Children's Improvement Plan – Phase 2

Foreword

Working together to improve services for children, young people and their families

Welcome to Phase 2 of our Improvement Plan.

The Four Themes of Improvement

| 1. Improving Quality | 2. Improving Implementation of Learning |
|--|---|
| | |
| Ensuring the right staff are in the right place at the right time to deliver a consistent standard of good quality safeguarding services to children and families. | Using what we know and learn to continuously improve and enhance the services we deliver for children and families. |
| 1.1 The Workforce | 2.1 Feedback from families, children and young people, staff and partners |
| 1.2 Practice Standards and Quality Assurance Framework | 2.2 Internal and external audits |
| 1.3 Ofsted Specific Concerns (note actions delivered as part of Phase 1 will be progressed and part of | 2.3 Research |
| embedding Practice Standards and Quality Assurance processes alongside performance monitoring.) | |
| 3. Improving Tools | 4. Improving Strategic Partnerships |
| Ensuring we have the right tools to enable the workforce to deliver good quality services for children and | Effective partnership working to enable the delivery of common goals and a high quality multi-agency |
| families. | response for children and families. |
| 3.1 Technology & IT systems | 4.1 Corporate Parenting |
| 3.2 Management and Performance Information 3.3 Effective, user friendly systems & processes that support the task | 4.2 Local Safeguarding Partnership 4.3 Corporate Services |
| 3.4 Corporate Services & Organisational Support – plans, policies and cultural change | 4.4 Strategic Commissioning |
| 3.4 Obiporate Ocivides & Organisational Support – plans, policies and cultural change | 4.5 Schools and settings |
| | 4.6 SLIP arrangements |

In addition to the themes of improvement each activity is colour coded to demonstrate strengthening of

| Strengthening |
|---------------------------|
| Corporate Leadership |
| Governance & Partnerships |
| Practice |
| Enablers & Resources |

Progress Key

| RAG Rating | Progress Status |
|------------|---|
| | Action complete |
| | Action not yet completed, but on track and will be completed to milestone |
| | Activity progressing with some issues but realistic plans in place to recover |
| | Action not on track, risk to implementation |

Priority 1 – Improving Quality

Our overall aim for this priority area: Ensuring the right staff are in the right place at the right time to deliver a consistent standard of good quality safeguarding services to children and families.

How we plan to improve this area of significant weakness – building on the work of phase 1 we will

| The Outcomes We Are Aiming For | Action Ref | Objective | The Actions We Are Taking | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/Impact |
|--|---------------|--|--|--|---|-------------------------|---|------------------|---|
| 1.1 A skilled, professional, competent workforce with adequate capacity to deliver high quality service to | 1.1.1 | There is adequate capacity and flexibility within the workforce to deliver high quality services to Children and Young People. | Review the Council's market position within the region and sub-region regarding pay and benefits for new and existing staff. | The Council will benchmark the Council's market position within the region and sub-region regarding pay and benefits for new and existing staff. | Executive Director of Corporate Resources and Customer Services | Corporate Leadership | Action not yet completed, but on track | March 2023 | There will be a clear analysis of current position, where possible, compared to neighbours. |
| our Children and Young People. Enabling a culture | | That staff remain committed to Sefton and feel that | Review staff terms & conditions relating to car mileage and car usage. | Staff will feedback that leadership listens and that there is improved retention of staff across the workforce. | Executive Director of Corporate Resources | Corporate Leadership | Action complete | January 2023 | Changes agreed to Essential Car User, mileage and retention payments |
| in which professional accountability is evident, leadership is strong, and practice is | | they can develop a fulfilling career. | Review annual retention payments. | | and Customer Services | Enablers & Resources | Action not yet completed, but on track | January 2024 | Recruitment and retention rates improve and contribute to reduction in agency rates in the next 12 months |
| purposeful. | | | Recruit to vacancies in Help & Protection. | There will be sufficient capacity and stability across the Help & Protection teams to secure a timely and appropriate response for children and young people. Staff graduating from the Social Work Academy will join Help & Protection. Social Workers will have manageable caseloads and children will receive a timely, consistent service to meet their needs, including outside of normal office hours. | Assistant Director Help & Protection | Enablers & Resources | Activity progressing with some issues but realistic plans in place to recover | October 2023 | Recruitment rates improve and contribute to reduction in agency rates in Help & Protection Target 85% Team Managers by October 2023 Target 70% Social Workers by October 2023 |
| | | | | Feedback from children and families is that they have developed long-term, trusting relationships with their Social Worker. | | | Activity progressing with some issues but realistic plans in place to recover | February 2024 | Turnover of staff and vacancy rate will reduce in Help & Protection |
| | <u> </u> | | Recruit to vacancies in | The performance and quality assurance | Assistant | Enablers & | Activity | March | Practice |

