

Children and Young People's Services

Ofsted Action Plan

Following an inspection of local authority arrangements for the protection of children (reported April 2013)

Key to RAG ratings

Green	Action complete or on track to be completed within the Council's target timescale
Amber	Action in progress and / or partially complete but with a low to medium risk of the Council's target timescale not being met
Red	Action is incomplete and at high risk of not being completed within the Council's target timescale

Inspection Finding	Action	Progress to date	Planned work / Next steps	Lead Officer(s)	Target Timescale	Reason for Delay	Performance Indicators (PIs) / Targets / Critical Success Factors (CSFs)	Current Performance	Current RAG rating
Actions to be implemented immediately (April 2013)									
Too much time is currently being taken to gather information and some lower level cases are not being managed within the prescribed timescales. Some lower priority cases are remaining in the MASH longer than the prescribed timescales and there is a backlog of amber and green RAG-rated cases waiting for police background checks to be completed. For some children who do not meet the threshold of significant harm the MASH team takes too long to gather background information which is leading to delay in assessing and meeting their needs.	Ensure that the tracking system for all referrals in the Multi-Agency Safeguarding Hub (MASH) is embedded and that timescales for response outlined in the threshold to services document are met	Action was taken during the inspection to ensure that all managers had improved levels of access to the system. Senior Administrator now in post. MASH CCM module was installed Dec 2013. It has been agreed that the Havering Safeguarding Children Board will take the strategic lead for the oversight and scrutiny of MASH performance.	Continue to monitor achievement of MASH target timescales	Kathy Bundred (Head of Children's Services) Jan Fenn (Performance and Systems Manager)	December 2013	Need to recruit to Senior Administrator post Need to implement additional IT modules to enable tracking	% MASH assessments completed within the target timescale ("Red" = 4 hrs; "Amber" = 24 hrs; "Green" = 72 hrs)	MASH response timescales are currently being met.	Green
Needs arising out of culture and ethnicity are not consistently well considered within assessments. There is insufficient analysis of the	Ensure effective consideration is given to a child or young person's ethnicity, culture, religion and language in	Recording of ethnicity has improved and there is evidence in audits that culture and language is taken into account in individual cases.	Continue to monitor the ethnicity of service users against the child population to ensure that services meet	Kathy Bundred (Head of Children's Services)	Ongoing	N/A	Recording rate of ethnicity Effective consideration to be evidenced through case audits	Recording rates are over 90% There is evidence in audits that	Green

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impact of ethnicity, cultural, linguistic and religious needs which means that for some children their needs are not fully identified or met.	assessments so as to inform planning		changing needs					culture and language are taken into account in individual cases	
The time taken to complete assessments remains below that of statistical neighbours	Ensure the timely completion and review of assessments to ensure that children and young people are receiving the appropriate level of services when they need them	Management processes have been tightened up to ensure that assessments have been completed before transfer or closure. Performance against this indicator was 66% in December 2013, compared with 58% during the Ofsted inspection. Poor performance early in the year means that the year to date figure is 48%. Pod managers are now monitoring progress via the Digital Dashboard on a regular basis.	Continued management prioritisation to ensure that good progress is maintained and the target of 90% timeliness is met	Kathy Bundred (Head of Children's Services)	Ongoing	In order to address this action all out of date assessments along with the associated management processes had to be reviewed. This was not achievable within the timescale set by Ofsted.	90% of core assessments completed within the required timescales	66% of core assessments completed within the required timescales ¹	Amber
The limited capacity of the electronic system as it is rolled out is hindering electronic production of chronologies on case records	Ensure chronologies are clear, recorded and fit for purpose	Chronologies in child protection and in care proceedings are of a good quality and meet this standard but other child in need cases do not. The CCM system has a chronology tool and staff and manager training in the use of this is in place.	Undertake management sampling to establish a baseline for child in need chronologies and set improvement targets System programming to be re-written to ensure that all chronologies are fit for purpose	Kathy Bundred (Head of Children's Services)	December 2013 May 2014	System re-programming needs to be undertaken in order to implement this action fully.	To be assessed through case audits	Chronologies in child protection and in care proceedings are of a good quality and meet this standard but other child in need cases do not.	Amber
Actions to be completed within three months (July 2013)									
There has been insufficient scrutiny of the newly formed MASH and a delay in the evaluation of this service. As a result Members do not have a realistic understanding of current service delivery.	Undertake a detailed analysis and evaluation, following the implementation of the newly formed MASH, to formally consider any early lessons to define the service and forward plan	MASH review has been completed	MASH evaluation to be circulated to O&S Committee Members once signed off by the HSCB. MASH steering group to monitor implementation of recommendations	Kathy Bundred (Head of Children's Services)	February 2014 Ongoing	Need for MASH to be fully operational for at least a year before a meaningful evaluation could be carried out	Evaluation completed	Evaluation completed	Green

