



## Introduction and background

External scrutiny over the past three years has raised justifiable questions as to the effectiveness of Herefordshire Council's Children's Services. These include the Ofsted inspection of children's social care services (2018), subsequent Ofsted focussed and monitoring visits up to July 2021 and the critical judgement from His Hon. Justice Keehan (April 2021) resulting in the Council receiving a non-statutory Improvement Notice in May 2021. The Council, through the Leader of the Council and the Cabinet members, fully accepted accountability for His Hon. Justice Keehan's findings and is committed to delivering sustained improvement of children's services and good outcomes for the children and young people of Herefordshire. Additional external reviews and resource has been commissioned to ensure improvements are made apace.

The Department of Education (DfE) has appointed an independent improvement advisor to support the improvement journey and chair an Improvement Board. There have been notable changes in the Spring/Summer of 2021 in the senior leadership team at Herefordshire Council including the appointment of an interim Director of Children's Services with extensive experience of Children's Services, including improvement work, the appointment a new Chief Executive, and a new lead member for Children and Families.

This operational improvement plan should be read alongside the Strategic Improvement Plan (Plan on a Page). The operational improvement plan focusses on three key priority areas, which have been identified as crucial drivers to deliver the change that is required to ensure that children are effectively supported and safeguarded in Herefordshire. Each priority clearly identifies what outcomes we want to achieve and how we will evidence progress and successful outcomes, within a context of system wide transformation. Our key priority areas of focus:

1. Leadership & Governance (LG)
2. Workforce (W)
3. Quality and Performance (QP)
4. Right Help Right Time (RH)
5. Partnerships (P)

Actions relating to key evidence such as the Improvement Notice and latest Ofsted focused visit are identified (e.g. *(OfstedFV21)*). Continuous improvement based on success in achieving outcomes and early identification of new areas for improvement means that the plan will be dynamic and have regular reviews to:

- Ensure that all activity and children are the heart of all areas for improvement
- reflect clear links across the system, including other key strategies and plans for citizens of Herefordshire.
- adapt according to new external and internal drivers, such as new legislation, local changes and from internal performance monitoring and review. This enables us to ensure we are tenacious in focusing on the right things in a timely manner.
- Review impact of changes to ensure that the actions are achieving the identified outcomes

## Our Priorities

### Why these are a priority for us:

- Serious concerns in respect of the council's children's services, following failings outlined in the High Court Judgement published in April 2021; in addition to other court cases coming up, where it is expected that further practice failings will be identified. (*Improvement Notice*)
- Failures in the leadership and management of children's services have been identified, along with evidence of poor decision making, and drift and delay in some historic cases. (*Improvement Notice*)
- Insufficient improvement has been made since Ofsted last inspected in 2018 and two visits. (*Improvement Notice*)
- Governance, accountability, and scrutiny by strategic leaders have been ineffective.
- Leaders and managers have not created the conditions needed to support the development of effective social work practice.
- Recruitment and retention of social work staff continues to be a challenge, with a high proportion of inexperienced and newly qualified social workers. Some social workers find their caseloads unmanageable.
- There is insufficient social care management capacity to operate the service effectively. This includes team managers in post, resulting in lack of oversight and grip in progressing children's plans.
- The frequency and effectiveness of supervision for social workers is limited.
- There are longstanding issues of inconsistent and variable social work practice (*Improvement Notice*). Little progress has been made in improving the quality of practice for children and young people's plans since the Ofsted inspection in June 2018.
- Assessments are too variable in quality, are not holistic and view the impact of separate incidents in isolation.
- Graded care profiles are not completed within the child's timescales and actions identified through the tool are not acted upon quickly enough. This means that children's needs are not fully understood and they remain too long in neglectful situations.
- Plans and intervention focus predominantly on parental needs, with little understanding of children's experiences and the impact these have had upon them. This means that children's needs are not always met and risks not fully understood, and children can be subject of a plan for too long.
- Where direct work with children is undertaken, it is rarely recorded on children's records and does not inform ongoing assessments or plans. The voice of the child in case records and planning needs to be stronger.
- Plans are ineffective at demonstrating what needs to happen to reduce and minimise the risk of harm to children, or to improve outcomes for them.
- For some children, there is evidence of drift and delay in the progression of their plans and in the PLO process, too many changes in their SW and 'start again social work'.
- The current quality assurance framework does not provide an accurate reflection of social work practice and is not effective in improving social work practice and experiences of children.
- The quality of case audits is not good enough. They are overly optimistic in their evaluations of practice and many opportunities are missed to draw out learning or shape social work practice development.
- Routine or effective mechanisms are needed for ensuring that poor practice does not continue.
- Performance monitoring of social work practice through dashboards and performance reports at all levels of the organisation from the Improvement Board to Team Managers needs to be improved.

## Outcomes to be achieved:

*We will lead well, inspiring and supporting staff to be the best that we can be in an organisation where it's encouraged to try new things and where learning is shared, valued, and put into practice. We will have a skilled, trusted, and empowered workforce who are accountable and focused on consistently delivering good outcomes for the children and families of Herefordshire.*

- There is a clear and well communicated shared ambition. Everyone understands their role in delivering it individually and collectively as part of the membership of committees and boards.
- The improvement plan and its delivery plans reflect what needs to change, are based on up-to-date evidence and areas of poor performance. They are monitored and addressed effectively and at pace. Issues are escalated quickly and appropriately actioned.
- The Council can discharge its statutory duties effectively and deliver good outcomes for children through an effective organisational structure, recruitment, retention, workforce development and capacity planning within Children's Services,
- There is increased and appropriate scrutiny and challenge at all levels of leadership in children's services. Success is also celebrated to shape a learning and improvement culture.
- Open, transparent, and safe decision making based on children's needs is evident.
- The corporate parenting principle and role is embedded across the Council and its partners, and clearly understood and applied in decision making for children in care and care leavers.
- Policies, standards, and tools are in place which support practice with children and families, resulting in a clear, accurate and earlier understanding of the child's needs, lived experiences, views and wishes. This leads to better assessment, planning, reduction in risk and achieving desired outcomes.
- Commissioning strategies and activities are effective in providing the right help at the right time and at the right cost in meeting needs and improving outcomes for children and young people. Examples of this are placement sufficiency and children's mental health.
- There is a clear strengths-based model of practice which supports working with children and families to increase engagement, reduce drift and delay, and achieve required outcomes.
- Assessments accurately capture history, lived experiences, risks, needs and are child centred.
- All plans effectively identify accurately the need, outcome, plan, and plans are implemented, monitored and ended within appropriate timescales to achieve required outcomes
- Case recording is timely, child-focussed and of good quality.
- Services and community support come together to meet the needs of local children, young people and families creating early intervention to support families
- A strong performance management governance and culture across all services from team to strategic level,
- Timely and accurate recording, analysis and reporting of information, to provide effective business intelligence, self-evaluation and scrutiny.
- Our quality assurance framework and activity drives practice improvements, linked to workforce development, policies and standards.
- The views of frontline staff and of children and young people will be taken into consideration in the development of services, practice and standards.

