

Senior Responsible Officer	Nancy Meehan
Programme Manager	Lisa Chittenden

Date of Report	15.10.20
Overall Status	Amber

Overall progress narrative	
1	<p>The improvement programme aims to bring our children's services to a 'good' standard within two years- by April 2021. This is an ambitious aim given the extent of failings identified by Ofsted in their inspection reports and the recent pandemic due to Covid 19. The pandemic and responses although are continuing to ensure children have been seen, have impacted on the pace of change required to support this ambition. However, we have set up a robust governance structure to ensure that this improvement agenda is owned corporately by the council and by the wider partnership. An improvement plan has been completed and submitted to the Department for Education, identifying 4 themes:</p> <ul style="list-style-type: none"> <li>• Leadership, management and governance</li> <li>• A robust model of social work practice</li> <li>• A sufficient and skilled workforce</li> <li>• Quality assurance and audit</li> </ul> <p>We have also created a further plan that amalgamates the CSIP and the Sufficiency strategy with the actions required to meet a Ofsted inspection.</p> <p>Improvement activity at operational level is under way with an emphasis on getting the basics right to ensure a consistently good level of social work practice. Following the last 3 monitoring visits which identified the pace of change was not sufficient and services to children had not improved sufficiently leaving some children in situations of harm. The focus since October 2019 when the revised improvement plan was approved was on the Single Assessment and SAFs teams. These teams primarily work with children who require statutory intervention at all levels. Alongside this the QA framework was reviewed and updated and those children who were subject to exploitation were considered a priority with a review of all the processes that underpin good practice. Work is also underway focused on the rest of the child's journey. The approach has involved ensuring that there is greater clarity in what 'good' looks like, compliance with standards and rigorous use of child level data and audit to monitor practice. This has started to show results in some areas although due to Covid some areas have faltered whilst we respond to the pandemic. Whilst progress is encouraging, there still remain significant challenges in achieving a consistently 'good' service.</p> <p>Current issues are listed below. There is a particular concern in relation to workforce recruitment and retention, although this is starting to stabilise however, it remains fragile and as such it has been highlighted as 'red' in the report. This will be a significant focus in the coming weeks and months as we work continue to work towards stabilising this element of the service.</p> <p>We have reviewed all of the data relating to CLA and finalised a 'Sufficiency Strategy' which will now be the basis of 6 workstreams. These workstreams will focus on:</p> <ul style="list-style-type: none"> <li>- Early Help</li> <li>- Residential and Leaving Care</li> <li>- Permanence</li> </ul>

Progress against	Budget	Actual Spend	Forecast Spend	Variance	Comments
2	Programme Budget	A business case has been submitted to the DFE and we are still waiting for an update on this.			To be updated

Key Areas of Concern			
Ref	Description of concern	Owner	By When
1	<b>Recruitment &amp; Retention</b> - Torbay not unlike other LAs nationally continue to experience issues with the recruitment and retention of staff, in particular SWKRS. In order to mitigate against this we have increased our ASYEs and presently have 16 who have all started at the beginning of September and will progress their ASYE year through the LA. To continue to deliver a safe service and maintain the ASYEs the LA business case proposal was accepted by the Cabinet which reported a requirement to have 0.5 experienced agency SWKS to support the ASYEs. Alongside this the TMP recruitment marketing campaign is well underway with 3 applications have been received in only 3 week of the campaign being live. The new recruitment microsite as well as other recruitment marketing (i.e. ads) are also receiving in excess of 6k hits per week.	Rachel Setter	on going
2	<b>Quality Assurance</b> - this is an area that we have received on going challenge from the regulators. Previously, all aspects of the quality assurance framework had not given the assurance that practice is improving or children have been safeguarded. We have revised the framework and implemented a schedule of dip sampling and audit activity which is focused on impact and outcomes for children. While quality assurance has a scrutiny role, it also has a supportive and educative function; by describing what good practice looks like, identifying areas for improvement and responding with appropriate action to raise standards. During the period of COVID-19 pandemic we have developed tools to ensure that our Covid responses to children are robust and meet the needs of our most vulnerable, each child has a risk assessment which is updated dependent on the changes in their situation and then appropriate action taken.	Sue Whitmore	on going and quarterly reports.
3	<b>Exploitation</b> - Torbay has not responded to those children at risk of exploitation in a coordinated and robust manner, As such this has been heavily criticised by the regulators, not only in the inspection reports but also in the on going monitoring visits. We have undertook to review all the processes and establish clear expectations in response to those children at risk of exploitation. We have also undertaken training in order that professionals can identify children at risk of exploitation, this is resulting in a better coordinated approach but there is much more to be done in this area.	Brian Mason	on going
4	<b>Sufficiency</b> - We continue to have too many children in care, too many placed over 20 miles from Torbay and use a high number of residential placements including a number for very young children (under the age of 11). In order to mitigate this situation, since the implementation of the revised Improvement Plan in October 2019, we have focused on this area. We have implemented a new sufficiency strategy. There are 5 workstreams established to support the implementation of the strategy, which are led by the Heads of Service, and coordinated by Steve Hart, the independent improvement advisor. A Sufficiency Board has been established, chaired by the DCS, which reports into SLT and the various political meetings. The Sufficiency Board meets at regular intervals to oversee the direction of the six workpackages: Edge of Care, Fostering, Residential and Care Leavers, Permanence, Learning Academy and Early Help. Business cases were developed and all have been approved via the Councils Cabinet. An implementation group has been established and project delivery is well underway for example the Councils Learning Academy was officially opened on the 7th September by the CEX, DCS, Leader of the Council and Lead Member for Children's Services.	Steve Hart	on going

