

## OFSTED IMPROVEMENT PLAN

| Improvement Number | Theme              | Improvement   | Actions Required - to include milestones   | Evidence | Overall improvement outcome completion date | RAG | Lead         | PI / Afl | Progress   | Evidence | Specific task completion date | RAG |
|--------------------|--------------------|---|--|----------|---|-----|--------------|----------|--|----------|-------------------------------|-----|
| A1                 | Improving Practice | Review the number of cases held by all staff, including newly qualified staff, to ensure that caseloads are manageable and that staff have sufficient time to plan and action their work. Ensure that there is a sufficient number of suitably experienced and qualified staff to deal effectively with current demand. | 1. Review the current recording and monitoring arrangements of caseloads for effectiveness   |          |   |     | Karen Dolton |          |  |          |                               |     |
|                    |                    |   | 2. Task and finish Group to develop staff caseload reduction<br>- Strategy<br>- Plan   |          |   | G   |              |          | Membership identified. First meeting early November  | 4 .01.15 | G                             |     |
|                    |                    |   | 3. Referral analysis work. Reasons for high referrals. Partners understanding an application of thresholds. Impact of existing earlier interventions and identification of gaps in interventions |          |   | G   |              |          | Referral work partially completed to inform early help developments and address gaps in services.. Multi agency " deep dive" planned.                |          | G                             |     |
|                    |                    |   | 4. Analyse alongside workforce data  |          |   | G   |              |          | Work completed on workforce data and being used to inform new social work model. Business case to increase capacity of team managers being developed |          | G                             |     |
|                    |                    |   | 5. Analysis of impact of reduced caseloads on universal services and outcomes for children<br>Improved support, increased capacity and development of the skills and behaviours of staff         |          |   | G   |              |          | Work will be linked to task and finish groups  |          | G                             |     |

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|    |                    |   | support children safely and appropriately moving out of LAC                                      |  |  |   |              |  |  |                            |   |
| A2 | Improving Practice | Ensure robust management oversight on the single assessment process, at both first tier and senior management level, to ensure that children and families are seen and risks evaluated in a timescale to meet need. Ensure timeliness in completing assessments by reviewing at set points to ensure that children are seen promptly, and that all work is recorded to an appropriate standard. | 1. Implement new process for improved management oversight                                       |  |  | G | Karen Dolton | Performance clinics being set up . Terms of Reference being agreed by 24.10.14 . Performance meetings booked until end of Dec 14 .Business cases being developed to propose additional investment in team managers, performance and case management. Weekly reporting in place   |  | 24.12.14                   | G |
|    |                    |   | 2. Dataset of performance targets with clear and realistic targets and timescales                |  |  |   |              | Data set established   |  | 31.10.14                   | G |
|    |                    |   | 3. Data to include<br>-If child seen and when<br>-Anaylsis of quality work<br>- Actions Required |  |  | G |              | spreadsheets set up in each locality to collect information on children seen within 7 days . Assessments out of timescales and raasons.To be linked to performance clinics.  |  | 31.10.14                   | G |
|    |                    |   | 4. Identify support and development for managers   |  |  | G |              | A spec has been written for seeking proposals from organisations who can work alongside the leadership team to carry out an in depth diagnostic of need and design and co-deliver a comprehensive programme to managers - to improvemanagement oversight and grip of social work practice, including compliance, at all levels<br>- individual accountability, responsibility and appropriate escalation |  | to procurement by 24.10.14 | G |



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|    |  |   | programme   |   |          |   |             |    |  |          |   |
|    |  |   | 3. Dataset of performance targets with clear and realistic targets and timescales   |   |          |   |             |    |  |          |   |
|    |  |   | 4. Monitor impact via the quality assurance programme   |   |          |   |             |    |  |          |   |
|    |  |   | 5. IRO/ Conference Chair to routinely record data   |   |          |   |             |    |  |          |   |
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| A5 | Improving Services & Support for Looked after children | Ensure that return interviews for children who go missing from care are conducted by an independent person in accordance with statutory guidance. | 1. Commission Services to meet the statutory requirements of children and young people who go missing from home and care.( independent return interviews)             | Service in place. All CYP MFH/C offered interview.Relevant data analysed and acted on to reduce risk - individual CYP and city wide themes and trends to improve strategic response | 31.03.15 | G | June Ackers | PI | Service for MFH in place from 03.11.14. Need agreement with GMP on referral pathways | 03.11.14 | G |
|    |  |   | 2. Dataset of performance targets with clear and realistic targets and timescales   | Set of KPI's - targets met  |          | G |             |    | To be agreed w/c 03.11   | 07.11.14 | G |
|    |  |   | 3. Dedicated Social Worker for children missing from care and home  | Improved communication and partnership working to reduce risks to individual CYP and improved strategic response  | 31.12.14 | G |             |    | Funding agreed. Recruitment pending  | 31.12.14 | G |
|    |  |   | 4. With GMP commission. an independent multi agency review of CSE arrangements including links with missing from home and care and consultation / report back to MSCB | implement and evaluate impact of recommendations. MSCB to QA  | 30.06.15 | G |             |    | Sheila Taylor leading independent review of CSE. Report January 2015                 | 31.01.15 | G |