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Leadership and Governance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
LG1	Permanent Senior Leadership Team	Chief Executive	<b>Create and sustain a permanent leadership team:</b> Recruit Director of Children and Families (DCS)	<ul style="list-style-type: none"> <li>Permanent leadership team in place. <i>(data)</i></li> <li>Accountability system to Leader and Chief Exec, Improvement Board, and DfE adviser in place. They report positively that the systems are working and are achieving the required change. <i>(Voice, reports to IB)</i></li> <li>The council highlights those objectives which are slow to progress and highlight where contributions need to be strengthened <i>(reports to IB)</i></li> <li>Evidence through external review and IB that they are driving the improvement agenda and provide effective leadership. <i>(Review)</i></li> <li>There is evidence through meeting minutes of effective challenge and scrutiny at Member, Director and IB levels. <i>(Audit)</i></li> <li>There is evidence through meeting minutes and action log of effective management oversight of notable/complex cases.</li> <li>Working protocols and service level agreement (Legal services) reviewed, revised, and understood by each relevant part of the council.</li> <li>Effective monitoring systems in place to oversee effectiveness and impact of working protocols.</li> </ul>	1 Sept 2021	28 Feb 2022
LG1	Permanent Senior Leadership Team	Director of Children and Families	Recruit Service Directors	<ul style="list-style-type: none"> <li>Permanent leadership team in place. <i>(data)</i></li> <li>Accountability system to Leader and Chief Exec, Improvement Board, and DfE adviser in place. They report positively that the systems are working and are achieving the required change. <i>(Voice, reports to IB)</i></li> </ul>	31 Oct 2021	31 March 2022

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Leadership and Governance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
				<ul style="list-style-type: none"> <li>The council highlights those objectives which are slow to progress and highlight where contributions need to be strengthened (<i>reports to IB</i>)</li> <li>Evidence through external review and IB that they are driving the improvement agenda and provide effective leadership. (<i>Review</i>)</li> <li>There is evidence through meeting minutes of effective challenge and scrutiny at Member, Director and IB levels. (<i>Audit</i>)</li> <li>There is evidence through meeting minutes and action log of effective management oversight of notable/complex cases.</li> <li>Working protocols and service level agreement (Legal services) reviewed, revised, and understood by each relevant part of the council.</li> <li>Effective monitoring systems in place to oversee effectiveness and impact of working protocols</li> </ul>		
LG2	Effective governance, accountability and scrutiny	Solicitor to the council	Implement an accountability structure including leader, lead member, CEX and DCS, to include line of sight system from service to the CX/Leader and ensure the scrutiny function is operating effectively	<ul style="list-style-type: none"> <li>Permanent leadership team in place. (<i>data</i>)</li> <li>Accountability system to Leader and Chief Exec, Improvement Board, and DfE adviser in place. They report positively that the systems are working and are achieving the required change. (<i>Voice, reports to IB</i>)</li> <li>The council highlights those objectives which are slow to progress and highlight where contributions need to be strengthened (<i>reports to IB</i>)</li> <li>Evidence through external review and IB that they are driving the improvement agenda and provide effective leadership. (<i>Review</i>)</li> <li>There is evidence through meeting minutes of effective challenge and scrutiny at Member, Director and IB levels. (<i>Audit</i>)</li> </ul>	1 June 2021	30 June 2021

Leadership and Governance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
				<ul style="list-style-type: none"> <li>• There is evidence through meeting minutes and action log of effective management oversight of notable/complex cases.</li> <li>• Working protocols and service level agreement (Legal services) reviewed, revised, and understood by each relevant part of the council.</li> <li>• Effective monitoring systems in place to oversee effectiveness and impact of working protocols</li> </ul>		
LG2	Effective governance, accountability and scrutiny	Solicitor to the council	Establish systems and processes to have management oversight of notable/complex cases by service, legal and communications, including establishment of a critical case log	<ul style="list-style-type: none"> <li>• Permanent leadership team in place. <i>(data)</i></li> <li>• Accountability system to Leader and Chief Exec, Improvement Board, and DfE adviser in place. They report positively that the systems are working and are achieving the required change. <i>(Voice, reports to IB)</i></li> <li>• The council highlights those objectives which are slow to progress and highlight where contributions need to be strengthened <i>(reports to IB)</i></li> <li>• Evidence through external review and IB that they are driving the improvement agenda and provide effective leadership. <i>(Review)</i></li> <li>• There is evidence through meeting minutes of effective challenge and scrutiny at Member, Director and IB levels. <i>(Audit)</i></li> <li>• There is evidence through meeting minutes and action log of effective management oversight of notable/complex cases.</li> <li>• Working protocols and service level agreement (Legal services) reviewed, revised, and understood by each relevant part of the council.</li> <li>• Effective monitoring systems in place to oversee effectiveness and impact of working protocols</li> </ul>	1 June 2021	Completed

Leadership and Governance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
LG2	Effective governance, accountability and scrutiny	Solicitor to the council	Ensure legal services provide consistent and clear legal advice to the directorate through the provision of a clear joint working protocol and service level agreement that defines the client advisor relationship	<ul style="list-style-type: none"> <li>Permanent leadership team in place. <i>(data)</i></li> <li>Accountability system to Leader and Chief Exec, Improvement Board, and DfE adviser in place. They report positively that the systems are working and are achieving the required change. <i>(Voice, reports to IB)</i></li> <li>The council highlights those objectives which are slow to progress and highlight where contributions need to be strengthened <i>(reports to IB)</i></li> <li>Evidence through external review and IB that they are driving the improvement agenda and provide effective leadership. <i>(Review)</i></li> <li>There is evidence through meeting minutes of effective challenge and scrutiny at Member, Director and IB levels. <i>(Audit)</i></li> <li>There is evidence through meeting minutes and action log of effective management oversight of notable/complex cases.</li> <li>Working protocols and service level agreement (Legal services) reviewed, revised, and understood by each relevant part of the council.</li> <li>Effective monitoring systems in place to oversee effectiveness and impact of working protocols</li> </ul>	1 July 2021	30 Nov 2021
LG2	Effective governance, accountability and scrutiny	Solicitor to the council	Undertake a review of constitution to ensure that the partnership boards are reflected correctly	<ul style="list-style-type: none"> <li>Permanent leadership team in place. <i>(data)</i></li> <li>Accountability system to Leader and Chief Exec, Improvement Board, and DfE adviser in place. They report positively that the systems are working and are achieving the required change. <i>(Voice, reports to IB)</i></li> <li>The council highlights those objectives which are slow to progress and highlight where contributions need to be strengthened <i>(reports to IB)</i></li> </ul>	1 July 2021	30 Nov 2021

