

**GLOUCESTERSHIRE COUNTY COUNCIL CHILDREN'S SERVICES**  
**CHILDREN'S SOCIAL CARE PRACTICE IMPROVEMENT UPDATE REPORT**  
**CHILDREN AND FAMILIES OVERVIEW AND SCRUTINY COMMITTEE**  
**16<sup>th</sup> July 2020**

## **1.0 Introduction**

- 1.1 This report was originally prepared and presented to the Children's Improvement Board in May 2020 by the Interim Director (Children's Safeguarding and Care). The report has three Appendices including the Accelerated Improvement Plan (AIP), Improvement Activity Grid and the Practice Fundamentals Tool. The AIP has since been further updated and presented to the June 2020 Improvement Board and this version is now attached to this report at Appendix A.
- 1.2 Due to the continued absence of the substantive Director (Children's Safeguarding and Care) from February 2020 onwards and as a result of significant challenges posed by the emergence of the COVID-19 pandemic, interim leadership arrangements were put in place from 30 March 2020 for an initial three month period. The substantive Director has since retired and the Interim Director has given a commitment to continue in this role up to the next Ofsted inspection.
- 1.3 By the time of the May 2020 Improvement Board the interim leadership arrangements had been in place for eight weeks and by the time of this Children and Families Overview and Scrutiny Meeting the interim arrangements will have been in place for fifteen weeks. During the whole of the intervening period children's social care services have been subject to business continuity planning arrangements as a result of the COVID-19 pandemic. Despite the additional challenges brought about by the pandemic, practice improvement activity has remained a service priority and provided the opportunity to renew our focus on the fundamentals of practice.
- 1.4 The recent change of interim leadership has provided an opportunity to refresh the practice improvement activity and re-double efforts to ensure the necessary focus, grip and pace to deliver consistently good or better social care services for children, young people and families. The improvement activity refresh has been an evolutionary process, building on previously agreed improvement priorities and activities over time. The leadership has clarity about why practice and performance is weak, what needs to be done to address this and are able to support and challenge the workforce about how the necessary changes and improvements will be made. This report provides an update about practice improvement activity, impact and next steps.

## **2.0 Improvement planning architecture**

- 2.1 The 'Building the Best' for children plan is the high level, longer term, strategic plan that was developed following the 2017 Ofsted inspection to get children's social care services to 'Good' and better. As a result of targeted support by the Department for Education (DfE) and Local Government Association (LGA), the Children's Services Leadership Team has recently agreed a proposal to develop a transformation plan for the whole of Children's Services. This will outline a plan for an integrated approach to transform early years, education, early help and children's social care services. If the proposed Children's Services transformation plan receives corporate and political approval in due course this will supersede the 'Building the Best' for children plan.
- 2.2 The Accelerated Improvement Plan (AIP) remains the current operational plan that sets out the key practice improvement priorities for children's social care services. It is acknowledged that the

identified practice improvement priorities must be achieved consistently and at pace in order to bring about the necessary impact to achieve good and better outcomes for children in need of support, protection and care in Gloucestershire. In so doing the service will position itself for the next Ofsted inspection which, it is anticipated, is likely to take place very shortly after the COVID-19 pandemic recovery, although exactly when this will be is unclear at the present time. Whatever time remains between now and the future inspection provides a valuable opportunity for continued improvement despite additional challenges presented by the COVID-19 pandemic.

- 2.3 There is still considerable improvement work that is required to ensure children's social care services moves out of the inadequate Ofsted judgement, into requires improvement and onto a good and better judgement. The weakest third of all children's social care practice and performance must be addressed, especially as some of this practice has already remained inadequate for too long. A much more forensic approach is now in place to target activity in order to have the greatest impact and to make and maintain improvement for children, young people and families.
- 2.4 The AIP continues to be updated and disseminated to children's social care staff on a monthly basis. To date, the monthly update of the AIP has been largely confined to senior leadership input. From June 2020 this will become a more inclusive process bringing together the Heads of Service and Improvement Advisors with relevant corporate business partners. The proposed AIP Monthly Review Meeting will bring the leadership and accountability for service delivery and improvement together to coordinate and streamline improvement activity and deliver the necessary focus, grip and pace that is required to deliver consistently good services.
- 2.5 The vision, values and behaviours underpinning service delivery and improvement will be revisited with the management and leadership group as part of the AIP Monthly Review Meeting. This is to ensure that the corporate values of accountability, integrity, empowerment, respect and excellence are understood and reflected in practice, management and leadership. Preliminary discussions have already begun with the DfE Social Care Advisor who has agreed to facilitate this initiative.

### **3.0 Accelerated Improvement Planning**

- 3.1 The latest refresh of the AIP for April 2020 can be found at Appendix A. This refresh incorporates additional thematic improvement actions as they relate to safeguarding and permanence practice and these details are outlined in the last two sections of the AIP.
- 3.2 There are a number of vehicles that contribute to the delivery of the AIP, including the Improvement Activity Grid, the Essentials 2.0 and 3.0 Programmes and the new Practice Fundamentals Tool. The updated position regarding each of these is outlined below.
- 3.3 The Improvement Activity Grid (IAG), found at Appendix B, sets out the details of the improvement work plans for each of the Improvement Advisors who are leading and supporting specific improvement activities across the service. The improvement activity is led and coordinated by a lead independent improvement consultant working closely with the Director (Children's Safeguarding and Care). In this way the improvement agenda remains at the heart of practice and core service delivery.
- 3.4 The IAG planning ensures the prioritisation, sequencing and dependencies for the improvement activity undertaken with individuals, specific teams, service areas and across the department as a whole.

- 3.5 A Children's Services Improvement Executive meeting continues to be convened on a weekly basis so that senior leaders and the lead improvement consultant can share information, review activity, progress and impact evidence, problem solve together and make decisions about next steps.
- 3.6 The detail of the refreshed AIP for April 2020 in respect of activity, impact and next steps is set out in the remainder of this report from points numbered 4.0 to 11.0 below.

