

Children and Families Directorate Delivery Plans 2016/17

Delivery Plan 1 - Financial Plan

Financial outturn will be monitored by the directorate management team, including variances against the objective summary included in the Directorate Budget and Business Planning Report.

Subjective Summary

Subjective Heading	2015-2016 Budget £,000	2016-2017 Budget £,000
Expenditure:		
Employees	91,912	89,928
Running Expenses	698,537	704,890
Central Recharges received		
Depreciation and Impairment Losses		
Contribution to reserves	874	40
Gross Operating Expenditure	791,323	794,858
Less:		
Central Charges Issued		
Other Internal sales		
Net Operating Expenditure	791,323	794,858
Income:		
Government Grants	(466,991)	(492,828)
Contributions from Reserves	(19,078)	(10,597)
Other Grants Reimbursements and Contributions	(16,897)	(16,897)
Capital Financing Related Income		
Customer Client Receipts	(26,433)	(26,433)
Other Income	(119)	(119)
Total Net Budget	261,805	247,984

Delivery Plan 2 – Performance Plan

Performance Management – Children's								
	2013/14	2014/15	2015-16 Q1 (prov)	2015-16 Q2 (prov)				
Rate of contacts in the period (per 10,000 of the population)	3276	3201	2989	2876				
Rate of referrals received in the period (per 10,000 of the population)	1180	1148	992	976				
Rate of CAFs/EHAs completed (per 10,000 of the population)	124.2	159.5	167.3	144.7				
Percentage of referrals which are repeat referrals	31.6	30.5	34.7	33.1				
Percentage of Children and Family Assessments completed in 45 days	67.3	92.7	88.7	88.8				
Rate of Children in Need (per 10,000 of the population)	460	415	414	375				
Average social worker caseload	31.0	27.1	24.4	21.2				
Average newly qualified social worker caseload	30.8	25.0	23.4	20.5				
Rate of children subject of Child Protection Plans (per 10,000 of the population)	82.0	78.7	78.4	78.0				
Percentage of children starting a Child Protection Plan for a second or subsequent time	15.6	18.1	17.9	15.9				
Rate of Looked After Children (per 10,000 of the population)	122	113	111	111				
Number of Looked After Children	1373	1291	1273	1277				
Average time between a child entering care and moving in with its adoptive family, for children adopted in the period (days)	693	647	643	622				
Average time between receiving court authority to place a child and a match to adoptive family, for children adopted in the period (days)	227	269	274	261				
Children who wait less than the DfE threshold between entering care and moving in with their adoptive family (%)	49.0	48.5	37.1	38.8				
Family Justice Review - Percentage of proceedings completed within 26 weeks	54.5	55.3	32.6	38.1				
EYFS - % Achieving a Good level of development (Annual Data)	52.8	60.9						
Key Stage 2 - % Level 4+ Reading, Writing and Maths (Annual Data)	79	80						
Key Stage 4 - % 5+A*-C including English & Maths (Annual Data)	51.4	46.0						
Primary School Absence (%) (Annual Data)	3.8	3.9						
Secondary School Absence (%) (Annual Data)	5.1	5.0		_				

Performance Management – Adul	ts			
National Adult Social Care Outcome Framework Measures (refs) The National Measures reflect a small element of the Adults' PMF which is being updated in 2016		2014/15	2015-16 Q1	2015-16 Q2
Adults with learning disabilities in paid employment (1E)	1.8%	1.2%	1.3%	1.1%
Adults in contact with secondary mental health services in paid employment (1F)	3.6%	3.9%	5.2%	5.3%
Adults with learning disabilities who live in their own home or with their family (1G)	88.6%	86.9%	In Developn	nent
Adults in contact with secondary mental health services who live independently with or without support (1H)	61.2%	69.5%	77.4%	77.4%
Proportion of older people still at home 91 days after hospital discharge into Reablement / rehabilitation (2B(1)	66.8%	64.4%	Not yet due	Not yet due
Delayed transfers of care per 100,000 population (2C part 1)	8.00	10.2	11.6	11.3
Delayed transfers of care attributable to Social care per 100,000 population (2C part 2)	4.00	5.0	5.33	5.79
The proportion of people who use services who receive self-directed support (1C(1A))	52.98%	43.2%	43.6%	44.3%
The proportion of carers who receive self-directed support (1C(1B))		95.4%	92.6%	92.3%
The proportion of people who use services who receive direct payments (1C(2A))	24.1%	6.4%	6.5%	7.6%
The proportion of carers who receive direct payments (1C(2B))	(composite measure reported in this year)	95.4%	92.6%	92.3%
Outcomes of short term support for new clients: No long term service (NEW MEASURE 2014/15 2D)	Not Reported	73.5%	76.5%	74.9%
Long-term support needs of younger adults (18-64) met by admission to residential/nursing care per 100,000 population (UPDATED MEASURE 2A(1)_1415)	12.2	18.0	11.2	9.0
Long-term support needs of older adults (65+) met by admission to residential/nursing care per 100,000 population (UPDATED MEASURE 2A(2)_1415)	770.2	415.8	519	494

