READING BOROUGH COUNCIL

REPORT BY DIRECTOR OF CHILDREN, EDUCATION AND EARLY HELP SERVICES

TO:	ADULT SOCIAL CARE, CHILDREN'S SERVICES & EDUCATION COMMITTEE
DATE:	29 JUNE 2015 AGENDA ITEM: 8
TITLE:	SAFEGUARDING ACTIVITY REPORT & IMPROVEMENT PRIORITIES - QUARTER 4
LEAD COUNCILLOR:	COUNCILLOR GAVIN PORTFOLIO CHILDREN'S SERVICES
SERVICE:	CHILDREN'S SERVICES WARDS: ALL
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1.   PURPOSE OF REPORT AND EXECUTIVE SUMMARY

1.1   This report provides an update of the key activity areas for Quarter 4 (January 2015 to March 2015) within Children's Social Care as reported through our internal performance reporting which is updated on a month by month basis. This is then reported in the National Returns all local authorities have to submit to the Department for Education (DfE) in July and August each year about the previous reporting year. Therefore all comparative and trend data is provisional pending validation locally and nationally.

1.2   Wherever possible a comparative figure either nationally, statistical neighbour, England average or previously recorded Reading only data has been included however as the report is based on provisional data it cannot be analysed against a consistent set of comparator data until later in the year.

1.3   This report also reflects developments required, as identified by a number of reviews, which have been carried out recently and external audits to inform improvement priorities, future practice and service delivery.

2.	RECOMMENDED ACTION:
2.1	That the report is scrutinised and noted.
2.2	That the revised Improvement Plan attached to the report is approved.
2.3	That Members agree to establish an Improvement Board to oversee the developments of the service.

3. OVERVIEW

3.1 This report is a summary of Reading's performance since the last report for (Quarter 4 January 2015 to March 2015) and highlights areas for priority and scrutiny. Based on the current provisional data it also considers key performance for Children in Need and Looked after Children against previous year's performance. Benchmarking against other authorities including Statistical Neighbours for 2014/15 year end performance will be possible once this data is published later in the year.

3.2 The report also includes information about the findings of recent work undertaken to improve services and on auditing activity undertaken internally by staff and that carried out by an external consultant.

4. CHILDREN IN NEED/ CHILD PROTECTION

4.1 The analysis of the data in the Quality and Management of Information for Children Services report for March 2015 (purple book), Annex A from the Ofsted Inspection Framework and schedule of audits has provided evidence of strengths and weakness in several areas of practice.

4.2 Early Help is a developing service with a positive trajectory in relation to increased referrals from a range of services and a reduced level of repeat referrals. There were 294 Early Help Referrals in this final quarter compared to 257 in the previous quarter which is reflective of a steady increase throughout the year. Quarter 2 had 128 referrals. Regular team around the child meetings take place and performance information indicates that the service is making an impact for children and families. There is evidence of step up processes taking place and cases being escalated by Early Help managers who hold a good grip on cases. All referrals from the Early Help Service now come through MASH to ensure a greater consistency of thresholds. This shows the positive impact of the work in Early Help to simplify processes for referral and will be further built on by the work currently ongoing in respect of the Early Help Pathways.

Similarly Common Assessments Completed has also shown a rise to 108 this quarter (66 in Quarter 2)

4.3 The number of referrals to Children's Social Care has remained similar to the previous quarter at 423 (438 in the previous quarter) with the majority of referrals (113) originating from the Police and schools being the second highest referrer at 95. Domestic abuse has remained the highest reason for referral.

NUMBER OF REFERRALS TO CSC	
YEAR	No of Referrals
2011-12	2089
2012-13	1681
2013-14	1732
2014 - 15	1598

4.4 The percentage of referrals converting in to Assessments has remained in the mid 50 % range during this quarter. This is an area which has recently been audited both as part of the Ofsted preparation to check if decision making is in line with thresholds and as preparation for the fully integrated MASH. The auditing has highlighted that some MASH recommendations for assessment have been overturned in Access and Assessment and a new process has been put in place to ensure this practice does not continue unless appropriate. Subsequently, it would be expected that this percentage will rise in the next reporting year. The Early Help coordinator has been successfully appointed and is now in post and will assist in improving 'step up' and 'step down' work. The current Improvement Plan has had additional actions added specific to Access and Assessment arising from the auditing activity.

% OF REFERRALS GOING ON ASSESSMENT	
YEAR	ASSESSMENT %
2011-12	94.3%
2012-13	96.0%
2013-14	83.0%
2014-15	59.26%

4.5 At Quarter 4, 72% of single assessments were completed within timescales which is below the South East benchmarking figure of 78.2% which was last available as at December 2014. The recent review has shown that practice of the Access and Assessment (A and A) team is not always consistent although there are examples of thorough decision making. In some cases which have been audited it was evident that insufficient information

gathering had taken place and greater analysis was required. This is being remedied with greater oversight by the service and team managers. Where cases were identified which have raised concerns these have now been re-opened and subject to direct senior management oversight to ensure the safety and well-being of children. Additional interim staff have been recruited to improve the completion of assessments. In addition, the Improvement Plan has a section which addresses the throughput and quality of assessments.

4.6 Children's Services has a duty under Section 47 of the Children Act 1989 to conduct enquiries where there is reasonable cause to suspect that a child is suffering, or likely to suffer, significant harm. This enables it to decide whether it should take any action to safeguard and promote the welfare of the child. The decision to initiate S47 enquiries is made in conjunction with the Police in strategy discussions. In a recent review it has been identified that in 4 out of 5 cases looked at there was a delay in completing S47 enquiries and holding strategy meetings. However, the number of S47 enquiries in the last quarter rose slightly to 138 compared to the 133 in the previous quarter.

SECTION 47	
YEAR	Number of S47 initiated
2011-12	700
2012-13	618
2013-14	557
2014-15	577

4.7 A mixed picture has emerged over the quarter about Strategy meetings as they do not consistently involve all partner agencies. The quality and consistency of strategy discussions is an ongoing piece of work with Thames Valley Police and the other Berkshire local authorities. The need to routinely involve health in strategy discussions needs to be strengthened and a set of agreed minimum standards is currently in the process of being agreed to address this.

4.8 The number of S47 enquires recommending an Initial Child Protection Conferences (ICPC) increased in the last Quarter to 84 from 52 in the previous Quarter. Reading's percentage at 67.3% (March 2015) is lower than the South East Benchmark figure of 72.7 % (available as at December 2014) but has been increasing and is reflected in the rising number of Children on a Child Protection Plan. In the year to date, 87.8% of Initial Child Protection Conferences were held within the 15 day national target compared to 77.46% of Statistical Neighbours in 2014.

S47 recommending Initial Conference	
YEAR	Number of ICPC
2011-12	222
2012-13	161
2013-14	226
2014-15	301

4.9   At the end of Quarter 4, 203 children and young people had Child Protection Plans. This is an increase of 16 children from 187 the last Quarter Of those children, 47.8% had plans due to neglect; 7.4% due to physical abuse; 14.8%% due to sexual abuse and 30%% due to emotional abuse. A multi-agency neglect audit has been completed and the findings will be considered by the Reading Safeguarding Children's Board to inform a Neglect Strategy. The strategy will need to be adopted by Reading Borough Council and therefore will be presented to ACE in November 2015.

4.10   Child Protection Plans lasting two years or more continue to decrease and at the end of Quarter 4, 7 children had been on a plan over 2 years. There is an audit cycle embedded which includes auditing of Child Protection Plans that are of 18 months plus duration. The average time children and young people had Child Protection Plans in Q4 was under 9 months. Over this reporting year 55 (21.7%) children were subject to a plan for a second or subsequent time. This compares with 17.3% for statistical neighbours.

CHILD PROTECTION PLAN LASTING 2 YEARS OR MORE		
YEAR	Number	%
2011-12	16	8.20%
2012-13	18	8.90%
2013-14	17	8.50%
2014/15	12	6.2%

4.11   Child Protection Visiting: Pan Berkshire procedures set the visiting pattern at no more than 10 working days for children on Child Protection Plans to be seen by the social worker. In March 2015, 95% of Child Protection visits were completed within timescale – this shows a continued trend of improvement. However this is a local indicator and the nationally reported indicator counts the number of children who have had 100% of visits according to their plan. This data will be finalised for submission to DfE ready in July 2015. The provisional data for this national indicator is showing a much lower of visits completed but this is yet to be validated.

5.   LOOKED AFTER CHILDREN

5.1   At Quarter 4, 2015 there were 207 children and young people Looked After which is an increase on the last quarter by 5. This number which represents

59.65 children per 10000 population bringing Reading below the statistical neighbour average of 65.5.

Year	Total children
2012	237
2013	227
2014	208
2015	207

5.2 Of our Looked after Children, 105 are male and 102 being female. 104 of these children are noted to have special educational needs. 148 are white and 59 are from ethnic groups. (71% white / 29% ethnic groups). This varies from school census data which shows a 50/50 split and raises questions about whether the BME population is under represented and why.

5.3 At Quarter 4, the profile of our Looked After Children demonstrated that 40 were aged 4 and under; with 121 aged between 5 and 15 and 42 aged 16 and over plus 4 unaccompanied asylum seeking children. This is consistent with our profile over the last reporting year.

5.4 In March 2015 there were 27% of children in Reading Borough Council placements, excluding Family & Friends. The use of Independent Fostering Agencies over the same period was 37%.

5.5 Looked after Children's Sufficiency Statement Strategy 2015-2017. Will be considered by ACE on 29th June 2015. The document demonstrates how we plan to "take steps that secure, as far as reasonably practicable, sufficient accommodation within the authority's area which meets the needs of children that the local authority is looking after, and whose circumstances are such that it would be consistent with their welfare for them to be provided with accommodation that is in the local authority's area ('the sufficiency duty'). The Strategy provides the analytical basis by which deficits in suitable accommodation for all children in care can be addressed. This includes Adoption and Fostering targets and associated marketing activity. This document is critical to inform commissioning intentions for future local accommodation provision to meet the needs of Looked after Children.

5.6 The lack of local placements in the Reading Borough Council area is demonstrated by the fact that 33% of our Looked after Children are placed more than 20 miles away from their home address. While this may be for a positive reason (such as children in adoptive placements or in specialist residential settings) this overall percentage figure must be reduced. It is important for children and young people to be local so that they can retain stability in education provision, receive local health services and remain in contact with their family and community when safe to do so.

Placement 3 -The percentage of looked after children at 31 March placed outside LA boundary and more than 20 miles from where they used to live			
Year	%	No. of children	Total children
2012	20.25%	48	237
2013	21.59%	49	227
2014	25.96%	54	208
2015	33%	61	207

5.7   74.7% of our children and young people are in stable placements (placements for 2 years plus or are placed for adoption). This compares favourably with the most recent South East Benchmark of 65% and Statistical Neighbour figure of 67.7% (as at Quarter 1). Locally this has risen from a figure of 65.8 % in April 2014. However, we also have a cohort of 18 children who have had 3 or more placements (8.7%). This compares favourably with the England average of 11% (as at 2013). However, Officers are mindful of children's needs for stability and will continue to closely monitor this cohort via our commissioning service and through the work of our Reviewing Team.

Placement 1 -The percentage of children looked after with three or more placements during the year ending 31 March			
Year	%	No.of children	Total children
2012	5.91%	14	237
2013	4.85%	11	227
2014	8.65%	19	211
2015	8.7%	18	207

6.0   CHILDREN LEAVING CARE

6.1   At Quarter 4 there were 64 young people entitled to services under the Children Leaving Care Act 2000 aged 19-21. This is a stable figure. There are 39.1% who are not in suitable employment, education or training which is slightly higher than the latest Statistical Neighbour benchmark of 39.0% Of the 64, 6 young people are in Higher Education and are supported via a bursary from the Local Authority. 51 out of 64 children (79.7%) were in suitable accommodation, this compares to the SN average of 80.74%. which is very close. The work of the leaving care team is being re-focused with more dedicated staff available to support this cohort of young people. Children's Social Care Team, Commissioning Team and Housing Team are working together to provide suitable accommodation for these vulnerable young people. Actions arising from a review of the Leaving Care Team will feature in the Improvement Plan.

7.0   ADOPTION

7.1   Adoption Performance as evidenced by indicator A1 (the average time between a child entering care and moving in with its adoptive family) on the Adoption Scorecard, which is for children who have been adopted, indicates that the average time in 2014 was longer than in 2013. The recent Reading average over 3 years is 669 days against 628 which is the England average indicates poor performance. The Reading trajectory is not reflecting to a line in accordance with the England target. For A2 (the average time between a local authority recei*ving* court authority to place a child and the local authority deciding on a match to an adoptive family) is 286 days as of March 2015. This is higher than the national target of 120 days. The breakdown of indicator A3 (children who waited less than 14 months-426 days between entering care and moving in with their adoptive family) contains some children with considerably longer timescales in excess of 500 days. Diagnostic work delivered by the children's charity CORAM, which is cost free to the authority, is to be carried out. This will profile the children placed for adoption compared with the children looked after, those currently needing adoptive families and those who the service has not been able to place. An analysis of the adopters' journey will also be completed, as will an analysis of the unit cost for placing children. This work will provide a strong foundation for the improved permanency outcomes for children and put in place a new approach to planning, family finding, timeliness and keeping the child's journey at the centre of this work. Actions arising from the diagnostic will be part of the Improvement Plan.

