ITEM 3

Bradford Children's Services Improvement Plan

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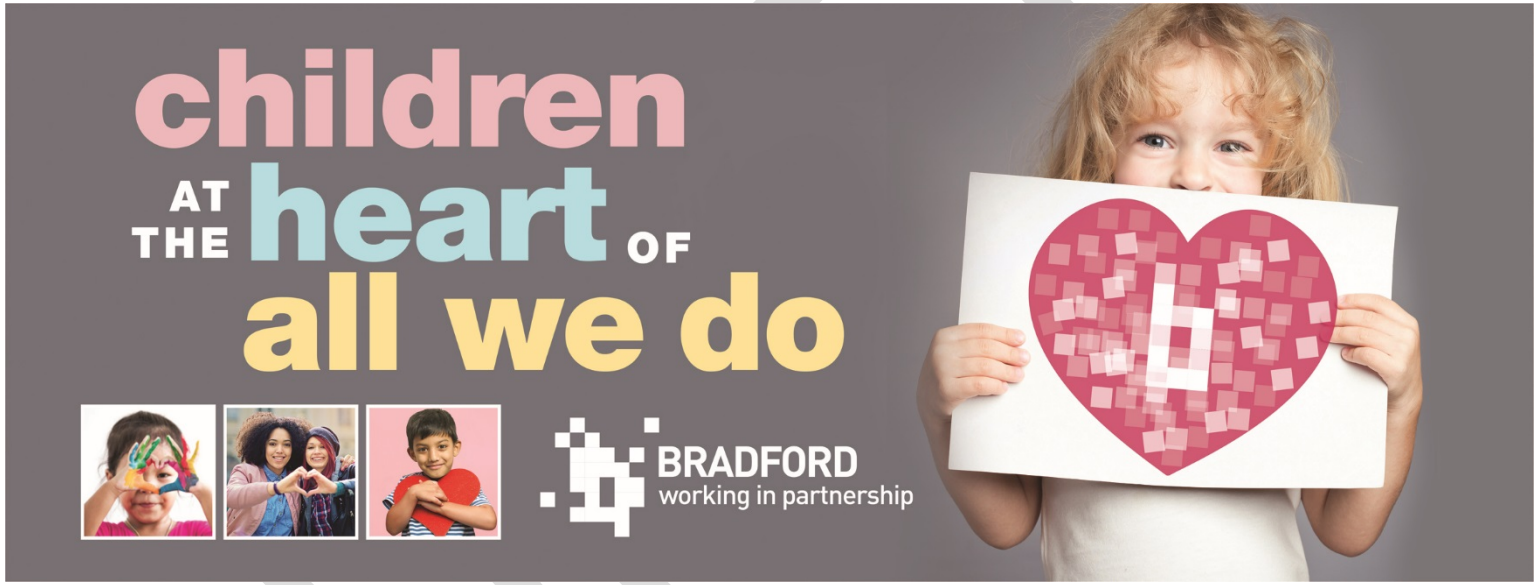

Our Vision

Our children and young people are the future of Bradford. We are privileged to be the UK's youngest city, and want our 150,000 children and young people to be the driving force behind everything we do. We are committed to developing a Family Friendly City and an environment where all our children and young people can fulfil their potential, have high aspirations for themselves and their neighbourhoods and become adults who help to drive the prosperity of our district. The precondition for this is ensuring that every child, young person and family is safe and healthy.

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Foreword

Bradford Council is committed to ensuring that all our children have the best possible start in life. We are proud of the great work that we already do across the district to give every child the opportunity to fulfil their potential. At our recent inspection, Ofsted found that the services we deliver to protect the most vulnerable children and young people are not meeting the high standards the children in the district deserve. We fully accept Ofsted's findings and are committed to a programme of rapid and sustainable improvement.

We have taken immediate action following the inspection to ensure the safety and well-being of our children.

Our over-riding priority is to address the areas of improvement that have been highlighted by Ofsted. We are determined to focus on getting the basics right for children. Most importantly, we want to put children, and the quality of their experience, at the centre of what we do. Our aim is to move quickly to a position where our services are good or better for Bradford's children.

The experience and voices of children and young people are central to our improvement journey. Children and young people will have a strong voice in our plan through engagement activities. The test we will set ourselves is "*are our services the best they can be for our children?"*

A shared commitment

Bradford Council, together with its partners, is committed to working together to achieve rapid and sustained improvement in the experience of children and young people who require support, protection and care. We recognise that, whilst the council is accountable for the protection of children, that for all children to be effectively safeguarded, everyone needs to work together. We will only be able to achieve this if we listen to children and put their experiences at the centre of all that we do.