Delivery Plan 3 - Equality Overview and Action Plan

1. How does the Directorate's activity and priorities for the year(s) ahead support the promotion of equality and diversity in alignment to the 4 Equality Framework for Local Government performance areas?

Due to the nature of the Children and Families Directorate's purpose, the majority of its functions and activities are relevant to equality. Some of the Directorate's key priorities that support progress against the EFLG performance areas are outlined below:

1.1 Knowing your communities

- Adopt a strengths-based approach to customer assessments whilst extending arrangements to monitor the protected characteristics that customers identify with.
- Continue to develop our understanding of out customer base through iBase and cohort analysis
- Develop the skills of the workforce to be able to understand and respond to the aspirations and motivations of customers with protected characteristics including better capturing of equality questions (non-mandatory fields) through MiCare and upgrading to Mosaic

1.2 Leadership, partnership and organisational commitment

- Lead the development and testing of the new model of schools leadership and evaluate scope to roll out at scale; include measures to encourage schools to take responsibility for Early Help
- Work in partnership with the Manchester CCGs to realise the implementation of the One Team programme; ensure that the commissioning approach is informed by the equality data available from sources such as the JSNA
- Continue to reduce inequalities in Manchester residents' outcomes through effective partnership working arrangements, in particular those with health, schools, independent providers, other local authorities and the voluntary and community sector
- Demonstrate organisational commitment to mitigating adverse impacts on protected groups by extending current funding arrangements for 2016/17 to allow continued delivery across a range of programmes

1.3 Involving your communities

• In line with the Manchester Strategy, lead the promotion of a different relationship between public services, residents, communities and businesses, making sure that all are more involved in services and ensuring that public services do with, not to.

1.4 Responsive services and customer care

 Undertake equality analysis across all of the Directorate's business changes to ensure that service design has due regard of equality; use the developing strengths-based equality profile emerging from 1.1 where available to inform the equality analysis evidence-base

1.5 Skilled and committed workforce

- Develop the workforce to adopt new skills, approaches and behaviours to deliver strengthbased customer assessments and support customers to realise their potential using, where possible, community assets as a new form of meeting needs locally
- 2. Where will the Directorate's proposed changes and activities over this business planning period have an impact on equalities in general or specific protected characteristics? A preliminary assessment of the Directorate's proposals and the target groups that they will affect indicates that:

- 2.1 LAC Placements, Permanence and Leaving Care proposals will have a disproportionate impact on the protected characteristic of age (children and young people). The proposal will potentially deliver a positive impact, reducing the number of children in residential care.
- 2.2 **Living Longer**, **Living Better** proposals will have a disproportionate impact on the protected characteristics of age (older people) and in some cases, disability. The proposal will potentially deliver a positive impact, enabling people to remain in their own homes where achievable, safely and independently.
- 2.3 **Learning Disability Services** proposals will have a disproportionate impact on the protected characteristics of disability and in some cases, age (older people and young people). Proposal will potentially deliver positive impacts by embedding strengths-based approaches to assessments and increasing access to community-based support.
- 22.5 **Supported Accommodation** proposals will have a positive impact as residents placed in external placements will be able to live in Manchester again.
- 2.5 **Public Health** proposals and **Education and Skills (including free Travel Passes)** proposals for 2016 17 largely continue savings plans that were equality analysed in 2015 16. The Directorate will review the relevance assessments and EIAs produced for these functions in 2015 16 to understand the potential impacts of the current proposals and whether further equality analysis is required. If existing analysis does not provide sufficient insight, refreshed EIAs will be produced as required.