| The Outcomes We Are Aiming For | Action Ref | Objective | The Actions We Are Taking | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/Impact |
|--------------------------------|---------------|---|---|--|-----------------------------|---|---|---|---|
| | | | Safeguarding, Review and Quality Assurance including Practice Improvement Managers. | arrangements to support practice improvements, including managers, conference chairs and independent reviewing officers' (IROs) oversight and challenge will be improved. There will be resource available to provide | | Resources | progressing with some issues but realistic plans in place to recover | 2023 | Improvement Manager completed by March 2023. |
| | | | | the hub for quality assurance and learning activities generated from it, as well as all bespoke practice improvement activity | | | Activity progressing with some issues but realistic plans in place to recover | October 2023 | Vacancy rate in Safeguarding, Review and Quality Assurance will reduce and there will be reduced reliance on agency staff Target 100% Practice Improvement by June 2023 Target 85% Other roles by October 2023 |
| | | Recruit to vacancies in Cared For and Care Experienced. | There will be sufficient capacity and stability across the Cared For and Care Experienced teams to secure a timely and appropriate response for children and young people. Staff graduating from the Social Work Academy will join Cared For & Care Experienced team Social Workers will have manageable caseloads and children will receive a timely, consistent service to meet their | Director Cared For and Care Experience d | Enablers & Resources | Activity progressing with some issues but realistic plans in place to recover | October 2023 | Recruitment activity will secure required resources. Target 70% Team Managers by October 2023 Target 85% Social Workers by October 2023 | |
| | | | needs, including outside of normal office hours. Feedback from children and families is that they have developed long-term, trusting relationships with their Social Worker | | | Activity progressing with some issues but realistic plans in place to recover | September 2023 | Vacancy rate in Cared For and Care Experienced will reduce and there will be reduced reliance on agency staff | |
| | | | | | | | Activity progressing with some issues but realistic | January 2024 | Feedback from audits will evidence that managers have sufficient |

| The Outcomes We Are Aiming For | Action Ref | Objective | The Actions We Are Taking | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/Impact |
|--------------------------------|---------------|---|---|---|--|-------------------------|---|------------------------------|--|
| | | | | | | | plans in place to recover | | capacity to oversee and support practice so that services can be delivered effectively. |
| | | | Consider the recommendations from review of Business Support capacity within Children's Social care | There will be a Business Support team that supports the service to deliver good practice and monitor performance and risk. | Children's Leadership team | Enablers & Resources | Action not yet completed, but on track | June 2023 | Business Support capacity will be reconfigured. |
| | | | and implement required change. | | | | Action not yet completed, but on track | October 2023 | Business Support team supports the service to deliver good practice and monitor performance and risk. |
| | | | Realign Early Help resources to Children's Services | Resources will be realigned to Children's Services. | Executive Director People | Enablers & Resources | Action not yet completed, but on track | April 2023 | There will be an improved line of sight and a more flexible approach to resource deployment. |
| | | | Commission external diagnostic to review the Early Help offer to ensure its preventative capacity is maximised and resources aligned to Children's Services. Develop an Action Plan to implement Change. | Early Help services would adopt a new Family Help Model with teams of multi-disciplinary workers supporting families and individuals together working alongside other partners. | Executive Director of Children's Services | Practice | Action not yet completed, but on track | September 2023 | Diagnostic to be completed by April 2023. Change Plan developed 2023. |
| | 1.1.2 | All individual staff have the appropriate knowledge, skills and support and enable them to undertake their work in an effective way and to a good standard. | Deliver a Leadership and Management Training Programme for Executive/Assistant Directors and Service Managers. | There will be a common language across Children's Services, and to allocate tasks/work dependent on who is the best fit in terms of colour energies. | Executive Director of Children's Services | Enablers & Resources | Action complete Action not yet completed, but on track | December 2022 May 2023 | Executive/Assistant Directors will benefit from and make use of Insights Discovery Training Service Managers will benefit from and make use of Insights Discovery Training |
| | | | | | | | | | There will be a common language across Children's Services, and to |

| The Outcomes We Are Aiming For | Action Ref | Objective | The Actions We Are Taking | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/Impact |
|--|---------------|-----------|---|---|-------------------------------------|-------------------------|--|----------------|--|
| | | | | | | | | | allocate tasks/work dependent on who is the best fit in terms of colour energies. |
| | | | Develop and deliver a training programme for Team Managers that supports and enables them to manage and develop their teams in an | The mandatory training programme will equip Managers to deliver good supervision, ensure appropriate consideration of risk, robust decision making, that the voice of the child is | Director Safeguardi ng Review | Enablers & Resources | Action not yet completed, but on track | May 2023 | There will be a mandatory training and development programme for all Team Managers |
| | | | effective way. | strong and to work with their teams to improve practice and deliver continuous improvement. | | Practice | Action not yet completed, but on track | May 2023 | The quality of supervision will improve and the child's voice will be strong across Children's Services. |
| | | | | | | | | | Case file audits will identify there is an effective management footprint and supervision on case files preventing drift and delay. |
| 1.2 Practice Standards & Quality Assurance Framework Social care case work will be focused, timely and appropriate for the current situation within the family. The views of children and families will be | | • | on embedding the Practice | Children are helped and protected in a timely manner. Plans are SMART, reflect the views of the family and child(ren) and evidence multi-agency engagement in the plan. Children and young people plans will have specific actions with clear timescales. There will be evidence of securing parental consent prior to information-sharing in the multi-agency safeguarding hub (MASH). There will be evidence of analysis of | Assurance | Practice | Action not yet completed, but on track | September 2023 | There will be evidence that the timeliness of actions and interventions complies with Practice Standards. Case file and thematic audits demonstrate the variability of quality of Children In Need plans will be reduced. |
| taken into account in all of | | | | history when assessing concerns. | | | | | |