Adoption 1 -The percentage of children who ceased to be looked after who were adopted			
Year	%	No. adopted	Total ceased
2012	19.59%	19	97
2013	18.95%	18	95
2014	27.37%	26	95
2015	24%	19	79

Adoption 2 - The percentage of children who ceased to be looked after because of a special guardianship order			
Year	%	No. ceased to SGO	Total ceased
2012	13.40%	13	97
2013	16.84%	16	95
2014	17.89%	17	95
2014	20%	16	79

A1 - Average time between a child entering care and moving in with its adoptive family, for children who have been adopted (days)			
Year	Avg. days	No of days	No of children
2012	544.44	9880	18
2013	591.72	10651	18
2014	681.27	17713	26
2015	611	11,610	19

A2 - Average time between a local authority receiving court authority to place a child and the local authority deciding on a match to an adoptive family (days)			
Year	Avg. days	No of days	No of children
2012	222.06	3553	16
2013	242.31	3877	16
2014	325.96	8475	26
2015	286	5429	19

7.2 The data in the Adoption score card is affected by a legacy of delayed matching for some children and some placement orders. Work is now underway to revoke Placement Orders for children who have been professionally assessed as needing long term care but are unlikely to achieve adoption as a permanent outcome following a review of all children on a placement order.

7.3 There has been a significant increase in the number of Special Guardianship orders (SGO) which is positive as a permanent option for children. The cumulative total at the end of March 2015 is 16 which is a total of 20%

8.0 AUDIT AND QUALITY ASSURANCE ACTIVITY

8.1 Following on from previous reports presented to ACE, an audit plan remains in place and has been reviewed. Additional capacity has been added and has focused on cases which were identified through looking closely at our data (ranging from MASH to Access and Assessment contacts, missing children data, children recently admitted into care and children leaving care). Results from audits are discussed individually with teams, within team meetings and at quarterly quality assurance meetings. Individual, team and service learning needs are shared and action plans implemented at individual and team level.

8.2 The quarterly quality assurance and performance meetings consider quantitative data produced by the knowledge management service, qualitative information obtained from internal and external audit and

'softer' information from service user and social worker feedback as well as information from complaints and compliments

8.3 It is reported that Audit moderation meetings with managers and assistant managers occurs on a monthly basis giving managers the opportunity to discuss individual audit findings, to grade performance and to further develop an understanding of shared standards and 'what good looks like'. Audit moderation allows discussion of key standards and blocks to performance improvement. The meetings are valued by practitioners and improve competence at auditing and confidence in practice.

8.4 The audit process and moderation which is in place for Children's Social Care has been extended to the Children's Action Teams so Children's Services has one overarching methodology for auditing. Case mapping across teams is planned to further improve practice for the whole of the 'child's journey' across services. This work has been strengthened by bringing in a consultant to work alongside managers and to bring a national standards perspective to the findings.

8.5 In Quarter 4, there has been an increased focus on data quality, particularly the quality of recording on children's files in Social Work teams. This has been supported by use of the Annex A data required by Ofsted which maps a child's journey from Children in Need through Child Protection and Looked After Child status through to Adoption or Leaving Care as appropriate. Data is scrutinised and teams have been charged with correcting potential omissions and inaccuracies. This has resulted in a better understanding of both the flow of work through the system and the journey for individual children.

8.6 This work is has identified a number of cohorts of children's case files which have been specifically audited above the usual auditing work. These children's files have been scrutinised by a number of consultants and actions have been shared with social workers and managers to ensure accurate recording is on file and that work undertaken is evidenced and management oversight is visible to determine further work required to ensure the best outcomes for children.

8.7 Thirty cases have been chosen from Children in Need, Looked After Children and Child Protection cases to be audited by managers across the service and the results are currently being collated and analysed.

8.8 The Directorate over the last two years has commissioned an external auditor to carry out an audit of 6 cases every quarter. Six cases are examined in depth by an external auditor each quarter. This is a qualitative audit of the case file, supplemented by discussion with the social worker and manager.

8.9 Six cases were audited throughout March 2015. The cases were provided by random selection. Two cases were Child Protection cases (CP), one from

West Area and one from the South Area. Two were Looked After Children (LAC) cases, one in the Children and Young Person's disability Team and one in the South Area Team. Two were Child In Need (CIN) cases one in the Access and Assessment Team and one in the West Area team. One LAC and one CP case were graded as 2 (good) and one LAC and one CP case were graded as a 3 (adequate) requires improvement. Both CIN cases were graded as 3 (adequate) requires improvement with one described as low end good as it had four areas graded as (adequate) requires improvement and two as inadequate with no areas graded as good. No cases were graded as inadequate (require improvement) or excellent (outstanding). However further auditing of cases has revealed that significant work and training now needs to be done to secure more accurate auditing in line with national bench marking The analysis, themes and recommendations are arising from the audit are now more robust.

8.10   The system of auditing which has been used to date does not easily provide information on trends, performance trajectories or is it able to cross relate to other performance measures. Further development of the quality assurance framework is also needed to improve the profile of audit activity and to improve practice to a level which is consistently 'good'. A system now needs to be embedded in the new operating service model which will firmly embed auditing and the outcomes into the supervision framework at all levels. This will appear in the improvement plan.

8.11   The new supervision form has been introduced and it is reported that it appears to have led to more detailed analytical discussions being evidenced in supervision.

8.12   Chronologies on files are more evident but these are not being consistently completed. The auditor noted the limitation of the frameworki chronologies as these chronologies do not give a sense of the history and issues affecting a family. A seminar has been arranged to reiterate the standards relating to chronologies which will be mandatory for social workers.

8.13   Recording has improved recently with the requirement to keep Frameworki and Annexe A up to date. Child Protection and Looked After Children visits are now being completed in accordance with requirements.

8.14   The Independent Reviewing Officers are now more robust in their scrutiny of cases however further work needs to be done to ensure that any cases of concern are escalated swiftly to managers.

8.15   It is reported that more workers are demonstrating knowledge of their child / young person and the life experiences that affect them. The new assessment format (Child and Family single assessment) is useful and whilst it covers the domains of the assessment framework it also highlights the "child's story and lived experience" which is useful. Issues that affect parenting including historical factors and parental issues remain a central part to the assessment. Using this assessment for the Child Protection conference appears to work well avoiding repetition of work. It also means

that the document that has to be prepared is the plan so this becomes a more central document.

8.16 Updating the plan for Review Child Protection Conference is also reducing repetition of work and focussing on the central part of the case. It means that the plan appears to be more of the focus of the work which is positive. The practice of updating the plan by the Social Worker between conferences is useful as outdated tasks no longer remain on the plans.

9. WORKFORCE DEVELOPMENT

9.1 The recruitment of social workers and managers at a number of levels remains a priority for Reading Borough Council. The development of a high profile and dynamic strategy to improve recruitment strategy is being taken forward by Corporate HR Services. The current plans are a review of the Reading Offer to ensure that the authority is competitive and regarded as an attractive, flexible and innovative employer and to consider mechanisms for 'growing our own' by considering the development of an Academy and promoting social work as a second career.

10. PRIORITIES GOING FORWARD

10.1 The recommended actions going forward are essential in order to gain an accurate picture of the current standards of practice, drive the changes required and improve outcomes for children and young people in Reading.

10.2 The necessary improvements which have been identified and are listed in the improvement plan Priorities are based on six key themes:-

- Leadership and Governance
- Partnership Working
- Quality and Consistency of Practice
- Workforce Development
- Performance Management and Quality Assurance
- Improving Services for Children Looked After and Achieving Permanence.

10.3 A revised Improvement Plan has been developed and is attached at Annex 1. This however is a 'live' document and as priorities are identified this will be modified and prioritised. The new Interim Head of Service who took up his post on 4th June 2015 will work with the service managers to ensure that activities are built into service and individual workplans.

10.4 It is proposed to establish a small Improvement board to oversee the implementation and the outcomes and impact of the work identified in the plan. The board should be chaired by an independent chair who will report directly to the Leader of the Council and the Managing Director. The Lead Member for Children will be a member of the board, as will senior officers in partner agencies. The board will have a clear remit which will not duplicate

the work of the Local Safeguarding Children Board but it will scrutinise the development of the LSCB. The details of the Board are set out in Appendix 2.

10.5 The Improvement Plan among other things emphasises the following:-

- The completion of the MASH (Multi Agency Safeguarding Hub) with full integration alongside Thames Valley Police (TVP), Health and other partners. The project is well underway and is meeting all its timescales as per the separate report.

- Facilitating Step up/Step down work between Early Help Services and the MASH and moving forward on the Early Help Pathways work with other agencies.

- Implementation of Sufficiency Strategy and associated adoption and fostering targets and commissioning activity.

- Work in Access and Assessment to improve timeliness and consistency of decision making and assessments

- Further diagnostic work in the Adoption Service

- Agreement of Strategy discussion minimum standards.

- A clear audit and supervision framework

- A revision of the scheme of delegation in respect of decision making.

11.0 CONTRIBUTION TO STRATEGIC AIMS

11.1 The work of Children's Social Care is aligned with the strategic priorities of Reading Borough Council's Corporate Plan 2015 – 2018 and the Reading Health and Wellbeing Strategy and in particular:

'Safeguarding and protecting those that are the most vulnerable'.

12.0 COMMUNITY ENGAGEMENT AND INFORMATION

12.1 A wide range of partners and parents, carers, young people and families accessing Social Services were actively involved in the planning around their own case but are also engaged in the development of the work as a whole, and it is our ambition to further improve this through the work of the service user evaluation programme.

13.0 EQUALITY IMPACT ASSESSMENT

13.1   An Equality Impact Assessment is not required for this report.

14.0 LEGAL IMPLICATIONS

14.1   There are no legal implications to this report, although the Children's Social Care work enables the Council to meet the statutory duties set out in the Children Act 1989, the Children Act 2004 and the Childcare Act 2006.

15.0 FINANCIAL IMPLICATIONS

15.1   There are no new financial implications outlined in this report.

16.0 BACKGROUND PAPERS

16.1   None.

Appendix 1

Children's Services Improvement Plan
Full Detail

Document Version: 2.0
Last author: See initials within the file name
Date last updated: See date within file name

Section 1: Our Improvement Plan

Framework for Improvement

1. Leadership & Governance	2. Partnership Working	3. Quality of Practice

1.1 Accountability and oversight structures	1.2 Improving timeliness	2.1 Better information gathering/sharing (DV and MASH)	2.2 Effective child protection processes	3.1 Voice of the child is heard	3.2 Audit programme
1.3 Increasing social worker capacity	1.4 Improving management and professional practice	2.3 Coherent early help offer	2.4 Responding effectively to children missing from home and care/who are at risk of Child Sexual Exploitation	3.3 Consistency of practice and recording	3.4 Supervision and reflective practice

Directorate Strategic Objectives/Priorities

• Implement an Early Help strategy across all partners in Reading
• Deliver High Quality Practice
• To ensure there is a competent and confident workforce
• To develop high quality data which informs the quality of the service we deliver and demonstrates compliance
• Provide high quality placements and support for those children in need of help/protection

4. Workforce Development	5. Performance Management	6. Services for LAC & Permanency

4.1 Establishing a stable workforce	4.2 Effective learning and development	5.1 Regular, accurate performance information	5.2 User feedback mechanisms	6.1 High quality services for LAC and Care Leavers	6.2 Improving fostering and adoption services
		5.3 Audit supervision activity		6.3 Health of LAC	6.4 Improving life story work

Section 2: Measuring Our Improvement

Performance Management

We will measure our improvement through existing Corporate, DfE LAIT and Purple Book indicators aligned to the 6 improvement areas below to show progress and improvements against the Directorate strategic objectives and Corporate priorities.

1. Leadership & Governance	2. Partnership Working	3. Quality of Practice

1.1 Accountability and oversight structures

CP4, CP6, CP7 - Captured in 2.2.