Initially Identified EIAs 2016 – 17:

Proposal	EIA Proposed Completion Date	Senior Mgmt Lead	Comments on initial potential impacts
LAC Placements, Permanence and Leaving Care	April 2016	Amanda Amesbuy	Impact on age (children and young people): positive impact of reducing the number of children in residential care
Living Longer, Living Better	April 2016	Kieran Barnes	Impact on age (older people) and disability: positive impact of enabling people to remain in their own homes where achievable, safely and independently
Learning Disability Services	April 2016	Lesley Hilton- Duncan	Impact on disability and age: positive impact of embedding strengths-based assessments and increased access to community-based support
Supported Accommodation	April 2016	Karen Crier	Positive impact as people on external placements will be able to live in Manchester.
Reduce free travel to schools	April 2016	Amanda Corcoran	Review of EIA completed for 2015/16

Delivery Plan 4 - Workforce Plan

Workforce Strategy

Our vision is of all Manchester people being skilled, aspirational, resilient, connected to the City's growth and therefore productive. Our vision is also of all of the city's neighbourhoods being successful places where people choose to live and where they can access a good range of services. To achieve this vision the Directorate must continue to reform public services improving outcomes with less resources. The Directorate is focused on helping people who have to rely more than most on targeted and specialist services to make the changes in their lives which will see them become more independent. The fundamental review of all services to children in GM will involve developing innovative proposals for how whole-system reform and a step-change in collaboration across all GM authorities and partners can reduce complex demand.

Through the implementation of the health and social care integration locality plan commissioning functions across the city will be brought together into a single commissioning team for health and social care, the one team model of integrated health and social care services built on 12 neighbourhood teams will be implemented, and a single Manchester hospital service will be developed. The workforce implications will be significant: staff will work in multi-agency, multi-disciplinary teams and will need to change working practices to ensure consistency, joint working and a focus on self-care and enabling independence, new organisational arrangements will be developed which may mean that some staff transfer to work in different organisations, staff will be expected to adopt new ways of working and traditional organisational and professional barriers will be broken down as new integrated ways of working arenimplemented.

Our vision is underpinned by a robust focus on :

- Doing everything we can to protect the vulnerable and to intervene earlier to prevent vulnerability
- Integrating services and focussing on the strengths in people's lives so that we help people to be as independent as possible

To do this effectively we must equip our leaders and our wider workforce to:

- Develop a new relationship between public services, residents, communities and businesses that facilitates shared decision making, accountability and voice, genuine coproduction and joint delivery of services. Do with, not to.
- Adopt an asset-based approach that recognises and builds on the strengths of individuals, families and our communities rather than focusing on the deficits
- Change their own behaviours and the behaviours of residents in ways which build independence and enable residents to be in control
- Work in a place-based approach which is integrated and sequenced, that redefines services and places individuals, families and communities at its heart
- Work effectively in multi-agency, multi-disciplinary teams
- More strongly prioritises wellbeing, prevention and early intervention
- Take an evidence led understanding of risk and impact to ensure the right intervention at the right time, and with a commitment to evaluation, tracking and monitoring of the impact on outcomes and spend

 Support the development of new investment and resourcing models, enabling collaboration with a wide range of organisations and supporting new contract arrangements which drive providers to reduce demand.

This represents a significant change in the ask of the workforce underpinned by a set of new behaviours:

- Ability to engage assertively, positively and at a "human" level
- Asset based: start from the positive with high aspirations, focus on the whole person and what is important to them rather than the presenting issue, empower with support
- Influencing without power: co-ordinating and sequencing, constructive challenge, confidence
- Creative thinking and navigation: joint creative solutions identified in partnership with residents, knowledge of practical tools/sources of information and how to use them, knowing your place and the assets within them
- Take responsibility: see something, do something, take managed risks, be self-aware, seek support when you need it

We will balance this with a continued robust focus on getting the basics of management right. Without this, we will not deliver reform. We will continue to drive improvements to social work practice and quality through our children's improvement journey. Expectations on managers to effectively manage performance, budgets and absence will continue to be high.

Workforce Priorities:

Developing Leadership Skills and Capacity

We recognise the fundamental role of leaders and managers in affecting behavioural and cultural change. The new ask of the workforce will require a different leadership approach with less of formal, top-down approaches and more back stage orchestration, influence and enabling. People change behaviours through observing behaviours in people who are credible to them. Middle managers in particular are key. Staff need to see leaders and managers at all levels "walking the talk". We will equip our workforce with the leadership skills and capacity to deliver cultural and behavioural change.

