

Together for Children

Learning and Improvement Plan 2018



INTRODUCTION

The Ofsted inspection of Sunderland's services for children in need of help and protection, children looked-after and care leavers was carried out between 23rd April and 18th May 2018. The report was published on 25th July 2018. The inspection team found children's services in Sunderland to be inadequate with the following judgements:

1. Children who need help and protection	Inadequate
2. Children looked after and achieving permanence	Requires Improvement
– Adoption	Good
– Experiences and progress of care leavers	requires improvement
3. Leadership, management and governance	Inadequate

This Learning and Improvement Plan has been developed in response to the Ofsted inspection report. The report requires the local authority and Together for Children to respond to the following 15 areas for improvement.

1. Urgently review ICRT and take action to ensure that risks to children are identified, that thresholds are applied appropriately to support effective decision-making, and that actions taken are timely and compliant with statutory guidance.
2. Ensure that children at risk of child sexual exploitation and those that go missing have an up-to-date assessment of risks that informs a comprehensive response to keep them safe.
3. Ensure that governance and scrutiny arrangements are rigorous and challenging and that there is an accurate understanding of the quality of practice, to enable the council to hold TfC to account and to ensure that progress is made, that children are protected, and that their experiences improve.
4. Improve the training and development offer for social workers and managers to ensure that all staff have the right skills and knowledge for their role.
5. Ensure that managers provide reflective and directive supervision for all workers, with additional challenge from IROs and conference chairs, in order to improve the quality of practice and planning for all children.
6. Improve the timeliness of services to children and families, including the early help response, and the access to services to support victims and perpetrators of domestic abuse.
7. Ensure that children's records are kept up to date and contain clear child-focused information so that children's histories and progress can be clearly evaluated to inform decisions.
8. Ensure that all assessments are appropriately updated, that they evaluate individual risk, need and the experience of children, and that the resultant plans are outcome-focused, are meaningful to children and families, and are regularly reviewed.
9. Ensure that applications to court are timely and of good quality, and that no children are left in situations of ongoing risk due to delay.

10. Ensure that children who present as homeless fully understand their rights to become looked after under Section 20 of the Children Act 1989, and the benefits this brings.
11. Ensure that practice for children who are subject to private fostering arrangements meets statutory requirements.
12. When children come into care or need an alternative home, ensure that they are provided with a placement that meet their needs and offers stability through more proactive matching.
13. Ensure the timely completion of life-story work for all children looked after so that they can understand their life history.
14. Improve timely access to appropriate mental health services for children looked after and care leavers and develop a clear transition pathway for those care leavers who do not have an EHCP.
15. Improve access to vocational, training and employment opportunities for care leavers and particularly for those who have been not in education, employment or training (NEET) for long periods.

The Learning and Improvement Plan has been developed around the above 15 recommendations. A number of other improvement actions have also been identified from the narrative report and these are also included in the plan. Specific actions to achieve improved outcomes for children and young people are set out under each of the recommendations. Each action includes the timescales by which the improvement should be delivered alongside a lead. For each recommendation there is a clear indication of how success will be measured and evidenced. Progress against each action will be RAG-rated.

The Learning and Improvement Plan has been aligned with the TfC Quality Assurance framework which draws information from a range of quality assurance activities to give a triangulated view of assurance. The framework monitors key performance indicators and captures quality assurance work undertaken by TfC and external sources such as peer reviews, sector led improvement and inspections.

The Learning and Improvement Plan will be overseen by the Quality and Improvement Committee, a sub group to the TfC board. The Committee will meet bi-monthly and will monitor the delivery of actions and success measures to demonstrate improvement to the Department for Education, the Council and the wider community. The Committee will be chaired by the TfC Board Chair.

PROGRESS TRACKER

All actions in the Learning and Improvement Plan are RAG-rated. A key to the RAG-rating system is below.

RECOMMENDATIONS															
CURRENT RAG RATINGS	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Red															
Amber															
Green															
Completed															
New Actions															
Total															

RAG RATINGS	NOV 2018	DEC 2018	JAN 2019	FEB 2019	MAR 2019
Red					
Amber					
Green					
Completed					
New Actions					
Total					

RED	The action has not yet started or there is significant delay in implementation.
AMBER	The action has started but there is some delay in implementation.
GREEN	The action is on track to be completed by the agreed date.
COMPLETED	The action has been completed and evidenced.

