Improvement in the time of Covid

UPDATE FOR Children's Scrutiny June 2020 Presented to DCFP Exec on 21/05/2020

"She had never imagined that curiosity was one of the many faces of love"

A plan to apply the lessons learned from ILACS 2020 to the social work response to CV19

National government has set clear priorities for local government, that are shared across Children's Services;

- Maintain the care system
- Protect the most vulnerable
- Support the community.

By doing these three things, we play our part to protect the NHS and save lives.

We have the additional challenge in Devon of achieving rapid improvement in some key areas of service, following our 2020 ILACS (Inspection of Local Authority Children's Services) inspection. The Department for Education (DfE) temporarily suspended its usual conventions in response to an inadequate judgement and has instead agreed three things with Devon County Council (DCC);

- DCC will publish an improvement plan that shows how, in its response to CV19, DCC will address the most immediate risks to children and young people identified in ILACS 2020.
- The Devon Children and Families Partnership Executive will act as a temporary Improvement Board, overseeing the partnership response to CV19 and providing check and challenge of the Improvement Plan.
- DCC will secure an independent expert, approved by DfE, to provide consultancy to the DCC Chief Officer.

Four Questions;

What support is needed to get through the crisis?
Who is best placed to provide that help?

Who am I most worried about and why? Do I need to do something different today, tomorrow, next week?

Highlights this reporting period;

Progress;

- Continued high rate of completion of risk assessments; 93.3% on open social work cases following initial contact with family.
- There has been an increase in the proportion of vulnerable children attending school to 36% of CPP, 21% CLA, 22% CIN allocated to SW.
- A high level of dip sampling of risk assessments by managers was sustained leading to moderation with managers and Independent Reviewing Officers. Themes this period included children where DV and AMH was an issue and CIN cases ragged 'green'.
- Agreed plans for all cases in the Public Law Outline are being closely tracked and monitored and any extensions to the 12 week timescale in individual cases are increasingly purposeful and appropriate. Delays in filing are being investigated.
- Improvements to the tracking and monitoring of data relating to PLO and care proceedings are progressing, including data sharing with CAFCASS. Joint workforce development approaches are being planned.
- Following Locality Directors tracking of the completion of Permanence Plans, Permanence Planning Meetings will be completed in all relevant cases by the end of the month.
- A further two additional fostering households have been approved through the fast track approval process for carers already at stage 2.
- Residential children's homes continue to report good resilience and capacity.
- The QADG has commenced an approach to partnership quality assurance of practice for the current context.
- Incident Management Teams have been reviewed to ensure readiness for the next phase of response, including preparations for the reintegration of children into services.
- Business continuity arrangements remain robust with continued delivery of core statutory services.
- · Recruitment is progressing well to agreed additional capacity.

Risks;

• Key management information reporting, including on the reviews of risk assessments, remains in development.

Priorities for the next period;

• Confirming arrangements for the shadow Improvement Board and development of the next stage improvement plan.

		Мо	nth :	1 – A	pril	Mo	onth	2 – N	1ay	١	Mont	:h 3 –	- Jun	е	Mo	onth	4 – J	uly		Performance	
Actions	Lead	06	13	20	27	04 (last up	11	18	25	01	08	15	22	29	06	13	20	27	21/05	indicator	Update 21/05/2020
						dated)															

1. Children and young people are kept safe

Context: The Ofsted Inspection found that that assessment of risk and safety planning for care leavers was inadequate, and, for those children who experience neglect, not yet good. In the context of COVID-19 all children must be clearly risk assessed and prioritised in relation to: 1. Their specific vulnerabilities; 2. The plan for engagement with the family (including school/child care attendance); 3. How and when the children will be seen through this period; 4. How the assessment will be reviewed as the context for the child/family changes and workforce capacity is impacted.

1.1 Immediate risk assessment and safety planning

	•						 		
Complete risk	SW/PA/							93.3% RA	Complete – the
assessments on all	FP/TMs							completed	outstanding risk
open cases in context									assessments relate
of COVID-19 using									to new referrals
agreed tool									where risk
									assessments will be
									completed
									following initial
									contact with the
									family.