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|    |   |   | 5. Return interviews to be held for all children who are missing from home or care   | As 1 | 31.03.15 | G |                 | Arrangements in place but not fully embedded. Issues re data. Evaluation of services for MFH to inform future commission  |  |          | G |
| A6 | Improving Performance information and quality assurance | Strengthen the quality assurance process for reports to the adoption panel and the role of the adoption panel in quality assurance. | 1. Analysis of the weaknesses in the current arrangements  |      |          | G |                 | Meeting with adoption panel. Request for key quality issues to inform a communication to staff. Criteria for feedback forms to be developed.  |  | 20.10.14 | G |
|    |   |   | 2. Establish and implement a robust QA process within Children and Families for reports submitted to the adoption panel  |      |          | G |                 | Agreed process with Panel Chair. Joint communication from Karen Dolton and Russell Pilling  |  |          | G |
|    |   |   | 3. Establish and implement a robust process that clearly articulates the role of adoption panel in the quality assurance of reports. The process will maintain the independence of panel and ensures full compliance with panels QA responsibilities |      |          | G | Russell Pilling | Agreement of pathway for issues/learning to be raised with Head of Safeguarding QA to be put in place w/b 20.10.14<br>Log of issues/learning to be maintained by Head of Safeguarding QA in order to track impact.<br>ADM and panel adviser will also track individual case feedback provided by the Adoption panel to social workers, to start w/b 20.10.14..<br>The fostering and adoption steering group will also be an important forum to track QA issues and the responses we have received to issues raised. This will meet bi monthly, track progress and inform the performance report to PIB<br>Issues/learning log and impact to be reported to PIB on a quarterly |  |          | G |

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|    |                    |  |   |  |  |   |              | basis. First report to be completed November 2014                                      |  |          |   |
|    |                    |  | 4. Evaluation of impact on quality of reports and impact on delay   |  |  | G |              | PIB on quaterly basis . First report Nov 14  |  | Nov-14   | G |
|    |                    | Promote the importance of stable relationships for children and young people with their social workers | 1. Provide a set of tools for social workers to use to help build up relationships with children and young people.  |  |  | G |              | work progressing in developing social work model. Benchmarking and CBA to be completed |  | 30.10.14 | G |
|    |                    |  | 2. PM and QA framework to include data on changes of social worker including escalation triggers  |  |  |   |              |  |  |          |   |
|    |                    |  | 3. Improve workforce stability – acceleration of workforce strategy   |  |  |   |              |  |  |          |   |
| B1 | Improving Practice |  | 4. Reduce caseloads and stabilise workforce to improve continuity of Social Worker for Children and Young People and increase amount of quality time between Children and their Social Worker |  |  |   | Karen Dolton |  |  |          |   |
|    |                    |  | 5. Placement opportunities for trainees in the scaled up CiN service  |  |  |   |              |  |  |          |   |
|    |                    |  | 6. Evaluation of overall effectiveness of the impact of the workforce strategy to include review of learning from Grow your own strategy and collaboration with frontline                     |  |  |   |              |  |  |          |   |