*Numbers at the end of each recommendation within the plan relate to the appropriate noted paragraphs in the report

CHILDREN WHO NEED HELP AND PROTECTION - THE EXPERIENCES AND PROGRESS OF CHILDREN WHO NEED HELP AND PROTECTION

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 1: Urgently review ICRT and take action to ensure that risks to children are identified, that thresholds are applied appropriately to support effective decision-making, and that actions are timely and compliant with statutory guidance. (para 21, 23, 78) (Ref: Ofsted Recommendation 1)	<ul style="list-style-type: none"> • Thresholds are at the appropriate level. • Thresholds are understood and applied consistently across the partnership and in ICRT. • Risk is always identified and responded to. • Statutory guidance and regulations are followed to deliver prompt action to safeguard children. • The impact of cumulative risk and where children exposed to multiple risk factors is sufficiently understood or evaluated including the consideration of additional vulnerabilities such as disability. • Management decision making is clear and based on full information. 	1.1 Commission an independent review of ICRT (21) (78).	Director of Quality Assurance & Performance	01/09/18	Independent review of ICRT and repeat contacts concluded. Report presented to Senior Leadership Team. Recommendations contained within this plan.	
		1.2 Agree and implement new ICRT model	Director of Children's Social Care	31/10/18	Process and flowchart agreed and circulated to staff. Best practice file in place and new team structures implemented.	
		1.3 Put in place multi-agency strategic and operational task groups to identify and tackle improvements within the ICRT process.	Director of Children's Social Care	30/09/18	First meeting of Strategic Task Group took place on 01/10/18 and is chaired by the Director of Social Care. The group oversees the implementation of the ICRT recommendations. The first meeting of the Operational Task Group took place mid-September and is chaired the Police. The operational group reports to the Strategic Group. A performance and quality assurance framework is in development.	
		1.4 Review and improve process for recording and screening of contacts in ICRT (21) (78)	Service Manager - ICRT	31/12/18	Following a review of current processes, a revised flowchart has been agreed and is being implemented. Themes are now analysed summarised before passing to assessment CSN are now screening calls to ensure that social care receive relevant contacts. Triage now comprises Health, Education, Early Help, DA worker and CSE MSET co-ordinator. Improved case discussion/dialogue between ICRT and Assessment team.	
		1.5 Police screen referrals to refer only those where there is a safeguarding concern in DA incidents	Northumbria Police Safeguarding MASH Manager	31/05/19		
		1.6 Partners to ensure consent is gained prior to contact	Chair of SSCB	31/01/19	Referral form is being developed and revised to ensure that partners can fully record consent. Consent is always requested prior to work commencing.	
		1.7 Move the collation of history checks and entering of data to the business support	Director of Children's Social Care	28/02/19		

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
		team by training the staff in safeguarding				
		1.8 Commission a bespoke electronic referral form linked to the new threshold document that clarifies risk identified to levels of intervention with clearly defined agency pathways for intervention.	Director of Early Help	31/05/19	Referral form is being developed and discussions are being held with LCS and ICT.	
		1.9 Partner agencies to adopt and implement the new referral form.	Chair of SSCB	30/06/19		
		1.10 Northumbria police to screen the CNF's and quality assure referrals. This will also require prior screening of domestic abuse referrals	Northumbria Police Safeguarding MASH Manager	31/05/19		
		1.11 Review and improve the process for the management and of referrals between social care and Early help.	Director of Early Help	31/03/19	New electronic Referral form in development to streamline referrals to ICRT and ensure that the correct process is adhered to. An Early Help worker is located in ICRT to provide Early Help input into triage. Multi-agency approach for screening of overnight referrals to EDT has commenced.	
		1.12 Partners to agree a new threshold document that clearly identifies agency responsibility for intervention at levels 1 – 4. Document to linked to the Council and TFC website, with clear referral pathways and signposting to services at the appropriate levels (21) (78).	Chair of SSCB Learning and Workforce Development Group	31/05/19	Sessions with partners held to develop new guidance and to review the referral form. The guidance for thresholds is due to be completed by the end of October with training commencing in November.	
		1.13 Formalise the process for planning child protection	Service Manager -	31/12/18	Processes have been strengthened so that all strategy meetings can take place within 24 hours. The Section 47	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
		enquiries including visiting children and families, full analysis of risk, interim safety planning and conformance to statutory guidance (23).	ICRT		process is being monitored and followed.	
		1.14 Strengthen processes for auditing and management oversight of decision-making and application of thresholds.	Service Manager	31/03/19		
		1.15 Assessments to fully evaluate the impact of cumulative risk and where children are exposed to multiple risk factors including the consideration of additional vulnerabilities such as disability.	Service Manager	31/03/19		
		1.16 Training plan to include the implementation of all changes associated with the review of ICRT and training recommendations following the Independent review.	Workforce Development Manager	31/05/19	Training plan to include joint training with partners.	