| The Outcomes We Are Aiming For | Action Ref | Objective | The Actions Taking | We Are | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/Impact |
|--|---------------|--|--|---|---|--|---------------|--|------------|---|
| our work. Social work interventions are evidenced clearly, coherently and in a meaningful way. | | | | | Compliance with Child Protection procedures will be evidenced through case file and thematic audits. There will be evidence that visits to children are responsive to need and risk, and that are purposeful, including life story work. | | | | | |
| There are clear processes in place to support families to access the appropriate service at the appropriate time. The quality all plans is at least consistently good. | | | | | Child Protection visits will be accurate, timely and risk assessments conducted on any visits out of timescale. Re-audit of S47 and Strategy Discussions will evidence improved recording, compliance with process increased multi-agency engagement. Commissioning of placements will be better informed. There will be evidence that the quality of practice improves the lives of vulnerable | | | | | |
| | | | | | children, young people and families. There will be a decrease in the number of children and young people entering care and being placed on Child Protection plans. There will be wider system benefits delivered such as improved attendance in schools. | | | | | |
| 1.3 Address Ofsted Specific Concerns To address areas of practice concerns highlighted by OFSTED (note Phase 1 of the Plan put in place a number of specific actions relating to | 1.3.1 | To improve the response to domestic abuse. | Strengthen practic domestic abuse ar restorative practice | nd embed | Social Workers will understand the complexities of domestic abuse. There will be evidence of good analysis of history when assessing concerns and strong safety planning. There will be evidence of professional curiosity, and decisions about next steps will be well informed. | Director Help & Protection | Practice | Action not yet completed, but on track | April 2023 | Quality Audits will identify improved practice. |
| concerns the impact of those actions will be assessed as part of QA and Performance processes) | 1.3.2 | To improve the access to care experienced support for those young people who are entitled to receive it. | Undertake a review Experienced Servi develop an action Planning for Leavir ensure processes are robust, safe ar young person's interest. | ce and plan for ng Care to and practice nd in the | Young people will be involved in developing their plan. Care experienced young people will have the skills and confidence they need to progress to adulthood successfully at a pace that is right for | Director Cared For and Care Experience d | Practice | Action not yet completed, but on track | June 2023 | Every eligible 16- year-old will have a Pathway Plan by the time they are 16 and 3 months. A resettlement passport will be in |

| The Outcomes We Are Aiming For | Action Ref | Objective | The Actions We Are Taking | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/Impact |
|--------------------------------|---------------|--|---|--|---|---------------------------------|--|---------------|---|
| | | | Raise awareness of the support available for care experienced young people with the wider children's workforce | them. Young people will have an increased understanding of the decision-making process. | | | | | place to support them to become ready for independent living. |
| | | | | | | Governance & Partnerships | Action not yet completed, but on track | June 2023 | Partners and the wider children's workforce will be aware of the support available for care experienced young people and be able to signpost young people to support and associated materials |
| | | | Planning for care experienced young people will be reviewed. | Care experienced young people will be supported to transition into a positive adult life. | | Practice | Action not yet completed, but on track | June 2023 | An Action Plan and working group will be created to address factors such as the role of the PA and the Local Offer. |
| | 1.3.3 | To improve the quality of Assessments. | Review the Assessment model and produce guidance material. | There will be evidence that the quality of assessments has improved. There will be evidence of a good understanding of risk and the child's broader needs being met at the earliest opportunity. There will be evidence of good analysis of history when assessing concerns. There will be evidence of professional curiosity, and decisions about next steps will be well informed. There will be evidence of partner information in assessments. | Director Help & Protection | Practice | Action not yet completed, but on track | April 2023 | The child's voice will be strong in assessments. There will be a reduced number of repeat assessments in the next 12 months. Step downs will be appropriate. |
| | 1.3.4 | To improve the out of hours response. | Review and redesign the Emergency Duty (EDT) operating model and practice approach. Deliver specific safeguarding training for the Emergency Duty team. | There will be evidence that the out of hours response is effective. Management oversight will ensure that children receive a timely, consistent service to meet their needs, including outside of normal office hours. | Assistant Director Help & Protection & Assistant Director Adult Social Care | Corporate Leadership | Action not yet completed, but on track | March 2023 | New operating model in place. |

Action 1 Milestones & Measures

| Reference | Milestone/Target that we will | Frequency | April 2023 | | | | October 2023 | | January 2023 | |
|-----------|--------------------------------------|-----------|------------|--------|---------------|--------|--------------------|--------|--------------|--------|
| | monitor | | 3 Months | _ | 6 Months | | 9 Months | | 12 Months | |
| | | | Target | Actual | Target | Actual | Target | Actual | Target | Actual |
| 1A | Recruit to Vacancies in Help & | NA | | | | | Team Managers | | | |
| | Protection | | | | | | 85% | | | |
| | | | | | | | Social Workers | | | |
| | | | | | | | 70% | | | |
| 1B | Recruit to Vacancies in Safeguarding | NA | | | 100% Practice | | Other roles | | | |
| | & Quality Assurance | | | | Improvement | | 85% | | | |
| 1C | Recruit to Vacancies in Cared For & | NA | | | | | Team Managers | | | |
| | Care Experienced | | | | | | 70% | | | |
| | | | | | | | Social Workers 85% | | | |
| | | | | | | | | | | |
| 1D | Supervision | Quarterly | Baseline | | TBC | | TBC | | TBC | |

