Derby City Children Services 2017 Improvement Plan Services for children in need of help and protection, looked after children and care leavers	Appendix 3

Introduction

Derby City Council was inspected by Ofsted in March 2017 under the framework of services for children in need of help and protection, looked after children and care leavers. The judgement made on our **overall effectiveness was 'good'** with slightly varying grades across the three main assessment areas…

- The experiences and progress of children who need help and protection – **'requires improvement'**
- The experiences and progress of children looked after and achieving permanence – **'good'**
    - Adoption performance - **'good'**
    - The experiences and progress of care leavers – **'good'**
- Leadership, management and governance – **'good'**
- Local Safeguarding Children Board effectiveness – **'outstanding'**

Ofsted made a total of **eleven recommendations** based on their findings…

1. Reduce social work caseloads in the reception and locality social work teams to enable staff to carry out good-quality direct work with children.
2. Ensure that assessments are informed by the child's history, research findings and social work theory, and address all issues relevant to parenting capacity and unmet need, including those arising from disability, language and ethnicity.
3. Ensure that child in need and child protection plans clearly detail the support to be put in place to effect the changes needed to improve outcomes, and that they are updated to take account of changing circumstances and emerging risks.
4. Ensure that private fostering notifications are responded to promptly and that children living in such arrangements are seen in a timely way.
5. Ensure that assessments of homeless 16- and 17-year-old young people are appropriately offered support under section 20 of the Children Act 1989 and, when a young person decides to be supported as a child in need rather than becoming looked after, that they are making a fully informed decision.
6. Ensure that supervision is regular and reflective, and has a clear focus on risk assessment and improving the quality of assessments and plans.
7. Improve the quality of return interviews so that these can better inform plans and wider intelligence about vulnerable children.
8. Ensure that all children looked after have analytical and targeted, specific personal education plans to capture their progress and any support needs.

9. Prioritise the recruitment and commissioning of a variety of local foster carers to provide sufficient capacity to best meet the needs of children looked after in Derby.

10. Ensure that all care leavers are clear about their own health histories and are aware of any family health issues that may affect them as they go through life.

11. Ensure that the corporate parenting committee strengthens its oversight of children looked after with additional vulnerabilities and that children's views help to shape services.

Delivering Improvements

To ensure that resources can be appropriately targeted in line with our improvement priorities we only have <u>one 'master' improvement plan</u>, which is; owned, reviewed and updated by the directorate-led Improvement Board (SIF). The contents of this document will pull together actions to be taken in response to Ofsted's recommendations, alongside our existing improvement work. It is therefore important that this document is flexible enough to cover existing and new actions and for this reason we are taking a thematic approach to our improvement work, which is based around three key themes:

1.   Identifying and meeting needs
2.   Learning from practice
3.   Capacity within the city

Presented in the table below is a summary of how Ofsted's recommendations and some of our existing priorities map into these themes.

Theme	Ofsted Recommendations (related objectives highlighted in 'grey')	Existing improvement priorities
Identifying and meeting needs	- Assessments - Plans - Private fostering 16 and 17 year old homelessness - Care leavers health history - Quality of PEPs	- Thresholds - Equality and diversity - CIC Dental checks - Early help services that are sustainable and continue to meet needs - Quality of life story work and later life letters
Learning from practice	- Reflective supervision - Quality of return interviews - Corporate Parenting	- Closing the loop - Performance management (including data quality, recording and reporting) and quality assurance activity - The Children in Care Council - Complaints
Capacity within the city	- Caseloads and recruitment of workers - Recruitment of carers	- Workforce development - Alternative models of service delivery (Delivering Differently) - Managing demand

It should be noted that the contents of this document should be focused on **new activity** only (i.e. what are we going to do that is new or different?); business as usual work including what 'good' looks, relating to the overall quality of early help and social care practice, is reflected in our **practice standards**. These are monitored and tested through our quality assurance activity and management information reports