Cllr Susan Hinchcliffe- Leader of Bradford Council

Cllr Adrian Farley- Portfolio Holder for Children and Families

Kersten England – Chief Executive

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City of Bradford Metropolitan District Council Draft Improvement Plan version 0.27 15.01.2019

Bradford's Improvement Journey will be delviered through six key themes that relate to the Ofsted recommendations, with the central theme being the lived experiences and voice of the child. (see figure 1 below)

1. The "*Lived Experience"* and the voice of the child
2. Improving the quality of social work practice
3. Improving the operating environment to create optimum conditions for success: sufficient enabler support
4. Improving the Front Door and MASH arrangements
5. Improving management oversight and quality assurance
6. Improving the sufficiency of placements for Children Looked After (CLA)

Figure 1

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City of Bradford Metropolitan District Council Draft Improvement Plan version 0.27 15.01.2019

Following the Ofsted Inspection of Children's Social Care Services between the 17-28 September 2018, the inspectorate outlined ten specific areas of improvement, which are essential to ensuring children/young people and their families consistently receive a good service, which in turn will lead to improved outcomes for the child.

The aim of this improvement plan is to demonstrate how the specific recommendations from OFSTED (Code R), together with the wider areas for improvement (code AFI) links to the six themes within our improvement plan.

The table below sets out two areas of improvement namely, Ofsted Recommendations no's 1 -10 (Code R) and Additional Areas for Improvement (Code AFI).

Theme	Code	10 Ofsted Recommendations and wider Areas for Improvement
1. The "Lived Experience" and the voice of the child	R1	Improve identification and response to risk, particularly to the long term impact of domestic abuse and neglect.
	R 4	Improve the quality and implementation of assessments and plans.
	R 5	Improve all aspects of multi agency child protection work.
	R 6a	Improve the response to 16 &17 year olds who present as homeless.
	R 6b	Improve the response to children in private fostering.
	R 7	Sufficiency of Placements to meet the needs of children in care
	R 8	Provision of life-story work for children in care
	R10	Supervision of social work staff, which provides direction, to be regular and reflective
	Code	**Additional Areas – What Needs to be Improved**
	AFI 16	Written plans are not always specific in identifying the children's needs
	AFI 22	The children in care council said that consultation was "tokenistic"
	AFI 29	Insufficient prioritisation of children's lived experiences being at the centre of service improvements
2. Improving the quality of social work practice	R 2	Clarity about what change is needed by families and by when, during pre- proceedings
	R 4	Improve Social Work practice including quality of assessments and plans and their implementation
	R 6b	Improve response to children in private fostering.
	Code	**Additional Areas – What Needs to be Improved**

	AFI 6	Social work varies in quality and impact across teams
	AFI 7	Core groups are not always regular
	AFI 7	Children are not always seen in line with their plans
	AFI 7	Children remain on CP for long periods without their situations improving
	AFI 7	Children are removed from plans too early
	AFI 8	Use of the Public Law Outline (PLO) is not robust
	AFI 8	Children are in Public Law Outline (PLO) for too long
3. Improving the operating environment to optimum conditions for success : sufficient enabler support		Ensuring the conditions for success are in place and all possible barriers to delivery of good social work practice are removed or mitigated. Ensuring excellent multi-agency collaborative working is established across the partnership and corporately within Bradford Council.
4. Improving the Front Door and MASH arrangements	R 1	Identification and response to risk, particularly in respect of the long-term impact of Domestic Abuse and Neglect.
	R 3	Delivery and timely proportionate response to all contacts, ensuring parental consent has been gained where necessary.
	Code	**Additional Areas – What Needs to be Improved**
	AFI 2	Screening of contacts to the MASH is ineffective.
	AFI 2	Children in potentially harmful situations that had been closed by the MASH or inappropriately stepped down to early help
	AFI 3	All contacts inappropriately involve a full duty social worker review and children are inappropriately interviewed by partner agencies
	AFI 4	Strategy meetings do not always include all partners
	AFI 5	All neglect cases are identified through early help and this does not ensure children's needs and safety are at the centre of decision making
	AFI 29	Insufficient prioritisation is given to ensuring that children's lived experiences were at the centre of the service improvements.
	AFI 5	Three weeks' waiting time for early help allocation
5. Improving Management oversight and quality assurance	R 10	Supervision of social work staff, which provides direction, to be regular and reflective.

	R 6a	Improve oversight and monitoring of allegations against professionals working with children.
	Code	**Additional Areas – What Needs to be Improved**
	AFI 13	The quality of evidence in court reports is variable
	AFI 20	Results for Looked After Children at key stage 2 and 4 are not yet good
	AFI 20	Personal Education Plans (PEPs) are too variable
	AFI 27	Earlier improvements in performance were not being sustained
	AFI 26	Loss of experienced social workers, high use of agency staff
	AFI 30	Rapid turnover of staff leading to children have frequent changes of social worker
	AFI 32	Formal supervision inconsistent and not always reflective
6. Improving the sufficiency of placements for Children Looked After (CLA)	R 6a	Improve the response to '16 & 17' year olds who present as homeless.
	R 7	Sufficiency of local placements to meet the needs of children in care.
	R 8	The provision of life story work for all children in care.
	R 8	Completion of mandatory training for all foster carers.
	Code	**Additional Areas – What Needs to be Improved**
	AFI 17	Feedback from Foster Carers is variable
	AFI 17	Poor Assessments leading to placement breakdowns
	AFI 23	Not all care leavers have key documents
	AFI 23	Pathway plans are not user friendly
	AFI 18	For some children arrangements are not sufficient to enable continued contact with important people in their lives
	AFI 19	Local children's mental health support is not available in a timely way

1. The Lived Experience and the Voice of Children

What do we mean?
Bradford is Britain's youngest city and our services need to be shaped by listening to the voice of our children and young people. This is not just a focus of children's services, but everything the council does. We need to find a range of ways to make sure this happens. For vulnerable children who need social care intervention, we need to make sure that they get the 'right help at the right time' and are protected from harm. Social work records and reports must reflect what the world looks like for the child and wherever possible our children must have the chance to form stable and trusting relationships with their social worker. Children's lives should improve as a result of timely actions. We must make sure that all children understand their rights including those children who are in our care. We will take a corporate approach, learning from best practice, across the whole authority and with partners to become a 'Child Friendly Status' city.

