

Public Document Pack

County Council

Meeting Venue
**Council Chamber - County Hall,
Llandrindod Wells**

Meeting date
Tuesday, 8 May 2018

Meeting time
10.30 am

For further information please contact
Stephen Boyd
01597 826374
steve.boyd@powys.gov.uk



County Hall
Llandrindod Wells
Powys
LD1 5LG

1 May 2018

The use of Welsh by participants is welcomed. If you wish to use Welsh please inform us by noon, two working days before the meeting

AGENDA

| | |
|-----------|------------------|
| 1. | APOLOGIES |
|-----------|------------------|

To receive apologies for absence.

| | |
|-----------|---------------------------------|
| 2. | DECLARATIONS OF INTEREST |
|-----------|---------------------------------|

To receive any declarations of interest from Members relating to items to be considered on the agenda.

| | |
|-----------|---|
| 3. | CIW INSPECTION OF ADULT SERVICES |
|-----------|---|

To receive and consider the Care Inspectorate Wales report on Adult Services (attached). A report on the Council's response will follow.

(Pages 3 - 34)

| | |
|-----------|---|
| 4. | CHILDREN'S SERVICES UPDATE: THE SECOND QUARTERLY IMPROVEMENT REPORT FOR WELSH GOVERNMENT |
|-----------|---|

To receive an update report on Children's Services. The Quarter 2 Improvement Report is attached. The Interim Director of Social Services latest monthly report for the Leader and the Chair of the Improvement and Assurance Board will follow.

(Pages 35 - 196)

Inspection of Adult Services Powys County Council

Mae'r ddogfen yma hefyd ar gael yn Gymraeg.
This document is also available in Welsh.

Contents

| | |
|-------------------------------------|----|
| Introduction | 4 |
| Overview | 5 |
| Recommendations | 8 |
| Access | 10 |
| Assessment | 14 |
| Care and support | 18 |
| Safeguarding | 21 |
| Leadership, management & governance | 24 |
| Methodology | 31 |
| Acknowledgements | 32 |

Introduction

Care Inspectorate Wales' (CIW) approach to inspection, engagement and performance review of local authority social services reflects the requirements of the Social Services and Well-Being (Wales) Act 2014 (SSWBA) associated with national well-being outcomes and quality standards issued in codes of practice by Welsh Government. Our inspection methodology emphasises engagement with people¹, including a clear focus on the extent to which services respect people's dignity, promote independence and are provided to Welsh-speaking people in their language of choice.

CIW undertook an inspection of adult social services in Powys County Council (PCC) during January 2018. This inspection was prompted by concerns raised by service users, members of the public, Assembly Members and issues we identified in our inspection of Powys children's services during July 2017.

This inspection looked at how adults, their families and carers access information advice and assistance services and are supported by care and support services. We focused on the extent to which people were signposted or diverted into early help or preventative provision and are supported to stay safe and maintain well-being and independence. We also focused on people's pathways into care and support services, with a specific focus on arrangements for adults at risk of harm or abuse.

Inspectors evaluated the quality of practice, decision making and multi-agency work in respect of the contribution made to the quality of outcomes achieved for people in need of assistance, care and support and/or protection.

This inspection also focused on determining whether the arrangements for leadership, management and governance provide a clear framework for effective safeguarding and service delivery in respect of people in need of help, care, support and/or protection.

The methodology (see appendix 1) used to undertake the inspection included a review of relevant policies, procedures and performance information; case file reviews; and interviews and focus groups with staff, managers, professionals from partner agencies and elected members. Where possible, inspectors talked to service users, their families and carers.

Inspectors were pleased to note senior managers accept our findings and have committed themselves to achieving the necessary improvements.

¹ The use of the term people throughout this report denotes variously and inclusively reference to adult service users (including potential and ex-service users) and their families and/or their carers.

Overview

We saw evidence that some people received good care and support from PCC, high staff morale and a commitment to improving services accompanied by an increase in resources. Urgent safeguarding referrals were dealt with swiftly and effectively. We also saw unacceptable inconsistencies in safeguarding practice and delays in people's journeys from first contacting PCC for assistance to receiving care, support or protection. These delays and inconsistencies have led CIW to have significant concerns about the ability of the local authority to ensure people living in Powys receive the care, support or protection they need in order to maximise their well-being and achieve good outcomes. Substantial improvements are required.

CIW's critical report into the local authority's children's services in July 2017 raised a number of wider issues about the leadership, management and governance arrangements of PCC. An Improvement Board was established with assistance from Welsh Government and the Welsh Local Government Association to support and monitor the progress of improvement. Prior to our inspection fieldwork, PCC had proactively sought to include its adult services improvement plan into the remit of the Improvement Board and had instigated changes to the membership and remit of this board. Subsequently an independently chaired Improvement and Assurance Board has been established with a revised terms of reference to oversee and coordinate the delivery of improvement at a corporate level and across social services.

Recent developments (April 2018) such as the broadened remit of the Improvement and Assurance Board, coupled with the appointment of a permanent statutory director of social services, should mitigate the risks inherent in the issues highlighted in this inspection report, and drive the improvements required to ensure positive outcomes for adults in need of care or support and their carers in Powys.

Access

The high number of abandoned calls by people attempting to contact Powys People Direct (PPD) means a significant number of people do not get consistent access to timely information, advice and support. Opportunities for people to have their voices heard are being missed, as are opportunities to prevent the need for further care and support.

Oversight and management of process and procedures are not sufficiently robust to support efficient work flows. Repeat calls from the public and partners and long waiting times to have calls answered are creating frustration for many people. Incomplete and inappropriate referrals from professionals are creating extra work for PPD staff. This is causing an avoidable drain on resources and preventing the service from reaching its full potential.

PPD has been under-resourced for a lengthy period. Although vacancies have recently been filled, including the crucial specialist social worker post, the level of experience and stability within the team remains fragile. As a service PPD is insufficiently understood, regarded and embedded into the wider health and social care system.

Assessment

Not all geographic areas of Powys have suitable arrangements in place for assessing need and determining people's eligibility for care and support or for assessing the support needs of carers. This means some people are waiting too long for assessment and support. Some of these delays are very significant. They have a negative impact on people, their carers and families and create a burden on other parts of the social and healthcare system.

Some people in Powys benefit from proportionate and strengths based assessments of their care and support needs. There was also evidence of involvement of people and their carers and families in the co-production of some assessments.

Overall we found insufficient recognition of the role managers need to perform in managing quality and workflows. This contributed to unacceptable delays both in allocation of work and between allocation and commencement of work. This means opportunities to prevent escalation of need are being missed, and some people are left more vulnerable than they need to be.

Care & support

There are many good quality care and support plans in Powys; most demonstrate positive engagement with people. Some could be improved with a renewed focus on strengths as outlined in the SSWBA.

We found the requirement to undertake reviews is often missed and this has a direct impact on the ability of people to have their voices heard and ensure services offered are a good use of resources.

Too many people were waiting an excessive amount of time for care and support to begin. Delays were having a negative effect on people and requirements under the SSWBA to promote independence, choice and well-being were not being met. The delays were also having a negative impact on other services in the health and social care system. Timely opportunities were not always taken to help people build upon their own strengths and capabilities and develop their ability to overcome barriers.

There was some noteworthy co-operation between frontline health and social care staff and a range of voluntary sector and community groups in Powys that made a good contribution to the health and wellbeing of residents in the county. However, it is not yet clear how the local authority's transformation programme intends to address current gaps in care and support services, or what plans were in place to ensure the voluntary and community sector can become more sustainable.

Safeguarding

Safeguarding referrals that explicitly articulated and clearly identified risks received a robust, timely response. In these cases there was evidence of intelligent working and well written comprehensive record keeping.

However, not all safeguarding referrals received a timely, proportionate and where appropriate well coordinated multi-agency response. There was a backlog of safeguarding work at screening and enquiry stages and an insufficient focus on multi-agency safeguarding discussions and meetings.

Adult safeguarding procedures were not sufficiently well embedded in Powys. This meant some vulnerable people did not always receive timely support nor gain the benefit of wider multi-agency professional experience from those who were best placed to support them and ensure their voices are heard.

Management oversight of the quality and timeliness of safeguarding was insufficiently robust. Data presented by managers was confused and incomplete and did not demonstrate how the service was meeting the requirements of the SSWBA.

Leadership, management & governance

Senior managers and elected members held a shared vision for improving safeguarding and for promoting services that supported people to lead independent lifestyles. They had also sought to strengthen commitment to effectively promote people's safety and wellbeing through increased investment in adult services. Delivery of this vision will require sustained corporate and political support to secure the improvements required.

Neither performance management arrangements nor quality assurance mechanisms were sufficiently well embedded to provide a thorough understanding of the difference that help, care and support and/or protection was making for people. Senior leaders need to improve their knowledge about performance to enable them to discharge their responsibilities more effectively.

High level plans, including joint plans, need to be translated into tangible action plans for the delivery of good quality and well integrated services. Strategies should be better disseminated throughout the workforce and more effectively implemented alongside partners. The authority needs to build on the relationships it has with partner agencies to ensure shared ownership of the direction for adult services, and also the operational drive needed to improve services and outcomes for people.

Recruitment and retention of the adult social services workforce presents some significant challenges. However, inspectors noted that advertisements to fill operational vacancies had been placed and the commitment of staff who have shown resilience and professionalism whilst coping with many changes. Managers, including senior managers, were seen as accessible but there needs to be stronger oversight of practice, more frequent and better quality staff supervision.

Recommendations

The recommendations below identify the key areas where post-inspection improvement and development work should be focused. They are intended to assist Powys County Council and its partners in their continuing improvement.

As a priority:

1. Senior leaders within the local authority must continue to provide strong political and corporate support for adult services to ensure service improvements are prioritised and sustained with pace.
2. The local authority must ensure all safeguarding enquiries are undertaken within statutory timescales to ensure all adults at risk of harm or abuse are adequately protected.
3. An assurance mechanism should be implemented immediately to ensure a clear management oversight and understanding of demand, capacity and prioritisation of workflow within the adult safeguarding system.
4. The local authority should strengthen the existing adult services improvement plan to ensure specific, clear and time-bound actions to improve access arrangements. This should include objectives to ensure sufficient management and staff capacity, contingency and expertise is in place to manage demand and to support good quality and timely decision making.
5. The local authority should urgently improve systems to ensure the management and prioritisation of allocation, assessment and service delivery to prevent delays in people receiving services.
6. A robust workforce strategy should be produced to include short, medium and long term plans for recruitment and retention of the adult services workforce. Permanent appointments are required in key posts to provide resilience and stability within the service.

Over the next 12 months:

7. Senior managers should refresh and re-invigorate their commitment to regional and local safeguarding arrangements.
8. Effective, multi-agency quality assurance systems, education and training arrangements should be established to ensure the quality of referrals to PPD are consistently aligned with the requirements of the SSWBA.
9. The quality of assessments and care plans must be improved to ensure they are consistently of a good quality, with a clear focus on well-being outcomes, risks, and risk mitigation ensuring clear timescales and accountabilities for actions.

10. The local authority should improve performance and/or contract management arrangements to inform their evaluation of the effectiveness of commissioned services to ensure people referred to community support services are not subject to drift and delay.
11. The quality, consistency and timeliness of record keeping must be improved; all staff and managers must ensure records are of good quality, up to date and systematically stored.
12. Performance management and quality assurance arrangements, including scrutiny of service demand and routine auditing of the quality of practice, needs to be embedded so that elected members and managers at all levels have timely, appropriate and accurate performance and quality information.
13. Senior managers and elected members should maintain an up-to-date understanding of the complexities and risks involved in delivering adult services, underpinned by accurate, timely performance management information, to assure themselves, partners, staff and communities that their responsibilities are discharged to maximum effect.
14. The local authority, jointly with partners, should take steps to ensure the speed of transformation is accelerated and undertaken in a way that fully engages staff and supports the meaningful involvement of service users and carers.
15. The local authority must strengthen the oversight of their response to complaints to improve reporting and analysis and ensure there is a mechanism to capture lessons learned.
16. Senior managers should take steps to improve the frequency and consistency of supervision for front line staff.

Next steps

CIW will expect PCC to review and revise the improvement plan for adult social services in response to this report's recommendations within 20 days of publication. The improvement plan will be monitored during our programme of inspection engagement and performance review throughout 2018/19.

Due to the significant concerns identified in this inspection, consideration will be given to undertaking a re-inspection of Powys adult services within 12–18 months from the publication of this report.

1. Access arrangements

What we expect to see

The local authority works with partner organisations to provide timely access to information, advice and assistance which enables people and their carers to determine the outcomes they wish to achieve and consider how best to manage their wellbeing. Effective signposting and referring provides people with choice about support and services available in their locality, particularly preventative services. Information about eligibility for care and support services is available. Arrangements are effective in delaying or preventing the need for care and support. The service listens to people, it begins with and maintains a focus on what matters to them. Access arrangements to statutory social services provision are understood by partners and the people engaging with the service and are operating effectively.

Context

Powys People Direct (PPD) has been the single point of access (SPOA) for adult services since April 2015. The team is geographically centralised in Llandrindod Wells. PPD performs a number of key functions including accepting initial enquires and referrals; providing a range of local information and advice to callers; and connecting callers to teams across the service.

PPD is managed by a senior manager who also has responsibility for safeguarding arrangements across the county. The team consists of 12 contact officers, who have relevant experience in housing, advice services and community support. The contact officers are supported by a team leader, a post that was newly created in October 2017. There is a specialist social worker post in the team which has been vacant for several months. Three (2.5 full time equivalent) safeguarding designated lead managers (DLM) are situated in the same room as the contact officers.

Summary of findings

- 1.1. People who need information, advice and assistance can contact PPD by telephone, email or post. The local authority website also provides the same information about adult services as well as signposting people to information, advice and support from other agencies, including the third sector. All information is available bilingually and telephone callers are offered a service in Welsh or English prior to being connected. There are no specific arrangements in place to support enquirers/referrers with sensory loss.
- 1.2. Between October and December 2017 the average waiting time for calls to PPD to be answered varied between 3.33 and 4.45 minutes. Many callers waited significantly longer. During our observation of PPD, inspectors saw calls go unanswered for as long as 20–25 minutes. We were also told by carers and partners that they sometimes have to wait 20 minutes to have their calls answered. Many partners expressed frustration with the difficulties and time delays they experienced when attempting to discuss referrals with

PPD. Data held by the authority indicates that a high proportion of calls were abandoned.

Table 1: Proportion of incoming call to PPD abandoned Oct – Dec 2017

| | Incoming calls | Abandoned calls | % abandoned calls |
|----------|-----------------------|------------------------|--------------------------|
| Oct 2017 | 3422 | 943 | 27.6 |
| Nov 2017 | 3496 | 1314 | 37.6 |
| Dec 2017 | 2411 | 1053 | 43.8 |

- 1.3. The lack of capacity within the service to handle new calls and take referrals indicates people are not always getting timely access to the information, advice and assistance they need. Whilst we found no evidence to suggest otherwise, we cannot rule out that opportunities to protect vulnerable individuals are also being missed.
- 1.4. PPD staff told us they receive a high proportion of repeat callers because the enquirer/referrer has not received a response from the team or service they have been forwarded to. This was borne out by partner agencies who also expressed frustration that they did not receive feedback about the referrals they had made and were often unaware how, if at all, these had been progressed.
- 1.5. Duplication of work uses up resources available in the team and reduces capacity to take calls, undertake meaningful conversations and produce necessary case-recording. Lengthy delays in responding to calls also created stress and anger for people and partners attempting to access information or services, and increased their frustration with staff when they did eventually make contact.
- 1.6. The generic referral form on the website is lengthy, cumbersome and difficult to navigate; it is particularly unsuitable for professionals who, as a consequence, tell us they make more telephone referrals than they need to. The authority acknowledged the need to redesign a version of the referral form that is both more accessible and fit for purpose for all users.
- 1.7. The full impact of the poor telephone response rates and the unwieldiness of the online form on people attempting to access information and/or services is impossible to objectively quantify. At best a significant amount of people's time is wasted; at worst it is possible that potential safeguarding concerns are not responded to.
- 1.8. Although contact officer vacancies have recently been filled, the proportion of inexperienced staff amongst this cohort remains high. Also at the time of our field work there was significant lack of experienced social work capacity within PPD. The specialist social work post remained vacant. There had been some contingency cover for the specialist social worker vacancy, but these arrangements have been unsatisfactory and inconsistent.

- 1.9. We found there was inadequate social work expertise available within the team to ensure contact officers received support to make rapid evaluations of complex referrals, or to make timely responses to referrers. The limited support and direction for contact officers has also led to referral information being forwarded to functional teams which lacked detail and was variable in quality.
- 1.10. Despite on-going workload pressures, contact officers told us their morale is high. Contact officers have received consistent training to support them to undertake their role. Contact officers have received safeguarding training and the senior manager is confident in their capability to recognise safeguarding referrals and to respond appropriately by handing these off rapidly to the DLMS for on-going enquiries.
- 1.11. Some contact officers had received limited “what matters conversations” training and some PPD staff could articulate a good understanding of the requirement to elicit people’s desired outcomes. However, they also told us the pressure of calls waiting often prevents them spending sufficient time undertaking “what matters conversations”. This practice is, as yet, insufficiently well-embedded in PPD.
- 1.12. It is recognised by the senior manager that because of the pressures on the service, contact officers have not always received supervision to a consistently high standard. Nevertheless, contact officers tell us they are well supported by their team leader who acknowledges deficits within the service and is keen to make improvements.
- 1.13. PPD staff and managers told us the quality of many referrals received from other partners is poor. They cite a lack of appreciation and understanding from partners of the SSWBA. As a consequence contact officers spend excessive time verifying and clarifying information which reduces their capacity to undertake key activities more directly aimed at supporting people.
- 1.14. Contact officers confidently use directories and online resources to support sharing information and signposting people to relevant services. However, we heard from staff in locality teams that due to the centralised nature of PPD, contact officers are often less familiar with local provision and this can be detrimental to the advice they are able to offer people who could benefit from access to relevant provision within their own communities. To address this, community connectors have been jointly commissioned by PCC and Powys Teaching Health Board (PTHB), employed by Powys Association of Voluntary Services (PAVO) to work across the county to assist people to access local facilities within their own communities. As this service gathers momentum, it is anticipated more people will benefit from their local knowledge and expertise.
- 1.15. It was positive that the authority provides and commissions a range of preventative services including reablement services, befriending, transport,

respite and self-help services. However, inspectors were concerned about inconsistent capacity and contingency planning to ensure community based services were consistently able to meet demand and complexity of need. People were not reliably being offered timely assistance and as a result opportunities to support reablement and to maintain independence were too often missed.

- 1.16. Evidence from complaints and testimony from partners, service users and carers indicated that delays in access arrangements were contributing to the distress felt by people at times when they are at their most vulnerable. These delays also represent a missed opportunity on the part of the adult health and social care sector to reduce further demands on services.
- 1.17. Overall, we found management oversight of the quality and timeliness of access arrangements was insufficiently robust in terms of challenge and quality control. We did not see evidence of escalation of the issues to senior managers nor did we see pro-active attempts by senior managers to introduce effective contingencies to alleviate pressures within PPD.
- 1.18. We did find strengths in PPD such as the dedication and enthusiasm of the workforce who despite on-going pressure continued to provide to the best of their ability. However, as PPD is the “front door” to Powys adult services it is of concern to inspectors that it has been operating with significant deficits for a lengthy period. We recognised that PCC had recently (January 2018) commissioned and internal review of the PPD service and senior managers acknowledged awareness of many of our findings. We are concerned by the lack of dedicated, clear and time-bound objectives within the adult services improvement plan with respect to access arrangements and the apparent lack of urgency from senior management to address the problems.

2. Assessment

What we expect to see

All people entitled to an assessment of their care and support needs receive one in their preferred language. All carers who appear to have support needs are offered carers needs assessment, regardless of the type of care provided, their financial means or the level of support that may be needed. People experience a timely assessment of their needs which promotes their independence and ability to exercise choice. Assessments have regard to the personal outcomes and views, wishes and feelings of the person subject of the assessment and that of relevant others. This is in so far as is reasonably practicable and consistent with promoting their wellbeing and safety and that of others. Assessments provide a clear understanding of what will happen next and result in a plan relevant to identified needs. Recommended actions, designed to achieve the outcomes that matter to people, are identified and include all those that can be met through community based or preventative services as well as specialist provision.

Context

Assessments of care and support needs and support for carers are undertaken by staff within functional teams (Older People, Disability and Mental Health) based at five main locations across the county. Requests for assessment are forwarded to the teams from PPD and work is allocated from within the functional teams. The majority of assessments of care and support needs and support for carers are undertaken by social workers, although this work is supplemented and supported by specialist workers such as Occupational Therapists (OT) and Approved Mental Health Professionals (AMHP).

Summary of findings

- 2.1. We found a mixed picture in respect of the quality of referral information received from PPD. Some referrals assisted prioritisation and allocation of assessment work; others did not. PPD contact officers told us they did not always have time to liaise with partners to improve on referral information initially provided. Inspectors noted personal information as required by the national minimum core data set² was populated in the vast majority of case files reviewed.
- 2.2. Despite the availability of clear process guidance we found variation in practice for transferring work between PPD and functional teams. We were told about poor communication between teams with some information from enquiries being received piecemeal by team managers rather than as a consolidated referral.

² Common baseline for information collection for all assessments across Wales: *Code of Practice on assessing the needs of individuals*, issued under Section 145 of the Social Services and Well-being (Wales) Act 2014

- 2.3. Amongst other factors, such as demand and capacity issues in PPD, interrupted work flow was often attributed to staff and managers' differing understanding of methods for entering referrals/allocations onto and retrieving them from the Welsh Community Care Information System (WCCIS). Staff told us training in the use of WCCIS had been incomplete and much of their learning was through trial and error. Some new staff had not received training on WCCIS at all. Our review of case-files evidenced many inconsistencies in the use of WCCIS.
- 2.4. We found unacceptable delays in the allocation of work and also between allocation and commencement of assessment. Lengths of delays varied considerably across Powys. While some teams provided both timely allocation and assessment, others did not.
- 2.5. We saw many cases where people waited over one month for an assessment and a significant minority of people who waited much longer than this. We have particular concerns about delays in allocation for mental health and sensory loss services as well as delays in commencing assessments by services for older people and occupational therapy in the south of the county. Delays such as these can have a severe impact on people's well-being, independence and/or safety.
- 2.6. We did not see any evidence within case files that people were supported or signposted to other services during these delays. Neither were we reassured that waiting times were always informed by a systematic approach to prioritisation. We saw little evidence of the constructive use of available performance information to support management oversight and prioritisation of waiting times.
- 2.7. Delays in allocation of work in functional teams also created additional pressure on PPD as people and professionals chase-up/re-refer. Staff from functional teams informed us they attempt to keep people informed about delays by letter and phone calls once allocation has taken place, but due to pressure of work this is not always possible.
- 2.8. Last year, aware of the backlog of assessments, senior managers commissioned a private agency to undertake some assessments. Whilst this had limited impact in addressing people's need for care and support, managers drew on learning and further work was commissioned with clearer expectations leading to improved effectiveness. Nevertheless, some of the commissioned assessments were not strengths-based and required more work to comply with the SSWBA.
- 2.9. Inspectors noted proposed changes to the service structure, including the introduction of assistant team managers and proposals for increased social work staffing in older people's teams, with the purpose of building resilience and providing additional support. However, inspectors question the lack of pace with which these changes are being progressed and urge rapid completion of the recruitment process to fill vacant posts across the county.

- 2.10. Generally we found staff undertaking assessment work had been appropriately trained and were confident in their ability to recognise and take appropriate action in respect of safeguarding issues. Most staff had received an introduction to the SSWBA and a significant cohort received “what matters conversations” or “progression model” training. Some staff had also undertaken the “what matters train the trainer” course and there is a plan to use these staff to cascade this training more widely.
- 2.11. The majority of staff we spoke to could clearly articulate differences in the way they approached assessment now compared to before implementation of the SSWBA. Team managers told us they had observed an overall improvement in quality of assessments since the implementation of this training.
- 2.12. We found the quality of assessments was variable. We saw some good assessments that were proportionate, strength-based and demonstrated engagement with people. We also saw evidence of “what matters conversations” having taken place with a focus on people being supported to identify their own well-being outcomes. Generally, the service users we spoke to said they had felt involved in the assessment process.
- 2.13. Finalised assessment documents are not routinely shared with people. Inspectors noted this is more likely to happen in teams where there is effective business support for social workers in place.
- 2.14. We also saw evidence of some positive joint working between health and social care staff to support assessments; for example reablement teams, development of the virtual wards scheme and multi-agency working at hospitals in Welshpool and Shrewsbury.
- 2.15. We found some assessments would have benefitted from a more explicit risk analysis, clearer contingency planning and a more overt explanation of eligibility decisions. Evidence from our case file review also suggests assessment of service users’ finances alongside an explanation of relevant service charges was not always carried out when it should have been.
- 2.16. We also found a variable approach to undertaking carers’ assessments. Some assessors missed the opportunity to identify family members as carers and did not offer assessments. We saw one example of a failure to identify a young carer. Some carers told us their perception was that social workers were too busy and did not have capacity to undertake an assessment of their needs. Others said they felt they needed to chase and fight hard for their own support needs to be recognised.
- 2.17. Where assessments of the person cared for did take account of carers, they did not result in offers of support for carers often enough. The impact of this being in some cases carers became unwell themselves and additional demands were made on services as a result.

- 2.18. The quality of case recording throughout the assessment process was inadequate to identify how the case was being progressed. In a small number of case files, assessments were incorrectly stored on WCCIS. Consequently, duty staff or new staff taking over a case were hampered from swiftly understanding needs and risks. This was of particular significance for some teams given the high level of churn within their workforce.
- 2.19. Overall, we found management oversight of the quality and timeliness of assessment was insufficiently robust. Whilst we did see some evidence in individual case notes of oversight, this was limited and lacked rigour in respect of challenge and quality control.

3. Care & support

What we expect to see

People experience timely and effective multi-agency care, support, help and protection to meet assessed need. People using services are supported through co-produced care and support plans which promote their independence, choice and wellbeing, help keep them safe and reflect the outcomes that are important to them. People are helped to build on their strengths and capabilities and develop their ability to overcome barriers to wellbeing.

Context

Care and support for adults and support for carers is provided by staff based within functional teams (Older People, Disability and Mental Health) located at five main sites across the county. The Reablement service is managed as a countywide provision with service delivery organised from four locations across the county.

The local authority commissions domiciliary care services from various providers across the county with approximately 9% provided by the local authority's in-house service. Numerous, often very local, voluntary groups and services around the county provide support to people.

Summary of findings

- 3.1. In the majority of cases we reviewed, where a care and support plan was in place, plans were good quality. Most plans reflected people's preferences and demonstrated their engagement in the plan's production. Most service users and carers we spoke to told us they felt involved in planning, and the services they received were appropriate and promoted their safety and wellbeing.
- 3.2. Contrary to the aims of the SSWBA, not all plans were sufficiently strengths-based and many focused disproportionately on service user needs at the expense of well-being outcomes to be achieved. We recognise this is a difficult balance to achieve and inspectors saw some examples of care and support services being effectively delivered with identified outcomes within plans being met.
- 3.3. Service users were not always provided with copies of their care plans and their agreement of their plans was not generally recorded.
- 3.4. We also found areas of the county where there are delays of several weeks before assessments translate into the delivery of care and support. On one date in January 2018 there were 46 people in the community who had been assessed as needing either reablement or domiciliary care services, all of whom were waiting for their service to commence. A further 12 people were delayed in hospital waiting for a home care package to commence. Frequently the impact of these delays has a significant negative impact on service users, whose health and well-being may deteriorate, and on their

families who are caused undue stress that may impact on their own wellbeing.

- 3.5. Whilst we saw some good evidence of responsive reassessment or reviews of care plans in light of changing circumstances, we did not see evidence of timely scheduled reviews. Neither did we see evidence that outcomes were always updated when a review had taken place. Staff told us that whilst challenging generally they found their caseloads manageable although this often did not include sufficient capacity to review and update care plans as frequently as required. .
- 3.6. We found only limited systematic management oversight and prioritisation of waiting lists and work load. Despite team managers' having the facility to review the volume of people waiting for care packages on their desktop dashboards, this management responsibility was not seen as a priority. The reason given was insufficient time and insufficient staff to allocate work to.
- 3.7. We did not see evidence of team managers escalating concerns about lack of capacity, or senior managers pro-actively requesting reports about pressure points within the system. This lack of information exchange limited capacity to rapidly mitigate immediate difficulties, and impacts negatively on planning and commissioning future service provision.
- 3.8. Many partners and service providers described difficulties in contacting and communicating with social workers and other staff either directly or via PPD. Some staff were reported to be unresponsive in respect of confirming care and support arrangements for people. The lack of response was often attributed to the demands of high workloads and technology rather than lack of commitment, but nevertheless poor communication between partners too often resulted in further delays in people receiving care and support.
- 3.9. Equally we found evidence of good communication and co-operation between health and social care staff. Examples were given of joint work which improved communication between professionals and outcomes for people, such as direct telephone consultations between clinical lead nurses and service managers; teleconferences held three times a week to share health and social care information concerning reablement allocations; and a pilot integrated health and social care team in the south of the county. Learning from these good examples needs to be shared more widely across health and social care services in the county.
- 3.10. Despite having staff designated carers' champions within functional teams, we saw little evidence of consistent support for carers. Feedback from carers suggested access to and regularity of support was very much dependent on the individual knowledge, commitment and experience of workers and was inconsistent as a consequence.
- 3.11. Some carers were benefiting from support offered by Credu, the main organisation commissioned by the authority to support carers. The Credu service was described as very good by a number of carers we spoke to. We

also observed a Credu worker make good use of a “what matters conversation” to help resolve a challenging situation that arose during the inspection.

- 3.12. We saw significant take-up of Direct Payments with some positive examples of people using the opportunity to tailor care and support to meet their specific circumstances. We were told there has been an improvement in the delivery of Direct Payments.
- 3.13. We found some evidence of wider community support services, often provided locally by the third sector, making a very positive difference to people’s lives. However these services, whilst robust in some parts of the county, were more fragmented in others. People told us in some areas community services are just not available or operational when they are needed. It was acknowledged by community connectors that now their service is established there is scope for further work to address gaps in services. More consistent and tailored support is required to enable voluntary and community services to reach a point where they become comprehensive and sustainable.
- 3.14. The authority would benefit from a more systematic approach to quality assurance and monitoring arrangements of community services that includes the quality of decision making and feedback from people using services. There was an absence of good quality performance information to assist the authority to make informed judgements about the effectiveness of commissioned and “in-house” services, or to evaluate the value for money each were providing.
- 3.15. Third sector providers were generally positive about the support they received from senior managers. However, they did comment on their frustration with the lack of timely communication about future funding arrangements to enable them to manage their staffing commitments and their budgets effectively.
- 3.16. Overall, we found management oversight of the quality and timeliness of care planning was insufficiently robust in terms of challenge and quality control. Whilst we did see some limited evidence in case notes of discussions between managers and practitioners, these did not provide assurance of adequate oversight across caseloads.
- 3.17. Along with workforce issues particularly in the south of the county, many staff and managers cited the rurality of the county as the main cause of the limited capacity of some services; attitudes were often stoic and accepting of these limitations. Whilst these are clearly challenging and important factors which may impede service delivery, they are not unique to Powys. More innovative solutions, contingency planning and workforce resilience are urgently required to alleviate the pressures on services.

4. Safeguarding

What we expect to see

Effective local safeguarding strategies combine both preventative and protective elements. Where people are experiencing or are at risk of abuse, neglect or harm, they receive timely, proportionate and well-coordinated multi-agency responses. Actions arising from risk management or protection plans are successful in reducing actual or potential risk. People are not left unsupported in unsafe or dangerous environments. Policies and procedures in relation to safeguarding and protection are well understood and embedded and contribute to a timely and proportionate response to presenting concerns. The local authority and its partners sponsor a learning culture where change to and improvement of professional performance and agency behaviours can be explored in an open and constructive manner.

Context

Powys adult protection team consists of 2.5 DLMs based in PPD alongside contact officers, specialist social worker and appointeeship/deputyship officer and deprivation of liberty (DoLS) coordinator. All staff report to the contact and safeguarding senior manager. Team managers and senior practitioners in functional teams also undertake the DLM role on an “as and when” basis. The role of the adult protection team is to manage and oversee the majority of safeguarding referrals.

PCC is a member of Collaborative Working and Maintaining Partnership in Adult Safeguarding (CWMPAS), the Mid and West Wales Regional Safeguarding Adults Board.

Summary of findings

- 4.1. All safeguarding referrals are routed through PPD. The majority of referrals come from professionals and/or providers, using a pre-designated format (VA1); these are received by contact officers and are passed immediately to the adult protection team. Concerns are also reported by the public.
- 4.2. Where there were obvious indicators of risk, contact officers passed these immediately to the adult protection team for a response. However, when risks were less obvious, contact officers were less confident and needed more support. Although contact officers reported that generally DLMs were readily accessible to provide such support, in their absence this support has not been consistently available to them. This has been exacerbated by the specialist social worker vacancy.
- 4.3. We were reassured that urgent and obvious referrals received a timely and robust response but some safeguarding decisions are not timely. We did not see evidence of a systematic process for allocation of safeguarding work, either within the adult protection team or throughout the dispersed cohort of DLMs. We found delays of up to a month between a referral being made and action being taken. More work is required before we can have confidence

that between receipt of referral and appropriate response all adults at risk are adequately protected.

- 4.4. We were told that both an increase in volume of inappropriate/incomplete referrals and lack of clarity of process was hindering timely management of safeguarding referrals. We found the lack of clarity around screening of referrals in PPD, and lack of capacity within other social care teams to undertake the DLM role, also contributed to delays.
- 4.5. Feedback was not routinely provided to partners who made safeguarding referrals. Partners chasing safeguarding referrals created further demand on PPD.
- 4.6. We were not confident that strategy discussions and meetings were always timely nor that all relevant partners were involved. However, from the small sample of meetings we reviewed, we found the standard of recording was good and relevant actions shared with those involved. We also saw examples of good timely work by a DLM which successfully addressed repeat episodes of poor care that was putting a service user at risk.
- 4.7. The adult protection team benefits from the experience of a range of professionals. However, there is a lack of professional social work perspective and operational social work experience in the team. This means responses can be too narrow in focus and opportunities to improve situations for people missed.
- 4.8. Understanding the difference between incidents of poor care and actual or potential risk of harm or abuse was not sufficiently developed amongst partners, providers or consistently within the adult protection team. As a result, inappropriate referrals were placing additional demands on the service. Inspectors recognised the contribution that the current development of an “Adults At Risk Threshold” document led by the regional safeguarding board should have on alleviating these issues. Nevertheless, more work to educate partners and providers to improve their understanding of safeguarding thresholds would have a positive impact on demand.
- 4.9. We found the adult protection team somewhat detached from other teams. The lack of a robust process for notifying and involving case holders in safeguarding referrals is to the detriment of the integrity of the safeguarding process and the detriment of the service user who should be receiving timely support from a care coordinator who knows them best.
- 4.10. Where there were safeguarding concerns about an individual without a current allocated care coordinator (review only), the way in which WCCIS raised electronic alerts was not effective and therefore presented a missed opportunity to meet the duty to offer a review or reassessment to someone who appears to be in need. The lack of connection between safeguarding and functional teams suggests the requirement to include safeguarding actions into care and support plans is also being missed.

- 4.11. Management oversight of the quality and timeliness of safeguarding is insufficiently robust. Despite the availability of team caseload within the WCCIS management dashboard we did not see robust use of this facility (or any other) by senior managers, to ensure equitable workloads, quality assurance or management of workflow.
- 4.12. Performance data was incomplete and lacked context. Managers were not able to explain the strengths and weaknesses within the process or the progress of cases through the service. Work is required to ensure managers fully understand the steps within the safeguarding process and to more effectively identify where pressure points are impacting on the quality of safeguarding outcomes for people.
- 4.13. PCC's commitment to the regional adult safeguarding board has been variable. At an operational level there has been positive engagement by Powys staff in the development of relevant policies and guidance documents. However, attendance at the board by senior managers has been inconsistent and the requirement to submit relevant data to the board has not been complied with for the last two quarters. A similar lack of attendance at the local operation safeguarding group was also noted by partners and inspectors and was acknowledged by managers.
- 4.14. Lack of commitment at the most senior level to regional safeguarding arrangements has impacted negatively on the focus and prioritisation given to the protection of people at risk across the county at the corporate level. Combined with the failure to submit required data, poor attendance has reduced the support and understanding of best practice that the regional arrangement provides.

5. Leadership, management & governance

Direction of services

What we expect to see

Leadership, management and governance arrangements comply with statutory guidance and together establish an effective strategy for the delivery of good quality services that effectively promote wellbeing and support people to achieve the outcomes that matter for them. Meeting people's needs and the delivery of quality services are a clear focus for councillors, managers and staff. Services are well-led, direction is clear and the leadership of change is strong. Roles and responsibilities throughout the organisation are clear. The authority works with partners to deliver help, care and support for people and fulfils its corporate parenting responsibilities. Involvement of local people is effective. Leaders, managers and elected members have sufficient knowledge and understanding of practice and performance to enable them to discharge their responsibilities effectively.

Context

Adult services sit within the social services directorate of Powys County Council. The service is led by two heads of service: an operational lead with responsibility for service management and a transformation lead with responsibility for commissioning and change. Both heads of service report directly to the director of social services (DSS). At the time of this inspection, key local authority leadership roles were covered either by acting or interim arrangements. Both the chief executive officer (CEO) and the head of adult services (operational) had been in acting positions since October 2017. The DSS had been in an interim role for a similar period. The post of head of adult services (transformation) was filled by the permanent post-holder.

Summary of findings

- 5.1. Powys adult services have been subject to frequent changes of management and reliance on interim positions for several years. This lack of stability in crucial leadership roles has had an impact on the authority's capability to both disseminate a clear and consistent vision for adult social services to staff and partners, and to provide safe, reliable and good quality services to citizens.
- 5.2. We heard consistently from senior managers and elected members that findings from the recent CIW report about children's services had given the local authority cause for concern and the impact on the authority has been substantial.
- 5.3. Senior managers from across the authority and elected members provided a consensual view that improvements in social services are now the concern of the whole council. It was positive that a corporate safeguarding policy had been introduced and a corporate safeguarding group established.

- 5.4. Senior managers and elected members met weekly to review any obstacles to improvement and to take stock of progress. We were informed of improved cooperation between departments. Examples included assistance to adult services from housing to undertake a review of the fabric of some residential care facilities; workforce and development to develop and deliver staff training; and business services to improve data analysis. It was anticipated this would result in adult services being more effectively supported to deliver its functions.
- 5.5. We noted a willingness and commitment to improve adult services. This was evidenced by cabinet approval of the adult services improvement plan and corresponding budgetary uplift.
- 5.6. However, not all senior managers or elected members could clearly articulate the changes required to transform services in alignment with the requirements of the SSWBA. Nor did we see strategies for change being effectively shared with staff with staff or effectively implemented alongside or partners.
- 5.7. We did hear about some changes; for example the implementation of the befriending service and the introduction of community connectors. Also planned change, such as: an increase in extra care provision and step-up/down services, as well as innovative ideas about more effective use of accommodation and housing provision to both strengthen individual independence and to support local community resilience. We also saw evidence of dynamic use of demographic data to model requirements for future residential services. We found it too early to evidence any direct improvements to service delivery as a consequence.
- 5.8. We found that neither senior managers nor elected members had a comprehensive knowledge of what was happening at the 'front-line' and therefore were insufficiently well sighted on how well people were being helped, supported and/or protected. As a consequence senior managers were often too slow to respond to areas of service instability. Both elected members and managers need to improve their knowledge about practice and performance to enable them to discharge their responsibilities more effectively.
- 5.9. The scrutiny committee members we spoke to understood their challenge role and had a grasp of some relevant issues in social care. However, we found elected members need to develop better mechanisms to understand what is happening in services and to hold senior managers to account. The recently published PCC performance management framework (January 2018) should assist with oversight.
- 5.10. Quality assurance and performance management arrangements in adult services were not robust. We found management information was not sufficient to systematically provide an up-to-date view of performance.

Neither was performance information routinely used by managers to challenge performance, prioritise the provision of services to manage delays, or to drive improvement in the quality of services people receive.

- 5.11. Case file auditing by managers across adult services was not compliant with the authority's own quality assurance policy. We found routine auditing was not embedded into core business nor were results from audit used to identify themes and drive improvement. Consequently, neither the use of performance information nor quality assurance monitoring contributed effectively to continuous improvement.
- 5.12. The authority had recognised a deficiency in this area and had recently taken action to bolster staff capacity to address this. It is too early to know whether additional capacity and the implementation of the new performance management framework will lead more robust processes to identify and investigate performance issues.
- 5.13. We found the records kept on complaints indicate the majority of responses received by complainants were not compliant with relevant guidance. Although it was clear in many responses that efforts had been made to resolve issues, we found that the process of investigating complaints was not robust.
- 5.14. We noted complaints statistics were shared with senior managers for discussion but there was no consistent mechanism for highlighting learning points or for effectively disseminating these to inform service improvement.

Shaping and commissioning of services

What we expect to see

Services are designed and commissioned to improve the outcomes and wellbeing of people, as well as improving the efficiency and effectiveness of service delivery.

Service delivery should be focused on:

- improving care and support, ensuring people have more say and control;
- improving outcomes and health and wellbeing;
- providing coordinated, person centered care and support; and
- making more effective use of resources, skills and expertise.

Work with partners in shaping the pattern and delivery of services is informed by the views and experiences of people who use or may need to use services. The local authority should make a full contribution to establishing, managing and developing the regional partnership board with the local health board. Strategic plans are informed by a regional assessment of the wellbeing needs of the local population and are converted into commissioning arrangements which provide safe, quality services and deliver best value. There should be an integrated approach to the development of care and support services, which focus on opportunities for prevention and early intervention, between the local authority, the local health board and wider partners including the development of new models of delivery such as social enterprise and cooperatives. People benefit from services which:

- meet their assessed needs;
- are quality-assured against clear standards;
- are developed in partnership; and
- provide choice.

Summary of findings

- 5.15. Notwithstanding, effective arrangements for the development of joint high level plans the authority needs to build on the relationships it has with the health board and other partner agencies to ensure a genuinely shared ownership of the strategic direction for adult services, and to support the operational drive needed to improve services and outcomes for people.
- 5.16. The Regional Partnership Board (RPB) was seen as a vehicle to drive improved partnership working with a view to more integrated working. However, we found the work of the board under-developed and the level of trust required between partners was not yet sufficiently well established to achieve effective results.
- 5.17. Work completed with partners on population assessment was sound, and together with the Health & Social Care Wellbeing Strategy was providing a platform for the development of future adult services. Some work had already been initiated with partners to develop joint initiatives, such as trials of integrated teams, virtual wards and the deployment of community connectors. In addition, Intermediate Care Funded projects had been established to address emergency home support and falls.

- 5.18. We found only limited evidence that the requirements of the SSWBA were well understood by partners. Information, advice and assistance services were seen too narrowly as a social services responsibility. Further work needs to be undertaken to overcome barriers to improve joint working.
- 5.19. Senior managers and partners acknowledged they still had much to do to shape their aspirations for transforming adult services into a modern and integrated service. We found the focus to date had been too much on developing high level plans and not enough on action.
- 5.20. We did not see evidence of a clear and consistent approach to involving the public and commissioned and third sector partners in planning and reviewing of services. However, commissioning and communications managers could describe some consultation exercises that had taken place with the public in respect of the Health and Care Strategy and concerning the future of day centres and accommodation services. Also with providers, for example in respect of the development of a dynamic purchasing system for domiciliary care services.
- 5.21. It was positive that a social values forum had recently been convened; a group brought together jointly by adult services and PAVO to explore the use of social value based services such as cooperatives and social enterprises. Nevertheless more work is required to achieve a fully cohesive approach to capitalising on the contribution of the third sector to shaping services.
- 5.22. We did not see evidence of a clear and consistent approach to involving users of services and carers in the planning and reviewing of services. We observed the older people's forum to be mainly a channel for communication outwards from adult services with an ad hoc agenda and without a business programme, although it was reported the group had fed into a project on the remodeling of residential services.
- 5.23. Although the local authority commissions support for carers from Ceredigion there is no active forum to engage carers in the planning or review of services for carers.
- 5.24. Communications officers described work underway to develop an adult social care engagement strategy. They also supported attendance by citizen representatives at the RPB and issued an ongoing customer satisfaction survey of domiciliary care services. However, significantly more pro-active work was required to achieve cross-cutting meaningful engagement with people in respect of the contributions they could make to shaping adult services in Powys.

Workforce

What we expect to see

Services are delivered by a suitably qualified, experienced and competent workforce that is able to recognise and respond to need in a timely and effective way. The council is able to ensure that staff and services meet the standards that have been set for them. Services and support improve outcomes for people.