Children Early Help and Social Care Services Improvement Plan 2017

What?	What area will this support an improvement in?*	Accountable Officer(s)	Deadline	Closing the loop**	Sub actions and implications				
					Financial	Staff and WFD	Partners / stakeholders	Systems, analysis and reporting	Leader ***
Identifying and meeting needs									
Ensure thresholds remain consistent across all early help and social care services	Children and young people are safe and receive support appropriate to their needs	Service Director for Early help and Children's Safeguarding	On-going to the end of March 2018	- Quarterly QA sessions in Reception Service (*Service Director for Early help and Children's Safeguarding (SD EHCS), HOS Safeguarding and DHOS Reception – Aug17 onwards*) - Multi-agency audit (*Head of QA - Nov17*)		- Quarterly Locality and Reception TMs workshops on thresholds (*HOS Safeguarding / Reception and Locality DHOS – May17 onwards*) - Provide guidance and briefing sessions to staff about appropriate intelligence gathering / researching (*Reception DHOS – Aug17*) - Devise a core programme of training for First Contact Team staff (*HOS Safeguarding – Aug17*)	- To enhance the application of threshold consistency IDCS and Reception TMs to attend one VCM, as an observer, every 6 months; with the VCM TORs updated to reflect this. All new managers should attend as part of their induction (*All HOS – Sept17 onwards*)	- Embed a pro-forma into the contact sheet on LCS, which outlines which systems to check and for whom and issue guidance to staff on checking systems for intelligence on referrals (*Reception TM – Aug17*) - Apply the performance framework developed in the MASH to localities (*HOS Safeguarding – Sept17*	- Senio mana consid strateg operatio benefits integrat the Firs Contac function the MA (*SD EH Sept17*)
Ensure the Graded Care Profile is being used in all cases where there are concerns about neglect and where possible improve the understanding of risks across early help and social care staff	Improved consideration and response to neglect Chronologies to be in place for cases that require longer term pieces of work with analysis for both early help and social care cases	Head of Service (HOS) Quality Assurance (QA), Early Help (EH) HOS, Heads of Service (HOS) and Deputy Heads of	- Audit in January 2018 of EH (under 11's) - Every Team Manager in EH and SC to dip sample 2	- Neglect audit in Early Help (*Head of QA – Jan18*) - Multi-Agency audit on neglect and use of GCP (children subject to a CPP) (*Head of Quality Assurance (QA) – Mar18*) - Team Managers and HOS' to monitor	N/A	- Complete a review of training attended to ensure non-attendance can be addressed and new courses can be targeted (*Workforce Learning and Development Manager (CYP) – Sept17*) - Deliver further mandatory training on the GCP for all EH and SC	- Additional Multi-Agency training on GCP and neglect (*DSCB Manager – Mar18*)	- Work with IT to develop a system where Early Help case documents can be stored on Early Help section of the recording system (*EH HOS / Service Manager (CYP Information Systems) – Sept17*)	N/A

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		Service (DHOS's) for Social Care (SC)	cases *(Dec17)*	progress of chronology completion via case audit *(EH and SC HOS – Jan18)*		staff from September onwards *(Workforce Learning and Dev. Manager (CYP) – on-going to the end of 2017)*			
Provide a more timely and appropriate response to Private Fostering (PF) cases through targeted training and the role of PF Champions	Private Fostering arrangements are identified in a timely way and procedures followed to ensure all children and young people in the City remain safe	Service Director (SD) for Early help and Children's Safeguarding (EHCS) Service Director for Integrated Services (IS) All SC and EH and DHOS for Reception and Localities Head of QA	August 2017	- PF Audit *(QA Team – Mar18)* - Interim Annual Report on new notifications and compliance against the checklist *(Head of QA – Oct17)*	N/A	- Complete a PF checklist for both managers & staff; roll out to workforce *(Lead CINRO – Jul 17 onwards)* - Host a workshop for Champions on their role *(Head of QA – Oct17)*	- Identify a PFA lead in Over 11 MAT Management teams in each locality *(MAT Team Managers in Over 11 teams – Aug17)* - Identification of PF Champion in YOS *(SD for IS – Jul17)* - PF Champions to communicate, in partnership with DCSB, the tool available to raise awareness *(Head of QA – Nov17 onwards)*	- Transfer PF cases after first visit (within 7 days) and first review to be booked *(DHOS Reception – Apr17)* - Develop a PF pathway on LCS to support in providing a more timely response to notifications *(Service Manager (CYP Information Systems) - Sept17)* - PF management information reports to be developed in line with the pathway *(Performance and Intelligence – Oct17)*	- Subm outcom focused Annual Report DSCB challen *(Head o May18)*
Ensure the criteria in the homeless 16/17 year old protocol is used in discussions with young people (YP) to make sure they	Ensure all homeless 16 and 17 year olds make fully informed decisions on whether they would like to be treated as S20 or S17	All staff in Early Help, Social Care and Youth Offending	With immediate effect	- Review of processes for S17 16 and 17 year homeless YP to ensure all timescales are met and decisions are clearly documented - Complete an	N/A	- Complete a review of the protocol to proposed reflect changes in recording (i.e. recording of decisions in management logs) *(SD EHCS and SD IS – Sept17)*	N/A	- Signed agreement in Live Link in every appropriate case *(All TMs – Sept17 onwards)* - Management log records discussions	N/A