1.2 Improving timeliness

A2 - Assessments completed within 45 Working Days

CP9 - Captured in 2.2

LAC3 - Looked after Children's' Statutory visits on time

LAC8 - All children of stat school age have PEPs completed on time

LAC12 - Improve the completion of LAC Care Plans and Pathway Plans

LAC16 - LAC review on time

1.3 Increasing social worker capacity

LAC2 - No of looked After Children allocated to a qualified SW

2.1. Better information gathering/sharing (DV and MASH)

R3a - % of referrals received in year that were repeat referrals for DV

M1 - Contacts received by MASH

2.2 Effective child protection processes

R1 - Referrals received by A&A

R2 - Referrals received by CSC in YTD per 10,000 pop U18

R3 - % of referrals received in year that were repeat referrals

R4 % of referrals leading to assessment in month

R5 - % of referrals leading to assessment YTD

R6 - Referrals rate per 10K population

CP1 - % of Section 47s which led to initial

3.1 Voice of the child is heard

A1 - % of children seen as part of Continuous assessment

LAC18 - Quarterly Participation in LAC reviews

3.2 Audit programme

QI1 - Timeliness, progression and quality of Child Protection plans

QI2 - Purposely and timely visits to children allocated to children's social care

QI3 - The timeliness, quality and progression of LAC Care Plans

QI4 - The timeliness and progression of children's permanency plans

QI5 - Percentage of cases with up to date, good quality assessments completed

QI6 - Percentage of cases where the child's

SW1 - Number of allocated cases per CSW

1.4 Improving management and professional practice

Captured in 4.2.

CP conference in month

CP2 - % of Section 47s which led to initial CP conference in YTD

CP3 - No / Rate of CP Cases

CP4 - CP Cases allocated to Social Workers

CP5 - Children subject to a CP Plan for 2nd or subsequent time

CP6 - Children who ceased to be subject to a CP Plan for 2 years +

CP7 - Children who continue to be on CP Plans for 2 years plus

CP8 - Child protection visits on time per month

CP9 - All child protection visits on time DFE Indicator YTD

CP10 - CP Review conference held on time

A3 - Assessments completed rate per 10000 population Reading

2.3 Coherent early help offer

CAT1,2,3 - % Closed CAT cases referred back into CSC 3, 6, 9 months

CIN1 - Open CIN Cases (Rate)

CIN2 - Overall absence of CIN

CIN3 - Persistent absence of CIN

CIN4 - Exclusions of CIN-FTE

CIN5 - CIN KS2 % Reading level 4

CIN6 - CIN KS2 % Reading, Writing and Maths level 4+(No eligible to sit KS2 test in

lived experience is clearly recorded on child's social care file

QI7 - The timeliness and quality of children's social work supervision

X2 - The timeliness , quality and progress of CiN plans

3.3 Consistency of practice recording

PF1 - Numbers of Private Fostering children

3.4 Supervision and reflective practice

X1 - Regular individual supervision takes place once a month in accordance with the supervision policy

SW1 - Supervision takes place on open cases (under development)

brackets)
CIN7 - Children in Need KS2-4 - % Expected Progress in Maths
CIN8 - KS2 (4+ Reading, Writing and Maths-Level 4+ (No eligible to sit KS2 test in brackets)
TP1 - Teenage pregnancy
TF1 - No. Troubled Families engaged and achieved outcomes (Phase one)

2.4 Responding effectively to children missing from home and care/who are at risk of Child Sexual Exploitation
M1 - No of children missing more than 5 days in the month
M2 - Number of children who have gone missing 3+ times in 90 days
R7 - Child sexual exploitation cases reviewed at SERAC

4. Workforce Development	5. Performance Management	6. Services for LAC & Permanency
4.1 Establishing a stable workforce	**5.1 Regular, accurate performance information**	**6.1 High quality services for LAC and Care Leavers**
SW2 - % Agency Children's SW rate of total staff requirement	Purple Book	**LAC1** - Rate of Looked After Children per 10K population
SW3 - Turnover rate of SW	Annex A data quality report (Nos 1-11)	**LAC4** - Absence of LAC Unauthorised
X3 - Sickness indicator to be developed		**LAC5** - Absence of LAC persistent
	5.2 User feedback mechanisms	**LAC6** - LAC Exclusions Permanent
4.2 Effective learning and development	Indicators to be developed with Sean	

Indicators to include (endorsed by Corporate L&D Team):

X4 - % of SWs that have completed CDPs.

X5 - Average number of days training in social care practice/standards/professional training (new policies and legislation etc) received per social worker.

X6 - % of SWs that receive adequate supervision as captured through staff surveys.

X7 - No of morale/team building events held per Social Care team.

Capewell re Children in Care Council.

5.3 Audit supervision activity

Indicators to be provided by Anne-Marie Delaney.

LAC7 - LAC Exclusions Fixed Term

LAC9 - % of LAC that have had 3 or more placements YTD

LAC10 - % of LAC in care 2.5 yrs at month end aged under 16 that are in 'stable' placements

LAC13 - % of children who became LAC in last 12 months placed more than 20+ miles from home

LAC14 - No of LAC new starters

LAC15 - LAC leaving care in month

LAC17 - Annual Number of LAC aged 10+ convicted or subject to a final warning or a reprimand during the year

CL1 - % of care leavers who were NEET

CL2 - % of Care leavers who were in suitable accommodation

6.2 Improving fostering and adoption services

A1 - % of children seen as part of Continuous assessment

A2 - Assessments completed within 45 Working Days

FA1 - % of all foster placements that are provided in-house at month end inc Family and Friends

FA2 - Recruiting RBC Foster carers numbers and % Placed

FA3 - Reducing the dependency on IFA's

numbers and % placed
FA4 - Recruiting adopters
LAC11 - Number and timeliness of adoptions and A1 average time between a child entering care and moving in with its adoptive family, for children who have been adopted (days) and A2 average time between the local authority receiving court authority to place a child and the local authority deciding on a match to an adoptive family

6.3 Health of LAC
CL3 - % of LAC in care 1+ years that have up to date health/dental checks

6.4 Improving life story work
Qualitative measurement of performance through audits.

Section 3: Action Plan (Full detail - Outstanding Tasks/Actions)

Ref No.	Task/Action	Role	End Date	Update on Progress with Actions	Tasks: Outcomes we will achieve Actions: Success Measures	Status
1. Leadership & Governance						
1.1 Accountability and oversight structures						
Outcomes we will achieve: Strong clear effective strategic leadership and decision making to ensure immediate and sustained progress is made to improve the lives of children and young people in Reading.						
81	Ensure effective governance and scrutiny of improvement that provides challenge, drives change and supports progress.	Director of Education, Children's and Early Help Services	15/06/2015		Senior leads and managers robustly tackle the key weaknesses and drive improvements in practice. The success measure is that a 'good' standard will be achieved in all service areas.	In Progress (on track)
81A	Establish an Improvement Board to drive service improvement and monitor progress.	Director of Education, Children's and Early Help Services	TBC		Board membership confirmed and meetings scheduled. Progress is made in all priority areas and is monitored by the Board.	In Progress (on track)
81B	Produce progress reports for each Improvement Board & Members every six weeks.	TBC	TBC		Progress reports available 1 week before meetings.	In Progress (on track)
81C	Produce quarterly reports to CMT.	TBC	TBC		Reports available.	In Progress (on track)
81D	Produce progress reports to Elected Member Children's Services and Children's Services Scrutiny, Council and Children's Services Cabinet Committee every six weeks.	TBC	TBC		Reports available and improvements evident	In Progress (on track)
81E	Independent reports provided for the DfE and the Improvement Board.	TBC	TBC		Production of a written progress report –for the DfE on the improvement progress as measured against the Ofsted Key Judgement Areas. The report will be tabled at	In Progress (on track)

					every two Improvement Boards thereafter The report will be based on independent testing and will provide a validation of improvements to date. Improvements made.	
81F	Secure ongoing mentoring to the Managing Director by an experienced Director of Children's Services from another local authority which is judged as being 'good'.	Managing Director/Director of Education, Children's and Early Help Services	30/06/2015		Sector 'know-how' and support provided to the leadership in Reading concerning activity to drive improvement.	Not Started
81G	Secure ongoing links and peer mentoring for Elected Members on the necessary political considerations for driving improvement in LA Children's Services.	Director of Education, Children's and Early Help Services	30/06/2015		Political leadership knows and understands the root causes of issues in Reading and has the support network and peer relationships that provide the insights necessary to underpin change and improvement.	Not Started
81H	Produce and disseminate monthly performance reports on key indicators to ensure progress is being made and to provide challenge on under performance.	Head of Children's Services	31/05/2015		Performance management and quality assurance is given the highest priority at all levels of management.	Not Started
81I	Arrange monthly visits by the DCS, Elected Members and senior officers to frontline teams and individual practitioners, users of the services including children, young people and families	Director of Education, Children's and Early Help Services	30/06/2015		This enables changes to be made on the basis of feedback, research and intelligence about the quality of services and the experiences of children, young people and families who use them.	Not Started
48	Create Improvement Plan scrutiny and reporting mechanisms	Head of Children's Services	31/05/2015		Governance and accountability for improvement in place.	In Progress (on track)
48D	Re launch improvement plan and management/monitoring process	Business Project Manager	31/05/2015		The re- launch will achieve an understanding of the focus on improvement, the actions which need to take place by all workers, managers and partners, the methods for improving practice and the scrutiny and challenge which will take place and that will be reported to the Board. Sustainable	In Progress (on track)

					improvement in Children's Social Care achieved.	
82	Ensure there is strong and clear leadership from all partners. The partnership is supported by rigorous governance and effective engagement with partners ensures that there is a sufficient range of good quality provision to meet all needs.	Director of Education, Children's and Early Help Services	TBC		Agree accountability and reporting between Health and Wellbeing Board, LSCB, Community Safety Partnership, Adults Safeguarding Board, Corporate Parenting Board and the Clinical Commissioning Groups to establish clear reporting and accountability. Priorities are clearly agreed and acted on.	Not Started
82E	Produce and disseminate a governance document to clarify arrangements and accountabilities.	Director of Education, Children's and Early Help Services	TBC		Governance document completed.	Not Started
83	Strengthen the LSCB to ensure that partners work together effectively and are held to account for their responsibilities.	Director of Education, Children's and Early Help Services	30/06/2015		All partners take a holistic approach to safeguarding families and do not act separately or duplicate efforts in their respective work across children's and adult service.	Not Started
83A	Ensure that there is both a challenge of practice between partners and a wide range of routine and thematic casework auditing activity at both multi-agency and at an individual partner agency level.	LSCB Chair	TBC		The auditing activity will be used to identify where improvements can be made in front-line performance and management oversight. This includes the effectiveness of early help and other services.	Not Started
83B	Assessment by LSCB partners to review whether they are fulfilling their statutory responsibilities to help (including early help), protect and care for children and young people. As a result of the assessment that the LSCB effectively prioritises, based on local needs and that these are incorporated into a delivery plan to improve outcomes.	LSCB Chair	TBC		Produce a report on the fulfilment by LSCB of its statutory duties to the DfE and continue to provide an update of the delivery plan at every two Improvement Boards thereafter. Improvements made.	Not Started

83C	Review JSNA to ensure greater emphasis on children, young people and families and to be informed by the main priorities of Children's services in RBC.	LSCB Chair	LSCB Chair		The needs of children and families in Reading are known, understood and inform service planning and delivery by all partners together in Reading.	Not Started
87	Review of the Scheme of Delegation	Director of Education, Children's and Early Help Services and the Head of Children's Services	31/07/15		Comprehensive scheme of delegation which provides unequivocal clarity regarding management responsibility.	In Progress (on track)
52	Ensure that Elected Members are aware of and sighted on their responsibilities for the children the Council is responsible for. Members will know and understand what is happening in the service so that they are able to effectively discharge their duties as corporate parents.	Head of Children's Services	14/05/2015		Agree and implement a Members Training programme which is highly effective and provides evidence of members being inspirational, confident, ambitious and influential in changing the lives of children, young people and families throughout the services. The impact of the training will also be evident in the role played by elected members as ambitious corporate parents.	In Progress (on track)

1.2 Improving timeliness

Outcomes we will achieve: Improved assurance of children's safety through timely assessments and interventions.

See actions under 3.3 Consistency of practice and recording.

1.3 Increasing social worker capacity

Outcomes we will achieve: Ensure that social workers have a manageable workload which is delivered to a high standard.

15	Implement the recommendations from the Workflow, Workforce & Workload project.	Head of Children's Services	30/06/2015		New service delivery offer agreed for social care. Improved ongoing management of workload throughout the system will provide additional resilience. This will assist in determining staffing levels.	In Progress (on track)
15D	Review outstanding recommendations from this work and define a work programme to take actions forward.	Head of Children's Services	30/06/2015		Clear action plan identified.	Not Started

1.4 Improving management and professional practice
Outcomes we will achieve: Managers oversight is improved to ensure that case management is of a high standard.
See actions under 4.2 Effective learning and development.