Medium Term Developments			
Ref	Description of development	Owner	By When
1	<b>Social Work Model</b> - we have commenced training in restorative practice as the preferred model of social work for Torbay Council. The training is well underway and feedback is positive overall. We have also invited key partners to participate in this training.	Nancy Meehan/Steve Hart	1st Cohort completed training Dec 2020 and ongoing with further plans to be timetabled via the Learning Academy
2	<b>Permanence</b> - we acknowledge that as an authority we have not always responded to achieving permanence for our looked after children as swiftly as we should. We need to provide more targeted support and manager interventions to ensure more of our looked after children have the stability and security that is offered by legal permanence. We are acutely aware that our next monitoring visit will be focussed on this area - as such this is a priority for this service to establish mechanisms to performance manage these arrangements. As noted above we have created a sufficiency work stream to focus solely on this area.	Karen Ogle/Patrick McCann	Dec-20
3	<b>Early Help</b> - Early help will be a particular area of focus in the medium term. There is a significant piece of work being undertaken by PeopleToo which will shape our early help offer. Early intervention is a key theme, our cohort of Looked after Children are older which makes provision of service more complex. The outcomes for this age range are also less positive. There will be a focus on earlier intervention, and while there is an understandable desire to keep children at home if at all possible this cannot be at all cost, as such we need to ensure that Early Help is aligned to a robust Edge of Care Service. As such we have a dedicated sufficiency work stream in place to support this work.	Head of Service Front Door Mark Grey - PeopleToo	June 2021
4	<b>Looked After Children and Care Leavers</b> - There will need to be a particular focus on the areas of the service which were rated as Require Improvement as the improvement plan develops.	Nancy Meehan / Patrick McCann	June 2021

Issues / Risks									
Ref	Issue / Risk	Description	Mitigation / Resolution	Date Raised	Owner	Probability	Impact	Risk Score	
1	Risk	If the service response is inadequate, then children may come to significant harm.	Robust monitoring and oversight of casework. Effective performance management and quality assurance framework, and robust governance. Staff development to ensure correct skills level.	January 2020	Nancy Meehan	4	5	20	
2	Risk	If skilled and experienced staff leave the organisation as a result of rapid change activity, then there may be capacity issues within the service.	Ensure that staff are supported through change. Provide effective workforce development opportunities. Recruitment and retention strategy put in place.	January 2020	Nancy Meehan	4	4	16	
3	Risk	If new staff cannot be recruited, then there may be capacity issues within the service.	Recruitment and retention strategy: ensure pay and benefits are competitive and robust approach to recruitment advertising targeted in the right areas.	January 2020	Nancy Meehan	4	4	16	
4	Risk	If there is low level compliance with the model of social work and statutory requirements, then children may come to significant harm.	A training programme has been put in place for all staff to ensure there is a clear understanding of the model of social work, and statutory requirements.	January 2020	Nancy Meehan	3	5	15	
5	Risk	If the pace of progress in implementing the improvement plan is not fast enough to meet the requirements for 'good' by April 2021, then Ofsted may subject the service to additional measures.	Ensure sufficient resourcing of improvement plan; Rigorous and systematic monitoring of improvement plan; performance management and quality assurance framework	January 2020	Nancy Meehan	5	5	25	
6	Risk	If the quality of the data is poor, then it may result in inaccurate performance monitoring and analysis.	Data cleansing of existing data; Implementation of robust use of child level data by team managers; data quality reports; action by managers to ensure that data entered into case management system is accurate	January 2020	Nancy Meehan	3	4	12	
7	Risk	If the council's political leadership are not fully engaged or aware of their roles and responsibilities in relation to children's services, then there may be a lack of appropriate scrutiny and accountability.	A training seminar will be organised for all members to increase their knowledge around the potential social care journey of the child.	January 2020	Nancy Meehan	2	2	4	
8	Risk	If partners are not fully engaged or aware of their roles and responsibilities in relation to the improvement activities, then some improvement actions may not be achieved.	Senior leadership from key partners are members of the Children's Services Improvement Board to ensure they are involved in the strategic development and oversight of their agency's involvement.	January 2020	Nancy Meehan	3	4	12	
9	Risk	Risk to children due to Covid pandemic including inability to be able to have unrestricted movement in the community an increase in statutory requirements including children coming into care due to the impact of their emotional wellbeing, and an increase in parental dysfunction requiring crisis interventions.	Robust oversight of the increase in statutory referrals, investment in edge of care and other commissioned services to support children to remain safety in family homes and wider community, support via CHAMS in relation to children's mental health, partnership responses to de-escalate and resolve crisis at the earliest opportunity.	October 2020	Nancy Meehan	3	4	12	
10									
11								0	
12								0	