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					Financial	Staff and WFD	Partners / stakeholders	Systems, analysis and reporting	Leader ***
make fully informed decisions on their legal status; which is appropriately reflected in their records				unannounced review by the end of Dec18 *(Perf and Intel.)*		- Raise awareness through the development of a leaflet to support young people in making decisions developed by children in care (CIC) *(DHOS CIC – Sept17)*		and decisions when YP accommodated *(All TMs – Sept17 onwards)* - Complete a review of recording and reporting for homelessness *(Perf. and Intel. – Dec17)*	
Make sure that direct work on missing episodes is informed by intelligence to better support prevention activities	The voice of the child / young person influences future work and we understand what works in reducing missing episodes	HOS Locality 1 and 5	November 2017	- Hold a 'test' focus group or 1-1 sessions with young people who had reduced missing episodes over 2016/17 to understand what worked for them and use this to inform on-going work with missing young people *(MAT Managers / Allocated Social Workers / Runaway staff – Jan18)* - Quarterly reporting to Derby Safeguarding Children Board on missing activity *(on-going)*	N/A	N/A	- Runaways staff to complete 1 focus group with YP to find out what has helped them reduce missing episodes and what the LA could do *(MAT Managers / Allocated Social Workers / Runaway staff – Nov17)* - Assess level of missing activity from new communities over 2016/17, discuss level and type of need with NCAT and deliver work if assessed as necessary *(Lead MAT Manager – Nov17)*	N/A	N/A

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Ensure the on-going improvement in the quality of assessments for Early Help (EH) services	Identification and response to risks and limited drift and delay in interventions	EH HOS Head of QA	March 2018	- Monitor progress via case audits	N/A	- Develop APIRE guidance for EH staff *(Early Help HOS' and Team Managers – Jul17)*	- Revise early help training with an increased focus on the inclusion of voice in assessments *(EH HOS – Sept17 and roll-out Oct17 onwards)*	N/A	N/A
Work with staff to improve the quality of single assessments, which are analytical, use research and are completed in a timely well to make sure they are a tool for safeguarding our more vulnerable	Better informed assessments resulting in better plans; limiting drift and delay and supporting improved outcomes for our children and young people	Service Director for Early help and Children's Safeguarding Service Director for Integrated Services	March 2018	- Review all cases open in Reception from more than 60 days *(Reception DHOS – Apr17)* - Single assessments audit to be completed *(QA Team – Aug17)*	*Dependent on caseloads and the delivery of actions in section 3*	- All managers to book 'touch base meetings' mid-way through assessments with staff to ensure timescales will be met and that case summaries are being drafted *(All TMs – from Sept17 onwards)* - Ensure that all staff, including agency SWs, and TMs have attended recent assessment training (that contains APIRE guidance) *(HOS Safeguarding – from Jul17)* - One day mandatory training for all TMs on 'what does good look like'	- Roll out assessment guidance developed for the workshop to partners via DSCB *(Head of QA via WD sub-group – Jan18 onwards)*	- Complete a review of the impact of the mandatory Difference and Diversity training, from 2016/17, on the quality of assessments *(All HOS and DHOS – Dec17)* - Managers only to approve assessments of a good quality, with evidence of challenge & confirm thresholds in authorisation section; with improved routine monitoring on those	- Revie benefit having working target f comple of assess in Rece *(HOS Safegua and SD – Aug17*

