

# **DRAFT** London Borough of Bromley

## **Children's Service Improvement Action Plan June 2016 – October 2017**

### **1. Introduction**

This improvement action plan has been developed in response to the formal recommendations and improvement areas highlighted by Ofsted during their Bromley *'Inspection of services for children in need of help and protection, children looked after and care leavers, and review of the effectiveness of the Local Safeguarding Children Board'* which took place from 11 April 2016 to 5 May 2016. This action plan sets out the improvement journey we need to make to transform our social care services for children, young people and their families from inadequate, to good quality.

We aspire to deliver good and outstanding services that keep children and young people safe and give them the right help, at the right time in their lives. We are fully committed to this plan, and in working closely with our multi-agency partners. We are determined to deliver good quality, consistent services that achieve positive outcomes for children and young people in Bromley. In doing this, we will show strong leadership, we will challenge performance, and we will build a culture of continuous reflection and improvement. Members of the Children's Services Improvement Board have signed up to the actions within the plan and are committed to delivering, monitoring and reporting through the appropriate organisational governance structures. During this financial year work will be undertaken to review the current children and young people's partnership framework with the development of a broader multi-agency plan to sustain improvement and delivery of children's services in Bromley.

### **2. Improvement priorities**

This plan is designed around ten key improvement priorities that support delivery of our aspirations to provide good services –

- Priority One - Leadership and governance
- Priority Two - Management oversight and quality assurance
- Priority Three - Bromley Safeguarding Children Board – a partnership response
- Priority Four - Safeguarding – better help and protection
- Priority Five - Supporting children looked after
- Priority Six - Supporting care leavers
- Priority Seven - Adoption services
- Priority Eight - Tackling child sexual exploitation, children missing and gangs
- Priority Nine - Strategic commissioning
- Priority Ten - Legal services

### **3. Measuring our success**

Delivery of this plan will be overseen by the Children's Service Improvement Governance (CSIG) Board, chaired by the Lead Member for Children's Services. Each priority will be overseen by a senior manager who is responsible for attending the Board meetings to report back on progress, risks and issues. Each action has a designated lead officer who is responsible for delivery. They are required to engage with other staff and partner agencies to ensure the action is undertaken effectively and in a joined up way. They will be required to provide regular updates to senior managers and the Service Improvement Team (SIT) formally, on a monthly basis. The SIT will coordinate a monthly highlight report to update progress against each action, including RAG status. The monthly highlight report, including any risks or issues, will be reported to the Children's Service Improvement Governance Board.

A set of performance indicators have been developed to measure the impact of this plan (see Appendix one). Alongside this, a full thematic audit will take place at regular intervals, to test out all practice elements of this action plan to ensure they have been implemented and embedded.

**Key to abbreviations used in action plan “lead” column**

<b>Abbrev.</b>	<b>Full Title</b>
<b>CEX</b>	Chief Executive
<b>DCS</b>	Director Children's Services
<b>DPH</b>	Director of Public Health
<b>DCOs</b>	Director of Corporate Services
<b>JSNA</b>	Joint Strategic Needs Assessment (Steering Group)
<b>Corp Comms</b>	Corporate Communications Officer
<b>HOS QI</b>	Head of Service Quality Improvement
<b>P&amp;I Officer</b>	Performance & Information Officer
<b>PM</b>	Project Manager
<b>BSCB</b>	Bromley Safeguarding Children's Board
<b>HOS S&amp;CP</b>	Head of Service Safeguarding & Care Planning
<b>GM IRO</b>	Group Manager Independent Reviewing Officers
<b>GM CP Chairs</b>	Group Manager Child Protection Chairs
<b>DHR</b>	Director of Human Resources
<b>DED</b>	Director of Education
<b>CSC</b>	Children's Social Care
<b>HOS EI&amp;FS</b>	Head of Service Early Intervention and Family Support
<b>CAF Manager</b>	Common Assessment Framework Manager
<b>HOS C&amp;R</b>	Head of Service Care and Resources
<b>L&amp;D</b>	Learning & Development
<b>AD Housing</b>	Assistant Director Housing
<b>AD SBSS</b>	Assistant Director Strategic Business Support
<b>DCom</b>	Director of Commissioning
<b>PP&amp;S</b>	Public Protection & Safety Partnership
<b>HO LS</b>	Head of Legal Services
<b>LBB</b>	London Borough of Bromley

## Priority One: Leadership and Governance

Supporting vulnerable children and young people and keeping them safe must be our top priority in Bromley. Through stronger leadership and an ambitious shared vision, we can make the change that is needed. Strong collaboration and partnership working needs to be encouraged and promoted at all levels of the organization, and modelled from the top.

### **Ofsted Recommendations:**

**Recommendation 1** - *Ensure that the director of children's services has the authority and capacity to respond to deficits in children's and young people's services, and to drive forward change and improvement.*

**Recommendation 2** - *Review and improve all quality assurance arrangements to ensure that senior managers and elected members understand performance, in order that they may robustly improve the quality of social work practice.*

### **Identified issues we need to address:**

- The interim arrangements for the Director of Children's Services role are not effective and must be resolved as a matter of urgency. Leadership resilience is needed to drive forward the extensive improvements required.
- There is a lack of shared vision, strategic plans, strategies and needs analysis across the council and partnership for achieving good children's services.
- Partnership and leadership collaboration across the Council and wider children's partnership is underdeveloped with a culture of distrust and silo working.
- Performance management information lacks analysis and critical information, and it is not used to challenge practice.
- Quality assurance systems have not provided an accurate assessment of the quality of casework, leading to a general lack of understanding of the strengths and weaknesses in practice.
- Resources have not been adequate to deliver a quality service consistently across the department.
- The role of the Principal Social Worker is underdeveloped.

### **Expected impact and outcomes of this plan:**

- Children's social care services are prioritised by the whole council and key partners, and there is a shared vision that is embedded into borough, corporate and strategic plans
- Children's services are led by an experienced Director of Children's Services who sets a clear vision that is understood by staff at all levels and promotes a culture of continuous improvements
- Quality assurance and performance management processes are rigorous, robust and analytical
- Critical challenge is provided by senior leaders and elected members, based on accurate analytical performance reports
- Strategic service planning and commissioning is evidence based and reflects the priorities of children in Bromley
- The life chances of children are good in Bromley and children report a good experience of the services provided.

**Lead officer:** Director of Children's Services (DCS)



Priority One: Leadership and Governance					
ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
1.1	Senior leadership capacity at Director of Children's Services (DCS) level needs to be resolved as a matter of urgency to provide leadership resilience for the extensive improvements required to improve the life chances and choices for children in Bromley. <b>Para 99 Rec 1 &amp; 2</b>	1.1.1 Review and refine the DCS role, job description, person specification and structure in line with statutory requirements, ensuring the role carries senior authority in the Council. (completed) 1.1.2 Undertake a rigorous recruitment process and appoint an experienced, permanent DCS. 1.1.3 Develop an in-depth induction programme for the new DCS. 1.1.4 Re-establish the meetings between the DCS, Chair of the BSCB and LBB Chief Executive. 1.1.5 Undertake an independent assurance test of the DCS role.	Sep 16    April 17	CEX	N/A
1.2	Capacity within Bromley children's services needs to be increased to achieve the level of service improvement needed. <b>Para 99 Rec 1 &amp; 2</b>	1.2.1 Undertake a review of capacity within the children's social work service with recommendations to include: <ul style="list-style-type: none"> <li>- Increasing senior management capacity</li> <li>- Recruiting an additional interim Head of Service to give capacity to the Safeguarding Service</li> <li>- Recruiting an additional interim senior manager to take on both the Quality Assurance function and Principal Social Work role; with a direct reporting line to the DCS (completed)</li> <li>- Restructuring front-line social work service, in particular front door, referral &amp; assessment and court team (completed)</li> <li>- Increasing capacity within frontline services to reduce caseloads</li> <li>- Recruit an improvement, programmes and projects lead to work directly to the DCS</li> </ul>	Jun – Sep 16	DCS	N/A
1.3	Senior management understanding of the strengths and weaknesses of front-line services needs to be a priority. <b>Para 97 Rec 1 &amp; 2</b>	1.3.1 Develop a line of sight framework for the DCS, lead member and Chief Executive to include a regular programme (with dates and times) for the following: <ul style="list-style-type: none"> <li>- Receiving key reports including performance data reports (including complaints), quality assurance reports and staff survey results.</li> <li>- undertaking case audits (linking to BSCB multi-agency audits)</li> <li>- visiting frontline social work teams</li> <li>- observing front-line practice</li> <li>- visiting children with social workers</li> <li>- attending the children in care council forum</li> <li>- attending key staff forums including management forums</li> <li>- hearing the voice of children receiving services.</li> </ul> 1.3.2 Undertake an independent assurance test of the 'line of sight framework'	Dec 16    Apr 17	DCS   CEX	N/A   IND DCS
1.4	A shared vision and ambition must be developed and a strategic plan owned by all to drive forward the vision and improvements with clear, specific, ambitious targets and outcomes, rigorously performance managed, to achieve good and outstanding outcomes. <b>Para 98 Rec 1 &amp; 2</b>	1.4.1 Develop a cross-cutting multi-agency Children and Young People's plan (CYPP) that sets out a clear vision, values, priorities and strategy for the partnership. The plan is to set out ambitious targets that prioritises children, and demonstrates how their needs will be met and promoted by the borough. The CYPP is to include an early help response, the 'every child matters' framework themes, and a joint approach to commissioning services strategically. 1.4.2 Develop a clearly defined multi-agency performance data set for regular reporting and communicate this to partners. 1.4.3 Develop a clear information-sharing protocol with partners to encourage collaboration and joint working. 1.4.4 Develop a detailed communication plan for the CYPP and shared vision, values and objectives, which include dates for delivery, and a partnership event to launch the CYPP. 1.4.5 Review and revise all relevant strategic council-wide and partnership plans to ensure these make reference to the Bromley CYPP and are fully aligned, to include the Bromley council strategic plan and Health and Wellbeing Strategy	By Sep 17	DCS	Task & Finish Group LBB Health Police Probation
1.5	Partnership-working is to be improved with better strategic and leadership	1.5.1 Undertake a full review of the governance arrangements around partnership work in Bromley Children's Service to support the delivery of the children and young people's strategic plan (CYPP) and improved outcomes for children. The final review	By Apr 17	DCS	Task & Finish Group

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
	collaboration and governance arrangements needed across the Council, and wider children's partnership. <b>Para 98, 105, 108, 109 Rec 1 &amp; 2</b>	<p>report to include the following:</p> <ul style="list-style-type: none"> <li>- clarity and recommendations around each group's role and responsibilities</li> <li>- structure of each group and relationship with each other</li> <li>- terms of reference</li> <li>- cross cutting responsibilities.</li> </ul> <p>The following boards and strategic bodies are to be included in the review:</p> <ul style="list-style-type: none"> <li>- Children's Board (Lead Members)</li> <li>- Health and Wellbeing Board</li> <li>- Corporate Parenting Board</li> <li>- Safer Bromley Community Partnership</li> <li>- Local Safeguarding Children Board</li> <li>- Adult Safeguarding Board</li> <li>- Youth Offending Service (YOS) Board</li> <li>- Clinical Commissioning Group (CCG).</li> </ul> <p>1.5.2 Set up joint-chairs cross-cutting strategic group with the chair person from each of the above boards (1.5.1), with clear terms of reference drafted with reporting arrangements, membership, objectives and draft forward plan.</p> <p>1.5.3 Develop a data set to support the functions of the Children's Partnership and outline a clear programme for reporting.</p>	<p>By Apr 17</p> <p>By Sep 17</p>		LBB Health Police Probation
1.6	The impact of the scrutiny function is to be improved through better analysis and understanding of the underlying complexities of children's services, including the risks. <b>Para 98 &amp; 104 Rec 1 &amp; 2</b>	<p>1.6.1 Undertake a review of the Bromley Council Scrutiny committees and Executive group to include recommendations and a revised terms of reference, with full consideration of the following:</p> <ul style="list-style-type: none"> <li>- role and responsibilities of each committee</li> <li>- objectives</li> <li>- governance and line of sight</li> <li>- chairing, decision-making</li> <li>- data set and analysis that is required</li> <li>- reporting mechanisms, quality assurance, complaints monitoring</li> <li>- forward plan of reports that should be prioritised and timescales</li> <li>- how the voice of service users will be included meaningfully?</li> <li>- issues and risks</li> <li>- impact of financial decisions on children.</li> </ul> <p>1.6.2 Review the committee report template for all children's reports to committees and the executive, to ensure an impact assessment is included, by the DCS, on all reports where a financial decision will impact on children and/or services provided to children.</p> <p>1.6.3 Develop a forward-plan programme of refresher training for elected members on early intervention, safeguarding, their role as corporate parents, and their role in effective collaboration and service improvement.</p> <p>1.6.4 Deliver the first refresher training session for elected members.</p> <p>1.6.5 Develop a system for monitoring member attendance at training and ensure 100% attendance of members on committee to complete the training.</p>	<p>By May 17</p> <p>By May 17</p> <p>By Oct 16</p> <p>Oct 16</p> <p>Oct 16</p>	DCOs	LBB DCS
1.7	Engagement sessions for senior leaders and managers across the partnership to encourage a culture of joint working and collaboration across agencies. <b>Para 98, 100 &amp; 101 Rec 1 &amp; 2</b>	<p>1.7.1 Devise a development programme for all senior leaders and managers that sets out the culture, values and ambition of children's services and how to model this to staff; building a culture of high expectations, high support and challenge.</p> <p>1.7.2 Undertake an annual staff survey and respond to findings with an action plan to address concerns of staff. Commencing January 2017.</p> <p>1.7.3 Write a 'what has changed' communication to be disseminated to all staff within 6 months of the staff survey.</p> <p>1.7.4 Set up a social work advisory group, chaired by senior managers, to obtain the voice of front-line staff and social worker</p>	<p>Apr 17</p> <p>Annually</p> <p>Jun 17</p> <p>Oct 17</p>	DCS	LBB Dir Human Resources

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
		input on key service improvement projects.			
1.8	The understanding of prevalence is limited due to significant gaps in the Joint Strategic Needs Assessment (JSNA) for some groups of vulnerable children in Bromley which impacts on local priority decisions and commissioning. <b>Para 107 Rec 1 &amp; 2</b>	1.8.1 The JSNA to be updated to address the gaps for vulnerable groups including children's safeguarding, children known to early help services, social care as a result of parental domestic abuse, mental health and substance misuse, child sexual exploitation and missing from home/care.	Oct 17	DPH	JSNA Steering Group
1.9	Communications across the Council and partnership need to be improved to ensure that staff see and hear from leaders and managers at all levels of the organisation particularly with respect to the vision, improvement plan, and the changes leaders want to see made for children. <b>Para 97-100 Rec 1 &amp; 2</b>	1.9.1 Devise a detailed two-year communications plan and identify a lead to oversee and deliver on this, to include: <ul style="list-style-type: none"> <li>- Regular staff bulletins with key updates from senior management, Principal Social Worker and service improvement messages;</li> <li>- Regular team meetings</li> <li>- Road shows</li> <li>- Staff Forums</li> <li>- Annual staff survey</li> <li>- User Engagement mechanisms including the LiNCC (as part of the CYP engagement strategy and framework)</li> </ul> 1.9.2 Team meeting policy to be devised and implemented by all front-line teams setting out minimum expectations for team meeting practice standards.	By Oct 16	DCS	LBB Corp Comms
1.10	The overall pace of change for children in care and care leavers to be improve. <b>Para 104 Rec 1 &amp; 2</b>	1.10.1 Review and revise Corporate Parenting Board forward plan prioritising reports that address the inadequacies identified within the Ofsted inspection findings report. 1.10.2 Review and revise the Corporate Parenting Strategy and agree the ambitions and priorities for the next two years. 1.10.3 Launch the Corporate Parenting Strategy with partners.	By Oct 16  By Apr 17 Jun 17	DCS	Education Health

## Priority Two: Management oversight and quality assurance

All managers need to have a good line of sight over practice to ensure there is robust and timely child-centred case work planning. Critical enquiry and quality assurance is needed at all levels of practice, from front-line staff, to managers, to independent reviewing officers, multi-agency partners and senior managers. All plans must be SMART, with rigorous oversight and follow up to drive forward the continuous cycle of service improvement and good quality practice, leading to better outcomes for children and families.

### **Ofsted Recommendations:**

**Recommendation 2** - Review and improve all quality assurance arrangements to ensure that senior managers and elected members understand performance, in order that they may robustly improve the quality of social work practice.