What does this mean for children?
We will listen to what you say and use this to ensure you get the right help and support to make your life better.

No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
1.1	Increase the influence of children in care in decision making in Bradford. AFI 22;	1.1.1 Undertake a review with the Children in Care Council (CiCC) to co design a revised CICC and to make recommendations for more opportunities to participate.	Strengthened CiCC arrangement in place that engages more children and they report on positively.	July 2019	JH		
	AFI 22 & 29 Increase influence of children in care in decision making in Bradford. Insufficient prioritisations being	1.1.2 Introduce two way feedback and publish "you said, we did" every term.	The You said we did " report published 3 times a year	March; July and December 2019	JH		

No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
	given to ensuring that children's lived experience were at the centre of the service improvements.		shows improved responses				
1.2	R 6a All children understand the services provided for them by all partners and why we are intervening and provide care.	1.2.1 Work with young people to develop age appropriate information packs, and feedback opportunities. .	Information pack received by all children receiving services and positive feedback received.	April 2019	JH		
	AFI 23 All care leavers to have access to key documents	1.2.2 Compliance with practice standards that ensure all care leavers are given this information and have a chance to talk about it.	Care leavers report satisfaction and can self advocate; Performance reports show 85% of care leavers have documents	July 2019	JH		
1.3	AFI 23 Use innovation to capture the voice of our care leavers.	1.3.1 Provide smart phones for all care leavers with Leaving Well App pre- installed	Number and % using smart phones to keep in touch	11.02.19	JH		
1.4		1.4.1 Deliver and evaluate a digital story telling pilot (working with Bradford College).	Evaluation report considered and further	June 2019	JH		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
			action planned				
1.5	AFI 29 Maximise the use of Viewpoint to capture children's views and to act on these.	1.5.1 Practice guidance and management guidance leads to increased use of Viewpoint and this is reported regularly to CSMT and DMT every quarter with an action plan	Quarterly View Point user report Presented to CS management teams Evidencing increased use of Viewpoint	January 2019 – baseline - % increased by January 2020	JC		
1.6	R 4 ;AFI 16 Ensure that the voice of children and young people is clear in the records for each child.	1.6.1 Review and re launch Practice Standards in relation to visiting children and recording the child's views.	Audit reports show improved focus on the child's voice	March 2019	JH		
		1.6.2 Internal audit on evidence voice of the child in case file recordings of Children Looked After and Care Leavers to inform standards and good practice	Audit reports show improved focus on the child's voice	March 2019	DB		
		1.6.3 Provide training for staff on capturing and recording the voice of children in casework	Workforce reports activity and take up of training	Quarterly CSMT and DMT	JH		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
1.7	AFI 29 Improve and embed the Corporate Parenting commitment across the council.	1.7.1 All departments asked to provide a Corporate Parenting Plan and report this through the Corporate Parenting Committee	Plan in place; monitoring reports from committee	April 2019	G R-W		
1.8	R6a Improve the response to 16&17 year olds who present as homeless.	1.8.1 Social worker led team in place to assess needs of young people presenting as homeless.	Audit sampling Feedback from young people	Novembe r 2018 April 2019	JH		
		1.8.2 Develop clear information for young people on their rights as homeless young people and ensure these are shared and understood.	Young People's guide published and accessible to young people	January 2019	JH		
		1.8.3 New management arrangement in the Youth Homelessness team in place to oversee this work	Improved responses to assessed needs shown through audit reports	January 2019	JH		
		1.8.4 Enhanced case file audit programme in the Youth Homeless Team	Audit report shows improved performance	Complete d by April 2019	JC		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
		1.8.5 Explore linking in youth homelessness with the front door to social care.	Responses to youth homelessness included in Front Door redesign	May 2019	JH		
Engaging with all children in Bradford							
1.9	Children's Plan: Improve engagement across the system in listening to the voice of children and young people in order to become a 'Child Friendly City'.	1.9.1 Develop a whole council, whole system approach- co produced with children and young people.	Strategy in place with SMART objectives	2019 onwards	KE		
1.10	Refresh the work of the Children's Trust	1.10.1 The Children's Trust is focussed on improving evidence of listening to children and young people.	Children's Trust actions	2019 onwards			
1.11	AFI 29 Improvements in children's services are informed by and respond to the voices of children.	1.11.1 Grant to enable suitable provider to engage children and young people in the development of the improvement programme.	Reporting from the contract and the group	January 2019	JC		
How will we know that Children's Outcomes have improved? More children telling us through case file notes, reviews, events and surveys that their outcomes have improved More children participating in key decisions that affect them so they can tell us how their lives are better – direct and indirect feedback			**What will this look like?** The voice of the child is represented and documented in case files. Children know their rights and are empowered to tell us what matters to them Children and young people are supported to contribute to or attend their reviews				