¹ Performance figure relates to December 2013

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The embedding of the CAF remains an area for development. Progress in this area has been slow and an initial improvement in the number and quality of CAFs being completed by partners, partly as a result of the delivery of training, has not been sustained. The tracking and monitoring of CAF implementation is still at a very basic level as evidenced by a rudimentary approach to quality assurance.	Ensure that the Common Assessment Framework (CAF) is sufficiently embedded in the reconfigured early help services within a required time frame and that this is evaluated by the HSCB	LBH has replaced the CAF with an early help assessment which is now in place. Extensive training has been undertaken with key agencies in the use of the new assessment.	Service restructure to bring together an integrated borough wide service will be consulted on with staff and trade unions in January and February with a view to implementing in March 2014	Kathy Bundred (Head of Children's Services)	March 2014	Restructure of the early help service needs to be completed before the assessment framework can be embedded within the reconfigured service	<p>% of contacts received in Triage / MASH that progress to CAF / Early Help Assessment</p> <p>No. of assessments completed by partner agencies</p> <p>Participation in assessment training</p> <p>Quality of assessments (to be assessed through case audits)</p>	<p>YTD = 1.4%²</p> <p>69 Early Help Assessments completed from September to November 2013</p> <p>82 staff trained with plans to train up to 60 more by the end of March 2014.</p> <p>31 cases held in the Early Help Service audited this year. 3% (1) inadequate 24% (8) required improvement 74% (23) rated as good</p>	Green
There are still too many inappropriate referrals. In the absence of a comprehensive analysis of contacts and referral activity, the local authority's efforts to influence and change partners' practice are not sufficiently targeted.	Record and analyse contact, referral and re-referral patterns in order to be better able to evaluate how effectively children's social care and its partners are applying the threshold criteria, meeting needs and reducing risks	<p>Regular reporting of contact patterns by agency had been in place since April 2013.</p> <p>We are currently on track to receive fewer contacts through Triage / MASH this year than in the previous two years, with a lower percentage progressing on to become referrals to social care (13%, compared with 31% in 2011/12 and 26% in 2012/13), indicating that the MASH is effectively triaging away from Social Care cases</p>		Kathy Bundred (Head of Children's Services)	April 2013	N/A	<p>No. of contacts received in Triage / MASH</p> <p>% of contacts that became referrals to social care</p> <p>% referrals to Social Care becoming assessments</p> <p>% of total referrals to social care re-referred within a year</p>	<p>YTD = 5,935³</p> <p>YTD = 13%⁴</p> <p>YTD = 90%⁵</p> <p>YTD = 10%⁶</p>	Green