**Recommendation 3** - Improve management oversight of frontline practice to ensure that decision making, assessment and planning for children and young people is both timely and focused to meet their needs. This is to include the work and involvement of conference chairs and independent reviewing officers.

**Recommendation 4** – Review workforce capacity in order to reduce social work caseloads in the referral and assessment, and safeguarding teams to enable staff to carry out good quality direct work with children.

**Recommendation 8** - Review the cases under the public law outline and in care proceedings to ensure that robust plans are in place and that cases are progressing at a pace that matches children's needs.

### **Identified issues to be addressed:**

- Management oversight is weak and does not provide authoritative and timely intervention, which leads to drift and delay on cases.
- Children in need cases and children and young people subject to s20 arrangements are not monitored centrally by senior managers.
- Casework supervision does not consistently set targets and timescales. Line managers need to review previous actions agreed in supervision sessions in order to maintain oversight of progress, and to review and challenge sufficiently.
- Challenge from Independent Reviewing Officers (IRO) and Child Protection (CP) Chairs is not robust enough, and escalations have not been used effectively to challenge poor practice and concerns on cases.
- The quality assurance framework is weak and does not drive rigorous performance management or improve the standards of social work practice and casework.
- The service has experienced difficulties in recruiting to vacancies in key posts and in frontline teams. As a result of this, current caseloads are too high for social workers to undertake good quality work.
- Performance management processes are not used sufficiently to drive improvement and there is lack of critical enquiry at senior management level.

### **Expected impact and outcomes of this plan:**

- Consistently good quality practice which is child centred, timely and evidence based
- Social workers are supported by their managers and receive reflective supervision that is frequent, outcome focussed, with clear actions and timescales, and where previous actions are reviewed regularly.
- IRO and CP chairs challenge poor practice without hesitation
- Performance monitoring and scrutiny is undertaken at all management levels and is used to drive improvements.
- Practice standards are clear to all staff and drive minimum standards of practice. Poor practice and competency issues are challenged robustly.
- The quality assurance framework is holistic, with a clear programme of audits will be used to inform managers of performance issues and themes for children in Bromley and performance will be improved.
- All cases have clear plans that prevent drift and delay. Social workers have manageable caseloads and time for good quality direct work with children.

**Lead officer:** Director of Children's Services (DCS)

Priority Two: Management oversight and quality assurance					
ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
2.1	Quality assurance arrangements need to be reviewed and improved so that senior managers and elected members understand current performance in order that they can robustly improve the quality of social work practice. <b>Para 101 Rec 3.</b>	<p>2.1.1 Undertake a full review of the Quality Assurance framework and publish a revised version that sets out the following:</p> <ul style="list-style-type: none"> <li>- An overarching strategy.</li> <li>- A statement of how audit findings will be used to drive practice improvements.</li> <li>- Detailed SMART audit forward plan with key dates and designated officers to lead these.</li> <li>- Audit toolkit with revised audit tool.</li> <li>- Forward plan of audit finding reports with deadlines and plan to be produced.</li> <li>- Governance arrangements – how audit findings will be communicated to managers, senior managers and elected members and the frequency of this.</li> <li>- A set of performance indicators for measuring the number of audits undertaken, success of audits and percentage judged as good, requires improvement and inadequate.</li> <li>- Multi-agency audit plan and timetable.</li> <li>- Programme of thematic audits to be included – casework, supervision, thresholds, neglect, child sexual exploitation, violence against women and girls, domestic and abuse, drug and substance misuse, parental mental ill health.</li> <li>- Devise framework for practice improvement weeks involving all layers of management. To be carried out on six monthly basis. Starting between Jan – Mar 17.</li> </ul> <p>2.1.2 Review the current Bromley audit tool and implement a more outcome focussed tool</p> <p>2.1.3 Include an objective in each front-line team manager's and HOS's appraisal to ensure full compliance with the new audit schedule.</p> <p>2.1.4 Devise a programme of multi-agency audit staff training events to share practice issues identified in both single agency and multi-agency audits.</p> <p>2.1.5 Audit of "selected" cases post the inspection ( CIN, CP and step up and down cases) in advance of monitoring visit in November 2016</p>	<p>Oct -Dec 16</p> <p>Jan – Mar 17</p> <p>Sep 16</p> <p>Oct 16</p>	<p>HOS QI</p> <p>BSCB Auditor QI Audit Manager</p>	<p>BSCB Chair &amp; Members</p>
2.2	Additional capacity is needed within the service to lead and implement the new quality assurance framework. <b>Para 99 &amp; 101 Rec 3.</b>	<p>2.2.1 Scope a specification for externally commissioned quality assurance audits including objectives, role and responsibilities, work plan and cost, and obtain funding approval.</p> <p>2.2.2 Undertake the procurement process and have a quality assurance service in place</p>	Sept. -Dec 16	DCS	
2.3	<p>The reporting of performance information needs to be improved in order to ensure that all key players are engaged and all relevant information is included. <b>Para 101 Rec 3.</b></p> <p>Current IT system is out of date and not easy to use</p>	<p>2.3.1 Review and revise the Bromley Performance Digest framework and write a short report setting out the changes to be made including how CIN children and caseloads will be included, frequency of reporting, how the digest is to be shared and used by individuals, teams, managers and senior managers/elected members, and the level of analysis expected.</p> <p>2.3.2 Publish the updated monthly Performance Digest with all CIN children and monthly trend data for numbers of children and caseloads.</p> <p>2.3.3 Devise a forward plan of performance trend analysis reports to be undertaken using performance data.</p> <p>2.3.4 Develop a system to aggregate and/or cross reference information from return home interviews with those children at risk of, or being, sexually exploited or involved in gang activity.</p> <p>2.3.5 Continue to implement the Eclipse platform upgrade (full project documentation available).</p> <ul style="list-style-type: none"> <li>- Eclipse forms developed making recording of actions which need follow-up and tracking clearer.</li> <li>- Recruit a GM in CSC to lead the implementation phase of the Eclipse upgrade.</li> </ul>	<p>Jan – Mar 17</p> <p>Sep – Mar 17</p>	DCS	<p>LBB</p> <p>All HOS</p> <p>P&amp;I Officer</p> <p>Eclipse PM</p>



ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
2.4	Review the cases under the public law outline and in care proceedings to ensure that robust plans are in place and that cases are progressing at a pace that matches children's needs. <b>Rec 8.</b> Case tracking of early intervention, children in need and child protection cases is needed to ensure that step up and step down happens in a timely way, based on a re-evaluation of risk. <b>Para 109 Rec 3.</b>	<p>2.4.1 Undertake a review of all cases under PLO and care proceedings to check robust SMART plans are in place and that they are progressing/no drift and put together action plan for any action needed.(completed)</p> <p>2.4.2 Write an overview of new case tracking framework and a forward plan/timetable for review of cases.</p> <p>2.4.3 Draw up a flowchart of case tracking reporting.</p> <p>2.4.4 Review a sample of children in need (CIN) cases by the Quality Improvement team.</p> <p>2.4.5 Review a sample of child protection cases and plans by the Quality Improvement team.</p> <p>2.4.6 Set up weekly case tracking meetings to be chaired by the Head of Service (HOS) Safeguarding, to be attended by all team managers of Early Intervention, Referral and Assessment, Safeguarding &amp; Care Planning and Court teams.</p> <p>2.4.7 Monthly case tracking (cases under PLO and care proceedings) summary reports to be reported to the Senior Management Team and DCS.</p>	<p>Jun 16</p> <p>Jan –Mar 17</p> <p>End Oct 16</p> <p>Sep 16</p> <p>Oct 16</p>	HOS S&CP	LBB HOS EI&FS
2.5	Improve the escalation processes so that these are routinely utilised by Independent Reviewing Officers (IROs) and Child Protection (CP) Conference Chairs to alert managers to the impact of deficits in practice. <b>Para 101 Rec 3.</b>	<p>2.5.1 Review the CSC escalation policy for IROs and CP Chairs that sets out all of the following:</p> <ul style="list-style-type: none"> <li>- Threshold for escalation.</li> <li>- Process for escalation and how this will be managed.</li> <li>- Reporting and follow up processes and requirements for individual cases.</li> <li>- Monthly escalation summary and analysis report and analysis by the IRO/CP Chair services to SMT.</li> <li>- Monthly escalation summary and analysis report and analysis by the IRO/CP Chair services to the Bromley Safeguarding Children Board (BSCB).</li> <li>- Collated themes of escalation to be included in key annual reports (BSCB and list any others), line of sight reports and annual service improvement plans.</li> <li>- Escalation summary report to the Corporate Parenting Board bi-annually starting Dec 16</li> <li>- Themes are to be fed back to staff through SMT/HOS quarterly from Oct 16</li> </ul>	Sep 16	DCS	LBB GM IRO GM CP Chairs
2.6	The quality and frequency of formal case and professional supervision needs to be improved, and previous actions need to be reviewed in every supervision session to measure progress made. <b>Para 100 &amp; 102 Rec 3&amp;4.</b>	<p>2.6.1 Revise the supervision policy for staff setting out a minimum frequency for formal case supervision and draft agenda template expected to be covered in each session.</p> <p>2.6.2 Revise the case supervision template to include clear tasks, timescales and follow up action sections and pre-populated actions for LAC and CP cases. Links to 4.4.5</p> <p>2.6.3 Management briefing to be held with all frontline managers on the new supervision policy and template.</p> <p>2.6.4 New supervision template to be embedded within practice by all front-line managers by and assessed by an assurance test.</p> <p>2.6.5 Quality Improvement team to undertake a programme of audits of supervision to assess frequency and quality, with all supervisor's cases to be sampled, with a full report to SMT.</p> <p>2.6.6 Procure a programme of mandatory training for all managers and supervisors on reflective task-centred supervision and management oversight. The training is to include an overview of the revised supervision policy, performance management framework, quality assurance policy and management oversight expectations to ensure managers know what is expected of them. (completed)</p>	<p>Jan –Mar 17</p> <p>Sep – Nov 16</p>	HOS QI	N/A
2.7	Management oversight of frontline practice to be improved to ensure decision making, assessment and planning for CYP is both timely and focused to meet their needs. <b>Para 102 Rec 3.</b>	<p>2.7.1 Write an overview of management oversight expectations outlining how actions are to be tracked by managers between supervision sessions to avoid drift and challenge any poor performance. The document is to be included within the revised supervision policy.</p> <p>2.7.2 Assurance test of management oversight to be undertaken via case audits and review of cases by Quality Improvement team in (insert month).</p>	Oct 16	HOS QI	N/A

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
2.8	Practice standards to be revised to ensure consistency of care and minimum standards across all services. <b>Para 100 Rec 2&amp; 3</b>	<p>2.8.1 Review and update the practice standards document to reflect “what does good look like” prioritising within the document:</p> <ul style="list-style-type: none"> <li>- Assessment</li> <li>- care plans</li> <li>- risk assessment</li> <li>- home visits</li> <li>- CSE and Missing</li> <li>- neglect</li> <li>- VAWG</li> <li>- parental mental ill health, drug and substance misuse</li> </ul> <p>2.8.2 Launch new practice standards with and distribute to all social workers and supervisors across the department.</p> <p>2.8.3 Social work staff to attend mandatory practice standards workshops to revisit ‘what a good assessment/care plan looks like’.</p>	Oct 16        Oct 16 Nov 16	HOS QI	N/A
2.9	Minimum practice standards expected of staff at all levels needs to be clearly defined, with policies and procedures up to date. <b>Para 100 Rec 3&amp; 4.</b>	<p>2.9.1 Review status of all policies and procedures in the online Children's Social Care Procedure Manual.</p> <p>2.9.2 Provide a summary report to SMT outlining what policies and procedures need updating and anticipated timescale to review and update documents.</p> <p>2.9.3 Review and update identified policies and procedures:</p> <p>2.9.4 Write up a programme of training events to communicate new policies and any changes to practice.</p>	Nov 16 Dec 16  Sep 17	HOS QI	N/A
2.10	Social work caseloads in the referral and assessment, and safeguarding teams are too high and do not create an environment where social workers can do their job properly. <b>Para 100 Rec 4</b>	<p>2.10.1 Develop a Caseload Management Policy (including a financial business case) to be agreed by Senior Management and Members in order to ensure that social workers and Early Intervention caseworkers' caseloads are manageable. Caseloads are reduced</p> <ul style="list-style-type: none"> <li>- Safeguarding no more than 15 children (CP/CIN plans)</li> <li>- R&amp;A no more than 20 children. (Assessments)</li> <li>- Court team no more than 10 children.</li> <li>- For EIFS no more than 20 families</li> <li>- For CLA no more than 12 children</li> <li>- For care leavers no more than 15 children</li> <li>- For IROs (in line with IRO protocol –no more than 60 children)</li> </ul> <p>2.10.2 Recruit an additional social work team to specialise in court work. Advanced practitioners to be appointed to undertake court work for children looked after to permanence and to promote adoption at an early stage</p> <ul style="list-style-type: none"> <li>- Appointment of Group Manager, Deputy Manager and Six Advanced Practitioners to the Court Team.</li> </ul>	Oct –Dec 16        Oct 16	DCS	N/A
2.11	The workforce strategy is comprehensive and ambitious. Although it needs to focus on the development of its middle and senior managers. <b>Para 110</b>	<p>2.11.1 Review and update LBB Recruitment and Retention Strategy (workforce strategy) to set out how middle and senior managers are developed and supported. To include</p> <ul style="list-style-type: none"> <li>- support and retention of existing members of staff.</li> <li>- Update recruitment webpages</li> <li>- Refresh branding and key messages</li> </ul> <p>2.11.2 Introduce virtual web tools</p>	Dec – Mar 17	DHR	N/A

Priority Two - Management Oversight and Quality Assurance - performance measures (see appendix 1 page 46 for performance indicators)

No.	Indicator	Type of Indicator	Source	Bromley 2015/16	Target 16/17	Target 17/18
<b>DCS, CSC AD and HoS GM's DGM's to undertake X case file audits per month</b>						
2a	Number of case file audits completed - of these	Quality	Audits	New	TBC	TBC
	% audits where overall judgement is good/ outstanding	Quality	Audits			
	% of cases audited where good management oversight is evident	Quality	Audits			
	% and number of cases audited have evidence of effective direct work with children and young people good standard.	Quality	Audits			
	% of all audit actions that have not been completed by the deadline	Quality	Audits			
2b	Number of supervision records sampled	Quality	Sample	New	TBC	TBC
	% of supervision records sampled that are not up to standard	Quality	Sample			
2c	% and number of CIN cases reviewed after 9 months	Quality	Audits	New	TBC	TBC
	% and number CIN cases recommended for step up, step-down or case closure following 9 month review	Quality	Audits			
<b>Thematic audits (3 per quarter)</b>						
2d	Number of audits completed	Quality	Audits	New	TBC	TBC
2e	By Dec 2016 % audits where overall judgement is Good/ outstanding	Quality	Audits			
<b>External QA of case file audits</b>						
2f	External independent case file audits (5 – 10 per month) to validate %age of cases that are good/ outstanding	Quality	Audits	30	60 -120	TBC
<b>CP Chairs/IRO Monitoring forms (XX due each month)</b>						
2g	Number of CP Chairs/IRO Monitoring audits completed	Quality	Audits	New	TBC	TBC
2h	By Dec 2016 % audits where overall judgement is good/ outstanding	Quality	Audits			
<b>Caseloads</b>						
2i	<b>Maximum caseload per team (FTE workers)</b>			Children	Children	Children
	Referral and Assessment	Capacity	MI Report	New	20	TBC
	Safeguarding and Care Planning Combined (East & West)	Capacity	MI Report	New	15	TBC
	Court Team	Capacity	MI Report	New	10	TBC
2j	<b>Caseload range per team (FTE workers)</b>					
	Referral and Assessment	Capacity	MI Report			
	Safeguarding and Care Planning Combined (East & West)	Capacity	MI Report			
	Court Team	Capacity	MI Report			

## Priority Three: Bromley Safeguarding Children Board - A partnership response

The Bromley Safeguarding Children Board is committed to keeping vulnerable children in Bromley safe through a strong partnership approach, with all agencies in Bromley working together, to share information and co-ordinate activities. Where agencies are not able to do this, the BSCB will act in the interest of the Bromley Child to ensure non-compliance or poor performance is challenged and escalated to the highest levels, until safe outcomes are assured. Bromley children and young people will feel listened to and their views valued as agencies work together to improve the lives of local children. The children's workforce will benefit from the experiences of children and young people and services will improve.