Guidance for RAG status		
STATUS	Overall ratings	Individual Action ratings
GREEN	Activity on track and delivering expected outcomes	Improvement activity is on track or completed and delivering expected outcomes.
AMBER	Activity on track but expected outcomes have not yet been evidenced and/ or activity delayed but still being delivered	There is some minor delay in improvement activity and/ or activity is on track but limited evidence of outcomes
RED	Activity not on track and outcomes are poor or deteriorating	There is significant delay in improvement activity and/ or activity is not delivering expected outcomes

**Theme one: Leadership, Management and Governance**

Overview narrative	Overview RAG rating
<p>The most recent monitoring visit (4th Visit) of January 2020 continues to identify effective political and senior leadership, but also highlights the culture change within the workforce. Progress to establish a permanent workforce continues but the impact of this is being reduced due to the stability of the present agency staff working within Torbay. Sufficiency of emergency and unplanned placements remains an area of concern but plans are now developed to increase the recruitment of in-house foster care provision and the way forward to improve permanency. A positive downward trend has been established in reducing those placed further away and the use of residential care - however placement stability indicators are higher but the authority is not a significant outlier. As a result this theme has an overall rating of 'Amber'.</p>	<b>AMBER</b>

**Placement Stability**

Ref	Performance Measure	2019/20	Current	Period	Last 6 months						Target		Trend	Benchmarking	
					Apr 20	#####	Jun 20	Jul 20	Aug 20	Sep 20	Min	Upper	Month	National	Regional / Stat Neigh
1.1	% with 3 or more placements	15.4%	4.3%	Snapshot	14.4%	12.6%	11.8%	9.6%	5.8%	4.3%	4.0%	10.0%	↓	10.0%	12.4%
1.2	LAC long term placement stability % (S)	51.3%	61.7%	Snapshot	60.2%	62.1%	63.5%	63.9%	61.0%	61.7%	55.0%	70.0%	↑	70.0%	66.9%
1.3	% placed out of LA more than 20 miles away	29.9%	28.5%	Snapshot	29.9%	30.3%	29.9%	29.0%	29.0%	28.5%	10%	15%	↓	13.0%	12.3%

**Management oversight and supervision**

% qualified social worker supervisions	Snapshot	-	-	-	Data not available until November 2020						n/a	n/a
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**Services for children at risk of involvement in gangs, youth violence., missing, CSE, radicalisation**

Ref	Performance Measure	2019/20	Current	Period	Last 6 months						Target		Trend	Benchmarking	
					Apr 20	#####	Jun 20	Jul 20	Aug 20	Sep 20	Min	Upper	Month	National	Regional / Stat Neigh
1.4	Number of missing children during period	216	87	YTD	18	24	24	25	23	37	N/A	N/A	↑	N/A	N/A
1.5	Number of LAC who went missing from care during the year	99	60	YTD	6	9	10	13	13	11	N/A	N/A	↓	N/A	N/A
1.6	Number of exploitation/vulnerability assessments	136	154	YTD	11	18	36	37	22	30	N/A	N/A	↑	N/A	N/A
1.7	Number of exploitation/vulnerability assessments graded as 'High Risk'	22	17	YTD	1	2	5	8	0	1	N/A	N/A	↑	N/A	N/A