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						for both assessments and plans with tools developed (i.e. a checklist) to support implementation in practice – to cover both voice and research as part of this session *(HOS Safeguarding and Workforce Learning and Dev. Manager (CYP) – To commence from Dec17 onwards)*		returned for more work to tackle individual under-performance *(TM's – Apr17 onwards)* - Analysis completed on the time given to managers to sign off assessments to review TM capacity to QA and support improvements *(HOS Safeguarding / Performance and Intelligence end of Sept17)* - Pop up guidance to be added to LCS to support workers in understanding what a good assessments should look like linked to training *(Service Manager (CYP Information Systems) – Dec17)* - Complete a review of workers who have had multiple assessments rejected to target support *(HOS*	

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								Safeguarding and HOS IDCS – Sept17)	
Make sure all CYP have a up to date plan that is simple, realistic and outcome focused with clear timescales for review	Limit drift and delay by ensuring clear accountabilities and progress is monitored Improve outcomes for Derby's children and young people	Service Director for Early help and Children's Safeguarding Service Director for Integrated Services	March 2018	- CP Plans audit *(QA Team - Oct17)* - Plans audit (CIN, CPP and LAC) *(QA Team – Dec17)* - CP Plans ending at first review analysis *(Head of QA – Jan18)*	*Dependent on caseloads and the delivery of actions in section 3*	- Ensure that all staff including agency SWs and TMs have attended a workshop on plans in the last 6 months – informed by the analysis action on page 3 *(All DHOS – from Jul17 onwards)* - One day mandatory training for all TMs on 'what does good look like' for both assessments and plans with tools developed (i.e. checklists for the different types of plans) to support implementation in practice *(HOS Safeguarding and Workforce Learning and Dev. Manager (CYP) – To commence from Dec17 onwards)* - Following the development of tools to support the training on plans all TMs to include an item on 'plans' in all team meetings to share best practice and review team performance *(TMs – Jan18 onwards)*	- Through DCSB make sure that there is clarity on partners role in the development and maintenance of SMART plans *(Head of QA via QA sub-group – Jan18 onwards)*	- Implement a system correction in LCS to ensure plans are presented in the correct format *(Service Manager (CYP Information Systems) – Jun17)* - Managers only to approve a plan of a good quality, with evidence of challenge, supported by routine monitoring on those returned for more work to tackle individual under-performance *(TM's – Apr17 onwards)* - Management information report to be developed on CIN reviews to enable more targeted and regular monitoring of timeliness and quality *(Perf. and Intel. – Sept17)*	- Repor quarter the Improv Board plans *and Inte Oct17 onwards*
Make sure	Leaving Care	Deputy Head	April 2018	- Complete an	N/A	- Deliver actions under	- Designated	- Health to have	- IROs

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assessments include detailed of full history including any issues relating to health and when young people leave care that this information is presented to them in an accessible and meaningful way	Services	of Service – Children in Care		unannounced review by the end of Dec18 *(Perf and Intel.)*		assessments (pages 6 and 7) to ensure assessment complete accurately capture history, with consent obtained in relevant areas *(HOS Safeguarding and HOS IDCS – Mar18)* - Designated Nurse to attend management meetings to ensure clarity on what health information is required (*Designated Nurse – Sept17)* - Completed a review of procedures in line with health information required and consent required *(HOS Safeguarding and HOS IDCS – Nov17 onwards)* - Communicate any amendments to the procedures to staff *(HOS Safeguarding and HOS IDCS – Dec17 onwards)*	Nurse to attend the Leaving Care Forum to ensure service development are informed by young people (*Designated Nurse – Sept17)*	access to LCS to enter health information and develop a user friendly summary of health history information for care leavers, which can easily be produced and re-produced (*Designated Nurse – Dec17)*	check a informa require a care is prese part of review process with a particul focus o final rev *(DHOS Nov17)*
Support in the development of a young person's	Improved consistency in the quality of life story	Head of Fostering and Adoption	March 2018	- Fostering and Adoption Annual Reports (2018)	N/A	- Raise awareness across Localities and in the Children in Care team	- Establish life appreciation days for a targeted	- Review processes and opportunities for learning from	- IROs check presen