Summary of findings

- 5.25. It is to the credit of the vast majority of the workforce interviewed during the inspection that despite the many challenges faced by the service, staff are enthusiastic, committed, enjoy working for Powys and their morale is high. This was supported by responses to the staff survey issued by CIW.
- 5.26. The recruitment and management of the adult social care workforce presents a mixed picture; the workforce in the north of the county is quite stable, but in the south there is significant instability, particularly across social worker, occupational therapy and reablement services.
- 5.27. We identified a significant vulnerability at middle and senior management tiers of the workforce. This not only impacted on the consistency of management oversight and decision making but also created uncertainty for staff about the direction of travel for the service.
- 5.28. High sickness/absence rates within adult services had exacerbated pressures within the workforce. Reliance on short-term contracts for agency staff, whilst being a constructive approach to alleviate staff absences had compounded inconsistencies in practice and decision making to the detriment of people receiving services. Many of the complaints seen by inspectors echoed concerns around frequent changes of social worker and poor communication.
- 5.29. We found formal staff supervision to be inconsistent across the county and between teams. Fewer than half of the social care workforce receives regular monthly supervision. Whilst some staff reported regular, good quality supervision we also saw evidence of very lengthy gaps between episodes of formal supervision for many staff.
- 5.30. Good peer support was evident and many staff reported that they found their managers accessible and supportive despite challenging workloads.
- 5.31. There are many training opportunities in adult services, although staff working in less stable parts of the service expressed a view that it is difficult to find the time to attend training when the service is under so much pressure.
- 5.32. Although work was underway to develop a workforce strategy, at the time of inspection the authority remains hampered in its ability to map the strengths

of its workforce and thereby build a service to meet demand. Strategies for recruitment, retention and succession planning are a priority to ensure future service stability and capacity to deliver the changes necessary to improve outcomes for people.

Methodology

Self assessment

The local authority completed a self assessment in advance of the fieldwork stage of the inspection. The authority was asked to provide evidence against '*what we expect to see*' under each key dimension inspected. The information was used to shape the detailed lines of enquiry for the inspection.

Staff survey

An electronic survey was administered to all staff in Powys adult services seeking their views on a range of issues with respect to the service and their experiences of working within it. 115 staff submitted responses.

Sample selection

We selected a case file sample for case review and tracking from a specification of all referral/enquiries, including safeguarding referrals and assessment work undertaken between 01/09/2017 and 30/11/2017, and all cases that had an ongoing care and support plan which began between 01/10/2016 and 31/12/2016.

Fieldwork

We were on site during the weeks commencing 15th and 29th January 2018³.

We reviewed 57 cases of which we tracked 30 in more depth. We interviewed 28 allocated case managers (or a delegate [4]); 11 service users and carers; and 5 other professionals who had involvement in the work. We undertook and observation of the work of PPD.

We interviewed a range of local authority staff and managers including senior officers and the chief executive. We also undertook interviews with elected members including the leader of the council, chair of scrutiny and the portfolio lead for adult services. Auditors from Wales Audit Office supported CIW in facilitating a small selection of these meetings.

We interviewed a broad range of partner organisations, representing both statutory and third sector agencies and we attended several service user/carers focus groups.

We looked at all complaints and compliments that were made about adult services between 01/06/2017 and 30/11/2017.

We reviewed a small sample of staff supervision notes where supervision had been undertaken between 01/06/2017 and 30/11/2017.

Inspection Team: Lead Inspector: Bobbie Jones. Supporting Inspectors (CIW): Christine Jones, Denise Moultrie, Richard Leggett and Catherine Poulter. Supporting Inspectors (WAO): Justine Morgan, Colin Davies

³ Individual team members were on site for additional days during weeks commenting: 22/01/2018 and 05/02/2018

Acknowledgements

CIW would like to thank the people who contributed to the inspection: service users; families and carers; staff and managers of Powys County Council; and service providers and partner organisations (including the independent and third sector) for their time, cooperation and contributions to this inspection.



Children's Services
Second Quarterly Improvement Report
January to March 2018

17th April, 2018

Contents

| | Page |
|---|-------------|
| Summary | 3 |
| Introduction | 9 |
| Progress report: | |
| A. Corporate Parenting, Leadership and Governance | 12 |
| B. Safeguarding, Practice and Quality Assurance | 15 |
| C. Workforce | 18 |
| D. Reshaping and Reforming Services | 21 |
| Appendix 1 Performance Report for 2017/18 | |
| Appendix 2 Improvement Programme for Children's Services 2017-2020 | |
| Appendix 3 Improvement Plan for Children's Services 2017-2020 | |

Summary

1. The Council fully accepted the findings in the inspection report published on 17 October and the subsequent warning notices issued by Welsh Government. It quickly acknowledged the need for urgent and sustained change which would demonstrate both a genuine commitment to safeguarding children in Powys and also deliver effective systems for helping them to achieve positive well-being outcomes.
2. The First Quarterly Improvement Report, submitted to the Minister for Children and Social Care in January 2018, set out the considerable activity that had taken place across the Council between October and December to secure greater compliance with statutory requirements and practice standards. The Council had acted to:
 - use the expertise and knowledge available within the Improvement Board to support change within key aspects of the improvement plan, such as fieldwork practice and fostering;
 - strengthen governance arrangements, including the introduction of a very strong independent Improvement Board chaired by a former local authority Chief Executive who has experience of leading a council subject to intervention;
 - engage the council's whole extended leadership team in this work;
 - recruit more social workers (going above establishment in frontline teams) and creating additional in areas such as Powys People Direct, the fostering and adoption services, quality assurance and business management.
 - put in place highly experienced senior leadership for children's services and social services as a whole;
 - develop plans for reshaping services with our partners;
 - improve HR, IT and performance monitoring systems;
 - produce a financial plan that incorporates a safe and sustainable budget for children's services;
 - agree a Corporate Safeguarding Policy, which sets out the steps that the Council as a whole will take to protect and safeguard children and adults at risk, and set up a Corporate Safeguarding Group chaired by the Chief Executive and including both the portfolio holders for social services;
 - demonstrate renewed commitment to engaging effectively with the Regional Safeguarding Board, the Regional Partnership Board, the Children and Young People's Partnership and structures for national working in areas such as fostering and adoption so that we can benefit more from partnership working and external accountability.
3. During the second quarter, this work has been expanded, consolidated and developed further. One of the key tasks was to produce, on time, the second iteration of the Council's children's services three-year improvement programme and plan. The improvement programme framework document describes: our overall purpose; what good looks like; the four key improvement aims; our improvement model; partnership working; and governance and leadership arrangements. It outlines the need for an absolute focus on professional practice but also work to

reform and reshape a wide range of services, both within the directorate but also at a corporate level. In keeping with the stated aims, we committed to generating radical change across the whole pathway in children's services.

4. These documents are regarded by the Council and the Improvement Board as an effective and comprehensive response to all the recommendations in the inspection report. Actions are:
 - specific and clear;
 - timely;
 - realistic and prioritised;
 - grounded in performance data, wherever possible;
 - resourced in terms of budget, governance and commitment;
 - sufficient and long-term enough to provide strategic direction;
 - attributed to staff who have the capacity and competency to deliver what is required.
5. The Chief Inspector responded to submission of the programme and plan as follows. *It is clear from the documentation provided that senior leaders understand the scale of the transformation required. It is positive to note the commitment of elected members, staff and partners to personal and corporate accountability for improving outcomes for vulnerable children and their families in Powys.*
6. The improvement programme and plan form the basis for a three-year programme of change. Our goal is to move Powys in that time from the position set out in the inspection report to a place of real strength and exemplary performance. We adopted an approach to planning which involves all parts of the Council working together. It sought also to define the contribution that can be made by the Children and Young People Partnership (CYPP) and other collaborative groups such as the Regional Safeguarding Board. We believe that this approach will encourage the collective and distributed leadership and ownership of the plan that will sustain our efforts into the long-term.
7. We recognise that delivering such an ambitious plan requires the Council to make this our top priority, not only in terms of work to make progress in children's services but also in taking corporate ownership of key well-being responsibilities for children and families. We are seeking improvements across the whole Council to ensure that the service can deliver its duties. For this reason, a corresponding and equally ambitious Corporate Leadership and Governance Plan has been produced. The Council has asked for and received additional support from Welsh-Government to coordinate and deliver improvements in this area. There is to be a new Improvement and Assurance Board, with a remit for improvement work across social services and the Council. It will provide constructive challenge and advise the Cabinet Secretary on progress made.

8. The arrangements for accountability set out in the improvement plans and being put into effect demonstrate that the Leader, Cabinet members, the Chief Executive, the corporate management team, staff and partners accept a personal and collective responsibility for ensuring that change does happen and that good outcomes are achieved. Children's services have been able increasingly to call on the strength of a wide range of corporate support services and partnerships. This includes changes in the way we all work together to support the delivery of front line services. Corporate partners have made a major contribution to progress in areas in areas such as performance management, HR, communications, Corporate Parenting and Corporate Safeguarding¹. A Performance Report for 2017/18 can be found in Appendix 1
9. The level of political and corporate support for Children's Services has been demonstrated especially by the level of additional financial support made available in 2017/18 and agreed for 2018/19 to deliver its improvement plans. The budget for next year includes investment of £6.172m for Childrens Services, an increase of 47% at a time when the overall budget for the Council is experiencing considerable pressures. This figure emerged from a structured and methodical approach to developing a safe and sustainable budget for children's services, including a costed Improvement Resource Plan which identifies the additional staffing and other resource requirements. An overall commissioning strategy for children's services is being developed, together with specific strategies in areas such as placements for children who are looked after.
10. As a consequence, the Council has been able to make considerable progress in delivering the actions set out in the improvement plans, on time and with demonstrable effects. These are set out later in this report under the four headings used in the improvement plan:
 - A. Leadership, Governance and Partnerships (Sponsor - Chief Executive)
 - B. Case Management, Practice and Quality Assurance (Sponsor - Director of Social Services)
 - C. Workforce (Sponsor - Head of HR)
 - D. Reshaping and Reforming Services (Sponsor - Director of Education)
11. We have been especially concerned to secure greater compliance with statutory requirements and practice standards in the areas highlighted in the inspectors report and in their monitoring activity undertaken in December last year. A letter has been received which summarises the findings of further CIW monitoring activity in March. The fieldwork focused on recent frontline practice and management oversight. The overall conclusions are as follows.
12. *We have increased confidence the local authority understands more fully what it needs to do to improve services and has taken tangible steps toward this. We found evidence*

¹ There have been significant difficulties in dealing with the need for a comprehensive suite of performance indicators, grounded in robust and timely data and helpful comparators. However, all staff have collaborated very well in the work needed to put this in place as quickly as possible.

of progress in assessment and care and support services for children. We also recognise increased corporate support for the improvement journey and appreciation of the importance of this for the safety and well-being of the most vulnerable children in Powys.

13. *We note investment in additional resources has reduced caseloads and increased senior management capacity to support the performance of individual frontline staff and managers. There is now sufficient performance information in most areas to provide a clear view of the service provided.*
14. *We saw evidence of the implementation of the quality assurance framework with comprehensive case file reviews providing much needed information on the quality of practice. People we spoke to, at all levels, were able to articulate what needs to be done, including a concerted effort to improve recording practice by frontline staff. However until staff have more confidence in the electronic case management system there will continue to be questions around the reliability of performance data.*
15. *While some performance indicators have improved, progress is still required in other key areas. Now there are reduced caseloads, it is vital the workforce is committed to quality and timely support for children and families and has the means to deliver on this. At this visit, senior managers were clear about the need to address any performance issues directly with individual staff through additional support and training.*
16. *We spoke to social workers who trained outside Wales who received very little induction into the Welsh legal context when taking up their contract. We are disappointed planned training on the Social Services and Well-being Wales Act has not yet occurred. The high turnover of staff continues. This prevents stability and security within teams and continues to impact on the children and families the authority is supporting.*
17. *The Head of Service is clear about planned work to review the efficacy of early help services and the quality of direct work being delivered by statutory social services. There are substantial improvements required in commissioning, quality assurance, multi-agency decision making and support of looked after children placed out of the area.*
18. *The conclusions match our own. These are the areas where progress often takes time but where the impact upon children and families is especially significant. Our own figures and the messages from the CSSIW fieldwork have demonstrated again that we were starting from an exceptionally low baseline. There remain key areas of professional practice where improvement has been slow (e.g. supervision, statutory visiting) and there are too many Powys children in out of area placements. Hence, the scale of the agenda is immense but absolutely necessary. Our work streams which focus on workforce planning and development and service reshaping and reform are*

making good progress. This means that the changes which will facilitate long-term improvement are being put in place.

19. Progress to date has been hard won but we have been able to maintain a strong coalition for change. The plan will continue to build on the strengths of our staff whose resilience and professionalism in the face of many challenges has been acknowledged by inspectors. Colleagues within the Council and in key partnerships have been working hard alongside us to deliver change and to show their commitment to the improvement plans. We are sure that they will all respond positively to the appointment of a permanent Director of Social Services; she will be taking up the post on 23 April.

20. There are many positive signs, indicators that we are on the right path. The Improvement Board has been monitoring closely the improvement work being done. It has not hesitated to point out areas of concern and to encourage even more urgency. Its Chair produces a monthly bulletin, summarising progress and ongoing issues. In February, he wrote as follows. *The Improvement Board are pleased to see significant progress for putting the necessary infrastructure in place with stronger leadership, finance and performance management. There are also early signs of progress with regards to HR systems, with recruitment of more staff, including more permanent staff. Supported, well qualified staff are key to the whole improvement agenda. Additional training to support staff is underway in areas such as 'Signs of Safety' and the Social Services and Well-being Act. There are some very early signs of improvement in social work practice, such as timescales for the completion of assessments, frequency of statutory visits and direct work with young people. However, it is the case that further substantial work remains in this area. Quality social work practice is key to improving the service and delivering the outcomes set out in the Improvement Plan. The plan outlines the priority actions needed, including an overall focus on the rights of the child. The journey to improvement will be long-term and requires many different elements to be in place and working together.*

21. We acknowledge that effective and sustainable change will require far more time and effort. The following areas are seen as being major corporate priorities that we are actively pursuing.
 - better engagement with children, young people and families to encourage co-production in service design and review;
 - an improved offer to specific groups, such as young people leaving care and foster carers;
 - coherent service commissioning strategies including: edge of care services/Integrated Family Support Services;, placements; support to looked after children; front-door responses such as the early offer to families and an Information/Advice/Assistance Service.
 - more inquisitive and effective scrutiny by elected members;

22. At the same time, the Social Services Directorate will focus on using additional resources placed in the budget this year and for 2018/19 to improve our capacity for:
- engaging the whole workforce in service redesign;
 - facilitating professional development in areas such as the Social Services and Well-being Act implementation, specialisation, practice champions, best practice seminars and links to institutions offering professional courses;
 - dealing with issues around operational structures, workload management, staffing needs (including urgent recruitment and filling vacancies on a longer-term basis);
 - adopting an even more robust and targeted approach to performance management and supervision.
23. The improvement plan focuses on ensuring that we have the right conditions to allow our staff to do their very best for children and families across Powys. Working together, we will deliver not only the priority actions set out in the plan but also sustainable improvement and good outcomes in the lives of our children and young people. We will continue to work closely with CIW, Welsh Government, Social Care Wales, regional and other key partners in pursuit of these goals.
24. Our overall position is that, as an organisation, we have been achieving important milestones – both those set for us and those we have planned. It has taken a considerable amount of collective effort. There have been real benefits to some children and families. However, it is still early in the improvement process. Some of our work to date has confirmed that we are seeking to make progress from a low starting point in important areas such as some elements of professional practice and corporate ownership of service priorities,. On the other hand, there have been encouraging signs about our capacity to deliver positive change at pace while dismantling some of the obstacles that could get in our way. We can demonstrate that children’s services are firmly established as a political and corporate priority and that good foundations are being laid. Again, this is tempered by realism about how far we need to travel.

Cllr Rosemarie Harris, Executive Leader

Cllr Rachel Powell, Portfolio Holder for Children’s Services

David Powell, Acting Chief Executive

Phil Evans, Interim Director of Social Services

Ian Budd, Director of Education

Introduction

25. On 17th October 2017, the Minister for Social Services and Public Health issued a First Warning Notice to Powys County Council under section 151 of the Social Services and Well-being (Wales) Act 2014. It was prompted by Welsh Ministers' concerns around the ability of the authority to adequately carry out its duties, arising from an inspection of children's services undertaken in July 2017. The inspection report highlighted a significant number serious concerns with regard to the performance, quality and delivery children's services compounded by instability in management, poor and confused direction and weak governance.
26. The First Warning notice cited the grounds and supporting reasons for intervention. It set out the following action required by the Council:
- (a) to end the current arrangements and to appoint an interim Director of Social Services to ensure compliance with section 144 of the 2014 Act;
 - (b) to appoint an Improvement Board to oversee the actions of the Director, to provide constructive challenge and strategic oversight of the Director's actions as regards all social services functions relating to children;
 - (c) to require the Improvement Board to provide monthly reports to the Leader of the Council with a copy to the Director of Social Services and Integration, Welsh Government 2;
 - (d) to require the interim Director of Social Services to draw up an improvement plan addressing the issues raised in the July inspection report;
 - (e) to agree the improvement plan with the Improvement Board including the timescales within which the actions and objectives should be achieved, and providing strong corporate and political oversight;
 - (f) to require the interim Director of Social Services to implement the improvement plan;
 - (g) during the improvement plan period, no additional organisational structures should be introduced.
27. In response to the First Warning Notice, the Council:
- appointed an interim Director of Social Services;
 - appointed an Improvement Board to oversee the actions of the Director, to provide constructive challenge and strategic oversight of the Director's actions as regards all social services functions relating to children;
 - ensured that the Improvement Board has provided reports to the Leader of the Council with a copy to the Director of Social Services and Integration, Welsh Government;

- delivered an improvement plan drawn up by the interim Director of Social Services to address the issues raised in the July inspection report within the 20 days required ;
 - started to implement the improvement plan
28. A follow-up monitoring visit by the Inspectorate in December identified early signs of improvement, some evidence of improved practice and many areas where the authority was putting in place new arrangements which had not yet had time to become embedded. The inspectors continued to be concerned about a range of issues including timescales for the completion of assessments and care and support plans, safeguarding practice issues and performance and quality monitoring. These issues were indicative of exceptionally poor standards of practice, in terms of process compliance and the quality of professional work undertaken. The second iteration of the Council's improvement plan has been designed to tackle all the issues of ongoing concern.
29. On 15 January 2018, after receiving the first quarterly improvement report from the Council for the period October to December 2017, the Minister for Children and Social Care issued a follow-up warning notice under the same grounds as the first. He recognised that the Council was on a journey of improvement and he was pleased that there were early signs of improvement, including some areas of practice. Further action required by Powys County Council, to deal with the grounds for intervention and period for compliance, was as follows.
- (a) To submit a revised Improvement Plan to Care Inspectorate Wales (formerly, CSSIW) and a copy to the Director of Social Services and Integration, Welsh Government no later than 7 February 2018. The revised plan is to include actions for improvement which the authority will achieve -
 - i. within 6 months of the date of this notice; and
 - ii. within 12 months of the date of this notice; and
 - iii. within a period which goes beyond 12 months from the date of this notice up until January 2020;
 - (b) The actions for improvement must address the findings described in CCSIW's letter and appendix one dated 4 January 2018 to the Interim Director of Social Services issued following CSSIW's monitoring visit in December 2017.
 - (c) Once the revised plan has been submitted, an addendum to this notice will be issued requiring Powys County Council to achieve the improvement actions within the time periods specified in the plan and these will be the relevant compliance periods for the purpose of section 151(2)(d).
 - (d) To introduce a quality assurance framework to improve consistency and standards of frontline practice across the county. The framework must be drafted by 31 March 2018 and the authority must be able to provide substantial evidence of implementation of the framework by 30 June 2018.

- (e) To continue to arrange for an Improvement Board¹ to oversee the actions of the Interim Director, to provide constructive challenge and strategic oversight of the Interim Director's actions as regards all social services functions relating to children. The Council had requested statutory support under the Local Government Measure 2009. The detail of this package was being developed and there was a possibility that this would result in a revised governance structure with implications for the Improvement Board. Any revised arrangements will be agreed with the Council.
 - (f) The Interim Director to provide monthly reports to the Improvement Board and Leader of the Council with a copy to the Director of Social Services and Integration, Welsh Government.
30. The Notice states that, if Powys County Council does not carry out the actions set out within the specified period satisfactorily, Welsh Ministers are minded to more directly intervene in one or more of the methods of intervention provided for under sections 152-161 of the Social Services and Well-being (Wales) Act 2014.

Summary of Progress

A. Corporate Parenting, Leadership and Governance

- The Independent Improvement Board continues to meet on a monthly basis, with support activities spread over approximately three days. Activities include 1-to-1 meetings with key staff and politicians, formal Board Meeting and engagement activity with staff at all levels.
- We have adopted an approach to improvement planning which involves all parts of the Council working together. It has sought also to define the contribution that can be made by the Children and Young People Partnership (CYPP) and other collaborative groups such as the Regional Safeguarding Board. We hope that this approach will encourage the collective and distributed leadership and ownership of the plan that will sustain our efforts into the long-term.
- We recognise that delivering the improvement programme and plan requires the Council to make this our top priority, not only in terms of work to improve children's services but also in taking corporate ownership of key responsibilities (in areas such as prevention, safeguarding, edge of care services, looked after children and leaving care services).
- The improvement programme and the improvement plan have been approved by the Council and the Improvement Board. The arrangements for accountability set out in these documents and being put into effect demonstrate that the Leader, Cabinet members, the Chief Executive, the corporate management team, staff and partners accept a personal and collective responsibility for ensuring that change does happen and that good outcomes are achieved.
- The plan is very comprehensive, involving the whole council/its key partners. It is front-loaded because we cannot afford to take our time but it is important too that we do things in the right sequence. For each action, we've described expectations, outcomes sought, action to be taken, progress being made and key next steps (with dates).
- Children's services are increasingly able to call on the strength of a wide range of corporate support services and partnerships. We are seeking improvements across the whole Council to ensure that the service can deliver its duties. This includes changes in the way we all work together to support the delivery of front line services. The Improvement Board has been able to consider a comprehensive plan for improving corporate leadership and governance in the Council. The inspectors found that the council is focused on delivering corporate responsibilities for Corporate Parenting and Corporate Safeguarding.
- Since the inspection, extensive activity has taken place across the Council to secure greater compliance with statutory requirements and practice standards. There has been a rigorous process of self-assessment and we have listened to advice from a range of people who are experts in producing improvement in children's services experiencing severe difficulties. Consequently, Powys has developed a good understanding of its strengths and areas for development, further informed by the helpful recommendations made by the Inspectors and by the work of the Improvement Board.

- Further work is being done to align the Children’s Services Improvement Plan with the Corporate Leadership and Governance Plan and the Adult Services Improvement Plan, ensuring that the resources are available for implementing three major programmes at the same time.
- The plan is intended to provide an outward-facing overview of the key actions and progress towards delivering them. It is supported by a range of more detailed strategic plans and programmes including a Finance and Capacity Plan, setting out the significant cost and resource implications; the Start Well programme, to be delivered through the Children and Young People’s Partnership; and the Making it Happen programme, in respect of the leadership, governance and organisational issues which the Council is tackling.
- The projected outturn position for the service in the last financial year is an overspend against budget in excess of £5m. The overspend was caused by the service not being able to find savings of £1,100k originally included in the budget and expenditure in relation to Looked after Children (LAC) projected to exceed the budget by more than £3m. In its budget plans for 2018/19, the Council agreed significant investment in children’s services (£6.172m for Childrens Services, an increase of 47%), to fund the improvement programme and plan.
- Members Briefing Sessions (for areas such as safeguarding and resourcing) have been well attended. The Corporate Parenting Board, chaired by the Portfolio Holder for Children Services, has been meeting purposefully and its work programme will include clarifying the ‘offer’ that will be made to children who are looked after and care leavers. Steps have been taken to ensure that the voice of Looked After Children and care leavers is prominent within the work of the Board.
- Further work is being done to align the Children’s Services Improvement Plan with the Corporate Leadership and Governance Plan and the Adult Services Improvement Plan, ensuring that the resources are available for implementing three major programmes at the same time.
- The Council has appointed a Director of Social Services.
- The interim Director of Social Services and interim Head of Service continue to provide fortnightly briefings to the Leader, Deputy Leader, Portfolio Holder, the Leaders of other political parties, the acting CEO and other relevant staff. This provides opportunities to escalate issues without delay, seek resolutions quickly and ensure corporate ownership.
- We have clarified the roles and responsibilities of all the groups and work streams tasked with generating change and ensured proper governance arrangements. Evidence is being collated and recorded against each priority action in the plan
- Cabinet, Executive Management Team and Heads of Service from across the council have been involved in planning changes needed to Powys People Direct (PPD) and the Information, Advice and Assistance service. The Children and Young People Partnership has started testing how it can help deliver an Early Help Model and other elements of the Start Well Programme (part of the Powys Health and Care Strategy/Joint Action Plan.
- The communications and engagement plan for Children’s Services is being implemented, through road shows, news releases, staff recruitment material

(including web pages, film, social media and a Powys County Council Homepage carousel feature). A Children's Services staff suggestion/feedback scheme has been established on the intranet. The media response to publication of a Child Practice Review by the Regional Safeguarding Board was well managed. There is an update on communications activity provided to each meeting of the Improvement Board.

- As part of the improvement process, it is essential to identify, analyse and prioritise risks to ensure that these risks are managed effectively. There are significant risks to the Improvement Plan, including the Council's ability to deliver sustainable resourcing and workforce strategies. A programme risk register is maintained by the Programme Manager and reported to the Improvement Board.
- An Operational Group established and meets weekly to ensure corporate support is available as required. Terms of Reference for the Group have been agreed; an action log is in place; a risk and issues register is being maintained.
- *Improving Children's Services* is a standing item on the weekly Executive Management Board.
- A more inquisitive approach to scrutiny is being developed with a training and development programme being delivered by an external expert. A programme of work is in place in respect of member development training across all their roles (including Scrutiny and Cabinet). There is increased member participation in Children's Services scrutiny and corporate parenting events; offers of help from individual members have been received. A suite of five sentinel indicators has been developed which all elected members can access directly on a monthly basis. The dashboard developed for the Improvement Board will be used to report to scrutiny committee.
- Increased levels of engagement with partner agencies is increasing their understanding of the strategic direction and operational protocols for Children's Services but this needs to be consolidated.
- We have increased capacity in Powys People Direct, our contact and early screening centre. It both provides information, advice and assistance and also receives social services enquiries from the public and professionals. Concerns raised about people's ability to get access to PPD were addressed through a restructuring exercise. Supervision and support for contact officers have been increased and management oversight enhanced. The service has been re-located into county hall at Llandrindod Wells to meet more appropriately their accommodation requirements.
- Through PAVO, the Council has commissioned computer programmers to develop a link between InfoEngine and Dewis, the national well-being database, so that information from both systems is regularly shared and updated. (February 2018)
- Key next step is to ensure that all professionals understand and respect the role of Information, Advice and Assistance (IAA) and their responsibility for it in changing the way families can interact with organisations at an early stage of their involvement. The Children and Young People Partnership has made this a priority action, within the work being done to develop prevention and early intervention across all public services.

- Through their representative on the Improvement Board, the Children's Commissioner's Office has provided a proposal for working with the Council on embedding the UNCRC in service design and professional practice. We are awaiting final publication of the National Participation Charter by Children in Wales.
- The Health and Care Strategy (including the Area Plan) has moved into Phase 2, with an agreed Start Well Programme for Children's Services, to be overseen by the Regional Partnership Board

B. Safeguarding, Practice and Quality Assurance

- The casework service has been focusing on the basics - ensuring that assessments are completed, statutory visits made within timescales, Case Conferences held promptly, plans developed and communicated with the family to ensure the child is protected and avoiding drift. Monitoring work indicates considerable improvement in some areas from a very low baseline but slow progress elsewhere.
- With improved 'whole council' working, performance management is becoming better organised and more robust as issues in respect of data quality, challenge and inputting are addressed. We are beginning to produce the dependable information around trends and comparators needed to set realistic but stretching targets.
- We are examining possible causes of inconsistency such as: team functions or location; management style or span of control, team composition and size, locality characteristics, staff training, performance management, etc. A Quality Assurance Framework has been developed and it is being implemented as planned. We have appointed to a Quality Assurance post. All QA tools are now available on the WCCIS system. An Improvement Plan Policies and Systems group (IPPAS) meets every fortnight to review all policies and processes. Further training events for Children's Services staff in respect of the regional threshold and eligibility document have been put in place. The document has been aligned with revised business processes so that practice expectations are clear.
- CIW have noted that performance dashboards are now in place for social workers and managers (on an individual and team basis) which means that outstanding work is visible and timescales are easily monitored. They also reported that roll out of the Quality Assurance framework is underway. All managers are expected to undertake comprehensive case file reviews, which include action plans to address noted deficits. Eighty were completed recently. The next stage is moderation to provide quality assurance in respect of the reviews. A Business Manager and additional Data Quality Clerks have been recruited so that teams and individual staff receive support and training (on a 1-to-1 basis, if necessary).
- Weekly meetings with team managers focus on performance. Team managers have been given targets to improve recording practice and tackle poor individual performance via formal procedures where required. Inspectors found some evidence that this is taking place. The Division's Operational Group meets weekly, with good representation from support services, to drive forward practice improvements.

- Two consultants have been retained to support senior managers to drive forward the improvement agenda and to assist with the professional development of line managers. There are plans to reduce 'spans of control' for team managers and assistant team managers are being trained to take on more responsibility.
- The Interim Director of Social Services is overseeing a more purposeful approach to the Council's relationship with and contribution to the Regional Safeguarding Board. The Board is now receiving the performance monitoring information and updates it requires. Attendance at key meetings has been sustained.
- CIW reports that progress has been made in the efficacy and impact of the PLOG (local operations group), which co-ordinates on a multi-agency basis (at the local authority level) the work led by the Regional Safeguarding Board.
- CIW reports that implementation of the Signs of Safety model is being progressed through a planned approach over the coming year. We are adopting the "Signs of Safety" model successfully used in other Welsh local authorities and beyond for achieving improved management of risk and a greater emphasis on the family's strengths and potential for change. This is an approach which can be understood and acted upon at all levels within the Council and in collaboration with key stakeholders. We will provide training for staff and partner agencies before we roll it out fully. We have been in contact with other authorities to learn and benefit from their experience of the model. The Director of Social Services from Swansea has held a masterclass/seminar in February to describe their improvement journey. In collaboration with Ceredigion and the Regional Partnership Board, a training programme for staff started in March.
- Cabinet has approved the new Safeguarding Policy for the Council and the terms of reference for the Corporate Safeguarding Group, to be chaired initially by the acting Chief Executive. All parts of the Council are represented. The group has started to meet and it is developing a programme of work, with support from an experienced former Director of Social Services. The Interim Director of Social Services is now the designated lead officer for safeguarding across the Council and all relevant departments/service areas have nominated a lead officer for safeguarding. The new Corporate Safeguarding Policy defines for all staff and elected members: the Council's expectations; roles and responsibilities; training requirements; guidance on how to recognise abuse of children; what to do if someone tells you that they or another person is being abused; confidentiality issues; procedures within the Council for reporting concerns; and the way in which the Council deals with allegations of abuse against professionals/those in a position of trust.
- Numbers of children on the child protection register, looked after or receiving care and support plans as children in need are beginning to stabilise, albeit a higher level than in previous years.
- Inspectors report increased confidence that assessments are allotted proportionate timescales and are monitored accordingly. There were improvements in the percentage of assessments completed on time, with a rise from 72% in January to 86% in February. One quarter of these were completed in 10 days. The target for 42 day assessments is set at 90% for March and it is

anticipated that this will be 100% in April and beyond. In March, there were increased rates of proportionate assessments within 10 days (25%). We anticipate that this rise will continue, with an agreed target of 45% for March and 65% thereafter. A pilot assessment team is functioning well and, if successful, this may lead to a remodelling of provision

- CIW have reported that there were 11 children without a LAC or CP care plan at the time of their monitoring visit in March but this issue has been investigated and the correct number is one. There is ongoing work with managers looking at the open children's cases (excluding LAC/CP) who do not have a care plan in place and the current position is now 80 cases but this is reducing quickly.
- The section 47 enquiries completed within timescales has seen a marked improvement, with a figure of 88% in February. This improvement will have an effect on the other timescales involving child protection in terms of case conferences and becoming the subject of an inter-agency plan.
- During February, our improvement work has focused on the emphasis has been on CP and LAC statutory visits and care planning. There has been no improvement in statutory visits to children subject to CP registration over the past few months. Just over half of children are receiving timely social work visits. This has clear implications for child safety. We believe that recording practice may be masking some improvement. The figures are reflective of monthly visits required as opposed to the national requirement of six-weekly. Where there are issues about visiting patterns, this is being addressed on a team by team basis to ensure compliance.
- There are similar issues in respect of visits to Looked after Children. Our current reporting methodology calculates all visits undertaken within a six weekly period. Some children do not require six-weekly visits where this is decided within a LAC review. These visits will appear as out of timescale within the current report. Work to amend the report definition are underway. However, it is clear that the quality of planning and support for these vulnerable children remains variable, especially in respect of care leavers and those placed outside the local authority area. There is insufficient evidence of direct work with children or effective co-ordination of support with health, education and other partners.
- Our own figures and the messages from the CIW fieldwork have demonstrated again that we were starting from an exceptionally low baseline. Many of the basics are only just being put in place and progress to date has been hard won. There is much work to be done and we are trying hard to assist as well as direct by introducing better support, reducing caseloads, improving practice and professional oversight, investment in audit capacity and administrative support.
- All cases are allocated. Agency staff continue to be deployed in the operational teams to provide cover for vacancies and sickness and offer additional capacity above establishment. Caseloads are being brought down to 20 or less per worker. Only 3 staff have more than 20 cases and the highest caseload is 26. Work is being undertaken within the Workforce area of the improvement plan in order to benchmark caseload numbers against those in other local authorities.

- Guidance has been provided regarding Safe Working Practices, the role of other safeguarding bodies and safeguarding under the Social Services and Well-being Act.
- We have reviewed the provision of direct work and support to children at risk of CSE and the use of debrief meetings when children go missing as part of our work to ensure that the Regional CSE Action Plan has been delivered effectively in Powys.
- We are examining possible causes of inconsistency such as: team functions or location; management style or span of control, team composition and size, locality characteristics, staff training, performance management, etc.
- A specialist in practice development has been recruited to provide a programme of work for exploring with staff barriers to good practice and producing an action plan. We have appointed to a Quality Assurance post.

C. Workforce

- There are 360 posts within the Children's Services establishment: 53% are permanent positions, 25% fixed term and the rest made up of casual by claim, contractor or agency. We have done considerable work in generating accurate data from which to make workforce decisions.
- A draft training and development strategy is being considered by the Children's Services management team. The document aims to cover how we can create a workforce with all the skills and behaviours needed to deliver quality social work practice and good outcomes for individuals. The document lays out the following information:
 - How to become a social worker and the secondment routes available to Powys County Council employees.
 - The steps required and support available to people who are training to become a social worker.
 - How to re-register with Social Care Wales following a career break.
 - Mandatory and optional routes available to staff once they become a social worker.
- It has been agreed that three additional places per year on Social Work degree courses will be available, alongside additional training opportunities at frontline and middle manager levels, including investment in ILM programmes. All Well-being Officers will be offered an opportunity to complete QCF level 5 training in order to meet the additional requirements of their post in relation to case holding and assessment. Progress is being made in adopting a more systematic approach to staff induction and an automated mechanism will be in place to record and report on induction.
- Work is being done to agree an acceptable caseload for social workers which takes into account experience, complexity, training, annual leave, information from comparator local authorities and caseload complexity. This will help to identify baseline staffing requirements. Managers are working to assess the impact of introducing Signs of Safety and other measures on demand for services and staffing capacity. They are developing a future operating model for Children's Services in Powys, which includes changes to the role of Powys People Direct. Proposals for additional staffing requirements have been developed following the outcome of the Council's budget-setting process.

- A comprehensive Recruitment and Retention Strategy was submitted to the Improvement Board and implementation started in March, with open evenings to recruit Social Workers in April.
- An initial staffing review has been undertaken. We have established the true level of vacancies and gone to advert. A dedicated job advert Facebook page has been created to ensure maximum coverage of jobs available and to promote the benefit of working in the county.
- 29 posts have been out to advert, with 17 appointments made. Rolling adverts are now running which allow individuals to apply for jobs at any point in time. There is no set shortlisting or interview date which enables immediate shortlisting and interview when an application is received. Agreement is in place to offer £8k relocation package and market pay supplement of £5k for certain posts. A corporate staff benefits scheme has been approved (including child care vouchers, bike scheme, discount card, personal lease car loans, savings, purchasing additional leave). It will be launched in April/May. A *Working in Children's Services* brochure is in draft. This document will describe the county, the work environment and employment package offer, along with quotes and comments from current staff. Recruitment open days have been held.
- We are reviewing and rewording job descriptions to make them more appealing to potential candidates. The recruitment end to end process is currently being mapped to identify areas where the process can be streamlined. A Corporate 'Work, Live, Play in Powys' video has gone live and it is re pinned on Social Media accounts. Specific social worker recruitment videos are being developed. All agency staff in Children's Services have been engaged in discussions about potential permanent employment and job application forms have been given to all who stated an interest.
- 17 staff have been appointed since November. Since January, 6 social workers have applied, 2 have been appointed and 3 are in the shortlisting/interviewing process. There are no vacancies currently in Fostering and Adoption, with 4 FTE Form F Assessors appointed. There are no vacancies for staff who do not have a social work qualification.
- Agency staff numbers have been increased to cover short-term needs and to support front line service delivery, with ten of them holding vacant posts and 30 over establishment. We have put in place regular monitoring of agency staffing levels. As part of the Improvement Plan, a target has been set to reduce expenditure on agency staff quarter by a quarter during the next financial year. Since November, 21 staff have left Children's Services, of whom 11 were agency workers.
- An updated Supervision Policy has been published along with a template for recording. An increasing proportion of supervision sessions are being recorded electronically on the HR system. We have secured additional management capacity to identify practice champions and develop mentoring capacity. We plan to undertake a staff survey to gather views on well-being and establish a better support package. An updated Supervision Policy has been published along with a template for recording. Performance management information regarding the number of supervisions undertaken indicates 54% at the end of February, although more work is needed to ensure that the information is

robust. Improved data cleansing and definitions have been introduced but the emphasis is also upon reinforcing the professional expectations of managers and practitioners in this area of work.

- In February, 15 staff (FTE) were absent because of sickness, with the loss of 108 working days. Sickness absence is reviewed by the Children's Services Management Team on a monthly basis There has been 28 leavers since Nov 2017 of which 12 were agency staff. With consistent effort, we were able to secure a 46% return rate on exit questionnaires
- Inspectors reported that there is a clear supervision policy in Children's Services and considerable senior management focus on the importance of timely and good quality supervision. Management decision making was evident in supervision records they reviewed but improvements were required in setting timescales for task completion. They saw little evidence of follow up of tasks from previous supervision and there was a lack of consistency in documentation used. The regularity of supervision had not increased for social work staff overall, varying between 64% January and 55% in February.
- There is data about performance on an individual and team basis but ongoing problems in securing reliable data about the provision of regular supervision, with considerable differences between electronic systems and staff reporting. To address this issue, newly agreed definitions have been signed off and work is being done to re-configure the dashboards accordingly. Reports on non-compliance will be provided to the Children's Services management team.
- Supervision statistics are reported to the Improvement Board on a monthly basis and is identified as one of the key indicators contained within the Members' Tracker. The monthly Performance Report is also explored by the Children's Services management team who then provide commentary against the performance statistics.
- The existing Supervision Policy has been reviewed, to clarify managerial responsibilities and obligations in respect of undertaking and recording monthly supervisions. A step-by-step guide on how to record supervisions within the Trent electronic system was also incorporated into the Supervision Policy. It was disseminated to staff with a requirement that they familiarise themselves with the Policy and adhere to its content. Additional supervision training sessions have been commissioned and these will be rolled out from 1st April.
- Children's Services have employed an auditor on a temporary basis who is now auditing the quality of all supervisions undertaken and reporting this back to the Head of Service, particularly where there are concerns. Some managers have too many staff reporting directly to them and a re-structure of Children's Service is being explored.
- Although improved data cleansing and definitions have been introduced, improving performance in respect of monthly supervisions also requires that we reinforce the professional expectations of managers and practitioners in this area of work. Direct action is now being taken with any managers who are not performing to standard.
- A Staff Communication and Engagement Plan has been agreed by the Improvement Board. Three rounds of staff roadshows have been undertaken across the county led by the Portfolio holder, Interim Director of Social Services

and Interim Head of Children Service. Staff are provided with regular opportunities to meet with members of the Improvement Board.

- A survey of front line staff was undertaken in February (with a 32% response rate), followed by focused interviews. There were questions about caseloads, support, supervision, well-being and environment. Communications are in the process of producing a report s which will be followed by production of an action plan to improve the service based on the feedback received.
- The annual training needs analysis has been undertaken and the brochure published. A staff training programme is being delivered which includes assessment, staff supervision, the QA Framework, Looked After Children, Child Protection policy, 'When I'm Ready', Leaving care, care and support plans, and the Public Law outline. The full training plan will be published in April.
- The staff Induction programme and monitoring form have been added to Children's Services Intranet page. The manager induction programme now in place.
- Additional management capacity has been secured to develop Reflective Practice Forums and opportunities.

D. Reforming and Reshaping Services

- We have produced a draft overall commissioning strategy for Children's Services that will help us to make best use of any additional resources being made available by the Council. This is being done in collaboration with key partners.
- Range of other commissioning strategies Develop Family Support commissioning strategy.
- We have agreed with the Office of the Children's Commissioner to work together in looking at embedding a children's rights approach to the provision of services to children who are looked after or leaving care. This is intended to meet our key aims of i) providing and commissioning a flexible and affordable mix of high quality placements for children who are looked after to meet the diverse range of their needs and circumstances; and ii) giving children and young people clearly planned journeys through care and into adulthood which remain focused on achieving care and support plans, prevent drift, enable them to be reunited with family and friends where possible, have stable placements and exit the care system with good prospects for improved life chances.
- Work is being done to clarify the scope of and access to the 'Active Offer' for advocacy so that we can introduce measures to improve take up.
- We are committed to Increasing the number and capacity of local fostering placements. Efforts continue to be focused on recruiting and retaining new foster carers, to ensure the Council has enough families with the right combination of skills who are supported to meet the diverse needs of children and young people. It needs foster carers who can manage very challenging behaviours, provide placements for sibling groups or young people involved in the Criminal Justice System (including on Remand), provide parent and baby placements, placements for disabled children, and short term or emergency placements. It also needs to recruit carers able to offer short breaks and respite placements to support children and young people to remain living at home or within their family network.

- The Council’s fostering recruitment strategy will set annual targets, complemented by regional recruitment work. We are committed to Increasing the number and range of local fostering placements. Resources have been found to increase capacity in the fostering team.
- 23 foster carers have been approved in the current financial year (9 Generic and 14 Connected Persons). 13 foster carer assessments are in progress. We are exploring the potential for reduced or waived Council Tax for foster carers and for their prior consideration in allocations of larger Council housing properties. A listen and learn exercise has been completed with Foster Carers; recommendations are being considered and implemented. A marketing strategy has been completed for the fostering service. We have met with current Powys foster carers to consult on Foster Friendly Powys and we are reviewing the support packages they receive. Phase 1 of a project to develop peer support for foster carers has been completed.
- Following the CIW inspection of the Fostering Service, a verbal report has been received and the council was advised that there are no issues of non-compliance. We are awaiting a draft report.
- We aim to reduce inappropriate use made of Independent Fostering Agency (IFA) placements and clearly specify their role. A successful recruitment strategy should aim to reduce the need to commission IFAs for new placements. Agencies can continue to play a role in complementing our in-house provision through targeted commissioning of more specialist provisions rather than being used because a local authority foster placement is not available.
- Mainstream residential care placements are needed for children and young people who may present challenging or risky behaviours. They may have experienced several placement breakdowns or they may be running away, misusing substances or be at risk of child sexual exploitation. They need the additional level of supervision and support that can be provided in staffed residential care. Specialist residential placements are needed for disabled children and young people with extremely complex and challenging needs, with staff who are experienced in providing the care they need. However, in principle, all children should have the opportunity to experience life in a family setting wherever possible. Therefore, we intend to make fewer mainstream residential placements and make them closer to home. Children’s Services will look to agree a joint strategy with the Education Department and the Local Health Board.
- For young people between the ages of 16 and 21 years, we need to commission more independent or semi-independent living options such as supported housing, ‘training flats’ and supported lodgings, to support them at different levels of independence and to make a good transition into adulthood. We are establishing a multi-agency accommodation and placement work stream under the Children and Young People Partnership.
- Apprenticeships for care leavers was discussed at the corporate parenting group and an email has been circulated within the authority and to contracted partners.
- We are piloting an Edge of Care and Family Group Conference (FGC) service through Action for Children, with additional capacity added to the Integrated

Family Support Service on a fixed-term basis. The referral pathway has been agreed and implemented. FGC training for staff is scheduled. We are looking to develop a system whereby all relevant children have an opportunity to benefit from an FGC. Additional capacity added to the IFST on a fixed-term basis.

