

CHILDREN'S IMPROVEMENT BOARD

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REPORT TITLE: Improvement Plan Progress Update

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Summary:

This purpose of this report is to provide the Improvement Board with a progress update on actions in the Improvement Plan dated October 2019. The Director's Report has given a monthly summary of activity in each section of the plan to the Board, but it was agreed that a more detailed report would be shared with the Board on a six-monthly basis. The report also suggests next steps in relation to updating the Plan.

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1. Introduction

The Improvement Plan October 2019 was developed in response to the Ofsted inspection report published on 27 August 2019. The inspection had found that services to help and protect children were inadequate.

The Plan was shared with the Improvement Board in October 2019 and submitted to Ofsted in November. A progress update against the different sections of the plan has been made to the Board each month by the Director of Children and Adult Services, in accordance with the Statutory Direction issued to Medway Council by the Secretary of State. The full plan has also been made available to Board Members on a monthly basis.

2. Progress

The current plan was developed to ensure that each recommendation in the Ofsted report was addressed. Many of the actions relate to processes to be put in place to support service improvement. The timescales for actions were set to demonstrate pace of activity over the first six months. An interim AD with extensive experience of supporting authorities in intervention was appointed and in post by mid-October, after the plan had been drafted.

In response to the Ofsted findings, a peer review, the observations of the Children's Commissioner and feedback from staff, the Director and new AD agreed that priority needed to be given to the realignment of service as one of the key building blocks to ensure longer term and sustainable improvement. The purpose was to ensure that the teams were big enough to be sustainable and had the right span of control for each team manager. This would ensure improved management oversight backed by a robust and strengthened senior management structure, and a specialist focus to avoid competing priorities between urgent court work and work with children in care.

Service redesign is necessarily a time-consuming process to ensure staff are fully consulted and that children's cases move to the right part of the new system whilst ensuring a continuity of service for the families involved. The four months to complete the process from early November, repositioning 150 staff and reallocating 1408 cases is arguably the fastest it could have been safely completed. During that period the service was redesigned, and the numbers of staff required were modelled against target caseloads. There was a staff consultation exercise to determine their preferences, and permanent staff all had their first choice. Additional Investment has been secured and detailed work has been undertaken to properly align the establishment with the staffing budget.

As a result of this work, caseloads have reduced and social workers are able to work in the area of practice that they prefer. Caseloads are less complex in terms of competing demands. The maximum caseload in the assessment teams was 46 in March 19 and by March 20 this was 34 with an average of 20. The maximum caseload in post assessment teams was 37 in March 19 and in March 20 this was 23 with an average of 19.3. There remain a small number of posts to recruit to and this combined with other activity e.g. strengthening the Early Help offer, the implementation of the Edge of Care Team and the development of the Adolescent team will serve to reduce caseloads further.

Two new areas of service have been established. Firstly, the 16 plus team for young people transitioning to Leaving Care. This service is focussing on improving the outcomes for young people with strengthened planning to secure education, employment, training, and accommodation.

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Secondly, we have established the Adolescent Service to focus on prevention and intervention with young people who are on the edge of care, young people facing exploitation, school exclusion, criminality, mental health or serious substance misuse issues. It is designed to deliver across Tiers 3 and 4 of the threshold matrix (i.e. statutory and non-statutory targeted help). Services are already being delivered in both these new services.

Further, we have commissioned a new and bespoke specialist Edge of Care service working with 41 young people identified as being at risk of family breakdown leading to care episodes. Ten young people in this cohort are already in the care system and the service is working with them and their families in order to safely return them back home.

Alongside the service realignment, Heads of Service have also been working on areas of improvement across all their areas of responsibility and there are detailed project /service plans in place that reflect the work being undertaken. While all this work emanates from the overall Improvement Plan, that Plan does not fully reflect the detailed nature of work that is underway and so is somewhat 'invisible' to the Board. In other words, the Improvement Plan commitments require a wide range of further activities and planning if those commitments are to be realised, not all of which or indeed can be captured in the Plan (without it becoming a lengthy and unwieldy document).

Below, we have set out four examples of detailed work and progress across the service which is not fully set out in the Plan but all of which are key building blocks for our longer-term aspirations.