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understanding of their history in their journey to permanence	work and later life letters – for both long term fostering and adoption					on what good quality life story work looks like and reinforce the requirement for both adoption and long-term foster placements *(HOS Fostering and Adoption and HOS Safeguarding – Dec17)*	group of children and young people adopted *(HOS Fostering and Adoption – Mar17)*	unplanned endings to life-long foster care placements *(HOS Fostering and Adoption – Dec17)* - Explore the benefits of an online portal for life story work for both long-term fostering and adoption *(HOS Fostering and Adoption – Dec17)*	life stor review long-ter foster placem as part review process *(DHOS Sept17)*
Work with services across the Council to strengthen Derby City's approach to Corporate Parenting by the end of March 2018; including in the context of wider vulnerabilities	Looked after children and young people are prioritised with all taking ownership of corporate commitments and the pledge – services are appropriately challenged	Deputy Head of Service – Quality Assurance	March 2018	- Quarterly monitoring on commitment to the Pledge by the CICC - Evidence of 'you said, we did' collected and analysed on quarterly basis through participation performance measures to inform an annual engagement report - Reports and minutes of the Corporate Parenting Committee that reflect wider vulnerabilities and voice	N/A	- All Council staff to complete a mandatory course on Corporate Parenting through e-learning to promote awareness and ownership *(Policy to go live by Jun17, review of compliance at the end of Sept17)*	- Review the governance arrangements for the Committee, including the DHOS for CIC to be added to the TOR *(DHOS QA – end of Aug17)* - Strengthen the voice of the CICC and CLF in Committee meetings; standing reports from both groups at each meeting and YP from the CLF to be invited *(DHOS QA – end of Jul17 onwards)*	- Implement the use technology (i.e. Skpe) to facilitate CYP to participate in the CICC to ensure their voice is heard, in partnership with foster carers and IFAs *(DHOS QA – Sept17 onwards)*	- Refres Boards plan for 2017/1 include vulnera issues *(Commi Chair / L QA –Ap* - Lead Membe attend Leaving Care F *(Dec17)* - Devel checkli wider vulnera

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							- CICC members to contact a random selection of YP; (10 – 15 years) placed at distance and YP with SEND to consider 'standard agreed issues' at least twice a year *(DHOS QA, CICC, IROs – Mar18)* - Continue to deliver at least two pledge events per year to monitor council wide commitment against the CIC pledge *(Lead Service Directors – twice by the end of Mar18)*		issues report v to comp which informs discuss at the Commi *(Perf an DHOS (Jul17)* - Revie the Car Leaver pledge be implem across council ensurin corpora owners *(HOS C TM Lea Care – Sept17)*

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Learning from practice									
Corporate Voice of the Child tools are used consistently in both early help and social care work with examples of 'you said, we did' collected quarterly	Services that are informed and influenced by feedback / voice	Service Director for Early help and Children's Safeguarding Service Director for Integrated Services	October 2017	- Example of listening to voice and feedback informing services *(On-going)* - Positive audit scores on engagement related measures *(On-going)* - Complete analysis on the of use of the VOC tools to be coordinated by the Strategic Engagement Group *(HOS Safeguarding, SW student and CYP Participation Officer – Mar18)*	N/A	- Raise awareness of the tools with staff *(SD EHCS and SD IS – Sept17)* - Development of a process for case closure, for Social Care, that includes 'how was it for you' and progression tools delivered through final network meeting (*Locality DHOS - Nov17)*	- Share tools with partners through a presentation to Derby Safeguarding Children Board *(CYP Participation Officer and DSCB Manager – Oct17)*	- Develop accessible versions of engagement tools for those CYP with SEND *(SD IS – Oct17)* - Evidence of 'you said, we did' collected and analysed on quarterly basis through participation performance measures to inform an annual CYP Engagement Report *(All HOS and DHOS – quarterly)* - Tri-x to include links to the tools *(Head of QA – Nov17)*	- DCS continues Chair the Strategic Engagem Group wi evidence impact collected *(On-going*
Learn from feedback to ensure that services are delivered and where appropriate developed based on feedback that we	Services that are informed by the views of children and young people	Service Director for Early help and Children's Safeguarding Service	March 2018	Early Help Annual Report *(EH HOS – Oct17)* Feedback from 'How was it for you' forms are collated by Team	N/A	- Strengthen the capture and use of voice in foster and adoption through the use of tools and the Leaving Care	N/A	- Support the tender for and implementation of a new system for customer contacts, including complaints *(SD*	- Annual report on impact of Engagem *(CYP Participati Officer –*