Priority 2 – Implementation of Learning

Our overall aim for this priority area: Using what we know and learn to continuously improve and enhance the services we deliver for children and families

How we plan to improve this area of significant weakness building on the work of Phase 1 we will

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| The Outcomes | Action | Objective | The Actions We | How we will know it has worked | Responsible | Strengthening | RAG | Milestones | Output/ Impact |
| We Are Aiming | Ref | | Are Taking | | Lead Officer(s) | | Rating | | |
| 2.4 Faadbaak | 244 | Thore is uncombiguous | France of | Ctoff our our will domestate | Assistant | Enghlore 0 | Astion not | lanuam. | All Managers will |
| 2.1 Feedback from families. | 2.1.1 | There is unambiguous evidence of how feedback | | Staff surveys will demonstrate | Assistant Director | Enablers & | Action not | January 2023 | All Managers will |
| | | | | that the feel included in shaping | | Resources | yet | 2023 | be engaged in |
| | | from families, staff and partners has influenced | in auditing across the service with | change. | Safeguarding Review & | | completed, but on track | | auditing activity. |
| partners shapes | | • | | There will be evidence of bow | | | | April 2022 | There will be |
| how and what services we | | and shaped the delivery of operational and strategic | | There will be evidence of how suggestions from operational staff | 3 | | | April 2023 | |
| deliver, both at | | services. | coordinating, | have positively impacted on | | | yet completed, | | increased evidence that |
| an operational | | Services. | supporting and | | | | but on track | | impactful QA is |
| and at a | | | moderating. | improvement. | | | Dut Officack | | informing |
| Strategic level. | | | moderating. | improvement. | | | | | practice and |
| Otrategio level. | | | | There will be evidence that staff | | | | | improving |
| | | | | feel that their training and | | | | | outcomes for |
| | | | | development needs are | | | | | children and |
| | | | | recognised and have | | | | | families. |
| | | | | opportunities to develop so | | | | | |
| | | | | enabling them to deliver effective | | | Action not | October | Annual staff |
| | | | | services for children, young | | | yet | 2023 | survey will |
| | | | | people and their families. | | | completed, | | demonstrate a |
| | | | | | | | but on track | | learning culture. |
| | | | | Staff survey will evidence a | | | | | |
| | | | | learning culture | | | | | |
| | | | Ensure that practice | Processes / systems / working | | Practice | Action not | June 2023 | Feedback from |
| | | | and processes | practices will be adjusted | | | yet | | families is |
| | | | actively seek | | | | completed, | | recorded and |
| | | | feedback from | feedback from families. | | | but on track | | evidence of the |
| | | | children and families | | | | | | impact of |
| | | | | Families will receive a response | | | | | feedback can be |
| | | | • | | | | | | seen in case file |
| | | | or practice | | | | | | audits and at |
| | | | approaches and | | | | | | service |
| | | | considered in full. | | | | | | management |
| | | | | | | | | | team levels. |
| | | | Strengthen the | There will be evidence that Cared | Δeeistant | Enablers & | Action not | July 2023 | Report to |
| | | | | for Children and Young People | | | yet | July 2023 | Improvement |
| | | | | will have a place and channels to | | 1.00001000 | completed, | | Board. |
| | | | and young people. | have their voice heard and have | | | but on track | | 250.01 |
| | | | and joing pooplo. | an impact on policy development | | | Dat Off track | | |
| | | | | and implementation. | | | | | |
| 2.2. Audit | 2.2.1 | Case file auditing is | Implement learning | Audits will be completed in line | Assistant | Practice | Activity | March 2023 | Regular reports |
| | | , | | 1 | | | | | |

| The Outcomes We Are Aiming For | Action Ref | Objective | The Actions We Are Taking | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/ Impact |
|---|---------------|---|---|---|--|---------------------------------|--|------------------|---|
| frameworks and reviews are effective and there is evidence that learning from audit improves practice and influences service delivery | | undertaken regularly by the appropriate managers, recorded correctly and evidence of common theme's identified and actions plans to address deficits are implemented. | file auditing (tracking the child's journey) and multiagency thematic audits to improve the consistency and quality of safeguarding practice. | Themes from case file audit will influence future thematic audit programmes. Evidence of case file audit and follow up actions will be recorded on ICS case files. Learning from case file audit will improve operational social care | Quality Assurance | | progressing, some issues but realistic plans in place to recover | | to the Improvement Board will demonstrate improvement to the consistency and quality of safeguarding practice and addressing Ofsted concerns. |
| | | | Develop and implement an audit framework for Early Help Services. | Learning from audit will improve practice within Early Help Services. | Director Safeguarding Review & Quality Assurance | Enablers & Resources | yet completed, but on track | July 2023 | Early Help Audit Framework |
| | 2.2.2 | To ensure that lessons learnt are embedded into good practice. | outstanding SCRs | There will be evidence that lessons learnt are embedded in practice. | Safeguarding Partnership | Governance & Partnerships | Action not yet completed, but on track | January 2023 | Information shared with Commissioner |
| 2.3 Research improves practice and influences service delivery. | 2.3.1 | Appropriate staff regularly undertake research, and there is evidence of learning and actions plans to implement changes identified. | and research | There will be evidence of where research has influenced service delivery | | Enablers & Resources | Action not yet completed, but on track | November 2023 | Research will inform practice. |