Leadership and Governance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
				<ul style="list-style-type: none"> <li>Evidence through external review and IB that they are driving the improvement agenda and provide effective leadership. <i>(Review)</i></li> <li>There is evidence through meeting minutes of effective challenge and scrutiny at Member, Director and IB levels. <i>(Audit)</i></li> <li>There is evidence through meeting minutes and action log of effective management oversight of notable/complex cases.</li> <li>Working protocols and service level agreement (Legal services) reviewed, revised, and understood by each relevant part of the council.</li> <li>Effective monitoring systems in place to oversee effectiveness and impact of working protocols</li> </ul>		
LG3	Corporate Parenting	Assistant Director Corporate Parenting	<b>Corporate Parenting:</b> Review and redesign the corporate parenting function to include a new strategy and awareness of Corporate Parenting role and commitments and a training programme for all Members and staff.	<ul style="list-style-type: none"> <li>A robust, up to date corporate parenting strategy is in operation. <i>(review)</i></li> <li>There is evidence through meeting minutes of effective discussion, decision making, challenge and scrutiny in meetings. <i>(Audit)</i></li> <li>Members and staff are able to talk about their roles as corporate parents.</li> <li><i>Children &amp; young people report that they are listened to and action is taken to improve their lived experience. (Voice)</i></li> </ul>	1 Sept 2021	31 Oct 2021
LG4	Improvement progress and reporting	Chief Executive	<b>Effective governance, accountability, and scrutiny at Council level</b> Establish an Improvement Board, appoint DfE advisor and Board Chair <i>(Improvement Notice)</i>	<ul style="list-style-type: none"> <li>Permanent leadership team in place. <i>(data)</i></li> <li>Accountability system to Leader and Chief Exec, Improvement Board, and DfE adviser in place. They report positively that the systems are working and are achieving the required change. <i>(Voice, reports to IB)</i></li> <li>The council highlights those objectives which are slow to progress and highlight where contributions need to be strengthened <i>(reports to IB)</i></li> </ul>	14 June 2021	30 June 2021

Leadership and Governance						
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				<ul style="list-style-type: none"> <li>Evidence through external review and IB that they are driving the improvement agenda and provide effective leadership. <i>(Review)</i></li> <li>There is evidence through meeting minutes of effective challenge and scrutiny at Member, Director and IB levels. <i>(Audit)</i></li> <li>There is evidence through meeting minutes and action log of effective management oversight of notable/complex cases.</li> <li>Working protocols and service level agreement (Legal services) reviewed, revised, and understood by each relevant part of the council.</li> <li>Effective monitoring systems in place to oversee effectiveness and impact of working protocols</li> </ul>		
LG5	Development of an operational plan	Director of Children and Families	<p><b>Effective governance, accountability, and scrutiny at Council level</b></p> <p>Maintain an up-to-date record of progress against the improvement plan and reports to the improvement board include data, analysis and recommendations supported by evidence of the impact of improvements on the quality of practice and experience of children and families <i>(Improvement Notice)</i></p>	<ul style="list-style-type: none"> <li>Permanent leadership team in place. <i>(data)</i></li> <li>Accountability system to Leader and Chief Exec, Improvement Board, and DfE adviser in place. They report positively that the systems are working and are achieving the required change. <i>(Voice, reports to IB)</i></li> <li>The council highlights those objectives which are slow to progress and highlight where contributions need to be strengthened <i>(reports to IB)</i></li> <li>Evidence through external review and IB that they are driving the improvement agenda and provide effective leadership. <i>(Review)</i></li> <li>There is evidence through meeting minutes of effective challenge and scrutiny at Member, Director and IB levels. <i>(Audit)</i></li> <li>There is evidence through meeting minutes and action log of effective management oversight of notable/complex cases.</li> <li>Working protocols and service level agreement (Legal services) reviewed, revised,</li> </ul>	14 June 2021	Review monthly

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Leadership and Governance						
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				<p>and understood by each relevant part of the council.</p> <ul style="list-style-type: none"> <li>Effective monitoring systems in place to oversee effectiveness and impact of working protocols</li> </ul>		

Workforce						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
W1	Workforce capacity and development	Director of children and families	<p><b>Children's Services organisational structure and effectiveness:</b> Review and implement a new interim transitional service structure, to include feedback from staff</p>	<ul style="list-style-type: none"> <li>A revised structure is in place which delivers adequate staffing at all levels to deliver safe and effective services (<i>review</i>)</li> <li>A revised workforce strategy (including recruitment and retention) is in place with a 'strategy into action' plan alongside it.</li> <li>A revised recruitment and retention strategy and plan is in place Caseloads are within agreed parameters (<i>data, voice</i>)</li> <li>Children have fewer changes of social worker (<i>data</i>)</li> <li>The organisational structure operates effectively to support practice (<i>IB, review, voice of staff</i>)</li> <li>Job descriptions have been reviewed and a job family outline developed to support career pathways</li> <li>Staff report they have a clear career pathway that allows them to stay and progress their career in Herefordshire (<i>voice</i>)</li> <li>We are more informed about why staff are thinking of leaving us or do leave; this can inform improvements</li> </ul>	1 June 2021	31 July 2021

Workforce						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
W1	Workforce capacity and development	Director of children and families	Review and take necessary remedial action to address identified shortfalls in case-holding capacity for social workers, including NQSWs, to allow them to respond effectively to children in need of help and protection. <i>(OfstedFV21) (Priority Action)</i>	<ul style="list-style-type: none"> <li>A revised structure is in place which delivers adequate staffing at all levels to deliver safe and effective services <i>(review)</i></li> <li>A revised workforce strategy (including recruitment and retention) is in place with a 'strategy into action' plan alongside it.</li> <li>A revised recruitment and retention strategy and plan is in place Caseloads are within agreed parameters <i>(data, voice)</i></li> <li>Children have fewer changes of social worker <i>(data)</i></li> <li>The organisational structure operates effectively to support practice <i>(IB, review, voice of staff)</i></li> <li>Job descriptions have been reviewed and a job family outline developed to support career pathways</li> <li>Staff report they have a clear career pathway that allows them to stay and progress their career in Herefordshire <i>(voice)</i></li> <li>We are more informed about why staff are thinking of leaving us or do leave; this can inform improvements</li> </ul>	1 August 2021	31 October 2021
W1	Workforce capacity and development	Director of children and families	Coordinate and publicise career progression pathways for all staff	<ul style="list-style-type: none"> <li>A revised structure is in place which delivers adequate staffing at all levels to deliver safe and effective services <i>(review)</i></li> <li>A revised workforce strategy (including recruitment and retention) is in place with a 'strategy into action' plan alongside it.</li> <li>A revised recruitment and retention strategy and plan is in place Caseloads are within agreed parameters <i>(data, voice)</i></li> <li>Children have fewer changes of social worker <i>(data)</i></li> <li>The organisational structure operates effectively to support practice <i>(IB, review, voice of staff)</i></li> </ul>	1 Sept 2021	31 Dec 2021

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Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
				<ul style="list-style-type: none"> <li>Job descriptions have been reviewed and a job family outline developed to support career pathways</li> <li>Staff report they have a clear career pathway that allows them to stay and progress their career in Herefordshire (<i>voice</i>)</li> <li>We are more informed about why staff are thinking of leaving us or do leave; this can inform improvements</li> </ul>		
W1	Workforce capacity and development	Director of children and families	Strengthen the Social Work Academy and support for NQSWs and students	<ul style="list-style-type: none"> <li>Staff report that they feel well supported by the Social Work Academy and data evidences uptake of provision.</li> </ul>	30 Sept 2021	30 Nov 2021
W1	Workforce capacity and development	Director of children and families	Skills and competencies: Undertake an analysis of current skill levels and role function of staff and team managers to inform workforce training and development plan and delivery.	<ul style="list-style-type: none"> <li>Analysis undertaken and recommendations inform workforce development strategy</li> <li>Workforce development strategy in place</li> <li>Workforce development programme in place, with good attendance and evaluation evidence increased skills and competencies of staff. (Review, voice of staff)</li> <li>Staff have the technical knowledge and skills required to effectively perform their roles – they can make clear assessment, plans and drive through change in families to impact on outcomes positively (audit, review)</li> <li>All learning reflects the Council's values</li> <li>Managers lead the improvement in their teams</li> </ul>	31 July 2021	30 Sept 2021
W1	Workforce capacity and development	Director of children and families	Develop workforce and training development plan based on findings of above, and other learning from reviews, audits, etc.	<ul style="list-style-type: none"> <li>Analysis undertaken and recommendations inform workforce development strategy</li> <li>Workforce development strategy in place</li> <li>Workforce development programme in place, with good attendance and evaluation evidence increased skills and competencies of staff. (Review, voice of staff)</li> <li>Staff have the technical knowledge and skills required to effectively perform their roles –</li> </ul>	30 Sept 2021	30 Nov 2021