#### **4.0 Quality of Practice – emphasising quality control as well as quality assurance activity**

- 4.1 The 2019/20 quarter 4 core audit findings reported that 1% of the practice was outstanding; 28% was good; 51% required improvement to be good and 20% was inadequate. Over time, the proportion of work judged to be good and better has increased and the rate of work rated as inadequate has decreased. Despite this positive trajectory, the overall proportion of good or better practice is not yet sufficient and the pace of progress has been too slow.
- 4.2 The key findings and learning arising from the core audit programme have provided consistent messages over time and refer to the need for core social work practice to be performed consistently well to bring impact and deliver improved outcomes for children, young people and their families. To achieve this everyone in the service must be accountable on an individual and collective basis. This requires a shift in focus of quality assurance activity so that there is a greater emphasis on controlling the quality of practice. Accountability and quality control have become increasingly dominant features of local improvement activity. Without that emphasis it is highly likely that the impact of quality improvement activity will be impaired and future quality assurance activity will simply continue to report the same or very similar findings, with the pace of progress not maximised.
- 4.3 In order to accelerate impact and address the overall proportion of practice that remains inadequate, as well as practice that requires improvement to become good, the focus has had to shift in order to focus on improving quality control. This is necessary to ensure that practitioners will hold themselves to account and take active steps to control the quality of their practice. In the same way, managers will hold themselves and their supervisees to account by controlling the quality of their supervision and management oversight - and will stop signing off or authorising any practice that does not meet the required standard.
- 4.4 To ensure practitioners and managers are consistently and comprehensively supported to recognise features of good practice so that they can control the quality of their work a new Practice Fundamentals Tool has been launched. This can be found at Appendix C. There are four key points about the Practice Fundamentals which have informed the communications launch strategy and include consideration of the provenance, accountability, connectivity and sustainability of this approach. These have been communicated with all staff as part of the launch process which occurred on 22 May 2020. These changes are also captured in a substantial revision of our Quality Assurance and Performance Management Framework (May 2020).
- 4.5 In terms of provenance, research indicates that on an improvement journey to becoming a 'Good' or 'Outstanding' local authority, the starting and finishing points should be firmly fixed on the basics of practice. In Gloucestershire we have drawn these basics together into the 'Practice Fundamentals' Tool. The Practice Fundamentals have been compiled from what we already know and have learnt including GCC's Practice Standards (which are drawn from national best practice, Ofsted guidance and local learning), the Essentials Programme principles, the Post-Qualifying Statements (the Knowledge and Skills Statements from the DfE National Assessment and Accreditation System), our Performance and Quality Assurance frameworks and local improvement lessons.
- 4.6 In terms of purpose, as the Practice Fundamentals are the 'bottom-lines' or 'givens' of good professional practice, a simple tool, or aide memoire, to enable staff to compare practice against

to ensure that they are meeting the expectations of the profession and delivering good social work with local children, young people and families. As staff deliver work directly with children and families, arrive at decisions, and finalise recording, they become individually and collectively accountable for it. As accountable professionals, practitioners and managers will ensure that they are meeting these Practice Fundamentals in pursuit of good outcomes for children, young people and families. Until practice meets these expectations managers should not be signing off and putting their name, and the name of Gloucestershire County Council, to it.

- 4.7 In terms of connectivity, the Practice Fundamentals will increasingly be a central point of focus. As such, they connect to local initiatives like 'Language that Cares', the development and delivery of future Academy learning, the Essentials 2.0 Programme and the new Essentials 3.0 Programme, plus the actions arising from GSCE Serious Case Reviews. Their use will be encouraged in supervision as staff reflect on practice, and future thematic Quality Assurance activity will be connected to them. They should be the 'touchstone' that practitioners and managers keep coming back to.
- 4.8 In terms of sustainability, as mentioned above, the basics of social work practice remains the focus for improving authorities even when they are rated 'Good' and 'Outstanding'. The Practice Fundamentals will therefore remain a priority in Gloucestershire for many years to come. They are already woven throughout the refreshed improvement planning activity, and will be pivotal within continuing professional development and career progression.

## **5.0 Essentials 2.0 and 3.0 Programmes**

- 5.1 To date, quality assurance activity focusing on the evidence of the Essentials 2.0 Programme in practice, confirms that where this is being properly applied by practitioners, and reinforced by managers, good quality practice is achieved. The plan is for the Essentials 2.0 Programme to continue for all new starters and staff needing refresher sessions. Unfortunately, due to COVID-19, delivery of the programme was interrupted but will be resumed on a remote basis as our IT systems improve and confidence in delivery is secured. To date, a total of 304 (69.72%) out of 436 staff have completed all three of the Essentials 2.0 Programme modules and 373 (85.55%) of 436 staff have completed all or some of the Essentials 2.0 Programme modules.
- 5.2 The Essentials 2.0 Programme methodology and use of the Essentials Tools have been very well received by practitioners and managers. Based on feedback and learning to date the Social Work Academy, in consultation with GCC Ambassadors, where appropriate, have been developing the Essentials 3.0 Programme content. This focuses on parental mental ill health, substance misuse, domestic abuse, parental capacity for change and relational practice. These areas have been highlighted in successive GSCE Serious Case Reviews as areas requiring continuous development.
- 5.3 The Essentials 3.0 Programme modules are currently in development. The Relational Practice module has already been completed and is now ready for implementation. The Social Work Academy is finalising arrangements to secure a remote delivery platform and is completing the implementation schedule ready for launch and promotion with staff. It is proposed that staff that have completed all three Essential 2.0 Programme modules will be prioritised for the Essentials 3.0 Programme.

## **6.0 Supervision and Management Oversight**

- 6.1 Further work has been undertaken to investigate the underlying issues regarding the poor casework supervision reporting which was unacceptably low at 37% in April 2020. In comparison, professional supervision was reported at 87% in April 2020. The interim Director (Children's Safeguarding and Care) took immediate action to address casework supervision which revealed that a number of Team Managers were non-compliant with recording standards. Despite a

previous service directive to record casework supervision on the Liquid Logic supervision template in the 'forms' section, several Team Managers have continued to record casework supervision in the case notes section of Liquid Logic. As a result it is likely that casework supervision was undertaken but would not have been captured in the electronic reporting process.