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| B2 | Improving Practice                                     | Ensure that the quality of assessment and report writing and an understanding of the importance of accurate and timely recording is understood across the workforce, to ensure that decision making is based on all available information | 1. Review and revise <ul style="list-style-type: none"> <li>• Procedures</li> <li>• Practice Guidance</li> <li>• Standards</li> <li>• Training</li> </ul>   |  |  |   | Karen Dolton |   |                                      |          |   |
|    |  |   | 2. Deliver a comprehensive communications, support and training programme   |  |  |   |              |   |                                      |          |   |
|    |  |   | 3. Dataset of performance targets with clear and realistic targets and timescales   |  |  |   |              |   |                                      |          |   |
|    |  |   | 4. Monitor impact via the quality assurance programme   |  |  |   |              |   |                                      |          |   |
| B3 | Improving Services & Support for Looked after children | Prioritise the planning for young people needing transition planning to adult services, including children with complex needs, to ensure that it is carried out in a timescale that meets the needs of the young people and their carers  | 1. Accelerate the existing project on transition planning   |  |  |   | Karen Dolton |   |                                      |          |   |
|    |  |   | 2. Ensure the project incorporates the findings from the inspection   |  |  |   |              |   |                                      |          |   |
|    |  |   | 3. The outputs from the project include robust arrangements for <ul style="list-style-type: none"> <li>• referral pathways</li> <li>• timeliness</li> <li>• Assessment of need</li> <li>• Effective working between children's and adults services</li> <li>• planning</li> </ul> |  |  |   |              |   |                                      |          |   |
|    |  |   | 4. Dataset of performance targets with clear and realistic targets and timescales   |  |  |   |              |   |                                      |          |   |
|    |  |   | 5. Monitor impact via the quality assurance programme   |  |  |   |              |   |                                      |          |   |
| B4 | Improving Services & Support for Looked after          | Make clear the expectations for all looked after children in  | 1. Commission Electronic PEP system to support improved quality and   |  |  | G | Karen Dolton | E-PEP tender completed and contract signed 23rd May 2014. | Signed Contract and tender documents | 23.05.14 | G |

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| <p><b>children</b></p> | <p>respect of attainment, particularly at secondary level, in order to close the gap between their performance and that of all children locally and nationally, ensuring that all looked after children have up to date and high quality personal education plans (PEPs)</p> | <p>timeliness of PEPs for all school aged LAC.</p> |  |  |          |   |   |   |          |
|                        |  | <p>2. Run E-PEP pilot during Autumn Term 2014.</p> |  |  | <p>G</p> | <p>Multi-agency PEP and E-PEP training delivered to schools, IROs and a few social workers 18th&amp; 20th July. 19 Pilot schools identified (9 Manchester, 10 Stockport). E-PEP set up for each LAC attending these schools. E-PEP briefings to schools and SWs 18th &amp; 24th Sept. Schools and SWs beginning to use E-PEP system to complete PEPs as Autumn Term meetings are due. Continuing to review process. KEY AREAS: 1.Critical to success of E-PEP - To ensure all key data for each child is kept up to date by all practitioners on Micare and the one system in order to support the E-PEP system including (SCHOOL PLACEMENT, LAC STATUS, CURRENT SW, CURRENT TEAM MANAGER, IRO, LEAVING CAREWORKER) 2. To ensure all pilot schools and SWs are using E-PEP to complete PEPs for children in these schools. PEP 2 due in April. Development of ull roll out of E-PEPimplementation plan for all LAC to be informed by learning from Pilot. PEPs being quality assured by LAC education Team.</p> | <p>PEPs set up for children in pilot schools. PEPs in process of being completed.</p> | <p>PEP 2 of school year due April 2014. Pilot to run until January 15</p> | <p>G</p> |