### **Ofsted Recommendations:**

**Recommendation 19** - *The LSCB should establish a performance dataset that ensures that it can measure progress against its key priorities.*

**Recommendation 20** - *The LSCB should ensure that there is critical enquiry and challenge in relation to the core safeguarding activity undertaken by all agencies.*

**Recommendation 21** - *The LSCB should actively seek the views and opinions of children and young people, and engage them in a systematic manner in order to ensure that it is aware of and benefits from their experiences.*

**Recommendation 22** - *The LSCB should ensure that multi-agency arrangements for the oversight of children missing and at risk of sexual exploitation are underpinned by effective information sharing, performance monitoring and action planning, and are strategically coordinated and monitored by the board.*

**Recommendation 23** - *The LSCB should ensure that the arrangements for children privately fostered comply with statutory guidance, and that they are safe and that their health and well-being are properly promoted.*

### **Identified issues to be addressed:**

- The Bromley Safeguarding Children Board needs to develop a more critical overview of practice and performance to understand fully the quality of practice in safeguarding services, and the experiences of children and young people in Bromley.
- The performance dataset is too large and therefore lacks focus. It misses some key measures particularly around total number of missing children, timeliness of Return to Home interviews, and prevalence of domestic violence.
- There is a lack of monitoring of the implementation of the Signs of Safety model in LBB Children's Social Care.
- The dataset does not adequately match the Business Plan priorities. There is not enough challenge and escalation to resolve issues in a timely way, particularly challenge of practice.
- The BSCB should be more influential in scrutinising safeguarding activity.
- The BSCB should better monitor multi-agency arrangements for most vulnerable groups. There is no systematic way of engaging with young people.

### **Expected impact and outcomes of this plan:**

- The BSCB rigorously scrutinises relevant performance management information and robustly challenges agencies to ensure children and young people are safe and achieve the best outcomes.
- Multi-agency audits of cases closed and open are undertaken to ensure consistent practice standards are being maintained and that thresholds are being applied appropriately. Managers and teams in all agencies learn from audits to improve practice.
- Multi-agency arrangements for the most vulnerable children and young people, those at risk of sexual exploitation and those who go missing, will be underpinned by effective planning, performance monitoring and effective information sharing, and closely monitored by the BSCB
- The views of children and young people are captured routinely and used to inform service development across agencies in Bromley. Children and young people feel confident and comfortable in providing their views and feel that their input makes a positive difference.

**Lead officer:** Independent Chair, Bromley Safeguarding Children Board

Priority Three: Bromley Safeguarding Children's Board - A partnership response					
ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
3.1	The LSCB should establish a performance dataset that ensures that it can measure progress against its key priorities. <b>Para &amp; Rec 114</b>	3.1.1 Review the Annual BSCB Business plan to meet statutory requirements 3.1.2 Create a revised multi-agency performance information data set, with greater focus on the Board's Business plan priorities and including all key factors. - Board Performance Report to reflect the reality of services provided and identifies where services are and are not meeting standards. 3.1.3 Timetable regular Performance Report to Board.	Apr 17  Nov 16	Business Manager/ BSCB Chair and Members	BSCB Members
3.2	The LSCB should ensure that there is critical enquiry and challenge in relation to the core safeguarding activity undertaken by all agencies. <b>Para &amp; Rec 115</b>	3.2.1 Work and minutes of the Board will evidence where agencies have challenged data and performance to deliver key actions. - Terms of reference - Clarity in a document around roles and responsibilities of the Board, and cross cutting responsibilities. - Development of a data set to support. 3.2.2 Set up a "Partnership Board" across the education landscape to focus on the vulnerable groups that could be missed: - look to close the gap on attainment and outcomes; - examine permanent exclusions; - analyse attendance data from schools - develop/ oversee broader exclusion agenda 3.2.3 Multi-agency staff can evidence they escalate and challenge other agencies where there is disagreement about a child's safety and welfare and are confident to seek a resolution. 3.2.4 New bi-annual multi-agency staff survey to be introduced from April 2017 to test that staff are confident in escalating and challenging.	Dec16  Oct 16  Apr 17	BSCB Members  DED	BSCB Members
3.3	The LSCB should actively seek the views and opinions of children and young people, and engage them in a systematic manner in order to ensure that it is aware of and benefits from their experiences. <b>Para &amp; Rec 116</b>	3.3.1 Develop an action plan/ strategy to ensure that children and young people's views are utilised and to include: - Developing a Safeguarding Children's forum to champion and challenge the work of the Board. - Review capacity to audit work being completed. - Assess and give the Board reassurance. - Ensure children and young people's views are used to inform service improvement.	Jan 17	Business Manager	BSCB Members
3.4	The LSCB should ensure that multi-agency arrangements for the oversight of children missing and at risk of sexual exploitation are underpinned by effective information sharing, performance monitoring and action planning, and are strategically coordinated and monitored by the board. <b>Para &amp; Rec 117</b>	3.4.1 BSCB receives and monitors quarterly reports on a range of issues to monitor and scrutinise work streams. To include: - CSE - Missing from home, care or education - Gangs - Domestic Violence - PREVENT - FGM - Neglect 3.4.2 BSCB QAPM Group to undertake a programme of themed audits on each issue to include neglect and CSE in this year's audit programme. 3.4.3 MASE to hold a list of children and a dataset and to report trends and patterns to the Vulnerable Children's Sub Group. 3.4.4 Terms of reference and governance of CSE/Missing strategic and operational boards to be published in the CSE protocol. 3.4.5 Information from the Vulnerable Children's Sub Group to help inform the strategy and business plan for BSCB.	Dec 16	Chair BSCB Chair Vulnerable Children' Sub Group	Multi-Agency Working Group

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
		3.4.6 BSCB Business Managers to contribute to CSE/Missing/Gangs working group, chaired by Deputy Borough Commander. 3.4.7 Vulnerable Children Sub Group to provide challenge to slow moving actions. 3.4.8 Host a multi-agency CSE day for front line staff to publicise CSE/Missing functions and protocol.	Oct 16		
3.5	The LSCB should ensure that the arrangements for children privately fostered comply with statutory guidance, and that they are safe and that their health and well-being are properly promoted. <b>Para &amp; Rec 118</b>	3.5.1 Private Fostering Annual report to be presented to BSCB in order to assess effectiveness of Foster Services to meet the needs of children privately fostered. <ul style="list-style-type: none"> <li>- information on the numbers of children being privately fostered presented to and scrutinised by Board;</li> <li>- the identities of children and young people are known to the relevant agencies and agencies are able to report their health, education and care needs are being met.</li> <li>- Report includes percentage of foster carers and adults in household with DBS.</li> </ul> 3.5.2 BSCB to work with CSC to promote Private Fostering Awareness campaign.	Sep 16	Business Manager	CSC and Health Agencies
3.6	The LSCB has a comprehensive multi-agency training programme. <b>Para 124</b>	3.6.1 Research appropriate neglect tools available to the service including the NSPCC Graded Care Profile. Other options to be considered by Learning and Development with a paper to be presented at SMT. 3.6.2 Staff to receive training on assessing neglect. <ul style="list-style-type: none"> <li>- All social workers will use the Graded Care Profile tool to improve the quality of assessments</li> <li>- All social workers will receive refresher training on programmes available to families (caring for your child)</li> </ul> 3.6.3 All parents of children on a plan where neglect is a feature are to be referred onto Caring for your Child programme. Uptake to be monitored and reported to SMT. 3.6.4 Develop a specialist multi-agency programme of training and development events focused on CSE/Missing and Gangs. 3.6.5 Arrange a multi-agency training session for managers to discuss strategy meeting standards and expectations. 3.6.6 Health providers safeguarding training needs identified and programme of events arranged to deliver include a practice oversight group led by Bromley CCG	Sep 16  Apr 17  Sep 16  Apr 17  Dec 16	BSCB Business Manager HOS QI	BSCB Partners  Workforce Development

### Priority Three: Bromley Safeguarding Children's Board - A partnership response

A full data set is being revised see action 3.1.2

No.	Indicator	Type of Indicator	Source	Bromley 2015/16	Target 16/17	Target 17/18
3a	X% of staff in each partner agency states that they are confident or very confident to escalate and challenge (MA staff survey)	Satisfaction	Survey	N/A	TBC	TBC

## Priority Four: Safeguarding – better help and protection

Children and young people must experience timely and effective multi-agency help and protection through risk-based assessment, authoritative practice, planning and review that secures change. Thresholds will be appropriate, understood and operate effectively. Records of action and decision will be clear and up to date. Children and young people will be listened to and heard. Risk will be well understood, managed and regularly reviewed.

### Ofsted Recommendations:

**Recommendation 5** – Ensure that thresholds are understood and consistently applied in response to risk, so that appropriate actions are taken when risks or concerns escalate or diminish

**Recommendation 6** - Ensure child protection, child in need, children looked after and pathway plans are informed by assessment, focused on the needs of individual children and young people, and specific about the outcome to be achieved and the timescale for change. Contingencies should be explicit.

### Identified issues to be addressed:

- Thresholds are not consistently applied and/or understood.
- Analysis of risk is weak (risk tools are underutilised) which means that cases are often closed or stepped down too early and timely actions are not taken when risks or concerns escalate or diminish. Chronologies are not being used as an effective assessment and analysis tool – they are not succinct and clear.
- Strategy discussions do not comply with statutory guidance – they are happening too late, not often enough and without full involvement of the range of multi-agency partners.
- Children's wishes and feelings are not properly explored and there is inconsistency of direct work to support children to express their views.
- There is insufficient contingency planning and parents are not sufficiently clear about what they need to do and the consequences of not working with the local authority.
- Children remain on child protection plans for too long without robust action being taken. IROs and CP Chairs do not sufficiently challenge and scrutinise to ensure that plans are working. Numbers escalated in year are low.
- Practice standards and expectations have not been explicitly set and communicated to frontline social workers.
- Management oversight is weak and does not provide authoritative and timely intervention leading to drift and delay in taking action needed. Supervision does not set targets and timescales effectively, and previous actions are not reviewed or challenged sufficiently.
- Children's social care does not have a robust audit schedule in place to monitor regularly and identify practice issues.
- The front line teams have experienced difficulties recruiting to vacancies in key posts. Social worker caseloads are too high (25 for help and protection) and this is impacting in the quality of work with children.

### Expected impact and outcomes of this plan:

- Good quality chronologies, assessments and analysis lead to appropriate child in need, early help and child protection plans, which are SMART and clearly linked to assessed risk and need.
- Decisions to step up or step down are appropriate, accord with thresholds and are based on a thorough understanding of the child and families' needs.
- Strategy meetings will be held when the local authority needs to assess whenever a child is at risk of significant harm and will involve all the right partners.
- Social workers spend time with children, undertaking direct work to understand their experiences, views, wishes and feelings.
- Children and their parents will understand the plan and will contribute to planning.
- Contingency plans will be on all children's care plans, and they will be clear and specific about what the alternative plan is for the child if things don't go to plan.
- Supervision will be reflective and task focussed, setting out clear actions and timescales, and reviewing progress against actions.
- Where cases are not progressing then they will be stepped up authoritatively at the right time.
- IROs & CP Chairs will use the escalation procedure to raise alerts and challenge practice where children's plans are not progressing appropriately.
- Senior managers will review and scrutinise all cases that are not progressing effectively to challenge practice and ensure the right plan is put in place promptly.
- Homeless 16 and 17 year olds will be placed in safe and appropriate housing accommodation.
- Children in private fostering arrangements are safe and monitored appropriately.

**Lead officer:** Head of Service Safeguarding and Care Planning



## Priority Four – Safeguarding - better help and protection

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
4.1	<b>Thresholds (CIN and CP):</b> The application of thresholds, and the identification and management of risk are inadequate <b>Para 19 Rec 5</b>	<p>4.1.1 Devise a communication plan to re-launch thresholds document with all key multi-agency partners and front-line staff, to include thresholds training for multi-agency partners, and implement immediately.</p> <p>4.1.2 Mandatory training on risk identification and analysis to be provided to all front line social workers and managers within six months.</p> <p>4.1.3 Draft a protocol on how Children in Need plans will be independently chaired by Independent Reviewing Officers (IROs) to achieve consistent application of thresholds on these cases, and implement immediately.</p> <p>4.1.4 Draft a protocol on how Early Intervention Family Support cases will be audited and reviewed by managers and implement immediately. The protocol to include:</p> <ul style="list-style-type: none"> <li>- EIFS assessments and goals will be reviewed at each supervision and during case management discussions</li> <li>- All Senior Family Support Parenting Practitioner will complete at least one deep dive audit per Family Support Parenting Practitioner per month</li> <li>- Each FSPP &amp; SFSP to complete at least four case practice discussion audits with EIFS SMT monthly.</li> <li>- Undertake a full review and audit on all Early Intervention Family Support (EIFS) cases to ensure risk assessments and thresholds have been accurately completed and there is no drift.</li> </ul>	<p>By end Sep16 then quarterly prog By end Nov 16</p> <p>By Dec 16</p> <p>By Dec 16</p>	All HOS	Health Police Schools BSCB
4.2	<b>Strategy Discussions and planning (CIN and CP)</b> Strategy discussions are not being held soon enough when concerns are first identified, and are not compliant with statutory guidance.  Numbers of strategy discussions, section 47 enquiries and initial child protection conferences remain lower than comparators. <b>Para 21 &amp; 23</b>	<p>4.2.1 Mandatory training on child protection procedures for all front line staff and managers within six months</p> <p>4.2.2 Review and launch procedures on how strategy discussions will be handled, to include:</p> <ul style="list-style-type: none"> <li>- RAS to clearly identify cases requiring strategy discussions at the point of transfer and to undertake daily monitoring to be maintained by the HOS safeguarding.</li> <li>- Head of Service weekly meeting with Group Manager to review all strategy discussions and outcomes in Referral and Assessment to monitor the timeliness of strategy discussions, quality of decisions and to review partner attendance.</li> </ul> <p>4.2.3 Operational issues relating to strategy discussions and meetings (partner involvement) will be escalated through management reporting lines initially (as appropriate), through the MASH steering group and themes to the BSCB.</p>	Aug – Feb17	HOS S&CP	N/A
4.3	<b>Assessments (CIN and CP)</b> Some assessments are too descriptive and lack sufficient analysis. Tools to consider neglect and assess risks are underutilised. Chronologies do not provide a succinct and clear history to inform assessments. Research is rarely used to inform analysis in assessments. The individual needs of children and young people are routinely considered together in a single assessment. <b>Para 24</b> Practice is not consistently robust, in too many cases, assessments are not of a good enough quality, leading to significant drift in progressing work. <b>Para 100 Rec 7</b>	<p>4.3.1 Mandatory training to be delivered to all front line staff and managers in on assessment, research in practice, risk analysis and use of assessment tools in practice.</p> <p>4.3.2 Devise an implementation plan for the roll out of Signs of Safety to key partner agencies including health colleagues, schools, police and the youth offending service, to embed this into multi-agency practice.</p> <p>4.3.3 Child Protection chairs to deliver training on the Signs of Safety model of case conferencing.</p> <p>4.3.4 Draft policy guidance to be shared with all front line social workers and managers on chronologies, setting out the minimum practice standards required.</p> <p>4.3.5 All case files chronologies to be reviewed by line managers and discussed with social workers within supervision over the next 3 months.</p> <p>4.3.6 Social workers to set time aside each week to update the child's chronology. Training and Development to commission training on chronologies and organise a bi-monthly workshop as part of the contract.</p> <p>4.3.7 Review and revise the current assessment document.</p> <p>4.3.8 Publicise the "Making Research Count" subscription which enables social workers to look at online research.</p>	<p>By end Sep16 then quarterly prog</p> <p>By Dec 16 By Oct 16</p> <p>By Nov 16</p> <p>From Aug 16</p> <p>By Nov 16 Oct 16</p>	DCS and Chair of BSCB	LBB Health Police YOS