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				<p>they can make clear assessment, plans and drive through change in families to impact on outcomes positively (audit, review)</p> <ul style="list-style-type: none"> <li>All learning reflects the Council's values</li> <li>Managers lead the improvement in their teams</li> </ul>		
W1	Workforce capacity and development	Director of children and families	Through the Academy, deliver systemic practice learning and development offer including bespoke core skills training for all staff. Generic training will be delivered outside of the Academy	<ul style="list-style-type: none"> <li>Analysis undertaken and recommendations inform workforce development strategy</li> <li>Workforce development strategy in place</li> <li>Workforce development programme in place, with good attendance and evaluation evidence increased skills and competencies of staff. (Review, voice of staff)</li> <li>Staff have the technical knowledge and skills required to effectively perform their roles – they can make clear assessment, plans and drive through change in families to impact on outcomes positively (audit, review)</li> <li>All learning reflects the Council's values</li> <li>Managers lead the improvement in their teams</li> </ul>	1 Oct 2021	Ongoing
W1	Workforce capacity and development	Director of children and families	Team managers are being supported /trained /understand requirements in having oversight and grip of progression of children's plans – including effective supervision. Manager training <i>OfstedFV21 (Priority Action)</i>	<ul style="list-style-type: none"> <li>Analysis undertaken and recommendations inform workforce development strategy</li> <li>Workforce development strategy in place</li> <li>Workforce development programme in place, with good attendance and evaluation evidence increased skills and competencies of staff. (Review, voice of staff)</li> <li>Staff have the technical knowledge and skills required to effectively perform their roles – they can make clear assessment, plans and drive through change in families to impact on outcomes positively (audit, review)</li> <li>All learning reflects the Council's values</li> <li>Managers lead the improvement in their teams</li> </ul>	1 Oct 2021	Ongoing

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Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
W1	Workforce capacity and development	Director Children and Families	Develop quality assurance role for Independent Reviewing Officer and Child Protection Chairs. Improve role of IRO/CP chair in oversight and challenge of plans, using dispute resolution appropriately.	<ul style="list-style-type: none"> <li>Quality assurance role is understood and IRO and CP Chairs footprint is evident, consistent, and drives children's plan</li> </ul>	1 Aug 2021	31 Jan 2022
W2	Employee Engagement	Assistant Director People	<b>Employee wellbeing:</b> Undertake analysis of current engagement and morale of the staff as baseline for improvements	<ul style="list-style-type: none"> <li>We understand our level of staff engagement to be able to measure improvement</li> <li>Staff drop-in sessions and other communication channels are used positively by staff to engage with the improvement journey</li> <li>Staff surveys tell us that they are informed and engaged appropriately. <i>(Voice)</i></li> <li>Turnover and sickness rates are reduced. <i>(data)</i></li> <li>In the annual staff survey, X% of staff state that they are content <i>(data, voice)</i></li> <li>40% + of registered social workers complete the annual Health Check</li> <li>An employee experience strategy is in place and accessible for all staff</li> </ul>	1 Sept 2021	31 Oct 2021
W2	Employee Engagement	Assistant Director People	Develop an employee wellbeing programme with staff reference groups	<ul style="list-style-type: none"> <li>We understand our level of staff engagement to be able to measure improvement</li> <li>Staff drop-in sessions and other communication channels are used positively by staff to engage with the improvement journey</li> <li>Staff surveys tell us that they are informed and engaged appropriately. <i>(Voice)</i></li> <li>Turnover and sickness rates are reduced. <i>(data)</i></li> <li>In the annual staff survey, X% of staff state that they are content <i>(data, voice)</i></li> <li>40% + of registered social workers complete the annual Health Check</li> </ul>	1 Sept 2021	31 Oct 2021

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				<ul style="list-style-type: none"> <li>An employee experience strategy is in place and accessible for all staff</li> </ul>		
W2	Employee Engagement	Assistant Director People	Undertake the social worker annual health check	<ul style="list-style-type: none"> <li>We understand our level of staff engagement to be able to measure improvement</li> <li>Staff drop-in sessions and other communication channels are used positively by staff to engage with the improvement journey</li> <li>Staff surveys tell us that they are informed and engaged appropriately. <i>(Voice)</i></li> <li>Turnover and sickness rates are reduced. <i>(data)</i></li> <li>In the annual staff survey, X% of staff state that they are content <i>(data, voice)</i></li> <li>40% + of registered social workers complete the annual Health Check</li> <li>An employee experience strategy is in place and accessible for all staff</li> </ul>	1 Sept 2021	1 Dec 2021
W3	Recruitment	Director of children and families	Design and implement a revised workforce strategy to support our vision and values, new ways of working, structures that are fit for purpose and manageable caseloads	<ul style="list-style-type: none"> <li>A revised structure is in place which delivers adequate staffing at all levels to deliver safe and effective services <i>(review)</i></li> <li>A revised workforce strategy (including recruitment and retention) is in place with a 'strategy into action' plan alongside it.</li> <li>A revised recruitment and retention strategy and plan is in place Caseloads are within agreed parameters <i>(data, voice)</i></li> <li>Children have fewer changes of social worker <i>(data)</i></li> <li>The organisational structure operates effectively to support practice <i>(IB, review, voice of staff)</i></li> <li>Job descriptions have been reviewed and a job family outline developed to support career pathways</li> </ul>	1 July 2021	31 Dec 2021

Workforce						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
				<ul style="list-style-type: none"> <li>Staff report they have a clear career pathway that allows them to stay and progress their career in Herefordshire (<i>voice</i>)</li> <li>We are more informed about why staff are thinking of leaving us or do leave; this can inform improvements</li> </ul>		
W3	Recruitment	Director of children and families	<p><b>Create and sustain a permanent workforce:</b> Develop and implement a recruitment and retention strategy, ensuring a specific focus on Team Managers and appropriate staff capacity and skill mix (<i>OfstedFV21</i>) (<i>Priority Action</i>)</p>	<ul style="list-style-type: none"> <li>A revised structure is in place which delivers adequate staffing at all levels to deliver safe and effective services (<i>review</i>)</li> <li>A revised workforce strategy (including recruitment and retention) is in place with a 'strategy into action' plan alongside it.</li> <li>A revised recruitment and retention strategy and plan is in place Caseloads are within agreed parameters (<i>data, voice</i>)</li> <li>Children have fewer changes of social worker (<i>data</i>)</li> <li>The organisational structure operates effectively to support practice (<i>IB, review, voice of staff</i>)</li> <li>Job descriptions have been reviewed and a job family outline developed to support career pathways</li> <li>Staff report they have a clear career pathway that allows them to stay and progress their career in Herefordshire (<i>voice</i>)</li> <li>We are more informed about why staff are thinking of leaving us or do leave; this can inform improvements</li> </ul>	1 Sept 2021	31 Dec 2021