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|  |  |  | <p>3. Develop and implement new process for distribution of Pupil Premium for LAC linked raising their educational attainment and closing the gap with all pupils. School's plans for use and impact of pupil premium to be monitored through PEP QA by 4. LAC Ed Team. PP released on receipt of high quality PEP</p> |  |  | G |  | <p>New process agreed and placed on MCC website May 2014. Process sent to Manchester schools via circular letter 02.06.14. Sent to social work managers and Team leaders 02.06.14 from LAC Education Team. LAC Education team is now quality assuring PEPs as they are received. Majority of PEPs received have not been automatically approved with comments being returned to schools about missing information etc. Schools are amending and returning improved PEPs. QA findings so far being shared at network meetings with schools WB 20.10.14. Prompts for "What to include in a good PEP" have been collated and being shared with schools at these networks. Also to be sent to SWs, Team Managers, IROs and OOA Designated Teachers. IRO team meeting 07.10.14 discussed PEPs and effective use of PP. Currently exploring more capacity to support QA process. Importance of PEPs and PP Process also raised with Primary Heads October 2014, LAC education networks Sept 2014 and will be covered in Chairs of Governors' meetings November</p> | <p>Process document available on MCC Website. Circular letter.</p> | <p>Process finalised May 2014. PEP QA ongoing.</p> | G |
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|    |  |   | KS4-5 and then into higher education, employment or training  |  |  |   |  |  |  |                    |   |
| B6 | Improving Services & Support for Looked after children | Ensure learning and change as a result of children's feedback and complaints. | 1. Include learning from childrens feedback and complaints in the new children and youth participation strategy |  |  | A |  | LAC Children and Young Peoples participation strategy to be included in the overall LAC strategy   |  | 31.11.14           | A |
|    |  |   | 2. Include in the new children and youth participation plan with suite of PI's                                  |  |  | A |  | LAC Children and Young Peoples participation strategy to be included in the overall LAC strategy   |  | 31.11.14           | A |
|    |  |   | 3. System to collate and analyse feedback and identify learning and changes needed                              |  |  | G |  | LAC central inbox to be set up to include feedback from key sources such as " have your say " booklets; Children and young people views from visits, reviews, paperwork; Children and young peoples complaints supported by childrens rights officers. |  | Completed 31.10.14 | G |
|    |  |   | 4. Implement and monitor  |  |  | G |  | LAC central inbox to be set up to include feedback from key sources such as " have your say " booklets; Children and young people views from visits, reviews, paperwork; Children and young peoples complaints supported by childrens rights officers. |  | Completed31.10.14  | G |
|    |  |   | 5. Evaluate impact  |  |  | A |  | Central inbox set up and protocol designed   |  |                    | G |
|    |  |   | 6. Quarterly reports to Corporate parenting panel, C2CC, YPCOS, MSCB  |  |  | A |  | Central inbox set up and protocol designed   |  |                    | G |
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| B7 | Improving partnership and Early Help | The local authority and its partners need to ensure that early help is targeted and coordinated effectively, so that families receive support when need is first identified and the number of referrals to children's social care is reduced as a result. | 1. Strengthen the role of the Children's Board in providing the appropriate level of governance and strategic oversight to improve the implementation of Early Help Strategy |  |  | A | John Edwards | It has been agreed that the Childrens Board will become the Early Help Board and provide governance to the SRF partnerships. A monitoring framework is under development.  |   | 01/10/2014 | G |
|    |                                      |   | 2. Review the role of SRF Children's Partnerships in developing the accountability of Early Help at a neighbourhood level  |  |  | G | John Edwards | Terms of reference reviewed and discussed with partnership chairs. Agreement to develop performance targets for each SRF. Revised terms of reference with performance targets completed and circulated 28/10/14  | Revised terms of reference                              | 28/10/2014 | G |
|    |                                      |   | 3. Review the role of the Early Help Implementation Group to ensure it can effectively drive change across universal and targeted services                                   |  |  | G | John Edwards | EHIG to adopt task and finish approach.  | This has been agreed and task and finish groups set up. | 17.10.14   | G |
|    |                                      |   | 4. Develop a robust quality assurance system to ensure adherence to statutory requirements of MSCB   |  |  | A | John Edwards | The Quality assurance will be developed through the leadership and governance workstream. Workstream lead identified and plan in place.  |   | 31.12.14   | A |
|    |                                      |   | 5. Review and improve current system for administering MCAF's  |  |  | A | John Edwards | Workstream lead identified for Early Help Project. Initial discussions based on recommendations of Internal Audit report. Currently recruiting partners to a Stakeholder group and developing terms of reference. Need to identify ICT system to support and this will require a seperate workstream once we have outlined the | Internal Audit Report.                                  | 31.03.15   | A |

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|  |  |   |  |  |   | business requirements. |   |   |            |   |
|  |  | 6. Review and rebrand MCAF into an effective Early Help Assessment tool   |  |  | A |                        |   | 31.03.15  | A          |   |
|  |  | 7. Build on existing MCAF training to develop a suite of multi –agency Early Help training. This should be linked to the review of MSCB multi agency training.  |  |  | G | John Edwards           | Meeting has taken place with HROD and a plan is in place, current training has been reviewed and revised. Improved training to be delivered on the 19/11/2014.  | Revised training programme and package agreed   | 30/10/2014 | A |
|  |  | 8. Continue to develop content of FSD to meet needs of Early Help. Following upgrade, promote and relaunch FSD as the key tool to support the whole family approach to early intervention and prevention. |  |  | A | John Edwards           | Approval given to upgrade to All Services Hub to support Early Help for adults as well as families. Strategy developed to improve and quality assure information around Early Help on existing FSD prior to upgrade. An enhanced directory will be in place by the 1st December 2014 to assist practitioners in accessing interventions. The complete software upgrade to be completed by 31/03/2014. | Sign off of order for upgrade sent to Open Objects. Approach agreed at Early Help Project Board on 15.10.14 | 15/10/2014 | A |
|  |  | 9. Refresh MSCB Threshold document to ensure clarity around Early Help offer  |  |  | A | Jane Booth             | Multi-Agency task & finish group convened under the governance of Safeguarding Practice Improvement Group to refresh threshold document & MA referral form.   | Refreshed threshold document & MA referral form.  | 30.11.14   | A |
|  |  | 10. Develop ways to :<br>a) support the step down process into Early Help and<br>b) support families who require help but do not meet the thresholds for Social   |  |  | A | John Edwards           | Ensuring effective communication around the role of of the Early help Co-ordinators (EHC) and engagement with universal services and partners. This includes offering advice and support to partners  | 4 EHCs attached to SRF and additional EHC to be recruited. 2 EH support officers in place.                  | 10/10/2014 | A |