² Correct as at end December 2013

³ Correct as at end December 2013

⁴ Correct as at end December 2013

⁵ Correct as at end December 2013

⁶ Correct as at end December 2013

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		<p>that do not meet the threshold. Moreover, the % of referrals to Social Care that progress to assessments has increased significantly, to 90% for the year to date from 41% in 2012/13 and 31% in 2011/12. Again, this indicates that those referrals that are going through to Social Care are appropriate.</p> <p>Data quality issues around % of referrals progressing on to assessments and % of total referrals to social care being re-referred within a year have now been addressed and have revealed that the rate of re-referrals to Social Care within a year has fallen considerably for the year to date (to 10% from 26% in 2012/13)</p>							
<p>Arrangements to collate and analyse performance management data are not sufficiently robust. The way in which information is presented in the monthly children's social care performance monitoring report is presented makes it difficult to readily identify key issues. The report does not sufficiently set targets, include information about trends and projected outturns or provide a coherent commentary. The report is also not broken down to team and "pod" level. This limits its functionality</p>	<p>Review and refine the performance management framework to include key indicators, including measures that are currently missing, as well as comparative data, trend information and projections, with commentary and key information broken down to team or pod level</p>	<p>Framework, PIs and measures have been refined throughout the year in line with Ofsted requirements. Measures are now more closely linked to target outcomes and some trend and projection data has been included in performance reports.</p> <p>The performance management data set that is reported to senior managers and to the Child Safety Performance Board now includes information about the timeliness of initial child protection conferences, children and young people who come off a child</p>	<p>Need to start recording and analysing the number of duration CIN and Early Help Plans, broken down by team or pod level, alongside Child Protection Plans. This is to commence as part of the new performance reporting cycle in January 2014.</p> <p>Has been agreed that performance reports will now go to the Quality and Effectiveness Subgroup of the</p>	<p>Kathy Bundred (Head of Children's Services)</p> <p>Pippa Brent-Isherwood (Head of Business and Performance)</p>	<p>January 2014</p> <p>May 2014</p>	<p>Delay caused by data quality issues that have now been resolved. Action now on target to be implemented in February 2014</p>	<p>PMF to include:</p> <p>% of Initial Child Protection Conferences held within 15 days of the decision to go to conference</p> <p>% of CPPs ending that were in place for < 3 months</p> <p>% of CPPs ending that were in place for 12 months – 2 years</p> <p>% of total referrals to social care re-referred within a year</p> <p>Data broken down to team</p>	<p>YTD = 66%⁷</p> <p>YTD = 23%⁸</p> <p>YTD = 47%⁹</p> <p>YTD = 10%¹⁰</p>	Amber

⁷ Correct as at end December 2013

⁸ Correct as at end December 2013

⁹ Correct as at end December 2013

¹⁰ Correct as at end December 2013

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as an effective strategic and operational management tool. The performance management data set that is reported to senior managers and to the Child Safety Performance Board is incomplete in that it does not include information about the timeliness of initial child protection conferences, children and young people who come off a child protection plan and re-referrals within 12 months. Consequently the level of scrutiny by children's social care and the HSCB is not sufficiently robust.		<p>protection plan and re-referrals within 12 months.</p> <p>For the year to date, 24% of CPPs ended had been in place for less than three months, compared with 22% last year and 15% the previous year.</p> <p>Pod leaders now have access to digital dashboards to enable them to monitor their own teams' performance but there is outstanding work to do to develop the relationship and connections between central / whole service reporting and individual team level reporting.</p> <p>Data quality issues around % of total referrals to social care being re-referred within a year have now been resolved and has revealed that the rate of re-referrals to social care within a year has reduced significantly, to 10% for the year to date from 26% last financial year.</p>	LSCB in May and November each year, and then on to the Board in June and December.				/ pod level		
Underpinning some of the areas for development within the service is the absence of a comprehensive performance management framework that facilitates understanding and robust challenge of the quality of child protection arrangements	Ensure the collation and analysis of performance management information to effectively interpret and monitor the quality and impact of all aspects of child protection practice and processes, and the effectiveness of help and support for children in need	<p>There has been considerable work done to improve our understanding of child protection performance, including an audit of all child protection plans ceased within 3 months and an audit of step down plans from child protection to child in need. However there is more work to do specifically in respect of children in need planning.</p> <p>For the year to date, an average of 118 LBH children</p>	<p>Complete work underway through the Quality Assurance Group to establish if children are being "de-planned" too early</p> <p>No. and duration of CIN and Early Help Plans to be collated and analysed as part of the new performance reporting cycle</p>	<p>Kathy Bundred (Head of Children's Services)</p> <p>Pippa Brent-Isherwood (Head of Business and Performance)</p>	<p>January 2014</p> <p>January 2014</p>	<p>N/A</p> <p>Delayed due to data quality issues that have now been resolved. Action now due to be implemented Feb 2014</p>	<p>Audit complete and findings acted on</p> <p>% of total referrals to social care that are re-referred within a year</p> <p>No. of LBH children on a Child Protection Plan (average per month)</p> <p><=4% CPPs last 2 or more years</p> <p><=4% of children</p>	<p>Audit completed</p> <p>YTD = 10%¹¹</p> <p>YTD = 118¹²</p> <p>YTD = 6.3%¹³</p>	Amber