Quality and Performance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
QP1	Quality and pace of decision making	Director Children and Families	<b>Supervision:</b> Review, revise and implement an interim amended supervision policy that is relevant for specific functions, including leaders	<ul style="list-style-type: none"> <li>Revised supervision policy in place.</li> <li>All staff across the directorate receive monthly supervision that is reflective and impactful. <i>(data, audit, external scrutiny tells us we are getting it right)</i>To include a performance supervision data target</li> <li>Quality of supervision and recording improves leading to children's cases progressing in a timely manner and delay being reduced QA, <i>audit, external scrutiny (reviews, inspections, monitoring visits etc.)</i> ((OfstedFV21) (Priority Action)</li> </ul>	1 June 2021	31 July 2021
QP1	Quality and pace of decision making	Director Children and Families	Develop a new supervision policy and toolkit to support managers delivering effective and reflective supervision (OfstedFV21) (Priority Action)	<ul style="list-style-type: none"> <li>Revised supervision policy in place.</li> <li>All staff across the directorate receive monthly supervision that is reflective and impactful. <i>(data, audit, external scrutiny tells us we are getting it right)</i>To include a performance supervision data target</li> <li>Quality of supervision and recording improves leading to children's cases progressing in a timely manner and delay being reduced QA, <i>audit, external scrutiny (reviews, inspections, monitoring visits etc.)</i> ((OfstedFV21) (Priority Action)</li> </ul>	1 Aug 2021	31 Oct 2021
QP1	Quality and pace of decision making	Director Children and Families	Set recording of supervision on personnel and child's files (OfstedFV21)	<p>a) Revised supervision policy in place.</p> <p>b) All staff across the directorate receive monthly supervision that is reflective and impactful. <i>(data, audit, external scrutiny tells us we are getting it right)</i>To include a performance supervision data target</p> <p>Quality of supervision and recording improves leading to children's cases progressing in a timely manner and delay being reduced QA, <i>audit, external scrutiny (reviews, inspections, monitoring visits etc.)</i> ((OfstedFV21) (Priority Action)</p>	1 Aug 2021	31 Oct 2021

Quality and Performance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
QP1	Quality and pace of decision making	Director Children and Families	Monitor frequency and effectiveness of case supervision <i>(OfstedFV21)</i> <i>(Priority Action)</i>	<ul style="list-style-type: none"> <li>Data and quality assurance activity demonstrate increased frequency and effectiveness of supervision.</li> </ul>	1 Aug 2021	ongoing
QP1	Quality and pace of decision making	Director Children and Families	Quality and pace of decision making: Ensure robust management oversight/ supervision and scrutiny of planning and decision making to avoid drift and delay for children within case work. <i>(OfstedFV21)</i> <i>(Priority Action)</i>	<ul style="list-style-type: none"> <li>Plans are focussed on the right areas to drive progress for CYP, risks are minimised and their circumstances improve as a result of robust intervention. <i>(audit, external scrutiny)</i></li> <li>Children's interventions are appropriately managed and actions to move between services is closely monitored and quality assured <i>(audit)</i></li> </ul>	May 2021	31 July 2021
QP1	Quality and pace of decision making	Director Children and Families	Implement a Quality Assurance, Performance & Engagement Board within Children's Services. (Operational Board) The Board will complement operational management action to address inconsistent and variable social work practice. <i>(OfstedFV21)</i> <i>(Priority Action)</i>	<ul style="list-style-type: none"> <li>Board in place.</li> <li>Evidence in meeting minutes and action log of grasp of existing and emerging performance issues, and monitoring of improvement plan.<i>(review)</i></li> </ul>	22 Sept 2021	30 Nov 2021
QP1	Quality and pace of decision making	Director Children and Families	Implement monitoring system to improve oversight and challenge of child protection plans. <i>(OfstedFV21)</i>	<ul style="list-style-type: none"> <li>Plans are effective in improving safety and generating improvements for children</li> <li>Children do not remain subject of plans for longer than they need to</li> </ul>	12 July 2021	31 Jan 2022
QP2	Quality assurance and performance	Assistant Director Quality Assurance, Safeguarding and Partnerships	Review pre-proceedings process and documentation (including letters) and implement identified improvements to achieve consistency. <i>(OfstedFV21)</i>	<ul style="list-style-type: none"> <li>Proceedings are considered at the right time, and regular planning meetings continue to set out actions to be taken, which are recorded and monitored</li> </ul>	12 July 2021	30 Sept 2021
QP2	Quality assurance and performance	Assistant Director Quality Assurance, Safeguarding and Partnerships	<b>Audit of current practice and cases:</b> Undertake an end-to-end diagnostic review of the quality of practice of children's social care services and	<ul style="list-style-type: none"> <li>Assurance that children are appropriately safeguarded, and any learning is fed into practice</li> <li>All cases will have been audited and actions identified will have been completed with a</li> </ul>	May 2021	31 Oct 2021

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Quality and Performance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
			Early Help to provide insight into current practice and what changes are required to strengthen the service.	<ul style="list-style-type: none"> <li>clear closing the loop mechanism to ensure actions are followed up.</li> <li>The services will be aware of the needs of all children and have clear plans to progress positive outcomes</li> </ul>		
QP2	Quality assurance and performance	Assistant Director Quality Assurance, Safeguarding and Partnerships	Review and quality assure all open cases at 11 June 2021 and take whatever action is required to strengthen casework.	<ul style="list-style-type: none"> <li>Assurance that children are appropriately safeguarded, and any learning is fed into practice</li> <li>All cases will have been audited and actions identified will have been completed with a clear closing the loop mechanism to ensure actions are followed up.</li> <li>The services will be aware of the needs of all children and have clear plans to progress positive outcomes</li> </ul>	11 June 2021	31 Dec 2021
QP2	Quality assurance and performance	Assistant Director Quality Assurance, Safeguarding and Partnerships	Develop and embed a new Quality Assurance framework, including audit tools that set out best practice and consistent view of practice and generate learning.	<ul style="list-style-type: none"> <li>Redesign of system based on the lived experience of the child</li> <li>Managers know what good looks like. Audit grades consistently show at least 80% of work is Requires Improvement or Good.</li> <li>Audit activity provides a clear line of oversight on the quality of SW practice and understand what actions to take to drive continual SW practice improvement</li> </ul>	11 June 2021	31 March 2022
QP2	Quality assurance and performance	Assistant Director Quality Assurance, Safeguarding and Partnerships	Develop a high-level Improvement Board / Management Board outcomes framework, dashboard and forward plan based on Improvement Plan measures of success	<ul style="list-style-type: none"> <li>Evidence base of progress in place and used to monitor impact of improvement activity.</li> </ul>	1 Oct 2021	30 Nov 2021
QP2	Quality assurance and performance	Assistant Director Quality Assurance, Safeguarding and Partnerships	Develop operational dynamic performance dashboards, performance clinics and training for managers to provide effective oversight of performance	<ul style="list-style-type: none"> <li>Performance dashboards &amp; performance clinics in place</li> </ul>	2 Aug 2021	31 Oct 2021

