

**READING BOROUGH COUNCIL
REPORT BY THE DIRECTOR OF CHILDREN, EDUCATION AND EARLY HELP
SERVICES**

TO:	FULL COUNCIL		
DATE:	18 OCTOBER 2016	AGENDA ITEM:	7
TITLE:	CHILDREN'S SERVICES LEARNING AND IMPROVEMENT PLAN		
LEAD COUNCILLOR:	CLLR J. GAVIN	PORTFOLIO:	Children Services and Families
SERVICE:	DIRECTORATE OF CHILDREN, EDUCATION & EARLY HELP SERVICES	WARDS:	BOROUGHWIDE
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1. PURPOSE OF THE REPORT AND EXECUTIVE SUMMARY

- 1.1 The purpose of this report is to note the findings of Ofsted's Inspection of Reading Borough Council services for children in need of help and protection, children looked after and care leavers, to recognise the progress already made against Ofsted's recommendations, and to inform Council of the proposed plan for further improvement across children's services.
- 1.2 The Ofsted inspection report was published on Friday 5 August 2016 and the inspection took place from 23 May to 15 June 2016. The overall judgement by Ofsted was that Children's Services in Reading are 'Inadequate'. In the executive summary, Ofsted identified serious, persistent and systemic failures in the services provided to children who are in need of help and protection. They were of the view that the instability of the senior leadership over that period had impeded progress. They also concluded that children's social care services had deteriorated since 2012.
- 1.3 The report did identify that since early 2016 there are signs of positive progress involving the establishment of performance management systems helping managers to tackle the weaknesses more swiftly, that the reduction of and heavy reliance on short term agency social workers was progressing, that the services feature some strengths, including the MASH, targeted early help, the

disabilities service, the stability of looked after children. The report did identify that concerns referred during the inspection were acted upon swiftly and appropriately. They noted that permanent appointments had now been made to senior posts in the local authority, that rigorous plans are in place to recruit and retain social workers and frontline managers. The inspectors noted the realistic understanding which senior managers have of the scale of practice weaknesses and that recent action to address these failings was having an impact on timeliness and quality of practice.

- 1.4 As a result of the overall judgement of the inspection of the services, Edward Timpson MP, Minister of State for Children and Families wrote to the Leader of the Council of his intention to issue Reading Borough Council with a Direction under sections 497A(4) and (4B) of the Education Act 1996. The Direction was issued on 16 September 2016 and it requires the Council to co-operate with, and comply with instructions from and provide assistance to the Commissioner for Children's Services (Mr. Nick Whitfield) and the Secretary of State for Education.
- 1.5 The Ofsted framework 'Monitoring local authority children's services judged inadequate' published in May 2016 (ref: 160035), sets out the main activities and timetable that Her Majesty's Inspectors (HMI) undertake when carrying out monitoring visits to local authorities where children's services have been judged inadequate.
- 1.6 The monitoring framework requires local authorities judged to be inadequate to provide a written statement of action (Children's Services Learning & Improvement Plan) to the Secretary of State and HMCI within 70 working days from the local authority receiving their inspection report, for Reading Borough Council this date is 11 November 2016. Ofsted is not responsible for 'signing off' or endorsing the statement of action, this is the responsibility of the Director of Children Services (DCEEHS).
- 1.7 The first activity to take place on 22 September was an Ofsted 'Action Planning Meeting' led by the Senior HMI and the Lead Inspector for South West Region. The purpose of the meeting was for Ofsted to ensure that the local authority has a sufficient understanding of the recommendations to plan appropriately following the inspection judgement. The early working draft of RBC's action (improvement) plan was shared with the Lead Inspector prior to the visit, to assist planning, as required under the framework.
- 1.8 The Reading Children's Services Learning and Improvement Plan is attached in Appendix 1. The plan is structured around three key priorities and 18 outcomes. This responds to the 18 recommendations set out by Ofsted in their inspection report dated 5 August 2016.
- 1.9 Ofsted's Regional Director will write to the Director of Children's, Education & Early Help Services confirming whether the action plan reflects and addresses the 18 recommendations as set out in the inspection report. The Lead Inspector will inform the DfE of the outcomes of this process.

- 1.10 Ofsted will make quarterly monitoring visits to Reading Borough Council, the first of these visits will take place during the week of the 31st October and will last two days. At the end of the visit the Lead Inspector will summarise and feed back findings to the DCS, Interim Managing Director and the Commissioner. The HMI will write a brief report about their findings and although Ofsted will not publish the report relating to the first visit they will publish the reports on each subsequent visit.

2. RECOMMENDED ACTION

- 2.1 That Council approves RBC Children's Services Learning and Improvement Plan, (statement of action) and endorses the strategic approach being taken by the Director of Children, Education and Early Help.
- 2.2 That Council accepts the RAG status, acknowledging the impact that the current resource position is having on the timeliness and sequencing of progress on key actions.
- 2.3 Notes that the Children's Services Learning and Improvement Plan (statement of action) by the Director of Children, Education and Early Help services will be submitted to Ofsted no later than 11 November 2016.

3. POLICY CONTEXT

- 3.1 Ofsted's Inspection findings identified that safeguarding needs of children were not addressed through consistent and prompt enquiry. The impact on children being that they are left in situations of unknown risk. Inspectors found children in situations where they had not been seen by social workers and those in situations where their risks were not understood and acted upon with sufficient urgency
- 3.2 Ofsted's recommendations for improvement have been matched against DfE's three pillars of reform (People and leadership; Practice and Systems; Governance and Accountability) in order to demonstrate how Reading's vision and drive for improvement will deliver fundamental reform across the children's social care system in order to safeguard the needs of children. The Pillars are as follows:
- **People and Leadership** - bringing the best into the profession and giving them the right knowledge and skills for the challenging but hugely rewarding work ahead, and developing leaders equipped to nurture practice excellence
 - **Practice and Systems** - creating the right environment for excellent practice and innovation to flourish, learning from the very best practice, and learning from when things go wrong

- **Governance and Accountability** - making sure that what we are doing is working, and developing innovative new organisational models with the potential to radically improve services

4 THE PROPOSAL

Council is asked to approve the Children's Services Learning and Improvement Plan.