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Note actions delivered as part of Phase 1 will be progressed and part of embedding Practice Standards and Quality Assurance processes alongside performance monitoring. The Improvement Board will receive regular reports that triangulate performance, quality assurance and practice.

| Reference | Milestone/Target that we will monitor | Frequency | January | 2023 | April 2023 3 | Months | July 2023 6 N | lonths | October Months | 2023 9 | January 2 Months | 2023 12 |
|------------|---------------------------------------|-----------|---------|--------|-----------------------------------|--------|-----------------------------------|--------|--|--------|-----------------------------------|---------|
| | | | Target | Actual | Target | Actual | Target | Actual | Target | Actual | Target | Actual |
| 2A | Staff Survey | Annual | | | | | | | Report to & Action Plan be produced | | | |
| 2B | Feedback from Families | Bi annual | | | | | Report to Improvement Board | | | | Report to Improvement Board | |
| 2 C | SCRs and LLRs review | NA | | | Report to Improvement Board | | | | | | | |



Priority 3 – Improving tools

Our overall aim for this priority area: Ensuring that we have the right tools to enable the workforce to deliver good quality services to children and families

How we plan to improve this area of significant weakness building on the work of Phase 1 we will

| The Outcomes | Action | Objective | The Actions | How we will know it has worked | Dooponoible | Strengthening | DAC | Milestones | Outrout Impost |
|--|---------------|--|---|--|---|---------------------------------|--|------------------|--|
| | Action Ref | Objective | The Actions We Are Taking | now we will know it has worked | Responsible Lead | gg | RAG Rating | Milestoffes | Output/ Impact |
| For | | | | | Officer(s) | | | | |
| 3.1 IT systems are fit for purpose and user friendly. LCS solutions are considered to support and enable | 3.1.1 | To identify where processes and the system need to be changed to improve case management. | Establish an ICT Improvement Group. | Changes to the ICT systems support the improvement of case management Systems and resources to provide a safe, coherent, and integrated service which makes children safer and improves children's outcomes | Assistant Director Safeguarding Review & Quality Assurance | Governance & Partnerships | Action Complete | November 2022 | There is a forum where priorities are agreed and progress of developments is tracked |
| consistent and effective social work practice. | | | development quick wins and develop a | ICT development quick wins will be implemented. There will be a clear, prioritised roadmap for future ICT developments that is owned by Children's Services. | | Enablers & Resources | Action not yet completed, but on track | January 2023 | Quick win roadmap agreed |
| | | To produce a suite of documents that support the workforce and children and families. | Use the completed gap analysis to develop a suite of process maps to improve case management. | There will be a suite of process maps and related documents that support the workforce and maps the child's journey. | Assistant Director Corporate Resources & Customer Services (Strategic | Enablers & Resources | Action not yet completed, but on track | June 2023 | Process Maps available for staff and shared on TriX. |
| | | | Coproduce with children and families a range of documents that support them. | There will be a suite of process maps and related documents that support children and families. | Support) | | Action not yet completed, but on track | October 2023 | Accessible information will be available for children and their families. |
| 3.2 Social Care managers have access to appropriate, live management and Performance information in a format that is meaningful and useful for | 3.2.1 | To ensure that the Leadership and Management teams Performance Management tools that support them to improve the quality of services and to identify opportunities for improvement, change and innovation. | Develop Service Area specific Performance dashboards. | The performance tool will | Assistant Director Safeguarding Review & Quality Assurance | Enablers & Resources | Action Complete | November 2022 | There will be a service area specific performance tool that includes previous six months' worth of performance information aligned to the CHAT |