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|  |  | 17 Work with the SRF Children Partnership Leads to monitor levels of early help activity delivered through universal providers, including schools to ensure consistency |  | A | John Edwards | Links to 2 above. Refreshed the Terms of Reference, circulated and discussed with SRF Heads. Targets have been sent to Chairs for agreement, dashboard to be developed.                | Refreshed terms of reference and performance targets sent to SRG chairs on 28/10/2014                                      | 28/10/2014 | G |
|  |  | 18. Ensure that Early Help requirements are clearly stated in commissioning documentation and are part of the contract compliance.                                      |  | A | John Edwards | Approach agreed by Project Board on 15 October 2014. Developing the links to commissioning   |  | 15/10/2014 | G |
|  |  | 19. Promote proactive use and updating of FSD via contracts/contracted providers  |  | A | John Edwards | Approach agreed by Project Board on 15 October 2014. This is to be followed up by information governance and is part of the FSD workstream.  |  | 15/10/2014 | G |
|  |  | 20. Implement procedures to use Early Help intelligence to inform future commissioning plans  |  | A | John Edwards | Audit of current Early Help provision and gaps is underway. Survey has been developed with schools and will be cascaded w/c 03/11/2014. Analysis of data will inform the commisioning. | Survey completed and sent to MSA   | 28/10/2014 | R |
|  |  | 21. Develop and deliver a rolling programme of communications, which promote a common vision and understanding of Early Help within the workforce                       |  | A | John Edwards | Rolling programme of engagement is in place this includes improved training package.   | Feedback fom engagement with partners is informing Early Help project workstreams and devleopment of the Early Help Offer. | 31/10/2014 | G |



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|           |   |  | 22. Build capacity within our partners to ensure a more effective Early Help response               |  |         | A |                                       | Survey developed will include identifying named Early Help coordinator in universal settings.   | Voluntary Sector Event. Headteachers Reference Group has met twice. Statagic Leads sit on MCAF Steering Group led by health | 28/10/2014 | A |
|           |   |  | 23. Strengthen the role of Early Help Champions for all universal and targeted services.            |  |         | A | John Edwards                          | Developing role of Early Help champions and enhanced training as part of the EH tools workstream.   |   |            | A |
|           |   |  | 24. Develop a framework for measuring the impact of the Early Help strategy                         |  |         |   | Shirley woods Gallagher/Jill Meredith | Approach agreed by project board, will for part of Performance and research workstream  |   |            | A |
|           |   |  | 25. Improve monitoring and reporting of Early Help Assessments                                      |  |         | A | John Edwards                          | This is being considered as part of the MCAF workstream and ICT requirements  |   |            | A |
|           |   |  | 26. Develop a framework of evidence-based interventions which partners, including schools, can use. |  |         | A | John Edwards                          | Currently Auditing interventions for inclusion in the framework   |   | 01/12/2014 | A |
|           |   |  | 27. Evaluate the effectiveness of the EYNDM   |  |         | A | John Edwards                          | Evaluation of Early Rollout ongoing   |   |            | A |
| <b>B8</b> | <b>Improving partnership and Early Help</b> | The authority should seek to emulate its approach to and success with the troubled families programme through family intervention and the new children in need service, to ensure that | 1. Establish integrated front door and MAPSH  |  | 1 .4.15 | A |                                       | On track to deliver MASH by 1 December 1014   |   | 1.12.14    | G |
|           |   |  | 2. Implement CiN teams in central and south localities  |  |         | A | Karen Dolton                          | Specification for CIN roll out being prepared. Deadline is 7th November. HR have confirmed no capacity in Mpeople to enable internal recruitment. |   |            |   |
|           |   |  | 3. Expand Troubled Families programme   |  |         | A |                                       | TF2 programme being mapped to include wider cohort; potential changes to FIP delivery   |   |            |   |