¹¹ Correct as at end December 2013

¹² Correct as at end December 2013

¹³ Correct as at end December 2013

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		<p>have been subject to a Child Protection Plan in any given month, which is lower than last year (126) but higher than the previous year (97).</p> <p>A slightly higher percentage of Child Protection Plans are ending within 3 months compared with previous years (25% for the year to date compared with 22% last year and 15% the previous year).</p> <p>The target for % of children becoming the subject of a Child Protection Plan for a second or subsequent time within two years is currently being met.</p> <p>The % of children becoming the subject of a Child Protection Plan for a second / subsequent time within 2 years is exceeding the target, however this is largely due to the presence of two sibling groups within the monitoring figures. Performance against this target is better than both at the same point last year and also month-on-month.</p>	<p>commencing in January</p> <p>Children in need audit to be undertaken.</p>		February 2014	Progress has been delayed by staff turnover issues, which are being addressed through other actions detailed within this action plan.	becoming the subject of a CPP for a second / subsequent time within two years	YTD = 4% ¹⁴	
Governance and scrutiny of child protection arrangements and the provision of early help are not facilitating robust challenge. The HSCB is not providing full evaluation of the effectiveness of safeguarding and is not fully constituted. There is currently no representation from the voluntary sector and only	Review the functioning and membership of the London Borough of Havering Safeguarding Children Board (HSCB) to ensure that it is fully constituted and provides sufficient scrutiny and oversight of the effectiveness of child protection practice	<p>Review of the HSCB was completed in October 2013.</p> <p>All member organisations were contacted in Quarter 3 of 2013/14 to ensure that their nominated representative was the most appropriate contact for the Board.</p> <p>LSCB currently receives child protection statistics. Initial meeting has taken</p>	Has been agreed that performance reports will now go to the Quality and Effectiveness Subgroup in May and November each year, and then on to the Board in June and December.	<p>Kathy Bundred (Head of Children's Services)</p> <p>Pippa Brent-Isherwood (Head of Business and Performance)</p>	May 2014	The timescales required to identify and appoint a new chair exceeded the timescales prescribed by Ofsted	<p>Representation on the HSCB secured from the voluntary sector</p> <p>Increased number of lay members represented on the HSCB</p> <p>HSCB fully constituted</p>	The HSCB is fully constituted and the constitution provides for two lay members and the Children's Society and f HAVCO to be active participants at the Board	Green

¹⁴ Correct as at end October 2013

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one lay member to provide independence from statutory agencies.	and the effectiveness of arrangements for children in need	place with the Chair of the HSCB to review and agree future performance reporting arrangements. Health partners have agreed to provide their safeguarding dashboards on a quarterly basis					Performance reporting cycle and content agreed and in place	Due to commence May 2014	
The Chair of Scrutiny has no formal link with the Chair of the HSCB	Review the governance responsibilities and accountabilities to ensure that there is communication and a formal link between HSCB and the Chair of the Children's Overview and Scrutiny Committee	This action was completed in October 2013. O&S now receives reports from the HSCB and the HSCB Chair will attend O&S twice a year. Chair of the HSCB attended O&S in January 2013.	Chair of the HSCB to attend O&S again in June / July to present the Board's annual report	Kathy Bundred (Head of Children's Services)	Ongoing	The timescales required to identify and appoint a new chair exceeded the timescales prescribed by Ofsted	Review complete. Formal link in place	Action complete Action complete	Green
Because of the delays in commissioning, and rolling out, an electronic recording system, managers and staff are having to navigate between one live and two "read only" systems in a way that is extremely time-consuming. Operational managers are unable to use information effectively because of the limited capacity of the electronic system as it is rolled out.	Complete the roll out of the Children's Case Management system (CCM) in order to ensure that managers and staff have the tools to do their job properly	CCM has been rolled out to all staff and managers in Social Care as well as to the Children's Centres and Early Help services. There are 344 users, many of whom use the system daily. 31 out of 42 change requests from service users have now been completed ¹⁵ . In addition, 29 of 31 requested priority reports have now been developed and released from the Digital Dashboard. 62 users have been set up on the Digital Dashboard, however to date 19 (31%) of these have never logged on ¹⁶ . New MASH CCM module was implemented in December 2013.		Kathy Bundred (Head of Children's Services) Jan Fenn (Performance and Systems Manager)	December 2013	Some difficulty acquiring the required functionality. Capacity within IT to support this was reduced by the planned implementation of One Oracle in December 2013	No. of CCM users set up No. of users using CCM daily No. of Digital dashboard users set up	344 ¹⁷ 100 – 150 per day ¹⁸ 62 ¹⁹	Green
The 2012/13 service plan does not align	Complete the overarching service	Service plan for 2013/14 is in place and incorporates the	Service Plan for 2014/15 to be	Kathy	April 2013	N/A	Service Plan in place	Service plan for 2013/14 is in	Green