| The Outcomes | Action | Objective | The Actions | How we will know it has worked | Responsible | Strengthening | RAG | Milestones | Output/ Impact |
|--|--------|---|---|--|--|-------------------------|--|------------------|---|
| We Are Aiming For | Ref | Objective | We Are Taking | riow we will know it has worked | Lead Officer(s) | | Rating | Milestories | |
| managing resource, shaping service planning and addressing risks and issues in a timely way. | | | Performance dashboards for and report to Children's Leadership team | | Assistant Director Safeguarding Review & Quality | Enablers & Resources | Action Complete | November 2022 | Evidence of learning from case file audits is captured consistently and systematically, and actions plans address service deficits in a timely way. |
| | | | Further develop Power Bi dashboards to enable leaders and managers to drill down to child level data. | Power Bi dashboards will enable managers to drill down to child level data. | | Enablers & Resources | Action not yet completed, but on track | May 2023 | Leaders and managers will be able to quickly drill down when investigating areas of concern |
| | 3.2.2 | To ensure that senior leaders have clear line of sight on children and young people most at risk. | embed processes and governance arrangements | There will be evidence of strong Transition planning and timely escalation into the Public Law Outline (PLO), as appropriate, which is reviewed and enhanced on a regular | Director Safeguarding Review & Quality | Practice | Action not yet completed, but on track | 2023 | Peer Review feedback received |
| | | | journey of | basis when circumstances change Times for Public Law Outline length of time on Child Protection Plans will be more appropriate for the needs of children and young people. | Assurance | | Action not yet completed, but on track | 2023 | Action Plan developed |
| | | | | | | | Action not yet completed, but on track | July 2023 | Action Plan progress reviewed |
| | 3.2.2 | To ensure a coherent and robust approach to service planning. To ensure staff, partners, and communities what Sefton's ambitions are for | agree Corporate Plan. | The Corporate Plan will articulate the vision for Children's Services. Services will be focused on achieving corporate priorities and there will be a shared understanding of areas of priority work across the Council | Chief Executive | Corporate Leadership | Action not yet completed, but on track | April 2023 | Council approve Corporate Plan |
| | | This involve proactive | Communications Plan that enables a cultural shift throughout the Council | Internal, external communications and marketing plans will articulate ambitions are for children and young people and for Children's Services. The impact of this will be visible in twelve months. | Executive | Corporate Leadership | Action not yet completed, but on track | · | Communications Plan |
| | | | Refresh the | The Council and partners will | Chief | Governance | Action not | June 2023 | Children & |

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| The Outcomes We Are Aiming For | Objective | The Actions We Are Taking | How we will know it | has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/ Impact |
|--------------------------------|-----------|--|---|----------------|-----------------------------------|-------------------------|--|------------|--|
| | | Children's & Young People's Plan | articulate priorities Services. | for Children's | Executive | & Partnerships | yet completed, but on track | | Young People's Plan |
| | | | Service Plans will Corporate Plan and Improvement Plan. | | | Corporate Leadership | Action not yet completed, but on track | May 2023 | Children's workforce has a shared understanding of areas of priority work across the Council and their Service Plan. |

Action 3 Milestones & Measures

| Reference | Milestone/Target that we will monitor | Frequency | January | 2023 | April : | 2023 3 | July 2023 6 Mo | onths | | | January 2023 | 12 Months |
|-----------|--|------------------|---------|--------|------------------|--------|--|--------|--|--------|--|-----------|
| | | | Target | Actual | Target | Actual | Target | Actual | Target | Actual | Target | Actual |
| 3A | Corporate Plan agreed | 3 yearly | | | Council approval | | | | | | | |
| 3B | Communications Plan | Annual | | | Plan Agreed | | | | | | | |
| 3C | Refresh Children & Young People's Plan | 2023 - 2025 | | | | | Council approval | | | | | |
| 3D | Service Plans in place | Quarterly review | | | | | Progress evidenced to Commissioner | | Progress evidenced to Commissioner | | Progress evidenced to Commissioner | |

Priority 4 – Improving Strategic Partnerships

Our overall aim for this priority area: Effective partnership working to enable the delivery of a high quality multiagency response for children and families

How we plan to improve this area of significant weakness building on the Work of Phase 1 we will

| The Outcomes We Are Aiming For | Action Ref | Objective | The Actions We Are Taking | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/ Impact |
|---|---------------|---|---|--|------------------------------------|---------------------------------|--|-------------------|---|
| 4.1 The Council and partners are ambitious, aspirational and active Corporate Parents | 4.1.1 | people and care | strengthen the collective responsibility of elected members, employees, and partner agencies, for | employees, and partner agencies will have a shared understanding of their duties as Corporate Parents and are active, strong and committed in this role. | for Children Lead Member | Partnerships | Action not yet completed, but on track | Ý | The Corporate Parenting ethos will be embedded across the Council and partner agencies |
| | | experienced young people supporting them to make a success of adult life. | educational standards and | and operational change that focuses on implementing change | | Practice | Action not yet completed, but on track | July 2023 | Children and young people in care and care experienced young people will be clear about what they can expect to receive from their Corporate Parents. |
| | 4.1.2 | | Review the Virtual School and Virtual School Governing Body. | The review will produce an Action Plan. | Assistant Director Education | Governance & Partnerships | yet | April 2023 | An Action Plan to strengthen the work of the Virtual School and Virtual School Governing Body. |
| | 4.1.3 | | Plan to strengthen the work of the Virtual School and | · | Assistant Director Education | Governance & Partnerships | yet | September 2023 | The Virtual School and governing body will work with others to raise standards and improve educational outcomes for children and young people. |