Quality and Performance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
QP2	Quality assurance and performance	Assistant Director Quality Assurance, Safeguarding and Partnerships	Monitor the management of complaints in respect of resolving the issue and contributing to organisational learning	<ul style="list-style-type: none"> <li>Reduce complaints by learning what needs to change. New complaints system implemented.</li> </ul>	13 Sept 2021	31 Dec 2021
QP2	Quality assurance and performance	Assistant Director Quality Assurance, Safeguarding and Partnerships	Secure resources to increase capacity for independent advocacy provision for C&YP and families, subject access requests and complaints including training to inform practice for those who need it.	<ul style="list-style-type: none"> <li>Proposals presented to management board for a decision. If implemented:               <ul style="list-style-type: none"> <li>Social care SARs completed in line with statutory timescales</li> <li>Increased number of young people supported by the children's rights and advocacy service</li> <li>Reduced number of children's complaints progressing to stage 2 and stage 3</li> </ul> </li> </ul>	13 Sept 2021	31 Oct 2021
QP3	Practice Development	Assistant Director, Quality Assurance, Safeguarding and Partnerships	Practice tools, standards, and policies: Refresh and further develop tools to facilitate practice improvement in collaboration with children, families and staff.	<ul style="list-style-type: none"> <li>Practice standards and a suite of tools are in place and in use by staff, who report they support practice with children and families (<i>voice, audit, external scrutiny</i>)</li> <li>The views of frontline staff and of children and young people will be taken into consideration in the development of practice and standards. (<i>Improvement Notice</i>)</li> <li>Assessments and plans meet or exceed required standards, children's needs are (<i>QA, audit &amp; external scrutiny</i>)</li> <li>Fewer re-referrals, second or subsequent child protection plans or children returning to care as children will get the right response first time (<i>data, performance, audit, external scrutiny</i>)</li> </ul>	1 Jan 2021	31 March 2022
QP3	Practice Development	Assistant Director, Quality Assurance, Safeguarding and Partnerships	Review and relaunch practice standards and recording protocols	<ul style="list-style-type: none"> <li>Practice standards and a suite of tools are in place and in use by staff, who report they support practice with children and families (<i>voice, audit, external scrutiny</i>)</li> </ul>	1 Sep 2021	31 Oct 2021

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Quality and Performance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
				<ul style="list-style-type: none"> <li>The views of frontline staff and of children and young people will be taken into consideration in the development of practice and standards. <i>(Improvement Notice)</i></li> <li>Assessments and plans meet or exceed required standards, children's needs are <i>(QA, audit &amp; external scrutiny)</i></li> <li>Fewer re-referrals, second or subsequent child protection plans or children returning to care as children will get the right response first time <i>(data, performance, audit, external scrutiny)</i></li> </ul>		
QP3	Practice Development	Assistant Director, Quality Assurance, Safeguarding and Partnerships	Develop and embed a dispute and escalation policy across the whole service including Early Help	<ul style="list-style-type: none"> <li>Practice standards and a suite of tools are in place and in use by staff, who report they support practice with children and families <i>(voice, audit, external scrutiny)</i></li> <li>The views of frontline staff and of children and young people will be taken into consideration in the development of practice and standards. <i>(Improvement Notice)</i></li> <li>Assessments and plans meet or exceed required standards, children's needs are <i>(QA, audit &amp; external scrutiny)</i></li> <li>Fewer re-referrals, second or subsequent child protection plans or children returning to care as children will get the right response first time <i>(data, performance, audit, external scrutiny)</i></li> </ul>	1 April 2021	30 June 2021
QP3	Practice Development	Assistant Director, Quality Assurance, Safeguarding and Partnerships	Review and update all policies and procedures where appropriate	<ul style="list-style-type: none"> <li>All policies and procedures reviewed as appropriate</li> </ul>	1 Sept 2021W!	30 Nov 2021
QP3	Practice development	Assistant Director, Quality Assurance,	Foster Carers: Review and re-issue Foster Carer's Handbook, and negotiate roles and responsibilities	<ul style="list-style-type: none"> <li>Increased choice of placements to meet the needs of children in our care <i>(data, audit)</i></li> </ul>	1 Sept 2021	30 Nov 2021

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Quality and Performance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
		Safeguarding and Partnerships		<ul style="list-style-type: none"> <li>Increase in number of in-house foster carers and carers who have the skills to care for children with complex needs (<i>data</i>)</li> <li>Matching of placements will be available to ensure needs are met and reduction in short term placements (<i>data</i>)</li> <li>Permanency will be achieved more effectively</li> </ul>		
QP3	Practice development	Assistant Director, Quality Assurance, Safeguarding and Partnerships	Model of Practice: Embed a strength based, child focused approach to practice through embedding “Signs of Safety” model of practice into practice, to include in induction of new staff.	<ul style="list-style-type: none"> <li>All staff have received training and fully understand how to utilise ‘signs of safety’ in their work. (<i>data, voice, audit, external scrutiny</i>)</li> <li>Practitioners across all services practice in a strengths-based model of care and support</li> <li>Better outcomes for children and families are achieved (<i>audit</i>)</li> </ul>	2 Jan 2020 (document launch Jan 2021)	31 March 2022
QP3	Practice development	Assistant Director, Quality Assurance, Safeguarding and Partnerships	Assessments, plans and planning: Develop the quality and consistency of assessments to ensure they identify needs and risks, are clear about what needs to happen (including by partners and parents) to inform robust plans that achieve identified outcomes for children and young people. (OfstedFV21) (Priority Action)	<ul style="list-style-type: none"> <li>Assessments and plans are SMART, consistently of a good quality and child centred. (<i>audit</i>)</li> <li>Children state that they feel involved in their assessments and plans. (<i>voice, audit</i>)</li> <li>Risk is identified and understood, and plans will effectively engage families to safely manage risk and support them to make required changes. (<i>audit</i>)</li> </ul>	12 July 2021	30 Nov 2021
QP3	Practice development	Assistant Director, Quality Assurance, Safeguarding and Partnerships	Ensure all children and young people actively participate in their assessments and plans, through purposeful and creative direct work, especially life story work. Ensure assessments and plans are child focused and reflect their lived experiences and the impact of these. These should include children with disabilities. (OfstedFV21) (Priority Action)	<ul style="list-style-type: none"> <li>Assessments and plans are SMART, consistently of a good quality and child centred. (<i>audit</i>)</li> <li>Children state that they feel involved in their assessments and plans. (<i>voice, audit</i>)</li> <li>Risk is identified and understood, and plans will effectively engage families to safely manage risk and support them to make required changes. (<i>audit</i>)</li> </ul>	12 July 2021	30 Nov 2021