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
4.4	<b>Risk Management (CIN &amp; CP)</b> The majority of CP and CIN plans are not specific enough and in too many cases risks does not inform the subsequent plan <b>Para 27 Rec 6</b>	4.4.1 Agree standards of SMART plans for Child in Need and Child Protection cases. 4.4.2 Line Managers to review all open CIN and CP cases and ensure the plans are SMART and of good quality, and work with social workers to improve these (e.g. take off old actions that have been completed, make sure the actions are specific and address the risks, and make sure there are clear timescales for existing actions). The review to also include identifying the contingency plan for each case and clearly recording this. 4.4.3 The revised practice standards document to include a requirement for all CP and CIN plans to have a contingency plan and that the plan is easily understandable to the families. 4.4.4 Develop a user-friendly risk analysis template for front-line staff. 4.4.5 Supervision policy to be updated to include a requirement that the QI GM audits 3 CP plans as part of every monthly supervision with CP chairs; to be implemented with immediate effect. Links to 2.6	End of Sep16	HOS QI	N/A
4.5	<b>Risk Management (CIN &amp; CP)</b> Child protection cases are stepped down too soon to child in need <b>Para 20 Rec 5</b>	4.5.1 A full audit of all Child in Need cases to be undertaken by deputy managers and GMs to re-evaluate the risks and urgently escalate any cases that meet the threshold to child protection.(completed) 4.5.2 Review protocol on management oversight of EIFS, CIN and CP cases to include: <ul style="list-style-type: none"> <li>- Managers to review all decisions to step up, step down or close cases</li> <li>- GMs to audit any cases recommended for step-down or closure</li> <li>- All decisions to take children off a plan are quality assured by QI team</li> <li>- All CIN cases to be reviewed in a weekly tracking meeting.</li> <li>- Review of all CIN cases after 9 months to see if need to step up.</li> </ul> 4.5.3 Set up a weekly CIN tracking meeting, chaired by HoS SG & CP.	By Jun 16  Dec 16	HOS S&CP	N/A
4.6	<b>Direct work (CIN &amp; CP)</b> Some social workers with 25 or more cases report that they do not have sufficient time to undertake positive direct work with children and families, or to reflect with managers on the progress of their work. <b>Para 31Rec 14</b>	4.6.1 Practice standards to be updated to reflect the requirement that assessments are only signed off by managers when there is evidence that a child's views are included and that the assessment demonstrates the lived experience of the child i.e. what life is like in the family. Links to 2.8 4.6.2 Supervisors oversee and discuss this work in supervision and see evidence of the work undertaken and outcomes. 4.6.3 The Principle Social Worker leads on embedding direct work in practice to a good standard and this is reflected in case work assessments and planning across Children's Social Care. 4.6.4 QI undertake regular training slots for social workers on planning purposeful direct work with children. 4.6.5 Frontline social workers to receive training on direct work and communicating with children to include practical direct work tools (e.g Communi Crate; Signs of Safety, three houses). 4.6.6 Front-line managers to discuss with their social work teams in team meetings and in supervision, the option to use the Children and Family Centres to undertake direct work with children in a neutral environment, where there are additional resources available, with a view to increasing this practice. 4.6.7 QI audit programme to include a regular thematic audit of direct work on case files. Links to 2.1 4.6.8 CP Chairs monitor Child friendly Child protection plans at CP reviews.	Dec 16  Mar 17	HOS QI	LBB HOS S&CP

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
4.7	<b><u>Contacts Arrangements (CIN &amp; CP)</u></b> Contact records are not sufficiently analytical and do not inform case planning well. The local authority has already identified the weaknesses in this service and is undertaking a review. Contact between children and their family members is not sufficiently risk assessed or managed. Contact records are not sufficiently analytical and do not inform case planning well. <b>Para 62</b>	4.7.1 Complete the review of the Family Contact Centre service with clear recommendations for next steps. 4.7.2 Implement early recommendations for the review which includes: <ul style="list-style-type: none"> <li>- Audit programme of contact cases</li> <li>- Observation of practice</li> <li>- Reflective supervision</li> <li>- Simplify the outcome-focused referral forms</li> <li>- Use EIFS style supervision paperwork by April 2016</li> <li>- Monthly Team meetings to incorporate 'reflective practice' session by August 2016</li> <li>- A policy that 100% of poor practice identified leads to active performance management action within four weeks if practice does not improve</li> </ul>	Oct 16	HQS EI&FS CAF Manager	

Priority Four - Safeguarding - better help and protection - performance measures (see appendix 1 page 46 for performance indicators)

No.	Indicator	Type of Indicator	Source	Bromley 2015/16	Target 16/17	Target 17/18
4a	% attendance of CSC staff at planned Risk Assessment training sessions	L&D	MI Report	New	TBC	TBC
4b	% attendance of CSC staff at planned strategy meeting training sessions	L&D	MI Report	New	TBC	TBC
4c	% attendance of partner agency staff at planned strategy meeting training sessions	L&D	MI Report	New	TBC	TBC
4d	% attendance of CSC staff at planned Thresholds training sessions	L&D	MI Report	New	TBC	TBC
4e	% attendance of partner agency staff at planned Thresholds training sessions	L&D	MI Report	New	TBC	TBC
4f	% and number of CSC casework audits that demonstrate effective application of thresholds	Quality	Audits	New	100%	100%
4g	% and number of CSC casework audits that demonstrate effective application of SoS	Quality	Audits	New	100%	100%
4h	% and number of CSC casework audits that demonstrate child's needs have been assessed and met.	Quality	Audits	New	100%	100%
4i	% and number strategy discussions include partner agency involvement	Quality	Audits	New	100%	100%
4j	% and number of strategy discussions that lead to s47	Quality	MI Report	New	TBC	TBC
4k	Minutes of initial child protection conference evidence multi agency discussion and decision making	Quality	Sample	New	TBC	TBC
4l	Number of children currently subject to a Child Protection Plan	Quality	MI Report	220	N/A	N/A
4m	% of ICPCs held within 15 days of Section 47 investigation	DfE	MI Report	67%	88.7%	88.7%
4n	% of CP Reviews held within timescale	Quality	MI Report	97.00%	100%	100%
4o	Minutes of review child protection conference evidence multi agency discussion and decision making	Quality	Sample	New	TBC	TBC
4p	Number and % of children becoming subject to a Child Protection Plan for a second or subsequent time	Quality	MI Report	33 (13%)	17%	17%
	<b>See Audit measures in Priority 2</b>					

## Priority Five – Supporting children looked after

High-quality assessments must be used to decide whether children and young people will become looked after. We will make sure care plans are regularly reviewed to ensure children and young people's current and developing needs continue to be met. Permanent homes and families will be found for children and young people without unnecessary delay, and adoption will be considered for all children, where appropriate. Children and young people (CYP) will be listened to by social workers who will know them well, and when support is needed, they will be able to access it for as long as it is needed, throughout their childhood and beyond, no matter where they are living.

### **Ofsted recommendations:**

**Recommendation 6** - Ensure child protection, child in need, children looked after and pathway plans are informed by assessment, focused on the needs of individual children and young people, and specific about the outcome to be achieved and the timescale for change. Contingencies should be explicit.

**Recommendation 10** - Ensure priority is given to considering achieving permanency, including adoption, at the earliest possible point for children, and that there are effective systems to track and monitor the progress of this work.

**Recommendation 12** - Ensure that robust assessments are undertaken when considering alternative permanency options for children with connected persons.

**Recommendation 13** - Ensure that children and young people who are placed out of the borough are sufficiently supported by their social worker and have access to services to meet their needs where they are living.

### **Identified issues to be addressed:**

- Management oversight of practice is a serious area of weakness at all levels. There is no senior manager with a single line of sight or overall responsibility for children looked after. There is little evidence of appropriate challenge by group managers and managers do not regularly scrutinise children's plan or the impact of social work.
- The processes for safely returning children home are inadequate, with senior managers not consistently authorising assessments and decisions prior to children returning home.
- Permanency arrangements are underdeveloped and there is a lack of urgency in finding permanent homes for children, and delays in long term matching.
- Placement planning and matching is poor, is not always timely and lacks clear information, actions and delegated authority. There are delays in long term matches going to panel and quality of reports is variable, lacking analysis.
- There is a lack of local placements to meet the diverse needs of our looked after children and young people, including care leavers.
- Placement plans lack important information, are sometimes late, are not updated, and lack explanation of delegated authority. They do not contain the information that carers require to understand the arrangements for children's care.
- Contact arrangements between parents and children are not sufficiently risk assessed or managed.
- The virtual school lacks the capacity to support young people aged 16+, including the cohort of young people dropping out of school in year 12.
- Where children are placed in residential homes out of borough, checks are not routinely done to ensure educational and health provision and to understand any local risks of sexual exploitation, before making the placement.

### **Expected impact and outcomes of this plan:**

- Children will be taken into care at the right time, and when the legal grounds are met.
- Children receive swift and effective support to help them find permanent families that meet their needs well. All children who cannot return home permanently will be considered for adoption.
- CYP will be carefully matched to a placement that best meets their holistic needs with consultation with the IRO, Virtual School Head teacher, and designated CLA nurse where appropriate.
- Placement choice will be extended to ensure that, wherever possible, we are able to meet the needs of our looked after children and young people locally. Children placed outside the local authority will not be placed until the arrangements around education and health and any other risk factors in the locality have been considered.
- Children will have contact with parents and family members after carefully assessed risk, and where it is safe and suitable for them. Contact arrangements, their purpose, value and frequency will be clearly considered and recorded in the Care Plan.
- The Virtual School Head teacher will support children looked after and care leavers up to 25.
- CYP people will be listened to, practice is focused on their needs and experiences and influenced by their wishes and feelings or, where they cannot represent their view themselves, those advocated on their behalf. Good quality life story work will be completed with all children in long-term care.

**Lead officer:** Head of Service, Care and Resources

**Priority Five – Supporting children looked after**

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16–Oct 17	Lead	Agency Involvement
5.1	<b><u>Quality assurance and standards (CLA)</u></b> There is no senior manager with a single line of sight or overall responsibility for the progress of all children looked after. <b>Para 54 Rec 2</b>	5.1.1 Review current Head of Service work streams to identify one senior manager with strategic oversight for corporate parenting and CLA. 5.1.2 Update CLA strategy ensuring the needs of CLA and care leavers up to the age of 25 are included. 5.1.3 A regular six-monthly CLA strategy report to be presented to the Corporate Parenting Panel and scheduled to begin in July 2017. 5.1.4 Strategic HOS for corporate parenting establishes CLA practice standards and circulate to all managers. Including: - Risk assessments associated with offending, substance misuse etc - Strategies for young people being protected and keeping themselves safe.	Apr - Jun 17  Jul 17	HOS C&R	Task and finish group LBB Health Schools/ Education Virtual School
5.2	<b><u>Permanency (CLA)</u></b> Not all children who become looked after have clear and timely pathways to permanence. <b>Para 52 Rec 10</b>	5.2.1 Redraft the permanency policy outlining practice standards, practice considerations and timeframes, and guidance for the completion of child permanency reports and matching reports. 5.2.2 Set up a new Early Permanency Panel (EPP) to help implement the permanency protocol by reviewing and tracking all permanency decisions. 5.2.3 Draft terms of reference for the Early Permanency Panel to include frequency, objectives, membership and outcomes. The permanency policy and terms of reference to include: - all CLA cases will be considered by the Early Permanency Panel after 6 weeks in the service and will have a permanency plan on file, with actions tracked - ensure adoption is fully considered as a parallel plan or main plan for children where appropriate, at the earliest time possible. - All children to have individual permanency planning meetings by the second LAC Review - All Children who are made subject to S.20 and where they are not rehabilitated safely home within six weeks will be presented to the early permanence panel for scrutiny. Where appropriate cases will be referred for legal planning meeting to establish whether the threshold for care proceedings are met. - When the early permanence panel has identified further work could be undertaken to return the child home monitored by the panel bi-monthly. - For all cases whereby a child or young person has been looked after for a period of three months under a Section 20 arrangement the IRO will be required to formally review the Care Plan to prevent drift. - The fostering and adoption panels to quality assure permanency reports and provide feedback to front-line staff via the panel advisors. 5.2.4 The HoS C&R to 'dip sample' 1 report from each Early Permanency Panel for compliance, quality and timeliness with the policy 5.2.5 Independent review of the Early Permanency Panel after 3 months to assess quality and impact. 5.2.6 Present the permanency policy as part of the permanency conference. 5.2.7 Develop a (quarterly) permanency tracker report, overseen by the QI team, to ensure all children have timely permanent care plans. 5.2.8 Set up monthly management meeting with GM QI and Head of Services to review QI permanency tracking and intervene quickly for any child who is not progressing 5.2.9 Permanency tracker to be sent to SMT and DMT and Improvement Board quarterly to provide reassurance, oversight and scrutiny from Oct 16.	By Dec 16  Aug 16          Oct 16  By Dec 16  Oct 16	DCS HOS QI       DCS HOS QI	N/A
5.3	<b><u>Reducing Drift (CLA)</u></b> The majority of placement plans seen do not contain the information that carers require to understand the arrangements for children's care. In a small number of	5.3.1 Mandatory training session for all IROs and GM QI on practice standards and requirements of their role. 5.3.2 An independent quality assurance review and audit of CLA Reviews, to scrutinise and challenge IRO practice and ensure CLA reviews meet statutory requirements. Review to include consideration of IRO caseloads and administrative systems, quality of minutes and children's consultation and mid-way monitoring. Report to identify key areas for improvement and a SMART IRO improvement action plan to be monitored by the GM QI. 5.3.3 Quarterly report of progress against IRO improvement action plan to the Improvement Board. 5.3.4 DMT and the Improvement Board to monitor the number of escalations and the timeliness of their resolution.	Sep 16	HOS QI	N/A

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16–Oct 17	Lead	Agency Involvement
	cases, carers have not received this information for a number of weeks after children are placed. <b>Para 64, Rec 2</b> Managers do not have effective oversight of cases resulting in drift and delay and lack of monitoring and assessment of progress and risk to children and young people. <b>Para 100 Rec12</b>	<p>5.3.5 Review and revise policy and procedures for staff based on Working Together 2015 and the Care Planning Regulations 2010 for children who are returned home to include:</p> <ul style="list-style-type: none"> <li>- Managers do NOT authorise assessments for children to return home unless there has been a thorough assessment of the risk and the IRO has scrutinised safety of plans to return children home and risks are identified when children leave care and an appropriate safety plan is in place.</li> <li>- Head of Service to sign off all return home plans.</li> <li>- All assessments and safety plans cases of children returning home are to be audited separately by QA prior to returning home and feedback used to inform learning in the teams and in management.</li> <li>- Risk assessments are completed on all children returning home, before they return home</li> <li>- IROs will scrutinise 100% of plans for children returning home to ensure risks are identified and managed</li> </ul> <p>5.3.6 GM QI follows up through oversight of IRO team. Monitors minutes and for quality and challenge.</p>			
5.4	<b>Private fostering</b> Oversight of privately fostered children does not meet statutory requirements e.g. not DBS checked, not visited in timescale, the LA cannot ensure that they are safe. <b>Para 44 Rec11</b>	5.4.1 Undertake a review of Private Fostering arrangements and develop a SMART improvement plan to ensure systems in place meet statutory requirements.	Oct 16	HOS C&R	N/A
5.5	<b>Assessments (CLA)</b> Assessments for matching children to connected persons vary in their quality. There is a lack of a comprehensive exploration of the risks and vulnerabilities. <b>Para 59 &amp; 61 Rec 11</b>	<p>5.5.1 Establish a connected person assessment and support team to drive improved practice.</p> <p>5.5.2 Establish a standardised connected person assessment tool.</p> <p>5.5.3 Draft a policy on connected person placements, setting out practice standards and legislative requirements.</p> <p>5.5.4 All social workers in the fostering team to undertake a training session on the new 'connected person' policy and assessment tool.</p> <p>5.5.5 Quality assurance team to undertake thematic audit on connected person placements at least annually and to be presented to DMT and the Improvement Board.</p> <p>5.5.6 Set a target for the number of connected person placements, and number of no disruptions and add this to the performance digest reporting cycle.</p> <p>5.5.7 Assessments of unaccompanied asylum-seeking young people identify culture, ethnicity, religion and specific risks relating to this group of young people and reviewed through audit.</p>	<p>Sep 16 Dec 16 Dec 16 End Jan 17 Apr 17</p> <p>Sep 16</p> <p>Dec 16</p>	HOS C&R	N/A
5.6	<b>Care plans (CLA)</b> The majority of placement plans seen do not contain the information that carers require to understand the arrangements for children's care. In a small number of cases, carers have not received this information for a number of weeks after children are placed. Placement plans and care	<p>5.6.1 Write a set of practice standards for CLA that sets out the minimum practice standards for care planning and placement planning. To include:</p> <ul style="list-style-type: none"> <li>- All care plans to be reviewed in accordance with practice standards</li> <li>- Clear outcomes to be recorded on plans</li> <li>- Contingency plans to be recorded and implemented in a timely way when required</li> <li>- supervision to focus on quality of care plans</li> </ul> <p>5.6.2 Undertake a review of all placement plans to ensure delegated authority is agreed and recorded to those caring for the child looked after.</p> <p>5.6.3 Review and revise the placement plan template to ensure delegated authority is clearly recorded and required information is provided to carers.</p> <p>5.6.4 Review and revise the current delegated authority policy to ensure it covers all requirements and circulate to all front line staff and managers. Policy to include a requirement that IROs will check delegated authority has been appropriately agreed and applied to each</p>	<p>Jun / Sep 16</p> <p>Oct 16</p> <p>Dec 16</p>	HOS QI	Health Virtual School