Other Options Considered

- 4.1 There are no other options being considered at this stage. The Council is required to undertake these actions under central government direction.

5 CONTRIBUTION TO STRATEGIC AIMS

- 5.1 This report is in line with the overall direction of the Council by meeting the following Corporate Plan priorities:
- 5.2 Safeguarding and protecting those that are most vulnerable;
- 5.3 Providing the best start in life through education, early help and healthy living.

6 COMMUNITY ENGAGEMENT AND INFORMATION

- 6.1 The Ofsted Inspection Report is a public document and is widely available to provide the community with the judgement of Reading's Children's Services.
- 6.2 The community have not been engaged in the preparation of the immediate improvement response to the Ofsted report publication. However, the improvement plan will be implemented in conjunction with partners, particularly Thames Valley Police, the Clinical Commissioning Group, Berkshire Health Care Foundation Trust, Royal Berkshire Hospital and Public Health, Schools and The Foster Care network.
- 6.3 Particular attention will be paid to the voice of the child which will be represented through the improvement journey outlined in the improvement plan. Work has already been started to strengthen the role of the independent Reviewing Officers, and to strengthen the Children in Care Council.

7 EQUALITY IMPACT ASSESSMENT

- 7.1 An Impact Assessment is not relevant to the preparation of this report.

8 LEGAL IMPLICATIONS

8.1 Whilst there are no legal implications in relation to this report, it is important to note that under Children's Services Legislation, we are required under a general duty of the Children's Act 2004 to address the quality of services and to safeguard and promote the welfare of children.

9 FINANCIAL IMPLICATIONS

9.1 Most of the resources associated with the actions identified in the plan are identified at least in outline in the plan. The Council is currently working under significant financial constraints (as have been outlined to Policy Committee), so as far as practical the action plan will need to be resourced within already approved resources during 2016/17.

9.2 Formally the Council's budget for 2017/18 is set in February 2017, and at that stage the council will need to prioritise the resources necessary to deliver this plan in that year within the context of its budget as a whole. It is anticipated that the budget proposal for DCEEH will include the resources indicated in this plan.

9.3 Work is underway to cost actions, for agreement at the appropriate stage as necessary, where this is not already clear.

10 BACKGROUND PAPERS

Inspection of services for children in need of help and protection, children looked after and care leavers review of the effectiveness of the local safeguarding board.
<https://reports.ofsted.gov.uk/local-authorities/reading>

Monitoring local authority children's services judged inadequate.
<https://www.gov.uk/government/publications/monitoring-local-authority-childrens-services-judged-inadequate-guidance-for-inspectors>

Putting Children First: Delivering Our Vision for Excellent Children's Social Care
<https://www.gov.uk/government/publications/putting-children-first-our-vision-for-childrens-social-care>

Children's Services

Learning and Improvement Plan

August 2016 to July 2017

V9 - 10 October 2016 - Pending Approval



Reading
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INTRODUCTION

Context

The Ofsted inspection of Reading services for children in need of help and protection, children looked-after and care leavers was carried out between 23 May 2016 and 15 June 2016. The report was published on 5 August 2016. The inspection team found Reading children's services to be inadequate. They reported that there were widespread and serious failures that leave children unsafe and mean that the welfare of children looked-after is not adequately safeguarded or promoted.

This Learning and Improvement Plan has been developed in response to the Ofsted inspection report. The report requires the local authority to respond to 18 recommendations for improvement. A number of other improvement actions have been identified by the local authority based on the narrative within the report and these are included within the improvement plan.

The Learning and Improvement Plan has been developed around three key priorities:

1. **People and Leadership:** To provide effective and ambitious leadership and management across children's services, with a permanent and competent workforce to provide responsive and safe services to children and young people in Reading.
2. **Practice and systems:** To create an environment where excellent practice and innovation will flourish, within a framework of continuous learning and improvement.
3. **Governance and Accountability:** To ensure appropriate lines of accountability and governance, with a clear distinction between political, strategic and operational roles; to embed a culture of appropriate challenge and scrutiny at all levels of the organisation and across the partnership, to radically improve outcomes for children and young people in Reading.

Specific actions to achieve improved outcomes for children and young people in Reading are set out under each of the priorities. Each action includes the timescales by which the improvement should be delivered alongside a clear indication of how success will be measured and evidenced. Progress will be RAG-rated and reported monthly to the Children's Services Improvement Board (CSIB).

A specific priority is to implement a revised Early Intervention and Preventative strategy working with partners which will work through a single front door, have clear pathways of support and be underpinned by restorative practice. Once in place, the initial focus will be to have a joint approach to intervening early and preventing significant cases of domestic abuse and cases of neglect. This work will be informed by the Demand Management Review, which was undertaken by Impower.

Governance

The Learning and Improvement plan will be overseen by an independently chaired Improvement Board who will monitor the performance and delivery of the actions in the plan, in order to demonstrate improvement to the Department for Education, the Council and the wider community.