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|     |                                      | help and support for families who struggle is timely and effective.  |  |  |  |   |              | in line with budget savings.   |  |        |   |
|     |                                      |  | 4. Identify those cohorts of children who have needs beyond CAF but not requiring a social work intervention   |  |  | G |              | Analysis of a sample of cases has been completed to inform development of EH offer. CiN team agreed to roll out across City. Investment agreed |  |        | G |
|     |                                      |  | 5. Identify interventions with a proven track record of delivering sustained step down outcomes  |  |  | A |              | Review of interventions underway as part of Tier 2 workstream  |  |        |   |
|     |                                      |  | 6. Interventions delivered in a timely way   |  |  | A |              | This will be monitored via Complex Dependency Partnership Board.   |  |        |   |
|     |                                      |  | 7. Systems in place to monitor and evaluate impact at a individual case and strategic level  |  |  | A |              | Tracking and monitoring in place by Research and Intelligence  |  |        |   |
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| B9  | Improving Practice                   | Review the capacity of the emergency duty service to ensure that it can offer a timely and appropriate response in line with demand. | 1. Additional social work capacity at EDS  |  |  | G |              | Additional resource for one social worker agreed   |  |        | G |
|     |                                      |  | 2. Improved management oversight   |  |  |   | Karen Dolton |  |  |        |   |
|     |                                      |  | 3. Root cause analysis with GMP regarding numbers of PPO's   |  |  |   |              |  |  |        |   |
|     |                                      |  | 4. Reduce numbers of PPO's   |  |  |   |              |  |  |        |   |
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| B10 | Improving partnership and Early Help | Develop a shared protocol with the police for domestic violence notifications  | 1. Produce protocol<br>2. Establish multi agency team co located with a specific focus on triaging DV/DA referrals.<br>3. Monitor and evaluate impact of triage arrangements |  |  | G | Karen Dolton | Completed  |  | Oct-14 | G |
|     |                                      |  | 2. Establish multi agency team co located with a specific  |  |  |   |              |  |  |        |   |

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|     |  |  | focus on triaging DV/DA referrals.   |  |  |   |              |  |   |          |   |  |
|     |  |  | 3. Monitor and evaluate impact of triage arrangements  |  |  |   |              |  |   |          |   |  |
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| B11 | Improving Services & Support for Looked after children | Increase the participation of Looked after children including those placed outside the city, to ensure that their voices are heard and they are able to collectively influence decisions and policy. | 1. Develop a new children and youth participation strategy   |  |  | A | Karen Dolton | LAC Children and Young Peoples participation strategy to be included in the overall LAC strategy   |   | 31.11.14 | G |  |
|     |  |  | 2. Develop a new children and youth participation plan with suite of PI's  |  |  | A |              | LAC Children and Young Peoples participation strategy to be included in the overall LAC strategy   |   | 31.11.14 | G |  |
|     |  |  | 3. Utilise existing resource to deliver C2CC 'offer' to all LAC placed in and out of the city to ensure effective reach and quality of offer to young people |  |  | A |              | Childrens rights Officers and engagement coordinator to hold consultation with LAC twice a year following analysis of feedback   | Feedback will feed into event planned for 2015. | 28.02.15 | G |  |
|     |  |  | 4. Identify good practice in other Councils and build into practice  |  |  | G |              | Lancashire LA visit completed. Cheshire East visit planned   |   |          | G |  |
|     |  |  | 5. All LAC including those placed in OLA's have access to and inform on Children's Rights Service including Care to Change Council and sub groups            |  |  | A |              | LAC central inbox to be set up to include feedback from key sources such as " have your say " booklets; Children and young people views from visits, reviews, paperwork; Children and young peoples complaints supported by childrens rights officers. LAC Children and Young Peoples participation to be included in the overall LAC Strategy |   |          | G |  |
|     |  |  | 6. Ensure voices of all LAC are collated through all channels including LAC reviews, PEP's, complaints, Pathway  |  |  | A |              | Childrens rights Officers and engagement coordinator to hold consultation with LAC twice a year following analysis of feedback   |   | 21.02.14 | A |  |

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|     |  |  | plans and applied at every level of decision making  |  |  |   |  |  |                               |                    |   |
|     |  |  | 7. Evaluate impact   |  |  | G |  | LAC central inbox to be set up to include feedback from key sources such as " have your say " booklets; Children and young people views from visits, reviews, paperwork; Children and young peoples complaints supported by childrens rights officers. LAC Children and Young Peoples participation to be included in the overall LAC Strategy | I                             | Completed 31.10.14 | G |
| B12 | Improving Services & Support for Looked after children | Monitor the progress of over-16s through the Virtual Head Teacher to improve engagement with higher education and outcomes for care leavers. | 1. To put an information sharing protocol in place with Manchester Colleges immediately  |  |  | A |  | Formal data sharing protocols for collection of data Exam results being developed with individual colleges and PRI. To date Loreto and Manchester College have signed and returned these. This will be picked up again at the meeting on 9th December. Xaverian have agreed to share key stage 5 data.   | signed agreements held by PRI |                    | A |
|     |  |  | 2. Commission a weekly post 16 attendance, progress and outcomes data collection service.  |  |  | G | tender completed and contract signed 23rd May 2014.  | tender documents and signed contract   | 23rd May 2014                 | G                  |   |
|     |  |  | 3. Provide Welfare Call with list of 2013/14 Year 12/13 LAC and college/training placements to be contacted weekly from September. |  |  | A | Initial list provided August 2014. List being updated following 20.10.14 meeting with post 16 providers. |  |                               | A                  |   |

