

Improving the Front Door and MASH arrangements									
RED	Tasks and/or outcomes have not been met or timescale slipped								
AMBER	Tasks and/or outcomes are on track; milestones met but not completed								
GREEN	Tasks and outcomes are completed; performance is on target								
GREY	Task not yet started								
BLUE	Complete								
No.	Code	Inspection recommendations and Areas for Improvement		Activity required	Desired Outcomes	Timeline	Accountable Lead	Progress update	RAG
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.	Audit and performance reports demonstrate improved consistency in applying thresholds and appropriate responses to risk and harm	Jan-19	Jim Hopkinson	Audit shows some improvement	AMBER
			4.1.2	Recruit a Head of Service for Front Door and MASH		Feb-19	Jim Hopkinson	Interim in place permanent job out to recruitment	AMBER
	AFI 2 AFI 5	Screening of contacts to the MASH is ineffective. Children in potentially harmful situations that had been closed by the MASH or Inappropriate stepped down to early help Three week waiting time for Early Help allocation	4.1.3	Review of Early Help workload and capacity; end to end performance reporting on early help intervention to improve timeliness and management oversight	Performance tracked showing an improving trend against all Front Door performance measures. Allocation of work in Prevention and Early Help is timely	Feb-19	Jenny Cryer	This task has not yet started	GREY
	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		Feb-19	Jim Hopkinson	Social worker in the Contact centre reviews all e mails and advises on calls	GREEN
	R 1 R 5	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.	Feb-19	Jenny Cryer	Draft dashboard in place to enable weekly reporting	AMBER
			4.1.6	Merge the Early Help Gateway and MASH and introduce an integrated process at the Front Door.	Integrated front door operational	Jan-19	Jim Hopkinson	EH Gateway in the MASH although further developments being planned to move EH to localities	AMBER
4.2	R 5 AFI3	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 in relation to gaining consent.	Board meeting minutes reflect improved partnership working and shared understanding of thresholds and consent requirements	Dec-18	Gladys Rhodes White	MASH Board has met and planning event held	AMBER
			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	Dec-18	Gladys Rhodes White	This task has not been completed due to management turnover	RED
4.3	R 3 R 5	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	Feb-19	Jim Hopkinson	This is in the planning phase following the event above	AMBER
4.4	R 1 R 3	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	Dec-18	Gladys Rhodes White	This has taken place	GREEN
			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	Feb-19	Gladys Rhodes White	These have been included within the Improvement Plan	AMBER
	R?? R 5		4.4.3	Undertake multi agency audits. (4 times per year)	Audit report through BSCB show positive outcomes	4 times per year	Gladys Rhodes White	These have been planned in	AMBER
	R 1 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	Jenny Cryer	Initial sample has been audited and plan for reviews in February 2019 and then at regular intervals	AMBER