- Workshops have been held to establish an agreed process and procedure for Step up/Step down between Children’s Services and the Team Around the Family (TAF) Service. We propose to base a TAF Coordinator in Powys People Direct to help build knowledge and understanding of the Early Help Offer and to facilitate the referral process.
- Social Workers are now required to complete the “What Matters” document with the child/young person as part of all assessments. A booklet has been developed and it has to be completed before the Care and Support plan can be signed off. Training on use of the booklet is scheduled through team meetings in March. A multi-agency training needs analysis has been undertaken and a training brochure published.
- We are developing our capacity for offering early help to families in need of care and support (e.g. additional staffing and lower caseloads to allow time for direct work with families). This includes a Powys People Direct / Family Information Service outreach post. Work is ongoing to ensure that social workers are aware of the range of services available to support delivery of care and support plans, including information on referral processes.
- An Early Help model has been shared with the Children and Young People’s Partnership and the Improvement Board. This also involves aligning Early Help/Child Poverty programmes in preparation for an integrated commissioning strategy. A Children and Young People Partnership event is being planned to showcase the range of services available to support delivery of care and support plans, including information on referral processes.
- There is a commitment to using the “Start Well” components in the Health and Care as the way of ensuring maximum collaboration in developing family support services, including services for children with disabilities. We are exploring models of early help hubs in places such as Flintshire to design an appropriate service for Powys.
- A CAMHS Review has identified opportunities for alignment of key staff and services within an integrated model.

This page is intentionally left blank

Children's Improvement Board Performance Report

March 2018

Page 59



Yn agored a blaengar - Open and enterprising





Reason for the Report

The council must ensure that children in Powys are not left at risk. Fully accessible and understandable performance information is critical to support appropriate action that keep children at risk safe.

This report sets out the council's performance for the period April 2017 to March 2018.

Background

The council has launched its Performance Management Framework setting out its expectations for monitoring and evaluation of progress against commitments. Children's services key performance indicators are clearly set out within this report so the organisation can measure and demonstrate visible improvement. The report highlights the progress made in delivering key improvements as demonstrated by associated performance indicators. The commentary identifies progress as well issues and actions planned where the trend in performance is falling.

Overview of Performance

Child Protection

The number of children on the child protection register has decreased by 1 during the period from February 2018 to March 2018. For the year the number has risen from 80 in April 2017 to 107 in March 2018 which shows an increase of 27.

The number of children added to the register during March 2018 was 7 with 1 child being removed giving a net decrease of 1 child on the register. The average length of time on the Child Protection Register for those removed has reduced again this month from 222 days in February 2018 to 195 days in March 2018. This is also below the Welsh Average of 245 days.

The percentage of Section 47's completed in timescale has shown significant improvement increasing from 88.5% at the end of February 2018 to 100% at the end of March 2018. Current year to date performance is 55.7%. It is recognised that it is important that this level of performance is maintained at the March level of 100%.

To keep children safe the service must ensure statutory visits are undertaken at the right time. At the end of March 2018 performance has increased significantly to 72% from 53% at the end of February 2018. The organisation has set a compliance target of 95% for statutory visits; it is recognised that further improvement is still required to hit this.

Looked After Children

Looked after Children (LAC) increased by 6 during the period February 2018 to March 2018. For the year the number has risen from 160 in April 2017 to 208 in March 2018 which shows an increase of 48.

The number of children looked after is higher than all 4 of our comparator authorities in the 0-4 years category for the year 2016-17 and higher than 3 out of the 4 for the 10-15 year category.

The percentage of LAC statutory visits held in timescale has improved significantly from 55% in February 2018 to 86% in March 2018, this percentage is based on 138 visits taking place in February and 221 in March 2018. Although the improvement is pleasing it is however still below the target set of 100% and it is recognised that further improvement is still required.

The LAC rate per 10,000 population for March 2018 is 84.9 which is below the 2016-17 Welsh average of 94.8. Powys is however currently, above the rates of statistical neighbour's outturn figures for 2016-17.

Placement moves

The percentage of children looked after on 31st March who have had three or more placements during the year has shown a slight decline in performance moving from 12.7% in February 2018 to 13% in March 2018. This equates to an increase from 26 in February 2018 to 27 children in January 2018.

Performance is also worse than the target of 6% and the Welsh Average of 9.8%. It is also worse than 3 out of our 4 comparable authorities for 2016-17 when looking at current performance.

In Need of Care and Support

From February 2018 to March 2018 the number of children in need of care and support (with an open care and support plan) decreased by 48. For the year the number has risen from 578 in April 2017 to 668 in March 2018 which shows an increase of 90.

Assessments within timescales

The council is determined to achieve 100% compliance for completion of assessments within the statutory timescale of 42 days. However, noting that it is coming from a very low base of 53% completion in quarter one of 2017/18, February 2018 saw a significant improvement to 86% of assessments being completed within timescale and this has increased further to 96% for March 2018, therefore surpassing the 90% target set for March 2018. This performance is also above the Welsh Average for 2016/17 of 90.8%. The service is currently on track to hit the 100% target which is set for April 2018.

It should be noted however that for the number of assessments completed with 10 days has increased from 25% in February 2018 to 35% in March 2018, although the target of 45% for March was missed.

Workforce

Regular supervision for staff responsible for children in need of care and support needs to take place to ensure the correct practice is applied and supported. The first stage is to ensure that regular supervisions between social work staff and their managers is undertaken.

It is pleasing that performance has increased from 55% in February 2018 to 61% in March 2018. It is recognised however that further improvement is still required. Please note our HR system was unavailable from 2nd to 10th April, hindering peoples ability to update their records. Also our reporting connection to the new HR environment is still not updating and therefore a verbal update will be provided at the Board meeting.

Agency Staff

There has been a decrease in the number of Agency staff being used in the service from 40 in March 2018 to 37 in April 2018.

Finance Position 2017/18

No finance update for March as the final closure of accounts won't be reported until early May.



1.

847

No. of Cases open to Children's Services

Of which:

1a.

Page 62

208

No. Looked After Children

1b.

107

No. of Children on the Child Protection Register

1c.

668

No. of Children with Care and Support Plans (Including LAC and CP)

1d.

4

No. of LAC and CP Children without a Care Plan

1e.

100

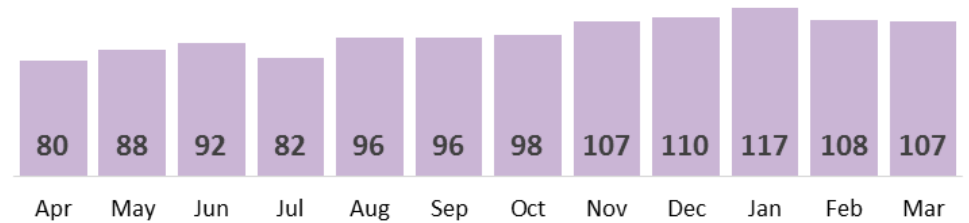
No. of Children Currently undergoing an Assessment

1f.

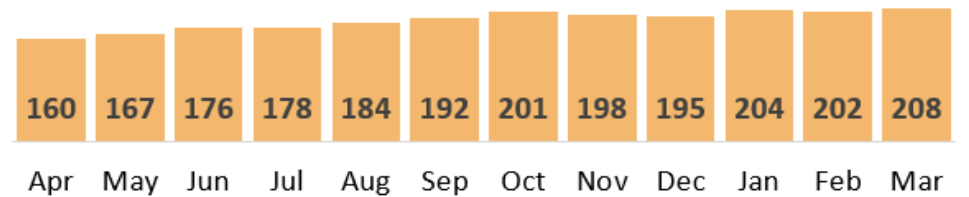
79

No. of open cases

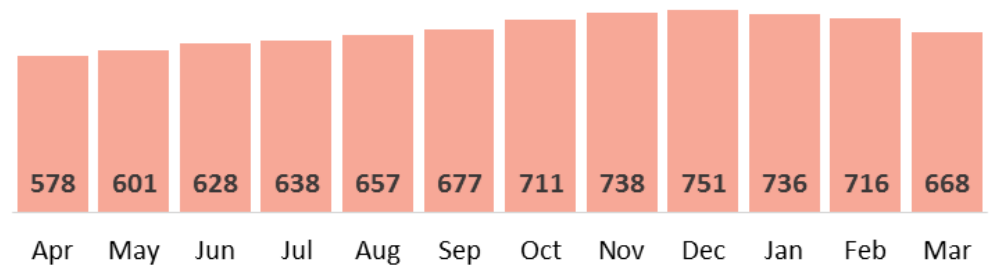
No. of Children on Register since April '17



No. of Looked After Children since April '17



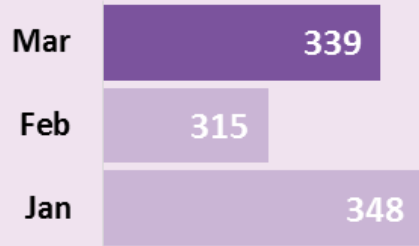
No. of Children with a Care & Support plan since April '17





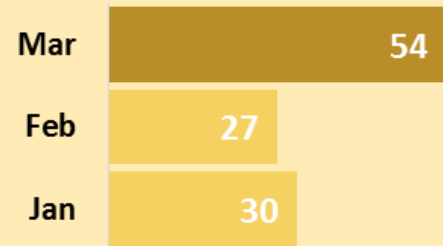
2. Total No. of Approaches to children's Services

YTD 3,353



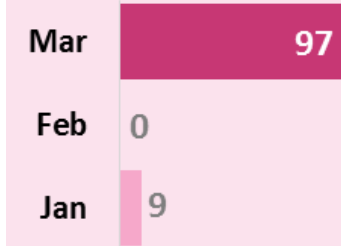
2a. No. of Approaches for Information

YTD 301

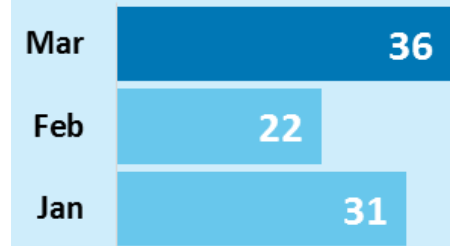


2b. No. of Approaches for Advice

YTD 106



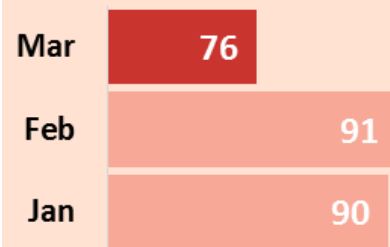
2c. No. of Approaches to the service in Progress



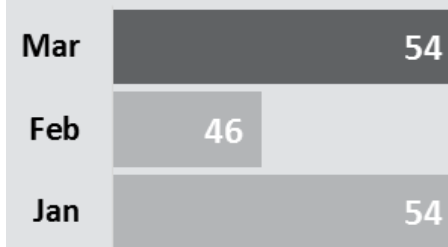
3. % of Approaches supported through PPD



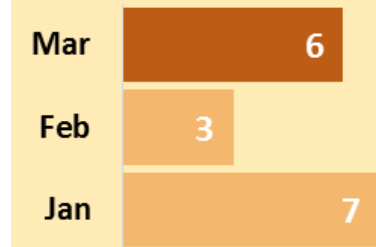
4. No. of Approaches Referred to Children's Team



5. No. of Approaches Referred to Team Around the Family (TAF)



6. No. of Approaches referred to the Integrated Disability Service (IDS)



Page 63



What's working well?

1. Number of approaches for information has doubled from February to March. Number of approaches for advice has increased significantly .



What are we worried about?

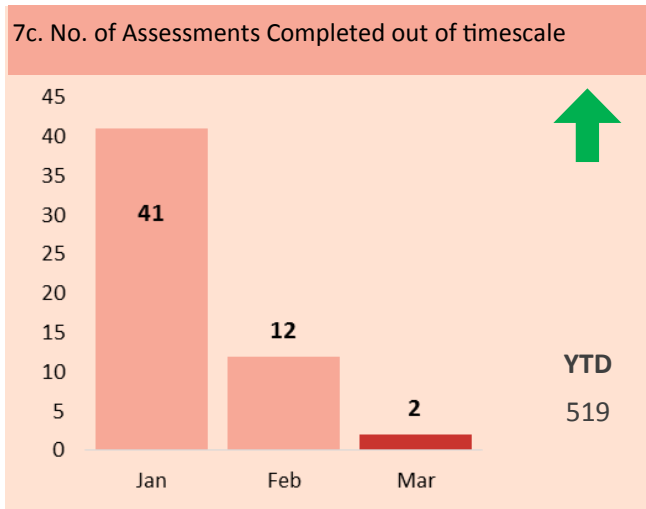
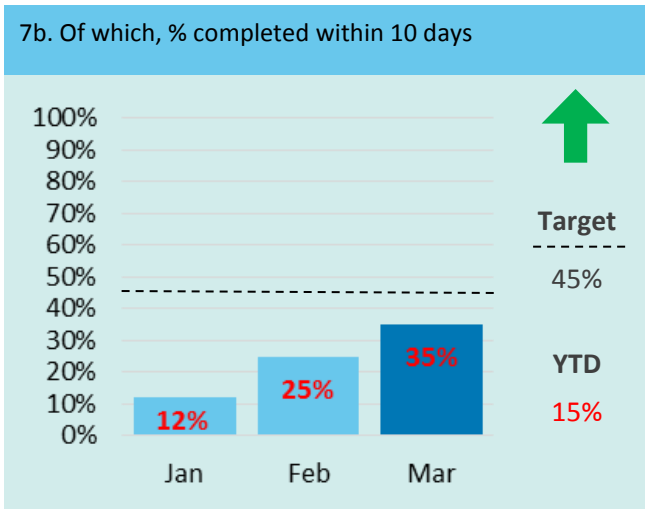
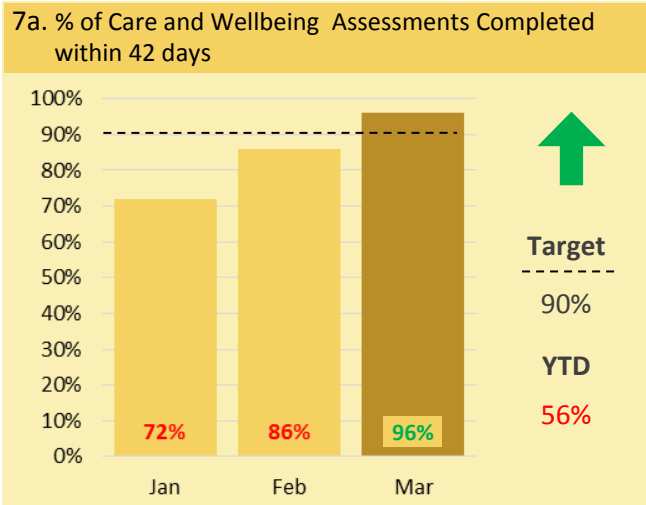
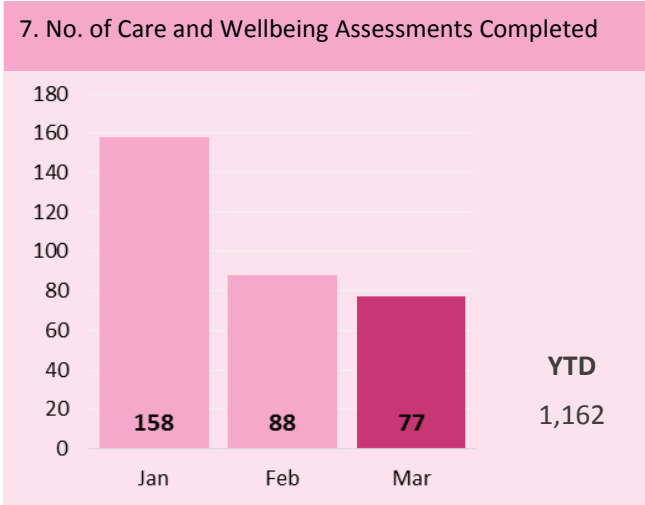
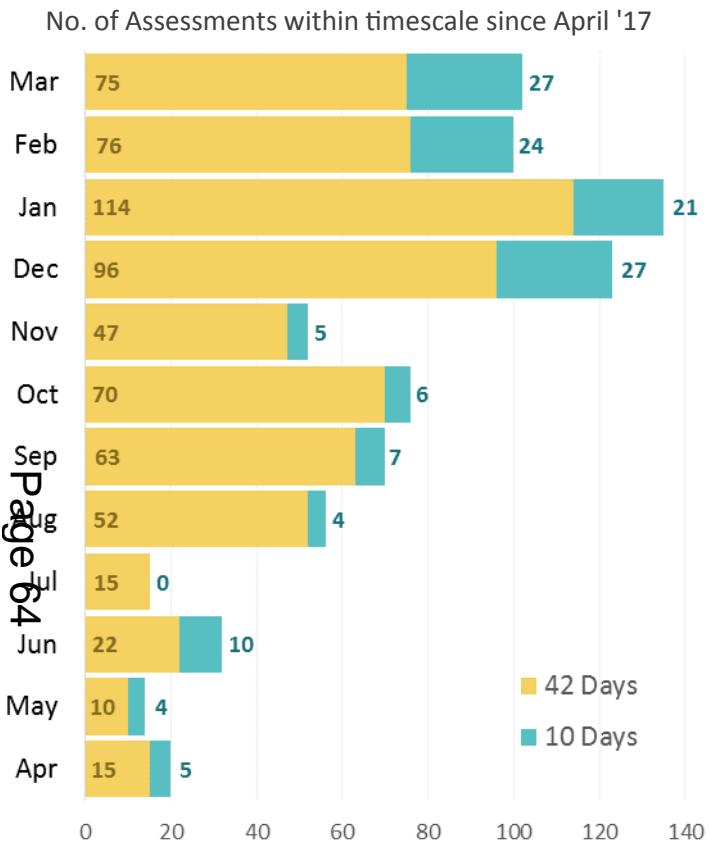
1. 36 approaches in progress and these relate to Family Information Forms which have not been completed on the system.
2. Regional threshold document is not clearly understood by partner agencies



What do we need to do?

1. Ensure that quality of advice given is of a high standard
2. Further work to embed the Regional Threshold through audits of multi-agency referral forms for review at Powys local operation safeguarding group by end of May 2018.
3. These are being addressed and will be closed off by end of April 2018.

Assessments



What's working well?

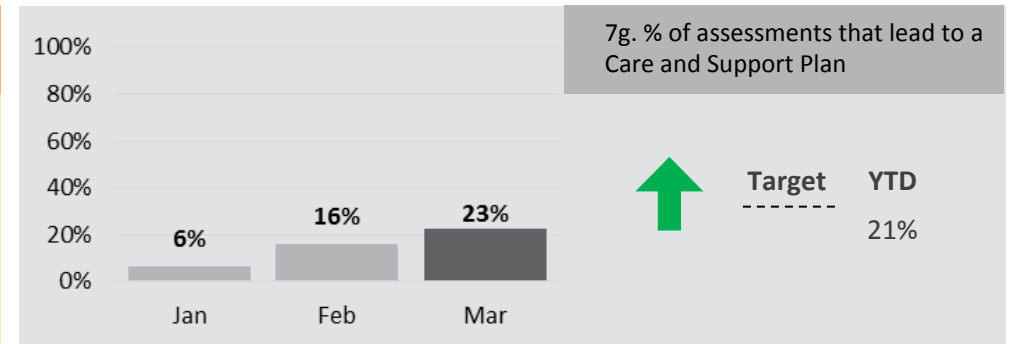
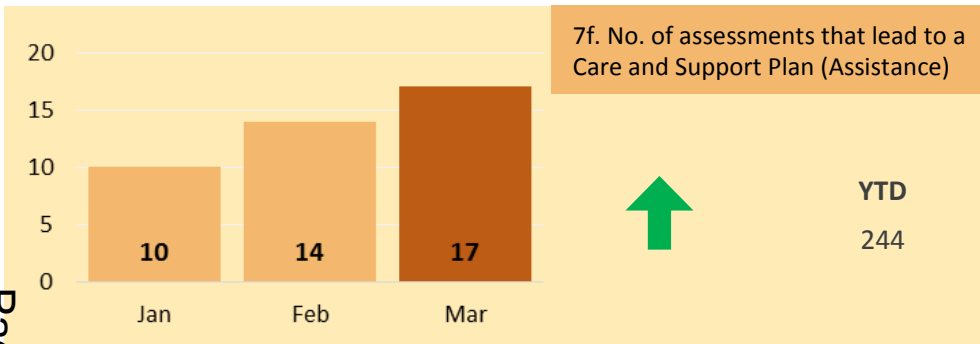
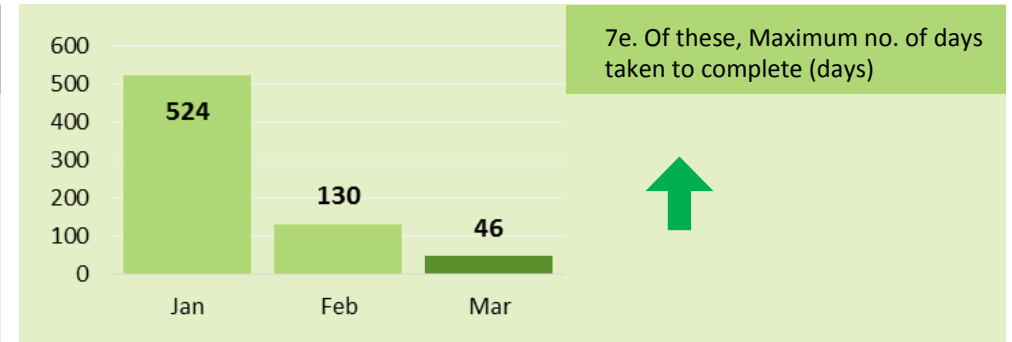
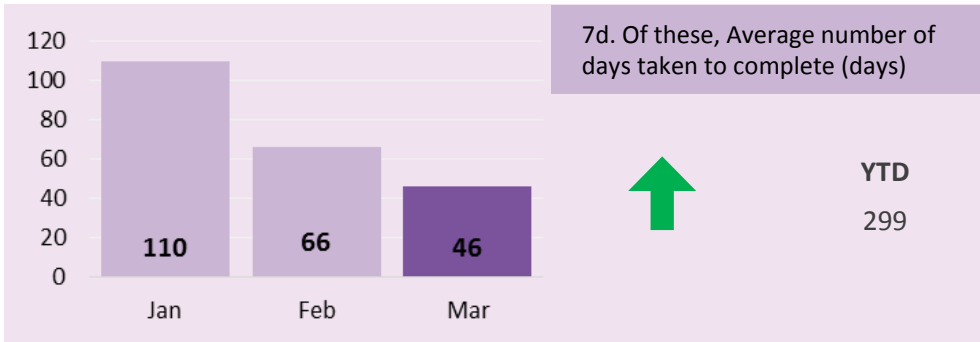
1. Completion of assessments within the statutory timescale (42 days) is up to **96%** for March 2018 (Welsh average 90.8%).
2. Number of assessments completed out of timescale has seen a significant increase in performance.

What are we worried about?

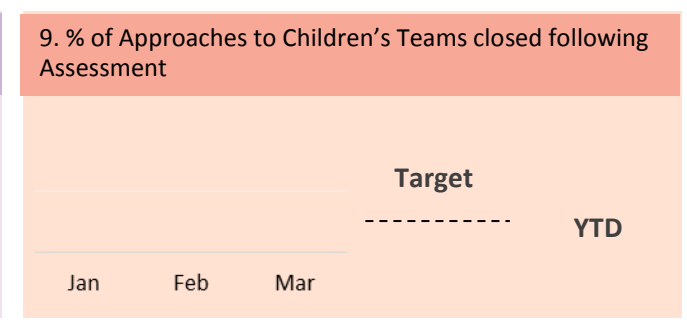
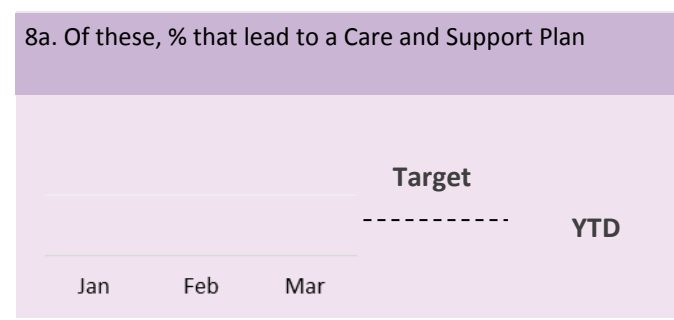
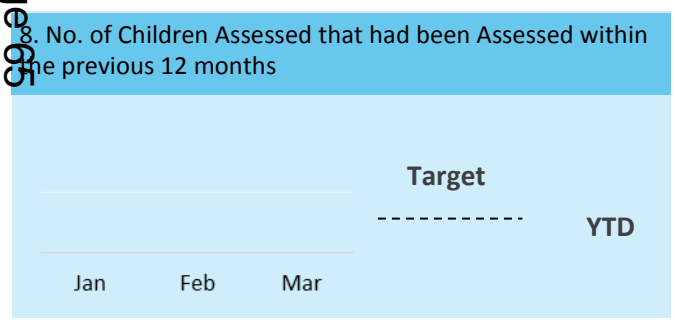
1. Number of assessments completed in 10 days has increased however is still below target.

What do we need to do?

1. Replicate the pilot Assessment team in the North of Powys across the whole County as this has proved successful and evidence shows significant improvement in performance.
2. The target for 7a has been set as 100% for April 2018 and we are currently on track to meet this.



Page 65



What's working well?

1. Average number of days taken to complete and % of assessment that lead to a care and support plan and have both improved from February to March

What are we worried about?

2. We are worried about only 23% assessments are moving to care and support. We need to better understand the rationale for this.

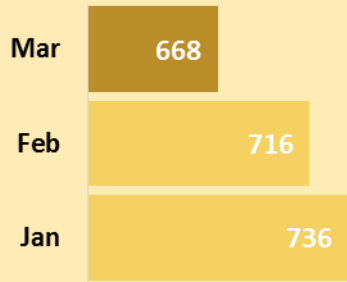
What do we need to do?

2. We will carry out a thematic audit to establish the reason for 23% and what is the outcome for families for the other assessment by May 2018.
3. Data collection systems need to be set up for measures 8, 8a and 9 by April 2018 report.
4. Target needs to be set for measure 7g.

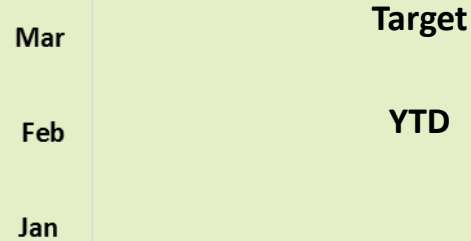


Supported Care Planning

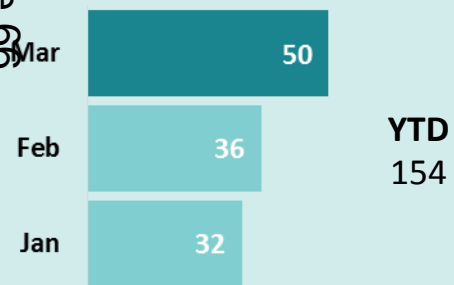
10. No. of Children with Care and Support Plan



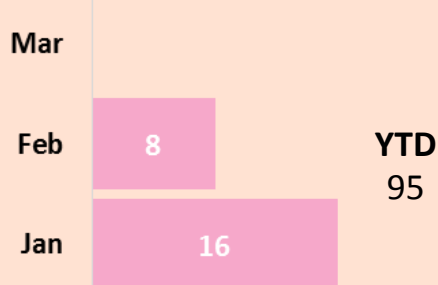
11. No. of New Care and Support Plans completed during the period



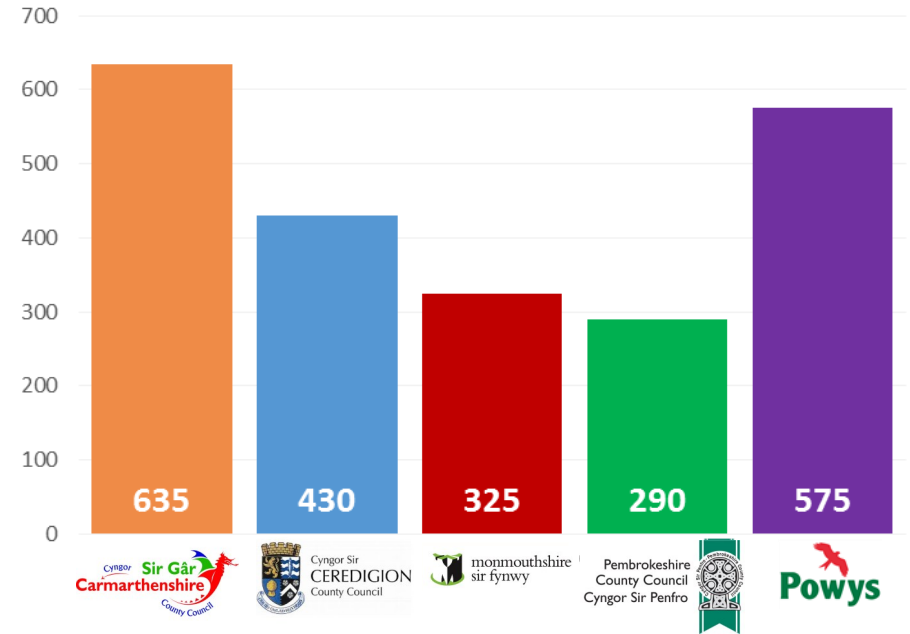
12. No. of cases closed where the child had a care and support plan



13. No. of Re-assessments completed during the period



No. of Children with Care and Support Plan as at 31/03/2017



13a. % of Re-assessments completed within 42 days

| | YTD | Target |
|-----|-----|--------|
| Jan | | |
| Feb | | |
| Mar | | |

13b. Of which, % completed within 10 days

| | YTD | Target |
|-----|-----|--------|
| Jan | | |
| Feb | | |
| Mar | | |



What's working well?

1. Number of children in need of a care and support plan has decreased by 48 from February to March.
2. The number of cases closed where the child has a care and support plan has decreased.

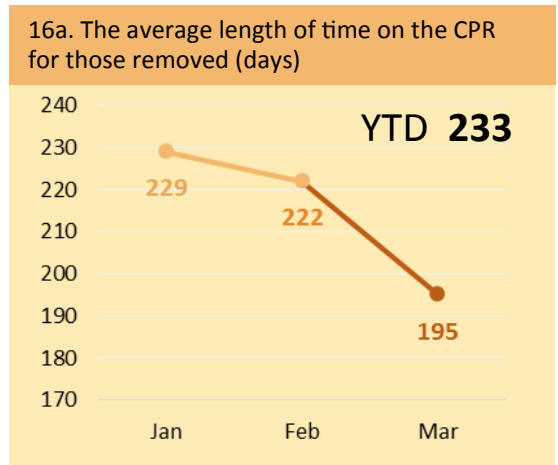
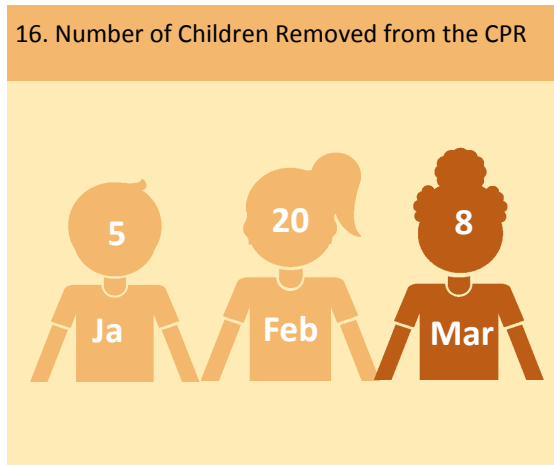
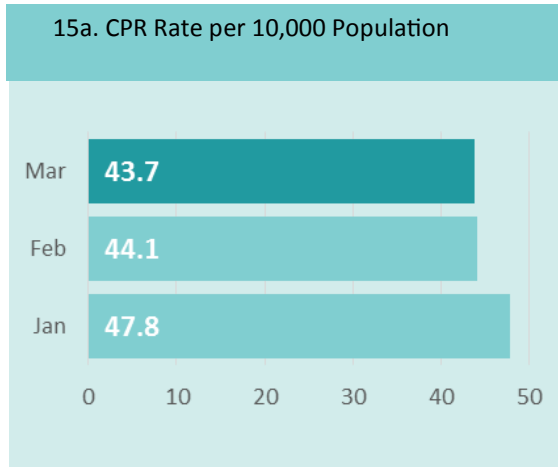
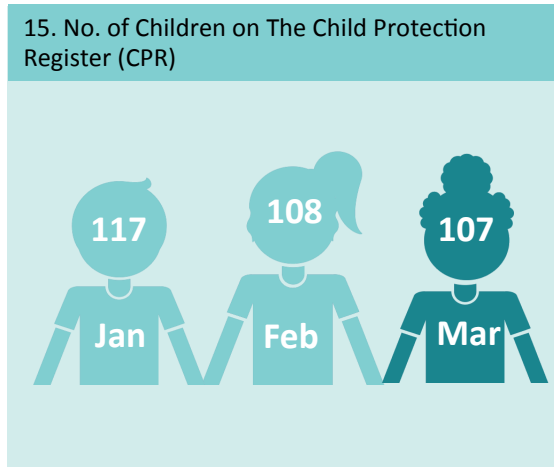
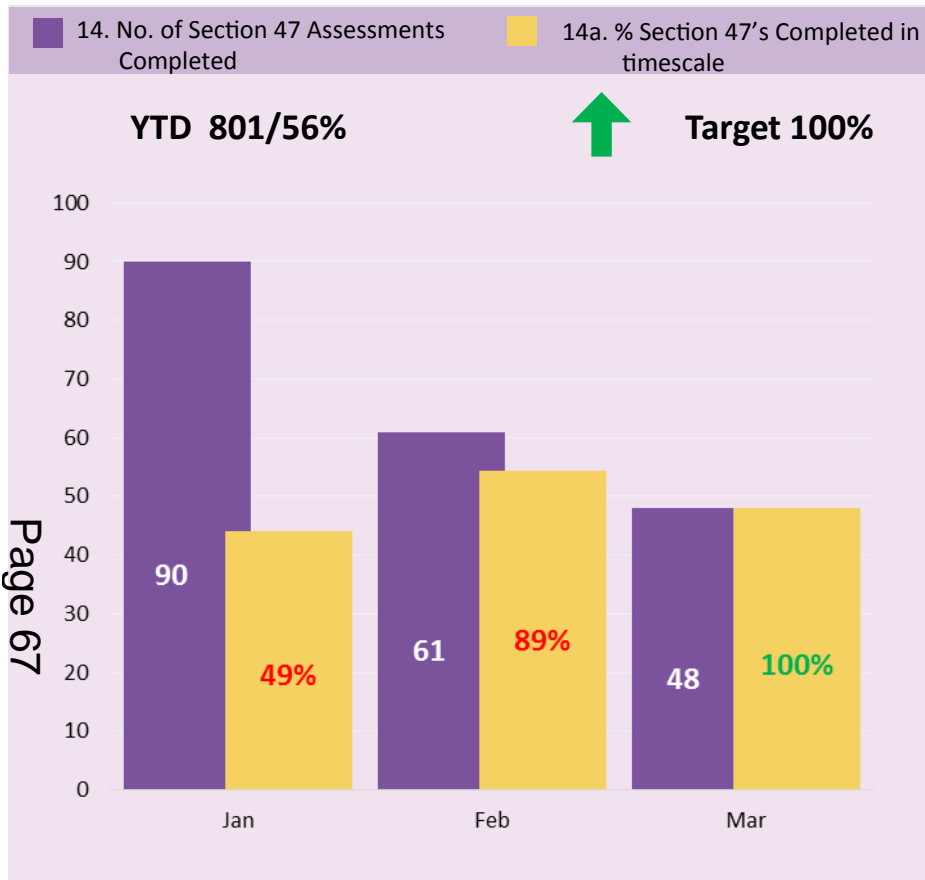


What are we worried about?



What do we need to do?

2. A dip sample of the 668 cases is underway to ensure that cases are being managed and not drifting.
3. Reports need to be developed for indicators 11, 13a and 13b for April 2018 report.



What's working well?

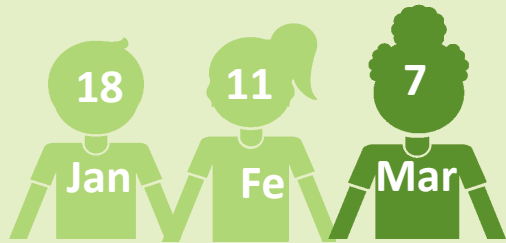
1. % of section 47's completed in timescale has increased to 100%.

What are we worried about?

What do we need to do?

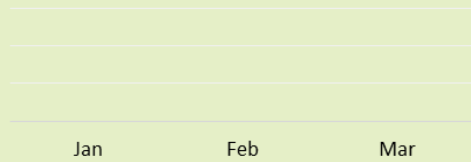
17. No. of Children Registered at Conference

YTD 154



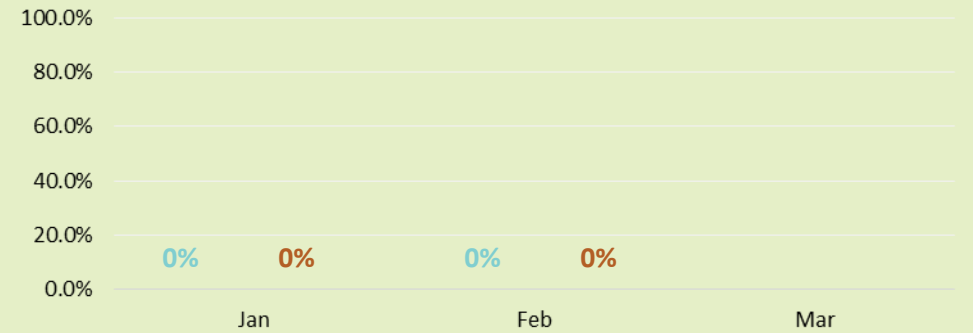
17a. No. of Re-Registrations on the CPR

YTD 4

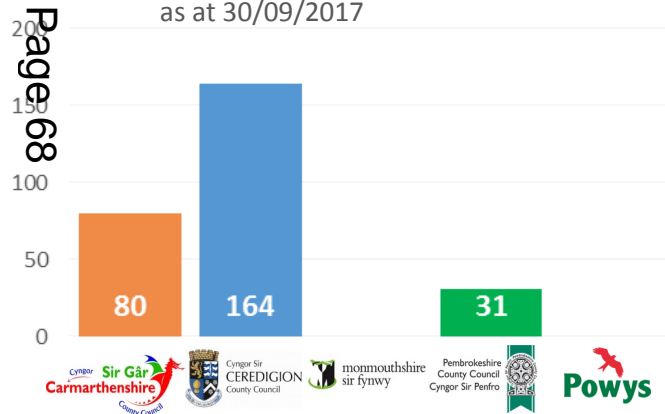


17b. The % of Re-Registrations on the CPR

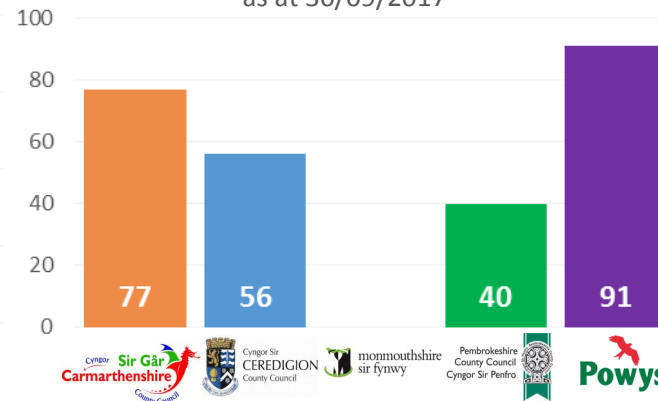
17c. Of which, % Re-Registrations within 12 months of previous De-Registration



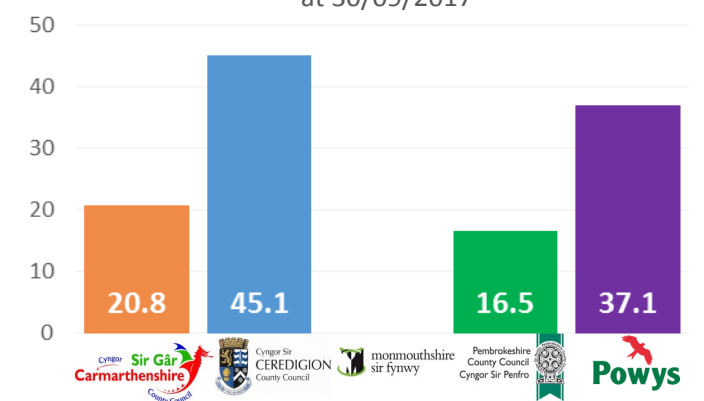
No. of Section 47 Assessments Completed as at 30/09/2017



No. of Children on the CPR as at 30/09/2017



CPR Rate per 10,000 Population as at 30/09/2017



What's working well?

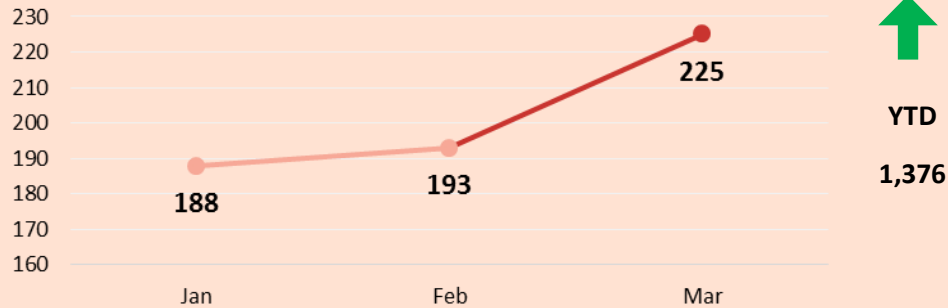
What are we worried about?

What do we need to do?

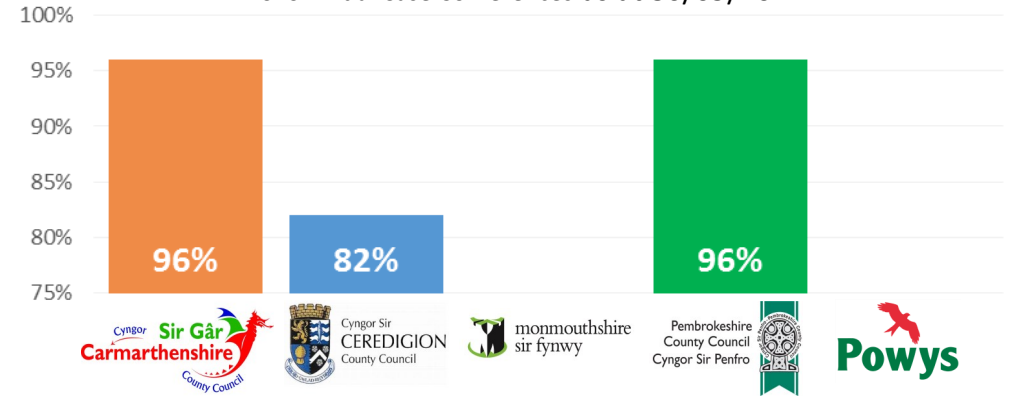
1. Due to the way the Safeguarding Admin are recording re-registrations our data is not up to date.

1. A manual piece of work is being undertaken to update our records in WCCIS.
2. Targets need to be set for measures 17a.

18. No. of Child Protection Monitoring Visits taken place



No. of Initial Case Conferences as at 30/09/2017



18.a % of visits held within Statutory timescale

Target 95%
YTD 50%

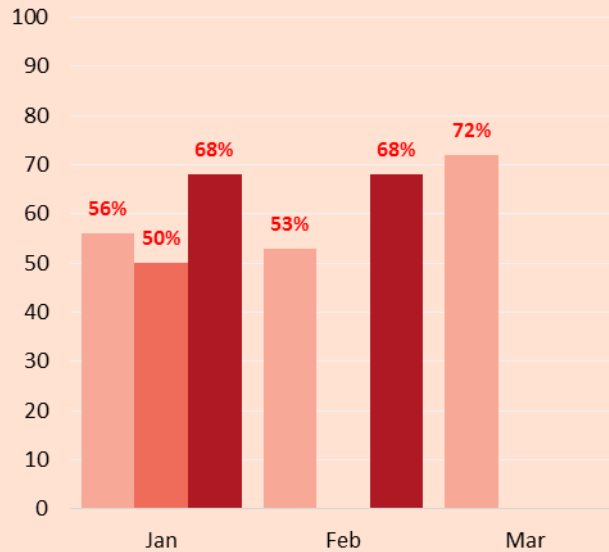
Page 69

19. % of Conferences Held in Timescale

Target 100%

20. % of Initial Core Group Meetings held in Timescale

Target 100%



21. No. of Strategy Discussions Held

| Jan | Feb | March | YTD |
|-----|-----|-------|-----|
| 178 | 115 | 121 | |

Of which:

21a. No. of Section 47 Assessments Commenced

| Jan | Feb | March | YTD |
|-----|-----|-------|-----|
| 67 | 28 | 48 | 716 |

21b. No. of Strategy Meetings Held

| Jan | Feb | March | YTD |
|-----|-----|-------|-----|
| | | | |

21c. No. of Initial Case Conferences

| Jan | Feb | March | YTD |
|-----|-----|-------|-----|
| 2 | 0 | 2 | 116 |

21d. % of Children Registered

| Jan | Feb | March | YTD |
|-----|-----|-------|-----|
| | | | |



What's working well?