2. Partnership Working						
2.1 Better information gathering/sharing (Referral, assessments, Strategy Discussion, S47 enquiries including DV and MASH)						
Outcomes we will achieve: Through multi-agency panels, working arrangements and strategy meetings partners effectively gather and share information to help and protect children and young people. The impact of domestic violence is minimised for children, young people and their families.						
69	Implement recommendations from MASH/A&A deep dive review.	Head of Children's Services	TBC		Strengthening of Information sharing between agencies is timely, specific and effective. Child protection enquiries are timely and thorough and children receive help that is proportionate to risk. Assessments (including CIN) result in a direct offer of help and plans are dynamic and change in the light of emerging issues and risks.	In Progress (on track)
69A	Feedback to managers in MASH and A&A on deep dive work led by SS	Service Manager - Access	22/05/2015	27.05.15 KJ: This has been completed.	Feedback sessions held on 20/05/2015.	In Progress (on track)
69B	Re-alignment of process and practice at all stages to take place. Further development of MASH/A&A policies and procedures aligned with Tri-X. This will be achieved through workshops, process mapping and standard setting using Reading QAF to look at obstacles to achieving 'good' across key practice areas.	Service Manager - Access /facilitators from SW teams	31/07/2015	27.05.15 KJ: Needs to be undertaken when all redesign work in MASH/A&A is completed, tested and signed off. SS 03.06. Key process points agreed and workshops in place to re-align practice at these points. Referrals and sec 47 process mapped out and now being used in teams. More to follow. New sec 47/threshold audits introduced to ensure compliance. QA workshop with TM and SM complete and additional oversight points agreed. Further sessions with ATM's planned 9.06.2015. sec 47 and voice of the child workshops booked to take place over the next 2 weeks- some delay due to SW availability. Further workshops on single assessments and step-up/down	There is complete understanding of the actions which must be undertaken, how these are recorded and the level of management oversight which is needed to quality assure social work. Evidence of improved service delivery via performance and audit activity.	Not Started

				planned for week 22/06/2015. Standard setting work also achieved during review meetings between SS,TM's and SM to discuss serious cases of concern on tracker.		
69D	Work to establish single front door with MASH Duty Manager as decision maker. Any disagreement of thresholds between MASH and A & A to be escalated to Service Manager.	A&A Team Manager, MASH Duty Manager and Service Manager	TBC	27.05.15 KJ: This has been completed	Improved application of thresholds, consistency, risk analysis and decision making. Evidence of improved service delivery via performance and audit activity.	Complete
69E	Carry out standard setting and application of Reading thresholds with new A&A Duty Manager (first day in post).	Service Manager-Access/Team Managers	30/06/2015	27.05.15 KJ: Work has started with existing ATMs. 03.06. SS: referrals and allocations workshop (inc thresholds) held on 26.05.2015 as ATM's are currently taking on this role. Referral/allocation process mapped (inc transfer between A & A and MASH) and to be agreed in follow-up session. Sec 47 threshold discussion and new best practice introduced and mapped. !:1 process/case sessions being held on duty desk by SS.	Improved use of legal orders, information gathering, risk analysis and decision making. Evidence of improved service delivery via performance and audit activity.	In Progress (on track)
69F	Session with legal for social workers and Managers on Sec 20 and Regulation 24 (Connected Persons fostering assessments).	Access and Assessment Team Manager/ Service Manager-Access/Legal	02/06/2015	03.06.2015. Complete. Session held with Team with Connected Person's ATM facilitating reg 24/ SGO aspect. Team provided with written guidance and legal are developing a flowchart. New reg 24 audit form developed by ATM which is waiting for approval. Use of sec 20 will be QA's through routine audits.	Improved information gathering, risk analysis and decision making. Evidence of improved service delivery via performance and audit activity.	In Progress (on track)
69G	Workshop on effective supervision/management oversight alongside current reflective supervision sessions.	Service Manager-Access	TBC	27.05.15 KJ: This is in the 15/16 training plan 03.06.2015 SS: KJ to speak with training to understand their offer and what they could provide.	Improved and effective management oversight driving good standards, information gathering, risk analysis and decision making.	In Progress (on track)
69H	Principal social worker to give additional attention and support to the service.	Service Manager - Improvement	TBC	03.06 SS: informed there is no PSW capacity to provide this.	Improved quality of practice and staff morale.	In Progress (on track)

69G	Performance session with Team Managers and Performance Team to agree A&A/MASH data set and use of the Workload Report. This will include a schedule of performance reporting for: • Regular reporting by ATM's and TM's directly to Service Manager (consider using performance templates). • Weekly Performance Meetings between TM and Service Manager. • Weekly Performance Meetings between HoS and Service Manager • Regular reports into the Improvement Board • Tracking documents and weekly reporting will be introduced.	Service Manager-Access/Consultant/Team Managers	TBC	27.05.15 KJ: First meeting completed on 26.05.15. Further sessions are to be held dependent on capacity issues within the Performance Team. 03.06.2015 SS: first session complete and A & A data set agreed. HR to come back re: their input Managers to now use in weekly performance sessions. Follow-up sessions planned to check usefulness and MASH data set.	Compliance, a rigour in worker ownership about what actions require prioritisation. Improved and consistent management oversight of through put and quality of practice is ensured. A&A performance reporting is aligned with the Children's Services Performance Framework (creating a golden thread from corporate objectives to individual appraisals).	In Progress (on track)
9	Work to ensure domestic violence is identified as a child protection issue and is dealt with effectively by Children's Social Care and partner agencies.	Strategy/Service Development Manager	31/03/2016	01.06.2015 – Tasks are on track	The response to incidents of domestic violence is effective and safeguards children, young people and their families.	In Progress (on track)
9A	DV Strategy/Action Plan is subject to full partner consultation and is signed off by the RSCB, CSP and HNL.	Strategy/Service Development Manager	31/07/2015	01.06.2015 – Tasks are on track	Document is implemented and is effective as evidenced in performance data and audit activity.	In Progress (on track)
9F	Review of support services available for DV including 1:2:1 provision	Strategy/Service Development Manager	31/03/2016	01.06.2015 – Outcomes updated	The current provision available across all groups is being reviewed to see if it is meeting needs by the end of this financial year. This will feed in to a commissioning exercise regarding DA services due in 2016/17	Not Started
11	Implement a fully co-located MASH	Project Manager	06/07/2015	01.06.2015 – All tasks to co-locate the MASH are on track	Partner staff are co-located and using new business processes. Information is collected and analysed so that partners are able assess risk and needs more effectively for children.	In Progress (on track)
2.2 Effective child protection processes						
Outcomes we will achieve: Child protection conferences take place within statutory timescales and children and young people are effectively protected.						

18	Develop and implement a Neglect Strategy which is under the governance of the RSCB.	Service Manager - Safeguarding & Quality Assurance/ LSCB Business Manager & Children's Trust Partnership	31/03/2015	02.06.2015 EB confirmed there is no further update on this action	Undertake service remodelling/options work which addresses needs and that transcends traditional service boundaries. All partners contribute to the effective identification of neglect (as one of the RSCB's key priorities) and the mobilisation of Early Help services to mitigate the pervasive nature of neglect for children.	In Progress (on track)
20	Improve the attendance of Thames Valley Police at Child Protection Case Conferences.	Service Manager - Safeguarding & Quality Assurance	31/01/2015	TVP are currently recruiting x2 posts. 26.01.15 Child Protection Case Conference Investigator appointed. Another post is currently being recruited to. 14.05.15 AMD: Will ask EB to ask TVP for clarity on the position with this.	TVP will be able to bring all relevant information ,which will be shared within an inter-agency setting, and share in the planning of how best to safeguard and promote the welfare of children at a Child Protection Conference.	In Progress (Overdue)
29	Initiate Education task and finish group to consider issues in regard to LAC including bullying (prescribed by RSCB).	Head of Education	31/07/2015	05.05.15 EB: The April RSCB tasked KMc with the role of chairing the group that would need to involve Head Teachers. The first meeting is still to be arranged and EB/DB are available to support.	Task and finish group will be mobilised and in place. Looked after children are supported to help them make good progress in their learning and attainment wherever they live.	In Progress (on track)
29B	Developing the Designated Officer role across Reading schools to enable the LSCB to quality assure their safeguarding responsibilities.	Virtual Head - Children Missing Out on Education/Service Manager - Access	31/07/2015	06.05.15 KMc: Has asked GD to lead on this initially and to liaise with KJ on the approach/resource needed and to report this back to the LSCB. GD and KJ already run a Designated Officers Group who are responsible for the Safeguarding practice in schools. 12.05.15 GD: Is collecting this information from all the schools in and out of Borough (only these are missing now, about 10 schools) to say who the Designated Officer is for all Reading's LAC. Permission to be sought from these LAs (3) for GD to contact the schools and ask. This list of schools has gone to the LSCB. GD and KJ to meet	Extended remit for Designated Officers in schools operating effectively.	In Progress (on track)

				with KMc to discuss the makeup of the Designated Officers group and if any additional work needs to be done to re-galvanise.		

2.3 Coherent early help offer						
Outcomes we will achieve: Early Help is co-ordinated and targeted at children and families who are most at risk.						
65	Creation of a single pathway to Early Help Services.	Service Manager - Early Help	01/01/2016	03.06.2015 CP: Business case signed off by Lead Member and is on the agenda for ACE committee on 29.06.2015. Project plan has been drafted to start implementation, which will initially involve a series of workshops to agree implementation in detail. The project plan is being aligned with the delivery of the Troubled Families programme	A business case will be presented to the Lead Member and once agreed the implementation will commence. This will include a communications plan. The creation of the single pathway will make it clear to partners how and when to refer so that children receive a speedier and more effective response to their needs	In Progress (on track)
67	Work to remove gaps in service provision when awaiting early help worker allocation	Service Manager - Early Help	30/06/2015	03.06.2015 AF: This is being followed up and actions required are being reviewed.	Children, young people and families are offered help when needs and/or concerns are first identified and, as a consequence of the early help offered, children's circumstances improve and, in some cases, the need for targeted services is lessened or avoided.	Not Started

67A	Implementations of plans to ensure TAC's are routinely used as the preferred step-down approach within the service.	Service Manager - Early Help	30/06/2015		Cases are stepped down to Children's Action Teams with TAC's and lead professionals in place in a timely manner.	Not Started
66	Development and implementation of Troubled Families action plan	Service Manager - Intensive Support	01/01/2016	05.05.15 ND: Action plan provided that is being implemented. For more details refer to the operational file "Action Plan 06 05 15.docx". 03.06.2015 ND confirmed this status us current	Earlier identification of families with multiple risk factors and development of focussed preventative support models to prevent escalation of needs to crisis point.	In Progress (on track)
2.4 Responding effectively to children missing from home and care/who are at risk of Child Sexual Exploitation						
Outcomes we will achieve: There is an environment where children are aware of risks and are able to report concerns in relation to CSE/missing. Agencies respond proactively to incidents/issues raised.						
21	Development and implementation of Child Sexual Exploitation Strategy	Director of Education, Children's and Early Help Services	31/07/2015		Reduction in the risk that children and young people will be sexually exploited	In Progress (Overdue)
21C	Agree CSE strategy at CSP	Director of Education, Children's and Early Help Services	31/07/2015	05.05.15 ND: strategy going to the CSP in July. DO to review action plan and update this row.	Strategy agreed at CSP.	In Progress (on track)
21D	CSE co-ordinator role to be recruited and lead on this work	Service Manager - Intensive Support	30/04/2015	Joint funding proposal for this post has been sent to the LSCB partners. Proposed for RBC to host the post, job description being written and evaluated in anticipation of a funding solution being found 05.05.15 ND: No funding solution identified. On the agenda for CSE Strategy sub-group on 11.05.15 to resolve. 03.06.2015 ND: Advertising internally in RBC for a 1 year secondment by the end of June	Resources in place to undertake the work.	In Progress (Overdue)

21E	Design, development and implementation of an integrated data reporting mechanism to enable monitoring of process	Performance and Data Service Manager	30/06/2015	07.05.15 SK: Recently developed guidelines in April on missing children (flowchart of process and responsibility, return interview guidance and notification of missing CYP form) will require monitoring to ensure they are adhered to and embedded.	Reporting on CSE available within normal cycles and as part of the integrated data set.	In Progress (on track)
22	Commission voluntary sector to provide missing interviews	Head of Children's Services Children's Commissioning Officer/Senior Commissioner - Children & Young People's Services	31/10/2015	30.04.15 JHB: We are 70% of the way there with putting together the tender documentation including evaluation scoring criteria. The specification is with Legal, but we do not currently have a timescale as to when they can come back. 26.05.15 JHB: The commissioning activity around this is now likely to be abandoned. AF is managing the interim service/arrangements and whilst it has been proposed that these interim arrangement continue, AF needs to confirm this with HMC.	Children and young people have a quality assured service delivering interviews to some of the most vulnerable young people in Reading.	In Progress (on track)
22B	Monthly analysis of the issues raised by young people following the interviews	Service Manager - Access	30/06/2015	18.05.15 DO: Identified need during meeting with HMc on 18/5.	Feedback from young people captured and fed back into commissioning process.	Not Started
22C	Complete tender specification	Children's Commissioning Officer/Senior Commissioner - Children & Young People's Services	30/04/2015	The specification has been finalised and commissioning are in the process of completing the PQQ and ITT to place the advert for tender on 01st May which will be a 30 day process.	Specification ready to advertise.	In Progress (Overdue)