- 6.2 A new team by team performance report about casework supervision has now been produced and distributed to Heads of Service to inform discussions between them and individual Team Managers. Where required, ICT support has been provided. All Team Managers have been informed there is zero tolerance for any continuing non-compliance. It is anticipated that this will result in an improvement when the casework supervision report is next run. Within one week of the above action, as at 19 May 2020, casework supervision reporting had already improved to 49%, although it is acknowledged that this needs to continue to improve in order to meet target. Formal HR performance management procedures will be considered for any Team Managers who continue to be non-compliant.
- 6.3 Children's social care services have recently signed up to be a Phase II Pilot Site for the Department for Education (DfE) National Assessment and Accreditation System (NAAS). This will support a focus on core social work competencies as defined by the Knowledge and Skills Statements (KSS) and Post Qualifying Standards (PQS) outlined by the DfE. The focus of the scheme is intended to support employers to raise the national standard and consistency of practice and improve outcomes for children. Practice endorsement processes include supervision, performance management and learning and development.
- 6.4 Individual coaching continues with a number of identified managers across the service, although overall coaching capacity has reduced following the recent appointment of the interim Director (Children's Safeguarding and Care). The impact of coaching continues to bring focus, grip and pace by supporting managers to take proactive steps to achieve identified goals.

## 7.0 Timeliness of visits

- 7.1 Progress has been made and sustained regarding the timeliness of visits, including during the COVID-19 pandemic in April 2020. This is positive and encouraging and has been achieved through a concerted effort to target staff resources, embrace the value of scrutinising web reports and recognising how essential visiting is to ensure the safety and wellbeing of children and young people.
- 7.2 The latest performance data is outlined below and includes the breakdown of children seen in person or remotely which is also positive and reassuring during the pandemic. In addition, the timeliness of initial s47 visits in April 2020 was 87%. The on-going challenge now is to continue to improve and embed visiting performance whilst ensuring that all visits are purposeful, focus on the experience of the child and that recording is up to date and meets a consistently good standard.

Type of visit	Performance	Seen Physically (in person)	Seen Remotely (via ICT/digital)
CIN	86%	76%	10%
CP	92%	85.5%	6.5%
CIC	96%	88%	6%

## 8.0 Communication – Hearts and Minds:

- 8.1 More recently, possibly because of the increased frequency and level of communication in relation to the COVID-19 business continuity planning, feedback from the children's social care workforce has been more effective and dynamic. Children's Services Bronze Group Meetings have recently reduced to three times a week with all Heads of Service and the Senior Leadership Team. An action

tracker is updated at each meeting. A Silver Group Meeting takes place with the Senior Leadership Team twice a week.

- 8.2 As a result of a recent change made by the Director (Children's Safeguarding and Care) there is now an extended monthly Bronze and Leadership Team Meeting which includes all Service Managers. Following each Bronze Group Meeting, Heads of Service convene shadow meetings with their respective management teams to ensure that key messages are communicated in real time and that any additional questions or pressures are fed back into the Bronze Group Meetings, and escalated if necessary and appropriate.
- 8.3 A corporate staff survey undertaken between 22 and 29 April 2020 confirmed that, despite initial uncertainty regarding the impact of the COVID-19 pandemic on the children's social care services, 79% of Children's Services staff reported that they were working remotely. Furthermore, on a scale of 1 to 5 the majority of Children's Services staff scored a 4 in terms of feeling 'mostly satisfied' with information and communication, ICT support and home working arrangements.
- 8.4 A COVID-19 children's social care staff tracker has been in place since the start of the pandemic. This is updated on a daily basis and reviewed at every Bronze Group Meeting. The staff tracker currently reports a very positive position regarding staff availability for work with decreasing levels of overall sickness and no staff reported sickness in relation to COVID-19 symptoms. Some staff are shielded as a result of identified health needs and continue to work remotely.
- 8.5 During the COVID-19 pandemic to date, twenty three technical Briefing Notes have been issued to staff. These are followed up in supervision and team meetings to ensure that the detail and spirit of the communication is received, understood and acted upon in the manner intended. The Briefing Notes are used to share information about service developments and adjustments in relation to a wide range of issues from visiting and keeping in touch with children and families, undertaking remote court care proceedings, performance and case recording, early help and targeted support services etc. Feedback from practitioners and managers state that these are clear, helpful and easy to access.
- 8.6 The recent easements which have been introduced as a result of the Adoption and Children (Coronavirus) (Amendment) Regulations 2020 have largely not been applied by the local authority due to the resilience in the current staffing, although some reasonable adjustments have been necessary to ensure that certain activities are able to continue safely without risking the spread of COVID-19. These are mostly in relation to fostering and adoption, the latter through our Regional Adoption Agency, Adoption West.

## **9.0 Development and Improvement of Safeguarding Provision**

- 9.1 As already mentioned above, the AIP has been adjusted to incorporate specific thematic issues regarding safeguarding and permanence as these have been highlighted as critical areas of practice that require targeted improvement. Details of recent activity in relation to safeguarding are outlined below.
- 9.2 In respect of child protection, the end to end pathway was reviewed by the interim Director (Children's Safeguarding and Care) in their former role as an independent Improvement Consultant. This review identified areas for improvement, particularly in respect of management oversight and decision making regarding the quality of requests and application of thresholds for convening strategy meetings, the high proportion of s47 child protection enquiries that do not proceed to an initial child protection conference, the timeliness of initial child protection conferences and the high proportion of children subject to a second and subsequent child protection plan.

- 9.3 Since February 2020, improved practice guidance was issued in relation to convening strategy meetings which now require authorisation by a Team Manager. Further scrutiny of the threshold, quality and decision making in relation to strategy meetings is scheduled, pending confirmation with relevant partners, for June 2020. Whilst recent improvements have been reported by the Police in informal feedback, it is anticipated that there is still further room for improvement.
- 9.4 The timeliness of initial child protection conferences has improved but performance still remains below target. Recent analysis indicates that whilst delays were previously due to the Child Protection Conference Team the reason for current delays are due to the operational teams and the availability of family members. Heads of Service are now responsible for authorising requests for initial child protection conferences so that they are more accountable for controlling the quality, thresholds and timeliness of initial child protection conference requests. A targeted thematic audit is currently underway to further test the impact of the Heads of Service intervention.
- 9.5 Whilst review child protection conferences are generally timely, child protection plans need to be a lot SMARTer and would have more impact if there was greater focus on the child's experience. In order to add scrutiny to children who have had a child protection plan for 9 months, which is the point of the second review child protection conference, Heads of Service are now required to undertake a review and pay particular attention to the impact that the child protection process has had to bring about meaningful change for the child. As part of this 9 month review Heads of Service are required to consider the need for a Legal Planning Meeting where children are likely to continue to suffer significant harm of abuse or neglect, especially when parents are unwilling and/or unable to make and sustain the necessary changes to improve the child's outcomes.
- 9.6 Hampshire Children's Services were commissioned to undertake an independent audit to determine a baseline for children who have been subject to repeat child protection planning for a second or subsequent time. The audit process aimed to identify practice themes and issues through a review of the child's electronic record. Hampshire's audit report focuses on a sample of 41 children, with an additional 19 siblings, giving a total audit cohort of 60 children. Although overall numbers vary each day there are currently 686 children subject to a child protection plan, of which 234 have a repeat plan for a second or subsequent time which is approximately a third of all children subject to a child protection plan. The table below sets out the current position regarding repeat child protection plans:

Repeat Child Protection Plans for a second or subsequent time (as at 19.05.2020)		
Number of plans	Number of Children	Percentage
1	452	65.9%
2	195	28.4%
3	30	4.4%
4	7	1.0%
5	2	0.3%
Total	<b>686</b>	100.0%

- 9.7 The Hampshire audit report has recently been received. The report concludes with a number of concerns and there are six key recommendations including a need to focus on:
- Addressing management oversight
  - Reinforcing SMART planning
  - Introducing three monthly case summaries
  - Completing chronologies
  - Using escalation

- Repeating the audit in 6 months' time

- 9.8 A mandatory meeting has been convened with Heads of Service for the Operational and Reviewing Services, and the Improvement Advisors on 1 June 2020. The meeting will discuss the audit findings and recommendations and agree appropriate remedial action which will be tracked via the AIP. The meeting will also focus on the internal permanence audit which is referred to below in point 10.0.
- 9.9 In terms of legal planning and court action, children's social care has adapted very well to manage the impact of COVID-19 in respect of conducting court care proceedings on a remote/virtual basis. A considerable amount of additional activity has taken place, including extensive ICT support and development, to ensure that on-going care proceedings are able to progress as scheduled using compatible ICT platforms. Inevitably some court hearings, including contested final hearing and finding of fact hearings for example, will need to be postponed until after the pandemic. All new care proceedings are being triaged and prioritised according to what is most urgent and critical. Despite these difficult circumstances, we continue to issue proceedings for children identified in improvement work earlier this year to reduce our use of s20 of the 1989 Children Act (see below, 10.3). A recent meeting with HH Judge Wildblood confirmed positive working relationships, including in relation to a recent mock trial hosted by HH Judge Wildblood for Gloucestershire children's social care staff and complimentary feedback in respect of a particularly challenging set of care proceedings involving the legal protection of a child following the alleged murder of their younger sibling by the parents. A quasi court room has been established in Shire Hall and Cheltenham Locality to support parents to participate in remote hearings and this is proving to be very beneficial, though still not without some technical difficulties.
- 9.10 It is anticipated that the legal protection for children will be strengthened further with input from an Ofsted Inspector who is seconded to children's social care services during the COVID-19 pandemic. The role of the seconded Ofsted inspector whilst they are working in the local authority will include an additional layer of scrutiny designed to improve the quality of evidence for Legal Planning Meetings which will hopefully streamline the process for securing legal protection for children. The Public Law Outline focuses on the importance of front loading the pre-proceedings preparation and it is anticipated that this activity will address the high proportion of Legal Planning Meetings that lead to no further action as a result of weak evidence and/or an inability to establish a legal threshold. The preparatory work for this activity has already been completed and work started on 18 May 2020.

## **10.0 Development and Improvement of Permanence Provision**

- 10.1 A recent permanence audit was completed to test the quality and compliance of permanence planning for children in our care. This also determined how effectively permanence plans lead to timely legal, physical and emotional permanence and assessed how effective the reviewing system is in helping to achieve permanence. The audit report has recently been completed and will be addressed in the meeting already mentioned above with Heads of Services and Improvement Advisors scheduled for 1<sup>st</sup> June 2020. A video conference training session for Independent Reviewing Officers will take place on 27 May to address the findings as they relate to that role.
- 10.2 The audit cohort examined casework records for 59 children in care, including 16 children who had been in care for five to six weeks (comprising of 27% of the audit cohort and 100% of all children in care for length of time), plus 21 children who have been in care for five to six months (comprising 36% of the audit cohort) and 22 children who have been in care for 12-16 months (comprising 37% of the audit cohort).
- 10.3 The quality of permanence planning found within this audit does not provide assurance of good practice. Recommendations include:

- Bite-size learning programme using Practice Fundamentals
- Roadshow or webinar events
- Launch whole system permanence guidance
- Urgently review existing tracking mechanisms
- Undertake targeted work with the IRO service
- Test progress by follow-up dip-sampling in three months' time

10.4 An extensive review of all children and young people subject to Section 20 accommodation arrangements was undertaken by the lead Improvement Advisor in consultation with Heads of Service. Gloucestershire was an outlier when compared to other local authorities. The impact of the review has seen an overall decrease of 3% since October 2019. New section 20 entrants to care so far have halved in 2020 when compared to 2019, from 99 (49%) to 48 (24%).

10.5 Children whose plans were drifting or delayed have been identified for priority action. This included reunification home and initiating court care proceedings. At the end of March 2020, care proceedings had been initiated for 23 children subject to section 20 arrangements and pre-proceedings had commenced for 17 children who were subject to section 20 arrangements. As a result, 19% of all children subject to section 20 arrangements were in proceedings or pre-proceedings at the end of March 2020.

10.6 Through a further review and triage process, section 20 arrangements were confirmed for the remaining children. Some of these children entered care at 16 or 17 years of age although for many who had a history of being known to the service earlier court action should have been taken to secure alternative permanent care at a much younger age. Overall, by the end of March 2020 there was evidence of improved focus, pace and management grip in that it was agreed section 20 remained appropriate or action was being taken to end these arrangements.

10.7 COVID-19 temporarily slowed progress as children's social care, legal services and the courts adjusted to new ways of working. Court care proceedings have now however continued to be initiated for some children subject to section 20 arrangements in order to determine their legal, physical and emotional permanence. Sustained impact will be tested at a half-day session scheduled in June 2020 when progress will be further reviewed. Whilst there is inevitably a time lag before a significant drop in numbers is seen, particularly because legal planning, pre-proceedings, care proceedings and reunification take time to conclude, it is important to note that there is a means to be assured that active work is underway.