PERFORMANCE AND PROGRESS TRACKER

Initial RAG-rating September 2016		Previous Month September 2016		Current Month October 2016		Direction of travel since the previous quarter
RED	5	RED	5	RED		
AMBER	15	AMBER	15	AMBER		
LIGHT GREEN	40	LIGHT GREEN	40	LIGHT GREEN		
DARK GREEN	0	DARK GREEN	0	DARK GREEN		
COMPLETED	0	COMPLETED	0	COMPLETED		
TOTAL	60	TOTAL	60	TOTAL		

RAG RATING

RED	Action not yet started/significant delay in implementation/delay due to resource availability. The action must be prioritised to bring it back on track to deliver improvement.
AMBER	Action started but there is some delay in implementation. The action must be monitored to ensure the required improvement is delivered.
LIGHT GREEN	Action is on track to be completed by the agreed date. Evidence is required to show that the improvement has been sustained.
DARK GREEN	Action completed and there is evidence that the improvement required has been made. The action remains in the plan for monitoring.
COMPLETED	Action completed and there is evidence that the improvement has been sustained. Approved by CSIB Chair to be removed from the plan.

PRIORITY ONE - People and Leadership:

To provide effective and ambitious leadership and management across children's services, with a permanent and competent workforce to provide responsive and safe services to children and young people in Reading.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG Oct	Progress Update
<p>Reading Borough Council will secure a permanent and competent children's services workforce to deliver responsive and safe services.</p> <p>(Recommendation 1)</p>	<p>1.1 Create an effective and affordable children's services structure for Reading that will enable the delivery of safe and effective services that meet local need.</p>	<p>Clear model for delivery established for Children's Services in Reading, with a secure financial delivery plan, that will ensure the Council is able to meet identified need.</p>	<p>HM</p>	<p>30/09/16</p>	<p>Red</p>		<p>The new model is underfunded by £750k. This has been accepted by the Council as a pressure in year (2016/17). The base budget for 2017/18 is currently being considered and has yet to be finalised.</p> <p>Following a further increase in referrals the new model does not now provide the level of SW staffing to achieve manageable caseloads equivalent to statistical neighbours (18 to 22) based on the current demand. The cost of an additional 15 social workers would be approx. £680k.</p>
	<p>1.2 Implement a workforce strategy to improve the recruitment, induction, and retention of social workers.</p>	<p>There are attractive career pathways enabling the organisation to retain social workers and support them into advanced practitioner and management roles.</p> <p>85% of social work posts are filled with permanent employees;</p> <p>90% of social work management posts (team manager and above) are filled with permanent</p>	<p>SG</p>	<p>31/01/17</p>	<p>Amber</p>		<p>This action is being progressed, however the timeliness and overall success is being impacted by the delay in the appointment of permanent social workers to RBC.</p> <p>In June 2016 there were 71.4fte social work (inc. managers) vacancies to populate the new RBC social care structure (implemented on 22 August 2016).</p> <p>Following the 'bulk recruitment' process in June 2016 43fte social workers were offered posts at RBC (of these 34fte were overseas workers and 9fte were UK workers). In addition an interim worker went to permanent contract.</p>

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG Oct	Progress Update
		<p>employees. There is a reduced reliance and spend on agency social work staff in Reading.</p> <p>No. of working days lost due to sickness.</p>					<p>Of the 43fte offered posts 17fte have now started at RBC (8 fte are overseas workers and 9 are UK workers); 10fte have not been able to take up post due to validation issues, or deciding not to take up post. 16 remaining candidates (all overseas workers) are currently being progressed through HR validation processes.</p> <p>The permanent recruitment process continues with 49fte social work posts (inc. managers) still vacant (which assumes the full 16fte being processed pass validation and start at RBC) as at 10-10-2016.</p>
	<p>1.3 Embed Readings chosen social work delivery model (Signs of Safety) that will support the delivery of best practice across the partnership, and establish clear practice standards.</p>	<p>The average SW caseload is no greater than 22 (18 LAC); there are no unallocated child protection cases, or cases where a child is looked after longer than 24 hours.</p> <p>The 'front door' (MASH) arrangements are safe and effective.</p> <p>100% of contacts are responded to within 24 hours.</p> <p>100% of referral decisions made within 24 hours</p>	SG	31/12/16	LG		<p>Work is in progress and phase one with all existing workers is on track to be delivered by the end of December 2016.</p> <p>A second phase will need to be delivered for all new starters from January 2017 onwards.</p>

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG Oct	Progress Update
		% of re-referrals within 12 months is equal to or less than the national average.					
	1.4 Complete a skills audit across the workforce to determine the current levels of professional competence, and inform the design of the learning and development offer.	Themes from audit identified and used to inform the annual training programme. A reduction in the number of routine casework audits undertaken judged to be 'Inadequate'.	AMD	31/12/16	LG		On track.
	1.5 Develop structured learning and development pathways for social workers and early help practitioners that set out the core learning expected of all professionals. <i>The social work pathway to be based on the employer standards and the Professional Competencies Framework for social workers.</i>	100% of staff have received an annual performance appraisal; which includes a personal development plan that meets their identified needs, within the last 12 months. The number of staff across the directorate subject to performance improvement plans has reduced.	AMD	31/03/17	LG		On track.
	1.6 To deliver a leadership and development programme for all managers (team managers and above) through the Virtual Staff College.	All permanent managers have successfully completed the VC Leadership programme.	AMD	31/03/17	Amber		The first phase for existing managers is fully funded. However the majority of team managers and above in CSC are currently covered by interim staff and there will therefore need to be a second phase of training provided to our permanent cohort as and when appointed that is not yet funded. Cost will be dependent on numbers.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG Oct	Progress Update
Staff will be supported and challenged through regular high quality supervision and effective management oversight. (Recommendation 4)	4.1 Improve the quality, frequency and recording of professional supervision to ensure that it is reflective, improves the quality of practice through case discussion, and focuses on professional and personal development.	<p>A revised Supervision Policy is in place, which is used consistently across the workforce.</p> <p>The workforce is qualified and well-motivated, with access to high quality professional development and supervision focused on delivering excellent outcomes for children, young people and their families.</p> <p>100% of all case holding workers receive professional supervision every 4 weeks.</p>	SG	31/10/16	LG		On track.
	4.2 All managers of case holding staff to receive mandatory supervision training.	<p>Audit activity confirms that there is highly effective management oversight focusing on the quality of practice including impact, risk, and outcomes for children/YP.</p> <p>Managers are able to effectively lead on practice improvements, and are held to account by the Head of Service.</p> <p>All permanent managers</p>	AMD	31/03/17	LG		On track.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG Oct	Progress Update
		have completed the mandatory supervision training.					
	4.3 Refresh the quality assurance framework to ensure that the process for evaluating the effectiveness of professional and casework supervision is in place, and areas for learning and development are captured and implemented.	<p>A refreshed QAF is in place with an annual programme of routine QA activity.</p> <p>Audits confirm that supervision is of 'good' or better quality.</p> <p>The annual staff survey confirms that staff feel well supported, and have the confidence to make difficult decisions.</p>	KS	31/03/17	LG		On track.
	4.4 To undertake a follow-up review of all cases referred back by Ofsted (Annex H's) and those children/YP that were tracked by Ofsted during the inspection.	All of those cases identified by Ofsted have been reviewed, and management actions have been completed.	SG	30/09/16	LG		<p>All Management actions complete on Annex H cases.</p> <p>The tracked cases review of actions is due for completion by end of September.</p>