3. Quality of Practice						
3.1 Voice of the child is heard						
Outcomes we will achieve: The views of children and young people are taken into account at every stage.						
4	Work to improve analysis within assessments and in the recording of children's views to ensure concerns are explicitly addressed.	Service Manager - Improvement	15/06/2015		Children are seen alone and the voice of the child is clearly and consistently reflected in assessments and recording.	In Progress (on track)

					Decisions are made with full consideration of the child's voice throughout casework.	In Progress (on track)
4A	Undertake work with social workers and managers to ensure that children are seen alone.	Service Manager - Improvement	15/06/2015	October's internal audit of s47s, 72% of cases were rated as good or better. Our internal audit in January graded 73% of cases audited as good or better. Updated results collated quarterly – April 2015 07.05.15 SK: Identified through deep dive as a performance weakness area that needs to be addressed. 20.05.15 PL: PL to draft some actions that describe what needs to be done around this.	Audits of assessments clearly show views of children are reflected in decisions.	In Progress (on track)
57	Internal audit review of Family Group Conferences and value for money	Service Manager - Intensive Support	30/09/2015	05.05.15 ND Appointment of an independent reviewer is being explored. The review is likely to take 4 weeks once the appointment has been made. – action complete	To have an effective and efficient FGC offer based on models of good practice.	Complete
57A	Work to increase use of FGC at appropriate times when key decisions are being made and greater use of Family Strengths Model	Service Manager - Improvement/ Service Manager - Family Support	TBC		Children and families are supported in the community wherever possible. In situations where children's care cannot be met within their family, there is quick and prompt action to identify extended family members who need to be subject to a viability assessment and that these are carried out in a timely manner and are of good quality.	Not Started
3.2 Audit programme						
Outcomes we will achieve: Audit is used to improve practice.						
80	Introduction of additional quality assurance processes to strengthen those already in operation. This includes the continuous monitoring and scrutiny of the integrity of the quality assurance work	Head of Children's Services/Cons ultant	30/06/2015		QA processes are in place to ensure Reading is a learning organisation, good practice is followed consistently and children are kept safe.	In Progress (on track)

	by Senior Leaders and the commissioning of reputable and experienced external auditors as required. The reports need to identify key issues and provide explanations. The auditing standards within the audit forms will be checked and tracking will take place to ensure that there is evidence of the improvement taking place as a result of quality assurance activity.					
80A	The appointment of an experienced Quality Assurance Manager off-line from operational practice to ensure independence.	Head of Children's Services/Consultant	30/06/2015		Appointment in post.	In Progress (on track)
80B	Performance session with Managers to agree additional QA mechanisms that will focus on whether the checking process is followed and that the quality/outcomes have been achieved.	Team Managers/Service Manager- Access/ Service Manager - Improvement/ Consultant	30/06/2015	Action Plan received on 13.05.15 from SS. 27.05.15 KJ: Some work on this completed in meeting on 26th with Performance Team. QA session specific to A & A and MASH thresholds complete 03.06.2015. New oversight and audit points introduced. ATM oversight points to be introduced 09.06.	Audit schedule agreed covering MASH thresholds, A&A referral and allocation, strategy discussions, Section 47 enquiries, single assessments leading to NFA and step down/up processes.	In Progress (on track)
80C	Current monthly peer audits to provide feedback on the quality of A&A work in relation to referral and the response, risk and decision making, multi-agency input, impact/outcomes, direct work/voice of the child, quality of supervision/management oversight.	Service Manager - Improvement	30/06/2015	Action Plan received on 13.05.15 from SS. QA manager and SS to progress.	Monthly audits undertaken.	In Progress (on track)
80D	Routine quality assurance processes carried out to provide feedback from the following groups and considered monthly by the A&A Service Manager: Referrer (MASH); Children and families; Multi-agency partners (LSCB multi-agency audits); Principal social worker to target staff to understand their views (PSW); Deep dive/thematic audits as deemed necessary by HoS/partnership	Service Manager - Improvement	30/06/2015	Action Plan received on 13.05.15 from SS. QA workshop on 03.06.2015 addresses some of these. Other areas need to be progressed alongside QA manager (deep dives, collation of monthly audits themes specific to A & A).	Routine QA is undertaken through all practice areas.	In Progress (on track)

80E	Service Managers collect monthly all the issues which have come out of auditing files and act upon those findings.	Service Managers	31/05/2015	27.05.15 KJ: This is a new requirement and requires discussion on 09.06.15	Where issues are uncovered there is a regular monthly report that Service Managers can act upon.	Not Started
80F	Head of Service to complete a quarterly report on the issues identified through audit and to provide a follow up which results in improved practice.	Head of Children's Services	31/05/2015		There is an improvement in practice.	Not Started
70	Development and implementation of a revised Quality Assurance Framework. The framework will be based on the document 'Improving local safeguarding outcomes – Developing a strategic quality assurance framework to safeguard children' published by the LSCB and the LGI and D. The timetable of activities will link to the strategic priorities for children's services as identified in the Improvement Plan and from Performance.	Service Manager - Improvement	30/06/2015		Audits will be reviewed in supervision and will be undertaken by all managers. Development of an electronic system will be implemented which is easy to access and can formulate readily available information on completion and grading. In addition to the list of specific audits contained in section 59,59B and 59C additional audits will be planed for CiN cases, LAC, Care Leavers, Adoption and Foster Care files. The Quality Assurance Framework provides an established, systematic system which is used to improve the quality of practice and decision making .It enables workers and managers to improve their practice and to respond quickly to any service deficiencies or new demands from an informed basis.	Not Started

59	Develop and agree audit plan for child protection cases	Service Manager - Safeguarding & Quality Assurance/ Service Manager - Improvement	TBC	03.06.2015 AMD: Links to overall audit programme	QA process are in place to ensure that good practice social work is consistently undertaken and children are kept safe	In Progress (on track)
59B	Undertake audit of children taken off plans after 3 months	Service Manager - Safeguarding & Quality Assurance/ Service Manager - Improvement	11/03/2015	14.05.15 AMD: AMD to work with PL to get a target date and then consider if anyone else can be brought in to complete or not (re. capacity issues).	Audit undertaken and any practice issues identified in order to raise standards.	In Progress (Overdue)
59C	Undertake audit of children on repeat plans	Service Manager - Safeguarding & Quality Assurance/ Service Manager - Improvement	11/03/2015	14.05.15 AMD: AMD to work with PL to get a target date and then consider if anyone else can be brought in to complete or not (re. capacity issues).	Audit undertaken and any practice issues identified in order to raise standards.	In Progress (Overdue)
3.3 Consistency of practice and recording						
Outcomes we will achieve: Plans for children and young people are focused on their assessed needs with clear outcomes and timescales.						
1	Work to ensure children are being seen through visits, in accordance with their plans (in particular CP).	Service Manager - Family Support/ Performance and Data Service Manager/ Service Manager - Improvement	30/06/2015		Children at risk will be kept safe and those subject to CP work will receive visits from social workers in a timely and consistent manner. Children know that they are able to complain and feel that their views and wishes are responded to.	In Progress (Overdue)

1A	Complete backdating of CP visits on FrameworkI from April 1st and review of all CP cases for the last year to confirm the final indicator. Add CP Visits DfE Indicator to Purple Book.	Service Manager - Family Support/ Performance and Data Service Manager	30/06/2015	A new report is being developed for managers to warn them of data issues coming up daily before they become overdue- this will be scheduled in to their email boxes daily. We are auditing 14-15 CP visits to confirm if visited on time or not. 07.05.15 DH: Visits have been updated but performance is still looking poor. There is a capacity issue preventing this being completed given recent inspection preparation. 26.05.15 DH: Report went out to Managers last Friday and was received well, will happen 3 times a week. Will need at least 2 months to check what difference this has made.	All details of CP visits on the system and confirmation of the final indicator. Add CP Visits DfE Indicator to Purple Book	In Progress (on track)
1D	Training and awareness sessions/programme to take place for:- 1. Social workers to ensure that standards in terms of visiting are understood and applied consistently. 2. Managers to reinforce management standards and what is expected have oversight of all of practice within a team.	Service Manager - Improvement	15/06/2015		Improved management oversight of all visits to ensure that these visits are purposeful and that children and young people are seen on their own by their social worker.	Not Started
1F	Introduce management audit process to ensure standards are being applied and adhered.	Service Manager - Improvement	30/06/2015		Audit process live and operational.	Not Started
13	Work to ensure use of thresholds by all managers and between services by all partners.	Head of Children's Services	31/12/2015		All professionals understand thresholds to access services at all levels of need.	In Progress (on track)
13D	Publicise thresholds to practitioners as agreed through communications strategy for example drop-in sessions.	LSCB Business Manager & Children's Trust Partnership Manager	31/12/2015	We have disseminated this to all services and asked them to update their staff. Once the MASH/Pathways to Early Help Services Projects are implemented, there will be additional effort to publicise these thresholds and help all practitioners to start using them effectively. 02.06.2015 EB/CP confirmed no further updates on this action	Practitioners start using new thresholds.	Not Started

8	Implement revised protocol for management of CIN cases.	Service Manager - Early Help/Service Manager - Access	31/07/2015		Development of practical guidelines including transfer protocols step up/down procedures. This will provide clarity amongst staff and partners and ensure that children who are CIN will receive a good service in a timely manner (every CIN child will have an effective plan, regular contact and that supervision of the case will take place).	**In Progress (on track)**
8B	Review findings of social care deep dive in respect of the way CIN case are undertaken and managed. Specific thematic review to take place. Consideration to be given to the appointment of a reviewing officer specifically for CiN cases.	Service Manager - Early Help	TBC	03.06.2015 AF: End Dates are being reviewed	Regular reviews of CIN cases are undertaken and plans are SMART (Specific, Measurable, Achievable, Realistic and Time-bound). The outcome star (used for Early Help work) should be used for CIN work to get people focussed on outcomes and measurements.	Not Started
8D	introduce management audit process for cases and plans to check quality improvement.	Service Manager - Early Help	15/06/2015	03.06.2015 AF: End Dates are being reviewed	Measured by a reduction in the timescale for plans, the impact of the work being measured by the outcome star and a reduction in percentage of repeat plans.	Not Started
8E	Work to ensure there is a mechanism to capture feedback from families and children in all CIN cases.	Service Manager - Early Help	30/06/2015	07.05.15 SK: Identified through deep dive as a performance weakness area that needs to be addressed.	All CIN cases clearly record and reflect the views of families and children.	Not Started
8F	Write paper that outlines current position and issues and outlines options to resolve.	Service Manager - Early Help	30/06/2015	08.05.15 DO: C, D and E added after review of Task 8 with AF and therefore 8G may need to change. DO to discuss with AF.	Options for implementation written.	**In Progress (on track)**
8G	Solution agreed at DMT, CMT and RSCB.	Service Manager - Early Help	15/07/2015		Sign-off secured.	**In Progress (on track)**
8I	Draft implementation plan for agreed option.	Service Manager - Early Help	31/07/2015		Implementation plan written and ready to mobilise.	**In Progress (on track)**
23	Review Private Fostering Policy and action plan.	Service Manager - Placements	30/06/2015		Partner agencies addressing non-referral issues in RSCB.	**In Progress (on track)**

23B	Annual report taken to LSCB.	Service Manager - Placements	14/05/2015	30.04.15 JA: Private Fostering annual report has been prioritised over the policy.	Report agreed by all partners.	In Progress (on track)
23C	Review findings of social care deep dive in respect of this Ofsted Inspection/Good Practice Framework area.	Service Manager - Placements	TBC		Increase in the number of identified private fostering arrangements.	Not Started

3.4 Supervision and reflective practice

Outcomes we will achieve: Good quality supervision supports staff to reflect and learn, enabling them to improve outcomes for children and young people.

70	Ensure that managers are well supported and have the capacity and competence to deliver effective supervision and management oversight on all cases.	Head of Children's Services	30/07/2015		Supervision continues to be valued by staff and is used well and consistently to drive up standards, rather than being overly task-based and missing the reflection needed to unpick more complex cases.	Not Started
70A	Review and establish management capacity to provide effective supervision and oversight of safeguarding activity. The format for the cascade review of supervision by managers will provide a useful benchmark position.	Head of Children's Services	30/07/2015		Cascade review of supervision by managers to be undertaken and used to identify the areas for focussed intervention.	Not Started
70B	Re-enforce supervision standards in line with supervision policy.	Head of Children's Services	30/07/2015		New standards applied and implemented.	Not Started
70C	Further training in reflective supervision to be delivered.	Head of Children's Services	30/09/2015		Training delivered.	Not Started
70E	Develop audit tool and undertake supervision audits.	Service Manager - Improvement	30/07/2015		Consistent records of supervision are monitored through audits.	Not Started

4. Workforce Development

4.1 Establishing a stable workforce

Outcomes we will achieve: Create a stable workforce of directly employed staff to deliver a high quality of service to children and young people.