- (i) **Early Help Development** - following monthly (since November) staff engagement events and the diagnostic by Essex PIP in January, part of the whole service redesign of Early Help has sought to create a service better able to reflect the Essex model of targeting help at Tier 3. New job descriptions and person specifications are being drawn up and will be job evaluated. Dates for consultation with staff and unions were set for 30th March. Furthermore, time lines and diarised dates for consultation, one to one sessions with staff and interview dates commencing 4th May 2020 have all been put in place. This has been a considerable piece of work the detail of which has not been formally captured in the Improvement Plan and not reported as part of the progress of its delivery. Further work has been re-phased as a consequence of decision to consider how best to conduct further staff consultations as a consequence of Covid-19.

We have been able to make some progress in our early help redesign specifically through the creation of the first practice development manager post (a key post and one equivalent to the Essex Practice Development lead). Following a recruitment exercise the successful candidate took up the post on 16.4.20. The post will support staff to make the change in practice required to deliver a consistently high-quality service to families with a higher level of need than has previously been the case. An outline training plan is in place although dates have been rescheduled as a result of Covid. Essex will continue to support us in developing the service.

Recruitment is underway to progress the development of an Early Help Hub within the front door with a planned start for the new service in early May. This will strengthen the Single Point of Access, support the better application of consistent thresholds and ensure that families who would benefit from targeted help at Tier 3 are able to access this without

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delay. It is intended that this will impact on the high number of single assessments ending with no further action and over time reduce the numbers of repeat contacts and referrals.

- (ii) **Corporate Parenting** A new Head of Corporate Parenting was created in our realigned structure and the appointee took up the post in January 2020. The new service was launched in March, with a focus specifically and solely on services for children in care and care leavers. Progress has already been made in accelerating the permanence plans for children in long term foster care and improving the quality of care plans. Social Workers are being expected to visit more frequently beyond the statutory minimum (statutory visits had already improved pre Covid to 90% in timescales) and to engage in significantly more meaningful direct work than had been possible under the previous structure. The Leaving Care service has been expanded with the appointment of additional Personal Advisor posts so caseloads are allowing more contact and support. The Elaine Centre has been developed to provide a dedicated centre for Care Leavers and the new 16 plus team is now based there. The centre has a range of facilities that can be accessed by young people as required (kitchen, shower room, washing and drying machine). Agreement has been given by CMT for the further extension of the Elaine Centre so it can also accommodate the Adolescent Service giving it the potential to provide a wide range of support and activities for Medway's vulnerable young people. Following a 'reverse take over day' organised by care leavers and Young Lives, CMT have also committed to paying council tax for care leavers and creating a corporate 'bank of mum and dad' that will give financial advice and support and interest free loans to care leavers to help them avoid accruing debt. CMT are exploring other ways in which the wider council can mentor and support care leavers.

Furthermore, agreement has also been given for the complete refurbishment of the Sunlight Contact Centre to make it fit for purpose in providing a high-quality contact experience for children in care and their birth families.

There are plans in place for Essex PIP to support further improvement across our Foster Care service. The Regional Adoption Agency arrangements have been further progressed and is beginning to operate across the region. The arrangements were formally signed off by Cabinet in January 20. There will be a formal launch to the new agency in the Autumn.

- (iii) **Children in Need and Child Protection** Progress has also been made in addressing areas of drift within children in need and child protection cases. There is now a robust process in place to track and progress children within the Public Law Outline (pre-proceedings) process. We have 74 children subject to an Interim Care Order compared to 44 this time last year as a result of increased grip and management oversight. We have appointed a solicitor to be embedded as a case progression officer within the children's operational teams to support the quality and timeliness of court work. We have moved the Family Group Conference service into the Children's Social Work Service to improve the uptake of FGC's within the PLO process in order to avoid the necessity of proceedings wherever possible. One of the FGC coordinators will work exclusively within the Adolescent Service.
- (iv) **Quality Assurance and Performance** The QA Framework has been revised and relaunched, with a new auditing tool, developed in consultation across all service areas. In addition to routine bi-monthly auditing schedules, and themed audits of different priority areas