¹⁵ Correct as at February 2014

¹⁶ Correct as at February 2014

¹⁷ Correct as at February 2014

¹⁸ Correct as at February 2014

¹⁹ Correct as at February 2014

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transformation plans with plans for improving the quality of services. The service plan does not sufficiently incorporate all the core work streams in a joined-up and overarching plan for delivery. This results in fragmentation for monitoring, review and evaluation purposes. There are currently no detailed operational plans for the delivery of objectives and as a result staff understanding of the journey ahead is inconsistent.	plan for delivering against the corporate and strategic priorities for children's services and make clear through aligned operational plans the journey ahead for staff, Members and partners	improvements required by Ofsted. Progress is monitored regularly via directorate management team meetings. Operational service plans in the social work service and the safeguarding unit are aligned with the overarching service plan	drafted. Service Plan for 2014/15 to be finalised	Bundred (Head of Children's Services)			Operational plans for the delivery of specific objectives in place	place Operational service plans in the social work service and the safeguarding unit are aligned with the overarching service plan	
Despite previous inspection recommendations, the EDT continues to provide an emergency only social work service for children and adult services across Havering and Barking and Dagenham at evenings and weekends with minimum staffing.	Complete the proposed re-commissioning of the proposed Emergency Duty Team (EDT) with minimum delay and as part of that process set clear and unambiguous performance and quality standards for the new service	The new service has been agreed across the four partner boroughs (Havering; Barking and Dagenham; Redbridge and Waltham Forest). The Lead Members and / or Cabinets for each of the authorities have agreed that Redbridge will operate the EDT for the 4 boroughs. Redbridge has produced a project plan for Children's services which is on target.	TUPE issues to be resolved. Procedures to be agreed	Kathy Bundred (Head of Children's Services)	April 2014	Timescales for the re-commissioning process have had to be agreed and aligned with those of the other local authorities that LBH is jointly commissioning with	New service in place	The new service has been agreed across the four partner boroughs and progress against the agreed project plan is on target	Green
The workforce strategy is not translated into a coherent action plan in line with the transformation of services	Ensure the development of a workforce action plan in line with the transformation agenda and workforce strategy that can be monitored, reviewed and evaluated	Consultants have been commissioned and fieldwork has begun to develop a workforce action plan. At the same time, an HR consultant is working with Children's Social Care to improve social worker recruitment and retention. LBH social work jobs have recently been advertised at the Compass Jobs Fair on 28 November 2013 and the Council has commissioned a	Social Worker recruitment and retention package to be agreed Recruit consultant to develop a Workforce Development Strategy and action plan across Children's and Adults' Social Care	Pippa Brent-Isherwood (Head of Business and Performance) Kathy Bundred (Head of Children's Services) Barbara Nicholls (Head of Adult	January 2014 March 2014	Delayed by the need to recruit additional capacity to take this forward.	Workforce Development Strategy and associated action plan in place. Social worker vacancy rate	Due March 2014 YTD = 31% ²⁰	Amber