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
			Care and support plans reflect the identified needs and wishes of each child Children in care (and all children in Bradford) feel they have more say in how the council and services are run Clear processes are in place using a range of methods to make sure young people's voices are routinely heard				

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2. Improving the quality of social work practice

What do we mean? Social work practice in Bradford is consistently and demonstrably of a high standard, meeting or exceeding national standards and compliant with guidance. Good quality assessments and plans accurately and clearly set out vulnerabilities and what actions are required to improve children's circumstances / reduce risk. These are regularly reviewed and remain accurate and purposeful. Children are seen and their voice is heard

What does this mean for children?
Children and their families will get help when they need it and will understand what needs to change to keep them safe and well. Young people who cannot live at home get the right support when they need it. Children living with private foster carers are safe. There is clarity for families about what needs to change when there are serious concerns

No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
Good quality assessments and plans							
2.1	R 4 Improve the quality of assessments, plans and their implementation.	2.1.1 Undertake a review of assessment and plans and report the findings to agree corrective action.	Audit report Review document. Revised practice standards document in place	February 2019	JH		
		2.1.2 Enhanced audit activity to review assessments and plans and support and challenge staff.	Audit shows an improving trend in quality and implementation of assessments and plans	March 2019			
		2.1.3 Provide training for front line Social Workers on preparing good plans	Evaluation of learning programme	March 2019			

No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
			demonstrates increased knowledge and skills				
		2.1.4 *Lunch and learn Back to Basics* sessions on specific subjects, sharing best practice /what works.	Evaluation of learning programme demonstrates increased knowledge and skills	Septembe r 2019			
		2.1.5 Review business processes in LCS to ensure that these facilitate good planning	IGE action log; LCS changes made	March 2019	JC		
	R 4 Improving and strengthening CIN arrangements and ensure that effective plans are in place	2.1.6. Review CIN processes and produce revised practice standards and performance framework	Actions taken leading to consistently good performance and improved outcomes for children	March 2019 October 2019	JH		
2.2	R5 Improve all aspects of multi agency child protection work AF 17 children on child protection plans – avoid drift	2.2.1 Review and revise the use of Signs of Safety within Child Protection planning ensuring that plans are SMART	Revised practice standards Multi agency guidance in place	May 2019	JC BSCB nominated partners		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
	and ensure that the plan leads to improvement in the child's circumstances.	2.2.2 Undertake CPD with Child Protection Chairs and Team Managers in relation to good planning and escalation responsibilities.	Training completed leading to consistent approach to escalation	September 2019	JC		
		2.2.3 Review CP Challenge to include time bound escalation and regular reporting to the Performance group on issues. 2.2.4 Practice standards are readily accessible to all social workers	Revised guidance in place; Monthly review of escalations shows a consistent approach; Compliance with standards	April 2019	JH		
		2.2.5 Review of the 10 cases from audit where auditors expressed concern and SD to review with Team Managers and CP Chairs.	Review undertaken; Corrective action to address findings are reflected in revised procedures	February 2019	JH	DD/NC JC to nominate	
		2.2.6 Review Child Protection Conferences (including use of SoS) format and focus of CP Plans and Core Group Process.	Review completed; Audit reports show processes to be effective	January 2019 September 2019	JC		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
		2.2.7 Put in place an improved escalation process for CP Challenge.	New process in place which support appropriate escalation	March 2019	JC		
		2.2.8 Review of all cases of CP over 2 years and report to senior managers with case level action for TMs.	Review report Fewer children on plan for over 2 years	January 2019 January 2020	JH		
		2.2.9. Process implemented for TMs to review all children subject to CP Plans at 12 months, to ensure children progress is timely.	Pilot findings reviewed and guidance in place Fewer children on plans for over 2 years	Pilot January – March 2019 Then review	JH		
		2.2.10 Introduce 18 month review and audit by CP Chairs.	New process in place	June 2019	JC		
	R 6 a: Improve oversight and monitoring of allegations against professionals.	2.2.11 Research best practice, and implement an enhanced system for tracking allegations management referrals to demonstrate enhanced oversight of the work.	Upgrade in LCS to manage allegations effectively ; reports improved	March 2019	JC		
2.3	Improving social work practice.	2.3.1. See management actions 5.1 & 5.2			JH		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
	Resources and reducing caseloads AFI 7	2.3.2 Establish 3 Practice Educators to support social work practice	Social work standards are maintained and social workers are supported better	February 2019	JH		
		2.3.3 Develop smarter systems to support social workers recording allowing more focus on time spent with children.	LCS more user friendly; Social workers report less time spent on LCS	March 2019	DW		
2.4	R10 Improving the quality of supervision.	2.4.1 Develop the Practice Supervisor role to support best practice (training/mentoring).	Improved audit outcomes	June 2019	JH		
		2.4.2 Audit supervision and feedback learning. Revisit to test for impact	Audit report shows compliance and quality improved	July 2019	JH		
		2.4.3. Provide training on reflective supervision	Training delivered	March 2019	JH		
		2.4.4 Revise practice guidance for managers	Revised guidance published; Supervision audit report shows compliance and	Dec 2018 Septembe r 2019	JH		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
			quality improved				
		2.4.5. Improve managers' induction programme and ensure completion by all new managers	Workforce reports show all managers complete induction programme	April 2019	JH		
2.5	AFI 8 Ensuring clarity and timeliness for families in PLO and pre- proceedings work.	2.5.1 Review all cases in PLO and take immediate action to address issues of drift and delay. Maintain improved performance.	Reduced average time in PLO More timely progression of legal process through robust case handover Legal Gateway Panel minutes	January 2019	JH		
		2.5.2 Put in place a revised tracker and the Service Manager for Proceedings and the Head of Social Work to review this on a regular basis to ensure no drift and delay.	Tracker in place, regularly reviewed and showing evidence of timely actions.	January 2019	JH		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
		2.5.3 Implement Legal Workspace on LCS to provide better processes and reporting.	Legal workspace in place resulting in improved performance and reporting	February 2019	JC		
		2.5.4 Provide briefing for all managers on PLO expectations.	Briefing delivered and attended by all relevant managers	February 2019	JH		
2..6	AFI 7&8 reducing drift and delay in planning for children subject to plans and improving the use and effectiveness of the Public Law Outline	2.6.1 Secure additional resources to deal with the current delays. Revise practice guidance	Revised practice guidance in place Audit shows an improving trend in timeliness and effectiveness of use of PLO	February 2019 Link to audit plan timeframe	JH		
		2.6.2 Formalise the role of Legal Gateway Panel in step down from PLO as well as step up.	Revised ToR for LGP leads to timely actions	February 2019	JH		
2.7	R 6a Improve response to children in private fostering.	2.7.1. Review the Private Fostering Policy and practice guidance; working with partners to ensure that each agency has an action plan to promote awareness within their organisation.	Revised multi agency policy in place; Increased notification of private fostering arrangements; Multi agency	July 2019	JH Link to BSCB		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
		Link to BSCB actions	reporting of private fostering increased				