68	Develop and implement Social Worker recruitment and retention programme.	Director of Education, Children's and Early Help Services/Head of Children's Services	TBC		RBC has a workforce which is sufficient, stable, suitably qualified and competent to deliver high-quality services to children and their families. Managers are experienced, effectively trained and supervised and the quality of their practice improves the lives of vulnerable children, young people and families. There is effective organisational support for the professional development of social workers with reference to the employer standards, and leaders provide the right environment for good social work to take place.	**Not Started**
68A	Business case developed and presented to DMT/CMT for investment.	Head of Children's Services	TBC		TBC.	Not Started
68B	Mobilise Corporate HR support/recruit specialist to design and build focussed recruitment campaign.	Head of Children's Services	TBC		Reading can compete on a regional basis to attract high quality candidates for social work and is regarded as a flexible and innovative employer and is able to offer them packages which help to retain SWs once they join the Council.	Not Started
68C	Task and finish group with AD Social Care and Service managers to identify current vacancy/agency position and skills profile.	Head of Children's Services	TBC		Needs based analysis undertaken that improves the way Reading is marketed and has mechanisms to 'grow our own'.	Not Started
68D	Run campaign and recruit new SWs.	Head of Children's Services	TBC		High profile for social work in Reading established and dynamic strategy in place to improve recruitment and retention.	Not Started
68E	Work to develop a social work academy with local University.	Head of Children's Services	TBC		The local authority knows itself well, is a learning organisation and can demonstrate evidence of practice that is informed, modified and sustainably improved by feedback, research and intelligence about the quality of services and the	Not Started

					experiences of children, young people and families who use them.	

Outcomes we will achieve: Continually develop the workforce to deliver effectively for children and young people.

75	Training and development programme for SWs and managers	Director of Education, Children's and Early Help Services/Head of Children's Services	TBC		Social workers and managers are fully supported and enabled to have the core skills required to carry out their roles and responsibilities.	Not Started
75A	Develop and roll-out training and modelling development that focus on key areas of practice set out in Section 3.	Head of Children's Services	TBC		Improvement in quality and consistency of practice specifically in regard to areas identified within social care deep dive work.	Not Started
75B	Establish and embed a pathway for social workers to access the assessed and supported year in employment (ASYE) building on social work academy/links established with local University(s).	Head of Children's Services	TBC		The Council provides an environment for new social workers to develop, flourish and thrive and continue their professional development as their careers develop with Reading.	
76	Develop and implement new approach to support managers and leadership development.	Director of Education, Children's and Early Help Services/Head of Children's Services	TBC		Management oversight of practice, including practice scrutiny by senior managers, is established, systematic and demonstrably used to improve the quality of decisions and the provision of help to children and young people.	Not Started
76A	Review models of sector-led improvement and roll-out management/leadership development programme at all levels to embed an open culture that learns from itself and embraces transformational change as a	Head of Children's Services	TBC		Application of existing tools and methods (e.g. Intervention or Prevention? The Leadership Response to Performance Risk - The Leadership Forum, ADSC Virtual Staff College 2013).	Not Started

	mechanism to improve.				More good practice is brought to Reading from other LAs that have experienced similar difficulties.	

5. Performance Management						
5.1 Regular, accurate performance information						
Outcomes we will achieve: Information is used to drive improvement.						
31	Review and development of Performance Management arrangements including Purple Book indicators	Performance and Data Service Manager/ Head of Children's Services	31/07/2015		Managers are aware of their service performance and the actions they need to take in real-time and are able to respond to issues arising in a timely manner.	In Progress (on track)
31C	Undertake a strategic review of the 'Quality and Information for Children's Services' – monthly report (Purple Book) in relation to the content and application of the included data.	Performance and Data Service Manager/ Head of Children's Services	30/07/2015	07.05.15 DH: The volume of information and data reported on within the Purple Book has grown 3-fold in the last year and the current monthly reporting cycle is a challenge, especially given ad hoc reporting demands on top each cycle. 26.05.15 DH: This must tie in with appointment/establishment in role of new DCS/HoS.	Decisions made on use/extension of existing ICT system and/or new systems required.	Not Started
31D	Annex A to be used routinely as a working tool within Children's Services and data quality report to be developed to track completion and compliance.	Performance and Data Service Manager	12/06/2015		Automated process and additional fields added to provide additional detail e.g. Care Plan, PEPs and CIN Plans. Evidence of the day to day usage of automated reports by workers and managers. Demonstrable evidence of improved performance across all aspects of social care practice.	In Progress (on track)
31E	Restatement of the correct processes in relation to where information needs to be recorded and training and support to ensure this is embedded into practice and management oversight.	Performance and Data Service Manager	31/03/2016	26.05.15 DH: There is an issue around resourcing (current resource is 3dpw and full utilised). 03.06.2015 CP: End date reflects need for clarity on resourcing.	Ensuring of consistency in recording key events, episodes and case notes.	Not Started

31F	Increased use and application of the Workload Report which will be checked by all workers and managers on a daily basis and embedding of data within front screen on Mosaic in Framework I.	Service Manager - Improvement, Service Manager - Family Support, Service Manager - Access, Service Manager - Placements,	TBC		Information provided on current actions to be completed, and the dates by which these need to occur	Not Started
31G	Provision of additional support for workers and managers to embed new set of requirements, to ensure consistency of application and to support the introduction of Mosaic.	Head of Children's Services	TBC		Recruitment of an additional post (Assistant Performance Analyst) at RG4 level. Further development of the super user role (Framework I/Mosaic based in the four locations to support staff on a daily basis.	Not Started
31H	Development of SQL reports through a dedicated consultant for 3 months.	Performance and Data Service Manager	31/08/2015	26.05.15 DH: Annex A will be done by second week June. Corporate Indicators part needs more thought in order to specify job to be done by the consultant.	Assistance with automation of specific reports for the Corporate Indicators and Annex A.	In Progress (on track)
31I	Work to ensure Corporate Performance requirements provide a strong framework to embed changes	Head of Children's Services	TBC		Transformation of culture and improvement in ownership and accountability of performance in the service.	Not Started
31J	Explore potential solutions available that will empower mangers to access performance information themselves (e.g. self-service)	Performance and Data Service Manager/ Head of Children's Services	31/07/2015	26.05.15 DH: This will need to include work with Managers to explain what is already possible through self-service in Fwki.	Options for 'what ICT is on the market' presented and discussed.	Not Started
56	Reduction of separate spreadsheets and work undertaken to integrate systems into the main frame systems. A final list of agreed spreadsheets will be drawn up and tabled at CSCMT for approval.	Service Manager - Improvement /Performance and Data Service	31/03/2015	07.05.15 DH is awaiting agreement from CSCMT on the set of spreadsheets to tackle- as this is an ever changing group. Work cannot start on this until year end is complete. List has been provided,	Review undertaken to prioritise the spreadsheets. List completed and ready for review.	In Progress (Overdue)

		Manager		but CSCMT yet to come back with approval.		███
56B	Moving CATS Teams to Framework I/Mosaic.	Service Manager - Improvement /Performance and Data Service Manager/Servi ce Manager - Early Help/Mosaic Implementatio n Programme Manager	31/12/2015	This is a major piece of work, and need to consider achievable timescales. A project plan needs to be drawn up and agreed. All managers need to sign up to confirm that there are no other spreadsheets. 07.05.15 DH: This fits into Tranche 3 of the Mosaic programme and is about the CATS teams and the way they deal with the CIN cases. 03.06.2015 AF: Confirmed this status is current	CATS Teams have case recording/MI system to use.	Not Started
56C	Write detailed work plan for implementation.	Service Manager - Improvement /Performance and Data Service Manager/Servi ce Manager - Early Help/Mosaic Implementatio n Programme Manager	31/07/2015	Project plan has been drawn up. Sign off from CSCMT – awaited 07.05.15 DH: this goes to the MOSAIC Board and HOS in attendance.	Implementation plan written.	Not Started
86	Strategic review of ICT systems in use within Children's Services	Head of Commissionin g and Improvement /Business Partnership Manager/Perf ormance and Data Service Manager	30/06/2015		ICT systems baseline work completed and consideration given to which existing systems can be extended to other teams/services to meet their requirements, which systems can be decommissioned and whether there are any new solutions/systems that need to be introduced to fill a gap.	Not Started

5.2 User feedback mechanisms						
Outcomes we will achieve: Feedback on services is used to improve services.						
42	Programme of gathering information from children, young people and their families about the quality of services they have received. Programme to be formulated and endorsed by the Corporate Parenting Board and the Children in Care Council for looked after children and by the RSCB for other children receiving a service. For example, undertaking qualitative sampling of children on their views of the quality of visits.	Service Manager - Intensive Support/Servi ce Manager - Family Support/Servi ce Manager - Safeguarding & Quality Assurance	TBC		Information used to improve the quality of the services by making changes as a result of feedback.

Audit trail of evidence of the voice of children and their lived experiences to be evident in the way in which services are delivered.

Information on changes to be feedback to children, young people and their families. | Not Started |
42A	Construct feedback mechanism for all stages of the child's journey	Service Manager - Intensive Support/Servi ce Manager - Family Support/Servi ce Manager - Safeguarding & Quality Assurance	TBC	01.06.2015 Tom Woolmer is investigating the implications of this action and discussing with Manager's in the service on how this could implemented	Feedback captured at all stages of the child and families journey through services.	Not Started
5.3 Audit supervision activity						
Outcomes we will achieve: Effective independent reviewing improves outcomes for children and young people who are on Child Protection Plan or are Looked After Children(LAC).						
85	Implementation of Safeguarding and Quality Assurance Service action plan	Service Manager - Safeguarding & Quality Assurance	31/05/2015		Effective independent reviewing improves outcomes for children and young people who are on Child Protection Plan or are Looked After Children(LAC)	In Progress (on track)

| 85A | Implementation of action plan | Service Manager - Safeguarding & Quality Assurance | 31/05/2015 | 18.05.15 AMD: Action plan provided that is being implemented. For more details refer to the operational file "Team Action Plan 18.05.15.docx" provided by AMD. | Action plan implemented successfully focussing on child protection plans (SMART), practice standards for IROs and CP chairs, CP thresholds, CPC monitoring of CP plans, an effective allegation management system and review of records to ensure consistency, embedding of audit review system in service, bring care/pathway plans up to date, distribution of IRO reports, appropriate legal statuses for LAC children, IRO booklet shared with LAC, embedding of robust challenges into practice, effective use of team meetings, review of business support functions and individuals within team. | In Progress (on track) |

6. Services for LAC & Permanency

6.1 High quality services for LAC and Care Leavers

Outcomes we will achieve: Looked After Children and care leavers feel well supported and are able to access opportunities.

| 27 | Work to improve practice regarding the application of robust decision-making process for all children throughout their permanency journey including support to children on the edge of care and those entering care. | Head of Children's Services | TBC | | Decisions to look after children and young people are timely and made only when it is in their best interests. These decisions are informed by thorough assessments of the child's circumstances and possible alternatives to care. Legal planning meetings and professional meetings are used effectively to ensure that decisions to start legal proceedings are carefully considered and prompt action taken to issue when needed. | Not Started |
| 27A | Re launch of training in relation to PLO to reduce drift in usage | Head of Children's Services | TBC | | Legal planning meetings result in a clear direction regarding issuing proceedings. In situations when proceedings do need to be issued, they are done so in a timely manner. | Not Started |

28	Work to increase usage of tracking tools by managers which covers the child's journey from LPM onwards. Meetings held to review progress. Separate meeting needed in relation to adoption tracker.	Performance and Data Service Manager	TBC	03.06.2015 DH is currently considering an appropriate end date that could be assigned to this task	Reduction and removal of drift and delay in achieving permanency for children and young people.	Not Started
24	Review current contract with NYAS and re commission advocacy services	Head of Children's Services	31/07/2015	30.04.15 JHB: The current contract officially ran out in June 2014, but contract allows for a 24 months roll-over period. This action has been planned into the team's workload but will be done as other priorities allow. End date changed.	This will provide a decision book to extend the contract beyond the 3 year period that expired in June 2014.	In Progress (on track)
25	Work to increase the use of independent visiting services for LAC and CIN through the short term provision of spot purchasing arrangements.	Head of Children's Services/ Senior Commissioner - Children & Young People's Services	30/11/2015	30.04.15 JHB: The amount NYAS are looking to charge for the IV service which goes over the 10% threshold to add this element onto the contract. NYAS has agreed to complete spot purchase advocacy with children on CP plans which will work for RBC in the short term as we are not fully aware of the numbers. Ideally we would look to spot purchase an IV service to monitor the numbers and actual need for the service. This is still being explored.	Independent visit service commissioned and increase in the use of advocacy for LAC.