10.8 Following Ofsted's 7<sup>th</sup> monitoring visit in September 2019 a number of specific recommendations were made and these have been addressed, although some practice and performance has been impacted by the COVID-19 pandemic. The April 2020 performance reports that Care Leavers with an up to date Pathway Plan was 88%, Care Leavers in Employment, Education and Training was 47% and Care Leavers living in suitable accommodation was 92%. Targeted action has been taken to stay in touch with Care Leavers to counter the adverse impact of social isolation which many young people are finding particularly challenging.

10.9 Quarterly pathway planning audits for children in care and care leavers continue to be undertaken by the Children in Care and Care Leaving Service. The most recent quarterly audit was undertaken in April 2020. The audit cohort included 20 children in care and 20 care leavers aged between 11 and 25 years of age. The audit aimed to determine the:

- Use and impact of the Pathway Planning Tool and Outcome Star

- Use of the Essentials 2.0 Programme Anchor Principles in risk and analysis
- Quality of the plan for example SMART actions
- Implementation of the style of writing the PWP in the first person

10.10 The April 2020 RAG rated audit outcomes are outlined below and set alongside the outcomes for the previous two quarters for comparison:

<b>April 2020</b>	Green	Amber	Red
Children in Care	8 (40%)	11 (55%)	1 (5%)
Care Leavers	3 (15%)	8 (40%)	9 (45%)
<b>January 2020</b>			
Children in Care	3 (21%)	5 (35%)	6 (43%)
Care Leavers	13 (56%)	10 (43%)	0
<b>November 2019</b>			
Children in Care	2 (9%)	10 (45%)	10 (45%)
Care Leavers	1 (4%)	14 (66%)	6 (28%)

10.11 The April 2020 pathway planning audit outcome shows a steady and continuing improvement in the quality of pathway plans for children in care. Pathway plans were considered to be up to date for 95% of children in care and 70% of pathway plans were up to date for care leavers. Writing in the second person can strengthen the quality of the Pathway Plan but it isn't always necessary. Two of the green rated plans were written in the third person but judged to be of good quality and written using concise, age appropriate and clear language. Quality of pathway plans for care leavers was not at an acceptable standard, too many were RAG rated as Red and were therefore judged to be inadequate. This is deterioration from the January 2020 audit

10.12 Following Ofsted's 8<sup>th</sup> monitoring visit in February 2020 a targeted improvement action plan has been developed to address the significant concerns about evidence of a decline in practice in the Disabled Children and Young People's Service (DCYPS). The priority actions are designed to meet the standards required for all children and young people. At the time of the monitoring visit a high turnover of social workers and underperforming Team Managers was a particular challenge. More recently management and leadership have been strengthened and there is now an opportunity to focus on the identified performance issues which include staffing, management oversight, planning, intervention and transition.

## **11.0 Workforce performance management**

11.1 In order to deliver the identified priority improvements it is important to ensure that staff receive appropriate support and challenge. The Director (Children's Safeguarding and Care) has targeted three workforce performance management activities that are currently underway to ensure that specific staff issues are rigorously addressed and these include RAG rating social worker and team performance, supervision compliance and attendance on the Essentials 2.0 Programme.

11.2 The Performance Team continues to provide a monthly report to RAG rate individual social workers and teams where performance has been rated as Red / Amber for 3 plus months. The position regarding social worker's individual performance has continued to improve over time. The RAG rating is completed across a number of priority key performance indicators. In April 2020 the report revealed the following position:

- 14 social workers RAG rated Amber / Red for 3 + months
- 26 teams RAG rated Amber / Red for 3 + months
- Of the above 26 teams, 6 teams have been RAG rated Amber / Red for 18 + months

- 11.3 A performance tracker is now in place for completion by the relevant Head of Service for review with the Director (Children’s Safeguarding & Care) in monthly 1:1 supervision sessions. The Director and HR Business Partner will further review the updated tracker during monthly workforce review meetings. Heads of Service are required to account for the issues, actions and progress with individual social workers and teams. They are well placed to reflect the relevant history, context and intelligence, particularly in respect of legacy issues which some new starters and newly allocated staff are being asked to address. It would be inappropriate to penalise these staff for inheriting poor practice and performance but positive progress will be expected nonetheless. It is anticipated that where necessary formal HR procedures will continue to be initiated and progressed to address any capability and/or conduct issues where appropriate to do so.
- 11.4 As mentioned above, Team Manager case work supervision recording compliance is also being tracked and reported on a team by team basis. As some very recent improvement has already been noted it is anticipated that this will be an improving picture although if this is not the case formal HR procedures will be undertaken to address any capability and / or conduct issues where it is appropriate to do so.
- 11.5 According to pre-COVID-19 Academy records, a total of 363 staff out of a total of 436 have completed some or all modules in the Essentials 2.0 Programme: 304 have completed all three modules; 43 have completed two modules; and 26 have completed 1 module. Overall, staff who have completed all three modules account for 73% of the staff group. The individual staff that still need to complete one, two or all three of the modules are known and will be prioritised when the Academy virtual training programme resumes. To ensure that all staff attend the Essentials 2.0 Programme progress will be reviewed by the Director (Children’s Safeguarding and Care) with Academy staff. Despite the interruption brought about by COVID-19 this remains a key focus moving forward.
- 11.6 The table below outlines the break down of staff attending the Essentials 2.0 Programme from each of the Locality and Service areas and highlights the numbers that have attended none of the modules and those that have attended one, two or all three of the modules:

Locality/Service Area	Completed all 3	Completed 2/3	Completed 1/3	None completed
Gloucester (including TACS) Locality	62	5	4	22
Forest of Dean Locality	24	3	5	1
Tewkesbury Locality	24	1	2	6
Cheltenham Locality	41	8	5	6
Cotswolds Locality	20	2	1	4
Stroud Locality	28	2	3	6
11-25 Permanence Service	51	6	1	7
0-11 Permanence Service	14	2	1	4
Disabled Children & Young People’s Service	14	2	3	1
DCYPS Early Help	9	7	0	3
Child Protection & Independent Reviewing	17	4	1	3
<b>TOTAL (Staff Group 436)</b>	<b>304</b>	<b>43</b>	<b>26</b>	<b>65</b>

## 12.0 Conclusion

- 12.1 This report provides a summary overview of the improvement activity currently underway within children’s social care services. It sets out the improvement architecture and leadership that is in place to address the practice and performance challenges to enable the service to achieve good and better outcomes for local children and families in Gloucestershire.