| The Outeeman | Astisus | Objective | The Actions Me Are | Harring will be on it has made d | Deeneneible | Strengthening | DAG | Milestones | O / // Immost |
|--|---------------|---|--|--|--------------------------------|---------------------------------|--|------------|--|
| The Outcomes We Are Aiming For | Action Ref | Objective | The Actions We Are Taking | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/ Impact |
| 4.2 That the improvements in practice are supported by the Local Safeguarding Partnership. | 4.2.1 | That partner agencies provide active support where required to the achievement of the Improvement Plan. | Plan to implement the changes identified by the review of the effectiveness of partnership arrangements. Prepare a report on work undertaken so far and its impact. | improving outcomes for children and young people. There will be evidence of good communication, information sharing and the application of thresholds and, where appropriate, ensure that escalation processes are followed. | | Governance & Partnerships | yet completed, but on track | April 2023 | Report to Improvement Board. |
| | 4.2.2 | Partners are aware of private fostering responsibilities. | | | Safeguarding Partnership | Practice | Action not yet completed, but on track | March 2023 | The Council will be notified about privately fostered children living in Sefton. |
| | 4.2.3 | To improve the quality of and timeliness of referrals to MASH. | the Multi-Agency Safeguarding Hub (MASH) operating | There will be evidence that referrals into the MASH are appropriate, contain sufficient information to enable the team to | | Governance & Partnerships | Action not yet completed, but on track | March 2023 | There will be sufficient partner resources in the MASH All referrals from partners will be timely |

| The Outcomes We Are Aiming For | Action Ref | Objective | The Actions We Are Taking | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/ Impact |
|--------------------------------|---------------|---|---|---|--|---------------------------------|--|------------------|---|
| | | | | There will be evidence that screening of contacts is robust, risks identified and professional curiosity is being demonstrated. | Safeguarding Partnership | Governance & Partnerships | Action not yet completed, but on track | May 2023 | There will be demonstrable improvement in the quality of referrals from partners. |
| | | | Review referrals on a regular basis and put in place a feedback loop and where required training when referrals are in appropriate. | referrals into the MASH are appropriate, contain sufficient information to enable the team to understand the nature of the | Assistant Director Help and Protection | Governance & Partnerships | Action not yet completed, but on track | May 2023 | Partners will learn from feedback and there will be continuous improvement in the quality of referrals. |
| | 4.2.4 | To ensure that there is a responsive and effective partnership response to Domestic Abuse for families with children. | partnership Action Plan. | Social workers and the wider children's safeguarding workforce will understand the complexity of Domestic Abuse and how to respond. Safety Plans will be multiagency and professionally owned. | Domestic Abuse Partnership | Governance & Partnerships | Action not yet completed, but on track | December 2023 | Implementation of the Domestic Abuse Action Plan. |
| | | | Deliver consent and safety planning training to Social Work teams. | | Assistant Director Help and Protection | Practice | Action not yet completed, but on track | February 2023 | Social workers will seek consent in appropriate circumstances, |
| | 4.2.5 | The partnership will have access to Joint Strategic Needs Assessment (JSNA) | Children's Chapter of the JSNA. | The Children's Chapter of the JSNA will include updated Children's Social Care information. | Corporate Resources | Corporate Leadership | Action Complete | November 2022 | JSNA Updated |
| | | that underpin social care practice and Safeguarding Partnership Board responsibilities, promoting the best possible outcomes for children and young people. | Remind the Council workforce and partners of the availability of the various chapters of the JSNA. | Partners will be aware of the relevant chapters of the JSNA – • Children's • Education • Youth Justice • Mental Health & Emotional Wellbeing | Safeguarding partnership | Governance & Partnerships | Action not yet completed, but on track | January 2023 | The Council and partners will understand the current and future health and care needs of local children to inform and guide the planning and commissioning of health, wellbeing and social care services within Sefton. |
| 4.3 Corporate Services, | 4.3.1 | Finance actively support Children | Adequate resources and tools will be | There will be robust financial controls in place. | Executive Director for | Corporate Leadership | Action complete | January 2023 | Budget proposals for |

| The Outcomes We Are Aiming | Action Ref | Objective | The Actions We Are Taking | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/ Impact |
|---|---------------|--|--|--|---|-------------------------|--|------------------|---|
| systems and mechanisms contribute directly to enabling good social work practice and the delivery of effective Safeguarding services in Sefton. | | Services in delivering effective services, and support budget reviewers and holders in managing limited resources effectively and efficiently within the current climate | budget holders and budget reviewers in | Effective service planning both in year and in support of multi-year | Customer Services Children's Services | Corporate Leadership | Action not yet | March 2023 | years 1 and 2 (2023/24 and 24/25) for Budget Council agreed with Executive Director Children's Services and included in budget plan Council approve budget |
| | | | | forward plan. Financial planning activity will consider sufficiency, workforce strategy and the Improvement Plan. | | Enablers & Resources | completed, but on track Action not yet completed, but on track | April 2023 | Budget holders/ reviewers will own and understand their responsibilities, be accountable and be able to manage budgets effectively |
| | | | | | | Corporate Leadership | Action not yet completed, but on track | February 2023 | Further Medium Term Financial Planning assumptions for years 3-5 will be reviewed with Executive Director Children's Services |
| | 4.3.2 | The recruitment of staff will be efficient; newly appointed staff will be able to start in post in a timely way | a targeted recruitment drive for | | Communications | Enablers & Resources | Action not yet completed, but on track | February 2023 | The recruitment of staff is underpinned by a marketing plan and supporting materials. |
| | | | managers will work | employees starting their new roles. | Leadership | Enablers & Resources | Action not yet completed, but on track | April 2023 | Recruitment rates improve and contribute to a reduction in agency rates |