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG Oct	Progress Update
Good quality management oversight will ensure that children and their families are not subject to delay and achieve positive outcomes. (Recommendation 7)	7.1 To establish a clear set of management expectations and practice standards for practitioners and managers across children's services.	Reading's Practice Standards Framework is in place. 90% of social work management posts (team managers and above) are filled with permanent employees. Case work audits confirm that management oversight is timely and effective. Case work audits confirm that the plan for the child/yp is appropriate with a clear and timely 'management footprint' evident on the child's record; in line with Reading's Standards.	SG	30/06/17	LG		On track.
	7.2 Determine manageable caseloads for social workers, so that they can respond appropriately and in a timely manner to the needs of children and young people.	The average SW caseload is no greater than 22 (18 LAC); there are no unallocated child protection cases, or cases where a child is looked after longer than 24 hours. 100% of single assessments concluded within statutory timescale.	SG	31/03/17	Amber		This is RAG rated Amber due to the permanent staffing establishment issues set out in action 1.2 and 1.3 above; which includes base budget funding implications for a permanent and fully funded establishment.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG Oct	Progress Update
		<p>100% of CIN are visited every 6 weeks (minimum).</p> <p>100% of children subject to a CP Plan seen within 10 working days (minimum).</p> <p>% of children subject to a repeat CP plan within 2 years is in line with or better than statistical neighbour performance.</p> <p>100% of LAC seen every 6 weeks (minimum).</p>					
	7.4 Implement effective performance management mechanisms to ensure that data and information is timely and used to inform practice.	<p>Managers have access to accurate and timely data and intelligence that is used to improve the timeliness and quality of practice including:</p> <ul style="list-style-type: none"> • Weekly Performance Summary • Monthly operational Dataset • Monthly Performance Board • Programme of annual target setting 	KS	31/03/17	RED		<p>This action has been RAG rated red due to the reduction of performance and data analysis resources on transfer to Children's Services at the end of August 2016. Whilst some interim agency capacity has been approved from October 2016 to March 2017; the funding required to permanently establish the team at the appropriate resourcing level has not yet been approved.</p> <p>The approximate additional year on year cost is £105k.</p>
	7.5 Mosaic system to be reviewed to ensure that the recording tools to support the accurate and timely recording of	The management 'foot print' is visible; the child/young persons 'story' is accurate and accessible within the electronic case	KS	31/03/17	Amber		This action has been RAG rated amber as there is as yet no 'Business as Usual' function for Mosaic system development and maintenance in RBC. The current Mosaic Project Team is responsible for the delivery of a specific

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG Oct	Progress Update
	management oversight and supervision are fit for purpose, and are used consistently across the service.	record, which is used to inform decision making and planning.					plan/brief by June 2017, which does not reflect the full day to day requirements for Children's Services. A Mosaic Champion has been appointed due to start on 3/10/2016, their work programme is yet to be confirmed by the corporate centre. Funding has yet to be finalised.
	7.6 Develop and implement a workload management tool.	The average SW caseload is no greater than 22 (18 LAC); there are no unallocated child in need, child protection cases, or cases where a child is looked after longer than 24 hours.	SG	31/03/17	LG		On track (delivery of the tool).