Success Measures & Key Performance Indicators:

Key Performance Indicators	Current
% of all contacts that have received a decision within 24 hrs	
% of all referrals that have received a decision within 24 hrs	
% of all referrals that were re-referrals within 12 months	
% of S47s are on-going and out of timescale	
% of social worker open cases with a supervision recorded within 9 weeks of the previous one	
Average social worker caseload in Assessment Teams & ICRT	
Number of unallocated cases	

Quality Measures:	Current Quality Assurance Rating
Professionals are applying threshold criteria to access appropriate help and support for children	
Risk is identified, responded to and reduced in a timely way	
Safety plans are robust and timely	
The impact of cumulative risk and where children are exposed to multiple risk factors is sufficiently understood or evaluated.	
Management decision making is clear and based on full information.	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 2: Ensure that children at risk of child sexual exploitation and those that go missing have an up to date assessment of risks that informs a comprehensive response to keep them safe". (30) <i>(Ref: Ofsted Recommendation 2)</i>	<ul style="list-style-type: none"> Children who go missing from home or care and those vulnerable to criminal or sexual exploitation are risk assessed and appropriate strategies put in place to keep them adequately protected. Leaders and Managers have appropriate grip on the front line for vulnerable children, including those who go missing and who are at risk of criminal or sexual exploitation. 	2.1 Review and improve operational response for children who go missing from home or care and for those vulnerable to criminal or sexual exploitation (30).	Director of Social Care	30/06/19	Proposal to allocate CSE/MSET worker within ICRT. Undertaking work with the police to focus on long-term missing and to address the quality of recording. EDT receive notifications of children who have gone missing during the day allowing for more timely responses and for children to receive a service from TFC outside of daytime hours. EDT will request a strategy meeting if there is a risk of going over the required timescale. EDT are undertaking strategy meetings as required.	
		2.2 Align the work of MSET to operational activities so that the package of support to children is clear at MSET meetings (30).	Chair of MSET	31/03/19	Training to re-launch the new tool and MSET process will focus on the responsibilities of practitioners for safeguarding procedures. Disruption planning will be improved through this training. Clear packages of support are to be presented to MSET so all agencies are clear about what actions need to be taken to improve the operational response for children who go missing. Police are leading a review of MSET model.	
		2.3 Review joint protocol for Missing and deliver required training.	Chair of MSET	31/03/19	Police are leading a review of MSET model and it will be part of the regional CSE/Missing review work.	
		2.4 Implement Liquid Logic workspace for Missing and CSE.	Service Manager	31/03/19	SSCB Business Unit to support with the development of the workspace.	
		2.5 Implement a regular reporting cycle from MSET to SLT which provides assurance as to whether children are receiving an appropriate and timely response to keep them safe.	MSET Co-ordinator	31/03/19	Bi monthly performance report to be produced by MSET Operational Group from November 2018.	
		2.6 Review the risk assessment tool for children at risk of CSE, criminal exploitation and those that go missing.	ICRT Manager and MSET Coordinator	31/03/19	Assessment Tool has been reviewed by MSET.	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
		2.7 Escalation process for missing, criminal exploitation and CSE to be reviewed and training to be delivered	SSCB Business Manager	31/03/19	MSET escalation process is in place and is being utilised.	
		2.8 Training for Missing, criminal exploitation, CSE awareness, Risk Assessment Tools and Out of Area Procedures to be commissioned and delivered.	SSCB Learning and Workforce Development Programme Board Officer	30/06/19	Training will commence in November 2018.	

Success Measures & Key Performance Indicators:

Key Performance Indicators	Current
% of CLA return interviews completed (of total episodes in the period)	
% of children identified at risk who have a CSE completed risk matrix assessment	

Quality Measures:	Current Quality Assurance Rating
Children who go missing and those at risk of CSE or criminal exploitation are receiving an appropriate and timely response and risk is reduced	
Records of children who go missing and those at risk of CSE or criminal exploitation are clear and up-to date	
Management on the front line have appropriate grip for those who go missing and who are at risk of criminal or sexual exploitation	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 3: Improve the timeliness of services to children and families, including the early help response, and the access to services to support victims and perpetrators of domestic abuse" (17, 18) (Ref: Ofsted Recommendation 6)	<ul style="list-style-type: none"> Early help planning has sufficient focus on the child's needs and experiences. Children and their families have access to services for victims of domestic abuse at the time when they need it most. 	3.1 Implement practice standards for Early Help and associated training (17).	Director of Early Help	31/07/18	Practice standard launched and timeliness improved following the launch.	
		3.2 Monitor the timeliness of early help response through application of practice standards.	Director of Early Help	01/09/18		
		3.3 Monitor, audit and review operational response from partners to provide the earliest help and intervention.	Chair of SSCB	31/03/19		
		3.4 Improve the quality of early help plans and record more descriptive updates that explain what is happening more clearly.	Director of Early Help	31/03/19		
		3.5 Link strategic planning and accessibility of services taking account of the high numbers of children exposed to domestic abuse in Sunderland (18).	Director of Public Health	30/09/19		
		3.6 Undertake a review of resources supporting domestic abuse work within TfC.	Service Manager - ICRT	31/03/19	Domestic Abuse worker and Early Help worker are located in ICRT and are holding caseloads. A proposal to allocate a CSE worker is also being considered. Consideration to be given on having a second DA worker in TfC to ensure that the volume of cases can be processed efficiently.	
		3.7 Identify resources for schools including a training offer and designated domestic abuse leads within each school	Chair of Safer Sunderland Partnership	31/03/19		
		3.8 Undertake process	Head of	31/12/18	A Northumbria-wide bid was submitted in September for	