| The Outcomes | Action | Objective | The Actions We Are | How we will know it has worked | Responsible | Strengthening | RAG | Milestones | Output/ Impact |
|--------------|--------|--|---|---|---|---------------------------------|---|-----------------|---|
| | Ref | | Taking | | Lead Officer(s) | | Rating | | |
| 1 01 | | | for new staff runs smoothly without delay. | | | | | | |
| | 4.3.3 | As staff graduate from the Social Work Academy their transition to new teams will be smooth. | | smooth transition. | Children's Leadership Team & Personnel | Enablers & Resources | Action not yet completed, but on track | August 2023 | Contribution to a reduction in agency rates. |
| | 4.3.4 | Scrutiny arrangements for Children's Services are robust and effective. | Identify and deliver additional training for members of Overview and Scrutiny committees. | Children's Services are robust and effective. | Chief Executive | Governance & Partnerships | Actions not yet completed, but on track | June 2023 | The Local Government Association deliver tailored training to Overview & Scrutiny |
| | 4.3.5 | | Improve Opposition party involvement in Children's Social Care. | evidence of political ownership of | Executive Director of Children's Services | Corporate Leadership | Action complete | January 2023 | The two Leaders of the main Opposition parties attend the Corporate Parenting Board |
| | 4.3.6 | To ensure that children and young people's voice, and engagement and coproduction with families is a central tenet of Council and partner strategies | Consultation & | 3 3 | Director of Corporate Resources and Customer Services | Governance & Partnerships | Action complete | January 2023 | New Consultation & Engagement Framework. |
| | | | | Children and young people have a strong voice in the development of Council and partner strategies. | All partners | Governance & Partnerships | Action not yet completed, but on track | January 2024 | There will be evidence of Children and young people having a strong voice in the development of Council and partner strategies. |
| 4.4 | 4.4.1 | To ensure that | Refresh the Cared | The Council and the market | Joint Sefton | Governance | Action not | February | Sufficiency |

| The Outcomes We Are Aiming For | Action Ref | Objective | The Actions We Are Taking | How we will know it has worked | Responsible Lead Officer(s) | Strengthening | RAG Rating | Milestones | Output/ Impact |
|---|---------------|---|---|---|---|---------------------------------|--|------------|--|
| Commissioned services provide sufficient care and support to meet the needs | | support to meet the needs of and improve outcomes for children | Sufficiency Strategy and develop a Delivery Plan. | understand the need for and the approach to securing sufficient accommodation that meets the needs of cared for children. | Executive Director Social Care and Health | & Partnerships | yet completed, but on track | 2023 | Strategy and Delivery Plan |
| of children and young people and enable continuous improvement in order to increase | 4.4.2 | and young people. | Deliver the Direct Purchasing Framework Mobilisation Plan. | | Joint Sefton NHS Place Director and Executive Director Social Care and Health | Governance & Partnerships | Action not yet completed, but on track | March 2023 | Dynamic Purchasing Framework operating |
| the positive outcomes achieved | 4.4.3 | To establish the options available for consideration with regards to in house | Explore the options for delivering in house provision. | that identifies the options available for consideration. | Assistant Director Cared For & care Experienced | Enablers & Resources | Action not yet completed, but on track | March 2023 | Business Case Produced |
| | | children's homes. | Consider the Business Case. | The Business Case will inform way forward and options will be considered as part of approved budget arrangements and the Medium Term Financial Planning process. | Chief Executive | Enablers & Resources | Action not yet completed, but on track | April 2023 | Business case considered |
| 4.5 Schools and Settings provide the care and support to meet the needs of children and young people and improve life chances | 4.5.1 | To ensure that children and young people have a sense of belonging in schools and other settings. | Develop a Belonging Strategy and Action Plan for schools and settings. | There will be an agreed strategy and action plan that aims to ensure that children and young people have a sense of being somewhere where they can be confident that that they will fit in and feel safe in their identity. | | Governance & Partnership | Action not yet completed, but on track | June 2023 | Strategy & Action Plan |
| 4.6 Improvement Support is effective | 4.6.1 | improvement support to include an experienced sector led | Commissioner to review and | SLIP support provides additional capacity in the delivery of improvements in social work and early help practice. | Director | Governance & Partnership | Action not yet completed, but on track | April 2023 | SLIP arrangements confirmed |

Action 4 Milestones & Measures

| Reference | Milestone/Target that we will monitor | Frequency | January | 2023 | April Months | 2023 3 | July 2023 | 6 Months | October Months | 2023 9 | January Months | 2023 12 |
|-----------|---------------------------------------|-----------|---------|--------|-----------------|--------|-----------|----------|-------------------|--------|-------------------|---------|
| | | | Target | Actual | Target | Actual | Target | Actual | Target | Actual | Target | Actual |
| 4A | Dental Visits Cared for Children | Quarterly | | | | | | | | | | |
| 4B | Mental Health Support Waiting | Quarterly | | | | | | | | | | |
| | Times | | | | | | | | | | | |
| 4C | % Police Referrals within 24 | Quarterly | | | | | | | | | | |
| | hours | | | | | | | | | | | |

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| 4D | Quality of Referrals to MASH | Quarterly | Baseline | | | |
|----|------------------------------|-----------|----------|--|--|--|
| 4E | Education Plans | Termly | | | | |