1. The number of Child Protection Monitoring visits taking place has increased this month.



What are we worried about?

2. Visits within time-scale although improved, still remain well off-target.
3. The ratio of section 47 assessments completed to initial conferences is very low.



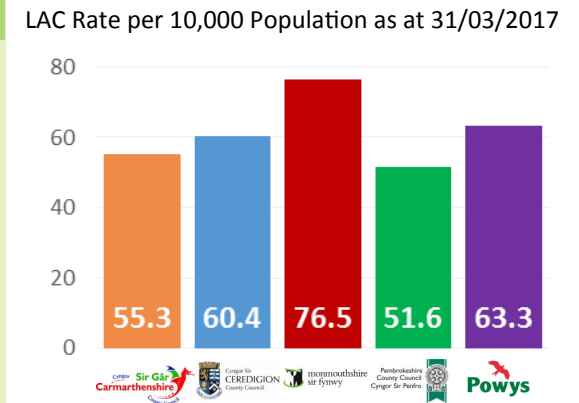
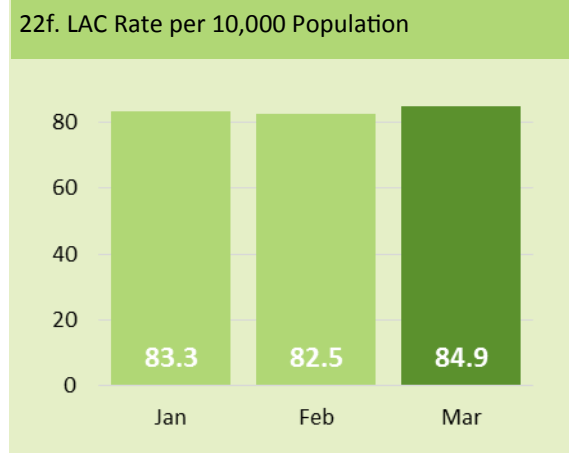
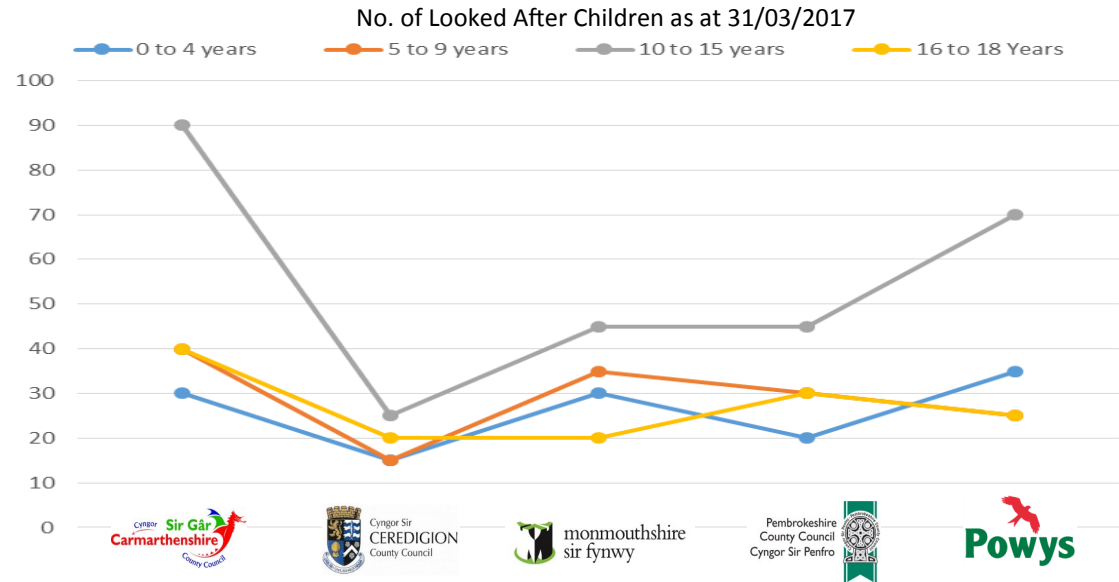
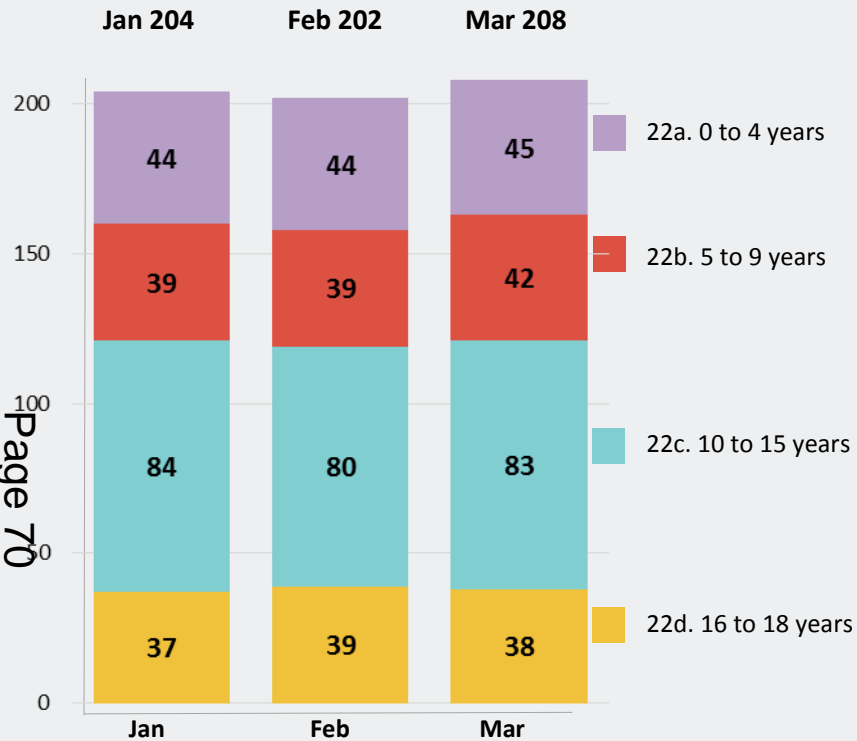
What do we need to do?

2. Reviewing practice to ensure that those just missing time-scale are brought forward to be more timely.
3. We need to analyse data by end of May 2018.
4. Measures 19 and 20 need data collection systems to be improved by recruiting additional resource by May 2018.
5. Measures 21b and 21d need reports to be developed for April 2018 report.



Looked After Children

22. No. of Looked After Children



What's working well?



What are we worried about?

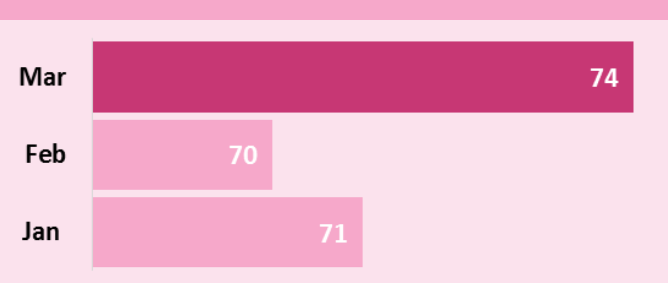
1. The current rate of 84.9 for the LAC Rate per 10,000 Population would mean that we are currently performing worse than our comparative performance for 2016-17



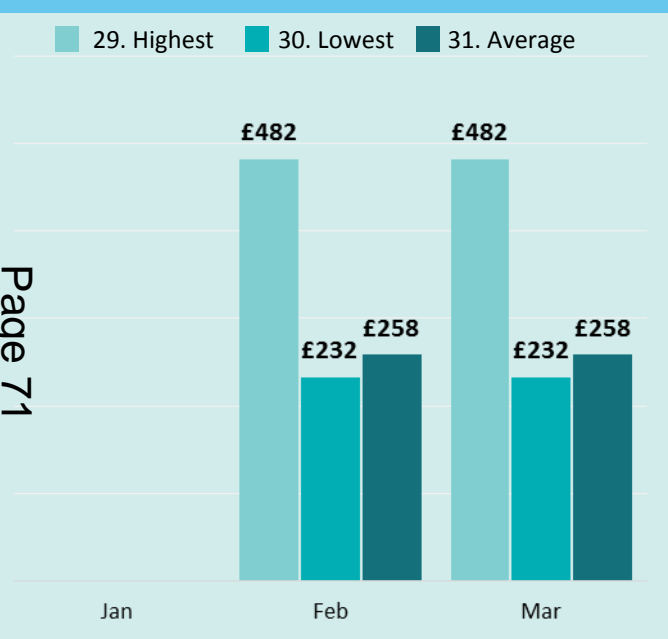
What do we need to do?

2. We need to complete work with our comparative authorities to share learning where our comparative age ranges differ for looked after children.

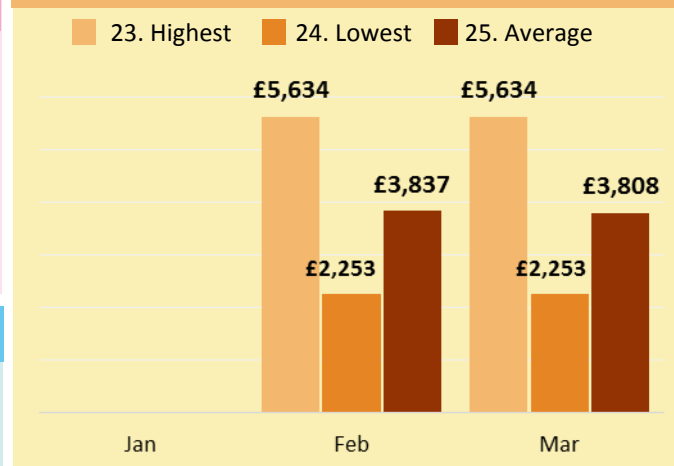
22g. No. placed out of county



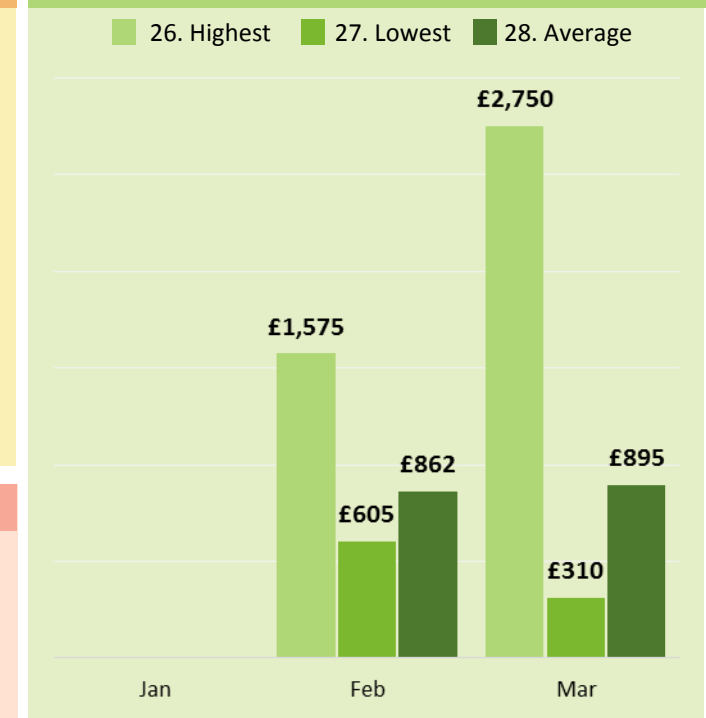
Kinship Placement costs (per week)



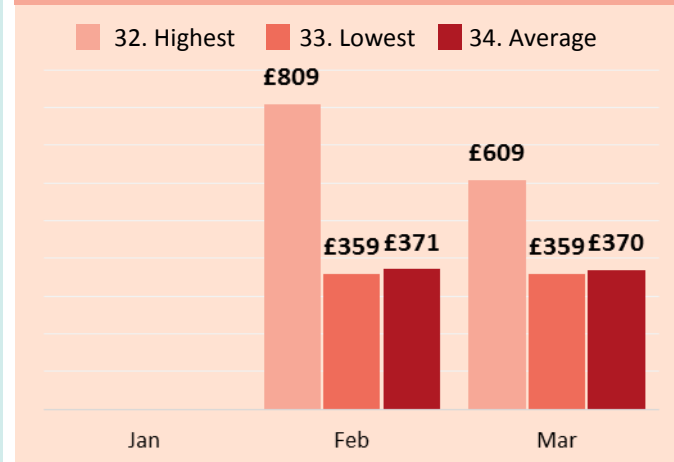
Residential Placement costs (per week)



IFA Placement costs (per week)



In-house Placement costs (per week)



35. Total cost of placements

YTD total (as at end Feb 2018)

£7,933,765.94

YTD total March 2018—TBA

Page 71



What's working well?



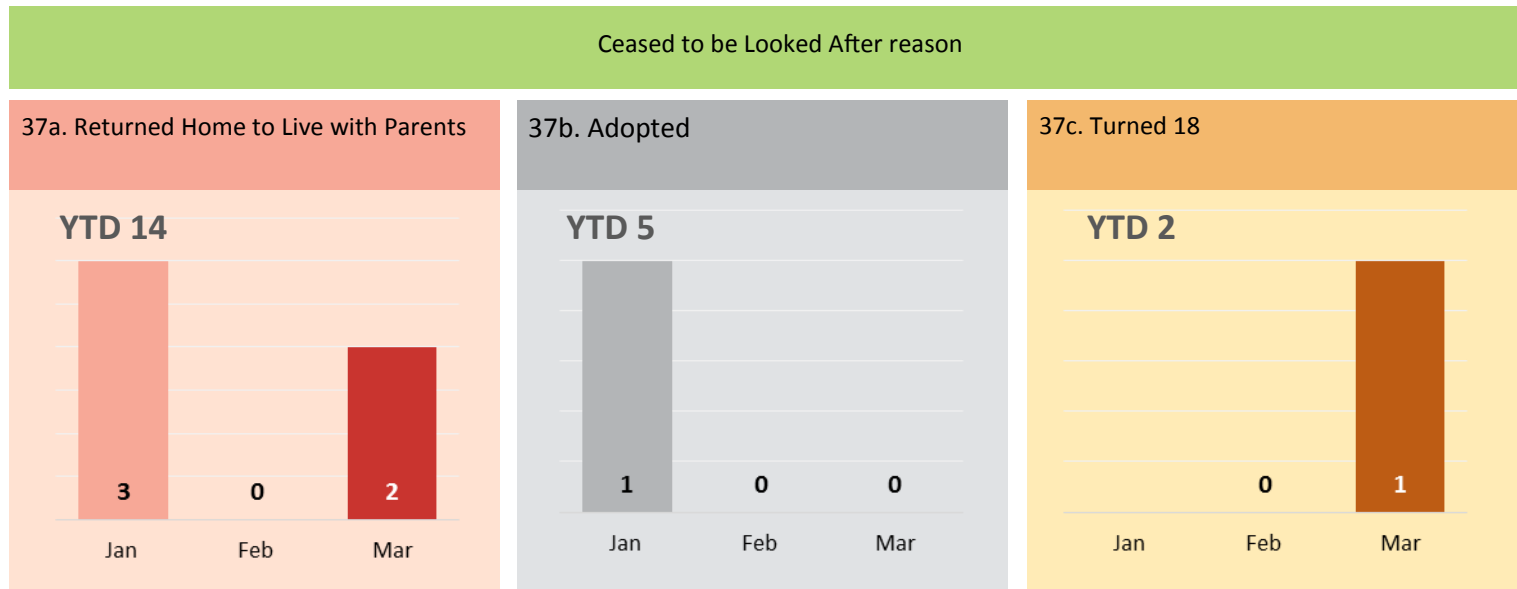
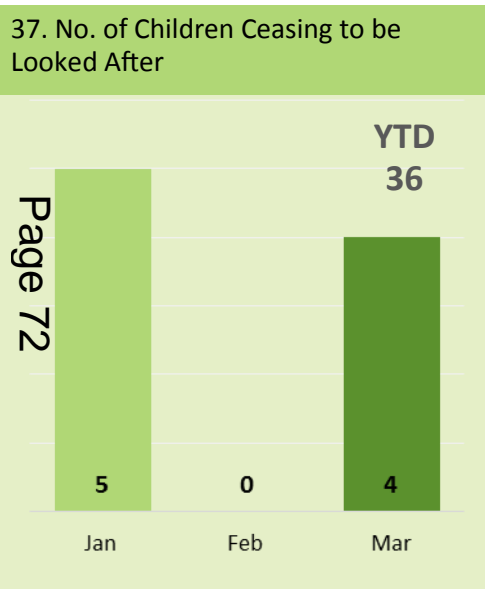
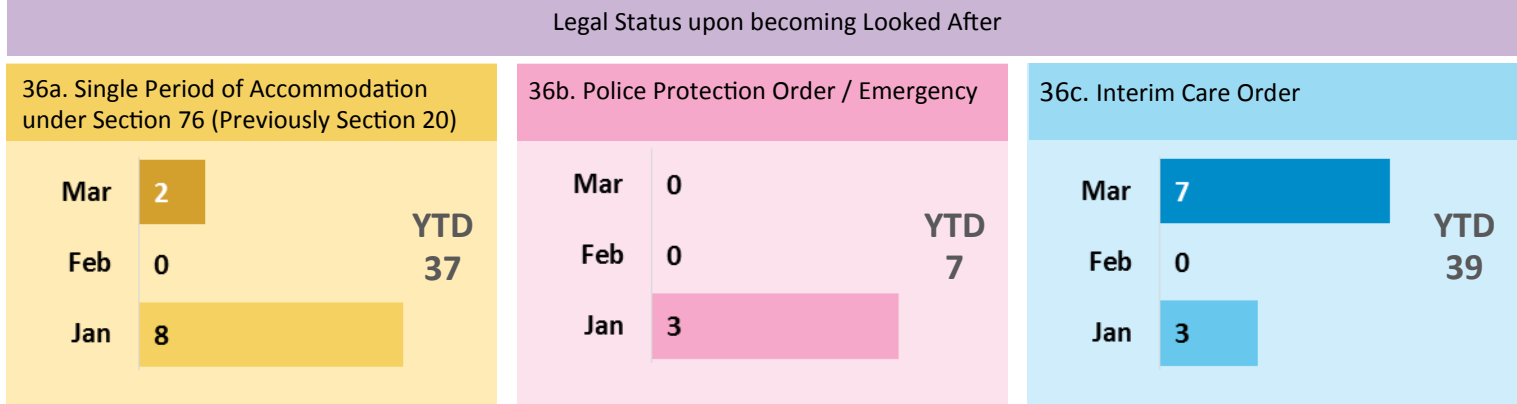
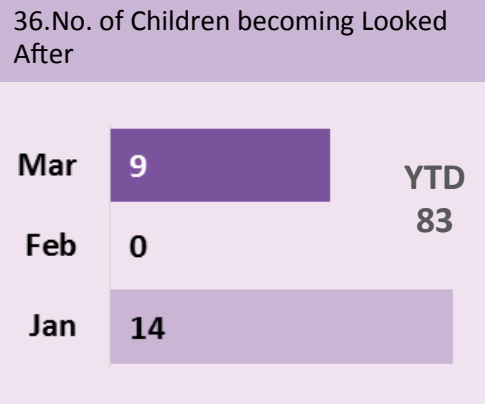
What are we worried about?

1. Increased number of children placed out of county



What do we need to do?

1. Conduct a review for any out of county placements by end of April 2018 and review findings.



What's working well?

What are we worried about?

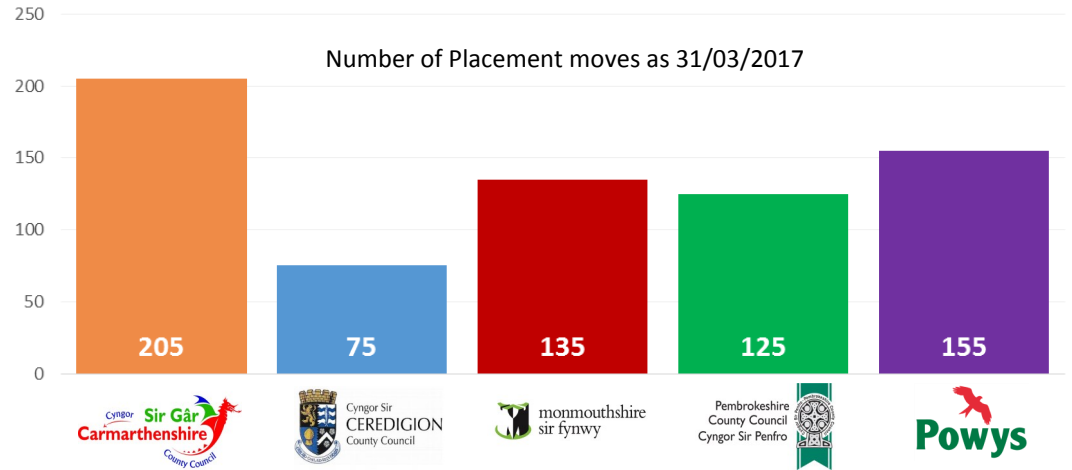
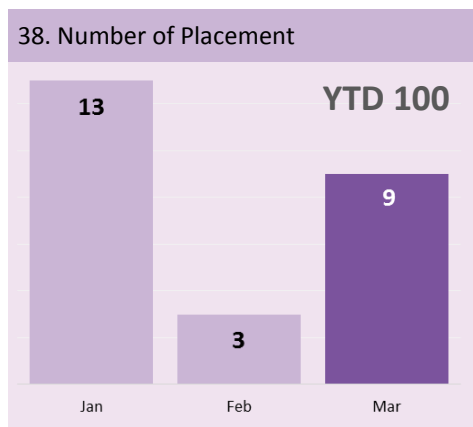
What do we need to do?

Continued, Ceased to be Looked After reason

| 37d. Special Guardianship | | | 37e. Independent Living | | | 37f. Transferred to Adult Services | | | 37g. Care taken over by another LA | | | 37h. Sentenced to Custody | | |
|---------------------------|---|----------|-------------------------|---|----------|------------------------------------|---|----------|------------------------------------|---|----------|---------------------------|---|----------|
| Mar | 0 | YTD 4 | Mar | 0 | YTD 4 | Mar | 0 | YTD 2 | Mar | 0 | YTD 0 | Mar | 0 | YTD 0 |
| Feb | 0 | | Feb | 0 | | Feb | 0 | | Feb | 0 | | Feb | 0 | |
| Jan | 0 | | Jan | 0 | | Jan | 0 | | Jan | 0 | | Jan | 0 | |

Page 73

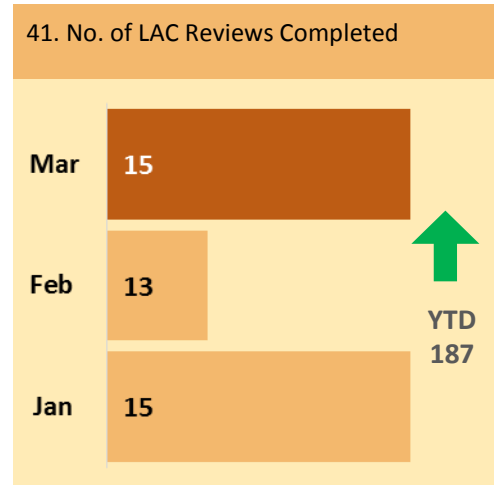
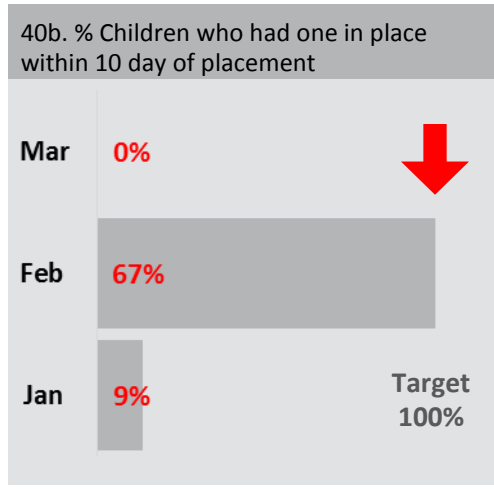
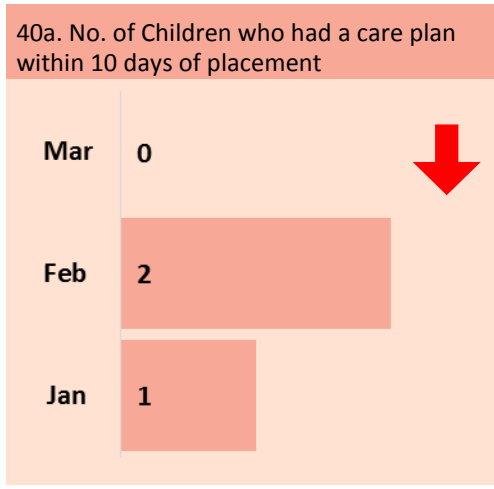
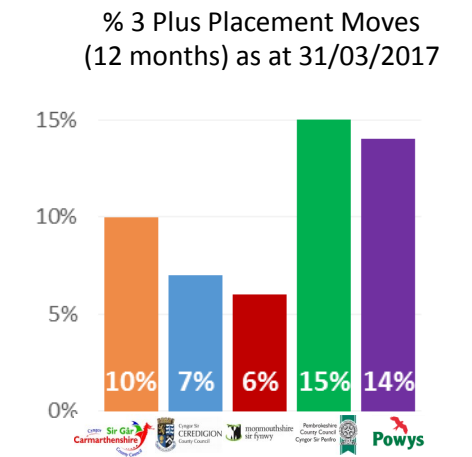
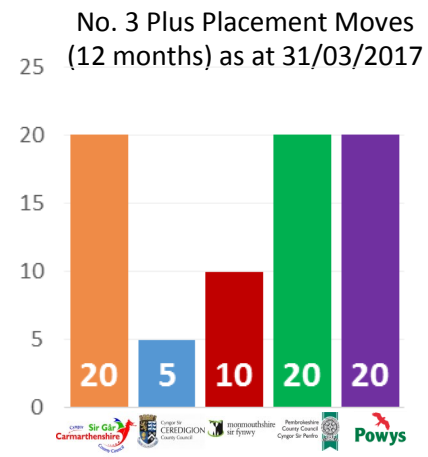
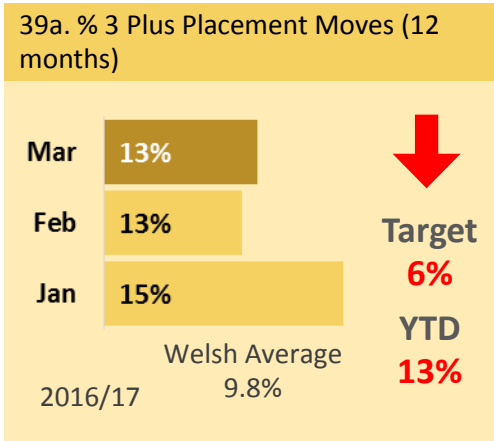
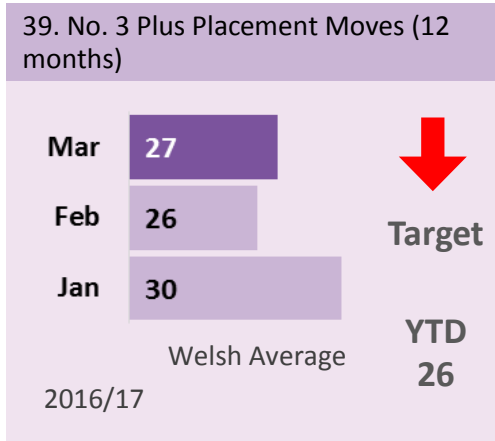
| 37i. Ceased for any other reason | | |
|----------------------------------|---|----------|
| Mar | 1 | YTD 5 |
| Feb | 0 | |
| Jan | 1 | |



What's working well?

What are we worried about?

What do we need to do?



What's working well?

What are we worried about?

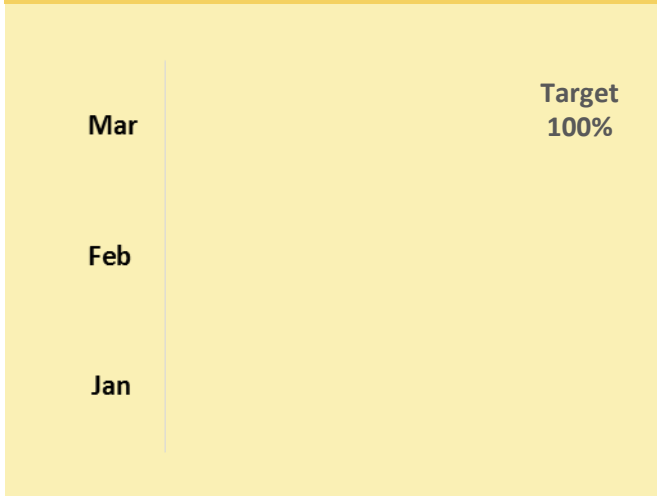
1. Recording of data does not reflect practice and needs further work.

What do we need to do?

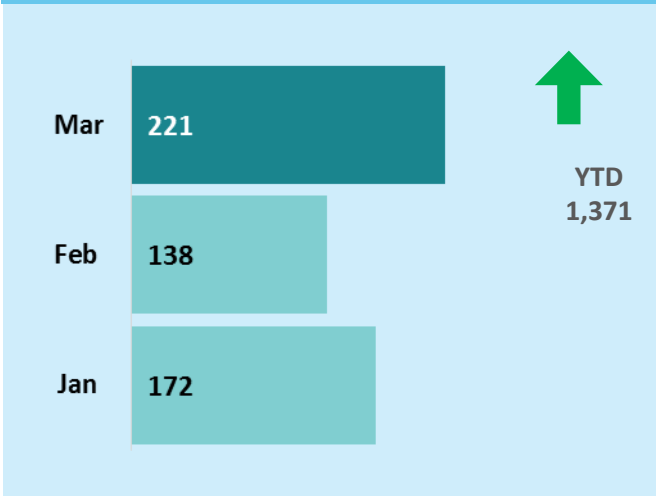
1. Weekly locality team meetings will support staff to address this.

Page 74

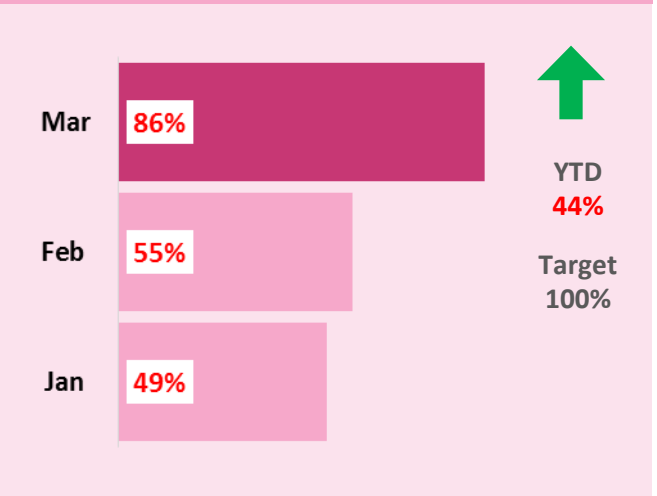
41a. % of LAC Reviews Completed in Timescale



42. No. of LAC Stat Visits Taken Place



42a. % of visits held in timescale



What's working well?

1. LAC Stat visit performance has improved both in terms of volume and timeliness.



What are we worried about?

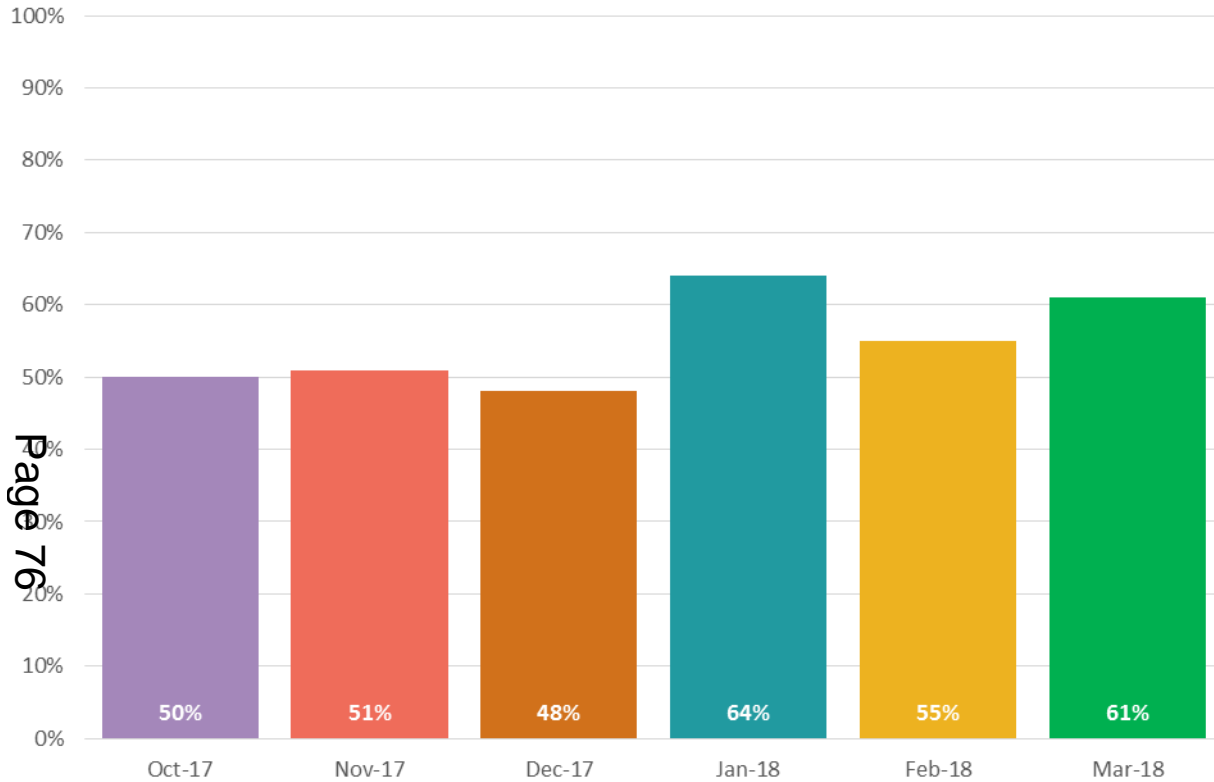
1. LAC review monitoring forms are not set up to allow us to calculate timescales



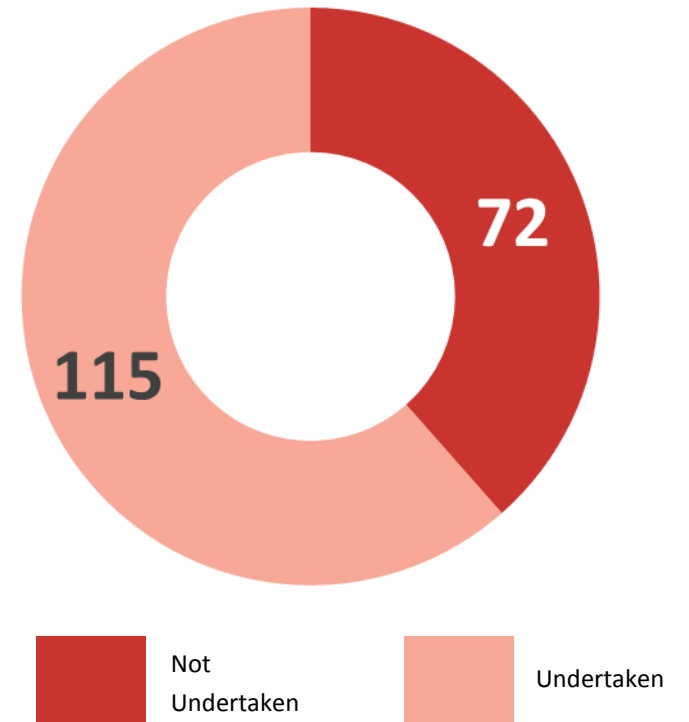
What do we need to do?


1. The service are in the process of reviewing quality and procedure to implement the new recording practices by May 2018.

Monthly 1 to 1s in the selected period per month




Total of 1 to 1s Not Undertaken/ Undertaken by all teams in March 2018



 What's working well?

1. Performance has improved from February to March

 What are we worried about?

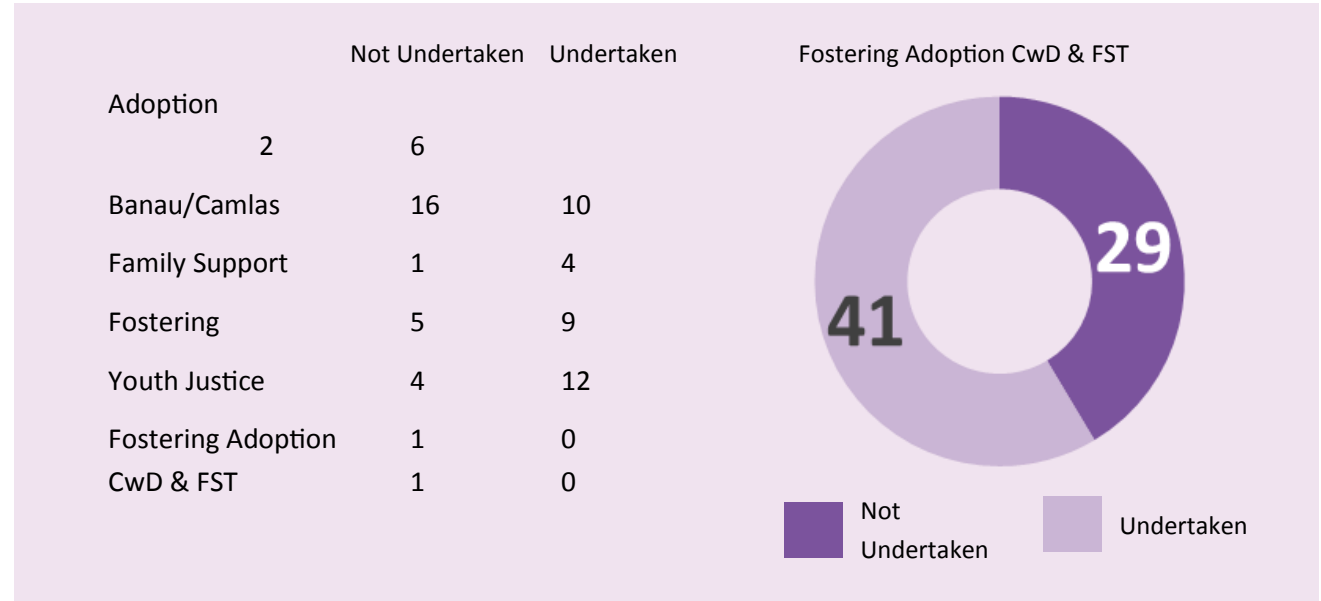
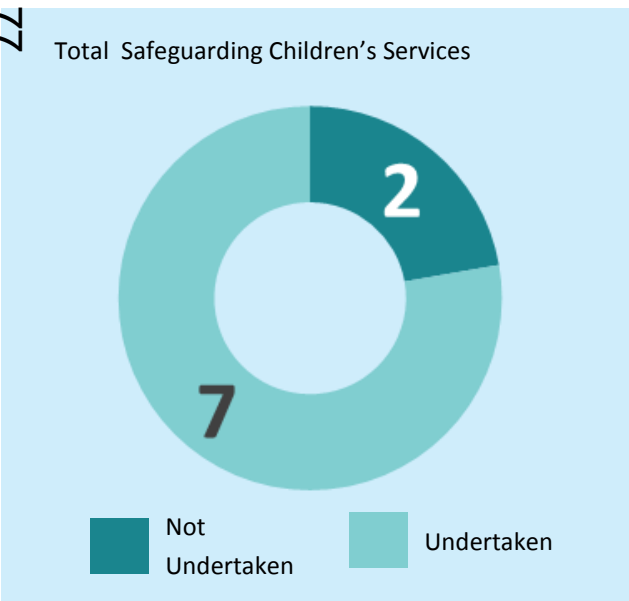
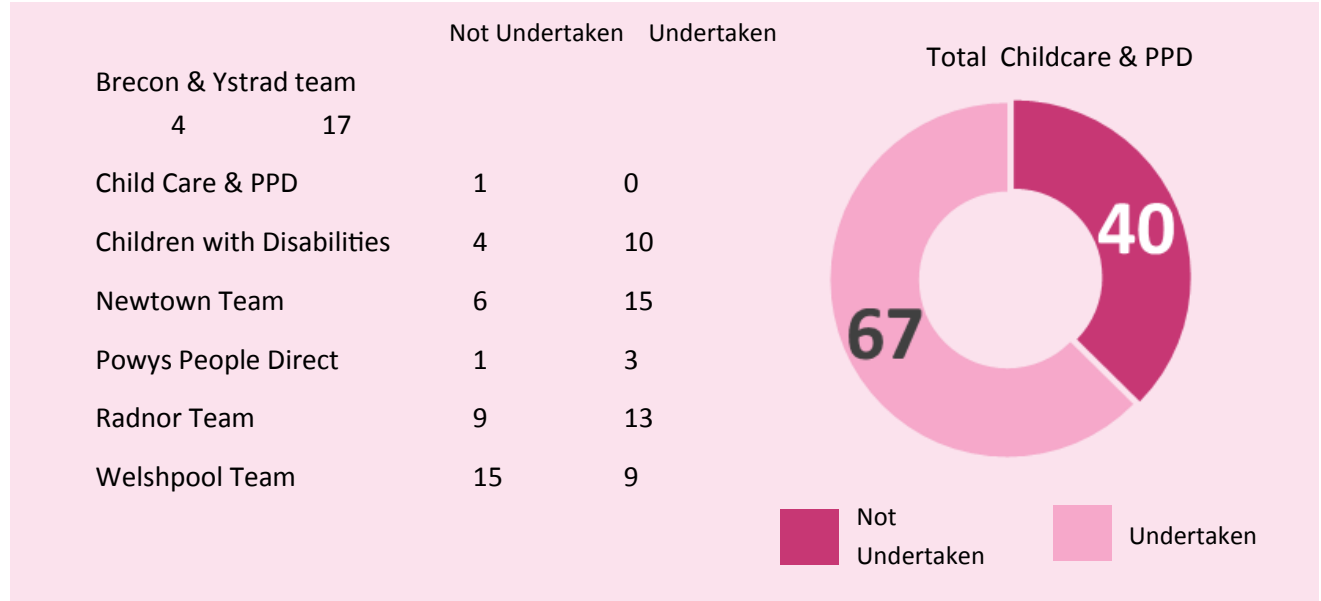
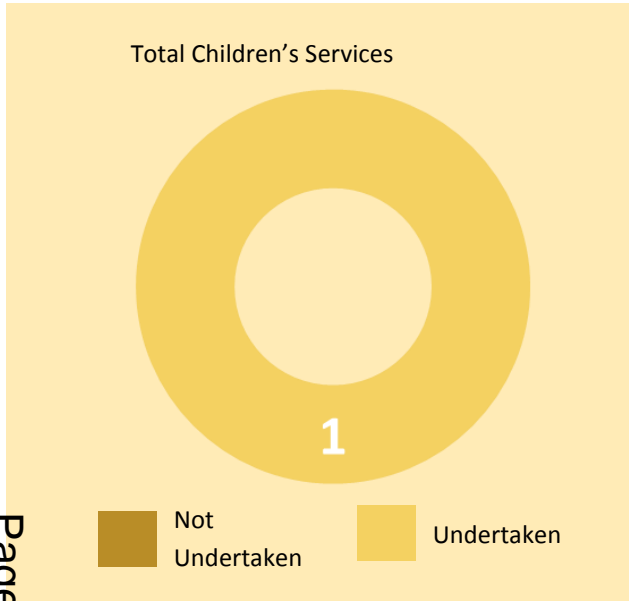
1. Our HR system was unavailable from 2nd to 10th April, hindering peoples ability to update their records. Also our reporting connection to the new HR environment is still not updating.
2. The current supervision report does not exclude those where staff have left the authority or are on long term leave/absence.

 What do we need to do?

1. Ensure update of supervision records for verbal update at improvement board.
2. Modify the supervision report to exclude staff who have left the authority or are on long term leave/absence by April 2018 report.