- 12.2 Current practice and performance evidence and intelligence indicates that improvement activity must continue to focus on the agreed priorities, with a more forensic grip and accelerated pace, in order to bring about the nature and level of professional accountability that is required to consistently meet the established fundamentals of good social work practice.
- 12.3 Over the past few weeks, in response to changing circumstances, the service has received new senior leadership, with the appointment of an interim Director for Children's Safeguarding and Care, and has adapted to a new way of working, as a result of the COVID-19 pandemic. The service has risen to these challenges by refreshing elements of its approach to improvement whilst maintaining and further developing a comprehensive range of targeted improvement activities.
- 12.4 Whilst progress continues to be made it remains a challenge to embed and sustain widespread and consistent improvement at the pace that is required. Each day that social workers practice is however a day to improve outcomes for Gloucestershire's children and families and, at the same time, satisfy the regulatory standards set by Ofsted. For however long the COVID-19 pandemic lasts this presents an opportunity for the service to re-double its efforts to deliver impact and achieve positive outcomes. Whilst the pandemic clearly presents new challenges this must not detract from the importance of sticking steadfastly to the detail of the AIP.
- 12.5 The mood within the children's social care workforce at the moment is buoyant. The COVID-19 children's social care staff tracker continues to report diminishing levels of sickness with no staff absence in relation to COVID-19 symptoms. With the overall level of sickness being reduced there is sufficient capacity and resilience within the workforce to continue to deliver services. The threat of the COVID-19 pandemic appears to have promoted a level of comradery and positivity which provides a solid platform upon which to build. The workforce will continue to require a restorative approach of challenge and support to embrace the nature and level of change and improvement that are still required. With this in mind, the importance of corralling the workforce around a common purpose remains critical and the time is right to revisit the underpinning vision, values and behaviours, maintain positive communication and promote compelling leadership to deliver on the improvements that are required.

**Gail Hancock**  
**Interim Director (Children's Safeguarding and Care)**  
**08.07.2020.**

## Appendix B – Improvement Activity Grid

### Improvement priorities planning grid: 19 May 2020

AFI	SAFEGUARDING					Priority level	H	X	M	L
Issues	Decision-making at key points, core practice; management oversight.									
Evidence	<b>Performance data March 2020.</b> Low conversion rate s47 – ICPC. Dropping ICPC – CP plan rate. High rate of re-referral. <b>CP system overview report Jan 2020, Ofsted MV Feb 2020, Hampshire CC report 20 April 2020.</b> Management oversight and supervision; summaries and chronologies; recording of visits; thresholds for ending plans/escalating from plans; CP plans; reduced M/A work over time; lived experience of child; managing complexity including neglect and CSE.									
Services	Safeguarding, DCYPS			Teams	MASH, Assessment, Safeguarding, DCYPS, CP Chairs					
Improvement outline	Action	Who?	When?	Delivery status	Status RAG	Impact	Impact RAG			
Ensure there is good quality management oversight.	Coaching identified managers to strengthen MO.	SR	Rolling programme	Resumes May 2020						
Neglect toolkit: improve quality and consistency of approach to identifying and responding to neglect.	Follow-up launch workshop to test impact and embed – sampling, targeted virtual sessions (team/service) using <i>Fundamentals</i> and appreciative enquiry.	KJ/TL	June/July 2020	Planning and design		19.05.20 Locality update sessions delivered				
Embed pre-birth protocol in GCC CS, ensuring timely and good quality responses and effective partnerships.	Virtual sessions with all localities/services.	KJ	March/April 2020	Complete						
	Continue activities aimed at partnership and service development, including early help.	KJ with Commissioning	May-July 2020	Underway, on target.						
	Test extent to which embedded, quality and impact through case sampling.	KJ/TL/KC	Sept 2020	Planning						
DCYPS: respond to MV findings	Urgent completion and implementation of SMART improvement plan by HoS using <i>Fundamentals</i> principles..	SR	May 2020	Second draft awaited from HoS.						
Child protection system: ensure processes and practice are fit for purpose and serve	Revisit recs from overview report, cross-reference to those from Hants and Ofsted, complete implementation of process changes.	SR	May 2020	Not yet underway. Ok for update report end May.						
	Child protection system: develop and	SR/RT	June 2020-Sept	<i>Practice</i>						

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AFI	SAFEGUARDING			Priority level	H	X	M	L
Issues	Decision-making at key points, core practice; management oversight.							
Evidence	<b>Performance data March 2020.</b> Low conversion rate s47 – ICPC. Dropping ICPC – CP plan rate. High rate of re-referral. <b>CP system overview report Jan 2020, Ofsted MV Feb 2020, Hampshire CC report 20 April 2020.</b> Management oversight and supervision; summaries and chronologies; recording of visits; thresholds for ending plans/escalating from plans; CP plans; reduced M/A work over time; lived experience of child; managing complexity including neglect and CSE.							
Services	Safeguarding, DCYPS			Teams	MASH, Assessment, Safeguarding, DCYPS, CP Chairs			
Improvement outline	Action	Who?	When?	Delivery status	Status RAG	Impact	Impact RAG	
to protect children.	deliver tailored virtual <i>Practice Fundamentals</i> programmes... ...(materials, team sessions, webinars) to SWs and managers.		2020	<i>fundamentals</i> summary doc... ...agreed.				
Review and make identified improvements to quality of decision-making by child protection conferences.	Thematic audit of decision-making including not to implement a plan and category. Collate findings and learning to inform development and implementation of tailored <i>Practice Fundamentals</i> and any necessary changes to procedures and guidance.	RE, PR, TL, KC	May 2020	Proposal developed as pilot. Fieldwork underway, on target.				
Improve the quality of reporting to legal planning so that the right decisions can be made at an early stage..	Ensure new templates embedded.;	SR	May-Sept 2020 initially	NB joins May 20. Discussions underway with JM to confirm workflow. Legal Services support the initiative.				
	QA of completed LPM docs for quality, providing developmental feedback to SWs and TMs	Nicola Bennet						
	Use the learning from NB QA to develop and deliver materials using <i>Practice Fundamentals</i> materials and guidance.	SR						
Discharge from Hospital Protocol	Complete roll-out. Respond to inconsistent use with targeted briefings.	KJ	June 2020	Underway, on target				
Improve the quality of practice in Tewkesbury	Targeted audit/sampling with follow-up individual and team inputs including coaching.	KJ, SR	Continuing	Performance improvements recently. <b>Decision needed on whether to end.</b>				