1.8	Number of Return Home Interviews in 72hrs	222	117	YTD	14	20	20	24	17	22	75%	95%	↑	N/A	N/A
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Theme one: Leadership, Management and Governance						
Progress in delivering key improvement plan actions						
Objective	Key Actions	Q4	Q1	Q2	Q3	PROGRESS NARRATIVE
Effective leadership and management culture improving and sustaining outcomes for children	Implement robust service plans.					<p>The service redesign is in the process of being implemented, this was delayed due to COVID-19. Once the redesign is complete the service plans will then be completed including service priorities. We now have a combined plan which incorporates the improvement plan and sufficiency strategy that can be utilised to develop the service plans.</p> <p>Following the members briefing on the 16th March we are now working with the LGA to support a wider involvement in corporate parenting, plans have commenced.</p> <p>Performance surgeries remain monthly in all areas.</p>
	Deliver Members seminar on the data set and performance information					
	Quarterly update reports be provided to Cabinet and O&S Committee which will include relevant performance data and intelligence.					
	Introduce performance management system with immediate access to child level data.					
Consistent responses to the management and reporting of allegations of professionals and people in a position of trust (LADO)	An annual report to be prepared and submitted to the appropriate boards					<p>A review has taken place of LADO process to ensure allegations are managed. Changes have been made to processes and systems and a flowchart now illustrates the required workflow. The strengthened requirements will necessitate regular audit, moderation and observation. Regular peninsular LADO meetings enable the ability to share, learn, and develop practice and provide regular independent peer challenge. These meetings began in December 2019.</p> <p>The LADO Annual Reports have been completed and will be tabled at the new Torbay Safeguarding Partnership Board in relation to the years 2018/19 and 2019/20.</p>
	The introduction of appropriate management systems and processes to ensure allegations are managed					
Sufficiency of emergency and unplanned placements	Develop revised sufficiency strategy.					The sufficiency strategy is completed - work will continue focussing on 6 workstreams which will detail the investment and longer term requirements in order that we avoid unnecessary disruption of placements and children do not unnecessarily enter into the care system
Services for children at risk of involvement in gangs, youth violence., missing and CSE	Ensure multi-agency arrangements are used effectively in safety planning					<p>The MASCE process has been reviewed and the strengthened partnership arrangements is demonstrated by the inception of a child exploitation and missing operational group.</p> <p>The project team which was established to progress the potential to co-locate agencies in order to deliver more coordinated services to Children has been deferred due to Covid 19, further discussion has taken place between agencies however the police at present are undergoing an internal redesign and until this is complete we are not able to take this forward.</p> <p>We have completed the YOT Self assessment and the required COVID recovery plan. We have obtained support from the LGA to review the YOT strategic board as part of the Peer Review. TOR have been agreed and this commenced on the 21st September.</p>
	Implement task and finish group to focus on exploitation and potential colocation of partners to address safeguarding concerns					
	Complete peer review of Youth Offending Team Management Board.					
Training for workers on CE, risk assessment and help to children at risk of CE	Implement mandatory training for all social workers in CE					<p>The CE coordinator role is now in place. All staff are aware of their responsibilities to complete regular assessments linked to purposeful planned interventions to reduce the risks. The importance of timely and accurate recording is stressed. We are able to report that we have undertaken 182 assessments since the 1st January 2020. We have 51 children at risk of CSE (37 amber, 14 red). we also have 51 children who have been identified CCE (46 amber, 5 red) of these 102 currently have an NRM flag.</p> <p>Awareness raising and training sessions will be offered to all partners. The training content will be shaped by quality assurance findings</p> <p>We have developed a new screening tool that screens for sexual exploitation criminal exploitation, county lines and children who are trafficked and are developing an awareness of peer group mapping through our bite size training sessions.</p> <p>We have started mapping children on a case by case basis when exploitation is identified.</p> <p>We have developed our electronic system to flag children at risk of exploitation and have developed a newsletter to keep professionals in touch with national developments and research around exploitation.</p>
	Review the CSE Coordinator role					
	Improve the use of data from MASH to understand and effectively intervene in patterns of CE across the Bay					

Theme Two: A robust model of social work practice														
Overview narrative														Overview RAG rating
<p>Significant challenges remain before a consistently 'good' service is achieved. This theme is therefore rated 'red'. There is a rigorous focus within the Children's Social Care Service on 'getting the basics right.' This continues to focus on the SATs and SAFs service area with an emphasis on application of thresholds and timeliness of decision making and the quality of practice. Changes made to improve the operation of the MASH have been hampered due to the response to COVID and colleagues in the MASH being required to work virtually. There has also been work on practice relating to child sexual exploitation, those children missing and those at risk of criminal exploitation. There has also been a strong focus on children subject to CIN, CP,PLO and our response to children looked after. Our approach has included greater clarity in practice standards ('what good looks like'), which includes moving to a 'restorative practice' approach. Increased use is also systematically being made of data and case audits through monthly performance surgeries.</p> <p>Whilst some very recent progress has been made in some areas, there remain significant challenges to improve to a consistently 'good' service. Audit activity continues to identify variability of practice and some cases where there are significant safeguarding concerns for children. Child in need practice remains an area of focus, where there have been historic issues with the consistency of practice. The performance framework, with its clear timetable, is also helping to reinforce the drive for improvements in the timeliness and quality of record keeping.</p> <p>Progress is being made towards improvements in our early help offer. A strategic report produced by People Too has been finalised and implementation is to begin shortly with the first implementation board meeting taking place w/c 14th September 2020.</p>														<b>RED</b>