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16–Oct 17	Lead	Agency Involvement
	plans are not always updated when children move, and delegated authority was not explained or recorded in any placement plans seen by inspectors. <b>Para 64 Rec 2</b>	<p>5.6.5 placement and will escalate case if not. Briefing (via team meetings) to staff on the delegated authority policy and their responsibility in ensuring that it is agreed, recorded and implemented on each CLA case.</p> <p>5.6.6 Develop an information leaflet for parents of CLA and include information about delegated authority and the importance of it in the day to day care of their child.</p> <p>5.6.7 Write and implement a short protocol that ensures the child's independent reviewing officer, the virtual school and designated looked after nurse are all consulted prior to planned placement changes.</p> <p>5.6.8 Quality assurance audit as an assurance test that 100% of placement plans have delegated authority recorded, and of the quality of placement and care plans.</p> <p>5.6.9 Care plans to focus on child's long term educational needs.</p> <p>5.6.10 Undertake a review of alternative education provision available within the borough.</p>	Oct 16		
5.7	<p><b><u>Sufficiency of placements (CLA)</u></b></p> <p>The small number of children and young people who live in private residential children's homes outside the borough (21) live in homes that are judged good or better by Ofsted. However, insufficient checks are made with host authorities as to whether the local area has the appropriate health and education provision required for the child, or whether the placement location presents a child sexual exploitation risk. <b>Para 60 Rec 11 &amp; 13</b></p>	<p>5.7.1 Revise the sufficiency strategy setting out that wherever possible, there are sufficient placements for children and young people to be placed close to their home localities.</p> <p>5.7.2 Review and revise the marketing and recruitment strategy for foster carers</p> <p>5.7.3 Commission external marketing expertise for the revised marketing and recruitment strategy, to give greater focus upon recruiting carers for harder to place children and young people.</p> <p>5.7.4 Undertake a review of the structure of the fostering service to include: - separating the recruitment and support activity, from the assessment process, to ensure that foster carer assessments are given priority - Creating a dedicated GM post for the fostering service by creating a new GM post for the connected person service and GM for the adoption team.</p> <p>5.7.5 Explore with IFA providers the creation of a 'joint placement' approach to the provision of specific placement types through a commissioned service</p> <p>5.7.6 Each social worker to review all of their CLA cases to ensure they have an up to date placement plan on file. Team Managers to check this by end of August and task workers to complete by end of September 2016.</p> <p>5.7.7 Update and re-circulate the OOB placement process flowchart to social work staff so that they are aware of what needs to happen.</p> <p>5.7.8 Develop a CLA profile that can be used to inform placement choice and possible risks.</p> <p>5.7.9 Set up a system to consult host authorities prior to out of borough placements being made, to check risks in the local area and get appropriate agreement to the placement.</p> <p>5.7.10 Amend the referral form to ensure, wherever possible that the child's IRO, Virtual School and CLA nurse are fully consulted prior to placement changes.</p>	Apr 17	HOS C&R	LBB Central Placement Team
5.8	<p><b><u>Direct work (CLA)</u></b></p> <p>Life-story books seen during the inspection lacked some critical information and are not always completed in a timely way. <b>Para 88 Rec 4 &amp; 14</b></p>	<p>5.8.1 Undertake an audit of Life Story work across all CLA cases to ascertain which cases do and don't have life story work ongoing.</p> <p>5.8.2 Review the capacity of staff to complete life story work and consider a business case to recruit a consultant to do a short piece of work to get this up to date</p> <p>5.8.3 Develop a short life-story and direct work policy outlining minimum standards of practice. To include: - a requirement for direct work with all CLA, and life story for all CLA in long-term placements, - Life story work to focus on helping the child understand their journey and to be completed at the child's pace - requirements on recording direct work and life story work is happening, on the case file.</p> <p>5.8.4 Through supervision and case audit ensure social workers record direct work with children and work evidences the voice of the child</p> <p>5.8.5 Identify and deliver training to social workers in direct work techniques including recording Statutory visits and record evidence of progress against the objectives outlined in the care plan.</p>	<p>Nov 16</p> <p>Dec 16</p> <p>From Sep 16 By Jan 17</p>	HOS C&R	LBB L&D



ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16–Oct 17	Lead	Agency Involvement
5.9	<b><u>Contacts (CLA)</u></b> Contact between children and their family members is not sufficiently risk assessed or managed. Insufficient consideration is given to the potential negative impact of very frequent contact and associated travel for children and their attachment behaviour. Contact records are not sufficiently analytical and do not inform case planning well. <b>Para 62 Rec 2</b>	5.9.1 Write a protocol on family contact that gives guidance to front line staff. To include: <ul style="list-style-type: none"> <li>- all proposed contact arrangements must be discussed with and agreed by the IRO and included in the care plan.</li> <li>- Contact arrangements to be assessed and discussed at CLA reviews and those that are assessed as being detrimental to the needs of the child should be robustly challenged including, if necessary, legal challenge.</li> <li>- Inappropriate contact arrangements to be escalated by the IRO and to be reviewed by SMT on a six monthly basis</li> </ul>	Oct 16	HOS C&R	LBB HOS EI&FS
5.10	<b><u>Advocacy (CLA)</u></b> Although children and young people have access to an independent advocacy service and there is no waiting list, advocacy is not well promoted in children's reviews or by their social workers. <b>Para 66 Rec 14</b>	5.10.1 Develop a communication plan for the independent advocacy service setting out creative promotion of the service. 5.10.2 Update CLA welcome pack to include details of the advocacy service 5.10.3 Independent reviewing officers to give all children and young people a leaflet on the advocacy service at all future reviews. 5.10.4 Independent advocacy & independent visiting services to attend CLA team meetings at least annually first visit before Dec 16. 5.10.5 Setup process with Complaints Team to ensure that CLA making a complaint is provided information about independent advocacy 5.10.6 Set targets to monitor use of the service to be reported to SMT regularly.	By Dec 16	HOS QI	N/A

Priority Five – Supporting children looked after - performance measures (see appendix 1 page 46 for performance indicators)

No.	Indicator	Type of Indicator	Source	Bromley 2015/16	Target 16/17	Target 17/18
5a	% of CLA cases over 6 months reviewed at Early Permanency Panel (6 weeks)	Mgt OS	Minutes	New	100%	100%
5b	% of children have a permanency plan at 4 months in care	Quality	Audits	New	100%	100%
5c	% and number of safety plans for children returning home judged as good/outstanding	Quality	Audits	New	TBC	TBC
5d	% and number of plans scrutinised by IRO identify risk and how this will be managed following decision to return CYP home	Quality	Audits	New	TBC	TBC
5e	% and number of audits identifying drift and delay in placement planning/ permanency	Quality	Audits	New	TBC	TBC
5f	% and number of placement plans have delegated authority recorded	Quality	Audits	New	100%	100%
5g	% and number of care plans that are reviewed as a minimum every six months	Mgt OS	MI Report	New	TBC	TBC
5h	% and number of care plans that evidence the voice of the child and their parents in care plans.	Quality	Audits	New	TBC	TBC
5i	% and number of CYP placed in residential accommodation rather than family placement	Capacity	MI Report	New	TBC	TBC
5j	% and number of CYP placed more than 20 miles from home	Capacity	MI Report	New	TBC	TBC
5k	% and number of children using advocacy or independent visitor	Contract Mon	Process	New	TBC	TBC

## Priority Six – Supporting Care Leavers

Young people leaving care and preparing to leave care need to receive the right support to help them to make a successful transition to adulthood. We are committed to helping care leavers make effective plans to leave care that address their individual needs, so they are safe and feel safe, particularly where they live. Care leavers in Bromley will be able to successfully access education, employment, training and safe housing; and will enjoy stable and enduring relationships with staff and carers who meet their needs.

### Ofsted Recommendations:

**Recommendation 6** - Ensure child protection, child in need, children looked after and pathway plans are informed by assessment, focused on the needs of individual children and young people, and specific about the outcome to be achieved and the timescale for change. Contingencies should be explicit.

**Recommendation 15** - Ensure that children looked after in Year 12 are effectively supported and encouraged to remain in education.

**Recommendation 16** - Increase the range of suitable accommodation available for homeless 16- and 17-year-olds and care leavers, so that they are safe and feel safe where they live.

### Identified issues to be addressed:

- There is an insufficient range of safe and suitable housing for care leavers. There is an over-reliance on bed and breakfast accommodation, which is not supporting positive outcomes for vulnerable care leavers,
- Not enough work is done to engage more vulnerable care leavers, particularly those aged over 18 years with more challenging behaviours.
- Pathway plans are too vague, with unclear steps for care leavers to reach their goals, and no contingency plans in place.
- Too many care leavers are not in education, employment or training, and too few in Higher Education.
- Too many young people leave care without access to their health histories.
- The setting up home allowance is provided too late meaning young people are moving into their accommodation with it not fully equipped.
- Management oversight is not effective enough and managers do not intervene quickly enough when outcomes for young people are not improving or when young people do not engage.

### Expected impact and outcomes of this plan:

- Appropriate accommodation options will be available for care leavers that totally eliminate the need to use bed and breakfast accommodation, where they feel safe and supported.
- Young people are actively engaged in education, employment or training which leads to sustainable long term employment
- Young people are clear about their own health and how to access support and advice in the future.
- Social workers and personal advisers are proactive, determined and creative in their approach to engage the more vulnerable care leavers with more challenging behaviours.
- Pathway plans are SMART, individualised, with clear steps to help care leavers to reach their goals. Contingency plans are set out clearly.

**Lead officer:** Ian Leadbetter, Head of Service, Care and Resources

## Priority Six – Supporting Care Leavers

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
6.1	<u>Assessments and Quality assurance (Care Leavers)</u> The provision offered to care leavers by the council is not co-ordinated and lacks a strategic vision with clarity over roles & responsibilities. The quality of pathway planning and support offered to care leavers is variable across the service. <b>Para 92 Rec 6</b>	6.1.1 Develop a multi-agency care leaver's strategy that clearly identifies the council's ambitions. 6.1.2 Develop a suite of performance indicators linked to the care leaver's strategy, to be agreed and monitored by the Corporate Parenting Board. 6.1.3 An annual report on progress of the Care Leavers strategy to be scheduled for the Executive Working Party for Safeguarding and Corporate Parenting within six months. 6.1.4 Write a job description and recruit an Independent Reviewing Officer for post 18 care leavers, to chair Pathway Plan reviews for care leavers where the plan is not progressing appropriately. 6.1.5 Develop practice standards for pathway planning with care leavers, to include: - a requirement that all pathway plans are reviewed within six months, and/or at point of circumstance change - have SMART actions - demonstrate 'ambition' for the young person - include clear contingency plans - demonstrate young people have input into their plans. 6.1.6 Pathway planning training to be delivered to all front-line staff (social workers/personal advisors) to cover SMART planning and the revised practice standards. - Dip samples of pathway plans to be added to the audit schedule, with monthly auditing by the GM and HoS.	End Mar 17   Oct 17 Oct 16 Dec 16   Jan 17 Mar 17	DCS HOS C&R	N/A
6.2	<u>Placements and accommodation (Care leavers)</u> The service has placed too many young people in B&B accommodation which has not been risk assessed. <b>Para 89 Rec 16</b> There is an insufficient range of safe and suitable housing available for care leavers. Housing provision offered to care leavers is not appropriately risk assessed. <b>Para 89 &amp; 90 Rec 14 &amp; 16</b>	6.2.1 Review the housing pathway for care leavers The BIS team to work closely with colleagues in the Housing Teams (S&R and Allocations) to review the housing pathway for care leavers and to identify suitable accommodation options for care leavers. 6.2.2 Undertake a review of the current homelessness strategy, ensuring it sets out the policy for housing all young people. 6.2.3 Develop a policy for vulnerable homeless and care leavers as part of the homelessness strategy, outlining the housing pathways, all placement options and alternatives to bed and breakfast accommodation. 6.2.4 Develop and implement a risk assessment framework for care leavers to be used before any placement in new accommodation. 6.2.5 Amend the wider housing policy to ensure it aligns to the new care leaver placement strategy 6.2.6 The BIS Team to adopt the risk assessment tool in practice to ensure that all accommodation to be provided to care leavers is assessed for its suitability, as a safe and secure base, prior to the placement being commissioned. 6.2.7 Develop a communication plan to promote the 'staying put' policy with all foster carers and young people with a view to increasing take up on this, ensuring: - that staying put opportunities are discussed as early as possible; - clarity is given to foster carers about the level of support, including financial support they will receive through the staying put policy	Sep 16  Dec 16  Jan 17   Dec 16	DCS AD Housing HOS C&R	Housing
6.3	<u>Independent training (care leavers)</u> Not all care leavers had access to their leaving care grants when moving in. <b>Para 94 Rec 15</b> Quality of support and preparation to adulthood for care leavers. <b>Para 95 Rec 7</b>	6.3.1 Undertake an audit of all care leavers eligible to receive their setting up home allowance/care leaver grant in the past six months, to identify young people that did not receive this. 6.3.2 Set up a system for identifying care leavers eligible for the setting up home allowance, and contact all care leavers currently eligible 6.3.3 Develop a short information leaflet for care leavers about the setting up home allowance, covering how it is to be used and accessed and disseminate to relevant care leavers. 6.3.4 Review the 'Moving on' preparation course for care leavers, improving the content and changing the timing and frequency. 6.3.5 Undertake a feasibility study to create 'training tenancies' for care leavers, the objective being to provide high levels of support to young people in preparation for their permanent independent accommodation.	Jan 17  Oct 16 Oct 16 By Dec 16 Jan 17	HOS – C&R	N/A

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
	The local authority is not proactive in engaging and staying in touch with care leavers, and do not review the outcomes and intervene quickly where young people are disengaging. <b>Para 91 Rec 13</b>	6.3.6 Develop a protocol setting out standards for contact between care leavers over 18 and their Young People's Adviser including action to be taken when young people disengage with the service.	Nov 16		
6.4	<u>Health (Care leavers)</u> Care leavers do not fully engage with and access health provision that is offered to them by the CLA nurse and there is a gap in what support is offered to those aged 18 years old +. <b>Para 96 Rec 6</b>	6.4.1 Implement care leaver health passports to ensure all care leavers have access to their health histories. 6.4.2 Progress colocation of one CLA nurses to be located in the Leaving Care Team at least once/week. 6.4.3 Update the preparation for independence course for care leavers to include input from CLA nurse input. 6.4.4 Undertake a review of what health support care leavers require post 18 and work with the Clinical Commissioning Group (CCG) commission relevant services based on the recommendations. 6.4.5 Questions about sexual exploitation to be included within the Bromley 'Health Watch' school based survey.	Jan 17	HOS – C&R	Health
6.5	<u>Education, Training and Employment (Care Leavers)</u> For the last three years approximately a third of care leavers have not been in education, employment or training. For the last three years approximately a third of care leavers have not been in education, employment or training. <b>Para 94 Rec 15</b>	6.5.1 Undertake a review of the Virtual School with a view to extend its focus on care leavers. To include: - Embed post 16 PEPS in the pathway planning process - Increase capacity by creating two specific posts that support year 12/13 and post 18 care leavers - Offer a range of services to support the ongoing education and training opportunities for care leavers - Promoting higher education opportunities through taster days, information sessions etc. 6.5.2 Develop an ambitious education, employment and training strategy for care leavers 6.5.3 Set up a multi-disciplinary group, chaired by the Virtual School, to review all care leavers currently not in education, employment or training (NEET) and develop an action plan setting out the immediate support they will be given. 6.5.4 Develop a working protocol with the YES Project (Education Business Partnership) to increase opportunities and engagement of care leavers, including apprenticeship opportunities. 6.5.5 Get agreement for all care leavers to be given priority places on activities in Children and Family Centres. 6.5.6 Write a policy that sets out a requirement for all newly commissioned services to offer, where appropriate, work experience, work placements and/or apprenticeships to care leavers. 6.5.7 Set up a working protocol with Job Centre plus to agree an offer to care leavers. 6.5.8 Develop an information guide for care leavers of EET opportunities available to them, and the range of support available to them in further and higher education (accommodation, staying put, financial etc).	Apr 17	DED	N/A

Priority Six – Supporting Care Leavers - performance measures (see appendix 1 page 47 for performance indicators)

No.	Indicator	Type of Indicator	Source	Bromley 2015/16	Target 16/17	Target 17/18
6a	% of pathway plans reviewed at six months or within 10 working days of a change of circumstance	Quality	MI Report	New	100%	100%
6b	% and number of pathway plans evidence SMART objectives	Quality	Audit	New	100%	100%
6c	% and number of young people have had input into their pathway plans	Quality	Audit	New	100%	100%
6d	xx % attendance of CSC staff at pathway planning training sessions	L&D	MI Report	New	TBC	TBC
6e	% and number of pathway plans have contingency plans	Quality	Audit	New	100%	100%
6f	% and number care leavers have access to their health information	Quality	MI Report	New	100%	100%
6g	% Care Leavers (16-18) Not in Education Employment or Training (NEET)	DfE	MI Report	N/A	TBC	TBC
6h	% Care Leavers (age 17-21) in suitable accommodation	DfE	MI Report	75%	85%	85%
6i	% and number young people in staying put arrangements	Quality	MI Report	New	TBC	TBC
6j	% and number of care leavers post 16 that have a completed PEP to support their ETE	Quality	MI Report	New	TBC	TBC
6k	% and number care leavers attend preparation for independence training course	Quality	MI Report	New	TBC	TBC
6l	% Care Leavers (age 18-21) in Higher Education	DfE	MI Report	5%	8%	8%
6m	LinCC to undertake annual surveys of the council's commitment to the care leavers pledge	Satisfaction	Survey	New	TBC	TBC
6n	Young people report through consultation that they feel supported.	Satisfaction	Survey	New	TBC	TBC
6o	100% of all care leavers have access to their health information and how to access adult health services.	Quality	Audit	New	TBC	TBC
6p	% of Bromley 'Health Watch' school based surveys completed.	Satisfaction	Survey	New	TBC	TBC

## Priority Seven – Adoption services

Adoption will be considered for all children who are unable to return home to their birth families and who need a permanent alternative home. We are committed to improving our adoption processes so that a sense of urgency and care is given in all our adoption work, including the appropriate use of concurrent and parallel planning, so that suitable adoptive families are identified for children without delay.