Staff Supervision February 2018

Page 77



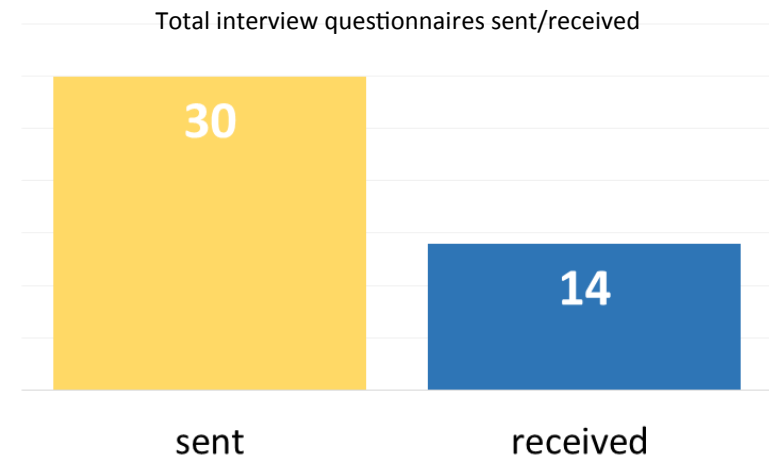
Leavers exit interview questionnaires

Nov 2017 to March 2018


| | External (Agency) | Internal | Sent | Received |
|----------------------------------|-------------------|----------|-----------|-----------|
| Childrens Team Manager | | 1 | 1 | 1 |
| Assistant Team Manager | 3(2) | | 3 | 0 |
| Data Quality Clerk | 1 | | 1 | 1 |
| Intervention Specialist | 1 | | 1 | 1 |
| Policy Development Officer | 1 | | 1 | 1 |
| Quality Assurance Officer | 1 | | 1 | 1 |
| Senior Social Work Practitioner | 4(1) | | 4 | 1 |
| Social Worker | 13(9) | | 13 | 6 |
| Sup Lodgings Coordinator Newtown | 1 | | 1 | |
| Wellbeing Officer—Childrens | 3 | | 3 | 1 |
| Fostering team | 1 | | 1 | 0 |
| Totals | 29 (12) | 1 | 30 | 14 |

Page 78


- ### Reasons for exiting PCC
- End of contract
 - Leaver own accord
 - Mutual termination of contract
 - Redundancy - Voluntary
 - Retirement




What's working well?



What are we worried about?



What do we need to do?



Cyngor Sir Powys County Council

CHILDREN'S SERVICES IMPROVEMENT PROGRAMME 2017-2020

Page 79

“Working together to ensure that Powys children and young people are safe, healthy, resilient, learning, fulfilled and have their voices heard, valued and acted on.”

POWYS CHILDREN'S SERVICES CHARTER

Children and families in Powys can expect:

- ✓ INCREASED WELL-BEING
we will provide high quality support to families and children.
- ✓ FIRST-RATE PROTECTION
we will keep children and young people as safe as possible.
- ✓ BEST PRACTICE
we will carry out professional responsibilities to high standards.
- ✓ FIRST-CLASS PERFORMANCE
we will achieve ambitious performance targets.

Contents

Foreword

Why we need to improve

Statutory Responsibilities

CIW Children's Services Inspection 2017 and subsequent fieldwork

Warning Letter from the Minister for Social Services

Feedback from Children, Young People and Families

A growing mismatch between the Council's expressed priorities and its performance

Page
81

Our improvement journey so far

Access

Assessments

Care and Support

Safeguarding

Workforce

Shaping and Commissioning Services

Leadership, Management and Governance

How we will improve

Producing an effective improvement programme and plan

What good looks like – our key improvement aims

- **Aim 1: To support families to stay together**
- **Aim 2: To manage risk confidently and effectively when supporting families where children or young People are at the edge of care**
- **Aim 3: To provide and commission a flexible and affordable range of high quality placements**
- **Aim 4: To give children and young people clearly planned journeys through care**

Our Improvement Model

Partnership Working

Governance and Leadership

Foreword

Powys County Council needs to change and improve. We fully accepted the findings of the Care and Social Services Inspectorate Wales (CIW) report published in October 2017 and the subsequent warning notice issued by Welsh Government. They found that we had failed to meet the high standards children and families in the county should expect and deserve. The report raised serious issues about how we provide Children's Services for the most vulnerable children in Powys; delivering improvements requires all the Council (not just Children's Services) to make this a priority.

The Council is committed to safeguarding children in Powys. This programme and plan have been approved by the Cabinet and by the Improvement Board. It will provide direction for deep and sustainable change and improvement to services for children and families. We understand the challenges facing the service and delivering the accompanying associated action will ensure that arrangements for safeguarding children and complying with the supporting legislative frameworks are robust and represent best practice.

The programme will build on the strengths of our staff; CIW recognised their resilience and professionalism in the face of many challenges. We recognise that, to be effective, Children's Services must be able to call on a wide range of corporate support services and so we will drive improvements across the whole Council to ensure that the service can deliver its duties. Staff and councillors will be assisted by the independent Improvement Board and by colleagues from across Wales and beyond who have offered their expert support. Together we will address key issues raised in the inspection report and bring about lasting improvement in this most critical of services.

The improvements are already underway and they will be continuous. We will look explore constantly how we can do better to achieve positive changes and monitor improvements. We believe that, by working with unity, integrity and clear purpose, we will have in place a service of which everyone can be proud and which helps children and families to achieve the best possible outcomes.

Cllr. Rosemarie Harris – Leader of Powys County Council and **David Powell** – Acting Chief Executive, Powys County Council

Statutory responsibilities

1. Children and young people in our communities who need care and support under the Social Services and Well-being (Wales) Act 2014 are especially vulnerable and entitled to effective help. The Act gives every Local Authority responsibility for making sure that these children receive the right help at the right time, to improve their well-being and protect them from harm. This means:
 - identifying and assessing children who need care and support as early as possible;
 - helping them to use the strengths in their families and resources in their communities to provide help and support; and
 - intervening at a time which prevents needs becoming critical.
2. In addition, as Corporate Parents of children who are looked after, it is the Council's responsibility to help keep them safe, to make sure that their experiences in care are positive, and to improve the access they have to opportunities for them to succeed in life, including after care support.
3. In carrying out these complex and high-profile tasks, the Local Authority must establish and show how it is going to improve the general well-being of children and young people who need care and support, for whatever reason. Help will be made available at all stages of any child's 'care journey', with clear statements about how children and their families will be supported to stay together whenever it is safe to do so and about how the Local Authority will minimise the need for children to become looked after. The Local Authority is obliged to describe the types of care and the range of placements it wants to provide and commission for Looked After Children. The overall strategy for Children's Services should identify how the needs of children, young people and their families will be met within the resources available to the Local Authority for a specific period, both short-term and long-term, to ensure that services are sustainable and consistent. All these elements contribute to the delivery of an integrated and effective pattern of services to children young people and their families.

2017 Inspection of Children's Services by the Care and Social Services Inspectorate Wales (CSSIW)¹

4. An inspection of Powys by the Care and Social Services Inspectorate Wales (SSIW) in July 2017 looked at the quality and effectiveness of children's services. It examined how children and families access help, care and support services and how well care and support is provided to meet their needs and keep children safe. The inspection also considered the quality of leadership, management and governance arrangements to develop and support services for children and young people.
5. In their report, CIW expressed serious concerns about leadership, management and practice in Powys Children's Services. The grounds for these concerns included:
 - failings in corporate leadership;
 - lack of stability in management arrangements;
 - staffing capacity in front-line Children's Services teams; and
 - the quality of professional practice.
6. The Inspectorate concluded that, as a consequence, children were being placed at risk. The inspection report ([Key Document 1](#)) contained 29 recommendations (prioritised over one year) in respect of case management, staffing, leadership, assurance, workforce, and interagency/partnership working.

Page 85

Warning Letters from the Minister for Social Services and Public Health/Minister for Children and Social Care

7. The inspection prompted a Warning Notice on 17 October from the Minister for Social Services and Public Health to the Leader, concerning the steps the Council needed to take to address the serious concerns raised by CIW. It was issued under Part 8 of the

¹ Now called Care Inspectorate Wales (CIW).

Social Services and Well-being (Wales) Act 2014, sections 150-161. Section 150 provided for the two grounds under which the Notice was issued.

- *Ground 1 - the local authority has failed; or is likely to fail to comply with a duty that is social services function; and*
 - *Ground 3 - the local authority is failing, or is likely to fail, to perform a social services function to an adequate standard.*
8. Section 151 allows Welsh Ministers to give a local authority a Warning Notice if they are satisfied that one of the Section 150 grounds is met. Under section 151, the actions required by the Council to deal with the Minister's grounds and reasons for intervention were:
- to prepare an Improvement Plan (Key Document 14);
 - for the Improvement Plan to be delivery focussed and set out both short and long term milestones;
 - for an Improvement Board to be established to oversee the Improvement Plan;
 - for an Interim Director of Social Services to be appointed (Key Document 4);
 - for a strategy to fill vacancies within Children's Social Services to be prepared (Key Document 9);
 - for an agreed Improvement Plan to be submitted within 20 days of the publication of CIW's inspection report;
9. There is a requirement under section 151(3) (a) and (b) that the Welsh Ministers lay a copy of the Warning Notice with the National Assembly for Wales within 21 days of its despatch and then report to the National Assembly for Wales on the action taken by the Council within 90 days of giving the Notice.
10. A second letter from the Minister clarified expectations around the establishment, constitution and purpose of the Improvement Board. It made clear that the Board should be independent of current Council officers and elected members in terms of its oversight of the delivery of an Improvement Plan which addresses all the issues raised in the CIW Inspection Report. The Board's line of accountability should be directly to the Leader. In terms of its role and purpose, the Board would be expected to formally approve the final version of the Improvement Plan. It would also oversee handling of any queries or complaints received as a result of the inspection and ensure that there were safe and trusted mechanisms in place for staff to express views and/or concerns about their work or working practices. All of these responsibilities were to be formally set out in the Improvement Board's Terms of

Reference (Key Document 2). The Board was to be chaired by Jack Straw, with Phil Hodgson and Geoff Burrows as members together with a representative to ensure that the rights and voice of the child are heard.

11. A follow-up visit by the Inspectors in December 2017 identified the following as issues of concern:

- the need for increased understanding and ownership of the improvement plan by all staff;
- increased understanding of the principles and practice of the Social Services and Well-being Act among front line staff, which is likely to require further training and corporate support;
- increased consistency of front line practice between teams across the county;
- increased engagement with, and support by, key partners in driving improvements in support for vulnerable children and families in Powys;
- provision of staff training on child sexual exploitation;
- effective and reliable performance and quality monitoring; and
- ensuring supervision arrangements are realistic, effective and well recorded;
- the quality of operational practice which was particularly evident when inspectors read case files;
- elongated timescales for the completion of assessments and care and support plans and lack of management sign off;
- frequency of statutory visits for looked after child and those on the child protection register remains an area for improvement;
- little reference to direct work with children or reference to commissioning of specialist resources;
- safeguarding practice issues including use of risk assessments, support to children at risk of child sexual exploitation and multi-agency involvement.

12. On 15 January 2018, the Minister for Children and Social Care issued a follow-up warning notice under the same grounds as the first. He recognised that the Council is on a journey of improvement and he was pleased that there were early signs of improvement and improved practice. He noted that the Council had appointed an interim Director of Social Services and an Improvement Board and started to implement the first iteration of its improvement plan. The next phase of actions he required were:

- To submit a revised Improvement Plan to Care Inspectorate Wales (formerly, CIW) and a copy to the Director of Social Services and Integration, Welsh Government no later than 7 February 2018. The revised plan is to include actions for improvement which the authority will achieve -
 - within 6 months of the date of this notice and
 - within 12 months of the date of this notice and
 - within a period which goes beyond 12 months from the date of this notice up until January 2020.
- The actions for improvement must address the findings described in Key Document 1 and CCSIW's letter dated 4 January 2018 to the Interim Director of Social Services issued following CIW's monitoring visit in December 2017;
- Once the revised plan has been submitted, an addendum to this notice will be issued requiring Powys County Council to achieve the improvement actions within the time periods specified in the plan and these will be the relevant compliance periods for the purpose of section 151(2)(d);
- To introduce a quality assurance framework to improve consistency and standards of front line practice across the county. The framework must be drafted by 31 March 2018 and the authority must be able to provide substantial evidence of implementation of the framework by 30 June 2018;
- To continue to arrange for an Improvement Board to oversee the actions of the Interim Director, to provide constructive challenge and strategic oversight of the Interim Director's actions as regards all social services functions relating to children;
- The Interim Director to provide monthly reports to the Improvement Board and Leader of the Council with a copy to the Director of Social Services and Integration, Welsh Government.

The Notice states that, if Powys County Council does not carry out the actions set out within the specified period satisfactorily, Welsh Ministers are minded to more directly intervene in one or more of the methods of intervention provided for under sections 152-161 of the Social Services and Well-being (Wales) Act 2014.

The Voice of Children, Young People and Families

13. A Child Practice Review, completed in 2017, identified several key areas for learning which have helped to shape this improvement programme and plan. Reviewers had the opportunity to meet with a group of young people, to help gain a clearer understanding of their experiences as a young person in care, leaving care or getting ready to transition into adulthood. All the young people spoke of their very real fears about leaving care and being cut adrift. They wanted their corporate parents and current carers to look after them as they would their own children - being caring and caring enough to challenge them. Their messages were clear but so too was the extent to which the Council was struggling to meet many of their expectations.

- Allow young people the chance to make mistakes, leaving care is scary and we might want to leave then come back so plan for that, it's not 'all or nothing'.
- Foster carers are brilliant, but they never replace our actual family so don't forget that, as we don't, when it comes to the time that we have to leave care.
- Teach us how to do the simplest things that you take for granted like what does 'bleeding a radiator' mean when you live on your own in a flat and your heating breaks. That just sounds like a mad thing to tell someone to do.
- Remember to make decisions with us and when we are confused, make them for us, like your real parents would do. We need you even though we don't always think so at the time.
- Don't forget that once I've left care, I've got no one to ask about my history and what happened to me when. So, tell us the truth about our life story, don't fluff it up!
- Make sure we know when things can really start (apprenticeships, further education, work or university) so that they are not just promises that never go anywhere.
- Remember the good things that we achieve and help us hold on to them, not just all the mistakes we make.
- Let us stay with our foster carers until it's the right time to leave, just like their own kids.

14. We have significant amounts of other evidence accumulated from a wide range of sources (children and families, our own staff, advocates, complaints processes, representations by elected Members, AMS and MPs fellow professionals and partner agencies) that there have been serious shortfalls in our ability to meet the care and support needs of vulnerable children and families.

A growing mismatch between the Council's expressed priorities and its performance

15. Local authorities in Wales differ in their capacity for meeting the needs of vulnerable children and families. However, the problems identified by the Inspectors in Powys are exceptionally significant, generic and commonplace, reaching into many areas of practice and service provision.

16. In their report and recommendations, the Inspectors set out some possible explanations for this state of affairs. The service had depended heavily on short-lived appointments, interim managers at senior levels and agency front line staff. This has been a source of instability and discontinuity especially in responding to the considerable changes required to implement the Social Services and Well-being Act. It coincided with a period of financial challenges and anticipated overspends, the introduction of a new electronic records management system in April 2017 and the commissioning by the local authority of a major external review of both adult and children's services which was completed in 2016. Inspectors found that implementing the recommendations of the external review further exacerbated failings in children's services, destabilised the workforce to a significant extent and consequently placed children at risk of harm.

17. Children and young people did not appear to be well served by the arrangements for getting access to services in Powys. A poor approach to assessment and care and support planning, combined with inconsistent management of risk and lack of awareness about sexual exploitation, also placed children at risk of harm. Child protection processes did not always comply with statutory guidance, with delays in investigations and assessments being undertaken and limited completion of statutory visits. There was evidence of missed opportunities to safeguard children, despite requests for support.

18. These serious performance issues in front-line services mean that we must acknowledge the need for the strongest possible commitment in Children's Services to improving unacceptable standards of practice. Vulnerable families and the Council have a right to expect from the staff a collective and individual obligation to meeting professional responsibilities as set out in the relevant

codes of practice for all those working in social services. However, inspectors also attributed these failings to instability in management, poor and confused direction and weak governance. Inspectors noted the commitment of the staff, who had shown resilience and professionalism whilst coping with significant changes and depletion in support services and leadership capacity. They saw real commitment to protect and respond to safeguarding children in very difficult circumstances. Staff had been mutually supportive through challenging and difficult times and had shown a real desire to move on. “However, without effective support and capacity to undertake the work front-line staff cannot be expected to undertake the complex work required in children’s social services.”

19. As the inspectors recognised, the Social Services Directorate was very much affected by shortfalls within the Council. Plans for improvement did not receive their full support. Some key aspects of the new legislative framework for care, support and well-being were not acknowledged adequately at corporate and political levels. Changes in senior management brought about changes in direction and priorities which caused inconsistency and confusion. Council-wide statutory responsibilities such as safeguarding and corporate parenting were not embedded in executive, scrutiny or senior management arrangements. Support from corporate services was inadequate and managers in social services were deflected from focusing on statutory work to deal with increased bureaucracy. Some poor decisions about resource management in social care were made, with a programme of severe and unrealistic efficiency savings. Partnership working suffered from delays in making key decisions. .
20. The impact of this legacy is difficult to put behind us. Feeling undervalued and marginalised, some staff have become sceptical about prospects for positive and sustained change. However, recent developments are beginning to secure much better support for children’s services across the Council.
21. This is the context in which Powys County Council is embarking on an ambitious, far-reaching and urgent programme of reform.

Our improvement journey so far

22. The inspection raised serious concerns about leadership, management and practice in Powys Children's Services. The Council fully accepted the findings in the inspection report published on 17 October and the subsequent warning notice issued by Welsh Government. It quickly acknowledged the need for urgent and sustained change which will demonstrate our genuine commitment to safeguarding children in Powys. The Council produced on time its initial improvement plan, designed to provide a comprehensive response to the recommendations in the report and also one that matches the scale of the challenges we face.
23. The plan set out our goal: to move Powys as quickly as possible from its current position in respect of children's services to a place of real strength and exemplary performance. We acknowledge that this goal will require considerable efforts to reshape children's services and also a coherent direction sustainable over the next three years. Working closely with the Improvement Board, CIW, Welsh Government, regional and other key partners, the Council is able now to set out comprehensively both the urgent and the long-term work needed. We have done so in this second iteration of the overall programme of change and the action plan.
24. As an organisation, we have been achieving important milestones in our improvement journey since the inspection in 2017 – both those set for us and those we have planned. It has taken a considerable amount of collective effort. In terms of outcomes, there have been real benefits to some children and families. However, it is still early in the improvement process. Some of our work to date has confirmed that we are seeking to make progress from a very low starting point in important areas such as professional practice and corporate ownership of service priorities. On the other hand, there have been encouraging signs about our capacity to deliver positive change at pace while dismantling some of the obstacles that could get in the way. We can begin to demonstrate that children's services are firmly established as a political and corporate priority and that good foundations are being laid. Again, this is tempered by realism about how far we need to travel.
25. The actions set out in the programme and the plan will ensure that arrangements for safeguarding children and complying with legislative requirements are robust and represent best practice. Delivering all the changes promptly and effectively will mean that, at the earliest possible time, we can provide the people of Powys and external bodies with realistic reassurance that children are

being safeguarded effectively and that children's services are fulfilling all their statutory responsibilities to the highest possible standard.

26. We recognise that delivering the programme and the plan requires the Council to make this our top priority, not only in terms of work to improve children's services but also in taking corporate ownership of key responsibilities (in areas such as prevention, safeguarding, edge of care services, looked after children and leaving care services). The arrangements for accountability set out in this document and being put into effect demonstrate that the Leader, Cabinet members, the Chief Executive, the corporate management team, staff and partners accept a personal and collective responsibility for ensuring that change does happen and that good outcomes are achieved.

27. Since the inspection, extensive activity has taken place across the Council to secure greater compliance with statutory requirements and practice standards. There has been a rigorous process of self-assessment and we have listened to advice from a range of people who are experts in producing improvement in children's services experiencing severe difficulties. Consequently, Powys has developed a good understanding of its strengths and areas for development, further informed by the helpful recommendations made by the Inspectors and by the work of the Improvement Board. We have acted to:

- strengthen governance arrangements, including the introduction of a very strong independent Improvement Board which is chaired by a former local authority Chief Executive who has experience of leading a council where statutory intervention has been used;
- engage the council's whole extended leadership team in this work;
- recruit more social workers (going above establishment in front line teams) and creating additional capacity in areas such as Powys People Direct, the fostering and adoption services, quality assurance and business management;
- put in place highly experienced senior leadership for children's services and social services as a whole;
- develop plans for reshaping services with our partners;

- improve HR, IT and performance monitoring systems;
- use the expertise and knowledge available within the Improvement Board to support change, such as fieldwork practice and fostering; in key aspects of the improvement plan
- produce a financial plan that incorporates a safe and sustainable budget for children’s services (Key Document 3);
- agree a Corporate Safeguarding Policy (Key Document 5), which sets out the steps that the Council as a whole will take to protect and safeguard children and adults at risk, and set up a Corporate Safeguarding Group chaired by the Chief Executive and including both the Cabinet member for Children Services (Key Document 6);
- demonstrate renewed commitment to engaging effectively with the Regional Safeguarding Board, the Regional Partnership Board, the Children and Young People’s Partnership and structures for national working in areas such as fostering and adoption so that we can benefit more from partnership working and external accountability.

28. CIW undertook further monitoring activity in December. It focused on recent practice from August to December through case file reviews and discussions with front line operational staff. They found some early signs of improvement, some evidence of improved practice and many areas where the authority is putting in place new arrangements which have not yet had time to become embedded. They were still very concerned about the quality of operational practice, especially on the basis of their case file analysis. The Council received a letter summarising the findings on 4 January (see para11) and the conclusions have been addressed in this version of the improvement programme and plan. They seek to build on the strengths of our staff, whose resilience and professionalism in the face of many challenges CIW acknowledged in their report. However, it will include too the comprehensive programmes we are developing to improve practice at the frontline, especially in respect of safeguarding.

29. We acknowledge that effective and sustainable change will require far more time and effort. The following areas are seen as being major corporate priorities that must be pursued urgently.

- greater clarity about accountabilities for social services and recruiting a Director of Social Services as soon as possible;
- better engagement with children, young people and families to encourage co-production in service design and review;

- an improved offer to specific groups, such as young people leaving care and foster carers;
- more inquisitive and effective scrutiny by elected members;

30. At the same time, the Social Services Directorate will focus on using additional resources being placed in the budget this year and for 2018/19 to improve our capacity for:

- engaging the whole workforce in service redesign;
- facilitating professional development in areas such as implementing in full the Social Services and Well-being Act, specialisation, appointing practice champions, best practice seminars and links to institutions offering professional courses;
- dealing with issues around operational structures, workload management, staffing needs (including urgent recruitment and filling vacancies on a longer-term basis);
- adopting a far more robust approach to performance management, case auditing, quality assurance and supervision at team and practitioner levels; and
- revising processes, policies and procedures.

31. In addition to the revised programme and plan, we have been working to deliver actions set out in the initial plan and to provide a comprehensive set of related documents that describe the strands of work needed to underpin our drive for improvement. The following sections describe the progress made in the following areas: access; assessment; care and support; safeguarding; workforce; shaping and commissioning services; leadership, management and governance.

Access

32. To meet the need of children and families for a timely and proportionate early contact response, we have increased capacity in Powys People Direct, our contact and early screening centre. It both provides information, advice and assistance and also

receives social services enquiries from the public and professionals. Recent concerns raised about people's ability to get access to PPD were addressed through a restructuring exercise. Supervision and support for contact officers have been increased and management oversight enhanced. The service has been re-located into county hall at Llandrindod Wells to meet more appropriately their accommodation requirements. Further work is planned in January to test the effectiveness of the systems now in use. We are making links with the Emergency Duty Team more robust while also reviewing how it operates in practice.

33. Consistent business processes and pathways (including an eligibility tool) support a triage approach; this ensures an appropriate referral pathway and enables early identification of safeguarding referrals. Consequently, urgent matters receive timely and effective responses. Post-referral communication with the enquirer has not always been carried out well enough. To address this issue, an automated referral receipt system is being developed which will describe for them how the matter is being progressed.
34. Comprehensive information on community support networks, including the third sector across Powys, is available through InfoEngine. This is an online database developed by the Powys Association of Voluntary Organisations (PAVO) and used widely across Wales. InfoEngine is used by Children's Services staff to share information with the public and it is freely available online for those seeking information, with active links from the Council's own website. Through PAVO, the Council has commissioned computer programmers to develop a link between InfoEngine and Dewis, the national well-being database, so that information from both systems is regularly shared and updated. This link should be available and 'live' in February 2018. Use made of both databases is monitored.
35. There is more work to be done in ensuring that all professionals understand and respect the role of Information, Advice and Assistance (IAA) and their responsibility for it in changing the way families can interact with organisations at an early stage of their involvement. We have to build a culture which routinely meets the expectations of the Social Services and Well-being Act and other legislation which encourages an emphasis on co-production and reducing dependence.

Assessments

36. The service has focused strongly on assessments, with twice weekly meetings of operational managers to ensure timescales are met and performance improved. An independent auditor also reviewed a small number of files and suggested more appropriate

timescales for completing assessments to ensure that they are more proportionate. We have started to measure performance against revised, more rigorous timescales. The data and other management information show an improving picture in respect of timeliness and quality but we will continue to prioritise this area for the foreseeable future to ensure that assessments are SMART, and provide good quality information from which to develop plans. We have also reviewed how we collect assessment data and agreed that, as PPD staff work do not complete full assessments but provide additional information for a referral, that their statistics will not be included in future. This will give managers a better understanding of performance issues.

Care and Support

37. Managers reviewed all children's case files to ensure that they all had up to date plans. All files have been reviewed and plans are in place. Children on care and support plans receive visits from their social worker and all looked after children are placed in appropriate regulated settings and are visited by their social workers. All children's cases are allocated to qualified social workers.
38. There are good examples of outcome-focused care planning which consistently reflects the outcomes of the assessment and the views of children and families. More families are becoming actively involved in planning and delivery of their care and support. They are supported to identify what matters to them and how they might achieve their personal well-being outcomes. These outcomes are clearly described and the actions to achieve them are identified. Assessment outcomes are pulled through from the assessment into the care and support plan. This enables a strengths-based approach and a focus on what matters to the individual.
39. Clearly, we need to ensure that this standard of work is delivered far more consistently and that staff consolidate the training they have received. We have too many cases where care and support plans are not set out in accordance with policy expectations. However, the Council has been prioritising investment in children's services and this enabling us to look again at how manageable caseloads can be achieved. The introduction of set numbers for caseloads and investment in staff will enable a change in practice going forward. There is a requirement for management oversight in relation to signing off of care and support plans. This gives an additional opportunity for case discussion and quality assurance. Team management structures have been designed to ensure structured and timely oversight of decision-making in care planning and review processes but capacity issues have made this more

problematic in some areas. Investment is being used to address these concerns and to secure additional Independent Reviewing Officer capacity and increased levels of independent advocacy.

40. The Council has also used this period to improve the accuracy of data and to support managers in addressing practice issues across the service. Detailed performance dashboards have been developed for front-line managers (updated daily) and for elected Members (updated monthly), based upon the model used in Swansea ([Key Document 7](#)). A weekly operational improvement meeting, with representatives from across the Council, focuses on actions to be completed and on removing any obstacles to good practice. The Interim Head of Service also meets weekly with Head of ICT and the Programme Officer to ensure good communication between the service and those support systems.
41. We have focused on timeliness issues in providing care and support services to children but this remains a priority. Through auditing, we have begun to examine the impact of these interventions to ensure that services deliver good outcomes. There is some evidence of improvement in this area but we recognise how much there is still to do in ensuring that standards are met consistently. Considerable work has been done in addressing problems within the in-house fostering service, partly caused by budget reductions, and this has been presented to the Improvement Board. We now have clear plans in place for significant investment. The Improvement Plan and the draft commissioning strategy ([Key Document 8](#)) set out a clear approach for reshaping services on a divisional, corporate and multi-agency basis.

Safeguarding

42. We have increased capacity in respect of IROs/Conference Chairs to meet current demand, especially to cater for the increase numbers of Looked After Children. A threshold tool, Quality Assurance Framework and auditing tool have been developed and launched. Another full time auditor has been appointed on an interim basis, pending recruitment. The Interim Head of Service has re-established the Powys Local Operational Group which operates on a multi-agency basis to co-ordinate (at the local authority level) the work led by the Regional Safeguarding Board. The interim Director has met with the Chair of the Regional Safeguarding Board to instigate a more purposeful approach to the Council's relationship with and contribution to the Board. These overtures have met with a very positive response and offers of support.

43. The service itself is focusing on the basics - ensuring that assessments are completed, statutory visits made within timescales, Case Conferences and Looked After Children reviews held promptly, plans developed and communicated with the family to ensure the child is protected and avoiding drift plans. We are also increasing capacity in the safeguarding service and developing our edge of care services to ensure that needs can be met.
44. The service and partner agencies will be adopting over the coming year the "Signs of Safety" model successfully used in other Welsh local authorities and beyond for achieving improved management of risk and a greater emphasis on the family's strengths and potential for change. This is an approach which can be understood and acted upon at all levels within the Council and in collaboration with key stakeholders. We will provide training for staff and partner agencies before we roll it out fully. We have been in contact with other authorities to learn and benefit from their experience of the model. The Director of Social Services from Swansea has agreed to hold a masterclass/seminar in February to describe their improvement journey.

Workforce

45. We have recruited 45 agency staff to cover vacancies or longer-term sickness absence. On a temporary basis, we have appointed to a number of social worker posts above establishment in order to support staff, reduce caseloads and stabilise the workforce. As well as increasing social worker capacity in front line teams, the Council is also committing to provide additional support staff so that front line practitioners and managers can focus on delivering safe and high quality services to children and their families. This includes strengthening the quality assurance functions (including Independent Reviewing Officers) and increasing capacity in Powys People Direct and the fostering and adoption services.
46. A workforce strategy ([Key Document 9](#)) will be presented to the Improvement Board in January. Having extra agency staff does increase capacity and experience within the workforce but, if workers change frequently, it can also add to instability for children and families. This too will affect the quality of support as so much of our work relies on relationships. Our priority is to stabilise the workforce as soon as possible. A stable and sizeable core of practitioners and managers, committed to working for Powys, is the key to delivering our statutory responsibilities for the benefit of the county's children and families.

47. We are committed to equipping staff with the skills they need and to ensuring that additional resources are provided in areas where we need to make most difference. In their recent fieldwork and monitoring exercise, CIW identified some positive steps and early improvements but noted that there is much more work required. As a result of this feedback, we will continue to focus on front line practice. The authority has appointed an experienced additional senior manager to add leadership capacity on behalf of the Head of service. The focus for this role will be to support practice in respect of assessments and in ensuring that:

- children's plans are 'SMART' and effective;
- visits are undertaken in accordance with the child's plan; and
- reviews are undertaken according to the relevant timescales.

Shaping and Commissioning Services

48. Many local authorities are experiencing difficulties in setting realistic budgets for children's services and in avoiding overspends at year end. There are some consistent features which make resource management especially challenging. Decisions which affect the type and cost of services to be provided are often outside of the council's control and may be unpredictable – for example, decisions taken by the court in child care cases. Some individual services are very expensive. Placements for children with especially complex needs can easily exceed £150,000 a year and some will cost substantially more. Expenditure incurred in one year may lock the council into financial commitments for many years to come. To balance the competing priorities of managing service demand, improving quality, meeting higher expectations and reducing expenditure is especially problematic in situations where safeguarding children people from harm must be the key factor in decision-making. Additionally, there are many factors making the task even more difficult in recent years: increasing demand for services; new requirements from the Welsh and UK Governments; and the need to achieve budget savings in the face of reducing revenue.

49. Across Wales, social services have received a large measure of protection during austerity. Over the nine years from 2008/9 to 2016/7, council budgets have fallen by 10% in real terms (that is figures adjusted for inflation). Social services budgets have grown by 5% in real terms during the same period and remained stable over the last year in many local authorities. Thirteen of them did

see reductions but Powys was by far the highest. The projected position for the service in Powys in 2017/18 is an overspend of £4.5m, on a net budget of £13.15m. The unachieved savings within Childrens remains at £1.1m. Within the Children with Disabilities residential establishments a saving of £556k remains a red rated risk. A further £388k in relation to partnership working with the Powys Teaching Health Board and third sector in respect of the new model for the delivery of Childrens Services has not been delivered nor are there plans in place to progress this saving. Their numbers of Looked After Children are at a five-year high (206 children), with a 34 % increase in 2017/18 to date. Demand continues to grow, as does case complexity and use of external placements. The agreed extra package of Social Work support has cost £182k to date and this is forecast to rise as not all commitments are on the system. £3.7 million of pressures have been included within the Service's Financial Resources Model (FRM) is under consideration by Cabinet which is developing budget proposals for 2018/19 and for an ongoing five-year plan.

50. Our goal is to establish a safe and sustainable budget for children's services, using the approach set out in the following diagram.

A SAFE AND SUSTAINABLE BUDGET FOR SOCIAL SERVICES



51. Most of the component parts have been developed to the point where decisions about budget-setting can be made. We have been able to develop a shared understanding about the overall financial position within the authority, current and longer-term. The Council recognises the need for setting a realistic budget that will enable the Directorate to manage the current pattern of children's services and to fund improvements. The analysis required is nearing completion and it is being used to help set the Council's 2018/19 budget. There will be very substantial levels of increased investment in children's services. However, the Council will also want to see that the process of service change is more clear, more cogent, more urgent and better costed so that a sustainable budget can be achieved as soon as possible. We have worked to use this second iteration of the improvement programme and plan to fulfil that need. Work will focus on: fieldwork recruitment and retention; higher professional standards and salary progression; statements about new service models and what do good services look like; proposals for reshaping services to make them sustainable and deliver good outcomes.
52. It is important to differentiate between one-off and base budget pressures; this will help to identify both the need for and potential sources of additional funding. We have provided a convincing rationale for a different approach to managing resources in social services (prudent social care) in respect of patterns of spend, good fieldwork and management practice and improved management of risk (e.g. Signs of Safety). This is an approach which can be understood and acted upon at all levels within the Council and in collaboration with key stakeholders. Delegation of budgets within the service is not yet defined at an appropriate level. We need to ensure that decision-making is clearly aligned to financial accountability. Our Business Partners in Finance will continue to work with the service to ensure that managers have the necessary skills to fulfil their financial management and budget administration and budget management roles.
53. Our new approach to responsible and effective management of resources will be underpinned by a commissioning strategy which describes: how we will align the finances; what investment/reinvestment and disinvestment is required to reshape services; and what outcomes will be achieved in the short, medium and long-term. A draft commissioning strategy for children's services is nearly complete. It will look across the whole pathway - prevention and early intervention, front-door responses (such as the Information/Advice/Assistance Service), care and support services, edge of care/Integrated Family Support Services), care

placements; support to look after children and those leaving care. The Council is creating an Innovate to Save Fund to be used for underpinning this programme of change.

Leadership, Management and Governance

54. The service is demonstrably becoming a priority for the Council at both political and corporate levels. Senior officers and Members have shown a commitment to visiting social care teams and attending roadshows to hear directly from staff about the issues they face. A new focus on corporate parenting has helped to generate interest by elected Members and a willingness to be involved. Initial training has been provided to them and further training for senior officers and elected Members has been commissioned externally. Fortnightly briefings for the Leader, Cabinet member and acting Chief Executive are in place.
55. Children's services are increasingly able to call on the strength of a wide range of corporate support services and partnerships. We are seeking improvements across the whole Council to ensure that the service can deliver its duties. This includes changes in the way we all work together to support the delivery of front line services. The Improvement Board has been able to consider a comprehensive plan for improving corporate leadership and governance in the Council over the next three years ([Key Document 15](#)). To ensure that the Council is well-run, aspirational and high-performing, turning strategies into actions which make a difference for our communities, there is a significant volume of work required.
56. Change on such a scale means that the process will be neither quick nor linear. For change to be embedded, sustainable and genuinely owned by all, there has to be time built in to forge common purpose and enable new approaches. The experience of other organisations that have successfully transformed themselves from a similar position indicates that it takes some years to secure regeneration. However, a good start has been made in developing the Council's vision for the future which can be shared and understood by residents, staff and partners.
57. Recognised issues that we are seeking to address as a matter of urgency include the following.
- The Council had too often failed to tackle difficult issues adequately.

- A multiplicity of plans and performance management processes had led to unnecessary complexity and confusion nor have been followed through well enough.
 - Savings and staff reductions in key areas had not been underpinned by a long-term strategic plan for the nature and shape of the Council;
 - The Council needs to create a mutually supportive leadership culture.
 - The Council's corporate centre should provide stronger, more enabling leadership.
 - The Council faces very significant budget difficulties in the next few years and it does not yet have credible plans to meet these beyond 2018/19.
 - The workforce as a whole needs to build confidence and become more willing engaged in processes of change.
 - The Council should renew its approach to staff engagement to improve morale and to address issues around organisational culture.
 - Performance management needs to be simplified and underpinned by accurate service and corporate data recording.
 - Business support services must act consistently as positive enabling partners in change.
 - While there are some good operational partnerships, improvement and rationalisation work should focus on ensuring that collaboration is focused on improvement priorities and securing impact from planned work programmes.
58. However, recent developments are beginning to secure a more positive environment for the support of children's services within key parts of the council and the directorate. There are now only two major improvement plans for social services, one for children and one for adults. The children services improvement programme and plan are long-term and ambitious, with commitments to delivering significant change at pace. In key areas, support services responsible for areas such as finance, ITC, performance management data, workforce planning and communications have become very active in helping to address known concerns. The Cabinet Member engages well with staff at all levels and has demonstrated considerable commitment and secured much support for the service, especially in respect of Corporate Parenting and Corporate Safeguarding. A series of engagement events with elected members has delivered dividends in terms of increased awareness, information sharing and scrutiny. The Corporate Management Team routinely sets aside considerable amounts of time to consider children's services improvement issues.

59. There are still significant interim arrangements in place at senior and other levels of management. The interim Director took up this role in October 2017. He is committed to remaining with the Council while it goes through a second recruitment process for the post; it will be supported by a major recruitment consultancy and the timetable has been set. The interim Head of Children's Services is in place until the end of 2018 and we intend that his replacement will be appointed before autumn.
60. The Improvement Board has played a major role in providing additional accountability, challenge and support to the Council in tackling problems systematically and effectively. The Improvement programme and plan is considered at monthly Improvement Board meetings and through contact with the Improvement Board Members and discussion between Board meetings. The focus is on areas of priority and concern. Terms of reference and membership are available. Board members also undertake additional work in looking at key areas of service provision such as fostering to test out plans for improvement and to provide groups of staff with opportunities to engage.
61. Working relationships with key partner organisations have been affected by a period when the Council rather lost its way in delivery of its social services functions. However, these are fundamentally sound and we are being well supported by them in implementing strategic plans. In line with the requirements of the Social Services and Well-being Act, the Regional Partnership Board (RPB) provides cross sector leadership through a shared commitment to providing seamless and integrated health and social care services for children, young people and adults living in Powys, with a primary emphasis on prevention and early intervention. The Area Plan is also set to identify which services will receive greatest priority in achieving integrated working on behalf of young carers, Integrated Family Support Services and children with complex needs due to disability or illness. The Health and Care Strategy (Key Document 11), developed with Powys Teaching Health Board, is developing significant momentum.
62. These are early days in the improvement process; many challenges remain. Sustained progress needs to be made in order to restore confidence in the Council's ability to stay the course. Stability in all the leadership teams within the Social Services Directorate is a prerequisite for delivering the longer-term actions outlined in the Improvement Plan. Current structures are heavily dependent on interim arrangements. Dispersed leadership down to senior practitioner level has been an asset but managers are under significant pressure to reconcile competing priorities and we need to do more to ensure that they understand the new approaches that are being developed at considerable pace. The renewed emphasis on integrated working in our partnership with

the Powys Training Health Board must be sustained through an active and purposeful Regional Partnership Board. Above all, the Council has to maintain its commitment to prioritising social services so that children and families are kept as safe as possible and supported in their efforts to achieve good outcomes.

Producing an effective improvement programme and plan

63. The most immediate task has been to produce a second iteration of our improvement programme and plan that is comprehensive enough, radical enough and compelling enough to provide direction for our all efforts in times of considerable challenge. This is regarded as a crucial activity for the Council and its partners. It must ensure that, as a matter of urgency, realistic reassurance can be provided to key stakeholders about our ability to:

- fulfil our statutory responsibilities;
- reshape the current pattern of services so that they are better equipped for responding to the needs of children and families.

64. We are working from a relatively low baseline and we have considerable ground to make up. Concerns have been expressed about the capacity of the Council to lead this process of considerable change at sufficient pace, given the levels of staffing instability at the front-line and in management positions and the need to focus on overseeing real progress in improving professional practice. Also, there has been no established track record for the priority commitment to children's services and plans which is needed to generate sustainable and embedded reform.

65. Some of these factors will take time to rectify but we have demonstrated collectively an improved ability to harnessing the resources of the Council, our staff and our partnerships in pursuit of positive change. In recent months, Children's Services have been the major priority for the Council at both political and corporate levels. We are able increasingly to call on support from corporate services and partnerships. In areas such as finance, ITC, performance management data, workforce planning and communications, there has been a willingness to address known concerns. As stated earlier, the Improvement Board has played a major role in providing additional accountability, challenge and support to the Council in tackling problems systematically and effectively.

66. These are early days in the improvement process; many challenges remain. Sustained progress needs to be made in order to restore confidence in the Council's ability to stay the course. A credible improvement programme and plan will help to ensure a coherent direction

for change over the next three years. As Inspectors have reminded us, these actions must be: specific and clear; sufficient; realistic; and timely and attributed to people who have the capacity and competency to deliver what is required;

67. The first iteration was produced very quickly but Inspectors judged it as having some real merits. However, there were flaws. The focus was on short-term actions in a plan that aspired to cover a three-year period. The required improvement in service capacity, capability and governance was seen to be a longer-term process, hence the need to address prioritisation and to ensure that timescales reflected this approach. An outline of longer-term strategic planning was required. Some of the 'actions' were seeking to address complex areas of work and required a detailed plan in themselves; CIW wanted to understand the detailed actions we are proposing to take and how this work is being co-ordinated. The plan was regarded as having insufficient emphasis on the importance of developing corporate parenting and the role of scrutiny committees, so that members are fully aware of their responsibilities and can challenge effectively. Inspectors were particularly interested in the actions to provide additional resources, management support, learning and development to front line staff "because the time and effort to achieve the required shift in process and culture across staff teams should not be underestimated." There was concern that the plan did not outline work with peer authorities in developing solutions.

68. In response to this analysis, we have provided a new action plan for the overall improvement programme. It concentrates on four Priority Improvement Areas: Corporate Parenting, Leadership and Governance; Case Management, Practice and Quality Assurance; Workforce; Partnership, Models of Care and Service Reshaping. Some of the sections deal primarily with the recommendations in the inspection report and with actions where we anticipate that the Council and Children's Services can act quickly to deliver many of the changes required. Others focus on a partnership approach to reshaping over a longer period the pattern of services for children, young people and their families.

'What good looks like' – our key improvement aims

69. To ensure that the overall programme remains coherent and relevant, a set of key improvement aims and principles have been developed ([Key Document 16](#)). The major emphasis is on helping the Council, our partners, inspectors, reviewers, auditors, advocates and families to reassure themselves that the plan of improvement set out is having a timely and significant influence on

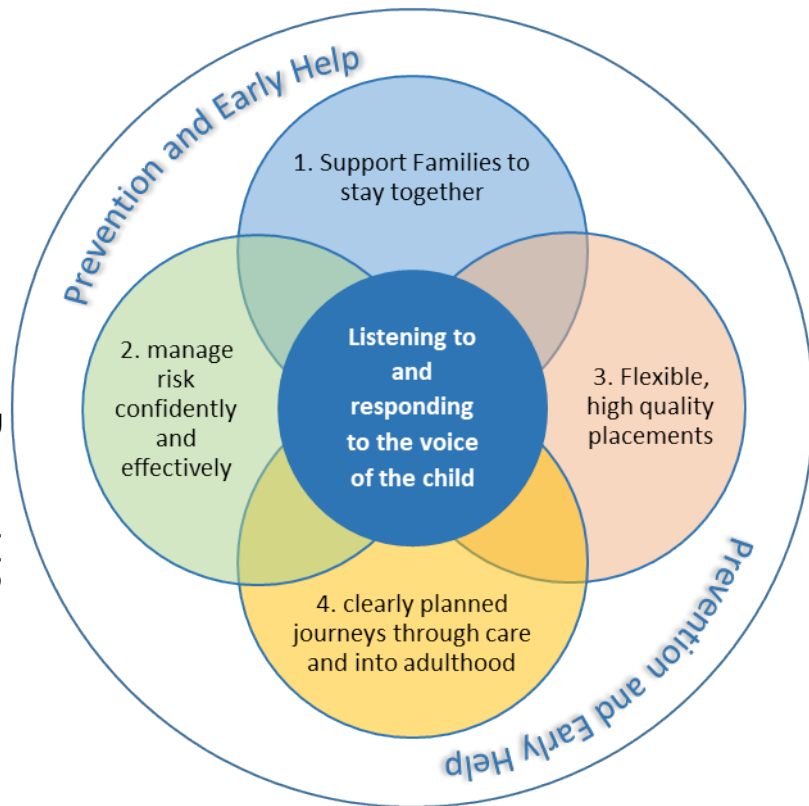
the well-being of children and young people in Powys. By describing “What does good look like?”, the checklist provides one of the tools that can help us to engage in effective scrutiny, peer review and operational improvement.