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have received		Director for Integrated Services		Managers every quarter and analysed to inform on-going service delivery / development with review management meetings *(All EH TMs with SW TM's developing once process established as per the action above – on-going every quarter)*		Forum informing foster carer training *(HOS Fostering and Adoption – Dec17)*		*EHCS and SD IS – Mar18)*	*Jun17 and Jun18)*
Support managers at all levels to hold monthly reflective supervision with workers in their teams; including reflection on risks, quality of their work and impacts on our children and young people	Improved quality of practice supporting the best outcomes for Derby's children and young people	Service Director for Early help and Children's Safeguarding Service Director for Integrated Services	March 2018	- Supervisions audit *(QA Team – Sept17)* - EH HOS and SW DHOS to quality audit supervisions for each Manager to assess changes in relation to increased reflection *(Dec17)* - Quality of supervision in –on-going monthly audits – QA monthly audits *(HOS QA – on-going)*	*Dependent on caseloads and the delivery of actions in section 3*	- All TMs to attend mandatory reflective supervision training *(All HOS and DHOS – on-going)* - Review and refresh the Supervision Policy and supporting tools (i.e. checklists / template) with an updated pro-forma with an equal balance on compliance and reflection *(SD EHCS and SD IS – Nov17)* - Define the role of new Senior Practitioner posts	N/A	- Implement the new MIP form *(TMs – Jun17 onwards)* - Management Information Reports on cases open for more than 12 months to be use by TMs to target discussion on drift and delay *(Performance and Intelligence and All DHOS – Aug17)* - CC peer supervisions to be scanned onto the system *(CC Managers – Aug17)*	- Senior leaders t discuss a consider action wi manager staff thro targeted briefing sessions EHCS an IS – Sept

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						(SD EHCS and HOS Safeguarding – Aug17)			
Better quality PEPs that are informing improved attainment outcomes	Improved quality of PEPs supporting better educational outcomes	Head of the Virtual School Service Director for Early help and Children's Safeguarding	August 2017	- QA reports on the quality of PEPs to be reported to the Improvement Board every quarter *(Virtual Head (VH) – Sept17)* - Monitoring educational issues via QA notifications – Virtual Head to be copied in on SC QA's relating to education *(DHOS QA – Aug17 onwards)*	- Use of PP funding action to fund a post in VLS to allow targeted focus on the most vulnerable *(VH and Vulnerable Learners Service (VLS) - Jul17)*	- A model agenda for PEP meetings with examples of SMART targets to be drafted following the review of the ePEP form *(VH – Sept17)*	- IRO's to routinely review PP funding and how this is being used to support attainment *(IROs – on-going)*	- Review the structure and content of the ePEP in partnership with schools and social workers and amend as required in Welfare Call to promoter a greater focus on SMART outcomes and objectives *(VH - Aug17)*	- Review benefits o initial PE meetings be combi with initia LAC revie *(VH, HOS Safeguard and DHOS – Dec17)*
Improve processes for capturing intelligence on missing episodes and ensure this informs service development / delivery	Accuracy and use of intelligence to reduce / manage missing	HOS Locality 1 and 5	December 2017	- Analyse the volume of missing episodes for all young people who were subject to CSE strategy *(QA Team / Missing Apprentice – Sept17)* - Reporting to CSE / VYP Group *(HOS Locality 1 and 5 – quarterly)*	N/A	- Scope viability of making Missing Apprentice role a permanent role to prevent yearly need to recruit and re-train someone for this role *(HOS Locality 1 and 5 / Service Director Early Help*	- Target persistent schools – monthly analysis reported to CSE and VYP Group *(Missing Apprentice – Apr17 onwards)*	- Re-configure Liquid Logic missing pathway to reflect practice in Derby *(HOS Locality 1 and 5 / Performance and Intelligence / Service Manager (CYP Information Systems) – Aug17)*	

