joint Planning and Commissioning Framework (DfES et al) (July 06)	Clear governance and accountability arrangements	Completed. The partnership governance arrangements were agreed at the CYPPB meeting on 11 th September 2006.	7/06	
		JP & C Policy adopted and in place	Draft JP & C Framework considered by CYPPB at its September meeting.	9/06	
	3) CYP's Plan Forward delivery Action Plan to provide overarching strategic framework for all other plans		Completed. The C&YP Plan Forward Delivery Plan was approved by the CYPPB on 11 th September 2006. Forward Delivery Plan to act as overarching Service Plan for 07/08 following its review.	6/06	
	4) To work with VSC through The Alliance on	VCS reps on CYPP's Board.	Completed.	11/06	
	ensuring active engagement	VSC involved in all aspects of commissioning	VSC engaged in Short Breaks Commissioning process. Recommendation on way forward made.		

5) Partners to identify all resources for children in	List of all resources available.	Service priorities and budget implications for the medium term	9/06	
the area and to consider options for joint funding single or pooled funding	Progress on joint commissioning & pooling. % Increase in activity.	plan have been submitted to deadline set by the Director of Resources. Approval in principle	11/06	
arrangements.		given. Implementation to follow final approval.	2/07	
6) This information to feed into refresh and update of CYP Plan in Autumn 2006	·	Review of Delivery Plan begun. To be completed by 11/06	11/06	

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		SERVICE MANAGEMENT			
13. Improve information systems within the LA's social care services to enable better management oversight and evaluation of service effectiveness	1) Ensure that social care information needs are identified with and managed within Herefordshire Connects including review and specification as an urgent issue – for sign up by July 06	Improved data quality. Whole system approach in place – linking to council-wide system	Completed. Data Collection and Performance Management arrangements comply with corporate requirements.	7/06	
	2) To seek external advice on system requirements to ensure that new ICT systems will met children's services requirements.	Workshops held with managers. Requirements explored and specified. Informed decisions.	Visits to Shropshire and Worcestershire have been undertaken as part of the IPC Project. A timetable for new IT systems has been agreed which will see them operational in 2008.	6/06	
	3) Children's Services to contribute to specification, design and implementation of new systems	Clear specification in place identifying children's services needs – incl. ICS and CAF.	Incorporated in Herefordshire Connects Corporate Transition Programme. Initial specification agreed.	7/06	

4) Interim system	Data quality audits in place monthly.	Completed.	5/06	
Performance Management arrangements to be put	PIs on assessment rates and timeliness of assessments.			
in place – file audits including Climbié, supervision recording,	QV P30 –32 for more on performance management arrangements and reporting.			
and collation of information re referrals,	Internal audit sampling and audited			
assessments and disposals on a monthly basis.	regularly.			

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		SERVICE MANAGEMENT		1	
15. Improve co- ordination of consultation with children and young people to support their participation in strategic planning and review	Ensure effective co- ordination of all consultations with cyp through Herefordshire Partnership adviser	Liaison system in place to ensure this happens Maintain local timetable for activities.	The Youth Council is undertaking a major event on 21 st October 2006 at which the views of children and young people will be sort.	6/06	
	2) To produce and develop a framework for the involvement of all cyp and families.	Framework in place. Review every 6/12 to ensure implementation effective.	Need to consider revising due date to 12/06.	9/06	
	3) To set up Shadow CYP's Partnership Board	Shadow Board meeting and reps attending /influencing CYPP Board by March 06 Audit minutes 6/12 to assess effectiveness of involvement.	Completed. Latest meeting of Shadow Partnership Board – 11 th September 2006. Shadow partnership board has met on 3 occasions to date with representatives attending and contributing to CYPPB meetings and reporting back, minutes obtained and being checked.	3/06	
	4) To involve parents and carers in CYP's Partnership Board	Parent reps attending CYP's Board	Completed	12/06	

5) C& YP's Youth Council to be enhanced with engagement of relevant LAC	LAC engaged. Monitor no of attendances quarterly.	Shadow Partnership to meet early October. Analysis to follow.	3/06 and 10/06	
6) To adopt and implement Hear by Rights Standard	Monitor use of standard – nos using process to be monitored.	Launch in October was cancelled due to lack of support for event from C&YP. Consideration is being given as to how this can be taken forward.	10/06	
7) To enhance Children's service Directory to ensure it is easily accessible and able to be used by cyp and families.	Directory published. Survey uptake.	A directory has been produced and is accessible. Further work is taking place on its on-going development	12/06	

JAR recommendation	Action Milestones	Success Criteria	Summary Progress to date	Due date	On track?
		SERVICE MANAGEMENT			
17. Strengthen performance management processes involving elected members and senior officers at all levels, including the Partnership Board and the LA's Children' Scrutiny Committee	1) To draw up performance management system for the Children's Services, which can deliver the requirements of DfES Children's Services Improvement Cycle and fit with the Council's Performance Improvement Cycle.	System documented including monitoring system. Regular data set available to track progress monthly.	Proformas and templates produced for all indicators. A full directory will be completed. The JAR Progress Group (Board) will project manage implementation of the IPC Project with the Directorate Management Team exercising oversight. A timetable for new IT systems has been agreed which will see them operational in 2008. The IPC recommendations have been accepted and owned by the Council, GOWM Board, and are being implemented.	9/06	
	2) Ensure regular performance reports to Lead Member, Scrutiny Committee and Cabinet	System in place and operating: Quarterly outcome performance available. QV P31.	Completed	6/06	
	3) To agree governance and accountability arrangements for CYP's Partnership Board	TORs and governance of CYPP Board delivered and agreed.	Completed	9/06	

including responsibility for performance monitoring of Forward Delivery Plan for CYP's Plan.	Forward D Plan issued and being monitored	Plan issued. Monitoring report to CYPPB in November.	6/06	
4) CYP's Partnership to agree on process for monitoring progress on	All partners involved in designing and delivering FD Plan	Completed.	9/06	
CFC, delivery of CYP's Plan.	Quarterly monitoring on outcomes in place.	Executive Groups of Partnership Board established. A progress report will be presented to the CYPPB at its meeting on 30 th November 06.	11/06	