1. To support families to stay together and reduce the need for children to be looked after, by focusing on services which provide timely help, build on family’s strengths and prevent greater problems arising.

2. To manage risk confidently and effectively when providing support to families where children and young people need to be safeguarded or they are judged to be on the ‘edge of care’ by making sure that their needs are accurately assessed and met effectively, with positive outcomes for them. This includes supporting families to avoid children becoming accommodated unnecessarily and by making private arrangements within their wider family networks so that children become looked after by the council only where this is clearly in their best interests.

3. To provide and commission a flexible and affordable mix of high quality placements for children who are looked after to meet the diverse range of their needs and circumstances.

4. To give children and young people clearly planned journeys through care and into adulthood which remain focused on achieving care and support plans, prevent drift, enable them to be reunited with family and friends where possible, have stable placements and exit the care system with good prospects for improved life chances.



70. These aims are underpinned by the following commissioning principles:

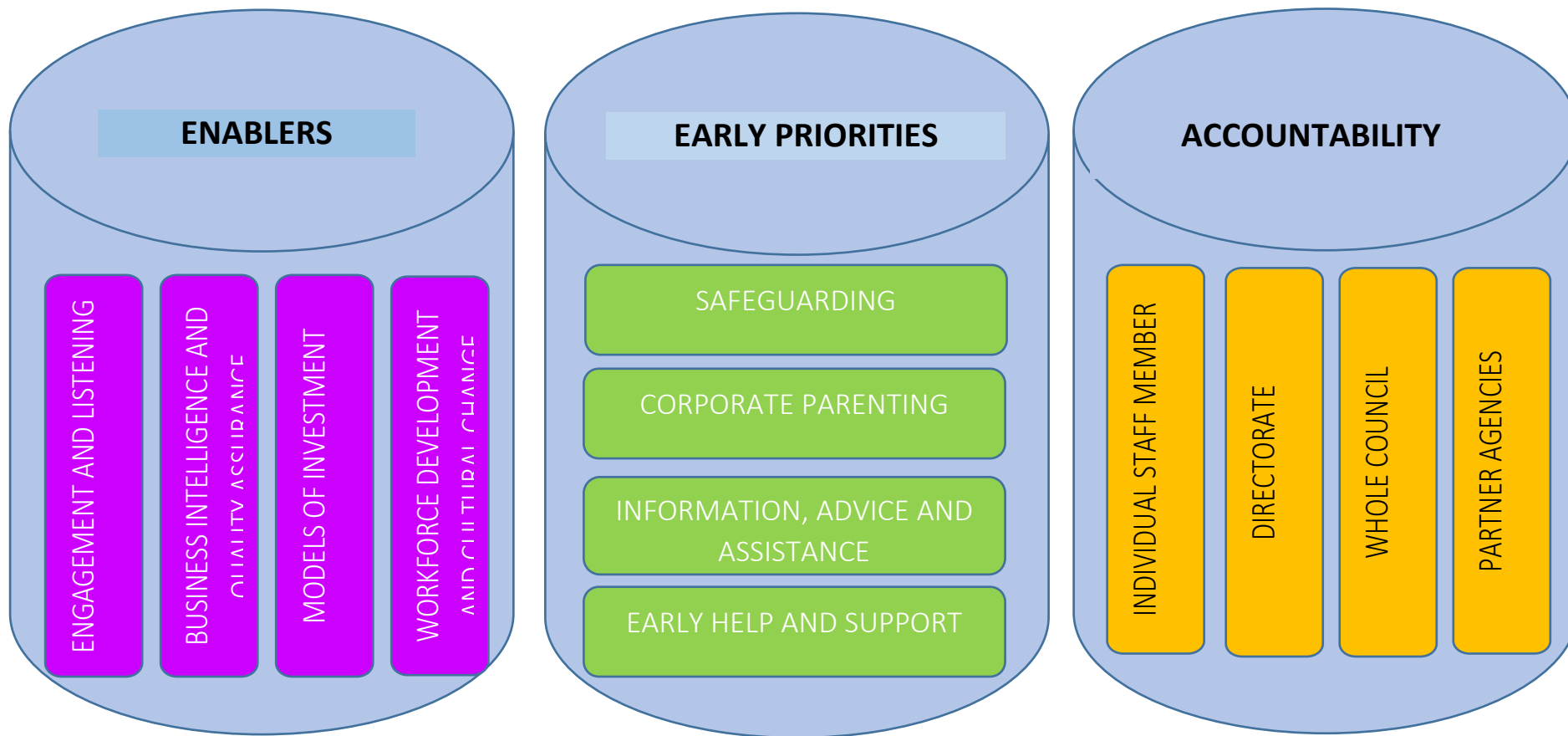
- The responsibility for meeting the needs of children and young people looked after or at risk of becoming looked after rests across all services for children, including statutory and independent providers.
- Most children are most likely to thrive and achieve good outcomes if they are cared for within their own families.

- Preventative services and early help to support children in need and their families should be provided in ways that give them every chance to stay together.
- Where children cannot be supported within their immediate family, there will be help available for assisting them to make private arrangements within their wider family and friendship networks and, where necessary, to make these arrangements permanent.
- Formal kinship fostering arrangements will be explored as the preferred alternative arrangement where it is necessary for the Local Authority to share parental responsibility or intervene in managing risk and protecting children.
- Multi-agency arrangements to assessing and managing risk to vulnerable children and young people need to be robust.
- Local Authorities have a responsibility for ensuring that intensive family support is available on a multi-agency basis for families where children or young people are on the edge of care.
- Where a child's needs cannot be adequately met through the arrangements already described, the majority will have their needs met best in a substitute family.
- Residential care placements will be made only where the complexity of a child or young person's needs mean they are unable to live within a family setting or where a young person is subject to a Court Ordered Secure Remand.
- Placements should be local to enable children and young people to remain in their communities, maintain their networks and minimise disruption in their lives.
- Placement requests should be defined in terms of the child/young person's needs. It is the role of the Local Authority to consider the most appropriate type of placement to meet these needs, with due regard given to the available resources.

- All Looked After Children of statutory school age should receive appropriate education provision regardless of their placement and ability to access school. Providing appropriate support to enable engagement in education is just as important as finding suitable care placements for Looked After Children.
- Placements should support a positive transition to independence, adulthood, education, employment, and training and, where applicable, resettlement back into the community from custodial settings.

Our Improvement Model

71. This document sets out the Powys Children's Services Improvement Strategy for 2018-2021. We anticipate that the plan will continue to be developed based on feedback from: children and young people; parents and carers, staff, external review, audit and challenge.
72. The overall strategic direction is supported by an improvement plan and by strategies for priority areas. It will form the basis for a three-year programme of change. Both immediate and longer-term actions are described within the plan, the former in greater detail because this is where changes are needed most urgently. More time is needed for us to be sure about what needs to be done if we are to deliver larger-scale, sustainable reform. Delivering all the changes promptly and effectively will mean that, at the earliest possible time, we can provide the people of Powys with realistic reassurance that children are being safeguarded effectively and that children's services are fulfilling all their statutory responsibilities to the highest possible standard.
73. In order to achieve our key improvement aims and implement our service delivery model, the following whole system improvement model has been developed. Our model for improvement is based on three key pillars:
- **Early Priorities for Action** – as the core focus for our immediate improvement plan alongside the areas identified in the inspection report.
 - **Enablers** – the cross-cutting activity that will support implementation and ensure we meet our priorities for action.
 - **Accountability** – to ensure that all parts of our organisation and our partners are clear about the role they will play in supporting our improvement journey.



EARLY PRIORITIES FOR ACTION

SAFEGUARDING

Safeguarding the children and young people of Powys is our highest priority. We will work as a service, corporately and with our partners and communities to ensure that we all have a shared understanding and collective approach to safeguarding our children and young people. We will achieve this through:

- embedding the Regional threshold document to create a shared understanding of levels of need and the safeguarding process;
- implementing the Signs of Safety model as a shared and robust risk assessment and management tool;

- ensuring assessments are carried out within statutory timescales and that robust, outcome-focused child protection plans are put in place;
- providing joint workforce development and training across all agencies.

CORPORATE PARENTING

As corporate parents, we will care for our most vulnerable children, work with them to develop clear and planned journeys through care and aspire for their future wellbeing and achievement - as all parents should. This will be achieved by:

- ensuring we have high quality placements within which our looked after children can be safe, cared for, feel part of a community and have their individual needs met;
- ensuring we are able to support our looked after children in their educational and vocational attainment so that they fulfil their potential;
- ensuring our children and young people are supported to have their voices heard and that they are able to influence and shape what happens in their lives;
- developing clear, multi-agency pathways for our care leavers to ensure they have the support they need as they grow into adulthood and can aspire for bright futures;
- providing opportunities for our care leavers to work and train within the 'company firm' (i.e. the Council and partner agencies).

INFORMATION, ADVICE AND ASSISTANCE

We will continue to build community and universal service capacity to identify additional needs early and provide information, advice and assistance to children, young people and families. By providing young people and families with information and signposting to community level support, we will empower them to make informed choices and build their own resilience. This will be done through:

- Re-building and maintaining our Family Information Service (Information and Advice) functions within Powys People Direct (PPD);
- Providing Family Information Service outreach to local communities including marketing of the Family Information Service and PPD;
- Providing Youth Information Services directly to young people;
- Connecting community level organisations through the local networks and the social value forum so they are better informed and able to support families;

- Providing multi-agency workforce development and training opportunities for staff from community and universal services.

EARLY HELP AND SUPPORT

We will develop multi-agency early help capacity and capability across the whole continuum of need to ensure that children, young people and families with additional needs are identified and supported as early as possible in order to prevent escalation. Through our multi-agency **Start Well Programme**, we will continue to build on the Team Around the Family model and develop systems, processes and services that ensure all children, young people and families with additional care and support needs receive a proportionate and effective response that will help them to build on their own strengths, focus on what matters to them and develop their resilience. This will be achieved through:

- developing PPD into a multi-agency hub to include a clear Information, Advice and Assistance (IAA) and Early Help offer;
- ensuring children, young people and families in need of care and support are supported to **co-produce** outcomes-focused care and support Plans;
- redesigning services in order to strengthen and build the preventative and early help offer to families with more complex needs, including those children and young people at the 'edge of care';
- commissioning a range of integrated support services for children, young people and their families to provide additional capacity and complementary support to the statutory service offer;
- reviewing and refreshing the evidence-based intervention framework to develop 'include' interventions and support at a statutory/care and support level.
- developing locality multi-agency teams with integrated practice and management in respect of children with additional needs because of disability.

ENABLERS

ENGAGEMENT AND LISTENING

We will ensure that children, young people and their families have their voices heard and acted on at an individual, service and strategic level. We will develop a renewed commitment across the organisation and its partners to delivering our duties under Annex B of the Wellbeing of future Generations Act. In doing so we will ensure that individual support plans are co-produced and focus on 'what matters' to the individual as well as ensuring service user voice informs service design and policy development. We will achieve this by:

- implementing the 'What matters to me' booklet to facilitate children's and young people's engagement in their own care and support planning and review
- work towards embedding the national Children's Rights approach – 'The Right Way';
- providing and enhancing the National Approach to Advocacy and the 'active offer,' for all our looked after children;
- Adopting the new National Participation Charter as a whole organisation to demonstrate our commitment to meeting the participation Standards
- achieving the National Participation Standards Kitemark as a whole service and encouraging our partners to do so;
- working with our County Youth Forum, Junior Safeguarding Board, Junior Corporate parenting group and other interest groups to ensure that children and young people are supported to influence service and policy development and design;
- adopt person-centred planning techniques and approaches, in line with our education partners, to ensure that our care and support plans are outcomes-focused;
- robustly examining care and support plans in relation to the voice of the child/young person through our quality assurance processes.

BUSINESS INTELLIGENCE AND QUALITY ASSURANCE

Relevant, timely, accurate data and business intelligence are critical for the safe and effective operation of our service as well as informing our overall service design and commissioning. By improving the robustness of our data and the ways in which we engage with and analyse that data, we will be able to deploy resources more effectively, manage performance and ensure our service is fit for purpose, meeting the needs of those we support. We will achieve this by:

- creating robust data collection, reporting and analysis process that will enable us to:
 - effectively measure, manage and evaluate services;

- direct strategic plans and policy by understanding why things have, or are likely to change;
- provide robust information to stakeholders,
- improving staff and member access to relevant data and business information e.g. through electronic dashboards
- developing a programme to facilitate improved staff and member engagement with business intelligence and data to include regular briefing and training opportunities.
- implementing a new and robust quality assurance framework across the service to include data quality reporting, staff supervision and support, thematic audit.

WORKFORCE DEVELOPMENT AND CULTURAL CHANGE

We will ensure that our workforce has the appropriate skills, resources and tools they need to be able to demonstrate excellent practice and best support and safeguard our children, young people and families. To support this, we will create a service culture which is child/young person centered, outcomes-focused, collaborative, open and transparent. We will also build an effective team and service culture which will help us recruit and retain excellent staff. We will achieve this by;

Page 117

- implementing person centered planning approaches and providing training and support to staff;
- developing a strong ethos of public service and good customer service;
- developing reflective practice forums;
- providing a rolling programme of training and development based on training needs analysis against our agreed service delivery models and interventions framework;
- supporting staff to access ILM training to develop leadership capacity across the service;
- supporting staff to access coaching and/or develop their own coaching capacity in order to build a supportive culture within the service;
- managing talent and supporting our best practitioners to develop and grow within the service.

MODELS OF INVESTMENT

By changing our service models, we will invest resources ‘upstream’ in early help and prevention with a view to supporting families to safely stay

together and reduce the need for costly care placements. We will do this by:

- maximising the opportunities provided through Welsh Government grants, aligning resources from a range of grants and agencies to a single 'early help' strategy ([Key Document 12](#));
- redesigning statutory services to allow for 'early help' and prevention capacity to be protected and maximized;
- developing opportunities for integrated and collaborative working across partner agencies which will create efficiency and release resources for re-investment in early help and prevention;
- following robust commissioning principles in service development and design to ensure that they are both effective and efficient.

ACCOUNTABILITY

Page 1

Individual Staff

We will ensure that each staff member is confident and competent in undertaking their duties and supported to demonstrate excellent practice. We will also ensure that they are clear about their role and responsibility within their own individual caseload, their team, the service, the Council and with partners. Furthermore, we will ensure that they are clear about their responsibility in addressing and/or escalating risks in relation to both families and the service. We will achieve this by:

- ensuring that staff have robust supervision and support, including personal development priorities/plans;
- ensuring that staff are engaged and connected with the service and wider council through effective communication mechanisms including team meetings, service newsletters and roadshows;
- reviewing and actively communicating our service policies and procedures;
- providing time and space for reflective practice – both individually and collectively;
- monitoring individual performance and quality assuring work undertaken;
- ensuring that staff are actively listening and responding to the views of children, young people and families.

Social Service Directorate

As a Service, we will ensure that our staff are supported to deliver excellent practice and that our services are fit for purpose. We will do this by:

- providing clear leadership and direction for staff;
- ensuring that sufficient resources are allocated in line with the needs of services users and that high quality services are effectively developed and commissioned;
- ensuring that caseloads are maintained at a safe and appropriate level;
- ensuring that we take a proactive approach to recruiting and retaining staff across the service;
- effectively managing and monitoring the resources available to the service and actively seeking opportunities for external funding;
- actively monitoring quality of practice and service performance, taking steps to improve and enhance performance where necessary;
- developing a service delivery culture that is outcomes-focused and person-centred and where we listen and respond to the voices of children, young people and families.

Page 19

Whole Council

As a Council, we will ensure that our Children's Service department maintains a priority status and that it is supported by a whole council approach.

We will do this by:

- developing a strong and sustained culture of good customer service, both internally and externally;
- providing supportive challenge and scrutiny to our Children's Services department to help implement and sustain improvements;
- ensuring that our Children's Service's department is appropriately resourced;
- securing a responsive and robust support infrastructure for Children's services to include HR, ICT, Finance, Legal, Business Intelligence;
- ensuring that all staff and members understand their role and responsibility in safeguarding children and supporting our looked after children as corporate parents;
- ensuring that we engage with and listen to the views of children and young people in our work to develop strategy and policy and fully assessing and understanding the impacts of decisions on the lives of children, young people and families.

Partner Agencies

We will work closely with our partners to develop holistic, multi-agency approaches to identifying, assessing and responding to the needs of children and families. We will do this by:

- providing a clear, shared vision and strategy for children and families in Powys that all partners agencies and their staff can recognise, own and support;
- safely and effectively sharing information;
- working to integrate teams and services in order to provide seamless responses to children, young people and families;
- identifying opportunities for pooling and sharing resources;
- assessing, monitoring and reviewing population needs using agreed performance and outcome indicators;
- having a collective understanding of our roles and responsibilities in safeguarding children and young people.

Partnership Working

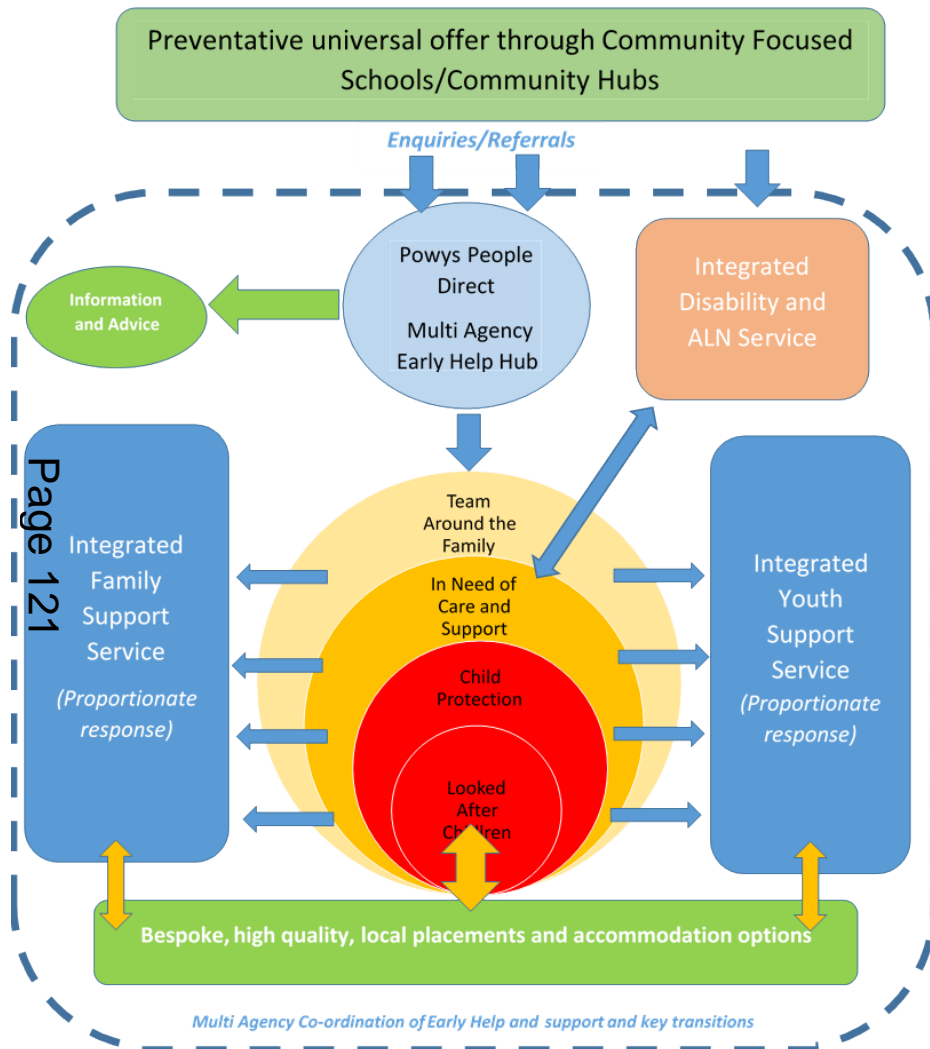
74. Better working relationships with key partner organisations and with bodies such as the Children and Young people Partnership and the Mid and West Wales Regional Safeguarding Board are helping us to deliver change, to push forward with plans for service reshaping and to agree ways for delivering on our early priorities (**Key Document 13**). Other local authorities and national bodies such as ADSS Cymru and the WLGA have been in the forefront of offering support.

75. In 2017, Powys Regional Partnership Board (PRP) developed and launched the Health and Care Strategy 2017-2027. It sets out the county's vision for integrated health and care support/services and provides a 'roadmap' for service transformation. The statutory Area Plan, as required under the Social Services and Well-being Act, will set out the programme for delivery in the first three years. The strategy adopts a 'whole life, whole system' approach to change. It groups the population and strategic priorities into three life phases, each of which has a multi-agency partnership group to lead and oversee implementation: *Start Well* (0 – 25 years); *Live Well*; and *Age Well*.

76. The newly re-launched Children and Young Peoples Partnership (CYPP) reports to the RPB in respect of its work on the Start Well programme. It will have a primary focus on Early Help and Prevention, in particular on preventing and/or reducing the impact of Adverse

Childhood Experiences (ACEs). The figure below shows an outline of the next phase which involves working across the whole continuum of need while continuing to build capacity at a universal and community level.

Fig 4



- To develop Powys People Direct (PPD) into a multi-agency hub to include a clear Information, Advice and Assistance (IAA) and Early Help offer and to provide a coherent, proportionate, multi-agency response to need - every referral will have a response.
- Build on work to date and strengthen the early help offer to families with more complex needs requiring Care and Support plans.
- Build preventative capacity across the continuum of need in particular for those children and young people at the 'edge of care.'
- Commission a range of integrated support services for children, young people and their families to provide additional capacity and complementary support to the offer made by statutory services including. ;

- **Family support** – early help through to edge of care
- **Youth Support** – including emotional support, skills

- **Disability** – development, and engagement – co-ordinated multi-agency responses

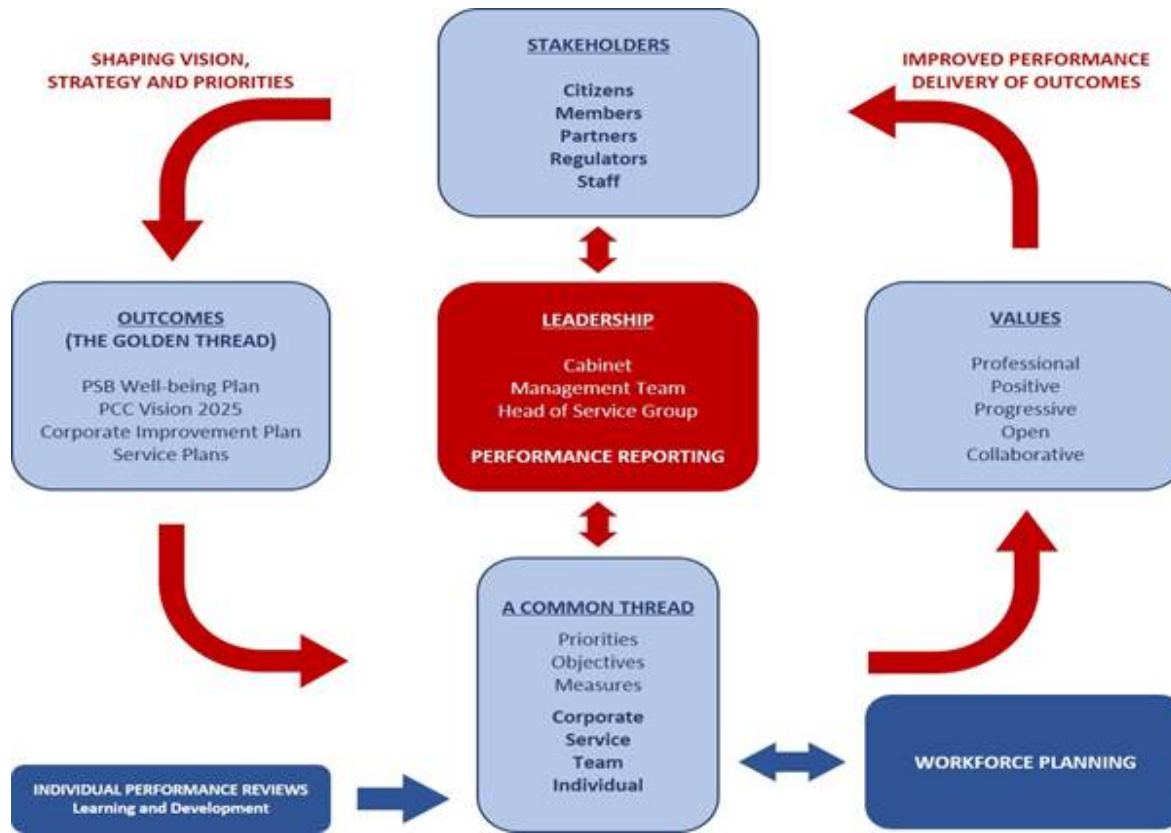
- Review and refresh the evidence-based intervention framework to include interventions and support at a statutory/care and support level.
- Develop locality multi-agency teams with integrated practice and management.
- Develop/commission a range of local, flexible, needs-appropriate placement and accommodation options for children and young people
- Improve learner outcomes (particularly at Key Stage 4), especially for vulnerable learners.

Governance

Page 122

75. Both Cabinet and Scrutiny Committees will routinely monitor progress and provide leadership for the changes that need to be made.

We will use also the full range of performance management, corporate planning and partnership frameworks available within the Council to maintain effective corporate oversight of the improvement programme and plan. Some of these are set out below. The Improvement Board performance report ([Key Document 10](#)) will provide regular, up to date, accurate performance data for board members. The performance report provides key headline data including;

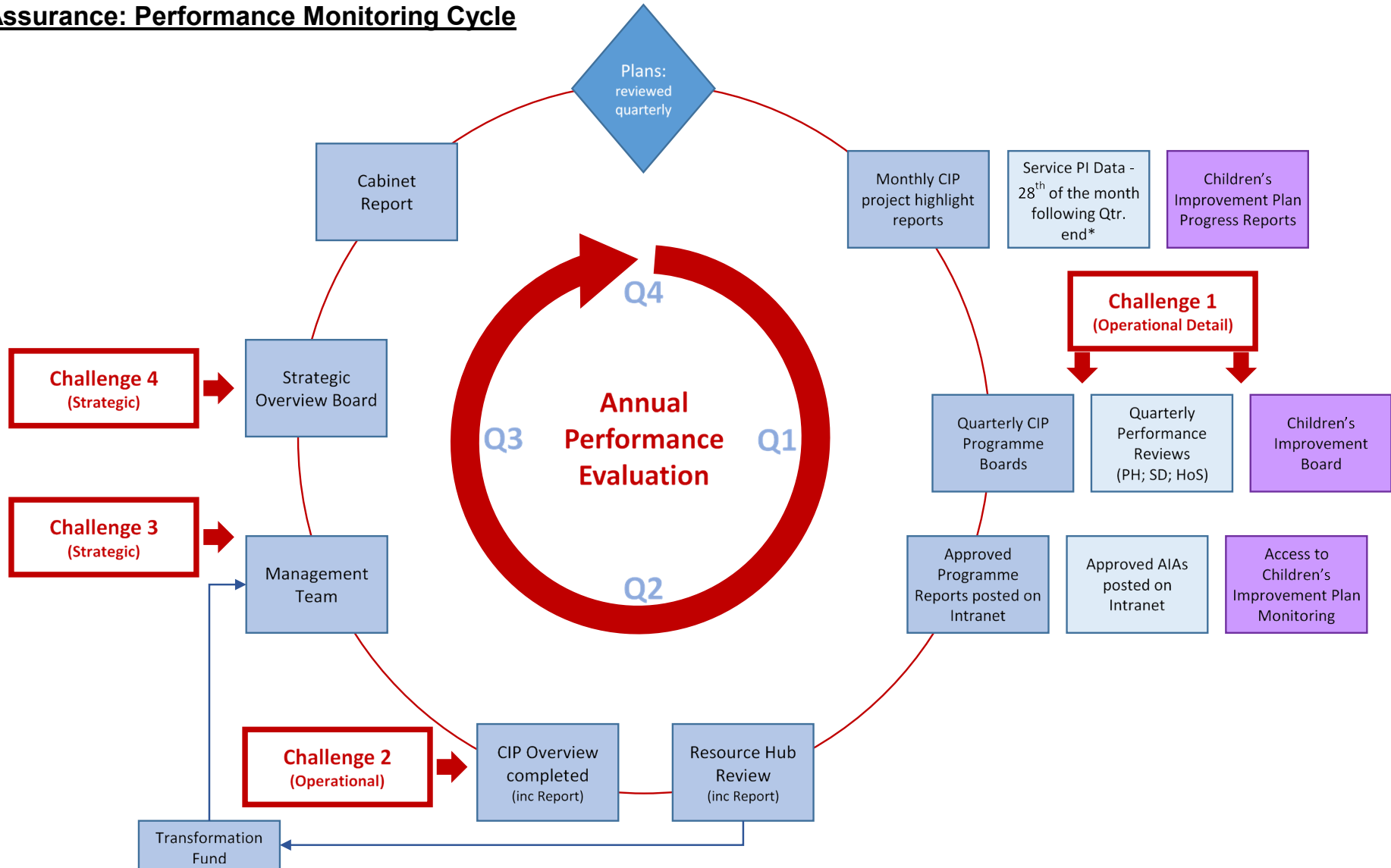


Performance Management Framework

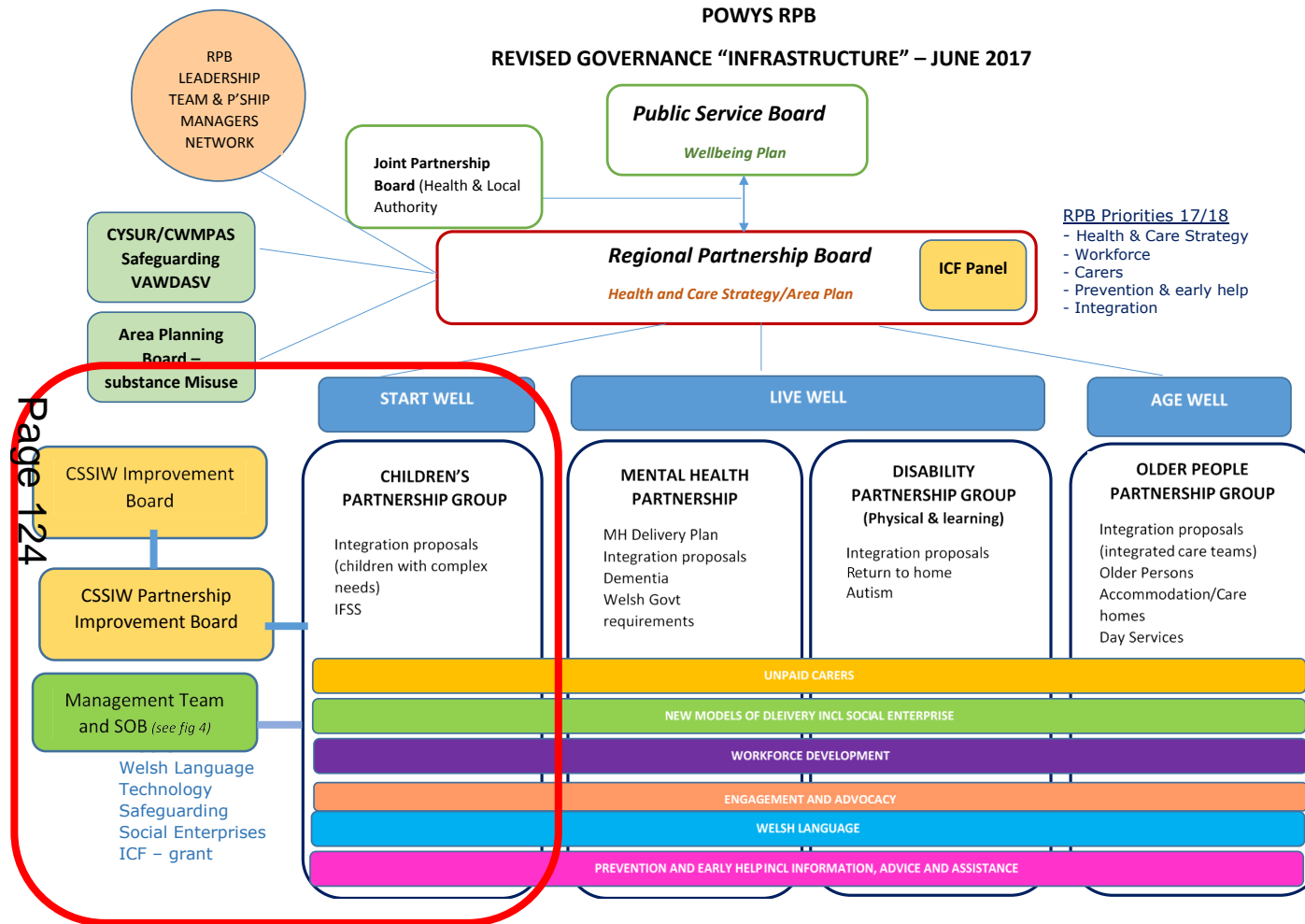
T

Assurance: Performance Monitoring Cycle

Page 123



Partnership Framework



77. The Powys County Council Improvement Board has been established under the powers contained in the Social Services and Well-being Wales Act. The Minister for Social Services has determined that the Board will be chaired by Jack Straw (former local authority Chief

Executive). Its membership is independent of the Council. It includes Phil Hodgson (former Director of Social Services), Geoff Burrows (former Portfolio Holder in another Local authority) and Rachel Thomas (Head of Policy and Public Affairs at the office of the Children's Commissioner. The Board has the dual role of holding the Council accountable for improvement and seeking to help deliver improvement in both Social Services and the Council as a whole. The Board membership is set out above but it will be supplemented by participation by the Leader of the Council, the Portfolio Holder for Children's Services, the Chief Executive, the Statutory Director of Social Services, the Director of Education and Children, the Head of Children's Services, plus any other officers or partners who are needed to assist with any given item. The Board convenes at least once a month, with support activities spread over approximately three days. Activities will include 1-to-1 meetings with key staff and politicians, formal Board Meeting and engagement activity with staff at all levels.

78. The Improvement Board:

- ensures production of a Children's Social Services Improvement Plan and Corporate Leadership and Governance Plan as directed by the Minister and in line with CIW expectations;
- monitors, scrutinises and challenges to ensure the timely delivery of actions identified in the Improvement Plan;
- holds the Council to account for delivering the broad spectrum of required improvement and escalate in the event of non-compliance;
- engages with staff at all levels to facilitate delivery of improvement and raise awareness of this work; and
- keeps external bodies such as Welsh Government, CIW and the Welsh Local Government Association (WLGA), informed about progress.

79. As part of the improvement process, it is essential to identify, analyse and prioritise risks to ensure that these risks are managed effectively. There are significant risks to the Improvement Plan, including the Council's ability to deliver sustainable resourcing and workforce strategies. A programme risk register is maintained by the Programme Manager and reported to the Improvement Board.

Key Documents and Links

| | |
|-----------------|--|
| Key Document 1 | CIW Inspection Report October 2017 and CIW Letter dated 4 th January 2018 |
| Key Document 2 | Improvement Board terms of reference and membership |
| Key Document 3 | Powys County Council: A Safe and Sustainable Budget for Children's Services 2018 |
| Key Document 4 | Powys County Council: Role and responsibilities of the Director of Social Services, the Director of Education and Children and the Lead Director for Children and Young People |
| Key Document 5 | Powys County Council Corporate Safeguarding Policy |
| Key Document 6 | Powys County Council Corporate Safeguarding Group - terms of reference |
| Key Document 7 | Performance Management dashboards for Children's Services including Children's Improvement Board Performance Report |
| Key Document 8 | Powys County Council Commissioning Strategy |
| Key Document 9 | Powys County Council Workforce Plan for Children's Services |
| Key Document 10 | Powys County Council Reshaping Services for Children who need Care and Support – Commissioning Strategy (in draft) |
| Key Document 11 | Health and Care Strategy 2017-2027 |
| Key Document 12 | Developing a co-ordinated, multi-agency 'Prevention and Early Help' offer for Powys 2017-2025 |
| Key Document 13 | CYSUR: The Mid & West Wales Regional Safeguarding Board – 'The Right Help at the Right Time for Children, Young People and their Families': Regional Thresholds & Eligibility for Support Document |
| Key Document 14 | Powys County Council Children's Services 2017- 2020 Improvement Plan |

| | |
|-----------------|---|
| | |
| Key Document 15 | Powys County Council Corporate Leadership & Governance Plan - "Making It Happen" |
| | |
| Key Document 16 | Powys County Council Reshaping Services for Children who need Care and Support: Key Improvement Aims, Principles and Shared Commitments |

This page is intentionally left blank



Cyngor Sir Powys County Council

CHILDREN'S SERVICES IMPROVEMENT PLAN 2017-2020

Page 129

“Working together to ensure that children and young people in Powys are safe, healthy, resilient, learning, fulfilled and have their voices heard, valued and acted on.”

Introduction

This plan sets out the key actions we will take in delivering the Powys County Council's Children's Services improvement Programme. By completing these actions, we will:

- fulfil the Council's vision for improving the quality of care and support available to children, young people and families in Powys
- meet the recommendations set out in the Care Inspectorate Wales (CIW) inspection report (October 2017); and
- satisfy requirements placed upon the Council by Welsh Government.

The plan has been developed by all parts of the Council working together, reflecting the need for significant and systematic change across the whole organisation. It outlines also the contribution that can be made by the Children and Young People Partnership (CYPP), the third sector (supported by Powys Association of Voluntary Organisations or PAVO) and other collaborative groups such as the Regional Safeguarding Board. Only by a sustained commitment to collaborative working can we look to match more consistently the needs of families and the services available. The plan will be a live document. As we work through an iterative process of change and improvement and as we make progress and better understand the needs of children and families, additional actions will be added.

The plan is divided into the following areas:

- A. Corporate Parenting, Leadership and Governance**
- B. Safeguarding, Practice and Quality Assurance**
- C. Workforce**
- D. Reshaping and Reforming Services.**

There are a number of considerations to take into account when reading the plan.

- 1. The plan is set within the context of the Powys County Council Children's Services Improvement Programme 2017-2020.**
- 2. The plan is intended to provide an outward-facing overview of the key actions and progress towards delivering them.** It is supported by a range of more detailed strategic plans and programmes including:
 - A Finance and Capacity Plan, setting out the significant cost and resource implications.
 - The Start Well programme, to be delivered through the Children and Young People's Partnership.
 - The Making it Happen programme, in respect of leadership, governance and organisational issues which the Council is tackling.
- 3. A more detailed system of programme and performance monitoring will be implemented** alongside the plan, to ensure that our internal process for measuring progress, addressing risk and dealing with performance issues are robust.

CHILDREN'S SERVICES IMPROVEMENT PLAN

Priority Improvement Area A – Corporate Parenting, Leadership and Governance

Sponsor – The Chief Executive

It is important to read this section alongside the Powys County Council Corporate Leadership and Governance Plan, also monitored by the Improvement Board.

Theme A: Leadership, Governance and Partnerships

CIW analysis

The chief executive must immediately provide strong corporate support for Children's Services to ensure service improvements are prioritised and the pace of improvement accelerated and sustained.

The council leader and the portfolio member must provide strong political support to Children's Services and take the necessary steps to put in place well informed and effective scrutiny to make sure service improvements are made quickly, effectively and are sustainable.

Success criteria

Leadership, management and governance arrangements comply with statutory guidance and together establish an effective strategy for the delivery of good quality services and outcomes for people. Meeting people's needs for quality services is a clear focus for councillors, managers and staff. Services are well-led, direction is clear, and the leadership of change is strong. Roles and responsibilities throughout the organisation are clear. The authority works with partners to deliver help, care and support for people and fulfils its corporate parenting responsibilities. Involvement of local people is effective. Leaders, managers and elected members have sufficient knowledge and understanding of practice and performance to enable them to discharge their responsibilities effectively.