Consistent application of thresholds and delivery of statutory intervention															
Ref	Performance Measure	2019/20	Current	Period							Target		Trend	Benchmarking	
					Apr 20	May 20	Jun 20	Jul 20	Aug 20	Sep 20	Min	Upper	Month	National	Regional / Stat Neigh
2.1	% of contacts completed within 1 day (S)	90.9%	97.0%	YTD	100%	100%	97%	89%	97%	98%	98%	100%	↑	N/A	N/A
2.2	% MASH completed with 1 working days	63%	88.2%	YTD	92.4%	82%	86%	88%	89%	91%	90%	100%	↑	N/A	N/A
2.3	% contacts progressing to referral	21.2%	29.6%	YTD	19%	46%	32%	29%	31%	27%	25%	50%	↓	N/A	N/A
2.4	No of referrals in period	1919	966	YTD	135	248	224	198	161	165	n/a	n/a	↑	N/A	N/A
2.5	Percentage of Referrals that were repeat referrals (within 12 months)	22.3%	27.0%	YTD	37.0%	17.7%	25.0%	24.7%	28.0%	23.5%	TBC 11/20		↓	22.6%	22.3%
2.6	% of referrals progressing to assessment	71%	78.0%	YTD	81.8%	84.4%	86.8%	69.7%	82.2%	79.1%	TBC 11/20		↓	N/A	N/A
2.7	% of referrals triggering strategy discussion	42%	37.0%	YTD	44.4%	52.5%	41.2%	32.3%	16.0%	25.5%	TBC 11/20		↑	N/A	N/A
2.8	No of assessments in period	1701	1003	YTD	181	208	199	227	195	221	TBC 11/20		↑	N/A	N/A
2.9	% of assessment progressing to further services from Children's Social Care	65%	74%	YTD	50.6%	53.6%	49.0%	47.0%	49.0%	51.0%	TBC 11/20		↑	N/A	N/A
2.10	% of strategy discussions progressing to S47 enquiry	69%	72.0%	YTD	70%	67%	56%	62%	81%	76%	TBC 11/20		↓	N/A	N/A
2.11	% of S47 progression to ICPC	26.3%	21.0%	YTD	45.2%	18.5%	26.4%	21.00%	19.00%	35.00%	TBC 11/20		↑	N/A	N/A

Strategy discussions include all relevant agencies and robust arrangements to protect children during CP investigations															
Ref	Performance Measure	2019/20	Current	Period							Target		Trend	Benchmarking	
					Mar 20	Apr 20	May 20	Jun 20	Jul 20	Aug 20	Min	Upper	Month	National	Regional / Stat Neigh
2.12	Strat meetings are quorate - <b>not available on PARIS</b>				-	-	-	-	-	-					
2.13	The disclosure of physical abuse results in a partnership consideration to undertake a child protection medical (not yet available)				-	-	-	-	-	-					

**Improving quality of assessments and plans**

Ref	Performance Measure	2019/20	Current	Period							Target		Trend	Benchmarking	
					Apr 20	May 20	Jun 20	Jul 20	Aug 20	Sep 20	Min	Upper	Month	National	Regional / Stat Neigh
2.14	% cases with Management Oversight recorded in past 8 weeks	43.0%	71.1%	Snapshot	69.0%	66.0%	68.0%	63.0%	69.0%	71.1%	60%	80%	↑	TBC 11/20	
2.15	% of assessments completed within 45 working days (S)	75.4%	76.0%	YTD	40.9%	56.3%	80.5%	83.5%	82.4%	95.0%	85%	95%	↑	83.1%	81.2%
2.16	% of children in need with CIN Plan completed	66.2%	64.8%	Snapshot	46.5%	47.3%	57.4%	65.2%	64.0%	64.8%	75%	90%	↑	TBC 11/20	
2.17	% of children with CIN Plan with reviews within last 6 months	19.1%	8.2%	Snapshot	14.6%	12.8%	9.9%	8.2%	8.8%	8.2%	TBC 11/20		↓	TBC 11/20	
2.18	% with initial care plan completed within 10 days of becoming looked after	76%	50%	YTD	100.0%	100.0%	25.0%	0%	50%	0%	N/A	100	↓	TBC 11/20	
2.19	CLA cases which were reviewed within required timescales	94.5%	94.4%	Snapshot	95.2%	95.1%	95.0%	92.2%	92.0%	94.4%	90%	100%	↑	TBC 11/20	
2.20	% of children receiving CP visit within past 10 workdays (S)	45.6%	67.7%	Snapshot	57.8%	64.0%	62.9%	64.8%	62.6%	67.7%	67%	80%	↑	TBC 11/20	

**Child Protection Process**

Ref	Performance Measure	2019/20	Current	Period							Target		Trend	Benchmarking	
					Apr 20	May 20	Jun 20	Jul 20	Aug 20	Sep 20	Min	Upper	Month	National	Regional / Stat Neigh
2.21	% of ICPCs held within 15 working days of Strategy Discussions	63.1%	74.0%	YTD	65%	64%	78%	63%	100.0%	100.0%	90%	100%	→	78.7%	82.5%
2.22	% of ICPC progressing to CP Plan	93.5%	91.2%	YTD	95.0%	94.9%	87.0%	96.3%	76.00%	100.00%	90%	100%	↑	n/a	n/a
2.23	% contact progressing to early help / early help hub	10.7%	13.4%	YTD	4%	7%	19%	17%	24%	15%	TBC 11/20		↓	n/a	n/a

**IROs and CP chairs sufficiently challenge plans**

Ref	Performance Measure	2019/20	Current	Period							Target		Trend	Benchmarking	
					Apr 20	May 20	Jun 20	Jul 20	Aug 20	Sep 20	Min	Upper	Month	National	Regional / Stat Neigh
2.24	% of CP reviews carried out within statutory timescales (not yet available)			Snapshot											
2.24	% of Looked After Reviews carried out within timescales	94.5%	93.9%	Snapshot	95.2%	95.1%	95.0%	92.2%	92.0%	91.3%	90%	100%	↓	TBC 11/20	
2.26	Number of DPRs raised	121	67	YTD	10	4	8	15	17	13	n/a	n/a		TBC 11/20	