Complete RAG rating on all children and young people and record using the 'vulnerability tracking tool' (VTT).	SW/PA/ FPs/ TMs																		93.3% recorded using VTT	Complete - A high level of completion continues to be achieved on open SW held cases.
Complete updated safety plans for all children and young people in line with risk assessment/RAG rating	SWs/PA TMs																		Dip sampling includes a review of the safety plan is appropriate	The completion of the risk assessment includes a consideration of the current safety plan, including a review of visiting frequency
1.2 Effective oversight	and review	of pl	ans f	or all	chil	dren	inclu	ding s	peci	ific a	rran	geme	ents	for p	riorit	ty gr	oups			
Issue practice guidance on reviewing risk assessments and updating VTT	DF	С																		Complete - Issued 09/04/20
Review risk assessments and RAG ratings at required frequency and in line with changing information about the child and family and changing																	,			

	orkforce capacity er time;										
1.	SW/PA/FP ensures that the risk assessment/RAG rating for each child is reviewed in light of any new information emerging about a child and their family and information regarding school attendance; RED – daily AMBER – at least weekly GREEN – at least monthly	SWs/PA /FW								% reviews reported as completed on time	Reviews of risk assessments have started. Practice expectations have been confirmed to and dip sampling is confirming that reviews are taking place. A new VTT has been implemented to record and monitor reviews of risk assessments. Management
2.	If there is a change to the risk assessment/RAG rating SW /PA/FW updates the RA and VTT and updates the safety plan.	SW/PA/ FW								% VTTs updated each week	reporting is in final stages of development.
3.	•	TMs								% reviews reported as	

							1	1				
	rating have been										completed	
	reviewed in line										on time	
	with any changing											
	information about											
	child and family											
	and information											
	regarding school											
	attendance, and											
	that the risk											
	assessment/VTT											
	and safety plan											
	are updated											
	where risk levels											
	have changed											
4.	At least every two	TMs									'	
	weeks TM checks											
	that all children											
	with an AMBER											
	risk rating have											
	been reviewed in											
	line with any											
	changing											
	information about											
	child and family											
	and information											
	regarding school											
	attendance, and											
	that the risk											
	assessment/VTT											
	and safety plan											
	are updated											
	where risk levels											
	have changed											
L	nave changea											

5.	At least monthly	TMs									
	TM checks that all										
	children with a										
	GREEN risk rating										
	have been										
	reviewed in line										
	with any changing										
	information about										
	child and family										
	and information										
	regarding school										
	attendance and										
	that the risk										
	assessment/VTT										
	and safety plan										
	updated where										
	risk levels have										
	changed.										
6.	Each week the	AMs								% AMs	Managers confirm
	AM confirms that									confirming	that reviews are
	risk assessments									reviews all complete as	being undertaken
	have been									expected	in accordance with
	reviewed in light									capetica	expectations.
	of changing										
	information about										Management
	a child and family										reporting is in
	and information										development
	regarding school										which will replace
	attendance at										this expectation.
	least at agreed										,
	intervals and that										
	the VTT is updated										
	and safety plans										

are updated accordingly.										
7. Each week – SMT reviews the management information report (VTT)										Management reporting on completion of risk assessments is in place and reviewed by SMT twice weekly. Management reporting on reviews of risk assessments is in development. Management dip sampling confirms reviews are taking place.
Specific additional over	sight of Ca	re Lea	ivers							
Appoint interim SM Corporate Parenting	DF	С								Complete
Interim SM Corporate Parenting commences in post	DF			С						Complete - Vanessa Strang commenced FT on 04/05/2020
Recruit to Permanent SM Corporate Parenting	DF									Not yet due to start