PRIORITY TWO - Practice and systems: To create an environment where excellent practice and innovation will flourish, within a framework of continuous learning and improvement.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
All children and young referred to Reading Children services will receive a timely, appropriate, and consistent response that meets their individual needs. (Recommendation 2)	2.1 Review the workflow on Mosaic to ensure that the casework system meets the recording needs of assessment, strategy discussion, and section 47 investigations (including a structured recording template for minutes).	Strategy discussions and management decisions to initiate S47 investigations are clearly recorded on Mosaic, in a timely manner.	KS	31/03/17	Amber		This action has been RAG rated amber as there is as yet no 'Business as Usual' function for Mosaic system development and maintenance in RBC. The current Mosaic Project Team is responsible for the delivery of a specific plan/brief by June 2017, which does not reflect the full day to day requirements for Children's Services. A Mosaic Champion has been appointed due to start on 3/10/2016, their work programme is yet to be confirmed by the corporate centre. This post is not funded.
	2.2 To ensure that all strategy meetings are chaired by a qualified SW Team Manager; with a structured format/agenda, within statutory timescale.	No. of strategy meetings held. 100% ICPCs held within statutory timescale. No. of S47 Investigations completed.	SG	30/09/16	LG		On track.
	2.3 To ensure that all assessments and investigations are commensurate with the signs of safety model in identifying and managing risk.	100% of casework audits conclude that the investigation had effectively evaluated the risks to the child, with management oversight on the decision reached.	SG	31/03/17	LG		On track.
	2.4 Develop a single point of access, and strengthen	The single point of access provides timely decision-	SG	30/06/17	LG		On track.
Thresholds will be consistently applied	2.4 Develop a single point of access, and strengthen	The single point of access provides timely decision-	SG	30/06/17	LG		On track.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
<p>across the children's workforce; to ensure that case management is timely and effective, and held at the appropriate level.</p> <p>(Recommendation 5)</p>	<p>the function and role of MASH, to create a single and effective front-door into early help and children's social care services; with appropriate and timely decision-making and the prompt allocation of cases for assessment or S47 investigation.</p>	<p>making on contacts into children's services.</p> <p>100% of contacts have decisions made on their outcome (universal, EH, SC, NFA etc.) within 24 hours; with clear destinations and management decision making for all contacts.</p> <p>100% referrals with a decision in 24 hours</p> <p>100% single assessments concluded within statutory timescale.</p>					
	<p>5.1 Review the 'Continuum of Help and Support' (thresholds) framework; and re-launch through the LSCB to ensure that all partner agencies across the children's workforce understand their responsibilities.</p>	<p>There is a consistent understanding and application of thresholds across the partnership.</p> <p>An increase in the number of Early Help Assessments completed.</p> <p>% of referrals lead to NFA will be equivalent to or less than the national average.</p> <p>% of re-referrals within 12 months will be equivalent to or less than the national</p>	AF	31/12/16	LG		On track.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
		average.					
	<p>5.2 Revise the case transfer protocol to set out the pathways, minimum expectations and decision-making for transferring cases between teams and services, including step up/down processes.</p>	<p>There is clear transfer protocol in place which facilitates the smooth step-up/step-down of cases between teams and services.</p> <p>Children and young people receive a service appropriate to their level of need; with a reducing number (overtime) of children requiring a statutory intervention.</p> <p>No. of open cases to Children's Social Care.</p> <p>No. of looked after children.</p> <p>No. of children subject to a CP Plan.</p>	AF	31/12/16	LG		On track.
	<p>5.3. Engage with partner agencies to implement a revised early intervention and preventative strategy and operational framework which clearly sets out the early help offer and referral pathways</p>	<p>Early Help Strategy and operational framework in place and services have been aligned to meet the requirements.</p> <p>There is a coherent and coordinated early help offer available to children and families in Reading</p>	AF	31/05/17	LG		On track.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
		<p>which meets their needs. Targeted early help interventions are effective at preventing the escalation of children's needs.</p> <p>100% of EH assessments completed within timescale</p> <p>100% of children open to EH services with an up to date (within 6 months) plan.</p>					
	5.4 Implement restorative practice into the pathways plans and family group conferencing.	Staff have been fully trained in restorative practice and are using with children, young people and families.	AF	30/05/17	Red		To implement a restorative practice approach throughout the Directorate and its partner agencies will have a significant cost implication, including training which will need to be factored into the service budget for 17/18 and beyond.
	5.5 Develop the family group conference offer to ensure that an increasing number of families benefit from an effective intervention at an early stage.	<p>Contract review complete.</p> <p>Family-based solutions are fully considered for those children subject to a child protection plan or who are likely to enter care proceedings.</p> <p>An increase in the number of FGC's taking place.</p>	SG	31/01/17	LG		On track.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
		A reduction (over time) in the number of children becoming looked after.					
All children will have effective plans that meet their assessed need, through which issues of risk and resilience will be evaluated dynamically. (Recommendation 3)	3.1 Develop the Mosaic system and transfer all EH case records to the electronic recording system to support the timely and effective assessment (CAF) and planning of children and young people receiving an EH service.	<p>All EH case records held electronically on the Mosaic system; which includes the EH assessment, plan, and review tools.</p> <p>100% of early help assessments concluded within timescale.</p> <p>100% of open EH cases with an up to date (6 months) plan.</p>	KS	30/06/17	LG		On track.
	3.2 Embed the single assessment framework and develop a supporting CIN protocol to ensure the levels of risk and needs of the child/young person are regularly evaluated and reviewed in a structured manner (from pre-birth to age 18 years/25 years SEND).	<p>A single assessment framework and CIN protocol is in place which helps to improve the timeliness and quality of assessments and plans.</p> <p>The views, wishes and feelings of children/YP are fully explored in assessment and used to inform their plan; which is understood by the parents who are actively involved in achieving improved outcomes.</p>	SG	31/03/17	LG		On track.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
		<p>100% Single Assessments concluded within timescale.</p> <p>100% CIN with an up to date (within 6 months) plan.</p>					
<p>The assessment of need will account for the child's lived experience, and family history, ensuring risk is appropriately recognised and managed through an effective plan.</p> <p>(Recommendation 6)</p>	<p>6.1 Continue to improve the consistency and quality of case chronologies and ensure these are consistently used to inform assessment and care planning.</p>	<p>The lived experience of the child/young person is evident at each stage of their care pathway and used to inform next steps.</p> <p>Case work audits evidence that chronologies have been used effectively to inform assessment and care planning.</p> <p>100% of open cases have an up-to-date chronology (within the last 6 weeks).</p>	SG	31/03/17	LG		On track.
	<p>6.2 Ensure that children and young people are seen regularly, in line with agreed timescales, and that their views, wishes and feelings are recorded and used to inform assessments, care planning and reviews.</p>	<p>100% of children are seen within the first 10 working days of the SW undertaking a single assessment.</p> <p>100% of children in need are seen every 6 weeks (as a minimum).</p> <p>100% of children subject to child protection plans are</p>	SG	31/12/16	Amber		There has been limited progress since the inspection. This is RAG rated Amber given the current higher caseloads than the statistical neighbours. Social Workers are prioritising the visits to children who are the subject of a CP Plan, and those looked after by the local authority.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
		<p>seen every 10 w/days (as a minimum).</p> <p>100% of looked-after children are seen every 6 weeks (as a minimum).</p>					
<p>All cases where children are exposed to domestic abuse and neglect are appropriately assessed and safeguarded.</p> <p>(Recommendation 8)</p>	<p>8.1 Review all cases where children are exposed to domestic abuse and neglect to ensure that their needs have been thoroughly assessed and that they are safeguarded as appropriate (with particular attention given to children living with or in proximity to adults with histories of violence and abuse of other adults and children).</p>	<p>Scope agreed and Audit Team in place.</p> <p>Review complete; all children/YP where subsequent action is required have been identified</p> <p>Immediate plans have been put in place to address the need.</p> <p>Detailed analysis completed that identifies the themes and key issues, which has been used to inform service delivery, and the directorates learning and development priorities.</p> <p>Individual performance and management oversight/supervision issues have been addressed with the relevant workers and managers.</p>	KS	30/12/16	Amber		<p>This action has been significantly delayed in start. However work is now underway following budget approval by CMT on 13th September 2016. An additional spend of £65k was agreed along with a contribution from the LGA of £30k.</p> <p>The case review has now been fully scoped, the criteria for review and methodology are in place, the cohort identified. Review to commence with external specialist resource on 3rd October 2016.</p>