Independent visits provided both to the 14 young people currently identified as requiring independent visitors (IVs) and to those children and young people who will require IVs as a result of the increased profile and use of the service. | In Progress (on track) |
25A	6-month service review.	Senior Commissioner - Children & Young People's Services	30/11/2015	30.04.15 JHB: A review of the impact of the provider and usage will be undertaken in order to determine future procurement approach beyond the spot contract arrangement.	Impact of short term arrangements understood and future direction of travel clear.	Not Started
33	Work to improve the support for the education and attainment of Looked After Children by the Virtual School.	Head of Education	30/06/2015		Looked after children are supported to help them make good progress in their learning and attainment wherever they live and the gap is bridged in terms of their outcomes compared against their peers.	In Progress (Overdue)
33A	Review and make recommendations on future capacity in the LAC Education team.	Head of Education	31/03/2015	Unable to progress due to failure to secure resources. Head of Service to lead during March and April.	Recommendations taken to DMT for decision.	In Progress (Overdue)

33B	Work with Area Teams to improve the PEP quality and increase the completion rate.	Head of Children in Care/Education/ Service Manager - Family Support	30/06/2015	06.05.15 KMc: The PEP completion rate is 73.6%. Work is continuing to get this rate to 95% and end date extended accordingly.	PEP completion rate increases month on month and children and young people have high quality PEPs that enable/help them learn and achieve.	In Progress (on track)
33C	Identify performance measures to monitor improvement and maintain quality	Head of Children in Care/Education/ Service Manager - Family Support	30/06/2015		Reduction in exclusions for LAC.	Not Started
33D	Reviewing the effectiveness of the Education Plans for LAC (including the Virtual School).	Head of Children in Care/Education/ Head of Education	TBC	06.06.15 KMc: A debate needs to be held around how the Directorate uses the role of Virtual Head. In the short term this is about doing PEPs on time with sufficient quality to make a difference.	New model in place for Virtual School.	Not Started
34	Work to ensure children with SEN/LAC attend alternative education provision.	Virtual Head - Children Missing Out on Education	30/06/2015		Children and young people who do not attend school have access to 25 hours per week of good-quality registered alternative provision.	Not Started
34A	Work with schools to consider what can be done for children on school roll but not attending/on a reduced timetable. For those children who are not on a school roll the Council needs to review how it can fund and then implement/provide alternative provision and to develop an action plan to address the implementation	Virtual Head - Children Missing Out on Education	30/06/2015	12.05.15 GD: Identified as an area of weakness that needs work with schools (mainly secondary schools).	Children and young people have access to alternative provision which meets their needs.	Not Started

35	Development and implementation of new Pupil Premium policy for LAC	Head of Education	30/06/2015		The local authority maintains accurate and up-to-date information about how looked after children are progressing at school overall and those who that are not achieving well or making progress receive focussed help and support in school that continues to narrow the attainment gap with their peers.	In Progress (Overdue)
35A	Working group to review current needs and new models for usage.	Head of Education	30/06/2015	06.05.15 KMc: KMc will chair these sessions and the request for support to lead/co-ordinate this work will be requested through DMT.	Working group mobilised and models reviewed with recommendations on preferred model.	Not Started
35B	Agreement in draft	Head of Education	31/12/2014	Policy has been drafted – requires Members' sign off after review of Education team capacity.	New agreement based on preferred model drafted.	In Progress (Overdue)
35C	Policy agreed and in place	Head of Education	31/03/2015	Tied to item 33, will not be considered at March ACE meeting.	New model signed off and in place.	Paused
40	Review of all Placement Orders. Due to the considerable delay and lack of success in finding adoptive placements for some children with Placement Orders adoption is no longer a viable option and hence the decision is needed in some cases to revoke the Placement Order and propose a suitable alternative permanent option for the child to court.	Service Manager - Family Support	28/02/2015	Proceedings are being issued in batches. Two of the revocation of Placement Orders has been issued. The statements are on track to start coming in at end of November/ beginning of December. The designated family Judge is agreeable to dealing with them in blocks. AK has picked up this task. Actions are being tracked via the CLA legal meeting. This will be focused on at next tracking meeting as timescales may have slipped as a result of a number of urgent court applications having to be made. Anticipate that these will be completed End Feb. 12.05.15 AK: There is not enough capacity in legal department to prioritise this over other legal work.	No children remain subject to Placement Orders other than those for whom there is active and rigorous family finding activity.	In Progress (Overdue)

41	Strengthening the profile of the Corporate Parent Group by reviewing the profile and impact of the Corporate Parenting Group and identifying key projects which involve employment opportunities for opportunities for Care Leavers and suitable accommodation being available in the local area.	Director of Education, Children's and Early Help Services	TBC		The profile of Corporate Parenting is strengthened and enhanced and acts as a powerful advocate for LAC and Care Leavers. The local authority is an active, strong and committed corporate parent that knows the children and young people it looks after well.	Not Started
43	Revised LAC and Care Leavers and Permanency Strategy.	Service Manager - Placements	30/06/2015		All workers are clear about the process to follow, timely decision making and permanency planning for children.	In Progress (on track)
43E	Draft document and take to Foster Carers Working Group and incorporate feedback.	Service Manager - Placements	31/05/2015		Feedback from foster carer's views articulated in document.	Not Started
47	Review and drive improvement in services for Care Leavers (driven by recommendations from the Barnardo's review).	Service Manager - Family Support	30/04/2015		Care Leavers receive a high quality service from children's social care and partner agencies. The engagement with care leavers is good and the service knows where all the care leavers are and has appropriate levels of contact with each young person based on their personal needs and pathway planning.	In Progress (on track)
47B	Develop an action plan based on the findings of the review of Leaving Care Service and other findings such as the national New Belongings project.	Service Manager - Family Support	31/05/2015	18.05.15 DO: Identified need during meeting with HMc on 18/5. 21.05.15 DO: Report is being released and cleared for publication, emerging findings included as actions to address improvement.	Clear action plan developed with owners identified.	Not Started
47C	Implement recommendations from review and other sources that focuses on reducing inconsistent practice, improving recording and the quality of Pathway Plans, effective support plans, the health of young people, post 21 support, improved housing options (including 24/7 on site support to bespoke packages), continued improved	Service Manager - Family Support	TBC	21.05.15 DO: Report is being released and cleared for publication, emerging findings included as actions to address improvement.	Service improvement and better outcomes for Care Leavers.	Not Started

	EET, continued use of Staying Put, proactive engagement with and listening to what care leavers say and using this information to improve services, performance management, risk management and improved supervision.					
47D	Set clear service standards and management oversight of practice must be improved to ensure that the standards of a 'good' service are met.	Service Manager - Family Support	TBC	21.05.15 DO: Report is being released and cleared for publication, emerging findings included as actions to address improvement.	Service standards are known and understood by all staff and applied consistently through management oversight.	Not Started
47E	Formulate a new plan to audit cases which is intensive and effective.	Service Manager - Family Support	TBC	21.05.15 DO: Report is being released and cleared for publication, emerging findings included as actions to address improvement.	Audit process in place to ensure improvements are sustained and become BAU.	Not Started
48E	Take new work plan for the Care Leavers Service to Children in Care Council for review/reappraisal to ensure there is a high level of engagement.	Service Manager - Family Support	TBC	21.05.15 DO: Report is being released and cleared for publication, emerging findings included as actions to address improvement.	Care Leavers endorse and feed into the service improvement plan.	Not Started
48F	Review of the capacity of the PAs within the team.	Service Manager - Family Support	TBC	21.05.15 DO: Report is being released and cleared for publication, emerging findings included as actions to address improvement.		Not Started
86	Purchasing increased 16+ semi-independent provision	Senior Commissioner - Children & Young People's Services	15/07/2015		Create capacity for a 6-bed unit so that we don't have place in B&B anymore and are thus Southwark judgement compliant	**Not Started**
86A	Complete the contract	Senior Commissioner - Children & Young People's Services	15/07/2015		Contract completed and ready.	Not Started
86B	Write the Decision Book	Senior Commissioner - Children & Young People's Services	30/06/2015		Decision Book written.	Not Started
88	Raise awareness and promote the pledge to Looked After Children	Participation and Accreditation	30/11/2015	01.06.2015 Work on this action will commence closer to the LAC celebration event which takes place	Improvement in feedback from survey undertaken at last year's LAC celebration event to	Not Started

		Co-ordinator		during October Half Term	demonstrate that the commitments in the pledge are being delivered.	

6.2 Improving fostering and adoption services						
Outcomes we will achieve: Where it is appropriate, children are fostered and adopted in an appropriate timescale to meet needs.						
38	Develop and agree new Sufficiency document	Service Manager - Placements	31/05/2015		Commissioning & Fostering/Adoption Sufficiency strategies are informed by the needs analysis that has been developed. This is used in produce the recruitment targets for local foster care and adoption placements. Reduction in out-of-borough placements and more children being placed in Reading.	In Progress (on track)
38C	Meeting to decide on targets and related strategies. Finalise Sufficiency Strategy document and release for consultation. Report to be approved through Elected Member sign off process at Committee. Implementation process commenced.	Service Manager - Placements	15/05/2015	30.04.15: JA in the process of setting up meeting. 08.05.15 SK: Target setting complete and meeting set up with DCS and HoS to approve the target. Final version to be complete in the next 2 weeks. 22.05.15 Final draft completed and is being checked. JA is writing the Committee report.	Meeting completed and targets/strategies agreed. Consultation finalised and approval process completed. Strategy implemented.	In Progress (on track)
38D	Identification of financial efficiencies in relation to cost savings from reduction in IFA placements.	Service Manager - Placements	31/05/2015	08.05.15 SK: There is the potential for reinvestment in Early Help from money saved	Clear and realistic savings targets identified and endorsed by DMT/CMT	Not Started
38F	Update the recruitment plan in light of social care deep dive findings and refresh.	Service Manager - Placements/ Project Manager	15/05/2015	22.05.15 Final draft completed and is being checked. JA is writing the Committee report.	Plan updated and ready for review.	In Progress (on track)
38H	Launch Reading Foster Carer Campaign (including revised website, profile of advertising, events and targeting leading to recruitment activity for in-house foster carers.)	Service Manager - Placements	30/06/2015		Increase in in-house foster carers, reduction of out-of-borough placements and more children are placed in Reading.	Not Started
38I	Impact analysis of recruitment activity undertaken.	Service Manager - Placements	30/09/2015		Adjustments to recruitment campaign made and target in-house/IFA ratio achieved.	Not Started

Ref	Action	Owner	Due Date	Update	Outcome	Status
38J	Take document to Foster Carers Working Group and incorporate feedback.	Service Manager - Placements	22/05/2015		Feedback from foster carer's views articulated in document.	Not Started
38N	Re-commission IFA contract	Senior Commissioner - Children & Young People's Services/ Project Manager	28/02/2015	All 11 Southern Authorities have agreed to extend the current IFA Framework for the second plus 1 year, formal sign off of the documents will be required in due course 30.04.15 DO: Louise Palmer-May is writing the commissioning strategy (task) and this action comes under this as well.	TBC.	In Progress (on track)
44	Review of all allowances SGO/Adoption/Fostering/ Child /Arrangement Order /Staying Put/Post 18, Decision Book agreement and corresponding policies.	Service Manager - Placements	31/05/2015		Enabling effective recruitment of sufficient local carers.	In Progress (on track)
44E	Draft Staying Put /Supported Lodgings Policy and align with RBC Shared Lives Scheme.	Service Manager - Placements	30/04/2015	30.04.15 JA: Both policies are going to Foster Carers Working Group on 06.05.15.	Policy ready for review by impacted parties.	In Progress (on track)
44F	SGO Policy final draft sent out.	Service Manager - Placements	05/06/2015	30.04.15 JA: Draft has been sent to VL, JA and the Group and will be discussed at Foster Carers Working Group on 06.05.15	Draft policy document ready for discussion with impacted groups.	In Progress (on track)
44G	Take document to Foster Carers Working Group and incorporate feedback.	Service Manager - Placements	06/05/2015	30.04.15 JA: A new version will be available for sign-off by end of May	Feedback from foster carer's views articulated in document.	Not Started
44H	Incorporate feedback and amend Staying Put & SGO Policy draft for discussion with Young People.	Service Manager - Placements	22/05/2015	30.04.15 JA: Take these drafts to the Children in Care Council.	Feedback from children and young people articulated in document.	Not Started
44J	Corresponding policies agreed.	Service Manager - Placements	31/05/2015	30.04.15 JA: This happens once CSMT, DMT and LMB has taken place.	Document completed and ready for sign-off process.	Not Started
45	Review fee element of payments to Carers and develop a model for implementation. Following consultation with carers and agreement for the new scheme the scheme will be implemented.	Service Manager - Placements	31/10/2015	30.04.15 JA: This is planned to take place via working groups that will be complete by the end of May. Consultation with carers will take place after a 45 day consultation period.	Enabling effective recruitment of sufficient local carers.	In Progress (on track)