		mapping of referrals of DA and routes to interventions to further identify any gaps in provision to be addressed.	Safeguarding Sunderland NHS Clinical Commissioning Group		<p>Home Office funding to support children affected by Domestic Abuse – expected date of notification of any success end Oct/Nov. Proposal builds on Operation Encompass so that there is a service, or a range of services options available for partners to refer children into for support. There are some providers in the North East who the consortium could partner up with should the bid be successful to ensure delivery can be localised and so that there is choice.</p> <p>The Domestic Abuse Strategic Project Group have commissioned Imkaan to undertake further stakeholder engagement work with survivors/victims to support the focus of our joint strategy for tackling Domestic Abuse. This work has been funded by the Safer Sunderland Partnership, the CCG and Public Health and started this month, this is due to be completed end of February 2019.</p>	
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Success Measures & Key Performance Indicators:

Key Performance Indicators	Current
% of early help plans carried by external agencies	
% of Early Help assessments that have progressed to a plan within 8 weeks	
% of children on Child Protection plans for longer than 2 years	

Quality Measures:	Current Quality Assurance Rating
Early Help practice standards are being adhered to	
Early help response is timely from partners and TfC	
Early help plans address original key presenting factor sufficiently focus on the child's needs and experiences and contain descriptive updates	
Children and their families have timely access to services for victims of domestic abuse	
All schools and academies have domestic abuse leads who have accessed appropriate training	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 4: Ensure that children's records are kept up to date and contain clear child focussed information so that children's histories and progress can be clearly evaluated to inform decisions". (79) <i>(Ref: Ofsted Recommendation 7)</i>	<ul style="list-style-type: none"> Key events are clear on children's files and not lost in detail. Children's records are of good quality, providing practitioners with a full understanding of children's experiences in order to help situations improve. 	4.1 Practice standards to include the requirement and timescales (three months) for case summaries to be included in all children's files so key events are clear and not lost in the detail.	Service Manager & Principal Social Worker	31/03/19	Case summaries to be included on children's front page in general notes so key events /updates are clear to all. All Team Managers/ATM's will be undertaking dip sampling of cases.	
		4.2 Case recording to be clear so it contributes to a clear understanding of each case.	Service Manager	31/03/19		
		4.3 Record keeping protocols to be clear and consistently followed.	Service Manager	31/03/19		
		4.4 Develop a format for chronologies in Liquid Logic that is fit for purpose	Service Manager	30/06/19		
		4.5 Chronologies to consistently identify key past events in children's lives and patterns of risk to be fully considered (24)	Service Manager	31/03/19		
		4.6 Utilise data and quality reports to challenge weaknesses at a team and individual level (79).	Director of Children's Social Care	30/06/19		

Success Measures & Key Performance Indicators:

Quality Measures:	Current Quality Assurance Rating
Case summaries are consistently included in all children's files and detail key events	
Chronologies consistently identify key past events in children's lives and are up-to-date using a standard template	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 5: Ensure that all assessments are appropriately updated, that they evaluate individual risk, need and the experience of children, and that the resultant plans are outcome-focussed, are meaningful to children and families, and are regularly reviewed". (24, 28, 64, 79) <i>(Ref: Ofsted Recommendation 8)</i>	<ul style="list-style-type: none"> Assessments have a clear purpose, adequate analysis and use evidence-based approaches. Children's identity is explored and understood. Patterns of risk are considered. Changes to children's circumstances, or escalation of concerns is recognised and responded to in a timely way. Disabled children are safeguarded and their well-being is sufficiently promoted. Action plans include relevant information, with all areas completed and clearly detail key events. Leads and timescales are clear for all actions. 	5.1 Review the assessment process including guidance, best practice examples and training needs (24).			Once transferred from ICRT, all assessments will be allocated within 24 hours following a full case discussion between the Team Manager, Assistant Team Manager (TM) and Social Worker. TM to give guidance on projected timescale for assessment to be completed and place a TM Note on LL highlighting the agreement that has taken place. TM to make decisions on who else needs to be at the allocation Meetings including the DA Worker and CFW's. Assessment Team Managers to complete checkpoint reviews if the assessment is open after 10, 25 and 40 days on each case and highlight this review on LL. Any assessments that go over 45 days must be brought to the attention of the SSM by the TM so an agreement can be reached for an extension and a note added on LL by the SSM explaining the reasons why an extension was agreed.	
		5.2 Strengthen management oversight and decision making regarding the most vulnerable children including the reviews of assessments for children with disabilities.	Service Manager - ICRT	31/03/19		
		5.3 Introduce quality assurance checks for the assessment process	Service Manager - ICRT	30/09/18	The quality of assessments is being regularly checked and quality assured by the Team Manager via regular dip sampling and audits. ATM's to guide all SW's and quality assure their work.	
		5.4 'Good Practice' files that include examples of plans and assessments to be placed within all teams	Service Manager - ICRT	30/11/18	All managers are collating good examples of pieces of work to place in the good practice files. 1 Minute Guides for Practice within ICRT and Assessment Teams are being produced.	
		5.5 Good practice workshops to be rolled out so that workers know what constitutes a good assessment and action plan	Principal Social Worker	31/03/19	Expectations of all agencies to be included in workshops, guidance and training materials. Workshops to cover how to write analytically and to cover safety planning.	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
		5.6 Principal social worker to hold meetings to share best practice and improve quality of the service	Principal Social Worker	31/03/19		
		5.7 Disabled children's needs to be reassessed to ensure that children are safe and their parents are adequately supported to meet children's additional needs (28)	Children with Disabilities Team Manager	30/11/18	At the time of inspection there were 40 children with care packages that needed to be reassessed. A monitoring spreadsheet has been developed for all children who are receiving care packages and cases have been reassessed.	
		5.8 Identify a solution in liquid logic for recording children with disabilities who are not CIN, but who are receiving a care package	Service Manager	30/06/19	A Liquid Logic solution is currently being tested.	
		5.9 IROs to effectively review and scrutinise plans to ensure they are linked to updated assessments (38).	IRO Managers	31/03/19		
		5.10 Contingency planning to be consistently considered, reflective of permanency and specific to the child's needs, rather than generic (64).	Service Managers	31/03/19		

Success Measures & Key Performance Indicators:	
Key Performance Indicators	Current
% of CIN Assessments completed and authorised in timescale (45wds)	
% of children subject to a CIN plan who received a visit within 20 working days	

Quality Measures:	Current Quality Assurance Rating
Assessments have a clear purpose, adequate analysis and use evidence-based approaches	
Changes to children's circumstances, or escalation of concerns is recognised and responded to in a timely way	
Action plans include relevant information, clearly detail key events and have allocated leads and timescales	
Disabled children's needs assessments are up-to-date	
IROs are clearly recording and reporting challenge regarding the quality of children's plans to ensure they are linked to updated assessments or the specific needs of the child	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 6: Ensure that practice for children who are subject to private fostering arrangements meets statutory requirements (32). <i>(Ref: Ofsted Recommendation 11)</i>	<ul style="list-style-type: none"> Children living in private fostering arrangements have had their needs fully assessed and have been seen alone by social workers to ensure that they are safe. Increased notifications of private fostering arrangements 	6.1 Refine policies and procedures for children subject to private fostering arrangements (32).	Service Manager	31/03/19	Procedure will include a 1 minute guide for Private Fostering. Procedures and guides will be re-launched across all teams and partner agencies and will be included in induction and ASYE training.	
		6.2 Put in place a review process to undertake annual assessments of all adults who are private foster carers (32).	Service Manager – Private Fostering	31/03/19		
		6.3 Put in place separate files; one for foster carer and one for the child	Service Manager – Private Fostering	31/03/19		
		6.4 Deliver a programme of events and communications within the city to raise awareness around private fostering arrangements and how to access support.	Service Manager – Private Fostering	31/03/19	Events to be arranged for Police, Health and Housing Provider. As schools are vital and often the first to recognise children not living with family members, targeted training around private fostering will be arranged and information will be included in the School Governor's Handbook.	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
		6.5 Strengthen management oversight of the reviews and assessments of privately fostered children.	Service Manager – Private Fostering	31/03/19		
		6.6 Explore regional arrangements and groups	Service Manager – Private Fostering	31/01/20		

Success Measures & Key Performance Indicators:

Key Performance Indicators	Current
Number of privately fostered children	

Quality Measures:	Current Quality Assurance Rating
Children living in private fostering arrangements have had their needs fully assessed and have been seen alone by social workers to ensure that they are safe	
Adults who are private foster carers are receiving annual reviews	
Increased notifications of private fostering arrangements	