The ability to lead whole systems, integrated and collaborative programmes of reform will be fundamental to the delivery of our vision. These leadership skills will be required at all levels to ensure the vision is translated into operational reality.

The social work workforce strategy will continue to be implemented to ensure that Manchester attracts and retains the best social workers who are able to deliver high standards of social work practice and improve outcomes for children. Through our social work strategy we will roll out the knowledge and skills statements for social work leaders to ensure that we have confident, highly experienced people who can provide leadership across the whole system. Strong, assertive and effective leadership across early help and the front door arrangements will influence partners to change their behaviours to intervene earlier and more proactively,

enabling families to access the right support at the right time so that they can make positive changes, avoiding the escalation of issues to a point where statutory support is needed.

In addition, we will continue to develop leadership and management capacity to effectively manage resources (budgets, people, assets), performance and risk in line with statutory duties, council policies and expectations. We will ensure that as part of our improvement journey, managers are equipped to deliver safe and effective services, driving up practice quality, staying connected to front-line delivery and ensuring the voice of children and families influences service delivery. We will continue to strengthen leadership capacity and skills to effectively reduce levels of absence and to manage and mitigate the impact of absence on the wider workforce.

Reward and Recognition/Health and Well-being

There will be a strong focus on communicating and engaging with our workforce so that they understand what our vision, aims and objectives mean for them and what will be different, to ensure staff have the opportunity to shape and influence our strategies so that they own them and to disseminate stories that show people what different looks like, celebrate success and share learning. We will equip staff to have strengths-based conversations focusing on the positive and will empower people to work creatively to find solutions.

We will be proactive and assertive in our management of attendance ensuring staff are supported and enabled back to work in a timely way, attending to the impact of absence on the motivation and well-being of the wider workforce and being proactive in the early identification of issues impacting on workforce health and well-being.

Planning for the Future Workforce

This strategy represents a one year phase of a broader five year strategy to deliver workforce reform. New models and organisational arrangements will present new opportunities, for example, investment in programmes of behaviour change aimed at altering the mindset of individual practitioners which will fundamentally change the way services are delivered and outcomes delivered.

As the city continues to change, national policy drivers are announced and local priorities are redefined, we will be proactive in reviewing the type and volume of capacity to ensure that priorities are effectively resourced, for example, the very significant growth in pupil numbers, school numbers and size and the increasing complexity and expectations of providing leadership and challenge to a diverse system has informed the requirement to increase capacity within Education and Skills functions and the move to an asset-based approach will require different types of roles such as community navigators and connectors in order to maximise the benefit of community assets.

In addition, it is envisaged that there will be opportunities to increase the number and range of apprentices and graduate trainees and that new enhanced career pathways will emerge that give staff the opportunity to work across Greater Manchester and across public services and progress through new routes that cross organisational, and where appropriate, professional boundaries. For example, through the integration of health and social care services, staff will

- commercial and collaboration skills which drive a different relationship with providers

have opportunities to cross-over traditional professional barriers as new roles and career pathways emerge.

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We will be proactive in understanding the behaviours, skills and ways of working that will be required to deliver new ways of working so that as implementation plans are developed, appropriate workforce interventions and development programmes are commissioned to enable people to be ready to work within them.

Ongoing implementation of our social work strategy will ensure that we are proactive in attracting and retaining the best social workers to work in the city. The strategy is being refreshed to take account of the improvement journey to date, regional teaching partnership developments to ensure that social work training is updated so that new social workers are equipped with the right skills to prosper in the role and the roll out of the new national developments for social work including the knowledge and skills statements and the expansion of Frontline and Step Up programmes. The decision to implement the Signs of Safety social work model will be significant in equipping staff with the skills and competencies to confidently and assertively practice social work to levels of excellence. This long term strategy will be supported by a new workforce plan that sets out the annual professional development offer for social workers that underpins their career pathway.

The reach of the workforce plan must be broader than staff employed within the Council with activity to influence the skills and competencies of staff working in partner organisations. For example, strengths based conversation training will be rolled out across partner organisations to equip key workers and others with the skills to effectively carry out early help assessments.

New Ways of Working

The change in the ask of the workforce will require new ways of working, new skills, new behaviours. As set out above, we are clear what these changes will be at a strategic level and as the different component parts of the budget and business plan are implemented, further work will be needed to understand how these changes translate operationally for staff so that together we understand what we mean by different, what we are being asked to do differently and what new skills, tools and techniques we will need to develop and utilise.