Scrutinise weekly reports of care leavers in unacceptable accommodation confirming actions needed in specific cases	DF/VL	С	С	С	С								6 Care Leavers in unacceptabl e accommoda tion	Weekly update provided and actions scrutinised in relation to this small group with very complex needs.
Take action to secure acceptable arrangements.	NC/VS	С	С	С	С									Actions are progressing appropriately in light of their complex needs and circumstances.
Redeploy 10 identified staff as PAs for Care Leavers to ensure manageable PA caseloads	DF/NC												# additional PAs PA Caseload #s	Complete - YOT workers have been redeployed alongside some Corporate redeployees to offer support to care leavers alongside PAs.
Appoint interim additional AM for Corporate Parenting	NC													Ofsted redeployee started w/b 27/04 Complete – Both vacant AM posts were appointed to at interviews on

												01/05/20 and have commenced in post
Progress recruitment to 10 additional permanent PAs for Corporate Parenting;						•			,			
Review and evaluate JDs where needed	NC										# PAs appointed, PA Caseload #s	Complete - Adjustments will be made to JD whilst posts are advertised if needed.
2. Advertise posts	NC											Complete
3. Shortlist, interview and appoint to posts	VS				Ī							Interviews are planned for 20/21 May
SW/PA review Pathway Plans for all care leavers reviewed by Ofsted to ensure all risks have been fully assessed and the plan for the young person is proportionate to their need/vulnerability and including how the	SW/PA										% relevant Pathway Plans updated % reviewed are I/RI/G	Dip sampling confirms that this has commenced but this will be rescheduled for when the PP template is revised. Timescale adjusted to reflect this.

young person will be contacted or visited.														
Develop and implement improved Pathway Plan format, including consultation with young people.	VS													Examples of good practice have been identified. Arrangements for engaging Care Leavers in the redesign are in place.
Update Pathway Plans using the new format.	AMs												% updated	This will commence once the PP template has been revised.
Agree actions needed if plans are identified as I or RI	VS													Not yet due to start
Progress identified actions to improve quality of plans	AM and TMs												% of completed actions % of relevant Pathway Plans that are RI/I	Not yet due to start
Scrutinise weekly reports of children looked after in	DF/VL	С	С	6	С								3 CLA are in unregulated arrangemen ts where	There has been a reduction this period, including

unregulated placements confirming actions needed in specific cases													plan is not appropriate	following young people becoming more stable and unregulated 16+ provision being deemed appropriate. Also, one young person with complex health needs was moved to an appropriate regulated setting.
Take actions identified as required.	NC	С	С	С	С								% identified actions completed	All outstanding actions are being progressed.
Block book additional residential provision so that we have sufficient capacity if needed and children and young people will not be placed in unregulated settings inappropriately.	FF/NS												8 additional residential beds currently available.	8 residential beds currently retained and in use or young people planned to move in. 5-11 additional beds in the pipeline.
Implement agreed process for establishing additional	FF												# additional residential beds	Options paper in place. Buildings, providers and process scoped for

emergency provision if needed								emergency childrens home provision, lead times and resources including budget scoped. To be finalised for sign off by 29 th May.
Implement 'fast track' recruitment of inhouse foster carers to increase capacity, to include consideration of DCC staff with enhanced DBS to be carers.	NC						4 h/holds now approved as new Covid temporary carers. 1 placement made with one of those who was temporarily approved.	Foster carers continue to be approved through the agreed fast track process where appropriate. 1 additional fast track case to be considered at the next Virtual Panel on 19/05/20. Additional support is being offered from the Placement Support Team to all new planned /emergency placements.

Implement fast track exceptions process	NC												# additional placements	Arrangement in place with HoS. No placements have been needed as yet.
Specific additional ove	rsight of chi	ildrei	ı in P	LO;										
Scrutinise weekly reports of all children in PLO for 12 weeks + confirming actions needed in specific cases. Act as identified	TMs/ AMs			C	С								12 families (27 children) are currently in pre- proceedings >12 weeks	9 families (19 children) are awaiting a Court date to issue, this is being escalated. 2 families (6 children) are stepping down to CIN/CP. 2 families (2 children) are agreed for a purposeful extension of the PLO Tracking of above actions is in place by Improvement Lead
Agree model of countywide 'tracker' for PLO cases	J-ES/SA/ AC											Ī		Complete - Project team has been identified and a dataset agreed with Legal services.