2. CHILDREN LOOKED AFTER AND ACHIEVING PERMANENCE

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 7: Ensure that applications to court are timely and of good quality, and that no children are left in situations of ongoing risk due to delay. (27, 36) <i>(Ref: Ofsted Recommendation 9)</i>	<ul style="list-style-type: none"> Care proceedings are issued where and when this is needed following decision at PLO Panel Care proceeding are issued in a timely way. Reduced delays to progressing court applications Increased assertive action at pre-proceedings stage 	7.1 Restructure the Legal Team to ensure there is sufficient capacity and effective management of cases issued.	Service Manager - Business	31/03/19		
		7.2 Review gatekeeping process including timescales and the feedback processes between the Legal Team and Social Care Teams.	Service Manager – CP	31/03/19		
		7.3 Implement a revised management approach to tracking cases via the legal gateway process through to completion (27) (36).	Service Manager – CP	31/03/19		
		7.4 Implement a revised management approach for ensuring social work assessments and plans for court are timely and of good quality.	Service Manager – CP	31/03/19		
		7.5 Review allocations process for cases within legal team.	Service Manager - Business	31/12/18		
		7.6 Develop legal workspace within Liquid Logic to assist with effective case management and oversight of care proceedings.	Service Manager	30/09/19		

Success Measures & Key Performance Indicators:	
Key Performance Indicators	Current
% of cases issued within 5 working days of PLO decision to proceed.	
% of Emergency Protection Order requests actioned within 1 working day.	
% of children in PLO that have been reviewed within last 12 weeks	
Quality Measures:	Current Quality Assurance Rating
Children have court proceedings issued where and when this is needed and applications are timely and of good quality	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 8: Ensure that children who present as homeless fully understand their rights to become looked after under Section 20 of the Children Act 1989, and the benefit this brings. (35) <i>(Ref: Ofsted Recommendation 10)</i>	<ul style="list-style-type: none"> Children aged 16 and 17 who present as homeless are routinely informed of their right to be accommodated or helped and to understand how they could benefit from this. Children who choose to be accommodated receive support as a child looked after, irrespective of their family circumstances. 	8.1 Develop a leaflet for children aged 16 and 17 who present as homeless to inform them of their right to be accommodated or helped.	Service Manager - CLA	31/10/18	Draft leaflet has been sent out for consultation. Once returned the leaflet will be communicated.	
		8.2 For those children informed of their rights, formally record their decisions on a form and save a copy on their case record.	Service Manager - CLA	30/11/18		
		8.3 Deliver youth homelessness action plan developed in conjunction with the Homelessness Advice and Support Team (HAST) (part of Ministry of Housing, Communities and Local Government).	Head of Commissioning in Sunderland Council	31/03/19		

Success Measures & Key Performance Indicators:

Quality Measures:

Current Quality Assurance Rating

Children who present as homeless are routinely informed of their rights and decisions are recorded on their case file

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 9: When children come into care or need an alternative home, ensure that they are provided with a placement that meets their needs and offers stability through more proactive matching. (42, 38) <i>(Ref: Ofsted Recommendation 12)</i>	<ul style="list-style-type: none"> • Increase in the numbers of children moving into appropriate permanence arrangements within placements. • Increased placement choice and early proactive matching • Reduced numbers of moves that children experience in the first 12 months of coming into care • Increased placement choice for children or young people with complex needs. • Assessments sufficiently identify children's needs to inform matching at the earliest opportunity • Permanence Panel is working at the highest level, ratifying matching at earliest stage to ensure decisions are made based on children's initial needs 	9.1 Increase placement choice to reduce the number of moves that children experience in the first 12 months of coming into care (42).	Director of Children's Social Care	31/03/19	The Sufficiency Strategy and Fostering Plan set out actions to increase placement choice.	
		9.2 Launch together and apart assessments and deliver associated training to effectively identify and assess brothers and sisters individual needs.	Service Manager - CLA	31/03/19		
		9.3 Undertake a review of the Permanence Panel to ensure clear processes and procedures are in place around family finding/matching and children's long term care. (42)	Director of Children's Social Care	31/08/19		
		9.4 Refresh the foster carer recruitment strategy to increase the number of in-house foster carers.	Service Manager - CLA	31/08/19		
		9.5 Training to be delivered to staff on permanence planning so that children's goals are more focussed to target interventions and ensure good outcomes in the child's timeframe (38).	Workforce Development Manager	31/08/19	Training to be delivered on permanence arrangements, timescales and how to progress plans.	
		9.6 Re-launch permanence planning strategy	Service Manager - CLA	31/08/19	Weekly accommodation panel has been re-introduced and is chaired by the Director of Children's Social Care.	
		9.7 Permanence plans to be in place by the 2 nd review and	Service Manager &	31/12/18		

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
		IRO challenge to be evident where this has not been achieved.	IRO Manager			
		9.8 Strengthen processes for recording and utilising children's views to influence care planning (38).	Service Managers	31/03/19		
		9.9 Strengthen processes to obtain child's views for those coming to MSET, external placement panel and conference (38).	Service Managers	31/03/19		
		9.10 TfC to develop a process and policy for the monitoring of children who are in unregulated placements.	Service Manager	31/12/18		