### **Ofsted Recommendation:**

**Recommendation 10** - *Ensure priority is given to considering achieving permanency, including adoption, at the earliest possible point for children, and that there are effective systems to track and monitor the progress of this work.*

### **Identified issues to be addressed:**

- Not enough children are adopted, much lower than the national average.
- Not enough children are considered for adoption, even though they are unable to return to their birth parents, or if they are it's not considered at the earliest opportunity.
- There is too much delay in the adoption process which is caused by a range of issues including - it takes too long for children to be considered for adoption,
- a lack of urgency in pursuing permanency options for children, over optimistic assessments of parents, too many opportunities given to birth family before decisive action is taken to adopt, plans for adoption are changed resulting in some children remaining uncertain about their futures for too long. , and some being consecutive planned rather than twin tracked while assessments are on-going.
- Family finding is overly focused on finding an ethnic match at the expense of the other needs of the child, including timeliness, and this causes unnecessary delay.
- Adoption assessments take too long to start from initial contact.
- Fostering to adopt placements are under developed.
- Child permanency reports need better analysis of how the childhood trauma might affect them into adult life.
- Life story work lacks critical information, and are not always completed in a timely way.
- Processes within the adoption service lack tight management, are not focused around the child's timescales, and are too tolerant of drift and delay.

### **Expected impact and outcomes of this plan:**

- Appropriate accommodation options will be available for care leavers that totally eliminate the need to use bed and breakfast accommodation, where they feel safe and supported.
- Children receive swift and effective support to help them find permanent families that meet their needs well. All children who cannot return to their home permanently will be considered for adoption.
- Life story work will be completed with children in long-term care
- More children will be adopted; this will take less time, and be in line with the time taken by the best performing local authorities.
- Placements for children freed for adoption will prioritise timeliness and quality of care over finding exact ethnic matches.
- Arrangements to recruit new adoptive parents will be effective and timely; children will be freed for adoption where this appropriate in a timely way and matched to good quality adoptive parents swiftly. Foster to adopt placements will be developed to reduce the number of moves children make and the time it takes to move into an adoptive placement.

**Lead officer:** Head of Service, Care and Resources

[illegible]



Priority Seven – Adoption services - performance measures (see appendix 1 page 47 for performance indicators)

No.	Indicator	Type of Indicator	Source	Bromley 2015/16	Target 16/17	Target 17/18
7a	% of CLA cases over 6 months reviewed at Early Permanency Panel (6 weeks)	Mgt OS	Minutes	New	100%	100%
7b	% of children have a permanency plan at 4 months in care	Mgt OS	Audit	New	TBC	TBC
7c	Minutes of PLO and LPMs show that adoption is being considered as part of twin tracking process	Mgt OS	Audit	New	TBC	TBC
7d	Number of initial enquiries from prospective adopters	Quality	MI Report	170	TBC	TBC
7e	Number of newly approved adopters	Quality	MI Report	17	15	20
7f	Number of currently approved Adopters	Quality	MI Report	13	N/A	N/A
7g	The average time (days) between a child entering care and moving in with its adoptive family, for children who have been adopted (A1) (in year)	Adoption Scorecard	MI Report	659	426	426

## Priority Eight: Tackling child sexual exploitation, children missing and gangs

The local authority and its partners do not have a strategic overview of the risks to children missing and/or at risk of CSE. The systems for scrutinising, analysing and evaluating the outcomes for children missing or at risk of sexual exploitation are under developed. Key intelligence from return home interviews is not being used to cross-reference with children at risk of CSE or gangs to form an understanding of trends and patterns and the reasons why children are going missing. Operationally, the work to safeguard children missing or at risk of CSE is poorly coordinated and inconsistent: it is marked by police delays in informing social care when a child goes missing or has returned. Return home interviews are delayed and in most cases it is unclear whether one has taken place. Procedures for children who go missing are not effectively applied and the risks to children from CSE or trafficking are not well understood by the people working with them. This reduces their capacity to manage the risks to these children.

### Ofsted Recommendations:

**Recommendation 7** - *Improve the arrangements to reduce the risk to children of sexual exploitation and episodes of missing from home and care, by:*

- *ensuring that risks to sexually exploited children and young people, and those who go missing, are routinely assessed and understood by strategic managers who take timely action to address concerns*
- *developing suitable arrangements to share and analyse information from child sexual exploitation risk assessments and 'return' interviews to reduce future risks for individual children and young people, and to inform partnership prevention and disruption activity.*

### Identified issues to be addressed:

- The response to children missing or at risk of child sexual exploitation is underdeveloped, inconsistent and uncoordinated. Delays in police notifications meant it is not clear when children first go missing and when they return.
- Return home interviews are delayed and in most cases vague responses are being obtained from young people who have been missing.
- Performance data on children missing and child sexual exploitation is not collated or analysed sufficiently well to understand the profile of children missing and the links to sexual exploitation. There is no system in place to share and analyse information from child sexual exploitation risk assessments and return interviews, to reduce future risks for children and young people, and to inform partnership prevention and disruption activity.
- Child protection procedures for children missing from home, care or education or at risk of CSE, gangs or trafficking are inconsistently applied and there are too many delays.
- Information is not used or shared appropriately between partners and consequently the risks to these children are poorly understood nor managed.
- The partnership arrangements for identification and support of children and young people who are at risk of CSE, gang involvement or affiliation and/or missing are poorly coordinated and underdeveloped.
- Arrangements for managing CSE, missing and gangs related work needs to be centralised and coordinated to oversee, monitor and quality assure case work practice and collate and analyse trends to make intelligence links between places, children and perpetrators.
- The MASE needs to be improved so it is more intelligence led, uses data more effectively to intervene strategically and operationally to reduce and manage risks to children.
- Where children are placed out of borough in residential homes, adequate checks and risk assessments are not being done around sexual exploitation before making the placement.

### Expected impact and outcomes of this plan:

- The work of CSE, missing children and gangs will be overseen by a strategic lead, and activities will be centralised, with strong oversight, collation and analysis of data and information-sharing.
- A detailed problem profile and needs analysis will help inform the work of the MASE and BSCB in addressing the issues both strategically and operationally through targeted action to prevent and reduce risks for children and young people,
- Return home interviews will be done on time and information gathered will be used on both an individual case basis, and collated to help inform the wider partnership response.
- Senior managers will have strong oversight of the issues and prevalence of CSE, gangs and missing episodes in their area, the extent of risks to children and will use this to inform local commissioning decisions.
- The support needs of children who are at risk of CSE or victims of CSE, trafficking, gangs or who go missing will be reviewed and appropriate services will be commissioned to meet these needs. The service will monitor and review the support arrangements that have been put in place for children and young people and measure outcomes of those who have been offered support.

**Lead officer:** Director Children's Services

**Priority Eight: Tackling child sexual exploitation, children missing and gangs**

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
8.1	There is a lack of co-ordination, strategic oversight and challenge to work being completed to support children and young people within the borough at risk of SE, Trafficking, Missing and Gangs. <b>Para 32, 105&amp; 106 Rec 7</b>	8.1.1 Appoint a key strategic lead for CSE, Trafficking, Missing and Gangs in Children Social Care, and in each partner agency. 8.1.2 Develop a role outline for agency lead on CSE, trafficking, missing and gangs. 8.1.3 The Director to write to each lead agency to request they appoint a strategic lead for CSE, trafficking, missing and gangs in children's social care, and include clear role and responsibilities 8.1.4 Arrange a briefing session for all agency leads on CSE, trafficking, missing and gangs in order for them to understand their role	Sep 16    Oct 16	DCS	Task & Finish Group LBB Health Police Probation Schools
8.2	The local authority is currently neither collating nor analysing this data sufficiently well to understand the profile of missing children and the links to child sexual exploitation. <b>Para 32 Rec 7</b>	8.2.1 Draw up a single central database, tracking sheet and action plan with RAG rating of all children at risk from missing, CSE, trafficking and/or gangs, to be overseen by the social care strategic lead and reviewed at each MASE meeting. 8.2.2 Designate a qualified and experienced social worker as the operational lead in MASH to track and co-ordinate responses to all new referrals, and existing open cases, ensuring that 100% of the children identified have a multi-agency risk assessment and safety plan in place, a named key worker and are reviewed monthly at MASE or a MAP meeting. 8.2.3 Quality assurance audit of children on the central database as 'at risk', to check the following: Links to 2.1.1 & 3.4.2 - the response from police is timely - a return home interview has been set up and quality of this within timescales, - strategy discussions and meetings have been held - appropriate agency representation at meetings - a MAP has been held where required - a multi-agency assessment of the child's needs and risks is in place and that there is an appropriate risk management plan in place 8.2.4 A clear action plan is in place for any shortcomings in the QA audit, and corrective action is being taken within timescales.	End Oct 16	DCS	Task & Finish Group LBB Health Police Probation Schools
8.3	There is a lack of co-ordination, strategic oversight and challenge to work being completed to support children and young people within the borough at risk of SE, Trafficking, Missing and Gangs. <b>Para 32, 105 &amp; 106 Rec 7</b>	8.3.1 Set up a BSCB task and finish sub-group on CSE, missing, trafficked children and gangs, and develop a terms of reference and membership for the group. 8.3.2 Undertake a full review of the multi-agency response and effectiveness of response to CSE, missing from home, care and education, gangs and trafficked children, with clear recommendations and action plan. Review to include governance arrangements and the MASE. 8.3.3 Review and revise the multi-agency policies, protocols and operating procedures on CSE, missing, trafficked children and gangs, to be signed off by the BSCB and disseminated to key staff across all agencies. See action 3.4 8.3.4 Develop a multi-agency performance data set on CSE, missing, trafficking and gangs which is used to monitor multiagency performance, to track and check on timeliness, application of procedures, and identify cross links between cases. - Monitor how police notify children's social care when a child has gone missing and when they have returned immediately, same day. - Monitor the number of staff that have received a briefing about how to respond to children missing from care or home and the performance data shows that 80% of children who comply receive a RHI within 72 hours. - Review the number of repeat incidents of children who are running away from home or care. 8.3.5 Safer Communities Partnership to sign off gang's strategy, and LSCB to provide scrutiny prior to sign off. 8.3.6 Schedule an annual report to the BSCB that analyses the return home interviews and uses this intelligence to reduce episodes. 8.3.7 Set up systems and reporting mechanisms to ensure Scrutiny Panel, MASE, BSCB and DMT are able to monitor the effectiveness of practice around missing, CSE, trafficked children and gangs. 8.3.8 Information on trends and patterns reported from MASE used to inform strategy and BSCB business plan.	Dec 16	Police	Task & Finish Group LBB Health Police Probation Schools

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
8.4	Plans to disband the monthly multi-agency case-focused planning meeting were withdrawn when inspectors raised concerns about the need to have a holistic response that links children across agencies. <b>Para 105 Rec 7</b>	<p>8.4.1 MASE 'problem profile' to be developed based on a detailed analysis of trends and data on missing children, trafficking, gangs and CSE. Analysis to include: geographical patterns of sexual offending, mapping of offenders and children, hotspots, trends and profiles of CSE and missing, trafficking and gang related activity within Bromley and in proximity to CLA placed out of borough.</p> <p>8.4.2 Problem profile to be shared with Director of Children's Services, Chief Constable, Children's Service Senior Management Team, BSCB and Council members and updated as a live document at least every quarter.</p> <p>8.4.3 The MASE to develop a plan for using intelligence from partners to intervene in a targeted way to disrupt CSE, gang activity, and reduce missing episodes, and trafficking incidents.</p> <p>8.4.4 The MASE to develop a dataset to evidence of disruption activity, prosecutions, and use of SOPOs, RHOSOs, Abduction Notices, and ancillary orders, to monitor its own effectiveness as a panel and report back to BSCB and Improvement Board.</p> <p>8.4.5 Children's commissioning service to undertake an exercise to map the identified in the MASE Problem profile and feedback from consultation with children, with the existing therapeutic resources available for children at risk from missing, CSE, trafficking or gangs in Bromley; and make recommendations based on any gaps or duplication of service.</p> <p>8.4.6 BSCB contributes to a multi-agency CSE day for front line staff which publicises CSE/Missing functions and protocol.</p>	April 17	DCS Police	LBB Health Police Probation Schools
8.5	Return home interviews for children and young people are not routinely completed. <b>Para 32, 73, 106 Rec 7</b>	<p>8.5.1 The local authority to ensure that all returning CLA and children missing from home are referred to commissioned service for an independent return home interview, and that they hold a strategy meeting and have appropriate risk management plans on file.</p> <p>8.5.2 Develop a return from home interview protocol to be included in the revised missing procedures as per 8.4 of this plan. The protocol to include:</p> <ul style="list-style-type: none"> <li>- The children services strategic lead to hold a meeting with the superintendent of Public Protection Desk to understand why police notifications are not being made in a timely way and problem solve, including setting up a system to monitor this going forward.</li> <li>- The strategic lead to reissue clear guidance to all staff on missing procedures, the statutory timescale, the criteria for a strategy meeting, and the purpose of arranging a return home interview.</li> <li>- The strategic lead will monitor poor performance and performance manage those social workers who do not comply.</li> <li>- The strategic lead will arrange reflective workshops or team meetings to explore how social workers can use the RHI interviews more effectively, and strategy and MAP meetings for children missing/at risk of CSE to inform better care planning.</li> <li>- Team Managers to follow up improvements in practice within supervision, and minute discussions providing clear actions for staff who have not complied with procedure or who have not addressed risks well in their plans.</li> </ul> <p>8.5.3 The strategic lead for children's services and team managers to continuously monitor case work and follow up concerns with management action.</p>	Sep 16	DCS	N/A
8.6	The local authority is more effective in tracking and identifying children and young people missing education. <b>Para 34</b>	<p>8.6.1 Develop a missing from education working protocol (to be included in the missing from home, care and education policy as per 8.3 of this plan).</p> <p>8.6.2 Set up a 'missing from education' database, tracking sheet and action plan, to track children and ensure robust action is in place to ensure that they are returned to education with the minimum of delay.</p> <p>8.6.3 Designate a lead on 'missing from education'</p> <p>8.6.4 Set up regular 'missing from education' meetings to go through the tracking sheet and agree actions.</p> <p>8.6.5 Contact all schools attended by Bromley children to request information on any children who regularly miss part of the school day, or are missing education.</p> <p>8.6.6 Set up a protocol to screen and follow up on these children to reduce incidents</p> <p>8.6.7 Set up a requirement for all children who are educated at home to be visited twice a year to check on their welfare and educational progress. Any safeguarding concerns must be reported to children's social care.</p> <p>8.6.8 Set up reporting mechanisms for all children who are missing education or electively home educated, and these arrangements are to be reported to the BSCB for oversight and scrutiny.</p>	Jul 16	DCS	N/A
8.7	Insufficient checks are made with host authorities as to	8.7.1 Update the IT recording system for authorising out of borough placements, to require verification that checks been made with the area around educational and health provision and/or risks around sexual exploitation have been checked first.	Aug 16	HOS C&R	Police Education