**Public Law Outline**

Ref	Performance Measure	2019/20	Current	Period							Target		Trend	Benchmarking	
					Apr 20	May 20	Jun 20	Jul 20	Aug 20	Sep 20	Min	Upper	Month	National	Regional / Stat Neigh
2.27	Average length of pre-proceedings (calendar days)	101	52	Snapshot	51	12	36	67	69	86	TBC 11/20		↑	TBC 11/20	
2.28	Average length of care proceedings (provisional subject to further validation)	170		Snapshot					87	87	TBC 11/20		→	TBC 11/20	

**Child permanence and adoption decisions**

Ref	Performance Measure	2018/19	Current	Period							Target		Trend	Benchmarking	
					Apr 20	May 20	Jun 20	Jul 20	Aug 20	Sep 20	Min	Upper	Month	National	Regional / Stat Neigh
2.29	No. of LAC exits in period	137	54	YTD	8	12	9	10	8	7	N/A	N/A	↓	TBC 11/20	
2.30	No of reunifications	42	8	YTD	0	0	1	3	0	4	0		↑	TBC 11/20	
2.31	Average time between court authority to place a child and deciding on a match	168	243	YTD	140	140	152	193	193	391	140	180	↑	201	167
2.32	Adoptions from care (percentage leaving care who are adopted)	18%	6%	YTD	13%	0%	11%	0%	0%	29%	TBC	TBC	↑	13%	19%
2.33	Number of Adoptions and Special Guardianship Orders granted for Looked After Children (S)	51	7	YTD	2	2	0	1	2	0	TBC	TBC	↓	TBC 11/20	
2.34	The percentage of children who ceased to be looked after because of a SGO	22%	10%	YTD	13%	17%	0%	10%	25%	14%	TBC	TBC	↓	12%	13%

Theme Two: A robust model of social work practice						
Progress in delivering key improvement plan actions						
Objective	Key Actions	Q4	Q1	Q2	Q3	PROGRESS NARRATIVE
Early Help services provide timely and appropriate help to children and their families which prevents escalation (or re-referral) to statutory services.	Complete review of early help offer.					<p>Because of the importance of this theme, every effort has been made to maintain business as usual so that the necessary improvements in service can be made despite the restrictions imposed upon us as a result of COVID-19. The evidence shows some encouraging signs to suggest that our improvement actions are beginning to gain traction. However, it is not possible to be conclusive at this stage although we have been able to establish with some surety that our improvement continue to be embedded. As part of our preparation for the post COVID period, we will ensure that our analysis of data will inform our practices as we begin to respond to COVID recovery.</p> <p>The work with PeopleToo (established to conclude the proposals for a wide ranging and flexible early help provision) has proceeded at pace and is in the early stages of its implementation phase and partners were invited to participate at a series of targeted meetings on the 21st/22nd May. We are now at the point of implementation with this first meeting being held w/c 14th September 2020.</p> <p>Edge of care service is now in the implementation phase having been approved by the Cabinet. The service re-design sets out clear plans to consolidate the edge of care workforce. Effective edge of care work is reducing the numbers of children who require admission to care. Instead, they are being successfully and safely managed in their families and communities.</p>
	Implement findings of early help review					
	Improve CP Chairs' understanding of cases and plans, and use of 'alerts'.					
	Edge of care services to be integrated.					
Strategy discussions and S47 enquiries include all relevant agencies and robust arrangements to protect children during CP investigations	Strat meetings are quorate					<p>The TSCB completed an audit in September 2019. Although there were some improvement, there is further work required to ensure we are compliant therefore this area is red. The planned activity to effect improvement has been unavoidably deferred in response to COVID-19. Cabinet have approved the separation of the PCC and TC partnership board. TC are presently in the process of implementing a partnership board which will take into account the previous recommendations in relation to CP medicals.</p>
	The disclosure of physical abuse results in a partnership consideration to undertake a child protection medical					
Improving quality of assessments and plans	Improve quality of assessments to better incorporate the 'voice of the child', and the diverse nature of families.					<p>The focus on assessments and planning has continued despite the COVID restrictions. The importance of maintaining both has been a priority for senior leaders and encouragement has been given to encouraging staff to work creatively with a variety of social networking platforms which allow the work to continue. There is some evidence that cases have benefited from these flexible, imaginative approaches. However, the quality is still to variable. This is the focus of the Learning Academy with the ASYES and the PSW with the wider workforce.</p>
	Improve recording of management oversight.					
	Review care planning requirements.					
IROs and CP chairs sufficiently challenge plans	IRO and CP chairs work is appropriately evaluated for impact and recording meets statutory requirements					<p>There has been ongoing work to enhance the role of the CP &amp; IRO chairs but it has not been possible to evaluate the impact and effectiveness of this work due to COVID-19 restrictions. However, the data would suggest that there is greater oversight and more incisive analysis of events evidenced by an increased number of alerts. During this lockdown period, further work is taking place to build upon the actions we took to adapt our review process to the virtual environment. We have consulted with others and will absorb the learning from their experiences. The DR alerts are being used to support the identification of children whose plans are not sufficiently meeting need. However, as yet they are not changing practice.</p>
	IROs and CP chairs robustly review the plans for children to ensure the timelessness of service intervention					
	Implement process to ensure the CP Chairs and IROs use the 'alerts'.					
Private Fostering	Robust arrangements are in place and understood in response to children who are privately fostered					<p>The review of private fostering progressed and one action completed was the transfer of responsibility to the SAFs team. Further progress has been frustrated by the impact of COVID-19 on those privately fostered children who are attending language schools, many of whom returned home.</p>