## Appendix B – Improvement Activity Grid

<b>AFI</b>	<b>SAFEGUARDING</b>				<b>Priority level</b>	<b>H</b>	<b>X</b>	<b>M</b>	<b>L</b>
<b>Issues</b>	Decision-making at key points, core practice; management oversight.								
<b>Evidence</b>	<b>Performance data March 2020.</b> Low conversion rate s47 – ICPC. Dropping ICPC – CP plan rate. High rate of re-referral. <b>CP system overview report Jan 2020, Ofsted MV Feb 2020, Hampshire CC report 20 April 2020.</b> Management oversight and supervision; summaries and chronologies; recording of visits; thresholds for ending plans/escalating from plans; CP plans; reduced M/A work over time; lived experience of child; managing complexity including neglect and CSE.								
<b>Services</b>	Safeguarding, DCYPS			<b>Teams</b>	MASH, Assessment, Safeguarding, DCYPS, CP Chairs				
<b>Improvement outline</b>	<b>Action</b>	<b>Who?</b>	<b>When?</b>	<b>Delivery status</b>	<b>Status RAG</b>	<b>Impact</b>		<b>Impact RAG</b>	
Implement SCR and DHR action plans	Respond to findings about practice through practice learning sessions in localities	KJ, Dave Jones	Continuing	Underway					
Improve all elements of core practice: assessment, planning, purposeful intervention, recording, management oversight	Roll out <i>Practice Fundamentals</i> summary document through dissemination, manager briefings, staff briefings, using service-specific case examples.	RT/Academy	From May 2020	Key document agreed. Roll-out not yet underway					

## Appendix B – Improvement Activity Grid

AFI	CHILDREN IN CARE, PERMANENCE AND CARE LEAVERS				Priority level	H	X	M	L
Issues	Gateway to care (compliance and quality); s20; unregulated connected persons placements; understanding and application of permanence planning; sufficiency (fostering service),								
Evidence	BAU monitoring (data and processes); full audits; thematic audit (permanence)								
Services	Safeguarding, Permanence, Fostering			Teams	Permanence teams; Fostering teams				
Improvement action	Action	Who?	When?	Delivery status	Status RAG	Impact		Impact RAG	
Ensure there is good quality management oversight.	Coaching identified managers to strengthen MO.	SR	Rolling programme	Underway					
Ensure entry to care is compliant with GCC and statutory requirements	Introduce HoS five-day checklist.	GH	May 2020	Agreed 6 May for immediate implementation in LL. <b>Testing this week?</b>					
	Develop succinct guidance for SWs and TMs setting out what they must do when a child comes into care.	GH	June 2020	Not yet underway but will be based on the HoS checklist and reflect <i>Fundamentals</i> .					
	Continued monitoring to ensure legal and procedural compliance including Reg 24 and 25.	GH	Continuing	Underway					
Ensure placements with parents comply with legislation and regulation.	Continued QC of approval docs. and GCC guidance.	GH	Continuing	Underway					
	Issue reminder to staff and managers – compliance and quality requirements	GH	May 2020	Scheduled end May 2020. In hand.					
	Learn lessons from QC and use to inform WFD, particularly re assessments and plans.	GH	July 2020	Not started					
Reduce s20 rate and ensure it is only used where appropriate.	Intensive tracking to ensure action taken where s20 not appropriate; clear management rationales recorded where it is appropriate.	SR	Feb 2020	Complete		Pre-Covid the number of inappropriate s20 cases reduced			

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AFI	CHILDREN IN CARE, PERMANENCE AND CARE LEAVERS				Priority level	H	X	M	L
Issues	Gateway to care (compliance and quality); s20; unregulated connected persons placements; understanding and application of permanence planning; sufficiency (fostering service),								
Evidence	BAU monitoring (data and processes); full audits; thematic audit (permanence)								
Services	Safeguarding, Permanence, Fostering			Teams	Permanence teams; Fostering teams				
Improvement action	Action	Who?	When?	Delivery status	Status RAG	Impact	Impact RAG		
Embed routine tracking by HoS of s20 to ensure progress sustained.	Deliver learning roadshows to brief SWs and managers on uses and abuses of s20	SR	Feb	Complete		significantly.			
	Review HoS trackers and oversight of s20, using a triage session with HoS, legal and others to confirm position..	SR	June 2020	Scheduled					
Ensure all children in care have a SMART permanence plan no later than second review.	Complete thematic audit on permanence to evaluate our performance and inform improvement.	TL	May 2020	Fieldwork complete. Report to improvement exec 13 May.		First draft report – sufficient evidence to understand our performance			
	Design WFD programme for delivery rooted in <i>Fundamentals</i> , either through webinars, online learning, email docs or combination	SR/GH	June 2020 onwards	IROs – sorted and providing model for others. On track					
	WFD session for IROs	SR/GH	June 2020	Scheduled on track					
Ensure court documentation (SWET, care plan, VA, parenting assessments etc) are of good quality that enables the court to make good decisions for children.	Add extra layer of quality control to evaluate and improve draft documents; and provide constructive coaching feedback to SWs and TMs.	Nicola Bennett	Jun-Sept 2020	Awaiting NB's start					
	Review NB's QC to capture learning and inform guidance and WFD activities.	SR	Sept 2020	Ditto					
Improve the quality of pathway assessments and plans, ensuring	Complete thematic audit of pathway plans to understand quality.	VL/SR	May 2020	Fieldwork complete					
	Use learning to deliver guidance and WFD that reflects <i>Fundamentals</i>	VL/SR	Jul 2020	Not yet underway					