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Quality and Performance						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
QP3	Practice development	Assistant Director, Quality Assurance, Safeguarding and Partnerships	Review and develop a participation delivery model that ensures children's engagement and participation ( <i>OfstedFV21</i> )	<ul style="list-style-type: none"> <li>Children are effectively engaged and there is an effective children in care and care leaver council/associate committees to help inform recruitment, retention and overall children's services delivery</li> <li>Children are consulted and their views inform service plans and decision making</li> </ul>	12 July 2021	31 Dec 2021
QP3	Practice development	Assistant Director, Quality Assurance, Safeguarding and Partnerships	Review and develop a participation delivery model for parents, carers and foster carers that ensures adults' engagement and participation	<ul style="list-style-type: none"> <li>Parent and carers are consulted and their views inform service plans and decision making</li> <li>There is an effective parent and carers' association/committee that engages senior leaders in support services for children</li> </ul>	12 July 2021	31 March 2022
QP3	Practice development	Assistant Director, Quality Assurance, Safeguarding and Partnerships	Develop and refresh a range of tools (inc. Signs of Safety) to capture the voice of the child in case records	<ul style="list-style-type: none"> <li>Children are effectively engaged and their views are evident in plans</li> <li>Children are consulted and their views inform service plans and decision making</li> </ul>	12 July 2021	31 March 2022
QP3	Practice development	Assistant Director, Quality Assurance, Safeguarding and Partnerships	Reinforce with staff good practice regarding working with neglect and use of the Graded Care Profile, and work with the HSCP to implement the Neglect strategy and action plan.	<ul style="list-style-type: none"> <li>Neglect is appropriately identified, assessed and addressed. (audit)</li> <li>Children are prevented from, or do not spend too long in neglectful situations</li> </ul>	1 August 2021	31 March 2022
QP4	Educational attainment	Assistant Director, Education	Develop and implement strategy to improve educational attainment of children in care and children on a child protection plan	<ul style="list-style-type: none"> <li>Children in care have better life chances</li> <li>More children in care move into higher education</li> <li>% children in care achieving expected grades (<i>data</i>)</li> </ul>	1 Sept 2021	31 October 2021
QP5	Pathway to adulthood (transitions)	Director Adults and Communities	<b>Transitions:</b> In conjunction with partners, review and improve transition to adulthood	<ul style="list-style-type: none"> <li>Young people experience a smooth transition into adulthood and do not experience a "cliff edge"</li> <li>Adult teams are fully sighted of young people moving into the adults system at the earliest possibility</li> </ul>	1 July 2021	30 Nov 2021

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Right help, Right Time						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
RH1	Prevention and early intervention	Assistant Director, safeguarding and family support	<b>Early Help:</b> Review existing early help and prevention strategy	<ul style="list-style-type: none"> <li>A revised Early Help service strategy, services structure and practice framework are in place.</li> <li>Feedback from children, families and professionals report an improvement in Early Help services. (<i>Voice, audit</i>) (<i>measure</i>)</li> <li>Children and families receive the right help at the right time with a focus on identifying and addressing issues at the earliest possibility (<i>audit, data</i>)</li> </ul>	1 Sept 2021	1 Oct 2021
RH1	Prevention and early intervention	Assistant Director, safeguarding and family support	Review and implement multi-agency service delivery model and structure	<ul style="list-style-type: none"> <li>Multi-agency delivery model agreed</li> <li><i>[Impact measures in development]</i></li> </ul>	1 Sept 2021	31 Oct 2021
RH1	Prevention and early intervention	Assistant Director, safeguarding and family support	Develop a multi-agency practice framework for Early Help	<ul style="list-style-type: none"> <li>Practice framework agreed</li> <li>Practice framework understood by partners</li> <li><i>[Impact measures in development]</i></li> </ul>	1 Sept 2021	31 Dec 2021
RH2	Talk Community	Assistant Director, Talk Community	<b>Talk Community:</b> Develop and utilise Talk Community Hubs to coordinate provision of information, advice and guidance and early intervention activity closer to home – to support self-help and maximise use of community sector	<ul style="list-style-type: none"> <li><i>[Actions and impact measures in development]</i></li> </ul>		
RH3	Commissioning	Assistant Director, All Ages Commissioning	<b>Commissioning:</b> a) Placements: Review and update Sufficiency Strategy and commissioning arrangements to ensure options and availability for care placements, prevention services and housing.	<ul style="list-style-type: none"> <li>Increased choice of placements to meet the needs of children in our care (<i>data, audit</i>)</li> <li>Increase in number of in-house foster carers and carers who have the skills to care for children with complex needs (<i>data</i>)</li> <li>Matching of placements will be available to ensure needs are met and reduction in short term placements (<i>data</i>)</li> <li>Permanency will be achieved more effectively</li> </ul>	1 June 2021	31 March 2021

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Partnerships						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
P1	Contextual safeguarding	Accountable officers across the statutory bodies (police, NHS, LA)	<b>Contextual safeguarding:</b> Agree and implement contextual safeguarding model (as an alternative to child protection) for adolescents facing risks outside the home (includes Peer on Peer abuse, Missing children and contextual safeguarding).	<ul style="list-style-type: none"> <li>Joined up seamless pathways and provision of service for all children and young people at risk of exploitation</li> <li>All partners will be aware of those at greatest risk, there will be easy and transparent access to support/advice and fast track pathways for children at highest risk</li> </ul>	1 July 2021	30 Nov 2021
P2	Children's Safeguarding Partnership	Assistant Director - Quality, Performance and Partnerships	<b>Contribute to the Safeguarding Children Partnership development plan:</b> To include a review of capacity and effectiveness of Safeguarding Partnership business unit and subsequent actions	<ul style="list-style-type: none"> <li>Role as statutory partner in SCP is undertaken and effective (<i>reports to IB</i>)</li> <li>Developments in partnership working are at pace and aligned to the LA's Children's Services improvement programme. (<i>Review</i>)</li> <li>Performance data evidence improvements (<i>Data, Audit, HSCP quality effectiveness reports</i>)</li> <li>All partners working within multi-agency settings or identified within plans follow the same practice standards so that the response to children is consistent. (<i>Audit</i>)</li> </ul>	1 April 2021	30 Nov 2021
P2	Children's Safeguarding Partnership	Assistant Director - Quality, Performance and Partnerships	Contribute to Safeguarding Partnership review and quality assurance of Multi agency referral form (MARF)	<ul style="list-style-type: none"> <li>A consistent framework for referral based on assessed risk – referrals will have appropriate information reducing need for families to re-tell stories and delays over lack of consent (<i>audit</i>)</li> <li>Improved consistency of quality of MARF and decision of making in MASH will ensure that children and young people received services in a timely way and proportionate to need (<i>audit</i>)</li> <li>Reduction in re-referrals (<i>data</i>)</li> </ul>	1 Sept 2021	31 Jan 2022
P2	Children's Safeguarding Partnership	Assistant Director - Quality, Performance and Partnerships	Embed the Herefordshire Early Help Offer to support partners to identify, assess and hold low level risk cases	<ul style="list-style-type: none"> <li>A consistent framework for referral based on assessed risk – referrals will have appropriate information reducing need for families to re-</li> </ul>	1 Sept 2021	31 Jan 2022