Some of the changes we already know that we will need to be equipped to deliver include:

- assessments which are holistic and strengths-based
- key working
- community connectors that enable support front line staff to connect service users with support and services in their community
- work in multi-agency, multi-disciplinary teams to jointly design and deliver services
- focus on people in the context of their family, peer network and neighbourhood
- intervene earlier and more assertively
- enabling and empowering others to make positive changes
- adopting the Signs of Safety social work model of working

Delivery Plan 5 – Risk Register

ID	Risk Description	Key Controls and Sources of Assurance	L		Risk Score	Further Actions	Risk Owner
1	Education services are subject to an Ofsted inspection and are assessed as "requiring improvement" or "inadequate", resulting in serious reputational impact.	Schools Forum Engagement Manchester Schools Alliance support LA Quality Reviews and action planning Ofsted reporting in schools	3	3	9: Medium	Increase capacity of Senior Schools' QA Officers Ensure active participation in the Greater Manchester Education Partnership Strengthen Manchester Schools' Improvement Partnership Formalise the School to School Partnerships Develop a strategic relationship with the Regional Schools' Commissioner	Director of Education and Skills
2	Place planning proves to be ineffective resulting in insufficient school places to meet the needs of Manchester children 2016/17 and onwards.	Reports to Young People and Scrutiny Committee	4	3	12: Medium	Develop a strategic relationship with the Regional Schools' Commissioner	Director of Education and Skills
3	Education Green Paper results in imposition of new strategic priorities to be implemented at pace. There is a requirement for Councils' to "plan for the unknown" and unanticipated and untested change processes such as enforced academisation.	Reports to Young People and Scrutiny Committee	3	3	9: Medium	Engagement underway with schools and partners to respond to likely themes. Detailed planning dependent on the content of the Green Paper. Develop strategic partnerships with schools. Influence schools to move towards formal partnership arrangements.	Director of Education and Skills
4	Changes to the Education Support Grant and schools funding formula reduces the overall resources available to the Local Authority and Manchester schools, with impacts on standards in City wide education and learning.	Financial modelling in budget planning Reports to Young People and Scrutiny Committee Reports to Finance Committee	2	4	8: Low		Head of C&F Finance
5	Services commissioned through Public Health Grant are insufficient in terms of capacity, volume and quality as a result of cuts to funding up to 2020. This impacts on the ability to achieve public health outcomes and KPIs in the Manchester Strategy and the Joint Health and Wellbeing Strategy.	Reports to Health and Wellbeing Board Reports to Health Scrutiny Committee	4	3	12: Medium	Joint commissioning and investment in prevention programme and public health services with Manchester Clinical Commissioning Groups and other GM Local Authorities.	Director of Public Health
6	Inability to deliver an agreed homelessness strategy results in poor outcomes for homeless persons, reputational damage, legal challenge and additional costs to the public purse.	Oversight by Scrutiny Committee Members and external stakeholders engaged in the Rough Sleepers Strategy development	3	4	12: Medium	Development of Single Point of Access Severe weather emergency provision Refresh of homelessness strategy	Director of Adult Services