Success Measures & Key Performance Indicators:

Key Performance Indicators	Current
% of CLA who have had 3 or more placements in last 12 months	
Number of CLA that have experienced unplanned placement moves	
% of children that have a plan of permanence in place at 2 nd review	

Quality Measures:	Current Quality Assurance Rating
Assessments sufficiently identify children's needs to inform matching at the earliest opportunity	
Together and apart assessments sufficiently identify and assess brothers and sisters individual needs	
Permanence plans are focussed on targeted interventions	
IROs are providing challenge at 2 nd review if a plan of permanence is not in place	
Children's views are captured, recorded and used to influence care planning	
The safety of children who are in unregulated placements has been independently reviewed.	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 10: Ensure the timely completion of life story work for all children looked after so that they can understand their life history. (39) <i>(Ref: Ofsted Recommendation 13)</i>	<ul style="list-style-type: none"> • Direct work that social workers undertake with children is reflected in case recording • All children are assisted to understand their family histories through life-story work 	10.1 Develop process and procedures for direct work to be undertaken as soon as a child becomes looked after and reflect in case recording within liquid logic to inform ongoing life story work (39).	Service Manager - CLA	31/08/19	A process is being implemented for Team Managers to allocate Child & Family Workers to commence life story work at Allocation Meetings. Documents to be attached to child's file within liquid logic with corresponding case notes.	
		10.2 Develop a policy and procedure for life story work with clear expectations for every child that becomes looked after.	Service Manager - CLA	31/08/19		
		10.3 Plan and coordinate life story and direct work training.	Service Manager - CLA	31/08/19	Training already delivered by Adoption Team and workshops by the IRO service. Adoption team is revisiting each team to undertake workshops for life story work and to share the resource box.	

Success Measures & Key Performance Indicators:

Quality Measures:	Current Quality Assurance Rating
Direct work that social workers undertake with children adheres with policy and procedure, is timely and is reflected in case recording	
Life story work adheres to policy and procedure and children are assisted to understand their families histories	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 11: Improve timely access to appropriate mental health services for children looked after and care leavers and develop a clear transition pathway for those care leavers who do not have an EHCP. (46, 68) <i>(Ref: Ofsted Recommendation 14)</i>	<ul style="list-style-type: none"> Mental health services are accessible and timely Children looked after and care leavers have a clear transition pathway Agreed process in place for children transitioning to adult services. 	11.1 Put in place clear transition pathways for those care leavers that do not have an EHCP.	Service Manager - CLA	31/03/19		
		11.2 Increase the provision and timeliness of mental health services for children and young people	Director of Children's Social Care	31/03/19		

Success Measures & Key Performance Indicators:

Quality Measures:	Current Quality Assurance Rating
Children looked after and care leavers with complex emotional health needs are receiving timely access to appropriate mental health services	
All care leavers with complex emotional health needs and SEN have an EHCP	

Recommendation	Expected Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 12: Improve access to vocational, training and employment opportunities for care leavers and particularly for those who have been NEET for long periods. (68) <i>(Ref: Ofsted Recommendation 15)</i>	<ul style="list-style-type: none"> Care leavers aged 18-21 to access training or employment opportunities. Increase the numbers of apprenticeships for young people Strategically drive opportunities in training and employment for care leavers 	12.1 Identify creative ways of driving opportunities in training and employment for care leavers, in particular 19-21 year olds (68).	Director of Education	31/03/19	There are currently fewer opportunities for 19-21 year olds as there is no virtual school for this age group. Visits are being arranged to look at good practice – first visit to be arranged with North Yorkshire to see how they have improved services.	
		12.2 Increase the number of apprenticeships for care leavers (68).	CEO of Sunderland Council	31/03/19	Discussions are taking place with NTW regarding apprenticeship opportunities and to identify how the Virtual School and Apprenticeship Board will increase numbers.	
		12.3 Review membership and increase engagement with ELEET Team who will target employment and education for the 19-21 group.	Service Manager - CLA	31/12/18		

Success Measures & Key Performance Indicators:

Key Performance Indicators	Current
% of care leavers who are in Employment, Education or Training (19-21)	
% of care leavers who are in Employment, Education or Training (17-21)	

Quality Measures:	Current Quality Assurance Rating
Care leavers have better access to vocational, training and employment opportunities	
The ELEET Team are effective at targeting employment and education for care leavers aged 19-21.	