How will we know that Children's Outcomes have improved?	What will this look like?
Children and young people will tell us that they feel safe and things are better for them as a result of our interventions	Children who need to come into care do so at the right time Managers will be confident in having oversight of cases and driving improvement in their area Audit will evidence improved quality of casework Social Workers will stay in Bradford for longer and we will have more experienced workers to balance the numbers of newly qualified staff We will prioritise stability of social worker for our children and changes will be minimised. Where changes of workers have to happen the transition will be managed with children Managers will be able to speak confidently about performance in their area and there will be evidence of support and challenge improving practice Reflective supervision will be happening and there will be evidence that this stretches social workers and helps to improve practice and keep children safe

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3. Improving the operating environment to create optimum conditions for success: sufficient enabler support

Actions to achieve improvements in front line social work with children, young people and families cannot be achieved in isolation. The council, along with its partners, will need to work collaboratively to ensure that rapid improvements can be made. Barriers to efficient working practices that allow front line staff to spend as much time as possible in face to face work with children, must be removed or reduced. This will be achieved through a combination of investments in technology, streamlined processes and procedures, additional business support and other technical support capacity. Involving front line staff, corporate colleagues, partner agencies as well as children themselves will help us to identify and systematically improve the quality and effectiveness of our services.

No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
3.1	Sufficient, skills, capacity and leadership across the system combined with admin support to keep trackers updated. Use of admin support to reduce the burden on SW and TMs to reduce inefficiency across the service, allowing front line staff to prioritise work with children.	3.1.1 Review the barriers to strong performance monitoring and accountability and make necessary investments based on these findings	Improved maintenance and use of management information across the service	March 2019	Anne Lloyd		
		3.1.2 Maximise the functionality and ease of use of IT systems – LCS to support administrative tasks.	Performance reports, feedback from Ofsted and staff	June 2019	JC		
		3.1.3 Respond to feedback from Staff engagement sessions.	You said we did reports	On-going from January 2019	GRW		
3.2	Delays in achieving permanence for children.	3.2.1 More specialist legal advice to enable timely legal processes.	Timeframes for permanence planning	December 2019	Parveen Akhtar		

			improve				
3.3	Develop and sustain a positive culture across the service that supports good working conditions for all staff	3.3.1 Dedicated HR support linked to transformational change plans in Help and Protection service	Reduced turnover of SW staff	July 2019	Anne Lloyd		
		3.3.2 Implement an enhanced staff engagement and communication strategy that ensures positive responses to feedback from staff regarding working conditions and management culture	Strategy in place; e new channels to staff and feel valued and listened to	Throughout the year with review in December 2019			
3.4	Improve all aspects of workforce development and performance management.	3.4.1 HR support including dedicated HR business partner for 6 months to support transformation programme.	Improved overall performance/staff survey feedback	July 2019	Anne Lloyd		
3.5	Maximise efficiency through mobile working, use of tablets and other devices.	3.5.1 IT support. Consultant to support transformation of LCS functionality to support good social work practice and management.	Improved overall performance/staff survey feedback	March 2019	DC		
3.6	Improve the use of performance analytics and management information.	3.6.1 Performance team OCX and service performance teams working collaboratively.	Improved overall performance/ Ofsted Feedback	Monitoring visits throughout 2019	DW		