## Appendix B – Improvement Activity Grid

AFI	CHILDREN IN CARE, PERMANENCE AND CARE LEAVERS				Priority level	H	X	M	L
Issues	Gateway to care (compliance and quality); s20; unregulated connected persons placements; understanding and application of permanence planning; sufficiency (fostering service),								
Evidence	BAU monitoring (data and processes); full audits; thematic audit (permanence)								
Services	Safeguarding, Permanence, Fostering			Teams	Permanence teams; Fostering teams				
Improvement action	Action	Who?	When?	Delivery status	Status RAG	Impact		Impact RAG	
use of tool is embedded									
Improve support to care leavers.	Implement the care leaver service improvement plan and outcomes from partnership day.	MB	From Mar 2020	Partially underway but largely stalled. Needs reinvigorating					
Improve the sufficiency, availability and flexibility of in-house foster care	Complete fostering improvement plan, reflecting QA findings including Anji Parker’s review.	TW	From Mar 2020	Stalled. Action needed.					
	Ensure there is a joined up placement request response between in-house fostering and commissioning	TW/JW	From Mar 2020	Started but problematic. Progress hampered by Covid-19 challenges.					
	Coach HoS, SM and TMs to build their capability to respond to unhelpful attitudes and behaviours that impede progress.	SR	From Feb 2020	Underway, needs accelerating					
Improve all elements of core practice: assessment, planning, purposeful intervention, recording, management oversight	Roll out <i>Practice Fundamentals</i> summary document through dissemination, manager briefings, staff briefings, using service-specific case examples.	RT/Academy	From May 2020	Key document agreed. Roll-out not yet underway					

Gloucestershire County Council

## Practice fundamentals for Children's Services

This is a tool to help all practitioners and managers to achieve and maintain a consistently good standard of practice. It provides an aide memoir and quality control tool to compare our work with before we sign it off and become individually and collectively accountable for it. These fundamentals, or 'bottom-lines', have been drawn together from our practice standards, from the DfE's qualifying standards for workers and managers, from Essentials, from our performance and quality framework, and improvement activities. The tool should be used routinely to ensure that the standard of assessment, planning, support, intervention and reviewing practice reflects the detail of what is required. If it doesn't this should be addressed before the task is completed or the practice is authorised by the relevant line manager.

### Supervision and Management will:

- Promote and govern excellent practice and develop excellent practitioners.
- Shape and influence the practice system, and use power and authority effectively.
- Ensure managers understand and track the needs and risks for children; and provide confident analysis, direction, and decisions.
- Offer guidance, challenge and support to practitioners so that their interventions are purposeful and effective.
- Be regular, reflective and clearly recorded (and filed in the 'Forms' section on Liquid Logic).
- Clearly show the impact of the manager's 'foot print' throughout the journey of the child.
- Ensure the voice of the child, their story and lived experience is known, understood and taken into account.
- Analyse the child's circumstances and the impact of protective factors, needs and risks, and longer term consequences.
- Define the threshold and consider the likely, significant and imminent risk of harm for the child.
- Include specific actions about what needs to change for the child (with realistic timescales).
- Confirm how management direction will be reviewed.
- Evidence critical challenge and address poor practice, drift and delay.
- Be used proactively by staff to work professionally, reflectively and reflexively.

### Visiting and Direct Work will:

- Support children and young people to benefit from a safe, stable and trusting relationship with their worker.
- Help in understanding and respectfully addressing barriers to engaging.
- Be timely, purposeful (guided by the child's plan) and persistent.
- Include a schedule of planned activity with the child and parent(s)/ carer(s) when they are seen.
- Ascertain the child's independent views, wishes and feelings and take these into account in planning and decision making.
- Work together with parents/carers, including those who are separated, divorced or live apart from the child.
- Support the development of a safety plan where needed, and identify a trusted adult to build safety for the child.
- Help children to address their worries and concerns by explaining what is happening and why.
- Include a variety of approaches in line with the child's age, understanding and preferences, e.g. observation, play, structured activities/tools and verbal interaction.
- Reflect and promote Systemic Practice principles and tools as the emerging model of social work practice.

### Assessments will:

- Be timely, proportionate and focused on the relevant issues.
- Be regularly reviewed, and updated in line with significant life events.
- Be shaped and directed by management oversight provided on days 1, 8, 20 and 40 for all open assessments.
- Take the voice of the child, the views of parents and relevant others into account.
- Give a clear picture of the child's life, what this feels like for them, and what needs to happen to improve it.
- Address the impact of parents' behaviour on the lived experience of the child, including capability and capacity to change.
- Be professionally curious, evidence based and informed by best practice tools and research, including around child development.
- Include consultation and checks with relevant partner agencies and professionals who know the child and family.
- Be informed by an updated chronology of significant events for the child with a genogram/ sociogram.
- Reference the Essentials 'Anchor' and 'Risk Assessment' principles.
- Allow for the use of intervention and safety planning during assessment as needed.

### Planning and Reviewing will:

- Attend to the legal, physical and psychological permanence for children.
- Maintain clear continuity from the assessment and analysis.
- Always reference the Essentials C-SMART planning principles so that the plan maintains focus on the child and represents their views.
- Engage parents, carers, family and friends to identify and build on existing strengths.
- Identify what progress will look like and how it will be evaluated
- Be timely and kept up to date with expected timescales, that keep pace with the child's needs and changing circumstances.
- Learn from, and adapt to, what has previously worked well and less well.
- Include careful consideration of contingency arrangements.
- Include routine consultation with CP Chairs and IROs who will check and follow-up progress for the child through progress checks.
- Evidence the use of Escalation and Dispute Resolution Protocols to challenge decision making and planning when necessary.

### Case Recording will:

- Be written in a clear and concise way with the child in mind.
- Be up to date, accurate, comprehensive and well written in plain English without the use of jargon.
- Provide good quality biographical information for the adult that the child will become in the future.
- Be personal to the child and not simply a duplicate of sibling records.
- Be well laid out so that key information is easy to access and the child's story is easy to navigate.
- Include an analysis of the available information/evidence (working out meaning and implications).
- Include an evaluation of the available information/evidence (making a judgement).
- Include a clear rationale for decisions (giving reasons) and include informative case, transfer and closure summaries.
- Consider the impact of life experiences and our practice on the child.
- Demonstrate how we are using the law, regulatory and statutory guidance (including GDPR) to inform practice decisions.
- Take account of the complex relationship between professional ethics, the application of the law and the impact on both of social policy.