Objective	Key Actions	Q4	Q1	Q2	Q3	PROGRESS NARRATIVE
Ensure that permanency is considered for all children at the earliest opportunity	For children who need to be in care, decisions should be timely and only exercised once all other options, such as placement with wider family members have been exhausted. Whenever possible emergency placements are avoided					The business case associated with the sufficiency strategy has successfully negotiated each of its approval stages is now in the process of implementation. The priority to ensure that all children who are looked after or who are on the edge of care have a permanency plan is at the centre of an improvement and sufficiency work stream. Significant progress has been made which has continued through the COVID-19 restrictions to formally match outstanding long-term fostering arrangements.
	Ensure that there are choices of placement to meet the needs of children who need care, including those with challenging behaviours, those requiring emergency admission and those requiring placements outside of Torbay					
	Children returning home from care receive sufficient support to enable them to live successfully in their communities with few returning to the care of the local authority					
	Matching for those children already living in long-term fostering placements will be timely so that they benefit from the stability and emotional security that this will offer them					
Homelessness	All young people who become homeless are assessed and are made fully aware of their right to be cared for by the Local Authority					Children who become homeless have not received a consistent and person centred response. To improve the service the children's redesign has formally moved those who are responsible for supporting homeless young people to be supervised in the early help and targeted support service area. We are currently in the process of actively reviewing a number young people to establish whether the appropriate course of action was taken to support them.
Public Law Outline	Review all cases currently in pre-proceedings.					All pre proceedings work has been reviewed. There has been a significant reduction in cases drifting past the 12 - 16 week timeline. Unfortunately due to COVID we have seen a minority recently that are slightly over the 16 week timescale. The HoS has oversight of all pre-proceedings and care proceedings and reviews these weekly.
	Review and ensure robust implementation of legal framework for Public Law Outline process.					

**Theme Three: Sufficient and skilled workforce**

**Overview narrative** **Overview RAG rating**

Progress to establish a permanent workforce continues but is impacted due to the stability of the present agency staff working within Torbay. The recruitment and retention campaign is underway and a revised social work offer has been finalised. The Learning Academy is live and a HoS has been appointed. There are presently 16 ASYEs in place who will be supported by the LA. The Academy is also predicated on establishing a 4 fold increase in the supply of newly qualified workers entering the workforce.

**Amber**

**Workforce Strategy**

Ref	Performance Measure	2019/20	Current	Period											Target		Trend	Benchmarking	
					Dec 19	Jan 20	Feb 20	Mar 20	Apr 20	#####	Jun 20	Jul 20	Aug 20	Sep 20	Min	Upper	Month	National	Regional / Stat Neigh
3.1	% Vacancies (QSW roles only - % of estab not filled by perm staff)	32%	28.0%	snapshot	38.0%	33.9%	-	31.9%	-	-	43.5%	-	28.3%	28.0%	20%	25%	↓	16.4%	14.80%
3.2	% Turnover ( fte)	27.70%	9.9%	YTD	24.0%	25.0%	-	27.7%	-	-	6.9%	-	8.1%	10.7%	19%	22%	↑	15.1%	16.90%
3.3	% Agency Staff (FTE of QSW estab roles only)	41%	35.6%	snapshot	52.0%	43.0%	-	41.3%	-	-	26.7%	-	34.3%	27.9%	35%	28%	↓	15.8%	11.40%

Theme Three: Sufficient and skilled workforce						
Progress in delivering key improvement plan actions						
Objective	Key Actions	Q4	Q1	Q2	Q3	PROGRESS NARRATIVE
Workforce strategy	Develop workforce strategy to include a training needs analysis and development plan.					<p>We have established and launched a recruitment campaign with an external agency to attract Social Workers to the Bay. There is also an updated retention offer which has gone live. The learning academy went live on the 7th September as planned - this forms one of the work streams within the Sufficiency Strategy. A service re-design is in the final stages of implementation. We continue to be challenged by high levels of agency staff. Although we are interviewing and appointing permanent staff we are now seeing a high proportion of churn in the agency workers which is having an impact on childrens plans. Part of the challenge is that the regional MOU is not being adhered to across the peninsula, with Devon increasing their hourly rate of pay.</p>
	Development of a Learning Academy					
	Initial recruitment campaign					
	Workforce policies to be updated					
	Implement Service Re-Design					

## Theme Four: Quality assurance and audit

Overview narrative	Overview RAG rating
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To note that moderation of audits have been impacted upon due to COVID-19 restrictions.

