

TAMESIDE CHILDREN'S SERVICES

12 week action plan

This document draws together three key areas of learning and provides clarity about key actions being undertaken in the next 12 week period through July, August and September 2017.

It draws on;

- The Tameside Children's Services Improvement Plan.
- The work of the Tameside Safeguarding Children Board.
- The work of the independently chaired Tameside Children's Services Improvement Board which agreed that reviewing actions on a 12 week cycle was appropriate.
- Advice from the Department for Education advisors to focus on outcomes (direct impact on children) and outputs (data reports which evidence direction of travel). Three clear priorities have been agreed, namely caseloads, complaince and quality of practice.
- Feedback from the OFSTED monitoring visits.

30 June 2017

July to September 2017 Actions

This delivery document (in part a response to the findings from the Ofsted monitoring visit in June 2017) builds on the existing Tameside Children's Improvement Plan currently in place and sets out a planned escalation to our improvement work.

This set of deliverables will continuue to be actively monitored to ensure direct impact on both outputs for children and outcomes in data reports building on the key arrangements which we have put in place including performance clinics, practitioner group and whole workforce sessions

Ref	Activity	Lead	Date
AP1	 DCS and AED have met with all front line managers and teams to refocus as a priority, the absolute need for compliance with statutory requirements. The key indicators which are the focus in this 12 week period are; Contacts authorised within 24 hours Referrals allocated withing 24 hours of receipt Timeliness of social work assessment Child in need reviews within timescale Initial child protection conferences in timescale Review child protection conferences in timescale Reviews for Looked After children in timescale Pathway Plans for care leavers in place Children and young people are seen at least according to statutory visiting timescales Implement clear and meaningful visual presentation of team performance and business (i.e. flow) data – e.g. information centres Showcase the outcomes for children of improved performance 	Stephanie Butterworth Dominic Tumelty Sarah Dobson	Staff session – 28 June Performance clinics – 20 July / 17 August / 14 September
AP2	Undertake an independent diagnostic to identify key issues and root causes relating to statutory and local compliance and the relationship to quality. The output from the work to provide a root map for changes to compliance and quality processes that will underpin measurable improvements in both areas.	Dominic Tumelty Sarah Dobson	July – August 17
AP3	Further develop the audit process to ensure and accelerate the translation of an improvement in the quality of audit into a measurable improvement in practice – i.e. learning from audit leading to sustainable improvement in practice. Head of Quality Assurance to roll out the QA framework with particular reference to monitoring of audit outcomes so that they become tangible learning actions that are then followed up and checked for measurable improvement.	Katherine Mackay	July 2017

	 Alongside the practice / operational activity about shared understanding of learning, action and impact to be collated and reviewed by Children's Management Team Head's of Service. Supervision , both frequency and quality Recording of decisions Inconsistency of decisions Quality of assessment Use of HR proceedures to address deficits 		
AP4	Undertake a date and intelligence review to develop a clearer understanding of what is driving the increase in demand on services. This will include a review of source and route of cases with a view to ensuring work is being directed to the right places to avoid duplication and/or drift and delay. This will also include a wider look at the determinants affecting Tameside as a Borough and the impact of Council wide strategies, e.g poverty To include a review of caseloads understanding historical patterns, expected performance and future projections. The outputs will inform the development of the early help offer (i.e. reduce demand), review of the Hub and access to protection services (i.e. right work in the right place) and flow through the system (i.e. management of caseloads and compliance with timescales).	Dominic Tumelty Sarah Dobson	July- August 17
AP5	 Revise the workforce strategy and develop a specific and measurable action plan to deliver the following by early September 2017: Turnover reduced and stability increased Induction embedded Supervision compliance – both completion of supervision and its quality. Exit interview compliance and learning Accelerating conversion of quality agency workers to permanent employees Reduce caseloads overall and ensure caseload allocation effectively matches experience and skills. Demonstrate that staff sickness levels are stable 	Tracy Brennand Dominic Tumelty	July- August 17
AP6	 Re-launch and embedded compliance with practice standards across all work streams. Articulate what is acceptable and what is not and monitor When do we expect to see improvement and by 	Dominic Tumelty	July- August 17

	 what degree Review and bring together once a week for review by Children's Management Team. 		
AP7	Ensure that the Thresholds Management Group which reports to TSCB and Improvement Board reports in a timely manner on the issues which drive partner referrals, CAF implementation and partner agency training needs	David Niven Stewart Tod	July 17
AP8	Undertake a further comprehensive review of learning from other areas, with a particular focus on those improving following an inadequate judgement to gain qualitative insight into what made the difference and put actions in place. Output to be a menu of opportunities and ideas for Children's Services Management (CMT) to adopt and implement.	Sarah Dobson	July 17