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
	<p>whether the local area has the appropriate health and education provision required for the child, or whether the placement location presents a child sexual exploitation risk. <b>Para 60 Rec 13</b></p> <p>Ensure that children and young people who are placed out of the borough are sufficiently supported by their social worker and have access to services to meet their needs where they are living. <b>Rec 13</b></p>	<p>8.7.2 Implement requirement that Head of Service for CLA checks that risks around sexual exploitation have been considered before agreeing to out of borough placements.</p> <p>8.7.3 Review all out of borough placements and check for any risks (intelligence re: CSE)</p> <p>8.7.4 Set up requirement that multi-agency strategy meetings are to be held and safety plans to be put in place in any CLA cases where there are concerns about risk. To be included in revised multi-agency policies and protocols as per 8.3 of this plan.</p> <p>8.7.5 Head of Service Care and Resources to provide regular reassurance reports to the Improvement Board, Corporate Parenting Board and BSCB. This to be reported as a standing item as part of all future annual Corporate Parenting Board Reports.</p>			<p>Schools Health</p> <p>BSCB Partners</p>

**Priority Eight: Tackling child sexual exploitation, children missing and gangs – a full data set will be developed as part of the BSCB task and finish group CSE, Missing, Gangs.**

No.	Indicator	Type of Indicator	Source	Bromley 2015/16	Target 16/17	Target 17/18
8a	Number of children known to the LA that are at risk of CSE, missing, trafficking or gangs	Quality	MI Report	New	TBC	TBC
8b	Number of referrals sent to MAP Panel (and % of all CIN, CP and CLA)	Quality	MI Report	New	TBC	TBC
8c	Outcome of MAP Panel referrals	Quality	MI Report	New	TBC	TBC
8d	Minutes of MASE evidence challenge by management of all partners, and that actions are routinely reviewed and completed.	Quality	Audit	New	TBC	TBC
8e	% and number of CYP who have received a return home interview within 72 hours of return home	Quality	MI Report	New	80%	80%
8f	Number (and %) of CIN/CP with missing episodes	Quality	MI Report	New	TBC	TBC
8g	Number of children known to be at risk of/or affiliated to gang activity	Quality	MI Report	New	TBC	TBC
8h	Number of children known to be at risk from CSE (and as % of all CIN including CP and LAC)	Quality	MI Report	New	TBC	TBC
8i	100% of the children identified have a multi-agency risk assessment and safety plan in place, a named key worker and are reviewed monthly at MASE or a MAP meeting.	Quality	MI Report	New	TBC	TBC

## Priority Nine – Strategic Commissioning

Commissioning activity is fragmented and not evidence driven. Commissioned services to support early intervention and statutory services are fragmented and the lack of a children's commissioning strategy does not lead to effective joined up services with partner agencies. The availability of local foster placements and suitable placements for care leavers were not sufficient to ensure that there is sufficient choice to meet need. At the time of the inspection 14 care leavers over the age of 18 were living in bed and breakfast accommodation. Some commissioned services are not robustly reviewed and monitored for their effectiveness.

### **Ofsted Recommendation:**

#### **Ofsted Report Recommendations 11, 16 -18:**

*Recommendation 11 - Improve the sufficiency and choice of placements within the borough to meet current needs, to strengthen placement planning arrangements and to ensure increased support to foster carers.*

*Recommendation 16 - Increase the range of suitable accommodation available for homeless 16 and 17-year-olds and care leavers, so that they are safe and feel safe where they live.*

*Recommendation 17 - Integrate children's commissioning arrangements corporately, to ensure that safeguarding children and young people is understood and prioritised.*

*Recommendation 18 - Evaluate services that support children and families living with domestic violence, drug and alcohol misuse and parental mental ill health to ensure that these are making a difference and improving circumstances for children and young people.*

### **Identified issues to be addressed:**

- A carefully planned, dedicated and child-centred commissioning strategy is required so that children and their families in Bromley are to benefit from it.
- Commissioning activity is fragmented, not evidence driven. Commissioned services to support early intervention and statutory services are fragmented and the lack of a children's commissioning strategy does not lead to effective joined up services with partner agencies.
- Some commissioned services are not robustly reviewed and monitored for their effectiveness.
- The availability of local foster placements and suitable placements for care leavers were not sufficient to ensure that there is sufficient choice to meet need. Although training and supervision was generally well received by foster carers, many felt that they were not considered as an important part of the professional team around the child.
- Too many care leavers are living in unsuitable accommodation including bed and breakfast accommodation.
- The JSNA is not used effectively to help evaluate what resources could be commissioned to ameliorate certain issues such as parental domestic abuse, mental health and those missing from home and care.

### **Expected impact and outcomes of this plan:**

- A comprehensive integrated commissioning strategy is in place to drive and deliver coordinated commissioning arrangements corporately.
- The commissioning strategy makes best use of the Joint Strategic Needs Assessment and other performance data.
- Services are evaluated and reviewed regularly to ensure they are making a difference and improving circumstances for children, young people and families.
- Commissioned services are based on actual need and take into account the views of young people and thorough risk assessments, ensuring safeguarding children and young people is understood and prioritised.
- The number of local foster carers is increased
- A range of suitable accommodation is commissioned for homeless 16 and 17 year olds and care leavers, so they are safe and feel safe where they live.

**Lead officer:** Director of Children's Services

## Priority Nine – Strategic Commissioning

ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
9.1	Work is required if children and their families in Bromley are to benefit from a carefully planned, dedicated and child-centred commissioning strategy. <b>Para 109 Rec 17</b>	9.1.1 Appoint Children's Commissioner to lead of all commissioning arrangements. (completed) 9.1.2 Develop an integrated commissioning strategy for children's services. 9.1.3 Implement the commissioning strategy for children.	Sep 16 Dec 16	DCS	Health
9.2	Too often, plans recommend parents' engagement or re-engagement with services without considering how effective these services are. <b>Para 28 Rec 18</b>	9.2.1 Undertake a full review of children's commissioning contracts to assess the effectiveness of the help and support provided, and that they are delivering against the key objectives. Review to include: <ul style="list-style-type: none"> <li>- Advocacy service</li> <li>- Independent visiting service</li> <li>- Return home visits agency and tracking</li> <li>- Missing &amp; CSE support services</li> <li>- Parental mental ill health services</li> <li>- Substance misuse services</li> <li>- Violence against women and girls/ Domestic Violence services</li> <li>- The range of services providing therapeutic help and support, with an overview of the extent to which these existing programmes are tailored towards the specific needs of CLA, children with learning difficulties, children outside of mainstream education (COOME) and trafficked children</li> <li>- A proposed framework for monitoring the effectiveness of commissioned services going forward</li> <li>- A proposed set of performance indicators to evaluation commissioned services going forward</li> <li>- An overview of any gaps in services (based on the needs of children as per the updated JSNA).</li> <li>- A plan around how poor performing contracts will be reviewed, with timescales</li> <li>- An overview of any programmes with consistently poor feedback or low take up.</li> </ul> 9.2.2 The final written review report to be presented to the Improvement Board with recommendations and an action plan.	April 17	DCS	LBB Procurement
9.3	The local authority recognises that it does not have sufficient foster placements for older children and for children from ethnic minority backgrounds. <b>Para 57 Rec 11</b>	9.3.1 Complete review of the sufficiency strategy to increase placement options, including placements for care leavers. 9.3.2 Revise recruitment strategy for foster carers and adopters to include commissioned arrangements where appropriate, with a target for 20 new foster carers recruited annually.	Dec 16	HOS C&R	N/A
9.4	There are significant gaps in the JSNA for some groups of vulnerable children, for example the high number of children known to early help services and children's social care as a result of parental domestic abuse, mental health and substance misuse. There is no reference to child sexual exploitation or those missing from home or care. <b>Paras 107 108</b>	9.4.1 Review and update the JSNA to include : <ul style="list-style-type: none"> <li>- Children in need</li> <li>- children known to early help services and children's social care as a result of parental domestic abuse, mental health and substance misuse</li> <li>- CSE and missing CLA</li> <li>- VAWG</li> <li>- Young people's homelessness</li> <li>- health needs of children, including specifically children at risk from missing, CSE, trafficking and gangs.</li> </ul> 9.4.2 Review and revise the Health and Wellbeing strategy to reflect the updated JSNA, setting out priorities based on the updated needs assessment. 9.4.3 Health and Wellbeing Board receives regular reports of identified issues. 9.4.4 Review membership of the JSNA officer working group, to ensure appropriate representation from agencies.	April 17	DPH	JSNA strategy group



ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between Jun 16 – Oct 17	Lead	Agency Involvement
9.5	Foster carers report feeling undervalued by the local authority and do not feel that they are considered as part of a professional team supporting children and young people. <b>Para 56 Rec 11</b>	9.5.1 Develop a foster carer academy to deliver, in partnership with learning providers, a range of courses, including professionally credited learning opportunities. 9.5.2 Set a target for all foster carers to be trained in 12 months, and ensure that there is a rolling count of new carers being trained. - Foster carers to have a personal development plan that is reviewed annually 9.5.3 Evaluate feedback and use to improve training 9.5.4 Provide an enhanced out of hours telephone support service using social work staff/ existing foster carers. 9.5.5 Develop a fostering support service for carers to access additional support particularly in the evenings and weekends	End Dec16	HOS C&R	Task and finish group
9.6	A new violence against women and girls Strategy is required.	9.6.1 Update and launch the multi-agency violence against women and girls Strategy 2016 - 2019. - The revised strategy will have clear outcomes and measures - Strategy to be monitored and report to Improvement Board.	Oct 16	AD SBSS	PP&S Partnership
9.7	Lack of planning and monitoring for the placement journey for children with complex and challenging behaviour. Children are placed in a variety of provisions without a clear focus on the outcomes to be achieved in the placement and/or the best provision to deliver outcomes	9.7.1 Develop a Placement Policy to ensure that children are placed in the right provision at the right time in order that their needs are addressed enabling them to move to family based care that will succeed. 9.7.2 Setup Placement Planning meetings with the Central Placements team and CSC; to set and then monitor targets/ outcomes with providers. 9.7.3 Develop a Business Development role with the central placements team to: - develop specialist resource and provider knowledge - facilitate the commissioning and negotiation of value for money services and high cost residential placements - guide and advice Placement Officers - work with providers - monitor outcomes with social workers and providers, ensuring placement plans stay on target.	Apr 17   Dec 16	DCom  HOS Placements and Brokerage	HOS C&R
9.8	Caseloads for Placement Officers and Brokers are too high. The LA is criticised by the courts for failing to provide appropriate and timely expert witnesses and commissioning information to enable cases to proceed within timescales.	9.8.1 Undertake a review to increase caseload capacity of Placement Officers and present a business case that: - reflects growth in cases in care proceedings and connected person's placements, and capacity for court timescales to be adhered to; - improves the commissioning of expert witnesses; - reduce delays in placement reviews and payment of allowances to connected persons; - provides capacity for identifying child focussed provision; - ensures carers receive support in a timely way. 9.8.2 Recruit additional posts, monitor activity and report outcomes.	Oct 16   Dec 16	DCom  HOS Placements and Brokerage	HOS S&CP

## Priority Nine – Strategic Commissioning

No.	Indicator	Type of Indicator	Source	Bromley 2015/16	Target 16/17	Target 17/18
9a	Number of initial enquiries from prospective foster carers	Ofsted	MI Report	251	TBC	TBC
9b	Number of newly approved foster carer households	Ofsted	MI Report	4	22	22
9c	Number of current LBB Foster Carer Households	Quality	MI Report	123	TBC	TBC
9d	% and number of foster carers with a personal development plan	Quality	Sample	New	TBC	TBC

## Priority Ten - Legal services

There has been drift in legal planning meetings and public law outline meetings being held in a timely way. The quality and timeliness of the legal advice and support to social workers is not consistent. Cases are not always presented in a competent manner or by lawyers with sufficient experience of advocating in particularly complex cases.

### Ofsted Recommendations:

**Recommendation 8** – Review the cases under the public law outline and in care proceedings to ensure that robust plans are in place and that cases are progressing at a pace that matches children's needs.

**Recommendation 9** - Improve the quality of legal advice to social workers and their managers to enable confident and effective presentation of care plans in court, to achieve the right outcomes for children and young people.

### Identified issues to be addressed:

- Comprehensive weaknesses in the quality of legal advice mean that local authority lawyers are not sufficiently experienced to advocate for children in complex care proceedings. Cases are not prepared thoroughly enough for court, and social work evidence is too often not strong enough to support the local authority's plan.
- Improve the quality of legal advice to social workers and their managers to enable confident and effective presentation of care plans in court, to achieve the right outcomes for children and young people.
- Managers in Bromley do not get good enough legal support in court. Because of this, childcare cases are not well prepared and do not always support plans for children's and young people's futures.
- There are significant weaknesses in the quality of the legal advice available to social workers and their managers. The public law outline (PLO) process is not used effectively, leading to too many children experiencing significant drift and delay in achieving permanence.
- The PLO process is not being used effectively to consider what evidence or assessments are needed to make early decisions about care plans.
- There are significant weaknesses in the quality of legal advice available to social workers and their managers, and this sets a threshold for intervention that is too high. This results in a lack of confidence in their analysis of risk and professional judgment. Consequently, there are delays in convening and reviewing legal planning meetings, and issuing proceedings.
- The judiciary expressed significant concern about the quality of the children's services' legal representation in court. The local authority does not instruct sufficiently experienced lawyers in complex cases. Representations have been made by the judge to the local authority on a number of occasions, with little impact or improvement. Evidence is not prepared well. There is a lack of understanding about what constitutes good evidence. Consequently, the PLO is implemented neither effectively nor quickly enough.
- There has been drift in legal planning meetings and public law outline meetings being held in a timely way.
- The quality of legal support and advice has not been consistent and has contributed to the delay in ensuring that children are protected from harm.

### Expected impact and outcomes of this plan:

- A suitably experienced and qualified legal team, with increased capacity, will provide good quality, timely support to the local authority.
- All legal action is taken in a timely way to ensure that children are not left in neglectful homes for too long and that permanency planning is undertaken in a timely way.
- Good legal advice will ensure there is good analysis of thresholds
- Confident and competent representation at court by experienced barristers to ensure the presentation of care plans is done in a way that achieves the right outcomes for children. Evidence will be well prepared.
- The PLO process is used effectively to make early decisions about care plans
- Legal planning meetings and public law outline meetings are tracked to ensure that timescales are met.