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including assessments ending in No Further Action and re-referrals, additional external auditing capacity has been sourced. These auditors have completed 'safety checks' on different case cohorts to provide assurance that children are safe and appropriate plans are in place. The cohorts have included children subject to CP plans and children who have recently stepped down to CIN plans. The auditors have identified some good practice but also themes around drift in planning and progression to PLO and proceedings, or premature closure after stepping down to CIN. Where required, actions have been agreed with relevant managers and followed through. The external auditors have also been reviewing examples of recently completed Priority Risk Assessments, to highlight any inconsistency in understanding of risk and have offered individual coaching to workers on the basis of what they have found. Over 400 cases have been audited through these processes since November 2019.

The new QA Manager has been appointed and has put in place a support programme and coaching for auditors in the next audit round, to promote more consistency in audit grading.

The Performance Dashboard was revised to include commentary for each area of activity. This is produced monthly and shared with the Lead Member and the Improvement Board. Performance Clinics have been introduced for each service area, chaired by the AD. These consider the detail of performance indicators, and enable team managers to explain the particular pressures within their service including staffing issues, complexity of caseloads, and any other barriers to improvement. The clinics dig down into the detail of performance at individual case level.

All the Heads of Service have their service specific service/project plans against which progress is measured. These can be available for scrutiny by the Board upon request.

3. Specific Issues that have delayed progress

Whilst there has been considerable progress in responding to the Ofsted inspection outcomes, there have been a number of factors which have delayed the progress we expected to make over the first six months and we have set out some of the key issues below:

- (i) Essex have now been confirmed as our Partner in Practice, but this was only after a false start with both Ealing and Oxfordshire, both of whom withdrew for different reasons. Despite this delay, Essex have already undertaken diagnostic work on Early Help and Assessment and have confirmed that they will work over the coming year with the Fostering Service, Children with Disability Service, and continue to embed the practice improvements identified in the Assessment diagnostic across the whole service. We will be in discussion with Essex how they can also support us with the practice improvements needed across our Children's Social Work teams and Children in Care services.
- (ii) Our Leadership Improvement Partner, Bracknell Forest, has also experienced some delays in progressing the work, but the initial diagnostic done alongside the

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- Commissioner, Eleanor Brazil, identified a number of priorities for strategic leadership development over the next four months, which need to be fully embedded into the plan.
- (iii) Medway, like all children's services, has been substantially impacted by the Covid 19 pandemic which has shifted all our priorities. It is not possible to describe the full detail of the impact, but it is worth giving one or two examples
- a. The priority has been to ensure that risk is identified, and appropriate arrangements put in place to continue to see and monitor those children of the greatest concern, whilst maintaining compliance with the government guidance on social distancing and isolation. In response to this, the service has developed comprehensive Operating Procedures, and will continue to explore ways in which progress can be maintained at this time. The use of technology is already enabling partners to work together in different ways. Contact can be maintained with children, young people and families. Record keeping can be improved and individual practitioners can use the time to build their skill and knowledge through online professional development opportunities
 - b. Following a cross service planning event in February, plans had been put in place to hold a multi-agency workshop on 23.4.20 in order to revisit and develop an agreed Early Help Strategy with the partnership, to introduce the more targeted approach being developed, clarify the application of thresholds of interventions across all 4 tiers and develop task and finish multi agency work streams where appropriate. The half day workshop was being facilitated by Essex PIP. This has had to be postponed as a result of Covid-19.
 - c. There had been a planned revisit to the Leaving Care service as a follow up to review undertaken by National Implementation Advisor for Care Leavers in June 19. This was planned for early April has had to be postponed as a result of Covid-19.
 - d. The building works to both the Elaine Centre and the Sunlight Contact Centre have been delayed as a result of the Covid restrictions.
 - e. An Ofsted monitoring visit was planned for the 18/19 March, postponed as a result of Covid-19 (two days before inspectors were expected on site) It is important to report on the deflationary impact this had across the service with staff wanting to evidence to inspectors the improvements in quality of assessments and in management oversight in more recent casework.