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|  |  | 4. Confirm destinations of all 2013/14 Year 11s  |  |  | A | Largely complete some destinations still to be finalised and confirmed. KEY AREAS:<br>1. Critical to success of E-PEP - To ensure all key data for each child is kept up to date by all practitioners on Micare and the one system in order to support the E-PEP system including (SCHOOL PLACEMENT, POST 16 provision, LAC STATUS, CURRENT SW, CURRENT TEAM MANAGER, IRO, LEAVING CAREWORKER) JJ working with Janice Schofield on this. | List held by LAC Education Team combining information from schools, Barnardos and Connexions. | week beginning 27.10.14 | A |
|  |  | 5. Contact all colleges/training providers to be receiving Manchester LAC students/with existing M/cr LAC to advise them of weekly data collection |  |  | A | . Meeting on 20.10.14 main launch arrangements for data collection now being confirmed with each college.  |   |                         | A |

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|  |  | <p>6. Contact Greater Manchester Colleges to arrange to meet and to inform them of weekly attendance/progress data collection. Also to encourage them to attend the Greater Manchester further and Higher Education forum meetings attended by Local Universities, colleges and LA staff.</p> |  |  | G |  | <p>Post 16 meeting took place at William Hulme Grammar School 20.10.14. Attendees included Manchester College, Salford College, Trafford College, Xaverian, Loreto Sixth Form, Parrswood, William Hulme, Connexions, a social worker, Welfare Call. Agreed that work will now take place to confirm names of all LAC attending each college. Additional colleges now being contacted Hopwood, Stockport, Wigan, Bolton, Thomas Aquinas, Bury, Oldham, Tameside and Cheadle and Marple. Arrangements now being established for weekly data collection from colleges by Welfare Call. Welfare Call to alert Connexions if they are advised that a young person has been removed from a college roll so they can contact them. Concerns about attendance will be picked up before this point though so earlier intervention can be put in place. Next meeting date set for 09.12.14.</p> | <p>minutes of meeting from 20.10.14</p> | <p>20.10.14</p> | G |
|  |  | <p>7. LAC Education Team to monitor post 16 attendance and participation data fortnightly and alert social worker of any concerns arising and discuss action to be taken.</p>   |  |  | A |  | <p>list to be completed before full data collection can be analysed.</p>  |   |                 | A |

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| B13 | Improving Services & Support for Looked after children  | Improve access to suitable accommodation for care leavers.  | 1. Increase placement choice:<br>- within the City<br>- for Sibling Groups  |  |  |   | Karen Dolton    |  |  |          |   |
|     |   |   | 2. Increase supported and suitable accommodations options – “duty of sufficiency”   |  |  |   |                 |  |  |          |   |
|     |   |   | 3. Establish a policy of not using B&B for under 16s.   |  |  |   |                 |  |  |          |   |
| B14 | Improving Performance information and quality assurance | Improve the effectiveness of the independent reviewing officer service, particularly in relation to listening to the views of children, the rigour of challenge that is given to care plans and the process of escalation where there are continuing concerns about practice and progress of plans. | 1. Increase the capacity to effectively manage workloads  |  |  | G | Russell Pilling | Business case for additional capacity based on reasonable caseloads produced   |  | 20.10.14 | G |
|     |   |   | 2. Identify what works to increase capacity e.g. different ways of working - use of ICT   |  |  | A |                 | Additional use of tablet technology to be integral part of business case   |  |          | A |
|     |   |   | 3. Benchmark against other IRO services nationally  |  |  | A |                 | " what good looks like " document based on national standards . Benchmarking has been incorporated into business case.   |  | 17.10.14 | A |
|     |   |   | 4. Set up task and finish group to <ul style="list-style-type: none"> <li>review the escalation procedure</li> <li>via case audit analyse practice/compliance and what needs to be done to improve</li> </ul> |  |  | A |                 | the task and finish group re PM and quality assurance framework will incorporate revised guidance and monitoring arrangements for escalation and audit . Health check report of current system report to IB executive 27.10.14. First meeting of task and finish group 15.10. 14. Draft PMF to be considered 15.11.14 and revised early December |  | Dec-14   | A |