Implement tracker fully populating with agreed dataset	AMs									% population of agreed tracker	Meetings completed with teams to populate Tracker. A positive meeting was held with CAFCASS this period to agree sharing of relevant data.
Check impact/operation of tracker and adjust as necessary	J-ES/SA										Not yet due to start
Weekly tracker of all children in PLO reported to SMT to agree priority actions needed	J-ES/SA									# weeks PLO operating in all relevant cases	Not yet due to start
Take action in response to any drift and delay	J-ES/SA									12 families (27 children) currently in PLO 12 weeks +	All cases on PLO tracker have valid reasons for remaining within PLO. This is reviewed weekly.
Monitor impact of reduced Courts capacity (Covid-19) and escalate to BCP if needed	J-ES										Meetings are planned with court users, including CAFCASS.

Commission Eclipse development and MIT reporting to embed PLO reporting functionality	AC										Work has begun to map the required dataset against the existing functionality in Eclipse and identify developments needed.
Recruitment of Court				•	-		•				
Progression Officers;											
Pursue redeployment offer from Ofsted	JO	С									Complete - Ofsted redeployee commenced in post w/b 27/04/20 to provide scrutiny to case work.
Recruit two agency staff as Interim Court Progression Officers	SA/MB										Suitable candidates shortlisted for interviews w/b 18/05/20.
Recruit to Permanent Court Progression Officers;											
Create JD and evaluate	RN/NS										JD is with HR for evaluation.

2. Advertise posts	NS											Not yet due to start.
Shortlist, interview and appoint to posts	JES/NS										# posts appointed to	Not yet due to start.
Plans for permanence agreed in all relevant cases at the 4m review;	FG/SA				 						% relevant cases with PP	Eclipse currently reports that 30% have a PP.
IROs complete review to determine which cases have a permanency plan.	LB	С										Complete - Initial indication from a review by IROs is that 75% of cases had a PP.
2. IROs track and report where children who should have a plan do not.	LB/MB										IROs report that in 96% (700/727) relevant cases a Permanenc e Plan is now in place or a PP meeting is booked	Tracking and monitoring of completion of Permanence Plans has been taking place by both IROs and Locality Directors. Locality Directors confirm that all outstanding PP meetings will be held by the end of May.

											In Corporate Parenting, there is a need to confirm that the Permanence Plan is in place and up to date for all relevant children.
3. IROs monitor progress against plans and take necessary steps, including escalation, to avoid drift and delay.	LB/MB									escalations were raised by IROs in April	Tracking is reported to have led to improved performance on completion of PPs. A recent audit confirmed that the quality of permanence practice is still variable and work to address this will be a priority for the next phase.
4. Review and reissue Practice Guidance.	RN/SA										Work has commenced to develop both an updated Permanence Policy and practice

											guidance, including on lifestory work.
5. Agree technical solutions to migrate existing permanency plans from CareFirst.	DF/NS										Options are being determined
6. Complete migration/data cleanse action as agreed.	NS									% relevant children with completed PP	Not yet due to start
Workforce capacity;				I	1	J	<u> </u>	l			
Identify agency and internal staff available for re/deployment to maintain critical statutory SW functions when needed.	DF/SMT										Process is in place for service areas to identify and log any staff available for redeployments
Deploy interim staff and redeploy DCC staff to maintain critical statutory SW functions through this period in light of intelligence from daily	DF/SMT										No redeployments within CSC identified as necessary as yet.