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Partnerships						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
				<p>tell stories and delays over lack of consent (<i>audit</i>)</p> <ul style="list-style-type: none"> <li>Improved consistency of quality of MARF and decision of making in MASH will ensure that children and young people received services in a timely way and proportionate to need (<i>audit</i>)</li> <li>Reduction in re-referrals (<i>data</i>)</li> </ul>		
P2	Children's Safeguarding Partnership	Assistant Director - Quality, Performance and Partnerships	Provide information, advice, guidance and support via the Early Help Hub where appropriate	<ul style="list-style-type: none"> <li>A consistent framework for referral based on assessed risk – referrals will have appropriate information reducing need for families to re-tell stories and delays over lack of consent (<i>audit</i>)</li> <li>Improved consistency of quality of MARF and decision of making in MASH will ensure that children and young people received services in a timely way and proportionate to need (<i>audit</i>)</li> <li>Reduction in re-referrals (<i>data</i>)</li> </ul>	1 Sept 2021	31 Jan 2022
P3	Multi agency training and development	Assistant Director - Quality, Performance and Partnerships	partnership training and development; shared understanding, and	<ul style="list-style-type: none"> <li>Role as statutory partner in SCP is undertaken and effective (<i>reports to IB</i>)</li> <li>Developments in partnership working are at pace and aligned to the LA's Children's Services improvement programme. (<i>Review</i>)</li> <li>Performance data evidence improvements (<i>Data, Audit, HSCP quality effectiveness reports</i>)</li> <li>All partners working within multi-agency settings or identified within plans follow the same practice standards so that the response to children is consistent. (<i>Audit</i>)</li> </ul>	1 April 2021	30 Nov 2021
P3	Multi agency training and development	Assistant Director - Quality, Performance and Partnerships	standards of assessments, plans and direct work with children and families.	<ul style="list-style-type: none"> <li>Role as statutory partner in SCP is undertaken and effective (<i>reports to IB</i>)</li> <li>Developments in partnership working are at pace and aligned to the LA's Children's Services improvement programme. (<i>Review</i>)</li> </ul>	1 April 2021	30 Nov 2021

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Partnerships						
Ref	Priority Area	SRO	Key Activity	What good looks like	Start Date	Due Date
				<ul style="list-style-type: none"> <li>Performance data evidence improvements (<i>Data, Audit, HSCP quality effectiveness reports</i>)</li> <li>All partners working within multi-agency settings or identified within plans follow the same practice standards so that the response to children is consistent. (<i>Audit</i>)</li> </ul>		
P4	Multi agency dataset	Assistant Director - Quality, Performance and Partnerships	Ensure robust programme of reporting in relation to private fostering	<ul style="list-style-type: none"> <li>Reporting in relation to private fostering is in place</li> <li>Service leaders using information to drive practice</li> </ul>	1 June 2021	31 Oct 2021
P5	Pathways to other services	Director of Public Health	b) Mental Health services: Work in partnership with the CCG to ensure appropriate access to mental health services / Child and Adolescent Mental Health Services (CAMHS)	<i>[Actions and impact measures in development]</i>		

## Appendix 1 – Glossary and Key

### 1.1 Current post holders

Job Title	Organisation	Current Postholder
Chief Executive	Herefordshire Council	Paul Walker
Lead member	Herefordshire Council	Councillor Diana Toynbee
Director of Children's Services	Herefordshire Council	Catherine Knowles
independent improvement advisor	Department for Education	Gladys Rhodes White
Chair - HSCP	Independent	Liz Murphy
Assistant Director Safeguarding & Family Support	Herefordshire Council	Sharmain Lawrence
Assistant Director Corporate Parenting	Herefordshire Council	Andrews Osei
Assistant Director Quality Assurance & Partnerships	Herefordshire Council	Matthew Sampson
Assistant Director Education, Development & Skills	Herefordshire Council	Ceri Morgan
Assistant Director All Ages Commissioning	Herefordshire Council	Ewen Archibald
Assistant Director Talk Community	Herefordshire Council	Amy Pitt
Assistant Director Corporate Support	Herefordshire Council	Natalia Silver
Principle Social Worker	Herefordshire Council	Salwa Farid
HR Business Partner	Herefordshire Council	Lorna Simpson
Children's Improvement Director	Herefordshire Council	Darryl Freeman
Leader of the Council	Herefordshire Council	Councillor David Hitchiner
Solicitor to the Council	Herefordshire Council	Claire Ward

## 1.2 Example of BRAG rating to be used in monitoring

<b>RED</b>	<p><b>Process:</b> Tasks not been completed or timescales slipped and need attention</p> <p><b>Impact</b> should start to be seen and measured, but are not met.</p>	<b>BLUE</b>	<p>Completed and impact evidenced, target achieved and this is likely to be sustained.</p>
<b>AMBER</b>	<p><b>Process:</b> Tasks are not fully on track but plans are in place to ensure progress by identifiable timescale</p> <p><b>Impact</b> can start to be measured but are yet to be demonstrable</p>	<b>GREY</b>	<p><b>Process:</b> Not started - action not scheduled to start in this period.</p> <p><b>Impact</b> not yet expected to be realised (i.e. actions in progress/not started).</p>
<b>GREEN</b>	<p><b>Process:</b> Tasks are progressing as expected and deemed to be on target</p> <p><b>Impact</b> of outcomes can be demonstrably measured</p>		

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## Appendix 2 – plan on a page

### Our plan on a page – Children’s Improvement Programme (2021-2024)

The following table summarises the vision and our ambition; the five primary work streams of the improvement plan and their priority areas of focus; the cross cutting activity; and our measures of success.

<b>Our Vision</b>	<b>All children and young people in Herefordshire feel safe, loved, and valued, and grow up with the confidence and skills to be the best they can be.</b>					
<b>Our ambition</b>	<b>Creating a child-centred county where children and young people are at the heart of everything we do</b>					
<b>Work streams</b>	<b>Leadership and Governance (LG)</b>	<b>Workforce (W)</b>	<b>Quality and Performance (QP)</b>	<b>Right Help, Right Time (RH)</b>	<b>Partnerships (P)</b>	
<b>Priority areas of focus:</b>	<ul style="list-style-type: none"> <li>Permanent leadership</li> <li>Effective governance, accountability and scrutiny</li> <li>Corporate Parenting</li> <li>Improvement progress reporting</li> <li>Service delivery models</li> <li>Operational Plan</li> </ul>	<ul style="list-style-type: none"> <li>Workforce capacity and development</li> <li>Employee engagement</li> <li>Retention and recruitment</li> <li>Career pathways</li> </ul>	<ul style="list-style-type: none"> <li>Quality and pace of decision making</li> <li>Quality assurance and performance frameworks</li> <li>Quality supervision</li> <li>Practice tools, standards, and policies</li> <li>Educational attainment</li> <li>Transitions</li> </ul>	<ul style="list-style-type: none"> <li>Prevention and Early help</li> <li>Talk Community – Children and Families</li> <li>Commissioning services</li> <li>Sufficiency Strategy</li> </ul>	<ul style="list-style-type: none"> <li>Contextual safeguarding</li> <li>Children’s Safeguarding Partnership</li> <li>Multi agency training and development</li> <li>Multi-agency dataset</li> <li>Pathways to other services</li> </ul>	
<b>Cross cutting activity</b>	<b>Valuing difference and culture</b>					
	<b>Delivering Service Transformation</b> – Creating an environment where excellent practice can thrive.					
	<b>Communication and engagement</b> - Participation strategy; Workforce strategy; and Communication and Engagement strategy.					
	<b>Enabling infrastructure</b> – Finance, HR, Digital and IT, Business Support, Systems, and Data.					
<b>Our success measures</b>	<b>What children and families tell us</b>	<b>What our staff tell us</b>	<b>What our partners tell us</b>	<b>Quantity indicators (performance data)</b>	<b>Quality indicators (audits, reviews)</b>	<b>Outcomes for children</b>

*All children and young people in Herefordshire feel safe, loved and valued and grow up with the confidence and skills to be the best they can be.*