The restrictions and developments outlined above may require some changes to the actions but the overall impact on service improvement must be maintained.

4. Future revisions to the Improvement Plan

Once the decision to realign was taken it is right to acknowledge that there should have been a repositioning and redrafting of the Plan so that it better reflected the sequential nature of Medway's Improvement journey. It was unlikely that some of the other processes outlined in the plan could be delivered until the new structure was properly embedded and the staff group stabilised. In addition, some significant decisions have been made that have changed the nature of some the actions that are now required to deliver the cultural and practice changes in order to ensure that services delivered to children in Medway are at least good. This includes the decision to adopt Signs of Safety as the chosen practice framework for the service. Training has already begun and a revised virtual programme (in the light of Covid -19) has been established.

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The Adolescent Service requires partner engagement so that the 'offer' is integrated across health, education and the police if possible. The interventions required to safeguard and protect young people being exploited have to be underpinned by a commonly understood, consistently delivered strategy that ensures that all agencies play their part – the recently published first national review from the Child Safeguarding Practice Review Panel requires the safeguarding partners to set out their response to children affected by criminal exploitation. Furthermore, the 16 plus and Leaving Care service requires a clearly stated whole council and partnership approach in order to secure better outcomes for young people.

A number of the actions will require an analysis of impact from the Strategic Safeguarding Partnership and it needs to be clear how and when this will happen and what the areas of focus of the independent scrutineer will be.

In summary, the Improvement Plan needs to be adapted to reflect the foundations that have been laid and progress that has already been made. It must now be recrafted to ensure that it reflects the need for partners to be fully engaged in the improvement journey, clearly defines the increased contribution being made by the corporate centre as well as restating some of the basic improvements in core practice that are still urgently required.

The named lead for each area of activity will be fully engaged in developing implementation plans with the identified partners and asked to report to the Board on any exception or slippage in delivery of the actions.

5. Summary of progress

The table below shows the RAG ratings for actions in each section of the plan.

Section of Plan	Total number of actions	Blue - completed	Green – on track	Amber – some progress but slippage	Red – not progressed as planned
Quality of Practice	22	1	7	10	4
Capacity and capability of workforce	12	3	4	2	3
Effective Leadership and Management	9	1	5	1	2
Quality Assurance and Performance Management	9	6	2	1	0
Partnership working	10	3	4	2	1

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6. Next Steps

A permanent management team is now in post, with the realigned service in place and a new Assistant Director taking up post in May 2020. Our Partners in Practice, both Essex and Bracknell Forest, have completed some diagnostic work and funding is available for this work to continue through 2020-2021, with the detailed programme currently being negotiated. The training for Signs of Safety has been commissioned, and the new recording system, Mosaic, will be introduced in May 2020.

Unfortunately, the first Ofsted Monitoring Visit did not take place as planned in March and it is not clear when this will be rescheduled, but the impetus of improving practice and taking account of the Partner in Practice work remains.

The Improvement Board had been refreshed recently with a new Chair appointed, and new members joining.

This is therefore an opportune time to consider a refresh and rewrite of the Improvement Plan, to incorporate the lessons learned from the first six months of operation since the Ofsted inspection, the advice from Essex, Bracknell Forest as well as the Commissioner. The Plan needs to put the improvement priorities in the context of a realigned and expanded service, which has increased capacity and capability to focus on service improvements. Whilst processes are important, it is now the time for the plan to demonstrate real ambition for the children and young people of Medway.

The structure of the Plan remains relevant with sections on Quality of Practice, Capacity and Capability of Workforce, Leadership, Performance and Quality Assurance and Partnerships but the actions require review to take the service forward over the next twelve months, and embed and progress the work already undertaken.

This revised and updated plan would need to ensure the activity already underway is not lost but will introduce a longer-term approach to sustainable service improvement, with achievable timescales.

7. Recommendations

The Board is asked to:

- 1) note the progress made to deliver improvements in the quality and effectiveness of services delivered by Medway over the first six months since the Plan was agreed,
- 2) to acknowledge some key issues that have hindered progress
- 3) to agree to the proposal to review, refresh and update the plan,
- 4) to agenda the revised Plan for approval at the May Improvement Board