ID	Risk Description	Key Controls and Sources of Assurance	L		Risk Score	Further Actions	Risk Owner
7	Failure to implement outcomes of the peer review and the TASC Programme is viewed as being ineffective in delivering improvements in adult social care.	Reports to Health and Wellbeing Board Reports to Health Scrutiny Committee	4	3	12: Medium	Big Change Campaign Development and Monitoring of Action Plan for Peer Review through Transforming Adult Social Care Programme. Performance Framework	Director of Adult Services
8	Serious injury or death of a vulnerable adult, or other adult for whom the Council has a statutory responsibility, is deemed to be the result of systemic failure in governance, systems and processes so the Council is subject to reputational damage, sustained scrutiny by inspection agencies and legal challenge (CRR).	Adults Safeguarding Board Designated Lead Officer for safeguarding Reports to Health and Wellbeing Board Reports to Health Scrutiny Committee	4	2	8: Medium	Revised Safeguarding Processes Training QA Framework Guidance Adult Safeguarding into MASH	Director of Adult Services
9	Serious injury or death of a child is deemed to be the result of systemic failure in governance, systems and processes so the Council is subject to reputational damage, sustained scrutiny by inspection agencies and legal challenge (CRR).	Childrens Safeguarding Board Designated lead officer for safeguarding Multi Agency Safeguarding Hub Management and QA reviews of casework Improvement Board oversight of all social care improvement activity Reports to Young People and Scrutiny Committee	4	3	12: Medium	New Management Team develop robust performance and governance MSCB learning and development QA used to share practice learning Training on S47 and supervision	Director of Childrens' Services
10	Whilst senior management accountabilities for safeguarding adults and children are clear in terms of statutory responsibilities, this is less clear at operational level resulting impacting on the efficiency and effectiveness of safeguarding arrangements.		3	2	6: Low	High level training on S47 and supervision is critical to safeguarding New case recording system to review all processes and provide clarity on statutory responsibilities Improved independent checks on practice standards	Directors of Adults and Childrens' Services
11	The Children's Improvement Programme does not deliver the required step change in governance and performance to demonstrate sustained progress to address concerns raised from the inadequate Ofsted judgment. This results in further reputational damage, with added scrutiny and potential for intervention (CRR).	£14m investment 2015-17 to invest in new working arrangements, evidence based practice and capacity overseen by Investment Board. Improvement Board oversight of all social care improvement activity has independent chair and multi agency engagement. Reports to Young People and Scrutiny Committee Scrutiny provide oversight of social care improvement activity Signs of Safety Implementation Programme	4	4	16: High	Delivery of Signs of Safety Implementation Programme 2016 Support of Leeds Improvement Partners New and experienced Management Team Fit for purpose social work remodel to be utilised	Director of Childrens' Services
12	Effective H&SC integration is not delivered within expected timescales, leading to continued pressure on acute NHS services and inability to deliver outcomes through community based health	Delivery of Manchester Locality Plan Reports to Health and Wellbeing Board Reports to Health Scrutiny Committee	4	4	16: High	Single contract and specification for community services Single hospital system Pooled Budget	Director of Adult Services

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ID	Risk Description	Key Controls and Sources of Assurance	L		Risk Score	Further Actions	Risk Owner
	services (CRR).					Revised Governance	
13	Commissioned mental health services are not of sufficient rigour or quality to achieve City wide targets for safeguarding and health improvement (CRR).	Reports to Health and Wellbeing Board Reports to Health Scrutiny Committee	4	3	12: Medium	Mental Health Improvement programme Regular Contract Meetings TDA Process Underway Locality Plan	Director of Adult Services
14	Target levels of education and learning across schools are not achieved leading to loss of resident confidence and poorer outcomes for young people (CRR).	Reports to Young People and Scrutiny Committee	3	3	9: Medium	Increase capacity of Senior Schools' QA Officers Ensure active participation in the Greater Manchester Education Partnership Engage in Manchester Schools' Improvement Partnership Formalise the Schools' Structural Partnership Formalise the School to School Partnership Develop a strategic relationship with the Regional Schools' Commissioner	Director of Education and Skills
15	Connections between school, FE and HE not suitably aligned to national, regional and local skills demands (CRR).	Economy Scrutiny Committee reporting Work and Skills Board Regular reporting on numbers and trends in NEETS Risk also captured and managed within Growth and Neighbourhoods DMT	3	3	9: Medium	Strengthen QA focus on post 16 performance in schools. Strengthen datasets, tracking pathways and destinations CIAG offer to be strengthened using newly available guidance.	Director of Education and Skills
16	Early Help Strategy does not sufficiently reduce demand at the front door for statutory services. Demand continues to increase due to impact of welfare reform and required changes in partners behaviour reflecting new levels of need is not embedded.	Improvement Board is tracking demand and impact of early help activity Children's Board is tracking early help assessments and early help dashboard.	4	4	High	Joint MSCB/Early Help Event – 20 th Jan 2016 Review of the effectiveness of the early help delivery model to be undertaken - overseen by Director of Adults.	Director of Children's Services
17	Early Years work programmes fail to deliver the required improvements in school readiness amongst children at the point of entry.	Joint governance arrangements with partners Children's Board Scrutiny		3	9: Medium	Develop secure processes for gathering of impact data with Public Health and Partners Address One System backlogs with ICT	Director of Education and Skills
18	Youth and Play Trust does not deliver the required return on investment and an enhanced youth and play offer	Member Scrutiny	2	3	6: Medium	Present overall project to Children's Board Attract a balanced cohort of Trustees including the private sector	Director of Education and Skills