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						and Children's Safeguarding – Dec17) - Missing training to reflect LCS changes *(HOS Locality 1 and 5 / WFD – Dec17)*		- Develop guidance to ensure accurate recording of missing episodes and missing strategy meetings on LCS – *Service Manager (CYP Information Systems) Aug17)*	
Assess and review the methods used to capture reasons for missing episodes to ensure they are more likely to capture the evidence we need to help us understand missing behaviour patterns	Use intelligence to inform prevention of missing	HOS Locality 1 and 5 DHOS Children in Care	March 2018	- Assess impact of 16/17 preventative work on missing hotspots - Oakwood House and Bemrose School, Landau Forte School, the Gables, Bute Walk and Cricklewood *(Missing Apprentice / MAT Managers / Runaways Workers – from Apr17)*	N/A	N/A	- Monitor missing episodes for YP placed OOA every quarter and whether RI and missing strategy meetings were completed within timescales - Report to CSE/ VYP sub-grp *(Missing Apprentice / (HOS Locality 1 and 5 / DHOS CIC – from Apr17)*	- Assess and review the methods used to capture reasons for missing episodes to ensure they are more likely to capture the evidence we need to help us understand missing behaviour patterns *(MAT Managers / Missing Apprentice – Set17)*	
External Local Authorities share information in a timely way when placing young people in Derby, complete RI's	All looked after children have a timely return interview informing knowledge on drivers for missing (in and out of the city)	HOS Locality 1 and 5 DHOS Children in Care	November 2017	- Return interviews completed for all CIC placed OOA in statutory timescales	- Income generated would offset officer time / implications on local	- All DCC Foster Carers to be provided with the offer of missing training, copies of the missing	- Devise an OOA Return Interview Charging Policy for Derby *(HOS Locality 1 and 5 / DHOS CIC*	N/A	N/A

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within statutory timescales and where they do not/cannot do this, provide payment to Derby LA to complete this	as well as any individual prevention activities required	Head of Fostering and Adoption			capacity	operational framework and missing leaflet *(DHOS CIC / HOS Fostering and Adoption / MAT Managers – from Apr17)*	*– Nov17)*		
A missing protocol that is fit for purpose, informed by external guidance, to support a consistent assessment of risk and response	Management and prevention of missing cases	HOS Locality 1 and 5 / T Tassi (County LA) and Police	October 2017	Updated protocol and supporting information to DSCB for approval	N/A	- Develop risk analysis that includes level of risk of going missing and risk of harm when YP goes missing *(HOS Locality 1 and 5 - Oct17)*	- Review the operational framework following any changes to the protocol *(Lead MAT Manager – Sept17)*	N/A	N/A
Improve the quality of return interviews	Intelligence is captured to support prevention work at both an individual and strategic level	HOS Locality 1 and 5	March 2018	- Complete a multi-agency audits of the quality of Return Interviews over 2017-18 *(MPMG – Feb 18)*	N/A	*See below action*	- Devise new Return Interview format with Police and County that can be added to Liquid Logic *(HOS Locality 1 and 5 / Police – Oct17)*	- Develop a system to ensure all RI's are quality assured by a Manager by re-configuring missing pathway on Liquid Logic so it contains a 'fit for purpose' Return Interview form *(HOS Locality 1 and 5 / Performance and Intelligence / Service Manager (CYP Information Systems) – Dec17)*	N/A
Raise awareness on roles and	A consistent response where all	HOS Locality 1 and 5	April 2018	- DSCB Quarterly missing reports to	N/A	N/A	- Make it mandatory	N/A	N/A

What?	What area will this support an improvement in?*	Accountable Officer(s)	Deadline	Closing the loop**	Sub actions and implications				
					Financial	Staff and WFD	Partners / stakeholders	Systems and reporting	Leaders***
responsibilities for missing	are taking ownership and accountability is clear			provide an update on training			requirement for all independent children's homes to take up missing training (LA or DSCB) *(DHOS QA / Commissioning / DSCB Manager - Apr18)* - Offer Missing and Runaway training to all IFA's *(Commissioning / HOS Fostering and Adoption –Apr17 onwards)* - Deliver briefing sessions at informal hotspots in conjunction with the Police *(MAT Managers / Police – Apr18)*		