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
	8.2 Embed the CAADA-DASH tool to identify and assess the risk of domestic abuse and determine which cases should be referred to the MARAC and what other support should be provided.	Audit confirms that there is consistent use of the CAADA-DASH tool that identifies and assesses the risk of domestic abuse on children and young people. This ensures that appropriate support is provided and appropriate cases are referred to the MARAC.	SG	30/06/17	LG		On track.
All children and young people who go missing from home or care are supported by an effective safety plan. Cumulated learning is used from return interviews to inform service development and prevent repeat episodes. (Recommendation 9)	9.1 Review the business process and recording tools within the electronic case management system to ensure they are fit for purpose and facilitate clear recording of management oversight and decision making.	Dip-sample audits confirm that the records of return interviews are consistently recorded within the child's/young person's case record; and there is evidence of clear management oversight and timely decision making.	AF	31/12/16	LG		On track.
	9.2 Review the arrangements to ensure that return home or return to care interviews are routinely completed and recorded for all children/YP that go missing (in or out of Reading) in line with agreed local protocols.	There is a timely and appropriate respond to children who go missing from home or care; intelligence is used to prevent future episodes and safeguard other children/young people. No. of Children that go missing from home. 100% return to home	AF	31/11/16	LG		On track.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
		<p>interviews offered to children that go missing from home; % (undertaken) completed within 72 hours.</p> <p>No. of children that go missing from care.</p> <p>100% of return to care interviews offered within 72 hours; % (undertaken) completed within 72 hours.</p>					
<p>Children and young people are at reduced risk of becoming victims or perpetrators of CSE. (Recommendation 10)</p>	<p>10.1 Revise the CSE screening tool and provide training to frontline staff to embed its consistent use; ensuring through SEMRAC that the CSE profile of Reading recognises the full spectrum of risk.</p>	<p>Revised tool in place.</p> <p>Audit activity confirms that children at risk of sexual exploitation are identified and risk-assessed to ensure appropriate safety planning and intervention.</p> <p>No. of CSE screening tools completed.</p> <p>No. of children and young people flagged at level:</p> <ul style="list-style-type: none"> • Low risk (1) • Medium risk (2) • High risk (3) 	AF	31/03/17	Amber		<p>This action requires the support of the CSE co-ordinator who is a full time employee of RBC, seconded to the post. The majority of the salary in the current year is funded by RBC, with a small contribution by the LSCB. Funding for the post going forward for 17/18 will need to be agreed by the LSCB.</p> <p>Cost is £32,500.</p>
	<p>10.2 Improve the referral pathway into the multi-agency sexual exploitation</p>	<p>The number of children and young people at risk of becoming victims or</p>		AF	31/03/17	LG	

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
	group (SEMRAC) in line with agreed local protocols to ensure consistency of plans and subsequent interventions.	perpetrators is reducing. Number of children/YP presented to SEMRAC.					
	10.3 Raise the profile of CSE risk across Reading. Ensure that all managers and workers understand the indicators of CSE so that they can respond appropriately to reduce the risk to children and young people.	Increased use of the CSE screening tool across the partnership capturing all levels of risk; that ensures an appropriate response to reduce and manage the risk to children and young people. CSE borough profile produced monthly; with hot spots identified. No. of Police investigation; and the number of prosecutions (annual).	AF	31/03/17	Amber		Limited progress is being made, which is evidenced in recent audit activity confirming that the tools are not being used effectively. This is due to the high caseloads that remain within the social work service, and the need to embed more robust management oversight.
All children and young people living in private fostering arrangements are assessed by the local authority and are in receipt of appropriate levels of support. (Recommendation 11)	11.1 Implement a rolling awareness campaign with all agencies with high-time access (schools, children's centres, GPs, and language schools) to children and young people to promote private fostering requirements.	Awareness campaign delivered which is resulting in increasing numbers of private fostering notifications to the local authority. No. of children known by the LA to be living in PF arrangements.	SG	31/12/16	LG		On track.
	11.2 Ensure that all private fostering arrangements have a current assessment	All children known to be living in private fostering arrangements have a	SG	31/03/17	LG		On track.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
	and children are visited regularly (every 6 weeks in the first year and every 12 weeks in subsequent years).	current assessment and are visited regularly. 100% PF assessments completed within timescale 100% children living within PF arrangements have been visited within timescale.					
<p>There are sound arrangements to plan for and achieve permanency where the decision is that a child will not be able to return home.</p> <p>Looked-after children have access to high quality care planning, review and support.</p> <p>(Recommendation 12)</p>	<p>12.1 Review all children being worked with under the PLO or who are in care proceedings to ensure that robust plans are in place, and that cases are progressing at a pace that matches the child/young person's needs.</p>	<p>Audit activity confirms that all cases in PLO or care proceedings have effective management oversight to ensure timely actions.</p> <p>100% of care proceedings are concluded within agreed timescales (26 weeks).</p>	SG	31/03/17	Amber		Progress is being made against this action, as an interim SW consultant has been appointed to lead this work. However this has been RAG rated Amber as the cost of this interim member of staff is not funded within the base budget and was approved by the DCS as a budget pressure in year (2016/17) due to challenges from the legal department on safe and effective practice. The cost is approx. £60k in total.
	<p>12.2 Implement a case tracking system to ensure effective management oversight of cases in the PLO or in care proceedings to prevent drift and delay.</p>	<p>A case tracking system is in place and used proactively to monitor timely care proceedings. Audit activity confirms there is no drift or delay.</p>	SG	30/10/16	Amber		As per 12.1. Progress is being made against this action, as an interim SW consultant has been appointed to lead this work. However this has been RAG rated Amber as the cost of this interim member of staff is not funded within the base budget and was approved by the DCS as a budget pressure in year (2016/17) due to challenges from the legal department on safe and effective practice.
	<p>12.3 Ensure that legal planning meetings are effective at providing</p>	<p>Audit activity evidenced consistent and appropriate application of legal</p>	SG	31/12/16	Amber		As per 12.1 and 12.2. Progress is being made against this action, as an interim SW consultant has been appointed to lead this