31

| Outcome | Action No. | What do we need to do | Ref to CIW Report | Lead | Timescale | Status |
|---|------------|---|-------------------|-----------------|---------------------------|---|
| <p><u>Immediate</u>¹</p> <p>Strong corporate support for Children's Services so that service improvements are prioritised and the pace of improvement accelerated and sustained.</p> | A1 | Establish Improvement Board to provide additional support, to develop and implement the Improvement Plan. | Rec 5 | Chief Executive | November 2017 and ongoing | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> • Independent Improvement Board has been established and it is meeting regularly. • The Board convenes at least once a month, with support activities spread over approximately three days. Activities include 1-to-1 meetings with key staff and politicians, formal Board Meeting and engagement activity with staff at all levels. • The Improvement Board: <ul style="list-style-type: none"> ➤ ensures production of a Children's Services Improvement Plan and Corporate Leadership and Governance Plan as directed by the Minister and in line with CIW expectations; ➤ monitors, scrutinises and challenges to ensure the timely delivery of actions identified in the Improvement Plan; ➤ holds the Council to account for delivering the broad spectrum of required improvement and escalate in the event of non-compliance; ➤ engages with staff at all levels to facilitate delivery of improvement and raise awareness of this work; and ➤ keeps external bodies such as Welsh Government, CIW and the Welsh Local Government Association (WLGA), informed about progress. • As part of the improvement process, it is essential to identify, analyse and prioritise risks to ensure that these risks are managed effectively. There are significant risks to the Improvement Plan, including the Council's ability to deliver sustainable resourcing and workforce strategies. A programme risk register is maintained by the Programme Manager and reported to the Improvement Board. |

| | | | | | | |
|--|----|--|-------|-----------------------------|----------------------------|--|
| | A2 | Establish regular meetings involving all Directorates to ensure corporate support is being made available in a timely manner, to receive updates and resolve problems. | Rec 5 | Head of Children's Services | November 2017 and ongoing | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> Operational Group established and meeting weekly to ensure corporate support is available as required. Terms of Reference for the Operational Group have been agreed; an action log is in place; a risk and issues register is being maintained. |
| | A3 | Appoint a Director of Social Services | | Chief Executive | March 2018 | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> The roles and responsibilities of the Director of Social Services and the Director of Education and Children (who is also the Lead Director for Children and Young People) have been defined. The Council has appointed a recruitment consultancy to assist in the process of appointing a Director of Social Services. A timescale has been set. The Interim Director has agreed to extend his role beyond March, if necessary. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Shortlisting (February 2018) Interviewing (March 2018) |
| | A4 | Identify areas that require investment to support best practice and safeguard children, and the Council supports the Service to deliver these. | Rec 5 | Director of Social Services | November 2017 - March 2018 | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> Operational Group has been working to clarify priority areas requiring immediate investment. The Directorate and Finance staff have developed a framework for putting in place a safe and sustainable budget for Children's Services. The budget proposed by Cabinet to Council includes significant investment of £6.2m for Children's Services. This demonstrates the priority afforded the service in decision-making |

| | | | | | | |
|---|----|---|-------|-----------------------------|---------------------------|--|
| | | | | | | <p>about resource allocation. The investment includes £3.5m to support the Improvement Plan.</p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Council to consider budget proposal for 2018/19 on 22 February. • Complete a corporate commissioning strategy for Children's Services. (August 2018) • Agree a Prudent Approach to Resource Management in Social Services. (May 2018) |
| <p>Immediate</p> <p>Provision of strong political support to Children's Services. A well informed and effective scrutiny to make sure service improvements are made quickly, effectively and are sustainable.</p> | A5 | Continually review and update current issues in respect to Children's Services, the Improvement Plan, corporate influences, as well as any imminent concerns that require action. | Rec 6 | Director of Social Services | November 2017 and ongoing | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> • Weekly meetings are held involving the Leader, the Deputy Leader, portfolio holders for Children's Services and Adult Services, opposition party Leaders, the CEO, Director of Social Services, Director of Education, Heads of Children's and Adult Services and other relevant senior officers. • This is providing opportunities to escalate issues without delay and to seek quick resolution. For example, it has helped us to source and deploy additional staffing promptly. • Improving Children's Services is a standing item on the weekly Executive Management Board. |
| | A6 | Ensure corporate oversight and support for the corporate parenting role are in place. | Rec 6 | Chief Executive | November 2017 and ongoing | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> • Members' briefing sessions (looking at areas such as safeguarding and resourcing) have been well attended, with most members present. • Induction Programme developed for all elected members and all senior staff. • Further training sessions in the north and south of the County offered to all Councillors. • "If this were my child" (a councillor's guide to being a good corporate parent to children in care and care leavers) circulated to all elected members. • New Corporate Parenting Board convened. With |

| | | | | | | |
|----|---|-------|-----------------------------|---------------------------|---|--|
| | | | | | | <p>the Portfolio Holder for Children's Services in the chair. All cabinet members and the Scrutiny Committee Chair/Vice-Chair/Lead Member for Children's Scrutiny are invited.</p> <ul style="list-style-type: none"> • Steps have been taken to ensure that the voice of Looked After Children and care leavers is prominent within the work of the Corporate Parenting Board. • Dates for Corporate Parenting Board set for every other month in 2018 (previously met quarterly). <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Finalise Terms of Reference for Corporate Parenting Group (March 2018). • Meet the Corporate Parenting Board's expectations that further self-assessment is undertaken to inform development of a revised corporate parenting work plan. (May 2018) • Clarify the 'offer' that will be made to children who are looked after and care leavers, in keeping with the request from the Children's Commissioner (September 2018). |
| A7 | Regularly update Scrutiny Committee on progress being made. | Rec 6 | Head of Children's Services | November 2017 and ongoing | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> • Full timetable of meetings in place. • Children's Scrutiny met to consider the inspection report and to review the current position of Children's Services. • Presentation from Head of Service circulated to all Children Scrutiny members. • First iteration of the Improvement Plan shared with Scrutiny Committee. • A more inquisitive approach to scrutiny is being developed with a training and development programme being delivered by an external expert. • The service is demonstrably becoming a priority for the Council at both political and corporate levels. | |

| | | | | | | |
|---|-----|--|--------|--|---------------------------|---|
| | A8 | Engage with workforce. | Rec 6 | Director of Social Services/ Head of Children's Services | November 2017 and ongoing | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> • 3 rounds of Staff Roadshows have been undertaken across the County led by Portfolio Holder, Chief Executive, Interim Director of Social Services and Head of Children's Services. • Regular bulletins are provided to staff as part of a Communications and Engagement Strategy. • Staff are provided with regular opportunities to meet with members of the Improvement Board, the Portfolio holder, the Chief Executive and senior staff in the Directorate. |
| | A9 | Engagement Plan to be developed and agreed by the Improvement Board. | Rec 6 | Senior Communication Manager | November 2017 and ongoing | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> • The communication plan was discussed at Improvement Board on 30th November and it is being implemented, with regular updates to the Improvement Board. The chair provides an update for staff after every Board meeting.. |
| <p>Page 135</p> <p>Medium-term</p> <p>There is a need for clear strategic direction supported by operational protocols to enable partners to have a clear understanding of the purpose, structure and decision making in Children's Services.</p> | A10 | Develop a guide for partners around Children's Services to include threshold document, governance structures and personnel, key contacts and decision processes to be supported via Child Protection Fora and the Children and Young People's Partnership. | Rec 17 | Director of Social Services/ Senior Manager - Child Care South & CWD / Senior Manager - Child Care North & PPD | June 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • The Improvement Programme and Improvement Plan have been shared as a challenge version with a wide range of stakeholders. • Increased levels of engagement with partner agencies is increasing their understanding of the strategic direction and operational protocols for Children's Services but this needs to be consolidated. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • The Council will publish: <ul style="list-style-type: none"> ➤ its programme for improving Children's Services and this action plan (February 2018) ➤ The Powys County Council Commissioning Strategy - Reshaping Services for Children who need Care and Support 2018-2020 |

| | | | | | | |
|--|-----|---|--------|---|--------------------------|--|
| | | | | | | <p>(June 2018).</p> <ul style="list-style-type: none"> ➤ Its Key Improvement Aims, Principles and Shared Commitments – describing the pattern of services and standards for them and helping to guide decision-making (April 2018). ➤ Powys County Council: Role and responsibilities of the Director of Social Services, the Director of Education and Children and the Lead Director for Children and Young People (April 2018). |
| <p>Medium-term</p> <p>There should be an early consideration of the impact of the changes made because of the commissioned review and whether decisions made as part of the review should be revisited.</p> <p>Page 137</p> | A11 | Review the revised Children's Services structure in order to design and agree a future operating model. | Rec 18 | Director of Social Services/ Children's Services Senior Management Team | November 2017 – May 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • The Council will keep partners informed through the Children and Young People's Partnership of all changes in the operational structure for Children's Services. (Ongoing) • Cabinet's recommended budget identifies investment within the Improvement Plan funding for additional posts to increase capacity. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Pilot a new approach to dealing with demand for assessments by creating a specialist team in the north (March 2018). • The Council will review the effectiveness of the current operational structure in Children's Services, as information emerges about the overall management of casework demands and the effectiveness of the current structure. (May 2018). • The Head of Service will develop a proposal for making changes in the structure and produce an engagement document setting out new structures and posts once funding has been agreed. (June 2018) |
| Medium-term | A12 | Children's Services to | Rec 19 | Head of Children's | November 2017 and | <i>Well progressed</i> |

| | | | | | | |
|--|------------|---|---------------|---|-------------------|--|
| <p>Elected members need to be clear about the vision for Children's Services and recognise this as a high-risk area for the council. To support this, members need training to understand the direction of services and the particular risks inherent in Children's Services.</p> | | <p>provide a briefing to Members' Development Day that sets out the direction of services and the inherent risks in Children's Services.</p> | | <p>Services</p> | <p>ongoing</p> | <ul style="list-style-type: none"> Members Briefing Session on Safeguarding Children - 43 members in attendance. Increased levels of participation in Children's Services scrutiny and corporate parenting events; offers of help from individual elected Members have been received. Letter has been sent by the Portfolio Holder to members to request their preferences for which teams they would like to visit. Members are planning to meet teams and services. The budget proposal has been changed considerably to include investment to support the needs of Children's Services. A Members' seminar was held in January to update all members on the level of investment being proposed but also to outline the approach to developing a safe and sustainable budget for Social Services. This is a key element in the Council's Financial Strategy. Programme of work being done in respect of member development training across all their roles (including Scrutiny and Cabinet). <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Deliver further members training. (March 2018). |
| | <p>A13</p> | <p>Council to adopt the National Rights Based Approach – 'the Right Way', formally adopt the UNCRC and work towards the National Participation Standards Kite Mark.</p> | <p>Rec 19</p> | <p>Director of Education and Children</p> | <p>March 2020</p> | <p><i>Planned</i></p> <ul style="list-style-type: none"> See A40 - A43 Cabinet and elected members have attended members briefing session to develop a clear knowledge and understanding of their Corporate Parenting responsibilities. Training module has been planned over 3 sessions to cover: Brief for Powys People Direct (PPD); Safeguarding; Corporate Parenting: children and young people's rights (UNCRC). <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Deliver Corporate Parenting training to all senior |

| | | | | | | |
|-----|--|--------|-----------------------------|---------------------------|--|---|
| | | | | | | <p>managers across the organisation, partner agencies and all elected members. (May 2018)</p> <ul style="list-style-type: none"> Through their representative on the Improvement Board, the Children's Commissioner's Office (CCfW) has provided a proposal for working with the Council on embedding the UNCRC in service design and professional practice. (July 2018) |
| A14 | Cabinet Members to attend Corporate Parenting Group meetings as set out in the Terms of Reference. | Rec 21 | Chief Executive | November 2017 and ongoing | <p><i>Complete</i></p> <ul style="list-style-type: none"> Invite extended to all Cabinet members to play an active role at Corporate Parenting Group. Cabinet members attended the first meeting and have a schedule of future dates. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Produce a programme of work for the Group, including consideration of the 'offer' that the Council will deliver on behalf of Looked After Children and care leavers. (May 2018) | |
| A15 | Information and performance data to be provided to elected members to enable them to discharge their corporate parenting responsibilities. | Rec 20 | Head of Children's Services | January 2018 and ongoing | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> A suite of 5 sentinel indicators has been developed which all elected members can access directly on a monthly basis. Dashboard developed for Improvement Board will be used to report to scrutiny committee. Scheduled scrutiny dates have been agreed and reporting timescales confirmed. | |
| A16 | Provide an Information, Advice and Assistance (IAA) briefing to Corporate Management Team and Members. | Rec 21 | Chief Executive | March 2018 | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> Presentation given to Cabinet on 16 January. Presentation for Management Team scheduled for February. <p><u>Key Next Steps</u></p> <ul style="list-style-type: none"> Presentation to Members (March 2018) | |

| | | | | | | |
|--|-----|--|--------|-----------------------------|---------------------|--|
| | A17 | Undertake a mapping and gapping exercise across the Council for all IAA functions. | Rec 21 | Director of Social Services | January - June 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • We have increased capacity in Powys People Direct, our contact and early screening centre. It both provides information, advice and assistance and also receives social services enquiries from the public and professionals. • Concerns raised about people's ability to get access to PPD were addressed through a restructuring exercise. Supervision and support for contact officers have been increased and management oversight enhanced. The service has been re-located into county hall at Llandrindod Wells to meet more appropriately their accommodation requirements. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Test the effectiveness of the systems now in use (January 2018). • Develop an automated referral receipt system which will describe for the enquirer how the matter is being progressed. This will address the issue that post-referral communication with the enquirer has not always been carried out well enough. (May 2018) • Develop Powys People Direct (PPD) into a multi-agency hub to <ul style="list-style-type: none"> ➤ include a clear Information, Advice and Assistance (IAA) service and Early Help offer ➤ provide a coherent, proportionate, multi-agency response to need - every referral will have a response. (July 2018) • Arrange a workshop for the Children and Young People's partnership to plan next steps. (February 2019) |
| | A18 | Implement regular reporting under | Rec 21 | Chief Executive | September 2018 | <i>Planned</i> |

| | | | | | | |
|-----|--|--|--------|------------------------------|-----------------------|--|
| | | the Corporate Improvement Plan for delivery of IAA services. | | | | <ul style="list-style-type: none"> This will follow on from delivery of A22. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Develop reporting processes and guidance for all departments to evidence their contribution to the delivery of IAA service. (June 2018) Produce first report for Management team (September 2018). |
| A19 | | Develop community responses to building families resilience by working with the social values forum supported by PAVO. | Rec 21 | Senior Manager CYPP | October 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> Social Value Forum established by PAVO following paper to Regional Partnership Board and terms of reference outlined. Inaugural meeting held. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Work with the Social Forum to explore delivery models and ways of developing family and community resilience.(October 2018) |
| A20 | | Reinstate In-Focus news briefing to be provided on termly basis to Council and to all partners. | Rec 21 | Senior Communication Manager | June 2018 and ongoing | <p><i>In progress</i></p> <ul style="list-style-type: none"> Items for next In Focus publication being gathered by Communications Officer <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Produce draft of In Focus edition. (February 2018) Print, publish and distribute edition. (March 2018) Provide regular information to third sector partners through PAVO. (Ongoing) Explore option of developing In Focus into an all age Regional Partnership Board publication. (July 2018) |
| A21 | | Deliver a promotional campaign around PPD, Info-engine | Rec 21 | Senior Communication Manager | April 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> Through PAVO, the Council has commissioned computer programmers to develop a link between |

| | | | | | | |
|---|-----|---|--------|-----------------------------------|---------------------------|---|
| | | and DEWIS. | | | | <p>InfoEngine and Dewis, the national well-being database, so that information from both systems is regularly shared and updated. (February 2018)</p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Ensure that all professionals understand and respect the role of Information, Advice and Assistance (IAA) and their responsibility for it in changing the way families can interact with organisations at an early stage of their involvement. The Children and Young People Partnership has made this a priority action, within the work being done to develop prevention and early intervention across all public services. (June 2018) • Develop and deliver a promotional campaign around PPD, ensuring engagement from key stakeholders. (July 2018) |
| <p>Medium-term</p> <p>At a corporate level, the Local authority must establish systems and structures to effectively monitor and evaluate progress within Children's Services</p> | A22 | Develop the Corporate Management Framework | Rec 23 | Chief Executive | December 2017 and ongoing | <p><i>Complete</i></p> <ul style="list-style-type: none"> • The Performance Management Framework has been refreshed and tested with Jack Straw (Independent Chair of Improvement Board) |
| <p>Longer-term</p> <p>The Local authority and partners must work together to develop a cohesive approach to the collection and analysis of</p> | A23 | Re-establish the Children and Young People's Partnership (CYPP) to lead and support effective multi agency work and commissioning | Rec 28 | Senior Partnership Manager (CYPP) | October - December 2017 | <p><i>Complete</i></p> <ul style="list-style-type: none"> • Joint Chairs appointed for the CYPP – Statutory Leads for Children from PCC and PTHB. • Inaugural meeting of CYPP held to develop terms of reference and future vision. • First full meeting of CYPP held to agree Terms of Reference and consider the Early Help Model and Start Well Programme. |

| | | | | | | |
|--|-----|---|--------|--|----------------|--|
| <p>information about the needs of communities, which includes the views of children and families. This should be used to inform the shaping of strategic plans to achieve effective alignment of service delivery between information, advice and assistance services, the preventative sector and statutory services.</p> | | and to oversee delivery of the 'Start Well' programme. | | | | <ul style="list-style-type: none"> Full year of bi monthly meeting scheduled as well as additional thematic workshops in areas such as early help. |
| | A24 | Ensure annual updates of the population and well-being assessment. | Rec 28 | Strategic Programme Manager Business Intelligence | March 2018 | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> The Population Assessment was published in March 2017 and the Well-being Assessment in May 2017. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Provide update. (March 2018) |
| | A25 | Develop and implement the well-being and area plans ensuring robust reporting and monitoring through clear governance arrangements (RPB and PSB). | Rec 28 | Regional Partnership Board Coordinator / Public Service Board Co-ordinator | June 2018 | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> Public Service Board's Draft Well-being Plan is out for formal consultation, which ends in February. Some further discussion is taking place on development of Regional Partnership Board's Area Plan. The Health and Care Strategy (including Area Plan) has moved into phase 2, with the programme mandate signed off by the Health and Care Strategy Board. Documents will be going through the relevant governance arrangements, including scrutiny. "Have your Say Day" for children and young people and a "Carers Matter" day took place in November, to consult on aspects of the Health and Care strategy including prevention and early help. Broad stakeholder consultation event held in December for phase 2 of the Health and Care Strategy. |
| | A26 | Undertake thematic reports in | Rec 28 | Regional Partnership | September 2018 | <i>In progress</i> |

| | | | | | | |
|--|-----|--|--------|--|------------|---|
| | | relation to IAA and early intervention and prevention across partnership arrangements. | | p Board Coordinator | | <ul style="list-style-type: none"> Regular reporting of ICF prevention and early help services are collated for Welsh Government and submitted to the ICF steering group (working to the RPB). The ICF Steering Group are currently revising the strategy for the use of ICF and aligning it to the future model of care emerging from the Health and Care Strategy. This will provide a more integrated and co-ordinated approach to the provision of a whole system methodology for early help and support. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> There has been a delay in setting up the thematic partnerships under the RPB because of capacity issues. They all will have met by the second week of February and a scheduled timetable will be put in place, once terms of reference and membership has been approved. (February 2018) |
| | A27 | Develop management information data that is robust, reliable, and accessible and provides insight to develop patterns. | Rec 28 | Strategic Programme Manager Business Intelligence | April 2018 | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> Dashboard for the Improvement Board was built in January. The sentinel 5 KPI's for Children's Services were launched at an elected member development session in December. |
| <u>Longer-term</u> Future changes to structure and service delivery need to include consultation with all stakeholders in its shape and | A28 | Review and strengthen engagement and consultation processes within the management of change policy to include service user and partner | Rec 29 | Professional Lead - Human Resources Management and Development | March 2018 | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> The Management of Change Policy has been reviewed and does not require amendment The existing policy makes reference to the need for change proposals to have an impact assessment. As such, an impact assessment should be completed by the service area in advance of staff consultation, with the potential |

| | | | | | | |
|---|-----|--|--------|---|---------------------------|---|
| <p>development. The change needs to be incremental and with changes implemented at a pace that will ensure the full involvement of staff and young people and ensure children are not placed at risk.</p> | | agencies. | | | | <p>impact upon service users and partner agencies considered as part of this exercise</p> <ul style="list-style-type: none"> • HR Business Partners have been reminded of the need to check that impact assessments have been completed by service areas, in advance of staff consultation. • Engagement with partner agencies is being consolidated through PAVO and third sector networks. |
| | A29 | Strengthen and implement the communications and engagement plan for Children's Services to include formal and informal engagement for a wide range of stakeholders | Rec 29 | Senior Communication Manager | February 2018 and ongoing | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> • See A8 • Communication Plan was discussed at Improvement Board in November and it is being implemented. |
| | A30 | Review arrangements for delivering our duties under Annex B of the Wellbeing of Future Generations Act and improve cross-organisational commitment. | Rec 29 | Statutory Lead for Children-Director of Education | September 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Requirements for delivery against Annexe B presented to Public Service Board and Regional Partnership Board <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Presentation to be given to Management Team, Cabinet and Heads of Service in relation to the duties under Annex B (June 2018). • Complete and agree a statement of intent in relation to meeting duties under Annex B (September 2018). |
| | A31 | Adopt the new National | Rec 29 | Statutory Lead for | April 2018 | <p><i>Planned</i></p> |

| | | | | | | |
|-----|--|--|--------|---|----------------|--|
| | | Participation Charter to demonstrate our commitment to the national standards. | | children – Director of Education | | <ul style="list-style-type: none"> Awaiting final publication of National Participation Charter by Children in Wales, scheduled for March 2018. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Submit paper to Cabinet and Management Team. (April 2018) Adopt charter. (June 2018) Deliver communications and engagement plan. (June 2018) |
| A32 | | Children’s Services to achieve the national kite mark for meeting the Participation Standards. | Rec 29 | Head of Children’s Services | September 2019 | <p><i>Planned</i></p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Develop a service Participation Standards working group. (February 2018) Complete self–assessment. (May 2018) Develop action plan. (June 2018) Implement action plan. (September 2018) Submit self-assessment for Kite Marking inspection. (October 2019) |
| A33 | | Work with our Partners to agree and implement a Children’s Charter for Powys | Rec 29 | Statutory Lead for Children-Director of Education | September 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> Initial proposal scoped with colleagues in Powys Teaching Health Board. Research undertaken on examples of Children’s Charters. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> CYPP to commit resources to develop the charter. (March 2018) Work with all stakeholders, including children and young people, to develop a Powys multi-agency Children’s Charter. (July 2018) Publish charter along with communication aids. (September 2018) |

Priority Improvement Area B - Safeguarding, Practice and Quality Assurance

Sponsor – Director of Social Services

Theme B: Case Management, Practice and Quality Assurance

CIW Analysis

The Local Authority must ensure assessments are carried out within statutory timescales and are undertaken in partnership with children and families.

The quality of assessments and plans must be improved to ensure they are consistently of a good quality, with a clear focus on the needs, risks, and strengths of children and families, and that desired outcomes, timescales and accountabilities for actions are clear.

The quality and consistency and timeliness of record keeping must be improved; all staff and managers must ensure that records are of good quality, up to date and systematically stored

The Local Authority must clarify the role and purpose of Powys People Direct (PPD) within the overall provision of information, advice and assistance and must ensure staff and partners have clear guidance to support decision making. The Local Authority must ensure that all staff are suitably trained, skilled and supported to deliver this role. A clear protocol is required between PPD and the Emergency Duty Team to ensure cases are not lost between services.

The Local Authority must implement an effective model of assessment to support its interventions with families, which is understood by all staff and partners, underpinned by robust training and development.

The Local Authority must ensure that all care and support plans have a clear focus on outcomes for children, which incorporate the voice of the child.

An assurance mechanism must be implemented as a priority to ensure compliance with legislation, statutory guidance and protocols regarding Looked After Children and children at risk.

Performance management and quality assurance arrangements, including scrutiny of service demand and routine auditing of the

Success Criteria

The Local Authority works with partner organisations to develop, understand, co-ordinate, keep up to date and make best use of statutory, voluntary and private sector information, assistance and advice resources available in their area. All people, including carers, have access to comprehensive information about services and get prompt advice and support, including information about their eligibility and what they can expect by way of response from the service. Arrangements are effective in delaying or preventing the need for care and support. People are aware of and can easily make use of key points of contact. The service listens to people and begins with a focus on what matters to them. Effective signposting and referring provides people with choice about support and services available in their locality, particularly preventative services. Access arrangements to statutory social services provision are understood by partners and the people engaging with the service are operating effectively.

All people entitled to an assessment of their care and support needs receive one in their preferred language. All carers who appear to have support needs are offered a carer's needs assessment, regardless of the type of care provided, their financial means or the level of support that may be needed. People experience a timely assessment of their needs which promotes their independence and ability to exercise choice. Assessments have regard to the personal outcomes and views, wishes and feelings of the person subject of the assessment and that of relevant others including those with parental responsibility. This is in so far as is reasonably practicable and consistent with promoting their wellbeing and safety and that of others. Assessments provide a clear understanding of what will happen next and results in a plan relevant to identified needs. Recommended actions, designed to achieve the outcomes that matter to people, are identified and include all those that can be met through community based or preventative services as well as specialist provision.

People experience timely and effective multi-agency care, support, help and protection where appropriate. People using services are supported by care and support plans which promote their independence, choice and wellbeing, help

quality of practice needs to be embedded so that managers at all levels have timely, relevant and accurate performance and quality assurance information.

At a corporate level the Local Authority must establish systems and structures effectively monitor and evaluate progress within Children's Services'.

The consistent application of a quality assurance system must be implemented to ensure families who are referred to the Team Around the Family service are not subject to drift and delay and to ensure there are targeted plans in place which are reviewed and checked by managers.

The Local Authority must strengthen the oversight of the response to complaints to improve reporting and analysis and ensure there is a mechanism to capture lessons learned.

keep them safe and reflect the outcomes that are important to them. People are helped to develop their abilities and overcome barriers to social inclusion.

Regular auditing, to ensure management oversight of the quality of work being undertaken. Independent oversight in respect of care planning for children who are looked after

All staff will have access to policies and procedures which will can be used to effectively guide their practice. Appropriate referrals are made by all agencies based on an agreed threshold.

Management information is analysed at all levels of the Service and plays a key role in decision making. Evidence that Management Information is informing Decision Making. Performance against key performance indicators is readily available.

Complaints are responded to in a timely manner. Independent investigation of all complaints. Learning from complaints shared across the service and leading to improvements in practice. Analysis of complaints to inform planning and delivery of services.

As a corporate body, the Council has a duty to ensure that it undertakes its functions in a way that safeguards and promotes the welfare of children. In addition to legislation, there is statutory guidance intended for local authorities and their relevant partners in relation to safeguarding. The SSWB Act and codes of practice, while making it clear that safeguarding children and adults at risk of abuse and neglect is everyone's responsibility, specify that the Director of Social Services must show leadership to ensure effective safeguarding arrangements are in place, both within the local authority and by relevant partners. The Director of Social Services must oversee and report to Councillors, on a consistent basis regarding the operation, monitoring and improvement of child and adult safeguarding systems within the local authority. Defined arrangements with other officers must be clear in relation to delegation and reporting arrangements relating to safeguarding issues.

Page 148

| Outcome | Action No | What do we need to do | Ref to CIW report | Leads | Timescale | Status |
|---------|-----------|-----------------------|-------------------|-------|-----------|--------|
|---------|-----------|-----------------------|-------------------|-------|-----------|--------|

Immediate

Actions arising from risk management or safety plans are successful in reducing actual or potential risk. Children are not left in unsafe or dangerous situations.

Page 149

| | | | | |
|----|--|-----------------------------|------------|---|
| B1 | Establish political and corporate leadership for safeguarding responsibilities within the Council. | Director of Social Services | July 2018 | <i>In progress</i> <ul style="list-style-type: none">• The Council has produced a Corporate Safeguarding Policy. It defines for all staff and elected members: the Council's expectations; roles and responsibilities; training requirements; guidance on how to recognise abuse of children; what to do if someone tells you that they or another person is being abused; confidentiality issues; procedures within the Council for reporting concerns; and the way in which the Council deals with allegations of abuse against professionals/those in a position of trust.• Guidance has been provided regarding Safe Working Practices, the role of other safeguarding bodies and safeguarding under the Social Services and Well-being Act.• The Council has put in place a Corporate Safeguarding Group. It will be led initially by the Chief Executive and its membership includes relevant Cabinet members. The Director of Social Services is the designated lead officer for safeguarding across the Council and all relevant departments/service areas have nominated a lead officer for safeguarding. <p><u>Key next steps</u></p> <ul style="list-style-type: none">• Produce a programme of work for the group. (March 2018)• Ensure that relevant Scrutiny Committees and the Cabinet receive six-monthly reports from the Corporate Safeguarding Group. (July 2018) |
| B2 | Put in place an effective | Director of | April 2018 | <i>In progress</i> |

| | | | | | | |
|--|-----------|--|--|------------------------------------|--|--|
| | | <p>framework for ensuring that the Council works well with all relevant partner groups and agencies in respect of safeguarding responsibilities.</p> | | <p>Social Services</p> | | <ul style="list-style-type: none"> • Interim Head of Service has re-established the Powys Local Operational Group (PLOG) which operates to co-ordinate (at the local authority level) the multi-agency work led by the Regional Safeguarding Board. • Interim Director of Social Services has met with the Chair of the Regional Safeguarding Board to instigate a more purposeful approach to the Council's relationship with and contribution to the Board. These overtures have met with a very positive response and offers of support. Attendance at key meetings has been sustained. • The service itself is focusing on the basics - ensuring that assessments are completed, statutory visits made within timescales, Case Conferences held promptly, plans developed and communicated with the family to ensure the child is protected and avoiding drift. Monitoring work indicates some improvement but from a very low baseline. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Respond effectively to publication of the Child Practice Review in respect of Child A. (February 2018) • Ensure compliance with the Regional QA & Reporting Framework and its audit programme. (February 2018) • Use the Framework, audits and local data from the PLOG to identify the children most at risk and areas of improvement in service delivery, especially in respect of CSE. (June 2018) |
| | <p>B3</p> | <p>Provide responsive, consistent and appropriate support to</p> | | <p>Head of Children's Services</p> | | <p><i>Planned</i></p> <p><u>Key next steps</u></p> |

| | | | | | | |
|----------|----|---|--|--------------------------------------|-----------|---|
| | | those at risk of or being subject to child sexual exploitation. | | | | <ul style="list-style-type: none"> • Review the provision of direct work and support to children at risk of CSE. (March 2018) • Review the use of debrief meetings when children go missing. (March 2018) • At a corporate level, co-operate with the Police in identifying and prosecuting perpetrators. (April 2018) • Ensure that the Regional CSE Action Plan has been delivered effectively in Powys. (April 2018) • Provide additional multi-agency training sessions on responding to CSE and children who are missing. (June 2018) |
| Page 151 | B4 | All Children's Services frontline staff to raise awareness of child sexual exploitation by undertaking specific relevant training | | Social Services Training Unit | June 2018 | <p><i>Planned</i></p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • CSE training to be delivered across the workforce. A staged approach will be taken: <ul style="list-style-type: none"> ○ Phase 1 (March 2018) ○ Phase 2 (June 2018) |
| | B5 | Establish that policies and procedures in relation to safeguarding and protection are well understood and consistently embedded and contribute to a timely and proportionate response to presenting concerns. | | Interim Safeguarding Children's Lead | June 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • We are investigating problems reported by PPD in accessing police for timely strategy discussions and s47 investigations. • We are concerned that not all Child Protection Conferences are quorate. • We are adopting over the coming year the "Signs of Safety" model successfully used in other Welsh local authorities and beyond for achieving improved management of risk and a greater emphasis on the family's strengths and potential for change. This is an approach which can be understood and acted upon at all levels within the Council and in collaboration with key stakeholders. |

| | | | | | | |
|---|----|---|-------|-----------------------------|---------------------|--|
| | | | | | | <p>We will provide training for staff and partner agencies before we roll it out fully. We have been in contact with other authorities to learn and benefit from their experience of the model.</p> <ul style="list-style-type: none"> The Director of Social Services from Swansea held a masterclass/seminar in February for staff to describe the improvement journey made by his council. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Meet the need for developmental work with frontline staff on risk assessments, including analysis in s47 investigations. (May 2018) Increase capacity in the safeguarding service and developing our edge of care services to ensure that needs can be met. (June 2018) Review the effectiveness of the Child Protection Forum for shared learning. (May 2018) Implement the Signs of Safety model. (December 2018) Increase direct work with families using the Signs of Safety Model (Ongoing) Consistent practice across the county. (December 2018) |
| <p><u>Immediate</u></p> <p>Obstacles to good professional case work practice and engagement with families should be addressed. Case</p> | B6 | Review allocation of all cases and match social worker caseloads to those in Local Authorities categorised as good. | Rec 4 | Senior Manager (Area North) | Phase 2 - June 2018 | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> Cases have been reviewed and reallocated. Additional agency staff have been recruited. Caseloads are being brought down with an aim of 20 cases or less per worker. Current position – all caseloads are below 20, with the exception of 4 staff who have caseloads of less than 26 (<i>data accurate as at 5 Feb 2018</i>). Caseload monitoring reports are available to managers and staff. |

| | | | | | | |
|--|--|---|--------------|--|--|---|
| <p>monitoring required to ensure sufficient capacity for workers to engage effectively with families.</p> | | | | | | <ul style="list-style-type: none"> • Work is being undertaken within the Workforce priority area in order to benchmark caseload numbers against other Local Authorities similar to Powys. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Undertake further work being done to anticipate future casework demands. (March 2018) • Seek comparisons with similar teams in other local authorities. (April 2018) • Provide clarity about the final staff complement for individual teams. (May 2018) |
| <p>B7</p> | <p>Address concerns that casework practice between locality teams is inconsistent, partly because of the size of the county and distances between teams.</p> | | | <p>Head of Children's Services/ Practice Service Manager</p> | <p>June 2018</p> | <p><i>In progress</i></p> <ul style="list-style-type: none"> • We are examining possible causes of inconsistency such as: team functions or location; management style or span of control, team composition and size, locality characteristics, staff training, performance management, etc. • A specialist in practice development has been recruited. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Provide a programme of work for exploring with staff barriers to good practice and producing an action plan. (February 2018) • Reinforce policy expectations in respect of casework and practice. (see below) |
| | <p>B8</p> | <p>Update policies, procedures and business processes so that they clearly set out requirements for all staff</p> | <p>Rec 9</p> | <p>Head of Children's Services Senior Manager - Child Care North & PPD / Interim</p> | <p>Phase 2 – January 2018 Phase 3 – April 2018</p> | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Workshops have been held for PPD, CWB/Care and Support, Step up/Step down, CP and LAC, and COLA. • IPASS policy and terms of reference have been signed off. |

| | | | | | | |
|---|----|---|-------|---------------------------------|------------|--|
| | | | | Safeguarding Children's Lead | | <ul style="list-style-type: none"> • Staff Supervision, Allegation against Foster Carers, Parent and Baby placement approved and published. • PPD, CWB assessments, QA framework, care and support plans, 'When I'm ready', Leaving care 16+, Public Law outline, all currently being reviewed. • LAC including COLA and CP policy are currently in draft. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Hold workshops for 16+ Leaving care and PLO. (January 2018) • Design training programme for staff on CWB assessment, staff supervision, QA Framework, LAC (including COLA), Child Protection policy, 'When I'm Ready', Leaving care 16+, care and support plans, and Public Law outline. (March 2018) • Implement training programme in full. (November 2018) |
| Immediate Statutory visits to be undertaken within timescales. | B9 | Ensure that all children on the Child Protection Register and all Looked After Children are being visited within timescales and that children's welfare is being appropriately protected. | Rec 1 | Senior Managers north and South | March 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • All cases are allocated. • The monitoring process has started. • Measures in place to measure the quality of statutory visits. • Child Protection policies have been reviewed. • Further capacity for teams provided through agency staff. • Performance in this area is now a standing item with OMT and SMT. • 44% of LAC Statutory Visits undertaken within timescale (<i>data accurate as at December 2017</i>). • 42% of Child Protection Statutory Visits undertaken within timescale (<i>data accurate as at December 2017</i>). |

| | | | | | | |
|---|-----|--|--------|--|---|---|
| | | | | | | <u>Key next steps</u> <ul style="list-style-type: none"> • Ensure all future visits are of a high quality, and undertaken within timescale. (July 2018) • Monitor through QA framework. (September 2018) |
| Immediate A multi-agency child protection protocol should be established to support decision making on the need for assessments in statutory Children's Services. This needs to be understood by staff and partners and consistently applied. Multi-agency quality assurance systems and training arrangements are required to support | B10 | Launch and implement regional 'threshold and eligibility for support' document in Children's Services and with partner agencies. | Rec 16 | Head of Children's Services | Launch October 2017 and implement from January 2017 | <i>In progress</i> <ul style="list-style-type: none"> • The Regional threshold and eligibility document has been launched). • It has been taken to Child Protection multi-agency practice development fora. • Some staff in Children's Services are not aware that the regional threshold document is in use and believe they required training in its use. <u>Key next steps</u> <ul style="list-style-type: none"> • Hold further training events for Children's Services staff around the threshold and eligibility document. (February – April 2018) • Monitor and review implementation of the threshold document. (May 2018) |
| | B11 | Undertake multi-agency training needs analysis. | Rec 16 | Professional Lead, Business Support Resources | March 2018 | <i>Complete</i> <ul style="list-style-type: none"> • The Annual Training needs analysis for the childcare workforce was completed in November. It will inform the training plan for 2018/2019. |
| | B12 | Publish a multi-agency training brochure. | Rec 16 | Professional Lead - Business Support Resources | April 2018 | <i>In progress</i> <ul style="list-style-type: none"> • Current training plan is in place and the 2018/2019 plan is in development. <u>Key next steps</u> <ul style="list-style-type: none"> • Publish training plan. (April 2018) |

| | | | | | | |
|-------|-----|--|--------|--------------------------------------|---------------|--|
| this. | B13 | Increase the number of multi-agency child protection fora from two programmes to three programmes. | Rec 16 | Interim Safeguarding Children's Lead | November 2017 | <p><i>Complete</i></p> <ul style="list-style-type: none"> Additional fora arranged and a rolling programme is in place for 2018 |
| | B14 | Establish multi-agency child protection decision-making protocol. | Rec 16 | Interim Safeguarding Children's Lead | April 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> Threshold document in place, published on intranet and promoted with partners. Agencies are now able to have a conversation with Powys People Direct in relation to eligibility before submitting Multi-Agency Referral Form. Threshold document been through IPASS process in order to ensure business processes are aligned and expected practice ice made clear. New continuum/thresholds are informing development of the Early Help Strategy and Start Well Programme. Regional activity is underway to review all policies and procedures in line with new All Wales Child Protection guidance <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Appoint to Quality Assurance post. (February 2018). Appoint auditor to undertake audits across Children's Services. (March 2018) Develop a programme of themed audits scheduled twice yearly to monitor and ensure compliance from all agencies in line with agreed protocols. (April 2018) Undertake regular audits. (From June 2018) Identify improvement actions following audits and address them. (July 2018 onwards) Ensure consistent application of threshold and eligibility document and Child Protection |

| | | | | | | |
|----------|-----|--|--------|--|---------------|---|
| | | | | | | <p>decision-making through further training with staff and partner agencies. (May 2018)</p> <ul style="list-style-type: none"> Partners to review own internal Child Protection and escalation policies to ensure alignment (June 2018) Arrange multi agency workshop for testing progress in this area. (August 2018) Review threshold and eligibility document and child protection processes.(September 2018) |
| Page 157 | B15 | Threshold and Eligibility Document to be included in all staff induction. | Rec 27 | Professional Lead - Business Support Resources | November 2017 | <p><i>Complete</i></p> <ul style="list-style-type: none"> Induction Programme was implemented from November 2017. |
| | B16 | Undertake feedback events (on-line) to ensure that staff understand and consistently apply thresholds. | Rec 27 | Interim Safeguarding Children's Lead | April 2018 | <p><i>Planned</i></p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Work with Survey Monkey to develop on-line survey. (February 2018) Carry out online survey. (April 2018) Analyse survey responses and produce reports outlining recommendations for improvement. (April 2018) Distribute report through PLOG, CYPP, networks and CP fora. (May 2018) |
| | B17 | Promote the importance of the threshold document and encourage partner agencies to include in their induction programme. | Rec 27 | Interim Safeguarding Children's Lead (PLOG) | April 18 | <p><i>In progress</i></p> <ul style="list-style-type: none"> Launched at Child Protection Forum in October 2017, which was well attended. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Monitor the way in which partner agencies embed the Threshold document in induction programmes. (April 2018) |

| | | | | | | |
|--|-----|---|--------|---|------------|---|
| | | | | | | <ul style="list-style-type: none"> • Check inclusion of threshold and eligibility document in induction programmes through planned survey (see A30). (April 2018) |
| <p>Medium-term</p> <p>Clarify role and purpose of PPD and build capacity to deliver Information, Advice and Assistance service</p> | B18 | Develop training and capacity within PPD for delivering IAA and Family Information Service. | Rec 10 | Area Manager - Child Care North & PPD / Senior Manager CYPP | April 2018 | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> • Held workshop to review how PPD works currently. • Pilot scheduled in North Powys to test key element of the future working model for PPD (to include assessment team.) • Powys People Direct (PPD) staff are positive about management support, including from new assistant team managers. • Use of the regional threshold document has improved confidence in decision-making • There have been improvements in gaining consent for referrals by PPD and staff feel better able to signpost people to services. • Improved communication with Emergency Duty Team. • PPD staff beginning to benefit from greater understanding of the TAF service model. • Concerns about resources available to TAF for working with children with disabilities and within Youth Inclusion Service have been examined and resolved. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Revise and implement communications plan for PPD to include promotion of all current PPD functions. (March 2018) • Implement training programme. (April 2018) • Start pilot for PPD re-modelling (April 2018). • Evaluate pilot after 6 months (September 2018) • Train Contact Officers and Social Workers to improve their understanding of IAA service so that they view early intervention as part of |

| | | | | | | |
|--|-----|---|--------|---|------------|---|
| | | | | | | <p>continuum of family support and see that these resources can be drawn on as part of the statutory involvement, a fundamental principles of the Social Services and Well-being Act. (July 2018)</p> <ul style="list-style-type: none"> PAVO (3rd Sector) staff to spend 1 day per week in PPD to build community level knowledge. (May 2018) |
| <p>Medium-term</p> <p>Clear protocols between Emergency Duty Team and PPD, to ensure cases are not lost between services</p> | B19 | Review and strengthen handling of cases & transfer of information between EDT and PPD. | Rec 10 | Senior Manager - Child Care North & PPD | April 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> A review of EDT has taken place. Staff report to CIW that there is improved communication between PPD and Emergency Duty Team. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Hold review of EDT and workshop to review EDT process, to include interaction with PPD. (February 2018). IPASS need to address appropriate business processes and documentation regarding handover from EDT. (March 2018) |
| <p>Medium-term</p> <p>Families referred to TAF are not subjected to drift and delay</p> | B20 | Apply appropriate and timely step up and step-down process and recording systems between TAF and Children's Services. | Rec 24 | Senior Manager - Child Care North & PPD | March 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> Workshops have been held to establish an agreed process and procedure for Step up/Step down. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Implement the Step up/Step down process and procedure. (March 2018) Base TAF Co-ordinator in PPD to help build knowledge and understanding of Early Help Offer and facilitate referral process (April 2018). Initial proposal drafted for integrating TAF within PPD. (Ongoing) |