How success will be measured
Cost effective measures that deliver timely and measurable improvements across all themes of the plan
A 12 week plan will be developed within the first 3 months
Efficient progress is made in the delivery, and monitoring of improvement actions

4.Improving the Front Door and MASH arrangements

What do we mean?
When someone refers a child or young person to us, we quickly and thoroughly work out what needs to happen to make sure the child is safe. Children and their families are fully involved and consent to work with us from the start, unless this would increase the risks to the child. All children and young people who have been referred have their needs and vulnerability accurately assessed and responded to in a timely way. They will receive a proportionate response and a service that is individually tailored to meet their needs. Our services will be compliant with relevant statutory guidance and legislation.

What does this mean for children?
When you, your family or a professional working with you first asks us for help, we will quickly make sure you get the help and advice you need. We will always involve you and your family in decisions about you unless it would put you in danger to do so.

No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
4.1	R 1 Improve the identification and response to risk, particularly longer-term impact of domestic abuse and neglect:	4.1.1 All contacts (including neglect) handled by MASH. 4.1.2 Recruit a Head of Service for Front Door and MASH	Audit and performance reports demonstrate improved consistency in applying thresholds and appropriate responses to risk and harm	January 2019 February 2019	JH		
	AFI 2 Screening of contacts to the MASH is ineffective. Children in potentially harmful situations that had been closed by the	4.1.3 Review of Early Help workload and capacity; end to end performance reporting on early help intervention to	Performance tracked showing an improving trend against all Front Door performance measures. Allocation of work in	February 2019	JC		

No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
	MASH or Inappropriate stepped down to early help AFI 5 Three week waiting time for Early Help allocation	improve timeliness and management oversight.	Prevention and Early Help is timely				
	AFI 2 Screening of contacts to the MASH is ineffective.	4.1.4 Protocols put in place for recording contacts and Social workers based at the Contact Centre to oversee calls and provide advice		February 2019	JH		
	R1& R5 Improve identification and response to risk, particularly long term impact of domestic abuse and neglect. Improve all aspects of multi agency child protection work.	4.1.5 MASH performance is reviewed weekly to monitor performance against targets in the performance framework	Performance report in place; targets set, and performance improves.	February 2019	JC		
		4.1.6 Merge the Early Help Gateway and MASH and introduce an integrated process at the Front Door.	Integrated front door operational	January 2019	JH		
4.2.	R 5; AFI 3 Too many children being subject to unnecessary and disproportionate SW processes.	4.2.1 Establish MASH Strategic Board to improve partnership understanding of thresholds, accountability and the development of shared expectations	Board meeting minutes reflect improved partnership working and shared understanding of thresholds and consent requirements	December 2018	G R-W		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
		in relation to gaining consent.					
		4.2.2 Establish MASH Operational task Group	Task group in place and supporting continued improvement in integrated working with improved consistency and timeliness of responses	December 2018	GRW		
4.3	R3 & R5 Children who are already allocated to a SW are being opened as a new contact; Improve accuracy of data re: contacts; improve customer service experience for children, families and partners.	4.3.1 'Process map', revise and issue new guidance re telephony standards to include guidance on *contacts* on open cases.	Standards in place All workers have a phone children, families and partners can speak to the right person about the child	February 2019	JH		
4.4	R1 & R3 Quality assurance of impact of improvements on timeliness and quality of Front Door responses.	4.4.1 Arrange a Peer review of Front Door including MASH processes – by the Partner in Practice Doncaster CT	Peer review report received and responded to	December 2018	GRW		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
		4.4.2. Following PiP Peer Review and in response to the findings- remodel Front Door arrangements	Remodelled Front Door operational and partnership arrangements support improved performance and consistency of decision making	February 2019	GRW		
	R & R 5	4.4.3 Undertake multi agency audits.	Audit report through BSCB show positive outcomes	4 times per year	GRW		
	R1& R 3	4.4.4 Internal QA audit team to audit MASH responses.	Audit report show an improving trend in compliance and children's outcomes	December 2018 then on-going	JC		

What will this look like?	How will we know that Children's Outcomes have improved?
Fewer contacts to social care as children are safeguarded in universal services and the right contacts are then made to social care Fewer children come into our services following repeat referrals 100% compliance in gaining the consent of families when this is required Contacts and referrals are dealt with in a timely and proportionate manner Partners and peers are confident about our Front Door arrangements	More children will receive help through universal and early help provision to remain safe, have access to school, training or work, be healthy and living with their families or an appropriate alternative. Children and families tell us they were helped early enough Fewer children suffering significant harm

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5. Improving Management oversight and quality assurance

What do we mean?
The service is well led at all levels and there is clear oversight of all children and all aspects of work with children and families. The service leadership is well informed about all aspects of the service and use this information to take timely action to anticipate and rectify problems.
Partnership working results in robust and clear plans that improve outcomes for children; all social workers receive regular high quality reflective supervision; good quality management information enables service managers and leaders to exercise robust oversight and monitoring.