What?	What area will this support an improvement in?*	Accountable Officer(s)	Deadline	Closing the loop**	Sub actions and implications				
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Capacity within the city									
Reduce caseloads by ensuring temporary posts are, where possible, established as permanent and senior leaders plan to ensure a workforce that is 'fit for the future'	Reduced caseloads will improve the quality of practice	Strategic Director of People Service Director for Early help and Children's Safeguarding Service Director for Integrated Services	Scoping work to be completed by September 2017 Implement by December 2017 Stable caseloads by March 2018	Monthly updates to Assured Safeguarding Meetings	*- Four FTE posts (provisional)*	- To map the current and desired establishments in key service areas by FTE and use data to forecast recruitment requirements / manage the workforce, which informs the refresh of the Workforce Strategy *(SD EHCS - Sept17)* - Build appropriate ratios of ASYEs and suitable experienced social workers in key service areas *(SD EHCS – Oct17)*	HR, agency staff and permanent SW	Monitor refreshed workforce strategy *(SD EHCS, SD IS and Head of QA - Apr18 onwards)*	- Complete a review of the Workforce Strategy with focus on both recruitment (mortgage subsidy etc.) and retention *(SD EHSC and IS - Mar18)* - Develop pla to effectively funding for additional SW capacity to reduce caseloads *(S EHCS and HC Safeguarding Dec17)*
Ensure agency staff are fully informed of Derby's policies, procedures and priorities	Consistent quality of practice for Derby's children and young people supporting the best possible outcomes	Service Director for Early help and Children's Safeguarding	September 2017	DHOS to audit the induction process for staff	none	- Complete policy / guidance on inductions and essential	- Address this as a regional issue for Tier 2 representatives for inclusion in	N/A	Council wide performance managemen acceptance policies and

What?	What area will this support an improvement in?*	Accountable Officer(s)	Deadline	Closing the loop**	Sub actions and implications				
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		Service Director for Integrated Services				training / tools for agency staff *(HOS Safeguarding – Aug17)*	the memorandum of understanding for the use of agency workers across the East Midlands region *(SD EHSC and SD IS - Jul17 onwards)*		procedures *(Mar18)*
Deliver the 2017 – 2020 Foster Carer Marketing Strategy	Increase the number of DCC foster carers creating better choice	Head of Fostering and Adoption	Review March 2018	- Report on a quality basis to the Improvement Board *(Performance and Intelligence and HOS Fostering and Adoption)*	- Recruit at least 15 fostering households each year for the next three years	N/A	- Joint collaboration with West Mids. LAs to produce Fostering recruitment video *(Recruitment Manager – May17)* - Annual Fostering fortnight *(May17)* - C/Tax inserts on fostering *(Mar18)*	- Development of the website to include the installation of an automated information pack email response system *(Recruitment Manager – May17)*	- Cabinet Member engagement key events – minimum of three *(Jun17, Sept1 and Jan18)*
Delivery the permanency pilot on the regionalisation of adoption	Improvement in adoption timescales, the quality of CPRs, Later Life Letters and Life Story Work	HOS Fostering and Adoption and DHOS Children in Care	Pilot to commence in July 2017	Evaluation of pilot March 2018		- Develop a new home-finding protocol as part of D2N2 *(Head of Fostering and Adoption –*		- Delivery of data to support a review of the pilot *(Performance and Intelligence – Aug17 onwards)*	- Fostering a Adoption Te to inform the evaluative of D2N2 pilot *(H of Fostering a*

What?	What area will this support an improvement in?*	Accountable Officer(s)	Deadline	Closing the loop**	Sub actions and implications				
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						Mar18)			*Adoption – Ma*

NOTES

* This section of the table should identify which recommendation or existing improvement priority the action will support an improvement in – it should be noted that a single objective can support improvements in multiple improvement priorities and all should be represented.

** This is how we will monitor and test that the objective and sub-actions have been delivered and that they have delivered the intended impact – a closing the loop summary on SIF recommendations is in place, which includes reporting arrangements.

*** Both corporate and political implications should be reflected here.