Our quality assurance and audit programme has been fully revised and relaunched in November 2019. We have focussed on ensuring that there is a more consistent and robust understanding of the audit process of what 'good' looks like. Moderation activity is starting to show improvement in the consistency and reliability of audit findings, ensuring that we have reliable qualitative information to inform continuous improvement in practice. The results of audits undertaken so far shows that significant progress still needs to be made before quality assurance activity is consistently impacting on practice standards. Dip sampling to test the quality has commenced and forms an integral part of the quality assurance framework. This is an area that still requires further improvement. This theme is therefore rated 'amber'.

Amber

Ref	Performance Measure	2019/20	Current	Period							Target		Trend	Benchmarking	
					Apr 20	May 20	Jun 20	Jul 20	Aug 20	Sep 20	Min	Upper	Month	National	Regional / Stat Neigh

4.1	<p>Case audits- the figures below show an average score based on files audited in the period. A lower score is better. The scoring system is:</p> <p>Exceeds good = 1                      Meets good = 2                      Does not meet good = 3                      Not applicable = 4</p>
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4.2	Number of cases audited		51		4	10	9	10	1	17	TBC 11/20	↑	UNAV	UNAV
4.3	Risk is identified, responded to and reduced in a timely way.		2.7	Snapshot	3.0	2.4	2.4	2.7	3.0	2.7	TBC 11/20	↓	UNAV	UNAV
4.4	Children, young people and families are appropriately involved		2.5	Snapshot	3.0	2.5	2.6	2.5	3.0	2.5	TBC 11/20	↓	UNAV	UNAV
4.5	Decision making is effective and timely.		2.8	Snapshot	3.0	2.8	2.8	2.6	2.0	2.8	TBC 11/20	↑	UNAV	UNAV
4.6	Assessments are timely, comprehensive, analytical and of		2.8	Snapshot	3.0	2.5	2.8	2.6	2.0	2.8	TBC 11/20	↑	UNAV	UNAV

4.7	Coordination between agencies is effective.		2.6	Snapshot	3.0	2.6	2.7	2.6	2.0	2.6	TBC 11/20	↑	UNAV	UNAV
4.8	Consideration and impact of diversity		2.7	Snapshot	3.0	2.3	2.8	2.6	3.0	2.7	TBC 11/20	↓	UNAV	UNAV
4.9	Quality of plans.		2.7	Snapshot	3.0	2.3	3.0	2.9	3.0	2.7	TBC 11/20	↓	UNAV	UNAV
4.10	Permanency is achieved without delay and reflects assessed needs.		N/A	Snapshot	N/A	N/A	N/A	N/A	N/A	N/A	TBC 11/20	→	UNAV	UNAV
4.11	Children and young people participate in and benefit from effective regular reviews		2.9	Snapshot	3.0	2.6	2.7	3.0	3.0	2.9	TBC 11/20	↓	UNAV	UNAV
4.12	Quality of placement		2.6	Snapshot	2.8	2.1	2.5	2.6	N/A	2.6	TBC 11/20	→	N/A	N/A
4.13	Are young people prepared for independence and are they living in high quality accommodation that meets their needs.		2.5	Snapshot	3.0	2.3	3.0	2.8	3.0	2.5	TBC 11/20	↓	N/A	N/A
4.14	How has the help provided improved outcomes?		2.6	Snapshot	3.0	2.4	2.7	2.6	2.0	2.6	TBC 11/20	↑	N/A	N/A

Theme Four: Quality assurance and audit						
Progress in delivering key improvement plan actions						
Objective	Key Actions	Q4	Q1	Q2	Q3	PROGRESS NARRATIVE
Quality Assurance Framework	Implement audit programme with thematic audits and dip sampling. Deliver training to a pool of auditors and moderators.					The quality assurance strategy has been updated. There is an agreed schedule of QA activity which includes dip sampling and full case file audits. The quarter 1 audit report has been finalised. To note moderation has been impacted upon due to capacity as a result of COVID. Ofsted in the most recent monitoring visit identified a more positive response to audit. During Covid 19 we have continued with the schedule of audit activity. The quarter 2 audit report is in draft and will be circulated to the next CSIB.
Ensure a consistent approach to the use of performance data	A review of the performance management and data reporting will be undertaken to ensure that the relevant reports relate directly to the child's journey through the system.					The performance data has been reviewed and we are in the process of automating the reports. Due to Covid Performance surgeries have been delayed but are now all taking place virtually. The conclusions of the surgeries are reported to the CSCLT.
Improve the effectiveness of learning from complaints and ensure that this scrutiny contributes to improved social work practice and better outcomes for children	Weekly updates to be provided at the HoS meeting, Any timescales that are not adhered to will be escalated to the HoS/Deputy Director.					Complaints are monitored at the management meeting and the timescales are much better. It is important we now establish a mechanism of learning from complaints.