What does this mean for children?
Services that are there to support you will be well run, regularly checking that work is of the highest standards; open to challenge and ready to adapt quickly when needed.

No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
Workforce stabilisation, workable caseloads, supervision and efficiency							
5.1	Workforce stabilisation and Improve supervision R10 AFI 26;30;32	5.1.1 Implement an improved recruitment and retention strategy	Reduce turnover to below national average of 15%; Higher % of experienced social workers in hard to fill posts.	January 2019	JH		
		5.1.2 Review the process for conducting Exit Interviews to achieve greater take up	>66% of exiting employees complete	March 2019	JH		

No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
		5.1.3 Establish the team manager and practice supervisor development programme through the 'Teaching Partnership'.	100% managers attend the programme and report positively on its impact	January 2019	JH		
		5.1.4 First-line" management course for aspiring leaders will be available to key staff.	Quarterly updates report that all first line managers have taken up training and report positively	September 2019	JH		
5.2	R 10 Improve the quality of supervision.	5.2.1 Develop a protocol and timetable for audits of Supervision as part of the QA process.	Audits show progress. 100% of supervisions being carried out and recorded.	July 2019	JH		
Culture of High Support and High Challenge							
5.3	Strengthen accountability across the service and develop a culture that supports excellent performance, through a combination of robust action planning, formal monitoring and action to ensure	5.3.1 Review governance and accountability framework	Meeting structure and ToR Feedback from managers and evidence from	March 2019	GRW		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
	consistent compliance AFI 6;7;8;20;23;27;		cases through audit demonstrates effective management oversight	July 2019			
		5.3.2 Introduce management standards to ensure clarity of expectation in relation to management accountability.	Management standards; Review scheme of delegation/ decision making	April 2019	GRW		
		5.3.3 Agree an enhanced approach to managing performance across the service and apply this consistently. Develop a culture of continuous improvement across the service	Monthly reporting on all aspects of workforce management considered and acted on by DMT	From January 2019	GRW		
		5.3.4 HR 'advice/drop in' sessions for managers in relation to managing performance issues	Managing performance is more effective as demonstrated through workforce reporting	February 2019	GRW		

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No	Inspection recommendations and Areas for Improvement	Activity required		Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
5.4	Develop and sustain a positive working culture across the service that improves two way communication between staff and senior leadership	5.4.1	Implement an enhanced staff engagement and communication strategy (see separate strategy for details).including staff survey, video blogs, suggestion boxes	Strategy in place; Feedback from staff that they feel valued and listened to	December 2018 On-going through 2019 then review	GRW		
5.5	Improve the quality and accessibility of guidance across all areas of practice for practitioners/ managers and QA. R2,4,5,10 AFI 27	5.5.1	Produce 'one minute' guides focusing on *back to basics* approach describing what good looks like and compliance expectations.	Feedback from staff; improvement in audited outcomes	February 2019	JH		
		5.5.2	Make practice standards accessible in all work areas.	Spot checks while walking the floor	March 2019	JH		
		5.5.3	Put in place "themed months" focussing on one area of improvement per month e.g. Life Story Books; Listening and responding to the Voice of the Child.	Starting March 2019		JH		
		5.5.4	Offer lunch and learn sessions on key practice areas	Feedback from staff that these are helpful and address areas for improvement	Starting March 2019	JH		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
Good quality management information supports robust oversight and monitoring							
5.6	Improve accessibility, accuracy, comprehensiveness, and rigour through introduction of effective performance arrangements by the service.	5.6.1 Review all performance data sets, reporting schedules leading to an agreed set of key performance reports	Easy to access data sets in place for all teams	January 2019	JC		
		5.6.2 Ensure appropriate training and support to improve managers' capacity to analyse data and use this to improve service planning.	Increased use of reporting tools by all managers	On-going through 2019 then review	JC		
		5.6.3 Put in place performance clinics for all service areas.	Performance clinics are service led and have a positive impact on performance	On-going through 2019 then review	JH		
	Improve the functioning and efficiency of the client records system	5.6.4 Action the LCS health check recommendations to maximise operational effectiveness. 5.6.5. Respond to Peer review feedback in relation to client information systems usage	Business processes improved	By April 2019	JC		
5.7	A refreshed Quality Assurance strategy and action plan drives improved outcomes for children and their families and reported performance.	5.7.1. Ensure that performance reporting reflects practice standards across all elements of Children's Services	Refreshed performance reports reflects all elements of children's social care	March 2019	JC		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
		5.7.2 Undertake a review of all cases for children in Help and Protection and carry out remedial actions and report and action learning.	Review completed and assurance provided that children were safe	November 2018	JC	QA Lead	
		5.7.3 Apply a robust and comprehensive Quality Assurance and audit plan (to include enhanced auditing, coaching & regular reporting)	Plan supports continued improvement required to deliver good outcomes	February 2019	JC		
Improve partnership working							
5.8	Improve all aspects of multi agency child protection work R5	5.8.1 Ensure ownership of improvements by all partners using the BSCB; MASH strategic group; Children's Trust	Positive feedback from the partnership and multi agency sign up to the Improvement Plan	January – June 201	JC		
5.9		5.9.1 Establish MASH Strategic Board to improve multi agency practice at the Front Door.		December 2018	G RW		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
How will we know that Children's Outcomes have improved? Children and young people will tell us that they feel safe and things are better for them as a result of our interventions			**How success will be measured** Improved compliance across all areas of the service Improved management information leading to an accurate perception of quality of the service Robust and responsive management action to correct poor performance Reduced SW caseloads Reduced staff turnover- improved stability of the workforce Improved partnership working Increased innovation and collaborative working				