74	Undertake Coram diagnostic assessment and implement recommendations	Service Manager - Placements	TBC		From the diagnostic a strong foundation is established for improving the permanency outcomes for children. The service experiences critical challenge and is able to improve as a consequence of the diagnostic.	In Progress (on track)
74A	Complete diagnostic and management review of findings.	Head of Children's Services	TBC			In Progress (on track)
74B	Complete profile of children placed for adoption compared with profile of LAC/children currently needing adoptive families and those who the service has not been able to place.	Service Manager - Placements	TBC		Timescales and detecting the potential drift in children's journeys takes place using the 5 key stages of the adoption process by comparing the ten shortest and ten longest journeys.	In Progress (on track)
74C	Review of permanency planning for all children under 5 (whether or not there was a plan for adoption) who have remained in care for 2+ years.	Service Manager - Placements	TBC		Review completed and findings discussed by management. An action plan is developed for each of these children.	In Progress (on track)
74D	Analysis of the adopters journey	Service Manager - Placements	TBC		Analysis completed and service developments to improve the adopter's journey are put in place.	In Progress (on track)
74E	Ascertain the unit cost of placing children for adoption alongside a productivity figure for the service.	Service Manager - Placements	TBC		Financial analysis completed, efficiencies identified and actions taken to maximise these savings.	In Progress (on track)
74F	Identify and track the matching activity and placement success for some children waiting or coming through who are deemed hard to place.	Service Manager - Placements	TBC		Increase in successful placement of 'hard to place' children.	In Progress (on track)
6.3 Health of LAC						
Outcomes we will achieve: Looked After Children experience similar health outcomes to the wider community.						
77	Improving the health of Looked After Children by delivering a very high proportion of health assessments and to ensure the locally set target is met and that this performance is maintained.	Head of Children's Services	TBC	A specifically detailed action plan has now been developed.	Children and young people are in good health or are being helped to improve their health and their health needs are identified.	Not Started

71	Implement comprehensive CAMHS service delivery action plan.	Head of Children's Services/ Director of Joint Commissioning, Berkshire West CCGs	31/03/2017		Child and adolescent mental health provision, therapeutic help and services for learning or physically disabled children and young people are available when needed and for as long as they are required. There are services available to support the mental and emotional wellbeing of children and all partners work well to consistently deliver positive health outcomes for children in care.	In Progress (on track)
71A	Reduction in waiting times for help and increase resources to meet demand.	Head of Children's Services/ Director of Joint Commissioning, Berkshire West CCGs	31/12/2015	07.05.15 VL: CAMHS action plan included as part of overall improvement plan	Improved speed of service being accessible at critical times for children and young people.	In Progress (on track)
71B	Increase Tier 2 provision, to ensure timely 'early intervention', reducing escalation of mental health problems and reducing the need for specialist Tier 3 and 4 services.	Head of Children's Services/ Director of Joint Commissioning, Berkshire West CCGs	31/03/2016	07.05.15 VL: CAMHS action plan included as part of overall improvement plan	Assess to a range of early intervention services which are successful in reducing further involvement.	In Progress (on track)
71C	Free CAMHS staff to work more collaboratively with partner agencies.	Head of Children's Services/ Director of Joint Commissioning, Berkshire West CCGs	31/07/2015	07.05.15 VL: CAMHS action plan included as part of overall improvement plan	Improved successful partnership working.	In Progress (on track)

71D	Improve support in schools.	Head of Children's Services/ Director of Joint Commissioning, Berkshire West CCGs	31/03/2016	07.05.15 VL: CAMHS action plan included as part of overall improvement plan	Improved identification of those children and young people who need additional support in schools and ease of access to such services.	In Progress (on track)
71E	Provide more information about services and how to access them. Deliver improved communications and administration.	Head of Children's Services/ Director of Joint Commissioning, Berkshire West CCGs	31/07/2015	07.05.15 VL: CAMHS action plan included as part of overall improvement plan	Improved communication for children and young people so that they are able to find out about services and to gain help, support and advice.	In Progress (on track)
71G	Improve the environment where CYP are seen or are waiting including more privacy for confidential conversations and availability of toys.	Head of Children's Services/ Director of Joint Commissioning, Berkshire West CCGs	31/03/2015	07.05.15 VL: CAMHS action plan included as part of overall improvement plan	Improved surroundings which are attractive and welcoming to children and young people so that they feel supported and helped.	In Progress (on track)
71H	Better post-diagnostic support, particularly for children with Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD).	Head of Children's Services/ Director of Joint Commissioning, Berkshire West CCGs	31/03/2016	07.05.15 VL: CAMHS action plan included as part of overall improvement plan	Improved longer term support post diagnosis.	In Progress (on track)
71I	Provide better access to services in a crisis and out of hours. Provide a local 24/7 inpatient service for those CYP with the most complex need.	Head of Children's Services/ Director of Joint Commissioning, Berkshire West CCGs	31/05/2015	07.05.15 VL: CAMHS action plan included as part of overall improvement plan	Improved speed of service being accessible at critical times for children and young people.	In Progress (on track)

32	Development of SDQ project to inform CAMHS commissioning.	Head of Children's Services/Head of Children's Commissioning	30/09/2015		The emotional well-being needs of children in care are identified early and appropriate support is identified and delivery	In Progress (on track)
32B	Research phase (includes survey, focus groups, file audits and semi structured interviews and questionnaires) completed.	Principal Educational Psychologist	30/05/2015	Survey of other LA's completed. Staff focus groups currently underway, 2 completed and 1 more to do. File audits started. Interviews and questionnaires to be started. All on track.	Research results available for analysis.	In Progress (on track)
32C	Written report with recommendation and plan to improve use of SDQs	Principal Educational Psychologist	30/09/2015		Report written.	In Progress (on track)
6.4 Improving life story work						
Outcomes we will achieve: Children and young people understand, in an age appropriate way the decisions about them and their lives.						
78	Ensure all children remaining in LA care or where adoption is the plan have life story work completed which is regularly updated.	Head of Children's Services	TBC		All children and particularly Care Leavers understand the journey they have been on through their life and are supported to capture and record key life events in their own words.	Not Started
78A	Develop a framework and policy statement that states the Reading intention for life story work for LAC. This will include a toolkit for life story work including memory boxes and a range of tools which can be used depending on the age of the child. Training will be provided to workers, managers, carers and schools.	Head of Children's Services	TBC		Clear statement of intent within the service and the meeting of the National Minimum standards.	Not Started
78C	Develop and roll-out an audit/monitoring process to ensure work is undertaken (e.g. at adoption panel or through LAC reviews).	Service Manager - Safeguarding and Quality Assurance	TBC	03.06.2015 AMD: Links to overall audit programme	QA and monitoring to ensure work is undertaken to the required standard.	Not Started

Section 4: Glossary of Terms

Initials	Full Name	Role
AB	Ashley Burton	National Management Trainee
AF	Andy Fitton	Service Manager - Early Help
AK	Averil Kathan/Alex Kaitell	Service Manager - Family Support
AMD	Ann-Marie Delaney	Service Manager - Safeguarding & Quality Assurance
AW	Avril Wilson	Former Director of Education, Social Care and Housing
BB	Ben Boatman	Children's Commissioning Officer
BD	Brigid Day	Head of Commissioning and Improvement
CH	Clare Houlton	Head of Children in Care/Education
CP	Clare Priest	Project Manager
DH	Dot Hayward	Performance and Data Service Manager
DHu	Deborah Hunter	Principal Educational Psychologist
DO	Dem Oral	Business Project Manager
EB	Esther Blake	LSCB Business Manager & Children's Trust Partnership Manager
FGT	Fran Gosling-Thomas	LSCB Chair
GA	Gabrielle Alford	Director of Joint Commissioning, Berkshire West CCGs
GD	Gabriela Dawkins	Access and Assessment Team Manager
GDu	Gill Dunlop	Virtual Head - Children Missing Out on Education
GH	Councillor Graeme Hoskin	Lead Councillor for Health
HM	Helen McMullen	Director of Education , Children's and Early Help Services
IW	Ian Wardle	Managing Director
JA	Jean Ash	Service Manager - Placements
JF	Jill Forrest	Project Manager
JG	Councillor Jan Gavin	Lead Councillor for Children's Services and families
JHB	Jonathan Hill-Brown	Senior Commissioner - Children & Young People's Services

KB	Katia Boev	Mosaic Implementation Programme Manager
KJ	Kate Jahangard	Service Manager - Access
KMc	Kevin McDaniel	Head of Education
ND	Nigel Denning	Service Manager - Intensive Support
PH	Paul Harrington	Chief Auditor
PL	Pat LeRoy	Service Manager - Improvement
RB	Rose Blackadder	Former Service Development Manager
SK	Suzanne King	Project Manager
SM	Sally Murray	Head of Children's Commissioning
SS	Sophie Skiba	Consultant
ST	Sarah Tapliss	Strategy/Service Development Manager
TS	Tracy Sloan	Business Partnership Manager
VLu	Vicki Lucas	Operations and Support Manager
VL	Vicki Lawson	Head of Children's Services

Abbreviation	Meaning
A&A	Advice and Assessment Team (Social Care 'front door')
CSP	Community Safety Partnership
MASH	Multi-agency Safeguarding Hub
CSP	Community Safety Partnership
TVP	Thames Valley Police

APPENDIX 2

DRAFT VERSION

READING CHILDREN'S SERVICES IMPROVEMENT BOARD

Terms of Reference

Purpose

•	To support immediate and sustainable improvement of services for children in need of help and protection and/or looked after children in Reading.
•	To monitor and report progress on the actions set out in the Reading Children's Services Improvement Plan. The Improvement Plan incorporates six improvement areas that have been identified locally to drive service improvement to protect and benefit the lives of children and young people
•	To ensure that the Council and its partners serve the best interests of the child.

Detailed Objectives

1.	To ensure that The systems and processes in place in Reading Borough Council keep children in the Borough safe and protect their interests
2.	To oversee the implementation of the Children's Services Improvement Plan and ensure that identified improvement actions are implemented in the timely manner set out
3.	To receive reports from DCEEH which show that actions are demonstrating improvement in the outcome data, are aligned to Corporate, DfE LAIT and Purple Book indicators and show progress and improvements with regards to Directorate strategic objectives and Corporate priorities.
4.	To revise and amend actions where necessary to accelerate improvement
5.	To monitor services risks and ensure they are being managed and reduced
6.	To monitor the financial implications of the Improvement Plan and the relative spend from each agency contributing
7.	To report to the Leader of the Council, Corporate Management Team and the Adult Social Care, Children's Services and Education (ACE) Committee Team three times a year.
8.	 To communicate effectively with all teams, partner organisations and other stakeholders and improve information sharing
9.	To keep the Local Children's Safeguarding Board (LCSB) informed about progress made with regards to the improvement plan and further arrangements to protect Children in the Borough.
10.	To strengthen and hold to account the impact of the LCSB to ensure that partners are held accountable for their responsibilities
11.	To facilitate external oversight and transparency of the improvement process

Membership of the Board

Members:

Independent Chair
Managing Director
Lead Member for Children's Services and families
Director Children, Education and Early Help Services
Head of Children's Services
Reading Clinical commissioning Group Representative(tba)

Thames Valley Police representative(tba)

Ex Officio Members:

Children's Services Transformation Business Manager(TBC)
Programme Manager (Clare Priest)
Performance and Data Service Manager

Additional participants will be invited to Board meetings as appropriate.
Accountability and Governance

The Improvement Board will be accountable to Corporate Management Team and the Adult Social Care, Children's Services and Education Committee.

The independent Chair is the ultimate decision-maker on the Improvement Board. His final decisions will be informed by the Members of the Board.

Members of the Board are responsible for reporting progress and key issues through their own organisations' governance structures. Members of the Board that belong to the Senior Leadership of Reading Borough Council are expected to drive change and improve services through leading by example.

The Business Manager of the Children Services Improvement Plan attends Board meetings as an Ex Officio Member and reports to the Director of Children, Education and Early Help Services. The Independent Chair, the Managing Director and the Lead Member for Children's Services are responsible for reviewing and monitoring the Board's performance.

The Children's Improvement Board's responsibility for the Improvement Plan is time-limited. Initially the Board is set up for a period of twelve months with a progress review to be held after nine months. When the Improvement Board has made significant progress in improving the arrangements to protect children in the Borough its work must be embedded into Reading Borough Council's normal service governance and business as usual. The responsibility for the Children's Improvement Plan will then be transferred to the Corporate Management Team.

The LCSB will report into the Improvement Board during the lifetime of the board.
Frequency of meetings & reporting
The Improvement Board will meet monthly subject to review.
The Improvement Plan will be a standing item. Initially, the Independent Chair, the Managing Director and the Lead Member for Children's Services meet to review the Board's performance on the rising of each Board meeting.
The Independent Chair will attend the ACE Committee meeting to report on progress with the Children's Services Improvement Plan.