Business Continuity																			
Planning and IMTs																			
Confirm Corporate	DF	С																	Complete
support agreed to		C																	Complete
critical business																			
functions, including to																			
ensure ICT and HR																			
resilience																			
1.3 Assurance of risk ju	dgements																		
Sample children in prio	rity groups	and i	mode	erate	risk	asse	ssme	nt ar	nd RA	AG ra	ating	s who	ere n	eede	d:				
AM/LD sample cases	AM/LD																	In the past	A good level of dip
to confirm risk	'																	two weeks	sampling continues
assessment/RAG																		244 risk assessments	to be achieved. The
rating, that this has																		were dip	focus this period
been reviewed as																		sampled.	included the high
appropriate, the																		(39 Red/76	proportion of CIN
safety plan is up to																		Amber/129 Green) 1088	cases ragged
date and that the child																		risk	'Green'.
is being seen as per																		assessments	Green.
the safety plan;																		now dip sampled in	Target number for
the safety plan,																		total out of	dip sampling has
1. Sample 10 RED																		3013 open	been reduced to 10
rated children																		cases.	as greater reliance
weekly																		In 14% of	can be given to MI
2. Sample 10 AMBER																		instances	on risk
rated children																		sampling to	assessments.
weekly																		date has	

Sample 5 GREEN rated children Record and monitor dip-sampling activity	AM/LD									lead to a revised risk assessment. Judgement following moderation;	
										- Red 48 - Amber 77 - Green 29	
Moderate with TM where identified as needed	AM/LD									15% of cases requiring moderation	A reflective discussion takes place with managers where there is a difference of opinion about RAG rating.
Dip sample priority groups of children, to include; • Under 1s • Children living with DA/SM/MH • Neglect • Child exploitation	IROs/SA									244 Dip samples completed this period including a focus on AMH and DV and under 1s	Thematic dip sampling of risk assessments has been undertaken.
Coaching and mentoring targeted at individual TMs/AMs/Localities	IROs/SA									15% of cases requiring moderation	Following moderation, SWs/TMs have been contacted by

service areas based on findings from dip sampling.										relevant senior manager or an IRO/CP chair for a reflective discussion on strengthening safety plans. In one instance moderation has confirmed performance issues which have been addressed.
Moderation of above and coaching/mentoring to IROs	MB/SA								95% of judgements confirmed post moderation	A moderation workshop was held with IROs to reflect on thresholds and learning following dip sampling.
Review approach to QA of risk assessments when Management capacity is impacted	SA/VL									Requirement has been adjusted to reflect improved management reporting on completion of risk assessments.

Appoint to interim	DF	С									Complete
Senior Manager											
Quality Assurance											
Interim Senior	DF										Complete - Mark
Manager QA starts in											Barratt
post											commenced in post
											on 11/05/2020
Appoint to permanent	DF										Not yet due to start
Senior Manager											
Quality Assurance											
Appoint to interim QA	МВ										Work to develop JD
and Practice											has started
Development Leads											
Appoint to						 					
permanent AM + 3											
QA and Professional											
Development Leads											
1. Create JD and	MB										Not yet due to start
evaluate											but work to
											develop JD has
											commenced
2. Advertise posts	МВ										Not yet due to start
3. Shortlist,	МВ										Not yet due to start
interview and											
appoint											

		Mo	onth	1 - A	pril	Mo	onth	2 - N	lay	ı	Mont	:h 3 -	- Jun	e	M	onth	4 - J	uly			
Actions	Lead	06	13	20	27	04 (last update)	11	18	25	01	08	15	22	29	06	13	20	27	21/05	Performance Measure	Progress update 21/05/2020

2. Senior leaders have oversight of priority vulnerable groups and that improvement is being made

Context: Ofsted found that senior managers did not have a clear line of sight to particular groups of vulnerable children and young people; care leavers in unacceptable accommodation, neglected children and children in unregulated placements. In the context of COVID-19 there is a need to ensure that QA is undertaken effectively and that senior managers have access to qualitative and quantitative data which provides a clear oversight of priority groups of vulnerable children and assurance that they are being monitored and reviewed appropriately.