**Lead officer:** Director of Corporate Services

Priority Ten - Legal services					
ID	Issue (Ofsted Para & Rec)	Key Actions	Timescale between June 16 – Oct 17	Lead	Agency Involvement
10.1	Failure to convene or review timely legal planning meetings and to consider public law outline procedures soon enough. <b>Para 19 Rec 8</b>	<p>10.1.1 Review and update the PLO policy and process to include:</p> <ul style="list-style-type: none"> <li>- all legal planning meetings and public law outline meetings are tracked by the court manager and head of service.</li> <li>- Legal manager and head of service to agree any cases stepping down from PLO.</li> <li>- Monthly meetings to monitor progress, chaired by the Interim Director CSC, and for any escalations not resolved at a lower level to be discussed at this meeting.</li> <li>- Where the decision is made that threshold is met at a legal planning meeting, the PLO to be written by legal and sent to the parents and the PLO meeting to be held within 10 days.</li> <li>- The PLO to be reviewed within no longer than 6 weeks to ensure that progress is being made.</li> </ul> <p>10.1.2 PLO data to be reported in the performance digest.</p> <p>10.1.3 Monthly meetings have been agreed to monitor progress chaired by the Interim Director CSC and for any escalations not resolved at a lower level to be discussed at this meeting. To improve communication and resolution of any systemic problems between CSC and Legal Services</p>	<p>Aug 16</p> <p>Implemented</p> <p>May 16</p>	<p>HOS S&amp;CP</p> <p>DCS</p>	<p>LBB Court Manager HO LS</p>
10.2	Significant weaknesses in the quality of legal advice available to social workers and their managers <b>Para 50 Rec 9</b>	<p>10.2.1 Review current capacity in the legal team and outline plan to increase capacity to address the shortfalls in practice</p> <p>10.2.2 Explore viability of offering a secondment to the Head of Legal Team to Court Team on temporary basis.</p> <p>10.2.3 Undertake recruitment of a Group Manager, Deputy Manager and 6 Advanced Practitioners within the court team.</p> <p>10.2.4 Court Team to introduce service user feedback forms for</p> <ul style="list-style-type: none"> <li>- Social Work colleagues to measure satisfaction levels with Legal colleagues.</li> <li>- Legal colleagues to measure satisfaction levels with Social Work practice.</li> </ul> <p>10.2.5 Summary of feedback to be provided to DCS.</p>	<p>Sep 16</p> <p>End Aug 16</p> <p>End Oct 16</p> <p>Oct 16</p> <p>Dec 16</p>	<p>HO LS</p> <p>HOS S&amp;CP</p> <p>Court Manager</p>	<p>N/A</p>
10.3	The judiciary expressed significant concern about the quality of the children's services' legal representation in court. <b>Para 113 Rec 9</b>	<p>10.3.1 Barristers to be used in future care proceedings where appropriate to ensure that robust legal representation is provided</p> <p>10.3.2 Seek regular feedback from judiciary including meetings with Judge Redgrave about the local authority performance and any remedial action to be taken to ensure excellent court outcomes.</p>	<p>From Jun 16</p> <p>By Oct 16</p>	<p>HO LS</p>	<p>N/A</p>
10.4	Lawyers are not sufficiently experienced to advocate for children in complex care proceedings. <b>Para 51 Rec 9</b>	<p>10.4.1 Arrange a mandatory training and development programme for all lawyers within the Legal Team to include:</p> <ul style="list-style-type: none"> <li>- Law Society Children Panel</li> <li>- Higher rights of Audience</li> <li>- Advocacy</li> </ul> <p>10.4.2 Identify shadowing opportunities for all members of the legal team to undertake a minimum of twice/year.</p> <p>10.4.3 Identify mentoring opportunities for legal team members to develop their experience and confidence.</p> <p>10.4.4 Each legal team member to be given an individual personal development plan setting out clear steps needed to address the concerns raised by Ofsted.</p>	<p>April 17</p>	<p>HO LS</p>	<p>N/A</p>
10.5	Evidence is not prepared well. There is a lack of understanding about what constitutes good evidence. <b>Para 50 Rec 9</b>	<p>10.5.1 Undertake a legal audit of cases to identify those that have experienced drift or delay in proceeding to court.</p> <p>10.5.2 Undertake peer review to audit the sample of cases inspected by Ofsted and a final report to provide recommendations. Case audit to be completed by Camden.</p> <p>10.5.3 Review and update the case management system used by Legal Department to ensure it is fit for purpose.</p> <p>10.5.4 Provide quality assurance activity on court evidence and offer guidance and advice to social work teams on quality of work from within the legal.</p>	<p>Jul 16</p> <p>Jul – Sep 16</p> <p>Jul – Dec 16</p> <p>From Aug 16</p>	<p>DCOs</p> <p>HO LS</p>	<p>N/A</p>
10.6	<b>Para 50 Rec 9</b>	<p>10.6.1 Review and update the case management system used by Legal Department to ensure it is fit for purpose.</p>	<p>Nov 16</p>	<p>HO LS</p>	<p>N/A</p>

Priority Ten - Legal services (see appendix 1 page 47 for performance indicators)

No.	Indicator	Type of Indicator	Source	Bromley 2015/16	Target 16/17	Target 17/18
10a	Number of children currently in care proceedings	CafCass	MI Report	87	TBC	TBC
10b	Average number of weeks in care proceedings (per family)	CafCass	MI Report	36	26	26
10c	Number (and %) of Legal Planning Meetings not held within 5 working days	Quality	MI Report	New	TBC	TBC
10d	Number (and %) where Legal Planning meeting is held and PLO has taken place within 15 days.	Quality	MI Report	New	TBC	TBC
10e	Number (and %) of Public Law Outline meetings that have not taken place within 10 working days	Quality	MI Report	New	TBC	TBC
10f	Number (and %) of Public Law Outline Cases that have lasted longer than 6 weeks without a decision to go to Care Proceedings	Quality	MI Report	New	TBC	TBC
10g	% and Number of legal cases audited as good/ outstanding	Quality	Audit	New	TBC	TBC
10h	CSC satisfaction level with Legal Department	Quality	Sample	New	TBC	TBC
10i	Legal department satisfaction level with CSC	Quality	Sample	New	TBC	TBC

# Bromley Children's Social Care - Service Improvement Performance Measures (DRAFT)

## General profile for children and young people in Bromley - numbers and volumes

No.	Indicator	Type of Indicator	Source of data	Accumulation of data	Bromley 2015/16	Bromley 2014/15	National Average 2014/15	Statistical Neighbours 2014/15
1	Number of Children in Need	DfE	Carefirst	Snapshot	prov 2,390	2,258	total: 391,000	2,699
2	Children in Need per 10,000 population	DfE	Carefirst	Snapshot	334.3	315.9	337.3	316.2
3	Number of children currently subject to a Child Protection Plan	DfE	Carefirst	Snapshot	224	220	total: 49,700	398
4	Children subject to a Child Protection Plan per 10,000 population	DfE	Carefirst	Snapshot	31.3	30.8	42.9	41.7
5	Number of children currently Looked After	DfE	Carefirst	Snapshot	283	264	69,540	4,800
6	Children Looked After per 10,000 population	DfE	Carefirst	Snapshot	39.6	37.0	60	50

## Priority Two Management Oversight and Quality Assurance

No.	Indicator	Type of Indicator	Source of data	Accumulation of data	Bromley 2015/16	Bromley 2014/15	Target 16/17	Target 17/18	National Average 2014/15	Statistical Neighbours 2014/15
7	Average FTE days lost to sickness (all social care staff)	Local	HR System	Snapshot			6		-	-
8	Average FTE days lost to sickness (qualified social workers)	Local	HR System	Snapshot			6		-	-
9	Current turnover rate of qualified social care staff	DfE	HR System	Snapshot	17.3%				16%	25.1%
10	Current vacancy rate (qualified social workers)	DFE	HR System	Snapshot	18.2%				17%	19.5%
11	Number (and%) of vacant posts covered by agency staff									

## Prioity Four Safeguarding - Better Help and Protection

No.	Indicator	Type of Indicator	Source of data	Accumulation of data	Bromley 2015/16	Bromley 2014/15	Target 16/17	Target 17/18	National Average 2014/15	Statistical Neighbours 2014/15
12	Number and rate of Section 47 investigations commenced	DfE	CareFirst	In month	668 93.4	613 85.8			138.2	117.6
13	% of children with an up to date CIN plan	Local	TBC	TBC			100%	100%	-	-
14	% of Social Work assessments reviewed within 10 days	Local	CareFirst	In Month	85%	62%	85%	85%	-	-
15	% of Social Work assessments completed within 45 days	DfE	Carefirst	In month	81%	84%	81%	91%	81.5%	77.1%
16	% Referrals received within 12 months of a previous referral	DfE	CareFirst	Year to date	17.0%	18.4%	17%	17.0%	24%	22%
17	CIN Cases open for 2+years	DfE	CareFirst			35.4%	30%	27.3%	31.3%	34.8%
19	Number and rate of children who have had an Initial Child Protection Conference (ICPC)	DfE	CareFirst	In month	285 39.3	326 41.6			61.6	55.9
20	% of ICPCs held within 15 days of Section 47 investigation	DfE	CareFirst	In month	83%	67%	88.7%	88.7%	74.8%	75.3%
21	% ICPC not progressing to CP	Local	CareFirst	Year to date					-	-
22	% of CP Reviews held within timescale	DfE	CareFirst	Year to date	96%	97%	100%	100%	94%	92%
23	Number of children currently subject to a Child Protection Plan	DfE	Carefirst	Snapshot	224	220			total: 49,700	398
24	Number of children subject to a Child Protection Plan for 2 years+	DfE	CareFirst	Snapshot	12 (5.4%)		2%		2.3%	4.9%
25	Number and % of children becoming subject to a Child Protection Plan for a second or subsequent time	DfE	CareFirst	In month	50 (21%)	33 (13%)	17%	13%	16.6%	18.8%
26	Number of children ceasing to be subject to a Child Protection Plan	DfE	CareFirst	In month	291	218	Not applicable	Not applicable	-	-
27	Number and % of children ceasing to be subject to a Child Protection Plan who had been on a Plan continuously for 2 years+	DfE	CareFirst	In month	15 (6%)	3 (1%)	4%	3%	3.7%	5.3%

## Prioirty Five Supporting Children Looked After

No.	Indicator	Type of Indicator	Source of data	Accumulation of data	Bromley 2015/16	Bromley 2014/15	Target 16/17	Target 17/18	National Average 2014/15	Statistical Neighbours 2014/15
28	% Children Looked After currently under Section 20	DfE	CareFirst	Snapshot	39%	37%	30%	20%	29%	35%
29	% of children looked after placed in:								-	-
	Foster Care	DfE	Carefirst	Snapshot	69%	73%	75%	75%	75%	75%
	Residential Settings	DfE	Carefirst	Snapshot	13%	12%	10%	10%	12%	11%
	Independent living	DfE	Carefirst	Snapshot	11%	8%	15%	15%	-	-
30	Number of initial enquiries from prospective foster carers	Ofsted	Team	In month	216	251	Not applicable	Not applicable	-	-
31	Number of newly approved foster carer households	Ofsted	Team	In month	4	13	22	22	-	-
32	Number of current LBB Foster Carer Households	Local	Team	Snapshot	123	134	Not applicable	Not applicable	-	-
33	% of Children Looked After who have been in 3 or more placements during the year	DfE	Carefirst	Year to Date	10%	11%	8.5%	8.5%	10%	11%

No.	Indicator	Type of Indicator	Source of data	Accumulation of data	Bromley 2015/16	Bromley 2014/15	Target 16/17	Target 17/18	National Average 2014/15	Statistical Neighbours 2014/15
34	% of Children Looked After under the age of 16 who have been looked after for at least 2.5 years and who have been in the same placement for at least 2 years	DfE	Carefirst	Snapshot	69%	68%	71%	71%	68%	66%
35	% Children Looked After visits held within timescales	Local	Carefirst	Year to date	91%	n/a	100%	100%	-	-
37	% Children Looked After and Care Leavers with an up to date Pathway Plan	Local	TBC	Year to date	78%	n/a	100%	100%	-	-
38	% of new Children Looked After with an Initial Care Plan completed within 20 working days becoming Looked After	Local	TBC	Year to date	45%	n/a	100%	100%	-	-
39	% Children Looked After Reviews held within timescale	Local	CareFirst	Year to date	88%	93%	100%	100%	-	-

Theme 6 - Care Leavers and Young People

No.	Indicator	Type of Indicator	Source of data	Accumulation of data	Bromley 2015/16	Bromley 2014/15	Target 16/17	Target 17/18	National Average 2014/15	Statistical Neighbours 2014/15
40	% Care Leavers (age 17-21) who are in touch	Local	Carefirst	Year to date on Birthday*	83.4%	n/a	85%	90%	-	-
41	% All Young People (16-17) in Education Employment or Training (EET)	DFE	CCIS	In month	92.4%	91.2%	TBC		-	-
42	% All Young People (16-18) Not in Education Employment or Training (NEET)	DFE	CCIS	In month	3.8%	4.4%	5%	5%	5.3%	-
43	% All Young People (16-18) whose education, training and employment status is Not Known.	DFE	CCIS	In month	6.4%	5.7%	8%	8%	7.1%	-
45	% Care Leavers (age 17-21) in Education Employment or Training (EET)	DfE	Carefirst	Year to date on Birthday*	44%	48%	50%	55%	48%	50%
46	% Care Leavers (age 18-21) in Higher Education	DfE	Carefirst	Year to date on Birthday*	n/a	5%	8%	8%	6%	7%
47	% Care Leavers (age 17-21) in suitable accommodation	DfE	Carefirst	Year to date on Birthday*	73%	75%	85%	95%	81%	83%
48	% of Children Looked After placed outside of Bromley and more than 20 miles from where they used to live (excluding UASC and placed for adoption)	DfE	Carefirst	Snapshot	20%	21%	15%	10%	13%	14%
49	% of Care Leavers that have been in B&B beyond the statutory time period of 2 working days	DfE	Team	Snapshot	N/A	N/A	0	0	-	-
50	% Children Looked After and Care Leavers with an up to date Pathway Plan	Local	Carefirst	Year to date	78%	n/a	100%	100%	-	-

Priorty Seven Adoption Services

No.	Indicator	Type of Indicator	Source of data	Accumulation of data	Bromley 2015/16	Bromley 2014/15	Target 16/17	Target 17/18	National Average 2014/15	Statistical Neighbours 2014/15
51	Number and % of children ceasing to be Looked After who were adopted	DfE	CareFirst	Snapshot	15 10.9%	20 13%			16%	15%
52	Number of initial enquiries from prospective adopters		Team	In month	222	170	Not applicable	Not applicable	-	-
53	Number of newly approved adopters	ALB	Team	In month	11	17	15	20	2780	-
54	Number of currently approved Adopters	ALB	Team	Snapshot	13	13	Not applicable	Not applicable	-	-
55	The average time (days) between a child entering care and moving in with its adoptive family, for children who have been adopted (A1) (in year)	Local	CareFirst	Year to date	849	623			-	-
56	The average time (days) between a child entering care and moving in with its adoptive family, for children who have been adopted (A1) (3 year average)	Adoption Scorecard	CareFirst	Year to date	686	659	426	426	593	583
57	The average time (days) between a Local Authority receiving court authority to place a child and the Local Authority deciding on a match to an adoptive family (in year)	Local	CareFirst	Year to date	212	290			-	-
58	The average time (days) between a Local Authority receiving court authority to place a child and the Local Authority deciding on a match to an adoptive family (3 year average)	Adoption Scorecard	CareFirst	Year to date	260	252	121	121	223	212
59	Percentage of children who wait less than 15 months between entering care and moving in with their adoptive family (3 year average)	Adoption Scorecard	CareFirst	Year to date	35.4% (15 months)	42% (16 months)	50%	50%	47%	50%

Priorty Ten Legal Services

No.	Indicator	Type of Indicator	Source of data	Accumulation of data	Bromley 2015/16	Bromley 2014/15	Target 16/17	Target 17/18	National Average 2014/15	Statistical Neighbours 2014/15
60	Number of children currently in care proceedings	Cafcass	Team	Snapshot	87	N/A	Not applicable	Not applicable		
61	Average number of weeks in care proceedings (per family)	Cafcass	Team	Year to Date	36	33	26	26	30	-

## Appendix 2 - What this means for a Bromley Child

As part of the Children's Social Care Engagement Framework we will look at how the following methods could assist us in demonstrating that the actions within the improvement plan are making a difference. These include:

- General satisfaction feedback forms for both children and young people;
- Child Protection Conference evaluation forms for both children and young people;
- Children Looked After Review evaluation forms for both children and young people;
- Learning from complaints;

In addition to these we will also work with the Living in Care Council (LinCC) to find the best ways of measuring that the improvement actions are making things better. We will ask the members of the LinCC whether the following statements work

### **Children who need help and protection**

The child's wellbeing will be improved by the early intervention of appropriate services and support and alternative arrangements put in place where the identified change has not been made in the time identified. Welfare is promoted and immediate or planned action is taken to safeguard the child and make alternative arrangements where it is not possible for them to remain in the family.

*e.g. "I know that if someone tells children's social care they think I am at risk of being hurt, they will listen to that person and if they need more information, they will ask for it, and if there is a risk, they will give my case to a social worker to find out what is going on and to make sure I am safe. My social worker will make sure that they check regularly to see if things are improving and I can tell them how I feel and if I think things are worse or better".*

*"My social worker speaks to all of the family, and listens to what they say. Together we work out a plan to support my family to look after me and keep me safe".*

*"I know why I am in care and understand my family background."*

### **Children looked after and achieving permanence**

Children and young people live in a placement that is appropriate to their needs and promotes a sense of belonging enabling them to be exposed to a range of experiences that contribute to a positive childhood and where these experiences match those of their peers as much as is possible.

*e.g. "When it is not safe for me to be with my family my social worker listens to my views, and finds a safe place for me to stay as close as possible to Bromley so that I am not isolated from my friends, family and school. I know that when I see my family at Contact I will be safe because the staff will know about me and my family and be prepared for and supportive in the session".*

### **Adoption performance**

Children will be placed in stable homes with loving carers and have their needs met in a timely way and have good outcomes.

*e.g. "If I cannot live at home I know I will be looked after by someone else as a permanent part of the family where I will be loved and cared for."*

### **Experiences and progress of care leavers**

Young people making the transition to adulthood are able to do so in a safe and supported way and have access to a range of services that encourage and facilitate a route to sustainable employment and equips them to function successfully as adults.

*e.g. "As a young person leaving care I am prepared for adulthood, I can look after myself physically and practically and have been supported to find a good place to live. I have been encouraged and supported to achieve my potential in terms of education and have found employment. I feel ready for the rest of my life".*