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
	sufficient management oversight and decision-making on cases entering care proceedings.	processes.					work. However this has been RAG rated Amber as the cost of this interim member of staff is not funded within the base budget and was approved by the DCS as a budget pressure in year (2016/17) due to challenges from the family court on timeliness and safe and effective practice.
	12.4 Review the case escalation procedure for the child protection conference service and the independent reviewing service.	The escalation process is effective at progressing cases towards improved outcomes where there is professional disagreement. No. of case escalations 100% of case escalations concluded within timescale. No. of LAC cases escalated by IROs to CAFCASS.	KS	31/12/16	LG		On track.
	12.5 Increase the permanent establishment of the IRO service to reduce caseloads and ensure IROs are able to effectively fulfil their QA responsibilities including undertaking mid-way audits.	IROs Average/Highest case load. % LAC whose statutory review was held within timescale. % LAC who participated in their most recent statutory review. No. of mid-way audits completed by IROs.	KS	31/12/16	RED		Progress has been made on a short term basis as approval was given in September 2016 for an Interim IRO which has reduced caseloads on a short term basis. However the request to permanently increase the IRO capacity to ensure that the caseloads are within acceptable and safe levels (that reflect the national levels and IRO handbook) has not been approved. The cost is approximately £54k (to end of this financial year).

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
<p>All children and young people who are in the care of the LA are provided with high quality care and support.</p> <p>Reading Borough Council functions as an effective corporate parent.</p> <p>(Recommendation 13)</p>	<p>12.6 Complete 'Project 50' which will review arrangements for all children who are looked-after under voluntary care arrangements (S20) to ensure the most appropriate destination.</p>	<p>All cases where children are looked after under voluntary arrangements have been reviewed. Where voluntary arrangements are not sufficient to ensure a child's safety and emotional wellbeing appropriate action has been taken.</p>	SG	31/03/17	Amber		<p>Progress is being made against this action however this has been RAG rated Amber due to the limitations and delay in pace set out in action 14.1 and 14.2 below; which focuses on effectively stimulating and managing the LAC placement market.</p>
	<p>13.1 Ensure that looked after children are seen regularly in line with agreed timescales and that their views inform assessments, care planning and reviews.</p>	<p>100% of looked-after children have been visited within timescale (6 weeks minimum).</p> <p>100% looked-after children have an up to date care plan.</p>	SG	31/03/17	LG		On track.
	<p>13.2 Ensure that all viability assessments are completed prior to the placement of a child and ratified by panel.</p>	<p>All children and young people are placed appropriately; in a placement that is able to meet their assessed needs.</p>	SG	31/06/17	LG		On track.
	<p>13.3 Ensure that a connected person's assessment is carried out where children require immediate placement, in accordance with the care-planning regulations and timescale.</p>	<p>Children and young people are placed appropriately and in accordance with care-planning regulations.</p>	SG	31/06/17	LG		On track.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
	13.4 Ensure that the Corporate Parenting Group has clear terms of reference and the appropriate membership to be focused on improving the quality of services provided to looked-after children and care leavers. To include a forward plan of scrutiny areas.	The corporate parenting group is able to demonstrate its impact on improving outcomes for looked-after children. Terms of Reference and membership are reviewed and annual work plan developed.	AMD	31/03/17	LG		On track.
Care leavers have the skills and emotional resilience to move to independence, and are able to successfully access education, employment, training and safe housing. (Recommendation 16)	16.1 Improve arrangements to track education, employment and training opportunities for care leavers.	Arrangements to monitor the education, employment and training status of care leavers are effective. % care leavers in contact with the LA.	RB	31/07/17	LG		On track.
	16.2 Increase the range and take-up of apprenticeships and work-based training for care leavers in partnership with the providers contracted to Reading and the wider community.	% of care leavers are in education, employment or training are in line with or better than the national average. Opportunities for apprenticeships and work-based training for care leavers are sufficient.	RB	31/07/17	LG		On track.
	16.3 Strengthen the Virtual School support mechanisms to track the progress of care leavers and ensure appropriate	Mechanisms to track the progress and achievement of care leavers is in place. The gap between care	RB	31/03/17	LG		On track.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
	action is taken where they are not meeting levels of expected progress.	leavers and other young people is reduced at all stages. Procedure and process for escalating cases where children are not making expected progress in place and effective at bringing about change.					
All care leavers understand their rights and entitlements. (Recommendation 17)	17.1 Review the leaving care policy, and produce a clear and accessible statement that sets out the rights and entitlements of care leavers.	Statement and Policy developed that informs care leavers about their rights and entitlements leading to an increased take-up of services.	AMD	31/03/17	LG		On track.
	17.2 Ensure all young people's rights and entitlements are incorporated in their pathway plan.	Care leavers are provided with appropriate levels of support and access their entitlements.	SG	31/06/17	LG		On track.
	17.3 Review the commissioning arrangements for the advocacy service.	Care leavers are supported with effective advocacy services. No. of care leavers that have accessed advocacy services.	AMD	31/03/17	LG		On track.
Plans for young people leaving care are effective and	17.4 Improve the business process and recording tool on Mosaic for pathway	100% of eligible looked-after children have an up to date pathway plan.	KS	31/03/17	Amber		This action has been RAG rated amber as there is as yet no 'Business as Usual' function for Mosaic system development and