Report accurately, daily and weekly, on the agreed cohort of most vulnerable children and young people including KPIs relating to risk assessment and safety planning and priority identified groups	VL/FF							Timely accurate reports	A new report (Vulnerability Tracking Tool) is providing data on the completion of risk assessments. Reporting on the reviews of risk assessments is still in development.
Report weekly to CSLT findings of quality assurance (dip sampling) of risk assessments.	VL/SA/ MB								Management report on dip sampling is available weekly for SMT and CSLT
Produce weekly performance dashboards for senior managers, including CSLT and SMT	FF								CSLT Dashboard in place. Reporting on vulnerability data is in development.
Present Improvement Plan to Members at Cabinet, Scrutiny Committee, Children's Standing Overview Group,	VL								Complete - Plan has now been presented to Scrutiny, CSOG

Corporate Parenting Member Group and Corporate Parenting Forum, when it resumes after lockdown										and Corporate Parenting Group
Present progress on Improvement Plan to Members at Scrutiny Committee and Children's Standing Overview Group, Corporate Parenting Member Group and Corporate Parenting Forum, when it resumes after lockdown	VL			19						An update on progress is being presented to members at the Children's Standing Overview Group on 19/05/20 and included on other forward plans.
Present Improvement Plan to Corporate Leadership Team	JO/VL		05		05					Next update due in June

Actions	Lead	Mo	onth:	1 - A	pril	Mo	onth	2 - N	lay	Month 3 - June						onth	4 - Ju	ıly			
		06	13	20 (last update)	27	04	11	18	25	01	08	15	22	29	06	13	20	27	RAG 05/05	Performance Measure	Progress update 05/05/20
3. Partners have effective oversight of risk assessments and whether children are safe																					

Context: Partnership is a strength in Devon, the DCFP Exec has been reconstituted as the Improvement Board aligned to their oversight of the COVID-19 response. The partnership must have effective oversight of arrangements to safeguard and protect the most vulnerable children, satisfy itself that multi-agency responses to

Extraordinary terms of reference for DCFP Executive drafted, agreed and implemented	JO	С									Complete
Present the Improvement Plan to DCFP Executive	VL	С									Completed 09/04/2020
Updates on implementation of the Improvement Plan provided to DCFP Exec	VL		23	C	5	21					Available for Exec on 21/05/20
Develop an Improvement Performance Framework for DCFP Exec bringing together qualitative and quantitative data to ensure partners have an effective oversight of whether practice is keeping children safe through this time.	VL										Data from VTT and dip sampling to be shared at this Board.
Implement Framework and report fortnightly to the DCFP Exec	VL										In developmen (see above)
Revise ToR for the operation of the PDG & QA Delivery Groups of DCFP through this time so that they undertake	VL										Complete - Tofagreed.

partnership quality assurance of practice relating to vulnerable groups											
Partners implement a robust approach to quality assurance of risk assessment and safety planning, for all children and for specific priority groups, and advise DCFP Exec on specific identified risks and any actions needed including re/deployment of additional resources in specific areas.	VL/MB										An approach to partnership practice audit for CV-19 has been agreed and has commenced focusing on MH and DA factors using an agreed audit tool.
Constitute Incident Management Teams (IMTs) for vulnerable children, agree ToR and clarify reporting lines.	DF										Complete - IMTs are meeting with good partnership attendance and clear governance
DCFP oversees the IMTs to ensure they are operating effectively and maintaining an oversight of risks and issues for vulnerable children and priority identified groups.	DF (J- ES)/VL										Chairs report available. IMTs have reviewed operation in readiness for 'phase 2'
Take action to redeploy resources to sustain critical children's social care functions	DF (J-ES)										Regular consideration is given to this in

where needed and appropriate escalation to JIMT.										Business Continuity meetings. Not yet required
Report key data from partners and key services, including schools, EH (DSVA) and MASH to DCFP Exec to support the strategic risk assessment of the impact of increased demand in specific areas, identification of pressures to the system and to enable appropriate action to be taken where needed.	VL/FF									Partnership data is presented each meeting, including from EH Leads.