²⁰ Correct as at end December 2013

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		microsite to make its advertising more attractive.		Social Care)					
Actions to be completed within six months (October 2013)									
The quality of supervision is variable and is not providing consistent evidence of reflective practice	Continue to develop and adopt a more consistent approach to supervision in order to ensure that it provides the right level of critical challenge and opportunity for reflection and is a vehicle for driving up practice standards	The quality of supervision observed during the Ofsted inspection ranged from adequate to good. Since the inspection, the Supervision Policy has been refreshed to reflect the inspection findings and a revised template is now in use. Action plan is now in draft form but has not yet been finalised. This will now be picked up within the wider workforce development work due to conclude by March 2014. Mentoring of line managers to improve supervision so that it reaches a "good" standard across the board is now in place.		Carol Carruthers (Service Manager, Children's Services)	March 2014	Delayed by management turnover. Now that there is a permanent management team in place we have a strong foundation on which to ensure consistency throughout the service going forward.	All supervision reaches the "good" standard (to be assessed through quality checks by management)	Current quality checks by management on supervision show improvements but these are not yet consistent across the board	Amber
Plans are not consistently coherent and all too often focus on the tasks that need to be completed and services provided rather than what needs to change for the child. The extent to which they are measurable is limited in most cases.	Develop a more robust approach to quality assurance in order to be able to track qualitative improvements over time, for example the percentage of child protection plans that are outcome focused and / or measurable	The audit framework has developed considerably since the inspection and is now being used to track qualitative improvements. This is most evident in child protection work. Evaluation work around Family Group Conferences is outcomes focused and demonstrates that, for the year to date, 93% of children achieve a positive outcome 6 months after an FGC. The rate of proven re-offending by young offenders is currently lower than the outturn for last year,	YOS audit (against a baseline set before the launch of the new joint service with Barking and Dagenham) Phase 2 LAC project focusing on improvements in educational and health outcomes CIN audit	Kathy Bundred (Head of Children's Services)	December 2013 January 2014 February 2014	Progress has been delayed by staff turnover issues, which are being addressed through other actions detailed within this action plan.	>=85% children achieve a positive outcome 6 months after Family Group Conference Rate of proven re-offending by young offenders >=80% young offenders are engaged in suitable education, employment or training at the end of the order % of Child Protection Plans ending within 3 months % of Child Protection Plans ending that were in	YTD = 93% ²¹ 30.8% ²² YTD = 69% ²³ YTD = 24% ²⁴ YTD = 47% ²⁵	Amber

²¹ Correct as at end December 2013

²² Correct as at September 2012

²³ Correct as at end December 2013

²⁴ Correct as at end December 2013

²⁵ Correct as at end December 2013

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		Young offenders' engagement in suitable education, employment or training is improving month on month but below target for the year.					place for 12 months – 2 years Completion of the planned CIN audit	Due to be completed Feb 2014	
Advocacy arrangements for children subject to child protection processes are not yet available although plans are in place for this to be delivered. Last year [2011/12] only seven children aged 12 or over attended a child protection conference in Havering,	Ensure work is progressed to enable children and young people to access advocacy services which support them to attend child protection conferences	Contract with the Children's Society has been in place since September 2013. The number of referrals for Children's Advocacy has increased each quarter this financial year. Only 1 case has not been taken forward following assessment, due to non-response. So far this year, 100% of Looked After Children who have had a LAC Review have been supported by a Children's Society advocate	NFA	NFA	NFA	N/A	No. of referrals for Children's Advocacy No. of referrals assessed and taken forward as new advocacy cases % of Looked After Children who have had a LAC Review who have been supported by a Children's Society advocate The number of children with a Child Protection Plan whose views are relayed to Conference by The Children's Society % of Looked After Children and children with Protection plans receiving advocacy reporting that they feel their wishes and views are being taken into account in relation to care planning	16 ²⁶ 15 ²⁷ 100% ²⁸ 9 ²⁹ 88% ³⁰	Green
Increasingly, children and families' views and feedback are sought on their experiences of early intervention and statutory interventions, although the overall impact on service delivery is currently limited. Feedback from children and families to improve service delivery is	Ensure the views, experiences and feedback from children, young people, parents and carers are used to plan and improve service delivery. This includes implementing a system for the	There has been a great deal of continuing improvement in this area at all levels including the introduction of Viewpoint; the involvement of Members in Total Respect training; visits to young people and consultation events. However there is not yet consistent evidence that feedback is informing service	Phase 2 LAC project to consider how to ensure improved user consultation and feedback directly impacts on service delivery and development. Audits already include service user	Kathy Bundred (Head of Children's Services)	January 2014 Ongoing	The months since the Ofsted inspection have focused on gathering service user feedback, which is now being used to inform the	100% of LAC contribute their views to a statutory review	YTD = 99% ³¹	Amber

²⁶ Correct as at end of Quarter 3 2013/14

²⁷ Correct as at end of Quarter 3 2013/14

²⁸ Correct as at end of Quarter 3 2013/14

²⁹ Correct as at end of Quarter 3 2013/14

³⁰ Correct as at end of Quarter 3 2013/14

³¹ Correct as at end December 2013

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not yet fully embedded	analysis of service user feedback in early help and preventative services	<p>delivery.</p> <p>Of the 310 LAC aged 4 or over that had a statutory review between 1 April and 31 December 2013, 308 communicated their views using a range of mechanisms including personal participation, written or electronic communication or independent representation.</p> <p>Early help services undertake a great deal of service user feedback but this is not yet systematised</p>	feedback but this will continue to be developed			service planning process for 2014/15.			