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
<p>address their individual needs.</p> <p>(Recommendation 18)</p>	<p>plans; ensuring that they reflect the needs and aspirations of young people, which involves them in the planning process.</p>						<p>maintenance in RBC. The current Mosaic Project Team is responsible for the delivery of a specific plan/brief by June 2017, which needs to reflect more fully the needs of Children's Services.</p> <p>A Mosaic Champion has been appointed due to start on 3/10/2016, their work programme is yet to be confirmed by the corporate centre. Work is underway to try and identify funding.</p>
	<p>18.1 IROs to ensure that the young person's pathway plan is effectively reviewed as part of their statutory review process; and its implementation is a key focus of mid-way reviews; raising escalations to managers and workers where there is potential/actual drift or delay.</p>	<p>Audit activity confirms that the IRO holds partners to account for the effective delivery of pathway plans.</p>	<p>KS</p>	<p>31/03/17</p>	<p>LG</p>		<p>On track.</p>

PRIORITY THREE - Governance and Accountability: To ensure appropriate lines of accountability and governance, with a clear distinction between political, strategic and operational roles; to embed a culture of appropriate challenge and scrutiny at all levels of the organisation and across the partnership, to radically improve outcomes for children and young people in Reading.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
The Placement Sufficiency and Commissioning Strategy is effective in ensuring the local authority has sufficient breadth and quality of placements to meet the needs of children looked-after in Reading. (Recommendation 14)	14.1 Update the Placement Sufficiency and Commissioning Strategy (based on a strategic needs assessment) to ensure the local authority has sufficient breadth and quality of placements to meet the needs of children looked-after.	Sufficiency and Commissioning Strategy is in place and aligned to the JSNA. Readings commissioning arrangements are effective at stimulating and managing the market to meet Reading’s sufficiency requirements.	AMD	31/03/17	Red		The Children’s Services commissioning functions are currently provided from within the joint service located and managed within the adult services directorate. The allocation of resource doesn’t sufficiently meet the business needs of children’s services and therefore improvement and pace is significantly limited. The addition of two ‘Placement Officers’ are required in this service to enable the placement of children more locally. This would ensure that the Commissioners could stimulate and manage the market more effectively. This is not funded the approximate cost would be £104k. Funding for the cost of this will need to be considered as part of the budget setting process for 17/18.
	14.2 Implement improved commissioning arrangements to secure a broader range of housing options for care leavers, and further embed the Staying Put Policy across Reading.	Commissioning arrangements for looked children and care leavers are effective, and local placements meet the needs of Reading’s children.	AMD	31/06/17	Amber		This has been RAG rated Amber due to the limitations set out in action 14.1. The resources exist within the Council’s establishment (Commissioning Officers), but their day to day functions are not focused and prioritised on this task currently, due to competing priorities in placing LAC.

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
		<p>Looked-after children have a greater choice about their accommodation when they leave care.</p> <p>Placement stability is good; % LAC experienced 3 or more placements in the last 12 months is in line with or better than the national average.</p> <p>% LAC who have been LAC for 2.5 years or more with the same carer for 2 years or more is in line with or better than the national average.</p> <p>% LAC placed within 10 miles of their home address is in line with or better than the national average.</p> <p>% LAC placed 20 miles or more from their home address is in line with or better than the national average.</p> <p>% of care leavers live in suitable accommodation.</p>					

Outcome	Action(s)	Success measure(s)	Lead	Complete by	RAG Initial	RAG XX	Progress Update
		There are low levels of tenancy breakdown is in line with or better than the national average.					
The Children in Care Council is fully representative of the children in care population and effective in engaging, supporting and representing the views of all children and young people who are looked-after. (Recommendation 15)	14.3 Support the Children in Care Council (Your Destiny Your Choice) to develop their role so they are able to engage, support, and represent the views of all children and young people who are looked-after in line with ECM outcomes.	CICC is representative of the demographic of Reading's children in care population. Quarterly corporate parenting panels take place with appropriate CICC representation.	AMD	31/03/17	LG		On track.
	15.1 Deliver a development programme to support the Children in Care Council to promote its purpose; review its terms of reference; create an annual programme of activity.	The views and experiences of all looked-after children are represented through the Children in Care Council.	AMD	31/03/17	LG		On track.
	15.2 Revise the participation and engagement strategy for children and young people, with a focused forward plan for continuous improvement, to include a review of advocacy arrangements.	The voice of children and young people is heard, and used to influence the design and delivery of services in Reading.	AMD	31/03/17	LG		On track.

Lead	Officer
HM	Helen McMullen, Director of Children, Education and Early Help Services
SG	Satinder Gautam, Head of Safeguarding Services
AF	Andy Fitton, Head of Early Help Services
AMD	Ann Marie Dodds, Head of Governance and Business
KS	Kelly Swaffield, Head of Transformation and Improvement
RB	Richard Blackmore, Head of Education

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