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| B15 | Improving Services & Support for Looked after children | Prioritise and develop the recruitment of adopters to reduce further the mismatch of carers available to children waiting, particularly to meet the needs of Black ethnic minority children. | 1. New placement for adoption strategy in place   |  |  | A | Karen Dolton | we are in consultation with a VAA and have been testing the market with IFA's with a view to collaborating with them to drive forward the service and improve placement choices. We have also been in consultation with another LA who will work with us to support the transformation of the fostering and adoption services |  |  | A |
|     |  |  | 2. New placement for adoption plan in place   |  |  | A |              | we are in consultation with a VAA and have been testing the market with IFA's with a view to collaborating with them to drive forward the service and improve placement choices. We have also been in consultation with another LA who will work with us to support the transformation of the fostering and adoption services |  |  | A |
|     |  |  | 3. Strategy and plan to include specific action to accelerate the availability of placements for BME children |  |  | A |              | we are in consultation with a VAA and have been testing the market with IFA's with a view to collaborating with them to drive forward the service and improve placement choices. We have also been in consultation with another LA who will work with us to support the transformation of the fostering and adoption services |  |  | A |

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|     |  |  | 4. The outcome of the current options appraisal to determine the strategy   |  |  | A |              | we are in consultation with a VAA and have been testing the market with IFA's with a view to collaborating with them to drive forward the service and improve placement choices. We have also been in consultation with another LA who will work with us to support the transformation of the fostering and adoption services |  |  | A |
|     |  |  | 5. Dataset of performance targets with clear and realistic targets and timescales   |  |  | A |              | we are in consultation with a VAA and have been testing the market with IFA's with a view to collaborating with them to drive forward the service and improve placement choices. We have also been in consultation with another LA who will work with us to support the transformation of the fostering and adoption services |  |  | A |
|     |  |  |   |  |  |   |              |   |  |  |   |
| B16 | Improving Services & Support for Looked after children | Develop foster to adopt and concurrent in-house provision and increase the use of voluntary adoption agencies. | 1. The outcome of the current options appraisal will determine the fostering and adoption strategy including fostering to adopt |  |  | A | Karen Dolton | we are in consultation with a VAA and have been testing the market with IFA's with a view to collaborating with them to drive forward the service and improve placement choices. We have also been in consultation with another LA who will work with us to support the transformation of the fostering and adoption services |  |  | A |
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| B17 | Improving Performance information and quality assurance | Undertake a quality assurance audit of supervision and ensure that there is sufficient management oversight on all cases, and that social work staff are receiving appropriate support, including time for reflection and help in achieving timescales and planning progression. | 1. QA audit of supervision   |  |  | G           | Russell Pilling | Task and finish group will review audit tools and specific audit of supervision records , cross referencing sign off all points of management oversight throughout the childs journey. This will include two quality focus groups to consider both team member and Social Worker responses to support, reflection , planning and timescales as part of system mapping . The qualitative and quantative findings will inform recommendations. |                                 |                    | G |
|     |   |  | 2. Review <ul style="list-style-type: none"> <li>• Guidance</li> <li>• Standards</li> <li>• Training and development for all staff</li> </ul>                  |  |  | G<br>G<br>G |                 | Liaise with Micare to produce report on management sign off points.<br>.Complete audit .<br>Complete report with findings and recommendations to Improvement Board executive   | 31.10.14<br>15.11.14<br>8.12.14 | G<br>G<br>G        |   |
|     |   |  | 3. Revise and implement  |  |  | G           |                 | Following agreement from IB  | 2014/15                         | G                  |   |
|     |   |  | 4. Re-audit  |  |  | G           |                 |  | 01.03.15                        | G                  |   |
|     |   |  | 5. Develop monitoring reports for supervision covering both social care practice and compliance with guidance and policy (e.g. recording of actions on MiCare) |  |  | G           |                 | To be incorporated into IB executive report  | 8.12.14                         | G                  |   |
| B18 | Improving Performance information and quality assurance | Improve the collation, accuracy and reporting of a range of performance  |  |  |  | G           | Russell Pilling | First meeting of task and finish group held<br>Draft PMF to be considered 15.11.14 and revsied early December  |                                 | 15.10.14<br>Dec 14 | G |

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|  |  | information to ensure that the most up to date data is available across children's social care and is used to drive service improvements across all areas. | 2. Identify the suite of performance information required for managers/boards to support effective scrutiny and actions required |  |  |  | health check report of current system to IB executive           | 27.10.14 | G |
|  |  |  | 3.. Reports to relevant boards.  |  |  |  | Revised PMF framework to IB executive for approval and sign off | 8.2.14   | G |

## Children's multi-agency Improvement Plan on a page