5. LEADERSHIP MANAGEMENT AND GOVERNANCE

Recommendation	Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 13: Ensure that governance and scrutiny arrangements are rigorous and challenging and that there is an accurate understanding of the quality of practice, to enable the council to hold TfC to account and to ensure that progress is made, that children are protected, and that their experiences improve (81). <i>(Ref: Ofsted Recommendation 3)</i>	<ul style="list-style-type: none"> The quality assurance framework supports managers to sufficiently improve the quality of social work practice to deliver positive outcomes for children Revised scheme of governance agreed between the Council and TfC Board that puts in place revised performance reporting, and accountability arrangements to create improved assurance around quality and outcomes. 	13.1 Review and agree performance and quality indicators with the Council to monitor compliance, performance targets and the quality of social care practice (81).	CEO of Sunderland Council	31/03/19		
		13.2 Short life task and finish group to consider existing scrutiny and reporting arrangements, the integration of the quality assurance framework and to devise a revised model to be agreed by the Council, TfC Board and the DfE.	CEO of TfC & Head of Contractual Relationships in Sunderland Council	31/01/19	Draft terms of reference for the review in development, to be signed off by mid-November.	
		13.3 Strengthen the quality assurance framework and effectively incorporate IRO challenge, findings and recommendations to support improved practice.	Service Manager – QA	31/03/19		
		13.4 Fully embed the quality assurance framework within TfC to support managers to improve the quality of social work practice.	Service Manager – QA	30/06/19		

Success Measures & Key Performance Indicators:

Quality Measures:	Current Quality Assurance Rating
Recommendations arising from quality assurance work are addressed and practice is improving as a result	

Recommendation	Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 14: Improve the training and development offer for social workers and managers to ensure that all staff have the right skills and knowledge for their role". (90) (Ref: Ofsted Recommendation 4)	<ul style="list-style-type: none"> There is a comprehensive training and development offer for all children's service staff Children's services staff have the skills and knowledge required to fulfil their role TfC workforce receive training in the risks around CSE A bespoke learning and development programme is in place for the social care workforce that focuses on working with children and families around identity and diversity. 	14.1 Implement the training and development offer, including training and awareness briefings for team and senior management (88).	Workforce Development Manager & SSCB Workforce Lead	31/03/20	Training needs analysis undertaken and outcomes being presented to SLT on 25/09/18. Priorities identified include: Domestic Violence, Court Skills and Management and Leadership, & PAMS.	
		14.2 TfC workforce including team and senior management to receive training in the risks around CSE (88).	Workforce Development Manager & SSCB Workforce Lead	31/03/19	Included in priorities.	
		14.3 Principal Social Worker and workforce development colleagues to develop a programme of training on equality, diversity and identity - Community Care Live to be invited to improve their current offer to address the learning needs.	Principal Social Worker	31/01/19	General enquiries regarding potential courses underway.	
		14.4 Identify and implement a model of social care practice.	Director of Children's Social Care	31/12/19	Meetings held with Centre for Systemic Social Work Practice, Strengthening Practice and Signs of Safety. Signs of Safety is used widespread across the region.	

Success Measures & Key Performance Indicators:

Quality Measures:	Current Quality Assurance Rating
Social workers are accessing training required to undertake their role	

Recommendation	Outcomes	Actions	Lead	Timescale	Progress Update	RAG
Priority 15: Ensure that managers provide reflective and direct supervision for all workers, with additional challenge from IRO's and conference chairs, to improve the quality of practice and planning for all children". (38, 79) <i>(Ref: Ofsted Recommendation 5)</i>	<ul style="list-style-type: none"> • Front line managers and IROs adequately scrutinise and challenge the quality of social work practice, children's assessments and plans (38, 79). • Improved quality of supervisions (79). 	15.1 Supervision training to be rolled out to all managers to focus on reflective supervision practices (79)	Workforce Development Manager	30/06/19	Training to standardise the recording of reflective supervision discussions. Consider further training/workshops with social workers and managers in devising action plans.	
		15.2 Develop a programme for Service Managers to review team managers supervision files aligned to the Quality Assurance Framework and Plan.	Service Managers & Quality and Performance Manager	31/03/19	Service managers to audit/review team manager supervision files	
		15.3 Managers to ensure that any challenges raised by IROs are discussed in supervision and resolutions are sought and responded to (38, 79)	Director of Children's Social Care	31/03/19		
		15.4 Front line managers to utilise performance and quality reports to effectively scrutinise and challenge the quality of social work practice, children's assessments and plans (79).	Director of Children's Social Care	31/12/18		

Success Measures & Key Performance Indicators:	
Key Performance Indicators	Current
% of social worker open cases that have had a supervision discussion recorded within 9 weeks of the previous one	
Average social worker caseload	
Total number of working days lost to sickness (Social Worker)	
Total number of working days lost to sickness (Social Care Team Managers)	
% of IRO case escalations responded to within timescale.	
Quality Measures:	Current Quality Assurance Rating
Supervision is reflective and addresses the quality of practice, assessments and planning	
DRPs/IRO concerns are discussed/addressed in social worker supervisions	
IROs are challenging the quality of social work practice, children's assessments and plans	
Feedback from children and young people and their families is being responded to	