Page 10

| | | | | | | |
|---|-----|---|--------------|---|---------------|---|
| <p><u>Medium-term</u></p> <p>Young people in care have planned effective transitions out of care and are supported to progress into adulthood</p> | B21 | Review current leaving care planning and practice and strengthen in line with 'When I'm ready' guidance | Rec 13 | Safeguarding Manager/Area Manager North | June 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Policy has been drafted and submitted to IPASS for alignment with business processes. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Policy to be signed off. (March 2018) • Schedule staff workshops. (May 2018) |
| <p><u>Immediate</u></p> <p>The child's voice is captured, considered and shapes all assessments and care planning</p> | B22 | Social Workers to complete the "What Matters" document with the child/ young person as part of all assessments. | Rec 1 and 13 | Senior Manager (Area North) | February 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • 'What Matters to me' booklet developed and distributed, along with guidance. • The booklet has to be completed before the care and support plan can be signed off. • Teenage and Welsh versions completed expected to be published in February. • The active offer in respect of advocacy has been commissioned. • Staff tell us that they do not have time for direct work with families or children and are not sufficiently aware of community resources. • Use of Infoengine is being promoted. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Schedule training on use of the booklet through team meetings. (March 2018) • As caseloads reduce, help staff to use community resources through use of IAA, including Infoengine and Dewis. (June 2018) • Ensure that staff are aware of the range of services available across the pathway for children and families through better use of service directories and better communication |

| | | | | | | |
|--|-----|---|-------|-----------------|----------------|--|
| | | | | | | <p>between services and fieldwork teams. (July 2018)</p> <ul style="list-style-type: none"> • Produce quarterly reports on take up of the active offer for advocacy. (July 2018) |
| <p>Medium-term</p> <p>Improve timeliness and quality of assessments and plans.</p> | B23 | Provide regular supervision to facilitate our ability to monitor the timeliness and quality of assessments and plans. | Rec 8 | Head of Service | September 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Updated supervision policy has been launched. • All relevant staff have received it. • Supervision is now monitored through the TRENT system and this allows performance management and monitoring. • Frequency of supervision is one of the 5 sentinel indicators routinely published and widely shared. • While staff tell us that they are receiving supervision, performance information indicates that only 40% of supervisions due in November were undertaken. There is relatively little supervision recording on case files. • Improvement has been made in respect of the timescales for completion of Care and Wellbeing assessments. Work to clear some of the historic data has affected some of these figures (October 85%; November 62%; December 81%; January 71%). Urgent work continues to improve performance in this area. • Improvement has been made in respect of the timescales for completion of the Section 47 assessments. Work to clear some of the historic data has affected some of these figures (October 64%;, November 56%; December 71%; January 48%). Urgent work continues to improve performance in this area. |

| | | | | | | |
|---|-----|--|-------|---|----------------|--|
| | | | | | | <u>Key next steps</u> <ul style="list-style-type: none"> • Establish targets for improved performance. (February 2018) • Put in place a structure which ensures that managers have sufficient capacity for staff supervision. (May 2018) • Provide training for practitioners and managers around professional responsibilities for regular, quality supervision which is properly recorded. (July 2018) |
| Medium-term Implement an effective model of assessment and risk management | B24 | Implement as agreed strengths-based/Signs of Safety model across the Service and with partner agencies | Rec 8 | Head of Children's Services Senior Manager South Professional Lead - Business Support Resources | September 2018 | <i>In progress</i> <ul style="list-style-type: none"> • The service has focused strongly on assessments, with twice weekly meetings of operational managers to ensure timescales are met and performance improved. • An independent auditor also reviewed a small number of files and suggested more appropriate timescales for completing assessments to ensure that they are more proportionate. • We have started to measure performance against revised, more rigorous timescales. The data and other management information show an improving picture in respect of timeliness and quality but from an exceptionally low baseline. • As PPD staff work do not complete full assessments but provide additional information for a referral, their statistics will not be included in future and this will give managers a better understanding of performance issues. • Training in outcome-focused planning for staff has been identified. • Within the IDS project, person centred planning has been undertaken across the relevant teams. |

| | | | | | | |
|---|-----|---|--------|---|----------------|--|
| | | | | | | <ul style="list-style-type: none"> • There has been some confusion about introducing the Signs of Safety Model. While staff are broadly positive, it will require effective and consistent training, systems and management support from the outset. • We are working closely with Ceredigion in implementing Signs of Safety, with oversight by the Regional Safeguarding Board. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Continue to deliver training for outcome-focused and person-centred planning. (ongoing) • Identify practice champions across teams. (March 2018) • Produce a detailed implementation plan (February 2018). • Two-day training days in Signs of Safety for Child Protection staff (February 2018). • Five- day training for practice champions. (March 2018). • Half-day briefing session with partners. (April 2018) • Plan practice sessions for leaders every 8 weeks following the 5 day programme in March (ongoing). • Plan 2 bespoke training days for conference chairs. (April 2018) |
| <u>Medium-term</u> Ensure all care and support plans have a clear focus on outcomes for children | B25 | Engage with staff to ensure care and support plans are SMART and outcome-focused. | Rec 13 | Senior Manager - Child Care South & CWD | September 2018 | <i>In progress</i> <ul style="list-style-type: none"> • Staff have requested further training on the Social Services and Well-being Act. The changes of practice required by the Act are not sufficiently embedded. This is a key foundation stone for future developments. • Frequency of statutory visits is improving but considerable work is still required. |

| | | | | | |
|---|-----|--|-------|-----------------------------|---|
| | | | | | <ul style="list-style-type: none"> • There remains clear indications of 'drift' in cases along the whole pathway. • Additional IRO capacity is in place. • Managers have reviewed all children's case files to ensure that they had up to date plans but this remains a very challenging target. • All children's cases are allocated to qualified social workers. • Practice continues to be inconsistent but the introduction of set numbers for caseloads and investment in staff will ensure better practice. • Detailed performance dashboards have been developed for front-line managers (updated daily) and for elected members (updated weekly), based upon the model used in Swansea. • A weekly operational improvement meeting, with representatives from across the Council, focuses on actions to be completed and on removing any obstacles to good practice. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • See B1 • Provide further training in respect of the Social Services and Well-being Act. (May 2018) • Appoint practice champions in each team. (March 2018) • Use action learning sets to take responsibility for improvement at practitioner level. (July 2018) • Ensure that team managers have both the capacity and skills required for overseeing improvements. (September 2018) |
| <u>Medium-term</u> Improve quality and | B26 | Recruit additional data quality clerks to support staff in ensuring that | Rec 9 | Head of Children's Services | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Agency staff have been employed to cover sickness. |

| | | | | | | |
|------------------------------|-----|--|-------|--|---------------|--|
| timeliness of record keeping | | records on WCCIS are up to date. | | | | <ul style="list-style-type: none"> As at 5 February, 43 agency staff deployed across the service. Recruitment process for permanent post is underway. Rolling advert in place to recruit permanent Social Work staff – three live applications as at 5 February. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Shortlist for permanent positions. (February 2018) Appoint to posts. (March 2018) |
| | B27 | Include requirements regarding record keeping in staff induction. | Rec 9 | Professional Lead - Business Support Resources | February 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> Staff induction for Children’s Services has been delivered, in addition to corporate induction. Children’s Services induction programme and monitoring form have been added to Children’s Services Intranet page. Children’s Services induction programme has been rolled out and promoted to all staff. Manual process in place for recording and reporting on performance in respect of induction. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Develop automated mechanism to record and report on inductions. (July 2018) |
| | B28 | Establish clear and up to date business processes that detail how and where information should be recorded to ensure Management Information is accurate. | Rec 9 | Strategic Improvement Programme Manager | April 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> Fortnightly IPASS meetings are held to discuss and develop business processes. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> See B19. |

| | | | | | | |
|--|-----|--|--------|--------------------------------------|------------|--|
| <p><u>Immediate</u></p> <p>An assurance mechanism is implemented to ensure compliance with statutory legislation, guidance and protocols</p> | B29 | Implement a Quality Assurance framework (QAF) | Rec 7 | Interim Safeguarding Children's Lead | April 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • The QAF has been agreed at IPASS. • All staff have been informed. • Implementation has started. • The QAF was discussed at staff roadshows in January. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Develop detailed implementation plan. (February 2018) • Provide training for relevant staff. (March 2018) • Embed QAF. (April 2018) |
| | B30 | Develop the IRO Monitoring form. | Rec 7 | Interim Safeguarding Children's Lead | March 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Form is under development. • There is regional activity across the four local authorities to ensure that the form is consistent. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Monitoring form to go through IPASS (May 2018). • Build IRO monitoring form on WCCIS (June 2018) • Align with Signs of Safety implementation. (July 2018) |
| <p><u>Medium-term</u></p> <p>Managers at all levels have timely relevant and accurate performance and quality</p> | B31 | Develop and implement a detailed management report in line with service requirements detailed Management information dashboards in line with service requirements. | Rec 22 | Head of Children's Services | March 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Assessments monitoring is available to LAC and CP Teams. • Introduction of performance markers for assessments at 10, 25 and 42 days will allow better analysis and improvement. <p><u>Key next steps</u></p> |

| | | | | | | |
|-----------------------|-----|---|--------|-----------------------------|---------------|---|
| assurance information | | | | | | <ul style="list-style-type: none"> • Provide accurate information around statutory visits for LAC and CP. (March 2018) • Produce management information reports for Adoption, Fostering and IFST. (June 2018) |
| | B32 | Make Performance Management a standard agenda item for SMT and OMT. | Rec 22 | Head of Children's Services | December 2017 | <i>Complete</i> |
| | B33 | Make robust performance information available to Elected Members and ensure effective scrutiny. | Rec 22 | Scrutiny Manager | February 2018 | <i>Well Progressed</i> <ul style="list-style-type: none"> • Scrutiny have had sight of the proposed new performance report and commented on the performance management data made available to all Members. • Portfolio Holder has responded to their representations. |
| | B34 | Data Quality Clerks (DQC) to work with the service to ensure that information is robust and reliable. | Rec 22 | Head of Children's Services | March 2018 | <i>In progress</i> <ul style="list-style-type: none"> • DQC have been working with TAF, CP and LAC to help ensure data is robust and reliable. • Reliability and trustworthiness of dashboards and performance reports is still being questioned by some managers. This needs to be resolved as quickly as possible. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Work on building more data to inform workforce. (Ongoing) • Monitoring via the QA framework to ensure that information is robust and reliable. (Ongoing) |

| | | | | | | |
|--|-----|--|--------|--------------------------------------|-----------------------|---|
| <p>Medium-term</p> <p>Strengthen oversight of the response to complaints and compliments</p> | B35 | Recruit a specific member of staff to investigate stage 1 complaints in Children's Services and to provide mediation. | Rec 25 | Interim Safeguarding Children's Lead | April 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Post out to advert. • Weekly meetings in place with current complaints officer to monitor volume of complaints and timeliness of response. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Recruit to post (February 2018) • Induct member of staff. (February 2018) |
| | B36 | Create a culture of learning and reflective practice, disseminate learning from complaints across the service with a view to improving services. | Rec 25 | Head of Children's Services | March 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • On OMT agenda each month. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Embed into services and embed the culture of learning from complaints. (Ongoing) • Carry out audit. (April 2018) |
| <p>Longer-term</p> <p>Ensure compliance with the Active Offer of the Welsh Language</p> | B37 | Establish and populate recording mechanisms for staff with Welsh Language Skills so that clients can be matched at the point of allocation | Rec 26 | Senior Manager North | July 2018 and ongoing | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Information provided by HR department regarding staff who have yet to register their language preference. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Carry out language analysis regarding the linguistic needs of families in specific areas. (July 2018) • Promote language courses for staff. (July 2018) |

Priority Improvement Area C - Workforce

Sponsor – Professional Lead, Culture and Leadership Development

| Theme C: Workforce | |
|---|--|
| <p>CIW analysis</p> <p>Arrangements for Team Managers and Senior Practitioners should be reviewed to ensure capacity to effectively and consistently provide management and leadership oversight and testing of decision making along with support and direction for frontline staff.</p> <p>The Local Authority and Senior Managers should take steps to improve the frequency, consistency and quality of supervision for front line staff; an assurance mechanism must be implemented to ensure compliance with expectations and quality of decision making, recordkeeping and reporting.</p> <p>Caseloads monitoring is required to ensure there is sufficient capacity for workers to engage effectively with children and their families.</p> | <p>Success criteria</p> <p>Social Workers in front-line teams have manageable caseloads. The supervision policy is embedded within all service areas. The quality of supervision is reflective and analytical. Social Workers are supported in their interventions with children through reflective supervision.</p> <p>Effective interventions delivered to children and their families. Increased Positive feedback/compliments from Service Users. Reduction in the use of agency staff. Average time to fill vacant posts is reduced.</p> <p>Improved employee awareness of Legislative and statutory requirements across the Council. Children and their families are receiving high quality social work interventions that improve outcomes. New Managers have the skills and knowledge required to effectively undertake their role.</p> |

| Outcome | Action No | What do we need to do | Ref to CIW report | Lead | Timescale | Status |
|---|---|---|--|---|--|--|
| Immediate Ascertain current workforce and identify gaps and resource issues. | C1 | Establish baseline staffing structure and review staffing levels in teams | Rec 2 | Senior Manager - Child Care South & CWD | April 2018 | <i>In progress</i> <ul style="list-style-type: none"> Initial review undertaken as part of identifying the need for additional staff Further update and review required Established what is vacant and have gone to advert. A few on hold, due to re-structures. There is a report in the process of being developed <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Undertake workload analysis. (March 2018) Agree an acceptable caseload for social workers which takes into account training and annual leave and experience of staff. (April 2018) Explore the methodology behind the caseloads of workers and monitor staff caseload levels to ensure meeting agreed acceptable levels. (March 2018) Analyse findings and identify baseline staffing structure requirements. (April 2018) |
| | Longer-term Create a stable, sustainable workforce with sufficient resource to deliver effective and safe services | C2 | Develop and implement short term plan for stabilisation of workforce including: Increasing capacity within teams where there are identified resource issues | Rec 2 and 4 | Professional Lead Culture and Leadership Development | January 2018 |
| | C3 | Stabilise the workforce with permanent members of staff, decreasing use of agency staff | | Senior Manager Placements and Resources | June 2018 | <i>In progress</i> <ul style="list-style-type: none"> All vacant posts identified. All vacant posts advertised (rolling advert) with some on hold due to restructures. |

| | | | | | |
|----|--|--------|---|----------------|--|
| | | | | | <ul style="list-style-type: none"> • Immediate interviews undertaken with any applicants. • Agency staff spoken to and provided with Job Application Forms. • Agency staff have expressed interest in applying for permanent posts. • Business Manager successfully appointed. • Policy Officer, Complaints Officer and Quality Assurance Manager posts currently in the recruitment process following re-write/update of job descriptions and person specifications. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Ongoing regular monitoring of agency staffing levels. (January 2018) • Identify agency requirements based on workloads and ensure that relevant contracts are renewed and ended as appropriate. (January 2018) • Identify issues/ trends from content of exit interviews and act accordingly. (January 2018) • Staff benefit package to be explored. (April 2018) |
| C4 | Development and implementation of long term strategy to meet employment demand linking to health and care strategy | Rec 15 | Professional Lead Culture and Leadership Development / Human Resources Business Partner | September 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Data is being gathered about how staff work. • A Recruitment and Retention Strategy is being developed. • Analysis of the Welsh speaking percentage of the population of Powys broken down into locality areas. <p><u>Key next steps:</u></p> <ul style="list-style-type: none"> • Workload analysis. (March 2018) |

| | | | | | | |
|---|----|--|---------------|---|---------------|---|
| | | | | | | <ul style="list-style-type: none"> • SMT Away Day planned to identify future operating model for Children's Services in Powys. (February 2018) • Assess the impact of introducing Signs of Safety on demand. (July 2018). • Gather robust baseline data on Welsh language skills within the workforce for Children's Services, currently at 65% and increasing slowly. (January 2018) |
| <p>Medium-term</p> <p>Robust workforce information and timely workforce management reporting</p> | C5 | Clean and accurate data from which to make workforce decisions | Rec 15 | Human Resources Business Partner | February 2018 | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> • Work undertaken to ensure that Trent accurately reflects Children's Services establishment. • All agency leavers have been ended on Trent. • Removed any posts that are not included within the budgeted structure on Trent. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Ensure regular monitoring of workforce information held on Trent and provided to SMT for review and accuracy checking. (January 2018) |
| <p>Longer-term</p> <p>Ability within the workforce to provide an Active Offer in Welsh Language</p> | C6 | Amendment of job roles and job descriptions including the requirement for Welsh Speakers | Rec 15 and 26 | Professional Lead Culture and Leadership Development / Human Resources Business Partner | October 2018 | <p><i>Planned</i></p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Gather robust baseline data on Welsh language skills within the workforce for Children's Services, currently at 65% and increasing slowly. (January 2018) • Implement new Welsh Language Policy. (April 2018) • Review and reword job descriptions in line with Welsh language requirements. (June 2018) • 50% of staff who have identified themselves as having no Welsh language skills to |

| | | | | | | |
|--|----|--|--------------|--|------------|---|
| | | | | | | <p>undertake Level 1 eLearning Welsh Language. (August 2018)</p> <ul style="list-style-type: none"> • Process any changed JDs through HR and JE process. (August 2018) • Consult with staff regarding any proposed changes. (September 2018) |
| <p><u>Longer-term</u></p> <p>Ability to attract a highly trained and skilled workforce</p> | C7 | Clear, engaging campaigns that attract staff to the council/county | Rec 15 | Professional Lead Culture and Leadership Development | March 2018 | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> • Recruitment strategy written and submitted to Improvement Board in January. • Recruitment Open Days for Bannau/Camlas and Fostering planned for February 2018. • Recruitment Open Day in March 2018. • General advert went live in January. • Corporate 'Work, Live, Play in Powys' video has gone live and are pinned on Social Media accounts. • Social work specific recruitment videos developed. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Schedule open evenings for recruitment of social work staff. (February 2018) • Finalise development of and launch Social Care web page to target recruitment difficulties. (March 2018) • Launch the social work specific recruitment ideas. (March 2018) • Role profiles to be developed to attract people to specific job roles. (Ongoing) |
| <p><u>Medium-term</u></p> <p>Efficient, effective, streamlined, automated recruitment</p> | C8 | Streamlined recruitment processes with sufficient business support to manage recruitment processes | Rec 4 and 15 | Professional Lead Culture and Leadership Development | May 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Recruitment end to end process is currently being mapped to identify areas where the process can be streamlined. • All Social Care posts exempt from VAS process. |

| | | | | | | |
|--|-----|---|--------|--|------------|---|
| <p>process attractive to applicants requiring minimal resource from recruiting managers</p> | | | | | | <ul style="list-style-type: none"> • Live rolling advert. • Interviewing applicants as they apply. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Make changes to Trent system. (February 2018) • Develop a process for making contact with applicants withdrawn in order to establish a mechanism for gathering and reviewing candidate feedback. (April 2018) |
| | C9 | <p>Recruit to:</p> <ul style="list-style-type: none"> • current vacancies; • identified additional staffing requirements. | Rec 15 | Professional Lead Culture and Leadership Development | June 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Awaiting sign off for proposed additional staffing requirements. • See C3 <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Open days and recruitment sessions planned in February for Bannau and Camlas and fostering/adoption. (February 2018) • Recruitment open days for Social Workers to be scheduled (March 2018). • Review and monitor success of this approach and further Open Days to be scheduled. (March 2018) |
| <p><u>Longer-term</u></p> <p>Motivated , trained and skilled workforce</p> | C10 | <p>Strong internal market that could include:</p> <ul style="list-style-type: none"> • investment in developing all staff into the roles that are hard to recruit to; • long-term development as a training establishment | Rec 15 | Senior Manager Placements and Resources | March 2022 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Agreed that one additional place on the Social Work degree per annum are now available (total of 3 places per annum) • 6 student placements due to commence within Children's Services teams in February 2018 (one is from Chester University, another from Bangor University). • Minimum of 7 Practice Assessors in place. • Investment in ILM programmes and staff supported to complete these. |

| | | | | | | |
|---|-----|---|--|--|---|---|
| | | | | | <ul style="list-style-type: none"> • All well-being officers will be offered opportunity to complete QCF level 5 training in order to meet the additional requirements of their post in relation to case holding and assessment. • Social workers have access to CPEL programme. • All social work teams have access to community care inform. • Career progression discussions taking place in line with Supervision/IPR policy. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Monitor wellbeing officers' progress through QCF level 5. (March 2018) • Analyse levels of demand for Social work qualification and identify additional places and resources as necessary. (March 2018) • Undertake feasibility study to explore development of in house training establishment. (December 2019) • Explore Social Work apprenticeships. (June 2018) • Further scope how we develop staff to fill the roles where recruitment is problematic. (December 2018) | |
| <p><u>Immediate</u></p> <p>All staff to complete mandatory training so that they have the required knowledge and skills specific to Safeguarding.</p> | C11 | Defined corporate mandatory training for Social Care Staff and cross organisational mandatory training to understand safeguarding responsibilities at senior levels | | Professional Lead Culture and Leadership Development | March 2019 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Paper to Management Team/Heads of Service re Corporate Mandatory Training in January. • Courses planned for March 2018. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Develop e-Learning courses roll out. (March 2019) |

| | | | | | | |
|---|-----|---|--------------|--|----------------|---|
| <p><u>Medium-term</u></p> <p>All staff to have the required skills and knowledge to undertake their role effectively.</p> | C12 | Defined role mandatory training | Rec 14 | Social Services Training Unit | September 2018 | <p><i>Planned</i></p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Define the role specific mandatory training / experiences required for every role, to include Welsh Language. (March 2018) • Establish a training needs analysis for each role against their mandatory training. (June 2018) • Develop and deliver a training plan to overcome any training gaps. (September 2018) |
| | C13 | <p>All staff inducted into their roles.</p> <p>A mechanism to record and report on inductions</p> | Rec 14 | Senior Manager Placements and Resources | July 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Children’s Services staff induction has been implemented, in addition to the Corporate Induction. • Induction programme and monitoring form has been added to Children’s Services Intranet page. • Children’s Services induction programme has been rolled out and promoted to all staff. • Manual process in place for recording and reporting on inductions. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Develop automated mechanism to record and report on inductions. (July 2018) • Include “understanding third sector“ in the Corporate Induction programme. (September 2018) |
| <p><u>Immediate</u></p> <p>Competent and confident Leaders and Managers</p> | C14 | Managerial Specific induction at junior and senior manager levels | Rec 3 and 14 | Professional Lead Culture and Leadership Development | December 2017 | <p><i>Complete</i></p> <ul style="list-style-type: none"> • Managers induction programme now in place. |

| | | | | | | |
|--|-----|--|---------------|--|------------------|---|
| Immediate Childcare workforce adequately skilled and trained | C15 | Undertake multi-agency training needs analysis Publish multi-agency training brochure | Rec 15 | Social Services Training Unit | Ongoing - yearly | <i>Complete</i> <ul style="list-style-type: none"> Annual training needs analysis undertaken and brochure published. |
| <u>Longer-term</u> A trained skilled workforce with clear training pathways | C16 | Clear training pathways for all staff that includes: <ul style="list-style-type: none"> CPD and additional qualifications to grow the workforce Values and behaviours expected of professional staff | Rec14 | Social Services Training Unit / Professional Lead Culture and Leadership Development | September 2018 | <i>Planned</i> <u>Key next steps</u> <ul style="list-style-type: none"> Identify pathways in line with role mandatory requirements and training qualification opportunities. (September 2018) Publish training pathways to all staff and promote as part of recruitment packages. (September 2018) |
| <u>Medium-term</u> Highly trained and skilled workforce with effective succession planning and implementation | C17 | Succession planning approach to ensure staff are prepared to enter other roles | Rec 14 and 15 | Professional Lead Culture and Leadership Development | April 2019 | <i>Planned</i> <u>Key next steps</u> <ul style="list-style-type: none"> Scope and report on approach to succession planning. (May 2018) Implement new succession planning approach. (September 18) |
| <u>Longer-term</u> Sustainable workforce | C18 | Approach to talent identification that ensures that there is a sustainable senior leadership for the long term | Rec 15 | Professional Lead Culture and Leadership Development | September 2019 | <i>Planned</i> <u>Key next steps</u> <ul style="list-style-type: none"> Scope talent management programme and take proposal to Management team. (October 18) Launch programme. (April 2019) |
| <u>Medium-term</u> | C19 | Re-contract (psychological contract) with the staff to ensure a clarity of employer / employee | Rec 15 | Senior Manger Placements | June 2018 | <i>Planned</i> |

| | | | | | | |
|--|------------|--|--------------|---|----------------------|---|
| <p>Clear roles and responsibilities</p> | | <p>roles and responsibilities and what staff should expect in their role and define the relationship between the staff and their managers</p> | | <p>and Resources / Professional Lead Culture and Leadership Development</p> | | <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Roll out of staff benefits package. (April 2018) • Introduce Staff Charter. (June 2018) • Develop and implement Accountability Framework. (June 2018) • Schedule Staff re contracting launch event for all staff. (June 2018) |
| <p>Medium-term</p> <p>Competent and confident team managers who know their staff, their cases, ensuring high quality supervision for every member of staff</p> | <p>C20</p> | <p>A robust supervision process that includes:</p> <ul style="list-style-type: none"> • Implementing updated supervision policy • Established recording mechanism for supervision • Monthly supervision reporting | <p>Rec 3</p> | <p>Senior Manager Placements and Resources / Professional Lead Culture and Leadership Development / Human Resources Business Partner / Improvement consultant</p> | <p>March 2018</p> | <p><i>Well progressed</i></p> <ul style="list-style-type: none"> • Updated supervision policy published along with template for recording. • All supervision dates are recorded on the TRENT system. • Performance Management information available for number of supervisions undertaken, monitored by SMT and Improvement Board. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Co-produce and begin to implement learning and development activities to improve the quality of supervision and management oversight. (March 2018) |
| | <p>C21</p> | <p>Performance management culture utilising IPRs to set targets of work and development and hold people accountable to them.</p> | <p>Rec 3</p> | <p>Senior Manager Placements and Resources</p> | <p>November 2018</p> | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Implemented new Supervision Policy and the Management Induction which will include IPRs. • Work continues to refine the reporting of supervision for staff. Current figures show improvement in this area – December 2017 59% of staff received supervision, January 2018 69% of staff received supervision. |

| | | | | | | |
|--|-----|---|--------|---|----------------|---|
| | | | | | | <u>Key next steps</u> <ul style="list-style-type: none"> Audit quality of supervision to ensure a balanced approach to case management and IPR. (June 2018) |
| <u>Longer-term</u> A culture where staff work to the top of their skill level rather than the bottom. | C22 | Practice champions freed from high caseload to help support the development of the less experienced (mentors) | Rec 3 | Senior Manager Placements and Resources / Improvement consultant | September 2018 | <i>Planned</i> <ul style="list-style-type: none"> Secured additional management capacity to identify practice champions and develop mentoring capacity. <u>Key next steps</u> <ul style="list-style-type: none"> Analyse quality of practice within teams. (April 2018) Identify practice champions. (June 2018) Provide mentoring training and development. (August 2018) Review caseloads of identified mentors to ensure capacity to support is available. (July 2018) Assign mentors to identified staff. (August 2018) |
| <u>Longer-term</u> Competent and confident Mangers and Leaders | C23 | Effective leadership and management including the investment of time of all leaders in their development of their own abilities including: Leadership Development Plan | Rec 15 | Senior Manager Placements and Resources Professional Lead Culture and Leadership Development Improvement Consultant | September 2018 | <i>Planned</i> <u>Key next steps</u> <ul style="list-style-type: none"> Develop leadership competencies for the service. (May 2018) Undertake training needs analysis of current leadership and management training. (June 2018) Undertake gap analysis. (June 2018) |
| <u>Longer-term</u> A motivated workforce - | C24 | Rewards and recognition including financial and non-financial benefits. This will include: | Rec 15 | Professional Lead Culture and Leadership | April 2019 | <i>Well progressed</i> |

| | | | | | | |
|---|------------|--|----------------------------|--|-----------------------|---|
| <p>Staff feeling valued and excellent performance rewarded.</p> | | <ul style="list-style-type: none"> Review of pay model to enable specialists to be remunerated in a manner commensurate with their level of qualification Defined non-financial reward package | | <p>Development / Human Resources Business Partner</p> | | <ul style="list-style-type: none"> Non-financial rewards staff benefits package developed and with management team for sign off. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Implementation of package. (April 2018) Explore options around pay models. (April 2019) |
| <p>Longer-term</p> <p>Motivated staff whose well-being is promoted.</p> | <p>C25</p> | <p>Range of approaches to enable staff wellbeing</p> | <p>Rec 15</p> | <p>Professional Lead Culture and Leadership Development</p> | <p>December 2018</p> | <p><i>Planned</i></p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Undertake staff survey to gather views on wellbeing. (February 2018) Scope and develop well-being support package. (September 18) Establish support package. (December 2018) |
| <p>Medium-term</p> <p>Understanding of current workforce and reasons why staff chose to leave</p> | <p>C26</p> | <p>Gain overview of current workforce and any planned leavers. Better understand staff reasons for leaving by implementation of exit questionnaires so that areas of concern can be addressed. Ongoing process to monitor.</p> | <p>Rec 15</p> | <p>Professional Lead Culture and Leadership Development</p> | <p>July 2018</p> | <p><i>In Progress</i></p> <ul style="list-style-type: none"> New exit interview form designed and implemented. Returns are being analysed monthly and fed back to SMT. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Identify issues or trends and put in place actions to address any concerns. (July 2018) |
| | <p>C27</p> | <p>To develop Reflective Practice Forums and support for practitioners</p> | <p>Rec 8, 9 and 15, 16</p> | <p>Senior Manager Placements and Resources/ Improvement Consultant</p> | <p>September 2018</p> | <p><i>Planned</i></p> <ul style="list-style-type: none"> Additional management capacity secured to develop Reflective Practice Forums and opportunities. |

| | | | | | | |
|-----|--|--------|--|--------------|---|--|
| | | | | | | <u>Key next steps</u> <ul style="list-style-type: none"> • Develop and agree reflective practice methodology. (June 2018) • Delivery of training linked to methodology. Identified. (July 2018) • Develop and roll out a programme of reflective practice. (September 2018) |
| C28 | Monitor sickness absence and look to reduce it | Rec 15 | Human Resources Business Partner/ Area manager South | January 2018 | <i>Complete</i> <ul style="list-style-type: none"> • Sickness absence reviewed by SMT on a monthly basis. • Actions identified by SMT to address sickness absence trends or concerns. • Sickness Training being rolled out for Children's Services Managers (16th February). | |
| C29 | Report on grievances/bullying/whistleblowing complaints and ensure these are dealt with promptly and appropriately | Rec 15 | Human Resources Business Partner / Senior Manager Placements and Resources | March 2018 | <i>In progress</i> <ul style="list-style-type: none"> • Review taking place for case work in 2017 and improvements into staff supported will look to be implemented by HR. • Report provided to SMT on a monthly basis. <u>Key next steps</u> <ul style="list-style-type: none"> • Deliver training for Children's Services Managers in relation to Grievances, Bullying and Whistleblowing (March 2018) | |
| C30 | Monitor the use of agency staff and look to reduce this where possible and stabilise the permanent workforce | Rec 15 | Human Resources Business Partner / Area manager South | June 2018 | <i>In progress</i> <ul style="list-style-type: none"> • All vacant posts identified. • All vacant posts advertised. • Rolling advert in place for most difficult to recruit to posts. • Immediate interviews undertaken with any applicants. | |

| | | | | | | |
|---|-----|---|-----|-----------------------------|--------------|--|
| | | | | | | <ul style="list-style-type: none"> • Agency staff spoken to and provided with Job Application Forms. • Regular reports provided and reviewed by HR with Children's Services. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Ongoing regular monitoring of agency staffing levels. (January 2018) • Identify agency requirements based on workloads and ensure that relevant contracts are renewed and ended as appropriate. (January 2018) • Identify issues/ trends from content of exit interviews and act accordingly. (January 2018) • Staff benefit package to be explored (February 2018). |
| <p>Medium-term</p> <p>Develop a whole system response to domestic abuse</p> | C31 | Develop a whole system response to Violence Against Women, Domestic Abuse and Sexual Violence | New | Director of Social Services | October 2018 | <p><i>In progress</i></p> <ul style="list-style-type: none"> • Lead Director for VAWDASV identified. • Strategic Commissioner for VAWDASV delivered reports to HOS and MT. • Level 1 training delivered to some staff groups. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Ensure the National Training Framework is included within the Terms of Reference of a relevant strategic board or group which will monitor activity and progress. (February 2018) • Identify a champion for VAWDASV issues in the Cabinet. (March 2018) • Reinforce requirements for those employees who have IT access to undertake level 1 training. (April 2018) • Deliver training in groups to those staff who do not have IT access. (Starting in April 2018) |

| | | | | | |
|--|--|--|--|--|--|
| | | | | | <ul style="list-style-type: none">• Ensure all new starters to receive training on VAWDSAV as part of induction. (April 2018)• Ensure 100% of workforce trained in level 1 (September 2018)• Add Group 1 VAWDASV training to the list of mandatory training for Council members in accordance with the National Training Framework. (June 2018)• Design a programme for the Cabinet and Corporate Management team to complete the VAWDASV elements of the Strengthening Leadership series. (September 2018) |
|--|--|--|--|--|--|

1.4 Priority Improvement Area D – Reshaping and Reforming Services

Sponsor – Director of Education and Children

| Theme D: Transforming and shaping services | |
|---|--|
| <p>CIW Analysis</p> <p>The local authority and partners must work together to develop a cohesive approach to the collection and analysis of information about the needs of communities, which includes the views of children and families. This should be used to inform the shaping of strategic plans to achieve effective alignment of service delivery between information, advice and assistance services, the preventative sector and statutory services.</p> <p>The Local Authority must ensure its fostering service provides consistent support, training and guidance to foster carers to improve the quality and availability of placements.</p> <p>There is a need for clear strategic direction supported by operational protocols to enable partners to have a clear understanding of the purpose, structure and decision making in Children’s Services.</p> <p>The local authority must clarify the role and purpose of Powys People Direct (PPD) within the overall provision of information, advice and assistance and must ensure staff and partners have clear guidance to support decision making.</p> | <p>Success Criteria</p> <p>The local authority works with partner organisations to develop, understand, co-ordinate, keep up to date and make best use of statutory, voluntary and private sector information, assistance and advice resources available in their area.</p> <p>All people, including carers, have access to comprehensive information about services and get prompt advice and support, including information about their eligibility and what they can expect by way of response from the service.</p> <p>Arrangements are effective in delaying or preventing the need for care and support.</p> <p>People are aware of and can easily make use of key points of contact. The service listens to people and begins with a focus on what matters to them.</p> <p>Effective signposting and referring provides people with choice about support and services available in their locality, particularly preventative services.</p> <p>Access arrangements to statutory social services provision are understood by partners and the people engaging with the service are operating effectively.</p> <p>People experience timely and effective multi-agency care, support, help and protection where appropriate.</p> |

People are helped to develop their abilities and overcome barriers to social inclusion.

A robust commissioning process is followed to ensure that services are designed, developed and delivered based on clear evidenced need and shaped by the views of service users.

We will provide a range of Integrated and seamless multi agency care and support pathways for children, young people and their families

We will establish integrated, locality based teams who work collaboratively and creatively to support the needs of Children, young people and their families.

A shared, owned and demonstrable culture of collaboration, prevention and outcomes focused practice across all agencies.

Smooth and effective transition for children and young people between services and key life stages, in particular transition into school, secondary school and adulthood

| Outcome | Action No | What we need to do | CIW Recommendation | Lead | Timescale | Status |
|--|-----------|---|--------------------|-----------------------------|----------------|--|
| <p>Medium-term</p> <p>Further strengthen Family Group Conference (FGC) and asset-based, solutions-focused approaches to practice within social care teams.</p> | D1 | Commission a pilot edge of care service, a Family Group Conferencing (FGC) Service and build capacity within IFST services. | | Head of Children's Services | May 2018 | <p><i>In Progress</i></p> <ul style="list-style-type: none"> • Pilot Edge of Care and FGC service commissioned through Action for Children. • Referral pathway agreed and implemented. • Additional capacity added to IFST on a fixed-term basis. • FGC training scheduled for staff. • Edge of Care Pilot Service updates provided to SMT. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Develop a system whereby all relevant children entering the system have an opportunity to benefit from a FGC. (March 2018) • Analyse public law outline cases to determine demand. (March 2018) • Evaluate pilot service. (April 2018) • Evaluate impact of additional capacity in IFST (April 2018) • Develop Family Support commissioning strategy. (May 2018) • Complete options appraisal for potential delivery vehicles (in house/outsourced/strategic partner). (May 2018) |
| <p>Medium-term</p> <p>Provide early help and support</p> | D2 | Develop prevention and early help capacity within the service to prevent escalation of need for those | | Area Manager North | September 2018 | <p><i>Planned</i></p> <p><u>Next key steps</u></p> <ul style="list-style-type: none"> • Develop capacity for early help for those in need of care and support (i.e. additional staffing, lower caseloads to allow time for direct work with families). (June 2018) |

| | | | | | | |
|----|---|--------|--|----------------|--|--|
| | children and young people in need of care and support | | | | | <ul style="list-style-type: none"> • Ensure social workers are aware of the range of services available across all sectors and agencies to support delivery of the care and support plan. (July 2018) • Provide information on referral processes to support services. (July 2018) • Identify and deliver any training on specific interventions. (Ongoing) |
| D3 | Publish the requirements for PPD and set out how PPD will meet the requirements to deliver IAA. | Rec 10 | Area Manager (North) / CYPP Senior Manager | April 2018 | | <ul style="list-style-type: none"> • See B17 |
| D4 | Embed the TAF model for early help within PPD | Rec 10 | Area Manager (North) / CYPP Senior Manager | September 2018 | | <ul style="list-style-type: none"> • See B19 |
| D5 | Develop PPD and FIS outreach capacity into communities | Rec 10 | Area Manager (North) / CYPP Senior Manager | September 2018 | | <p><i>In Progress</i></p> <ul style="list-style-type: none"> • Case for funding PPD/FIS Outreach post made in staffing review – awaiting confirmation of funding. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Appoint PPD/FIS Outreach workers. (April 2018) • Commence delivery of outreach programme. (April 2018) • Evaluate impact of outreach. (September 2018) • Improve attendance at Children and Families Network events with PAVO. (April 2018) |
| D6 | Promote the use of PPD, info engine and Dewis | Rec 10 | Area Manager (North) / CYPP | April 2018 | | <i>Planned</i> |

| | | | | | | |
|---|----|--|--------|--|----------------|---|
| | | with social workers and other practitioners | | Senior Manager | | <u>Key next steps</u> <ul style="list-style-type: none"> Revisit PPD Communications Plan and refresh (March 2018) Run session with OMT to explore FIS, Info Engine and Dewis. (March 2018) Team managers to cascade knowledge and run session within staff teams. (April 2018) |
| Longer term Reduce unnecessary statutory involvement in families | D7 | Develop and implement a multi-agency early help offer for children, young people and families, across the continuum of need. (<i>See Start Well Programme</i>) | Rec 21 | Lead Director for Children | March 2019 | <i>Well progressed</i> <ul style="list-style-type: none"> Early Help model and proposal drafted and shared with CYPP and Improvement Board. Early Help Service Specifications under development. Alignment of Early Help/Child Poverty programmes in preparation for integrated commissioning strategy – new cross programme working groups established to align and maximise resources. <u>Key next steps</u> <ul style="list-style-type: none"> Run Early Help testing workshops with Improvement Board and CYPP (January/February 2018) Undertake whole pathway review and redesign. (March 2018) Agree Early Help Strategy. (March 2018) Implement communication plan with key staff and stakeholders. (April 2018) Develop and deliver implementation plan and commission new services. (March 2019) |
| | D8 | Establish the Integrated Disability Service (IDS) to include co-located multi agency teams and single | New | Head of Service/ Head of Women and Children's health | September 2018 | <i>Well Progressed</i> <ul style="list-style-type: none"> Integrated processes and pathways tested. Integrated multi agency training and development delivered. Service development costs identified and resources secured. IDS staffing structure and pathway developed. |

| | | | | | | |
|--|-----|--|-----|--|---------------|--|
| | | management structure | | | | <ul style="list-style-type: none"> • Service user feedback obtained. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Sign off of final staffing structure and pathway. (May 2018) • Agree implementation plan. (June 2018) • Deliver plan. (September 2018) • Review the provision of support services across all relevant agencies, (December 2018) |
| | D9 | Commission an integrated Family Support Service, including support for those families at the edge of care. | New | Head of Childrens Services / CYPP Senior Manager | March 2019 | <p><i>Well Progressed</i></p> <ul style="list-style-type: none"> • Multi-agency engagement in developing specifications for family support services. • Engagement with Youth Forum and service users and their families on service design. • Edge of Care Service piloted with Action for Children. • Scoping exercise undertaken to identify opportunities for strategic alignment of grants, programmes and services. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Establish Family Support workstream under CYPP. (March 2018) • Test and finalise service specifications. (April 2018) • Evaluate pilot service. (June 2018) • Complete options appraisal on delivery models. (September 2018) • Agree preferred delivery model. (November 2018) • Implement delivery model – develop/procure/strategic partnership. (March 2019) |
| | D10 | Commission an integrated Youth Support Service | New | Lead director for Children / | December 2018 | <i>In Progress</i> |

| | | | | | | |
|-----|---|-----|--|---------------------|--|--|
| | | | | CYPP Senior Manager | | <ul style="list-style-type: none"> Review of Youth Intervention Services undertaken in 2016/17. CAMHS Review identified opportunities for alignment of key staff and services within an integrated model. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Scoping paper to be considered by CYPP. (March 2018) Youth Support Service workstream to be established. (March 2018) Co-produce and test service specification with young people. (May 2018) Agree final service specification. (June 2018) Develop new integrated service – management of change process to be enacted. (December 2018) |
| D11 | Develop a Multi-Agency Early Help Hub within Powys People Direct (PPD). | New | Area Manager North / CYPP Manager | March 2020 | <p><i>Planned</i></p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Explore existing models of early help hubs - e.g. Flintshire. (May 2018) Scope and design an early help hub for Powys (September 2018) Develop resourcing and implementation strategy. (March 2019) Agree final model. (March 2019) Pilot Early Help Hub (April - October 2019) Evaluate pilot and implement lessons learned. (March 2020) Fully implement (April 2020) | |
| D12 | Commission an integrated response to supporting good emotional/mental health and well-being including a | New | CYPP Senior Manager / Women and Children's Service manager, PTHB | December 2018 | <p><i>In Progress</i></p> <ul style="list-style-type: none"> Engagement programme delivered in Phase 1 of CAMHS Review with wide range of multi-agency stakeholders. Agreement from PTHB to implement recommendations in CAMHS Review report. | |

| | | | | | | |
|---|-----|---|-----|----------------------------|------------|---|
| | | CAMHS review and implementation of the Together for Children and Young People strategy. (T4CYP) | | | | <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Draft service design and specification. (June 2018) • Consult with key stakeholders, including children and families, in relation to proposed service design. (September 2018) • Develop implementation plan. (November 2018) • Implement plan. (December 2018) |
| <p>Longer-term</p> <p>Integrated, co-located, easy access early help services, universal and targeted</p> | D13 | Establish multi-agency, co-located locality teams, where appropriate - see Start Well programme. | New | Lead Director for Children | March 2020 | <p><i>In Progress</i></p> <ul style="list-style-type: none"> • Options Appraisal and Outline model agreed by CYPP. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • New CYPP membership to review the model previously agreed. (June 2018) • Develop implementation plan. (October 2018) • Implement plan. (November 2018 – March 2020) |
| | D14 | Pilot the Children's First Model in Newtown to develop and test a localised, multi-agency response to communities with high levels of need. | New | Lead Director for Children | March 2020 | <p><i>In Progress</i></p> <ul style="list-style-type: none"> • Funding secured from ICF for phase one of project. • Project co-ordinator appointed. • Initial engagement activity undertaken. • Local community consultation events planned using art as the medium. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Establish local steering group, including terms of reference. (May 2018) • Progress report to be submitted to CYPP. (March 2018) • Undertake more local engagement activity. (May 2018) |

| | | | | | | |
|--|-----|---|--------|----------------------|----------------|--|
| | | | | | | <ul style="list-style-type: none"> • Develop phase two proposal and implementation plan. (March 2018) • Secure ICF funding for Phase 2. (April 2018) • Work with partners to identify anonymously top 25 most complex families from the area. (July 2018) • Undertake listening and learning activity with identified complex families. (September 2018) • Develop multi-agency protocols and planning for meeting needs of identified families. (September 2018) |
| <p>Longer-term</p> <p>Young People in care have planned effective transitions out of care and are supported to progress into adulthood</p> | D15 | Establish and implement clear, planned, effective multi agency pathways for care leavers | Rec 13 | Senior Manager South | December 2018 | <p><i>In Progress</i></p> <ul style="list-style-type: none"> • Guidance ready in draft form. • Leaving care policy in draft form. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Task workshop to be held to develop business processes. (March 2018) • Engagement with young people |
| | D16 | Consider young people's views gathered through the Child A Practice Review and address their concerns and recommendations | Rec 28 | Safeguarding Manager | September 2018 | <p><i>In Progress</i></p> <ul style="list-style-type: none"> • Feedback from young people on experiences of leaving care gathered from Child A Child Practice Review. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Co-design and test new policy and guidance with young people/care leavers. (May – July 2018) • Ensure that all Pathway Plans for young people leaving care address transitions issues in a timely manner to ensure appropriate links can be made across services and partner agencies. (September 2108) |
| | D17 | Provide work opportunities and | | Safeguarding Manager | July 2018 | <i>In Progress</i> |

| | | | | | | |
|--|-----|---|--------|--|---------------|--|
| | | training for care leavers within the Council and its partners | | | | <ul style="list-style-type: none"> Care leaver apprenticeships discussed at corporate parenting group. Email sent out to encourage different parts of the authority and partner commissioned services asking them to offer work and training opportunities. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Follow up with partner commissioned services to secure apprenticeship placements. (May 2018) |
| | D18 | Establish a clear and specific 16+ support service offer for young people needing or at risk of needing care and support | Rec 18 | Area Manager North/Youth Service Manager/Senior Manager CYPP | December 2018 | <p><i>Planned</i></p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Consider feedback gathered from young people as part of the recent Child Practice Review. (March 2018) Develop specific 16+ care and support offer and pilot. (July 2018) Evaluate pilot. (September 2018) Align service offer within Integrated Youth Support Service (see D15). (October 2018) |
| Longer-term Commission the right range of placements which provide positive experiences for children and young people who are looked after or leaving care. | D19 | Work with a range of partners to develop and implement a new placements and accommodation commissioning strategy (See start well programme) | New | Head of Children's Services Senior Manager Resources and Placements CYPP Manager | March 2020 | <p><i>Planned</i></p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Establish multi-agency accommodation and placement workstream under CYPP. (June 2018) Undertake situational analysis of current placement/accommodation needs and identify gaps/shortfalls. (September 2018) Research range of models/approaches tested elsewhere (October 2018) Develop revised Commissioning Strategy. (December 2018) |
| Medium-term | D20 | Review and implement a | Rec12 | Senior Manager | February 2018 | <i>In Progress</i> |

| | | | | | | |
|--|-----|---|--------|---------------------------------------|---------------|---|
| Consistent support, training and guidance to foster carers to improve the quality and availability of placements | | recruitment and retention strategy for Foster Carers. | | Resources & Placements | | <ul style="list-style-type: none"> Review is completed. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Work with the communications team to implement draft marketing strategy. (February 2018) |
| | D21 | Meet the needs of Foster Carers so that they feel supported, respected and valued as part of our wider workforce and implement recommendations from foster care review for service improvement. | Rec 12 | Senior Manager Resources & Placements | July 2018 | <p><i>In Progress</i></p> <ul style="list-style-type: none"> Listening and learning activity completed with Foster Carers and report produced. Budget secured to increase capacity of Fostering team. Foster carers being invited and attending roadshow and workshops. Quarterly support groups for foster carers being held. Recommendations from the review taken to OMT. <p><u>Key next steps</u></p> <ul style="list-style-type: none"> Review support packages to carers to take on recommendations from foster carer review. (March 2018) Allow foster carers access to the Council's email system to increase communication with social workers. (July 2018) Develop peer support for foster carers. Phase one completed and draft paper signed off by SMT. Phase 2 involves implementing support and is ongoing. |
| | D22 | Develop and implement an intensive support service for carers with children with more complex needs. | Rec 12 | Senior Manager Resources & Placements | December 2018 | <p><i>In Progress</i></p> <ul style="list-style-type: none"> Paper Presented to Improvement board and corporate parenting Group Development proposal completed. <p><u>Key next steps</u></p> |

| | | | | | | |
|--|-----|---|-----|---------------------------------------|---------------|---|
| | | | | | | <ul style="list-style-type: none"> • Visit other authorities with intensive and/or therapeutic fostering models. (May 2018) • Test proposals with foster carers and gather views. (May 2018) • Implement agreed model. (December 2018) |
| Jointly commission accommodation options for young people between the ages of 16 and 21 years | D23 | Commission more independent or semi-independent living options such as 'when I'm ready' placements, supported housing, 'training flats' and supported lodgings for young people between the ages of 16 and 21 to support them at different levels of independence and to make a good transition into adulthood. | New | Senior Manager Resources & Placements | December 2018 | <p><i>Planned</i></p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Visit other local authorities with similar needs and demography. (May 2018) • Work through the CYPP to review the current range of options. (June 2018) • Test proposals with young people (July 2018) • Produce a strategy for putting in place any additional provision required. (October 2018) |
| Ensuring professional involvement with children who are looked after or care leavers is purposeful and effective. | | Ensure that the roles and responsibilities of corporate parents, foster carers, Social Workers, IROs, teachers, specialist Looked After Children education and | New | Head of Children's Services | December 2018 | <p><i>Planned</i></p> <p><u>Key next steps</u></p> <ul style="list-style-type: none"> • Through the CYPP, examine the protocols in place for ensuring that a corporate parenting approach is in place across public services and the third sector (July 2018) • Consult with children and young people about what most helps them. (August 2018) • Identify gaps in services and support. (October 2018) |

| | | | | | | |
|--|--|--|--|--|--|---|
| | | health professionals, advocates and guardians are clear to ensure they feed into the planning and reviewing processes for Looked After Children. | | | | <ul style="list-style-type: none">• Revise any protocols that are not fit-for-purpose. (December 2108).• Plan for dealing with shortfalls. (December 2018) |
|--|--|--|--|--|--|---|