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6.Improving the sufficiency of placements for Children Looked After (CLA)

What do we mean?
The quality and availability of placements for children looked after is sufficient to meet the current and anticipated needs of looked after children; children understand their family background and foster carers are well prepared and trained to undertake their role.

What does this mean for children?
If you need to be looked after away from your family, you will be able to stay near home and will be well looked after.

No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
6.1	Reduce the numbers of Children Looked After through an effective 'Edge of Care' offer. R 7	6.1.1 Continue to invest in successful Be Positive Pathways (BPP) edge of care programme. Review impact and design a sustainable service based on lessons learned from the pilot programme. Sustainability planning with partner agencies from March 2019 onwards.	Fewer teenagers coming into care More children returning home appropriately and quickly	1/4ly reviewing and forward planning December 2018-September 2019	JH		
		6.1.2 Investment in connected persons team to identify family members earlier so that more children achieve permanency through SGO.	Increase in use of SGOs	Impact September 2019	JH		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
		6.1.3 Identify Children Looked After with potential to be reunified with family through Permanence panel and develop intensive intervention to support reunification.	More children returning home from care	Impact September 2019	JH		
6.2	R8 Provide life story work for all children in care.	6.2.1 Deliver training to all social workers in relation to life story work (LSW) and its importance for children	When appropriate Children Looked After (CLA) receive/ have life story work completed in a timely way	May 2019	JH		
		6.2.2 Develop one minute guides for practitioners about life story work.	Guides available lead to improved quality and consistency of LSW	March 2019	JH		
		6..2.3 Adapt LCS to provide reporting and storage for life story work.	100% of CLA have accessible and	April 2019	JH		

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
			meaningful personal history material				
		6.2.4 Implement Management standards in relation to life story work and ensure capacity to complete.	System reporting; viewpoint All CLA have LSW offered.	June 2019	JH		
6.3	R8 Ensure that all foster carers complete mandatory training. AFI 17 feedback from foster carers	6.3.1 Review and re launch the L&D offer to all foster carers including progression and on going CPD.	All foster carers receive mandatory training ; increased take up and evidence of CPD	March 2019 December 2019	JH		
		6.3.2 Induction pack in place for all new foster carers	Packs available	May 2019	JH		
		5.3.3 Review the foster care Agreement / foster care charter. 5.3.4 Improve monitoring and reporting of foster carer training using Evolve	Revised agreement Accurate reporting	May 2019 June 2019	JH	DB/fostering SM	

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
		6..3.5 Consult with Foster Talk to lead in addressing foster carers support needs.	Feedback from foster carers informs revised strategy	March – April 2019	JH	DB/fostering SM	
		6.3.6 Re launch a fostering association in Bradford.		April 2019	JH	DB/fostering SM	
6.4	R7 Enough local placements to meet the needs of children. AFI 17 poor assessments leading to placement breakdown	6.4.1 Develop and deliver an effective sufficiency strategy that includes: Internal review of foster placement availability; a needs analysis to generate options to stimulate the provider market. 6.4.2 Develop local unregulated setting for emergencies. 6.4.3 Re launch crisis care fostering scheme. 6.4.4 Explore external unregulated setting. 6.4.5 Continue to drive internal fostering recruitment. 6.4.6 Revive the shared care fostering scheme.	More in house beds More use of in house foster placements Improved recruitment and retention of in house carers recruited	December 2018 – December 2019	JH	DB/fostering SM	

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No	Inspection recommendations and Areas for Improvement	Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG rating Progress
6.5	Improve matching of children and carers AFI 17 poor assessments leading to placement breakdown	6.5.1 Review and redesign Placement Coordination Service and linked systems and guidance to ensure consistency and improve placement choice and quality	New Placement Coordination service in place; placement stability improved	April 2019 December 2019			
6.6	AF1 18 Improve arrangements for keeping in contact with important people for children looked after.	6.6.1 Improve compliance with practice standards to ensure that contact with important people is facilitated where appropriate for Children Looked After.	Wherever possible, all CLAs have meaningful family time with important people in their lives	May 2019	JH		
6.7	Improve timeliness of access to mental health support for children looked after AFI 19	6.7.1 Detailed improvement plans are set out in Future in Mind strategy.	TBC	TBC			

How will we know that Children's Outcomes have improved?	How success will be measured
More children are able to stay with their family and friends. Children Looked After are doing well in school and tell us that that they have someone to support them	Reduce total number of CLA Measures for improved offer for '16 &17' year olds More local placements - Reduced reliance on externally purchased placements and associated costs Improved matching / placement choice More children leave care through increased use of SGO Increase the number of nights respite

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